



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).

 Innovations Charter School of West Orlando will reduce the number of students with delinquent and disruptive behavior by 20% throughout the course of the academic year 2022-2023.
Innovations Charter School of West Orlando will reduce the number of students with anxious or avoidant behaviors by 20% throughout the course of the academic year 2022-2023.

Charter Assurance complies with Mental Health assistance allocation in accordance with section1011.62 (16) F.S.

Charter Program Implementation

Evidence-Based Program	Evidence- Based group and individual therapy sessions
Tier(s) of Implementation	Tier 2, Tier 3
Describe	e the key EBP components that will be implemented.
	s school based therapists and counselors on site who will administer 1 hour dents during the school day to those students identified as students in need
PBIS tracking and Ripple Effec based curriculum and intervent	ts SEL software used for direct identification, data tracking, evidence tional support.
the early identification of social the likelihood of at risk student	implement evidence-based mental health services for students to improve I, emotional, or behavioral problems or substance use disorders, as well as ts developing social emotional or behavioral problems, depression, anxiety cies, and how these will assist students dealing with trauma and violence.
services at the school to assist system. This measure will providentifying those students in ne interventions everyday. Studen through individual and small gro The group environment will pro and receive feedback in a safe curriculum will be reviewed by s	s a mental health professional in charge of managing the mental health in reduction of the disruptive behaviors exhibited through our PBIS ride the students with a professional health care worker who will assist in eed and providing those students with appropriate and immediate its will learn to cope with stress and impulsiveness in a variety of situations oup therapy. ovide students with an opportunity to explore topics amongst their peers environment. Groups will be small and structured toward tailored topics, staff and parents for input and assistance toward growth goals. Topics will nats with games, stories, interactive role play software (Ripple Effects) and
school can provide will receive	s, any students identified as needing more intensive support than the a referral to an agency with resources to handle the students specific hours, in partnership with the school to provide consistent support to the ommunication.
intervention, treatment and rec	will deliver evidence-based mental health care assessment, diagnosis, covery services to students with one or more mental health or co-occurring se diagnoses and to students at high risk of such diagnoses.
collaboration of the outside age disruptive behaviors of our stud and learning, and these behavi	py offered by our in house mental health professionals, combined with the ency partnerships will help us achieve our goal to reduce delinquent or dents school wide. Delinquent and disruptive behaviors impede instruction iors in students must be identified to offer proper counseling. Behaviors authority figures, fighting, destroying property, disrupting the educational and intimidation.

Evidence-Based Program	Evidence- Based Individual and small group therapy sessions- Delinquent and disruptive behaviors
Tier(s) of Implementation	Tier 2, Tier 3
Describe	e the key EBP components that will be implemented.
sessions for the students. Indivi assist youth and their families. All group will be completed with	Vest Orlando will administer 1-hour group therapy idual sessions and parent education will be administered as necessary to These services will be available throughout the academic year. in school hours covering a range of topics from impact of behaviors to se topics and methods have been proven to be successful with students uptive behaviors.
the early identification of social the likelihood of at risk student	mplement evidence-based mental health services for students to improve , emotional, or behavioral problems or substance use disorders, as well as s developing social emotional or behavioral problems, depression, anxiety ies, and how these will assist students dealing with trauma and violence.
managing mental health service through our PBIS system. This health worker who will assist wi interventions every day. Studen through the group therapy. The topics amongst their peers and 10 students ages ranging from topics. The curriculum will be re	Vest Orlando will have an on-site mental health professional in charge of es that are administered to the students to reduce disruptive behaviors measure will provide the attending students with a professional mental th identifying students in need and providing students with appropriate its will learn to cope with stress and impulsiveness in a variety of situations group environment will provide the students with an opportunity to explore receive feedback in a safe environment. Groups will have a maximum of 11 to 16 and be structured to assist in facilitating new understanding of the eviewed with parents and the parent will receive information to help the topics. Topics will be presented in interactive formats with games, stories,
than Innovations Charter Schoo	rementioned, any students identified as needing more intensive support of of West Orlando can provide will receive a referral to an agency with the t's issues, and the school will work with that agency to provide consistent collaboration with the agency.
Ripple Effects SEL Software wi	Il be used for curriculum along with PBIS system fundamentals.
intervention, treatment and rec	will deliver evidence-based mental health care assessment, diagnosis, covery services to students with one or more mental health or co-occurring e diagnoses and to students at high risk of such diagnoses.
•	e delinquent or disruptive behaviors that impede learning. For example figures, fighting, destroying property, disrupting class, or any unique lisruptive behaviors.
-	e delinquent or disruptive by self-report, parent report, involvement in the efferrals from classroom teachers and observational data.

Evidence-Based Program	Evidence-Based Individual and small group therapy sessions- Reduction of anxious behaviors
Tier(s) of Implementation	Tier 2, Tier 3
Describe	e the key EBP components that will be implemented.
anxiety, and avoidant behaviors parent	West Orlando will administer 1 hour group therapy sessions to cover s. The school will also provide individual and group therapy and provide ary. These services will be administered over the course of the academic
methods and interventions have	ol hours covering several topics from substance abuse to motivation, these e been proven to be successful with youths experiencing anxiety and en impede academic and social success.
the early identification of social the likelihood of at risk student	mplement evidence-based mental health services for students to improve l, emotional, or behavioral problems or substance use disorders, as well as is developing social emotional or behavioral problems, depression, anxiety ies, and how these will assist students dealing with trauma and violence.
	West Orlando will have an on-site mental health professional in charge of es that are administered to the students to reduce anxious and avoidance stem.
with identifying students in need Students will learn to cope with group environment will provide receive feedback in a safe envi 11 to 16 and be structured to as	ttending students with a professional mental health worker who will assist d and providing students with appropriate interventions every day. stress and anxiety in a variety of situations through the group therapy. The the students with an opportunity to explore topics amongst their peers and ronment. Groups will have a maximum of 10 students ages ranging from ssist in facilitating new understanding of the topics. The curriculum will be parent will receive information to help the student in their growth for most
Topics will be presented in inte and PBIS fundamentals will be	ractive formats with games, stories, and group conversation. Ripple Effects used for curriculm.
than Innovations Charter Schoot the resources to handle the stu	rementioned, any students identified as needing more intensive support of of West Orlando is set to provide will receive a referral to an agency with dent's issues, and the school will work with that agency to provide nt through collaboration with the agency.
intervention, treatment and rec	will deliver evidence-based mental health care assessment, diagnosis, covery services to students with one or more mental health or co-occurring se diagnoses and to students at high risk of such diagnoses.
these type of behaviors range f	e anxious or avoidant behaviors in our students school wide. Examples of from panic or anxiety attacks, avoidance, acting out, expression of suicidal e with stress, students avoiding or "skipping" school due to anxiety

feelings of helplessness, or any unique behaviors that manifest in the students.

Student may be indicated to be anxious or avoidant by self-report, parent report, or exhibiting symptoms of anxiety.

Evidence-Based Program			
Tier(s) of Implementation	[none selected]		
Describe the key EBP components that will be implemented.			
Explain how your district will implement evidence-based mental health services for students to improve the early identification of social, emotional, or behavioral problems or substance use disorders, as well as the likelihood of at risk students developing social emotional or behavioral problems, depression, anxiety disorders or 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 **1:200**

2022-2023 proposed Ratio by June 30, 2023 1:200

School Social Worker

Current Ratio as of August 1, 2022 **0**

2022-2023 proposed Ratio by June 30, 2023 **1:200**

School Psychologist

Current Ratio as of August 1, 2022 **1:200**

2022-2023 proposed Ratio by June 30, 2023 **2:200**

Other Licensed Mental Health Provider

Current Ratio as of August 1, 2022 **1:200**

2022-2023 proposed Ratio by June 30, 2023

2:200

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.

The school mental health staff will be able to pull out and assist students in individual or small groups for services thus assisting in staff-student ratios. School based in house counselors will provide additional staff for school and student wellness.

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).

The school will constantly assess the effectiveness of the services rendered and the behavioral outcomes from the services rendered. Part of this process will involve looking at the total time allocation per staff member with a plan, do, study data plan.

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

The community based mental health provider and community-based partners will be utilized in addition to the services available in house. Any students that need more intensive interventions will be identified, and our in house mental health professional will work with outside agencies, parents and community support to develop a more comprehensive therapy and wellness plan per individual needs.

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.

Chrysalis Health- Provides Crisis management and counseling in house and after hours by referral. ProCare Therapy- Provides ABA Therapists and Counselors in house

MHAA Planned Funds and Expenditures

Allocation Funding Summary

MHAA funds provided in the 2022-2023 Florida Education Finance Program (FEFP) \$ 8,402.00

Unexpended MHAA funds from previous fiscal years as stated in your 2021-2022 MHAA Plan \$ 0.00

Grand Total MHAA Funds

\$ 8,402.00

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:

MHAA_Planned_Expenditures_Report_2022-2023_Innovations.pdf MHAA Budget Allocation Plan Doc Innovations Charter School Document Link

Charter Governing Board Approval

This application certifies that the **Orange 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 7/29/2022