



2023-24 Mental Health Application

Part I: Youth Mental Health Awareness Training Plan

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Introduction

Mental Health Assistance Allocation Plan

s. 1006.041, F.S.

MHAA Plan Assurances

The Charter School Assures

One hundred percent of state funds are used to establish or 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

Other sources of funding will be maximized-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

A system is included 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

Yes

Curriculum and materials purchased using MHAA funds have received a thorough review and all content is in compliance with State Board of Education Rules and Florida Statutes.

Yes

A charter governing board policy or procedure 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-4.0010, F.A.C.

Yes

Assisting a mental health services provider or a behavioral health provider as described ins. 1006.041, F.S., respectively, ora school resource officer or school safetyofficerwho 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 ins. 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 te lehealth, as defined ins. 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, 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

The Mental Health Assistance Allocation Plan must be focused on a multitiered system of supports to 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. s. 1006.041, F.S.

Yes

District Program Implementation

Evidence Read Brasser	Conford Hormony	
Evidence-Based Program	Sanford Harmony	
Tier(s) of Implementation	Tier 1, Tier 2	
Describe	e the key EBP components that will be implemented.	
program that cultivates strong c	ny Program in all grades K-5. This program is a social-emotional teaching lassroom relationships between all students. The Sanford Harmony dents to be tolerant, compassionate and caring adults in the future.	
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.	
teaching students how to build	ive and utilize the online supports offered by Sanford Harmony for strong relationships with peers. The program will help reduce stereotyping, ng. It teaches students how to resolve conflict by developing positive t will last a lifetime.	
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.		
Lessons will also be used in sm will be better equipped to recog occurring substance abuse diag	lement materials into regular instruction or as stand alone lessons. all group and one on one when needed. Through this curriculum, teachers nize warning signs of students with one or more mental health or co- gnoses and to students at high risk of such diagnoses. Teachers can refer	

the students to our mental health team for additional evaluation.

Evidence-Based Program	Behavior Education Program
Tier(s) of Implementation	Tier 2
Describe	the key EBP components that will be implemented.
monitoring for students who are at-risk for of check in/check-out system that increased	m (BEP) is a school-based program that provides daily support and developing serious or chronic behavior difficulties. It is based on a daily provides students with immediate feedback on his or her behavior and
positive adult attention. Behavio	oral expectations are clearly defined and students are given opportunities
immediate and delayed reinforc core principles of positive behave	ement, based on meeting the expectations. The BEP incorporates several vior support: clearly defined expectations; instruction on appropriate reinforcement for following expectations; contingent consequences for
-	nanagement; increased positive contact with adults at the school; and
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.
Education Program. Using a ch	I other instructional personnel will continue to be trained in the Behavior eck in/check out process, the Behavior Education Program is a Tier 2 tive interactions between students and teachers, and also includes a ng schools and home.
intervention, treatment and rec	vill deliver evidence-based mental health care assessment, diagnosis, overy services to students with one or more mental health or co-occurring e diagnoses and to students at high risk of such diagnoses.
specified to meet their individua	n the BEP will have daily expectations and planned reinforcers I needs. The students identified for the intervention check-in with) at the start of each school day, and check-out with the coordinator
expectations to be followed and specified blocks of time through	ovided with a Daily Progress Report (DPR) that lists the a place to rate student behavior. Teachers rate the student at out the day (e.g., each class period in secondary schools; each mentary schools, etc.), and provide corrective feedback and/or
each student has met their indiv	ay, the MHL totals the percentage of points earned to determine whether vidual goal. If the student meets their goal, they receive a reinforcer. to show to their parents and obtain a parent signature, and return it the in.

Evidence-Based Program	Functional Behavior Assessment and Behavior Intervention Plan (FUBA/BIP)
Tier(s) of Implementation	Tier 3
Describe	e the key EBP components that will be implemented.
consequences. The essential costatement describing the function	I behavior assessment are the antecedents, the behavior, and the omponents of a BIP are a detailed description of the behavior; summary on of the behavior; interventions used and their results; behavioral goals; g the new behavior, including a crisis intervention plan.
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.
	Fier 3 intensive support, Functional Behavior Assessments will be , by school teams in order to develop an individualized behavior plan of the student's behavior.
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.
emotional needs. Mental health	often members of the team, especially when the student has social/ professionals will consult with the school-based MTSS Coordinator if a am. If a student is in the ESE Program, they will consult with the ESE
Direct Employment	
MHAA Plan Direct Employn	nent
School Counselor	
Current Ratio as of Augus	t 1, 2023
2023-2024 proposed Ratio	o by June 30, 2024
School Social Worker	
Current Ratio as of Augus 1 to 295	t 1, 2023
2023-2024 proposed Ratio 1 to 295	o by June 30, 2024
School Psychologist	
Current Ratio as of Augus 1 to 295	t 1, 2023

2023-2024 proposed Ratio by June 30, 2024

1 to 295

Other Licensed Mental Health Provider

Current Ratio as of August 1, 2023 **2 t0 295**

2023-2024 proposed Ratio by June 30, 2024 **3 to 295**

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.

Direct employment of school-based mental health service providers will reduce the staff-to-student ratios by providing an additional educational provider in the classroom.

Describe your district'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).

Mental health providers are available to students and staff Monday-Friday during school hours. Students and staff can also meet with MHP after school hours on an appointment basis. Summer hours are also available when needed and set up directly with the MHP.

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

Mental health providers work closely with the school staff to provide support and training. This allows our staff to effectively and accurately recognize mental health issues and refer student to proper provider.

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.

Donna Short- School- based Mental Health Liaison Dee Dee Bitter- School-based Mental Health Liaison Mark Chambers- NOVO (Behavioral Health Services) Brandi Lefler- Life and Hope Counseling Cynthia Wauberg- Life and Hope Counseling

MHAA Planned Funds and Expenditures

Allocation Funding Summary

MHAA funds provided in the 2023-2024 Florida Education Finance Program (FEFP) \$ 15,939.00

Unexpended MHAA funds from previous fiscal years

Grand Total MHAA Funds \$ 15,939.00

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.) 1006.041 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_2023-2024.docx MHAA Planned Funds and Expenditures Form Document Link

Charter Governing Board Approval

This application certifies that the **Lake County 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

Tuesday 7/18/2023