FLORIDA DEPARTMENT OF EDUCATION
fldoe.org

2022-23 Mental Health Application

Part I: Youth Mental Health Awareness Training Plan

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Introduction

The purpose of the combined mental health application is to streamline and merge two programs into one application. The Youth Mental Health Awareness Training (YMHAT) Plan and the Mental Health Assistance Allocation (MHAA) Plan are to provide supplemental funding to districts so schools can establish, expand and/or improve mental health care, awareness and training and offer a continuum of services. These allocations are appropriated annually to serve students and families through resources designed to foster quality mentalhealth. This application is separated into two primary sections: Part II includes the YMHAT Plan and Part III includes the MHAA Plan.

Part I. Mental Health Assistance Allocation Plan

In accordance with s. 1011.62, F.S., the MHAA Plan allocation is to assist districts with establishing or expanding school-based mental health care; training educators and other school staff in detecting and responding to mental health issues; and connecting children, youth and families who may experience behavioral health issues with appropriate services.

Submission Process and Deadline

The application must be submitted to the Florida Department of Education (FDOE) by August 1, 2022.

There are two submission options for charter schools (MHAA Plan Only):

- Option 1: District submission includes charter schools in their application.
- Option 2: Charter school(s) submit a separate application from the district.

Part I: Mental Health Assistance Allocation Plan

s. 1011.62, F.S.

MHAA Plan Assurances

The Charter School Assurances

One hundred percent of the state funded proportionate share is used to expand school-based mental health care; train educators and other school staff in detecting and responding to mental health issues; and connect children, youth and families with appropriate behavioral health services.

Yes

Mental health assistance allocation funds do not supplant other funding sources or increase salaries or provide staff bonuses or incentives.

Yes

Maximizing the use of other sources of funding to provide school-based mental health services (e.g., Medicaid reimbursement, third-party payments and grants).

Yes

Collaboration with FDOE to disseminate mental health information and resources to students and families.

Yes

Includes a system for tracking the number of students at high risk for mental health or co-occurring substance use disorders who received mental health screenings or assessments; the number of students referred to school-based mental health services providers; the number of students referred to community-based mental health services providers; the number of students who received school-based interventions, services or assistance; and the number of students who received community-based interventions, services or assistance.

Yes

A Charter school board policy or procedures has been established for

Students referred to a school-based or community-based mental health services provider, for mental health screening for the identification of mental health concerns and students at risk for mental health disorders are assessed within 15 calendar days of referral.

Yes

School-based mental health services are initiated within 15 calendar days of identification and assessment.

Yes

Community-based mental health services are initiated within 30 calendar days of referral.

Yes

Individuals living in a household with a student receiving services are provided information about behavioral health services through other delivery systems or payors for which such individuals may qualify if such services appear to be needed or enhancements in those individuals' behavioral health would contribute to the improved well-being of the student.

Yes

District schools and local mobile response teams use the same suicide screening instrument approved by FDOE pursuant to s. 1012.583, F.S., and Rule 6A-40010, Florida Administrative Code.

Yes

Assisting a mental health services provider or a behavioral health provider as described in s. 1011.62, F.S., respectively, or a school resource officer or school safety officer who has completed mental health crisis intervention training in attempting to verbally de-escalate a student's crisis situation before initiating an involuntary examination pursuant to s. 394.463, F.S. Such procedures must include strategies to de-escalate a crisis situation for a student with a developmental disability as that term is defined in s. 393.063, F.S.

Yes

The requirement that in a student crisis situation, the school or law enforcement personnel must make a reasonable attempt to contact a mental health professional who may initiate an involuntary examination pursuant to s. 394.463, F.S., unless the child poses an imminent danger to self or others before initiating an involuntary examination pursuant to s. 394.463, F.S. Such contact may be in person or using telehealth, as defined in s. 456.47, F.S. The mental health professional may be available to the school district either by contracts or interagency agreements with the managing entity, one or more local community behavioral health providers, or the local mobile response team, or be a direct or contracted school district employee. Note: All initiated involuntary examinations located on school grounds, on school transportation or at a school sponsored activity must be documented in the Involuntary Examinations and Restraint and Seclusion (IERS) platform.

Yes

Parents of students receiving services are provided information about other behavioral health services available through the student's school or local community-based behavioral health service providers. Schools may meet this requirement by providing information about and internet addresses for web-based directories or guides for local behavioral health services.

Yes

Planned Outcomes

Identify two specific and measurable goals that will be accomplished within the 2022-23 school year, and specify which component of Charter Assurance 1.a. directs that goal (refer to the Guidance Tab if needed).

By Fall 2022, TSMA will train staff on the evidence-based Program 7 Mindsets that will meet the needs of the TSMA students, as well as, begin implementation of this program.

*We will continue to utilize our MTSS process with evidence-based SEL (Tiers 1 & 2) and evidence-based therapies (CBT and Brief Solution Focused Therapy (Tiers 2 & 3) while we are working towards our goals.

Charter Program Implementation

Evidence-Based Program	7 Mindsets
Tiers of Implementation	Tier 1, Tier 2

Describe the key EBP components that will be implemented as well as any related activities, curricula, programs, services, policies and strategies.

7 Mindsets is an All-In-One SEL solution. The curriculum is for grades PreK-12. The 7 Mindsets solution is evidence based and has been assessed for impact on student achievement, behavior, and attendance, as well as resilience, grit, and life orientation (attitude). The 7 Mindsets are designed to promote self-awareness, self management, social awareness, relationship skills, and responsible decision making.It ignites a proactive, fundamental shift in a young person's social emotional learning that increases self-determination, academic performance, and resilience.

Explain how your district will implement evidence-based mental health services for students to improve the early identification of social, emotional, behavioral problems or substance use disorders, as well as the likelihood of at-risk students developing social, emotional, behavioral problems, depression, anxiety disorders, suicidal tendencies, and how these will assist students dealing with trauma and violence.

Teachers, School Counselors, Student Success Specialists and/or Mental Health Coordinators will teach the 30-minute sessions that are age-appropriate materials.
Students will be encouraged to participate during the lessons through activities within the program.

Explain how the supports will deliver evidence-based mental health care assessment, diagnosis, intervention, treatment, and recovery services to students with one or more mental health or co-occurring substance abuse diagnoses and to students at high risk of such diagnoses.

Using this evidence-based program, creates a culture where students thrive, teachers succeed, and leaders guide a positive and engaged school community. Students can increase self-determination and self-awareness; improve behavior, test scores and graduation rates; greater confidence and engagement. Students as well as teachers and administrators experience the benefits to the overall school climate. ignites a proactive, fundamental shift in a young person's social emotional learning that increases self-determination, academic performance and resilience.

Evidence-Based Program	Cognitive Behavior Therapy (CBT)
Tiers of Implementation	Tier 2, Tier 3

Describe the key EBP components that will be implemented as well as any related activities, curricula, programs, services, policies and strategies.

Cognitive behavior therapy is a psychotherapy that is effective for a variety of diagnoses including depression, anxiety, substance abuse and co-occurring disorders. CBT focuses on feelings, thoughts, and behaviors by challenging negative thoughts or beliefs, changing destructive behavior patterns, and focusing on solutions. It is appropriate for children and adolescents.

Explain how your district will implement evidence-based mental health services for students to improve the early identification of social, emotional, behavioral problems or substance use disorders, as well as the likelihood of at-risk students developing social, emotional, behavioral problems, depression, anxiety disorders, suicidal tendencies, and how these will assist students dealing with trauma and violence.

As students are referred to the Licensed Mental Health Counselor and/or Mental Health Coordinators through the MTSS process, as well as the referral form completed and signed by the parent(s); individual counseling can be provided utilizing the evidence-based therapy. The number of sessions and frequency will vary per student and severity of concerns. Sessions will be 20-30mins during the school day. There are multiple techniques that can be applied such as play therapy, modeling, role playing, restructuring and exposure. Student will be encouraged to actively participate in each session and with goal setting.

Explain how the supports will deliver evidence-based mental health care assessment, diagnosis, intervention, treatment, and recovery services to students with one or more mental health or co-occurring substance abuse diagnoses and to students at high risk of such diagnoses.

Engaging with CBT can help students reduce stress, cope with complex relationships, deal with grief, and face many other common life challenges. It gives them tangible ways to take control and empower themselves. CBT can also help students control self-defeating thoughts and can engage them in new coping skills.

Evidence-Based Program	Solution-Focused Brief Therapy (SFBT)
Tiers of Implementation	Tier 2, Tier 3

Describe the key EBP components that will be implemented as well as any related activities, curricula, programs, services, policies and strategies.

SFBT is a short-term, solution-focused treatment appropriate for all ages. The focus is on creating goals and a vision for the future, then identifying the necessary skills, abilities, and resources to meet these goals.

Explain how your district will implement evidence-based mental health services for students to improve the early identification of social, emotional, behavioral problems or substance use disorders, as well as the likelihood of at-risk students developing social, emotional, behavioral problems, depression, anxiety disorders, suicidal tendencies, and how these will assist students dealing with trauma and violence.

As students are referred to the Licensed Mental Health Counselor and/or Mental Health Coordinators through the MTSS process, as well as the referral form completed and signed by the parent(s); individual counseling can be provided utilizing the evidence-based therapy. The number of sessions and frequency will vary per student and severity of concerns. Sessions will be 20-30mins during the school day. The student will be encouraged to actively participate in each session and with setting goals. A variety of techniques can be employed, i.e., specific questions that encourage the student to focus on the present with coping skills they already possess. The focus is on what they can change and control.

Explain how the supports will deliver evidence-based mental health care assessment, diagnosis, intervention, treatment, and recovery services to students with one or more mental health or co-occurring substance abuse diagnoses and to students at high risk of such diagnoses.

This type of therapy emphasizes the skills, strengths, and abilities that students already have and focus on a solution in the present and/or for the future, rather than the problem and/or the past.

Evidence-Based Program	
Tiers of Implementation	[none selected]

Describe the key EBP components that will be implemented as well as any related activities, curricula, programs, services, policies and strategies.

Explain how your district will implement evidence-based mental health services for students to improve the early identification of social, emotional, behavioral problems or substance use disorders, as well as the likelihood of at-risk students developing social, emotional, behavioral problems, depression, anxiety disorders, suicidal tendencies, and how these will assist students dealing with trauma and violence.

Explain how the supports will deliver evidence-based mental health care assessment, diagnosis, intervention, treatment, and recovery services to students with one or more mental health or co-occurring substance abuse diagnoses and to students at high risk of such diagnoses.

Evidence-Based Program	
Tiers of Implementation	[none selected]
Describe the key EBP components that will be implemented as well as any related activities, curricula, programs, services, policies and strategies.	
Explain how your district will implement evidence-based mental health services for students to improve the early identification of social, emotional, behavioral problems or substance use disorders, as well as the likelihood of at-risk students developing social, emotional, behavioral problems, depression, anxiety disorders, suicidal tendencies, and how these will assist students dealing with trauma and violence.	
Explain how the supports will deliver evidence-based mental health care assessment, diagnosis, intervention, treatment, and recovery services to students with one or more mental health or co-occurring substance abuse diagnoses and to students at high risk of such diagnoses.	

Evidence-Based Program	
Tiers of Implementation	[none selected]
Describe the key EBP components that will be implemented as well as any related activities, curricula, programs, services, policies and strategies.	
Explain how your district will implement evidence-based mental health services for students to improve the early identification of social, emotional, behavioral problems or substance use disorders, as well as the likelihood of at-risk students developing social, emotional, behavioral problems, depression, anxiety disorders, suicidal tendencies, and how these will assist students dealing with trauma and violence.	
Explain how the supports will deliver evidence-based mental health care assessment, diagnosis, intervention, treatment, and recovery services to students with one or more mental health or co-occurring substance abuse diagnoses and to students at high risk of such diagnoses.	

Direct Employment

MHAA Plan Direct Employment

School Counselor

Current Ratio as of August 1, 2022
1 assigned K-6th 2 assigned 7th-12th

2022-2023 proposed Ratio by June 30, 2023
Same

School Social Worker

Current Ratio as of August 1, 2022
N/A

2022-2023 proposed Ratio by June 30, 2023
N/A

School Psychologist

Current Ratio as of August 1, 2022
1 assigned to 2 campuses, 1 assigned to other campus

2022-2023 proposed Ratio by June 30, 2023
Same

Other Licensed Mental Health Provider

Current Ratio as of August 1, 2022
1 assigned to all 3 campuses

2022-2023 proposed Ratio by June 30, 2023
Same

Direct employment policy, roles and responsibilities

Explain how direct employment of school-based mental health services providers (school psychologists, school social workers, school counselors and other licensed mental health professionals) will reduce staff-to-student ratios.

Having a Licensed Mental Health Counselor on staff, reduces the time that other staff members spend with students at tier 2 & 3.

Describe your school's established policies and procedures to increase the amount of time student services personnel spend providing direct mental health services (e.g., review and revision of staffing allocations based on school or student mental health assistance needs).

Student Success Specialists have been employed at each campus, totaling 4, to work closely with our school counselors and the Licensed Mental Health Counselor.
Mental Health Coordinators have been employed at each campus, totaling 3, to work closely with our school counselors and the Licensed Mental Health Counselor.

Describe the role of school based mental health providers and community-based partners in the implementation of your evidence-based mental health program.

The school based mental health providers will be involved at all levels of the MTSS process and will assist in implementing the evidence-based SEL programs. As well as, conducting appropriate assessments and coordinating appropriate interventions at each tier. Community-based partners such as CAT teams/Crisis Mobile Units will assist at tier 3 as needed.

Community Contracts/Interagency Agreements

List the contracts or interagency agreements with local behavioral health providers or Community Action Team (CAT) services and specify the type of behavioral health services being provided on or off the school campus.

Crisis Response Team from Peace River Center provide Crisis Intervention & CAT Team services.
Counselors from the Bethany Center/Good Shepherd provide individual and group therapy.

MHAA Planned Funds and Expenditures

Allocation Funding Summary

MHAA funds provided in the 2022-2023 Florida Education Finance Program (FEFP)
$ 51,649.00

Unexpended MHAA funds from previous fiscal years as stated in your 2021-2022 MHAA Plan
$ 5,834.00

Grand Total MHAA Funds

$ 57,483.00

MHAA planned Funds and Expenditures Form

Please complete the MHAA planned Funds and Expenditures Form to verify the use of funds in accordance with (s.) 1011.62 Florida Statues.

The allocated funds may not supplant funds that are provided for this purpose from other operating funds and may not be used to increase salaries or provide bonuses. School districts are encouraged to maximize third-party health insurance benefits and Medicaid claiming for services, where appropriate.

The following documents were submitted as evidence for this section:

FY23_MHAA_SMA.pdf
MHAA FY23 SMA
Document Link

Charter Governing Board Approval

This application certifies that the **Polk County Public Schools** governing board has approved the Mental Health Assistance Allocation Plan, which outlines the local program and planned expenditures to establish or expand school-based mental health care consistent with the statutory requirements for the mental health assistance allocation in accordance with section 1011.62(14), F.S.

Governing Board Approval date

Friday 7/22/2022