



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	Collaborative Care		
Tier(s) of Implementation	Tier 3		
Describe the key EBP components that will be implemented.			
This model will be used for the school and the off-campus mental health providers to cooperate and support students with mental health challenges.			
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.			
The school will utilize a working list of agencies/professional referrals including Tampa Bay Crisis Center, Gracepoint, and Tampa Family Health Center, who are equipped with resources to assist students who experience mental health challenges. For emergency mental health services, NSS will utilize the closest mental health facility to the school site.			
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.		
	mental health providers to coordinate and deliver consistent supports to r more mental health challenges. We will utilize student release of		

students who experience one or more mental health challenges. We will utilize student release of information forms to establish confidential communication channels to ensure that school, agency, and family are duly informed of students needs and interventions required to support the student.

Evidence-Based Program	Second Step - Social and Emotional Learning
Tier(s) of Implementation	Tier 1, Tier 2
Describe the key EBP components that will be implemented.	

The key components of Second Step include: growth mindset and goal setting; emotion management; empathy and kindness; and responsible problem solving.

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.

All K-8 students will receive social-emotional skills training from the Second Step Curriculum. The school counselor, K-3rd homeroom teachers, and 4th-8th social studies teachers will provide SEL instruction weekly. Components will also be implemented in school-wide and grade-level assemblies throughout the school year.

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.

Students with one or more mental health challenges will receive mentorship which will include weekly check-ins and meetings with their mentors and the school counselor. Students may receive additional services daily as needed.

Evidence-Based Program	Cognitive Behavior Therapy
Tier(s) of Implementation	Tier 2, Tier 3
Describ	e the key EBP components that will be implemented.
•	re: challenging and changing cognitive distortions and behaviors; improving hing students to develop personal coping strategies that target behavioral
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.
behavior referrals and initiate e social emotional issues behavi receive 8small group or individ	issues via strengths and difficulties questionnaire as well as PSLT early intervention. The survey identifies students at risk for developing oral problems, depression, and anxiety disorders. students at risk will ual counseling sessions via the site-based school counselor. Parents can t home practice provided by the counselor.
intervention, treatment and re	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.
intervention, treatment and re substance abus Students who experience one check-in check-out system. Th	covery services to students with one or more mental health or co-occurring se diagnoses and to students at high risk of such diagnoses. or more mental health challenges will be consistently supported using the ey will also receive mentorship that includes individual or small group
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Current Ratio as of August 1, 2023 0:420

2023-2024 proposed Ratio by June 30, 2024 0:420

Other Licensed Mental Health Provider

Current Ratio as of August 1, 2023 **1:420**

2023-2024 proposed Ratio by June 30, 2024 **1:420**

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.

With the employment of a school counselor our staff to student ratio improves from approximately 1:9 to 1:8. We'd have 1 mental health provider to 420 students instead of no onsite certified counselor or mental health provider.

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).

School counselor and or mental health provider will spend 70% or more of their time in direct service to students. Individual and small group counselling will be given priority over school-wide initiatives like Character Education.

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

Our school-based mental health counselor will provide intervention services in the form of: Individual and small group counseling Crisis counseling Check in/Check out Referral to community-based agencies They will also provide Restoration services in the form of: Safety Plans Small group counseling Restorative circles Referral to community agencies for continued therapy or out-patient services

NSS has an established relationship with Gracepoint – our closest mental health facility. Through our continued school-community partnership, Gracepoint will be referred for students who require more intensive supports.

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.

Gracepoint - individual student assessment, diagnosis, and treatment Tampa Bay Crisis Center - mental health services for students and families especially those in need of long term supports.

MHAA Planned Funds and Expenditures

Allocation Funding Summary

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

\$ 23,942.00

Unexpended MHAA funds from previous fiscal years

\$ 0.00

Grand Total MHAA Funds

\$ 23,942.00

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_20222023_PDF.pdf
New Springs MHAA Planned Funds and Expenditures Form 2023-24
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 7/31/2023