



2023-24 Mental Health Application

Part I: Youth Mental Health Awareness Training Plan

Table of Contents

ntroduction	
Part I. Mental Health Assistance Allocation Plan	3
Section A: MHAA Plan Assurances	3
Section B: Planned Outcomes	0
Section C: Charter Program Implementation	4
Section D: Direct Employment	7
Section E: MHAA Planned Funds and Expenditures	8
Section F: Charter Governing Board Approval	9

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	SPARK Teen (13-22)Social-Emotional Curriculum	
Tier(s) of Implementation	Tier 2	
Describe	e the key EBP components that will be implemented.	
SPARK is an SEL curriculum co or separately.	onsisting of 22 independent lessons designed to be taught independently	
and career readiness and finan	ial skills - meaningful relationships, leadership, academic success, college icial stability. 13 lessons explore topics including discovering oneself, lence and surviving mood swings. Lessons provide both group and	
the early identification of social the likelihood of at risk student	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 ties, and how these will assist students dealing with trauma and violence.	
	om teachers will conduct selected sessions with all students during f will have the option of conducting more than one session per week lance.	
•	age in "SPARK activities" independently throughout the week. Educators nize bias and to increase self-awareness.	
School counselors will be availa	able to supervise session progress with classroom teachers.	
Counselors will be responsible concerns from staff, students a	for tracking student progress thru SPARK, addressing questions and nd parents.	
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.	
At the beginning of the school year or upon enrollment, all students will take the "SPARK Preliminary Assessment" to determine a "Base-Line Pre-Test" score. Growth will be demonstrated by an increase of 10%-25% in "Interactive Skills" scores by comparing the Pre-Test score with the score attained upon completion of "SPARK activities".		
•	nts as they participate in "SPARK activities", whether in small groups or in rersations, will allow staff teachers / school counselors / administrators	
the opportunity to observe changes in mood and behavior of students. Students will become more comfortable talking with school staff about their own mental health concerns or their particular anxieties. The School's referral system provides next steps to be taken by the Counselor / Principal to ensure that students are appropriately assessed, diagnosed, provided treatment plans and referrals to recovery services as required.		

Evidence-Based Program	Progress Monitoring Mentor Program	
Tier(s) of Implementation	Tier 2	
Describe	e the key EBP components that will be implemented.	
address progress. Items to be s graduation goals; course choice course completion; attendance;	vidual students and staff Teachers / School Counselors / Principal to specifically reviewed at each meeting include academic progress towards e options available to meet graduation criteria; student pace relative to obstacles that may present problems relative to student's goals. If staff meet more frequently than monthly, a bi-weekly or weekly meeting will be	
up, will be made by the staff pe	udent, including a current "grad plan" and any other notes for future follow- rson conducting the meeting. Parents will receive a copy of updated "grad dent accomplishments in "real time".	
employee they are comfortable emotional, behavioral problems	"share" their thoughts, accomplishments, dreams and goals with any adult with. All staff are trained to look for any signs of developing social, depression, anxiety disorders, and suicidal tendencies and to o the School Counselor and Principal for follow-up.	
• •	ovides that next steps to be taken by the Counselor / Principal to ensure assessed, diagnosed, provided treatment plans and referrals to recovery	
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.	
•	respect them, listen to them and support them. The individual attention s towards their graduation and post-high school goals, hopefully, inspires be with the realities of life.	
Staff taking the time to review each student's progress using the visually-reinforcing "grad plan" shows the student that they can succeed where they had previously failed. A positive outlook will increase self-esteem which should lead to improved attendance and improved rates of course completions.		
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.	
Total school and individual stud Weekly and Monthly reports are	lent attendance is maintained through the District's automated system. e available for staff review.	
Individual students' attendance progress meeting held.	and its effect on their progress will be reviewed at each one-on-one	
Student progress through our o	n-line curriculum is set to an average pace of 5 quizzes per day and one	

course completed about once every two months. During the "grad plan" one-on-one meetings, the

individual student's current pace will be compared with their personal goals and the "standard pace".

Regular one-on-one meetings between students and staff will afford staff to monitor student affect and behavior so that any mental health issues should be able to be noticed and referred to the School Counselor and/or Principal for additional assessment and possible referral for additional services.

Attendance records will be maintained and summarized to provide evidence of improved attendance. Course completion records will provide additional evidence to support improved self-esteem and health attitudes towards dealing with the challenges of adulthood.

Direct Employment

MHAA Plan Direct Employment

School Counselor

Current Ratio as of August 1, 2023 **.5 Counselor to 150 Students**

2023-2024 proposed Ratio by June 30, 2024 .5 Counselor to 150 Students

School Social Worker

Current Ratio as of August 1, 2023 NA

2023-2024 proposed Ratio by June 30, 2024 **NA**

School Psychologist

Current Ratio as of August 1, 2023 NA

2023-2024 proposed Ratio by June 30, 2024 NA

Other Licensed Mental Health Provider

Current Ratio as of August 1, 2023

2023-2024 proposed Ratio by June 30, 2024 NA

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.

City of Palms Charter High School, Inc. (CPCHS, Inc.) operates 3 charter high schools within Lee County Florida under sponsorship contracts with the School District of Lee County. CPCHS Inc. has developed a single MHAA Plan for the following three schools:

- 1. MSID 36-4212 City of Palms Charter High School
- 2. MSID 36-4223 Palm Acres Charter High School
- 3. MSID 36-4303 Northern Palms Charter High School

The corporation employs all staff, including School Counselors (SC's), at the corporate level. SC's work together to provide services to students, staff and parents at all three locations.

Total dollars allocated to the three schools for FY24 are:

- 1. 36-4212 City of Palms CHS \$ 7,668
- 2. 36-4223 Palm Acres CHS \$ 14,353
- 3. 36-4303 Northern Palms CHS \$ 6,527

Grand TOTAL MHAAP \$ for Combined Plans is \$28,548

The School Counselor (SC) provides daily support to every teacher every day of the week. SC is available for consult with individual students, parents and/or staff regarding mental health issues. SC provides intensive support for students when/where needed. SC is scheduled for "grad plan" review meetings along with classroom teachers and the Principal.

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).

Several anonymous referral routes are available to staff, students and parents. The SC prioritized mental health issues to be addressed.

At the end of FY23, the Board of Directors employed two full-time school counselors to serve approximately 500 students enrolled in the three schools included in the organization. Previously, one SC served all three schools and all students. FY24 anticipated enrollment is 600 students.

The Board of Directors is seeking to hire additional Vocational and Student Support personnel during FY24 to meet continuing needs related to growth in enrollment.

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

There are no formal contracts. City of Palms Charter High School, Inc. dba City of Palms Charter High School has good relationships with local drug rehab facilities, homeless shelters, police and hospitals -- especially relative to students that may need to be "Baker-Acted". Fewer interactions with these agencies indicate successes for our students.

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.

NA - None

MHAA Planned Funds and Expenditures

Allocation Funding Summary

MHAA funds provided in the 2023-2024 Florida Education Finance Program (FEFP) \$ 7,668.00

Unexpended MHAA funds from previous fiscal years

\$ 0.00

Grand Total MHAA Funds

\$ 7,668.00

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:

FY24_-_MHAAP_Exp_Rpts_CPCHS_4212.pdf Planned Funds and Expenditures CPCHS 4212 Document Link

Charter Governing Board Approval

This application certifies that the **The School District of Lee County** 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 6/13/2023