



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, 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 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 telehealth, 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-Based Program	Monique Barr Foundation- MBF Child Safety Matters
Tier(s) of Implementation	Tier 1
Describe the key EBP components that will be implemented.	
MBF is a comprehensive, evidence-based curriculum for elementary school students in grades k-5. The program educates and empowers children and all relevant adults with information and strategies to prevent, recognize and respond appropriately to bullying, cyberbullying, all types of abuse and digital abuse dangers.	
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.	
Middle school students will receive lessons based on MBF curriculum that is provided by specific teachers in specific classes during electives and/or at lunch. The lessons will be one class period and focus on topics such as bullying, cyberbullying and abuse. The program was developed with schools, not for schools, to make the best use of existing resources and ensure schools have effective programs that are easy to implement.	
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.	
<p>Improve:</p> <ol style="list-style-type: none"> 1. Post Traumatic Stress Symptoms (parent, child, teacher reported) 2. Anxiety Symptoms (child-parent and teacher reported) 3. Emotional Regulation (parent and teacher reported) 4. Depressive Symptoms (parent, teacher and student reported) 5. Increase school performance/decrease negative behaviors. 6. Decrease Crisis Intervention/Baker Acts 7. Decrease impulsive or risky behaviors. 8. Decrease bullying (parent, teacher and student reported) 9. Increased positive family and peer relationships. 	

Evidence-Based Program	Positive Behavior Interventions and Supports (PBIS)
Tier(s) of Implementation	Tier 1, Tier 2
Describe the key EBP components that will be implemented.	
<p>PBIS is an approach to behavior support that includes an ongoing process of research-based assessment, intervention and data-based decision making focused on building social and other functional competencies, creative supportive contexts and preventing the occurrence of problem behaviors. PBIS may be applied within a multi-tiered approach, incorporating parents, teachers, counselors and administration.</p>	
<p>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.</p>	
<p>Teachers and staff will implement daily PBIS strategies throughout the school day and year. Strategies and support will be provided in the classroom and other school-based areas. Students will get PBIS school-wide strategies in elementary, middle and high school to co-inside with their age and developmental level. Students will receive specific class rewards, grade level rewards and school-based rewards. Classroom teachers will involve a school counselor for a more individualized PBIS for specific students as needed. At Belmont we also utilize the House Point system as a school-wide reward. These reward systems will encourage positive behaviors by providing rewards and staff paying more attention to positive behaviors. Both attention and hope provide students with key components of resiliency. A tier 3 PBIS intervention would include a Check In Check Out (CICO) system. This can give students a boost and allow them to meet behavioral goals that can lead them back to Tier 1. CICO forms can be customized to reflect behaviors that need additional focus. Teachers provide feedback to the student on these behaviors throughout the day. These can be customized for the student to Check In/Check Out in the morning and/or afternoon, based on student need. Check In/Check Out staff can be administration, counselors, teachers, Special Education Staff and Interventionists.</p>	
<p>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.</p>	
<p>Intended Outcomes:</p> <ol style="list-style-type: none"> 1. Decreased discipline referrals. 2. Increase school wide engagement. 3. Decreased negative behaviors. 4. Increase student performance and grades. 	

Evidence-Based Program	Counselor Initial Assessment
Tier(s) of Implementation	Tier 2, Tier 3
Describe the key EBP components that will be implemented.	
<p>The school counselor will complete a counselor assessment to assess students for more intensive services and to assess crises management services. Assessments could include: stress assessments, depression assessments, anxiety assessments, and may include using the wheel of emotion and questionnaire. Depending on the situation/assessment, psychoeducation may be provided including coping skills and building skills to help endure hardship.</p>	
<p>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.</p>	
<p>The school counselor will do a 30-minute assessment at school. Students are referred to the counselor through staff members that encounter students and have completed Youth Mental Health First Aid (YMHFA) Training. A counselor will assess the needs of the students and if there is a need for crises intervention.</p>	
<p>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.</p>	
<p>Intended Outcomes:</p> <ol style="list-style-type: none"> 1. Decrease crises intervention. 2. Decrease depression and anxiety symptoms in students. 3. Provide students with more intensive services to increase coping skills, improve problem solving skills and decrease overall mental health symptoms. 4. Increase resiliency. 	

Evidence-Based Program	School Wide Education and Prevention Programs
Tier(s) of Implementation	Tier 1
Describe the key EBP components that will be implemented.	
<p>School-wide prevention programs include but are not limited to:</p> <ol style="list-style-type: none"> 1. Bullying Awareness 2. Belmont Man Up Group 3. Jeff Veley's school-wide assemblies "Bigfoot Gets Bullied" (elementary students) and "Rethink Bullying" (middle-high school) 4. Brooks Gibbs "How to Stop a Bully" 5. Diane Alber's following series: "A Little Spot of Emotion" "A Little Spot of Feelings" "A Little Spot of Life Skills" "A Little Spot of Actions" 6. Slumberkins stories and affirmation cards on: Authenticity, Building Connections, Change, Conflict Resolution, Creativity, Emotional Courage, Emotional Well-Being, Gratitude, Grief and Loss, Growth Mindset, Mindfulness, Routines, Self-Acceptance, Self-Esteem, Self-Expression, Stress Relief. 7. Ninja Life Hacks Series on Growth Mindset, Self-Awareness, Decision Making, Self-Management, Social Awareness and Relationship Skills. 	
<p>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.</p>	
<p>School-wide prevention programs are on-going throughout the year. Programs are developed to help encourage students to make good choices and at times explain why those are the best choices. Some programs, such as the "Man Up" program, are designed specifically for students exhibiting social, emotional and/or behavioral programs, or substance abuse disorders as well as the likelihood of at-risk students developing social, emotional, behavioral problems, depression, anxiety disorders or suicidal tendencies. School-wide programs have an array of purpose and intent, overall teaching good decision making, boundary setting, conflict resolution, coping strategies and resiliency. At times, our leadership students and AP Psychology students create mini lessons utilizing the curriculum and content from the counselor and go into classrooms of elementary school students, presenting the lessons.</p>	
<p>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.</p>	
<p>Intended Outcomes:</p> <ol style="list-style-type: none"> 1. Increased knowledge of students. 2. Improve students' ability to discuss topics of concern. 3. Decrease drug use, bullying, suicidal ideation, vaping. 4. Awareness, to result in decreased discipline referrals and crisis intervention. 5. Increased comradery amongst student population. 6. Increased communication and presentation skills. 	

Evidence-Based Program	Early Warning Systems
Tier(s) of Implementation	Tier 1
Describe the key EBP components that will be implemented.	
<p>Early Warning Systems considers failing grades, absences and discipline of a student. Students of any of these concerns will be discussed in Child-Study Team Meetings. These students will be monitored for additional Tier 1 intervention, generally whole-group intervention, to continue the monitoring process to see if any additional interventions need to be implemented.</p>	
<p>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.</p>	
<p>Early warning systems data will be gathered by administration, teachers and the school wide data team. It will be distributed to the administration and teachers of those students. This data will be shared at a minimum during Child-Study Team meetings, MTSS meetings and/or TAT meetings as needed.</p>	
<p>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.</p>	
<p>Specific students that are identified will be referred to specific services by mental health staff, teachers and/or administration. This could include guidance sessions, school counseling, referral or outside counseling, parent meetings, MTSS process, testing or other evaluations.</p> <p>Intended Outcomes would be:</p> <ol style="list-style-type: none"> 1. Decreased discipline referrals. 2. Increased overall mental health. 3. Increased overall school performance. 	

Evidence-Based Program	Youth Mental Health First Aid
Tier(s) of Implementation	Tier 1
Describe the key EBP components that will be implemented.	
<p>Youth Mental Health First Aid is designed to teach parents, family members, caregivers, teachers, school staff, peers, neighbors, health and human services workers and other caring citizens how to help and adolescent who is experiencing mental health, life challenges or is in crisis. YMHFA is primarily designed for adults who regularly interact with young people. The course introduces common mental health challenges for youth, reviews typical adolescents' development, and teaches 5-step action plans for how to help young people in both crisis and non-crisis situations. Topics covered include; anxiety, depression, substance abuse, disorders in psychosis, disruptive behavior disorders and eating disorders.</p>	
<p>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.</p>	
<p>All teachers, administration and staff will complete the required course based on the state guidelines. 80% of staff are trained according to the current guidelines, we at Belmont are aiming for 100%. All new teachers and staff are trained periodically throughout the year, three different training courses will be offered to better accommodate staff schedules. Every three years staff have to recertify utilizing a 1.5 hour refresher course.</p>	
<p>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.</p>	
<p>Intended Outcomes:</p> <ol style="list-style-type: none"> 1. Helps students emotionally regulate. 2. Increase students' school performance. 3. Decrease students' negative behaviors. 4. Decrease crisis intervention. 	

Direct Employment

MHAA Plan Direct Employment

School Counselor

Current Ratio as of August 1, 2023

2:805

2023-2024 proposed Ratio by June 30, 2024

2:805

School Social Worker

Current Ratio as of August 1, 2023

0:805

2023-2024 proposed Ratio by June 30, 2024

0:805**School Psychologist***Current Ratio as of August 1, 2023***0:805***2023-2024 proposed Ratio by June 30, 2024***0:805****Other Licensed Mental Health Provider***Current Ratio as of August 1, 2023***0:805***2023-2024 proposed Ratio by June 30, 2024***0:805****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.

At Belmont Academy, one of our two school counselors is a Clinical Social Worker, working on licensure. Having our two school counselors allows for counselors to provide direct mental health services to students, assess when outside agency providers are needed, provide ongoing education and prevention programs to student body, be proactive, mitigate crisis situations, assess threats as needed, implement positive behavior interventions, refer to community wide agencies, case management and participate/facilitate school-wide lessons.

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).

Teachers and staff refer students to a counselor as needed. The school counselor will assess the student and, based on student needs, moves forward with a plan of action. Other personnel may be involved depending on IEP/504, MTSS, discipline, threat assessment, crisis intervention and/or medical situation. Staff members communicate regularly and on-going.

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

Meridian Behavioral Healthcare provides the Meridian Mobile Response Team (MRT). The MRT provides services for individuals newborn to 24 years of age at no cost. They will come to the school when called. Ideally, MRT response times should be no longer than one hour. MRT will provide a continuum of care based on the crisis, they can provide referrals for additional services and implement a safety plan.

Meridian Behavioral Healthcare provides the Meridian Community Action Team (CAT). Belmont counselor can make referrals for CAT which provides individual, family psychiatric and nursing assistance to families who consent to services.

Center for Autism and Related Disorders (CARD) provides school based and home-based services, classes and materials to consenting parents/guardians. The school can also be the client, whereas CARD provides training and instruction to the school staff.

Belmont collaborates with other agencies to assess or assist with student needs. These agencies include: Florida MTSS, ISRD, Florida Department of Children and Families, Florida Department of Juvenile Justice, SEDNET, Lutheran Services of Florida and Law Enforcement.

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.

Contracted Mental Health/Social Work Partnerships.

MHAA Planned Funds and Expenditures

Allocation Funding Summary

MHAA funds provided in the 2023-2024 Florida Education Finance Program (FEFP)

Unexpended MHAA funds from previous fiscal years

Grand Total MHAA Funds

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 Statutes.

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:

No files were uploaded

Charter Governing Board Approval

This application certifies that the **Columbia County School District** 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

Monday 7/24/2023