



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-Based Program	Self-regulation Conscious Discipline by Dr. Becky Bailey - A Trauma based program of safety, connection, and problem solving to lead to self-regulation	
Tier(s) of Implementation	Tier 1, Tier 2	
Describe	e the key EBP components that will be implemented.	
Discipline as a leader in impact CASEL's SELect Program desi CASEL Guide to Effective Socia Conscious Discipline can play a emotional learning. The CASEL that offer comprehensive program	eved CASEL's SELect Program designation, recognizing Conscious ful social and emotional learning (SEL). Conscious Discipline meets gnation, the highest designation for evidence-based programs, in the al and Emotional Learning Programs. This designation indicates that a central role in a school's approach to promoting student social and Program Guide identifies well-designed, evidence-based SEL programs amming, ongoing training and support, and a demonstrated statistically udent behavioral outcomes and/or academic achievement." - Dr. Becky	
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.		
Teachers are on the fourth year study with the BPS district on learning and implementing Conscious Discipline for classroom management, social-emotional learning, and self-regulation in the classroom. By using the seven skills and powers in daily activities, students will move to more self-regulation and problem solving.		

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.

Teachers and staff will have skills to help identify and make referrals as needed for mental health and social emotion needs. They will learn how to lend support in the classroom for students to understand their own needs.

Evidence-Based Program	Goal Oriented - Studies Weekly Well-being curriculum (New CASEL aligned tier 1, 2, 3)to help teach social emotional learning and discussions in the classroom.	
Tier(s) of Implementation	Tier 1, Tier 2	
Describe the key EBP components that will be implemented.		
Students will have a periodic format consumable text with online support to be taught in the classroom and have family extensions to be completed at home.		
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.		
These weekly lessons will have classroom and family support over topics related to mental health, social and emotional, behavioral support, and increasing self esteem.		
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.		

Based on CASEL, these supports align with helping students with a feeling of being healthy, happy, safe and comfortable . They will learn to take care of themselves by keeping mind and body healthy and by thriving personally. Students will be able to understand their needs in this area.

Evidence-Based Program	Evidence-Based Treatment Monica Burr Foundation - Child Safety Matters - evidence based program to educate and empower children with strategies to recognize and respond to bullying, cyberbullying, and abuse.	
Tier(s) of Implementation	Tier 1, Tier 2	
Describe	e the key EBP components that will be implemented.	
to recognize the dangers of ab	ned professional are geared towards the students and teach signs and how use, neglect, bullying, and cyber threats. It supports finding and sharing face situations at school, home, and in the community.	
the early identification of socia the likelihood of at risk studen	mplement 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.	
"MBF Child Safety Matters® 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." MBF website		
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.		
With classroom lesson, materials to support learning, parent involvement, we can help our children look for danger signs, learn strategies, and understand the need to speak to trusted adults.		

Evidence-Based Program	Collaborative Approach - Youth Mental Health First Aid
Tier(s) of Implementation	Tier 1, Tier 2
Describe	e the key EBP components that will be implemented.
youth mental health awareness understand the signs of mental personnel with the next steps to concerns or a substance use d	cation (FDOE) has identified an evidence-based, nationally recognized and assistance training program to help school personnel identify and health concerns and substance use disorders, and provide such o find help for a person who is developing or experiencing mental health isorder. The evidence-based, nationally recognized youth mental health hing program identified by the FDOE is Youth Mental Health First Aid
the early identification of socia the likelihood of at risk studen	mplement 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.
be given to employees who con	e trained in the YMHFA for the school year. Time and compensation will mplete this on their own time. The goal is 100% compliance, 80% is the
expectation from the district.	
Explain how the supports intervention, treatment and real	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.

Evidence-Based Program	Focus on Strengths - addition of LMHC to give classroom lesson and small group lessons
Tier(s) of Implementation	Tier 1, Tier 2
Describe	e the key EBP components that will be implemented.
.	deliver research based lessons to classroom on building personal strength. os with parent support will work on targeted goals and needs of smaller
the early identification of socia the likelihood of at risk studen	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.
	t school and see all students. Once a month she/he will work in small s needs presented by families in encouragement of stronger self ental health.
intervention, treatment and red	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.
A trained counselor will be here population.	e to help us with evaluations and risk assessment as needed on our Tier 3
Direct Employment	
MHAA Plan Direct Employr	nent
School Counselor	
Current Ratio as of Augus 1:140	st 1, 2023
2023-2024 proposed Rati 1:140	o by June 30, 2024
School Social Worker	

School Social Worker

Current Ratio as of August 1, 2023 **1:140**

2023-2024 proposed Ratio by June 30, 2024 **1:140**

School Psychologist

Current Ratio as of August 1, 2023 **1:140**

2023-2024 proposed Ratio by June 30, 2024 **1:140**

Other Licensed Mental Health Provider

Current Ratio as of August 1, 2023 **1:140** *2023-2024 proposed Ratio by June 30, 2024* **1:140**

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.

This year our funding did increase and we can use the money to supplement our Mental health component. WE can pay staff on their own time to get the YMHFA training, we can increase time of our LMHC at the school and use our counselor as needed.

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).

We depend on our professional providers to diagnosis, treat, or refer our students. We will have a list of resources from the communities for our families. Our counselors will create and share plans, assessments, and referrals with our administration. They will work with our Threat Management Team

as well.

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

We will work with Kinder Konsulting for referrals and support of our students and families. This will be paid on a "as needed basis" in alignment with services. We will use services from the following associations locally: Brevard Family Partnership, Crosswinds Youth Services, Brevard CARES Mobile Response Team, and Circles of Care. We will also use contract with our LMHC professional and pay on an hourly basis for services at the school related to preventative treatment and support for students and families. We will use resources from Studies Weekly Well-Being program, Conscious Discipline, and Monica Burr Foundation Child Safety Matters.

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.

We will work with Kinder Konsulting, Brevard Family Partnership, Crosswinds Youth Services, Brevard CARES Mobile Response Team, and Circles of Care. We will also use contract with our LMHC professional and pay

on an hourly basis for services at the school related to preventative treatment and support for students and families. We will use resources from Studies Weekly Well-Being program, Conscious Discipline, and Monica Burr Foundation Child Safety Matters.

MHAA Planned Funds and Expenditures

Allocation Funding Summary

MHAA funds provided in the 2023-2024 Florida Education Finance Program (FEFP) \$7,398.00

Unexpended MHAA funds from previous fiscal years

\$ 1.030.00

Grand Total MHAA Funds

\$ 8,428.00

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:

No files were uploaded

Charter Governing Board Approval

This application certifies that the Brevard 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

Thursday 7/20/2023