



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

| Tier(s) of Implementation | Tier 1 |
|---|--|
| Describe | e the key EBP components that will be implemented. |
| evidence-based. Second Step of elementary program includes fin Solving. These units have seve | s a social-emotional learning curriculum that is research-based and offers an Elementary program and a Middle School program. The ve units: Skills for Learning, Empathy, Emotion Management, and Problen ral lessons that last from 20-40 minutes and are taught 1x per week. In aily practices throughout the week to reinforce these lessons, and families and online resources. |
| Thoughts, Emotions, & Decision | nsists of four units: Mindset & Goals, Recognizing Bullying & Harassment, ns, and Managing Relationships & Social Conflict. These units have pproximately 25 minutes and are taught 1x per week. |
| | |
| Explain how your district will in 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. |
| Explain how your district will in the early identification of social the likelihood of at risk student disorders or suicidal tendenc K-8th grade students will receiv Program (Grades K–8). Lesson up activities during the week. N | , emotional, or behavioral problems or substance use disorders, as well as developing social emotional or behavioral problems, depression, anxiety |
| Explain how your district will in the early identification of social the likelihood of at risk student disorders or suicidal tendenc K-8th grade students will receiv Program (Grades K–8). Lesson up activities during the week. N in their classrooms. Experience Explain how the supports v intervention, treatment and rec | , 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. re lessons, delivered by trained school personnel using Second Step is will occur every week with the main lesson one day a week and follow- ew teachers will be trained in Second Step and will use the strategies dail |

| Evidence-Based Program | DESSA |
|---------------------------|--|
| Tier(s) of Implementation | Tier 1, Tier 2 |
| Describe | e the key EBP components that will be implemented. |

The DESSA assessments are an empirical, standardized social and emotional competence (SEC) assessment with editions that support students K-12. DESSA assesses eight social and emotional competencies and is intended to help educators plan instruction, document students' strengths and areas of need, inform progress monitoring, and evaluate program outcomes. The DESSA assessments are a part of an online system called the DESSA Comprehensive SEL system that includes resources/ strategies to support the development of SEL skills in students. They are norm-referenced behavior rating scales that are strength-based. The DESSA Mini Screener identifies which students may be at risk of academic and behavioral difficulties due to low social and emotional competence. Those students who demonstrate a need for gathering further information can be given the full DESSA. As mentioned above: The DESSA Mini Screener identifies which students may be at risk of academic and behavioral difficulties which students may be at risk of academic and behavioral difficulties which students may be at risk of academic and behavioral difficulties which students may be at risk of academic and behavioral difficulties which students who heavioral difficulties which students may be at risk of academic and behavioral difficulties which students who heavioral difficulties due to low social and emotional competence. Interventions will be initiated based on results. Those students who demonstrate a need for gathering further information can be given the Full DESSA Assessment.

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.

Students in K-8th grade will be evaluated by their instructors using DESSA Mini Screener. Instructors will receive training from the school counseling coordinator and/or social worker on how to complete the rating scales. Groups composed of students with similar needs will be created to better facilitate interventions. These groups are going to be arranged based on the results of the DESSA assessment (CASEL SEL areas). The length of participation in the groups will vary depending on the need of the students. The minimum time in a mentoring group will be 4 weeks. Small group mentoring sessions will be delivered by the school counseling coordinator or the social worker once a week, using the techniques found in the book titled: Creative Approaches for Counseling Individual Children in the School Setting by Diane Senn, and the DESSA strategies section (Link: https://sel.datalinkevo.com/#/strategies/resources). The strategies will be selected based on the needs of the group, as identified by DESSA results.

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.

• Results will be entered in to the on-line system. (Fall 2023-24) Graphs and charts will be generated, and will help the SEL & behavioral team to understand those socio-emotional areas that need further exploration to help the students to strengthen those areas.

• Also, results will be used to identify those students in need of Tier 2/3 intervention.

• In addition, results will be used to compare pre assessment and post assessment data as well as to compare with the results of the RCMA internal SEL assessment.

• Support the students previously identified using the DESSA Full assessment with small group supports with activities based on the socio-emotional content identified.

• The students will complete the DESSA Mini pre assessment and post assessment to measure progress in the socio-emotional area.

| Evidence-Based Program | Journey of Hope |
|---|--|
| Tier(s) of Implementation | Tier 2, Tier 3 |
| Describe | e the key EBP components that will be implemented. |
| | based, child-informed program from Save the Children that draws on their resilience. It offers an age-specific curriculum designed to help |
| 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. |
| experienced trauma, is Journey needs & coping strategies to de | am that will be available for students, particularly those that have y of Hope. The purpose of this program is to help students with emotional eal with traumatic events. The curriculum is delivered in a small group weeks, but can be extended, if needed. |
| 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. |
| program. | e-test and post-test that will be used to measure the effectiveness of the ents that had experienced trauma. |
| | |
| Direct Employment | |
| Direct Employment MHAA Plan Direct Employr | nent |

Current Ratio as of August 1, 2023 **1:360**

2023-2024 proposed Ratio by June 30, 2024 **1:180**

School Social Worker

Current Ratio as of August 1, 2023

2023-2024 proposed Ratio by June 30, 2024 **1:180**

School Psychologist

Current Ratio as of August 1, 2023

2023-2024 proposed Ratio by June 30, 2024

Other Licensed Mental Health Provider

Current Ratio as of August 1, 2023

2023-2024 proposed Ratio by June 30, 2024

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 provider will facilitate access to services and support that could be necessary for the students' well-being and adequate functioning in the academic area. Teachers receive training concerning possible warning signs that a student may be experiencing mental health distress to refer them to the social worker.

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).

If there is an increase of time that students need for direct mental health service it will be incorporated into the student's daily school schedule. We collaborate with teachers by using the same procedures that are utilized when a student has an Individual Education 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 school-based mental health providers and community-based partners will provide information that will help the school team to meets regularly to discuss and plan interventions for students that have been referred for school mental health services and develops an intervention plan for the student. The team ensures individual tasks are designated to ensure care coordination, treatment, and follow-up care is provided for the student and their family. School or community-employed mental health providers who treat students then keep the Student Intervention Team informed about the students' progress.

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.

Bay Area Behavioral Services - Counseling for adults, children, couples & families.

Success4Kids & Families - Counseling for adults, children, couples & families.

Chrysalis Health - Mental Health & Substance Abuse Counseling

Gracepoint - Intake for crisis evaluation, short-term stay for crisis stabilization, etc.

MHAA Planned Funds and Expenditures

Allocation Funding Summary

MHAA funds provided in the 2023-2024 Florida Education Finance Program (FEFP) \$ 19,098.00

Unexpended MHAA funds from previous fiscal years

\$ 0.00

Grand Total MHAA Funds

\$ 19,098.00

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.pdf MHAA Planned Funds and Expenditures Form Document Link

Charter Governing Board Approval

This application certifies that the **Hillsborough 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

Monday 7/24/2023