



Part I: Youth Mental Health Awareness Training Plan

Table of Contents

Introduction	3
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, 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	Seminoles ASPIRE Program
Tier(s) of Implementation	Tier 1, Tier 2
Describe the key EBP components that will be implemented.	
<p>Alliance for Supporting Positive-growth & Inspiring Resilience in Education.</p> <p>Services FSUS students in grades Kindergarten-12th.</p> <p>There are three primary goals associated with the Seminoles ASPIRE partnership:</p> <ol style="list-style-type: none"> 1) Increase the mental health of students attending FSUS. 2) Create practicum experiences for the graduate students in Counseling and School Psychology 3) Conduct research on mental health and bullying prevention 	
<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 mental health partnership is built on a multi-tiered service delivery model framework. The three-tiered triangle will be used to represent this framework.</p> <p>*Tier 1 consists of universal screening and preventative programming for ALL students attending FSUS. This will improve the early identification of social, emotional, behavioral problems or substance use disorders, as well as the likelihood of at-risk students developing social, emotional, behavioral problems, depression, anxiety disorders, and suicidal tendencies.</p> <p>*Tier 2 consists of assessments and interventions that are specific to students with elevated risk for mental health difficulties.</p> <p>*Tier 3 will consist of individuals with a significant risk of or known mental health difficulties.</p> <p>Biweekly Google Classroom Activities to provide instruction related to youth mental health awareness and assistance. Every 2 weeks 6-12th grade students will receive lessons to help them with various skills such as the recognition of signs and symptoms of mental health disorders, the impacts of substance abuse, strategies to support a peer, friend, or family member with a mental health disorder, and prevention of the abuse of and addiction to alcohol, nicotine, and drugs.</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>Student Surveys</p> <p>Decrease of referrals by 10% by the end of the 2023-2024 school year.</p> <p>Increase coping and self-regulation strategies 10% more frequently by the end of the 2023-2024 school year.</p>	

Evidence-Based Program	ASCA Mindsets & Behaviors Program
Tier(s) of Implementation	Tier 1, Tier 2
Describe the key EBP components that will be implemented.	
<p>Counselor will use CASEL (life skills) Standards or Second Step to reach the district's goals.</p> <p>Dojo information from teacher input, parent request and Nole Notes.</p> <p>Group counseling support for students with anger, low emotional regulation. 6-8 weeks</p> <p>Group counseling support for students who have lost a loved one, grief. 6-8 weeks</p> <p>Group counseling support for students who experience the grieving process of divorce, and family issues. 6-8 weeks</p> <p>Group counseling support for kids with undiagnosed and diagnosed anxiety. 6-8 weeks</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>Counselor will conduct small group sessions with 5-6 students per group per grade level.</p> <p>The groups will meet once a week for 30-45 minutes.</p> <p>Students served will be in grades K-5.</p> <p>Students will work through activities in the curriculum that will cover a wide range of topics. All the topics will be connected to the district's goals of increasing self-regulation and decreasing anxiety. Some of the topics include but are not limited to:</p> <ul style="list-style-type: none"> *Self-management *Social-Awareness *Relationship Skills *Responsible decision-making *Self-awareness 	
<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>Dojo Progress monitoring biweekly to see if their behaviors have improved.</p> <p>Nole Notes</p> <p>Student Surveys</p> <p>Parent Input</p>	

Direct Employment

MHAA Plan Direct Employment

School Counselor

Current Ratio as of August 1, 2023

1:1878

2023-2024 proposed Ratio by June 30, 2024

1:939

School Social Worker

Current Ratio as of August 1, 2023

0

2023-2024 proposed Ratio by June 30, 2024

0

School Psychologist

Current Ratio as of August 1, 2023

1:1878

2023-2024 proposed Ratio by June 30, 2024

1:1878

Other Licensed Mental Health Provider

Current Ratio as of August 1, 2023

1:939

2023-2024 proposed Ratio by June 30, 2024

1:939

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.

Direct employment service providers including but not limited to 2 school counselors, 2 certified mental-health professionals, 5 or more additional mental health professionals to provide services to increase self-regulation in K-12 students by 10% and decrease anxiety induced behaviors by 10% by the end of the 2023-2024 school year. The ASPIRE program reduces staff to student ratio to reach more students. This allows more time for the school counselor to meet with students and help with mental health issues or concerns.

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).

To increase the amount of time student services personnel spend providing direct mental health services to students, FSUS has an academic dean at the elementary school, middle school, and high school to support students' academic needs and to give our school counselors more time to engage students in direct mental health services. Students in grades 6-12 will receive lessons on resiliency to help them with various skills such as the recognition of signs and symptoms of mental health

disorders, the impacts of substance abuse, strategies to support a peer, friend, or family member with a mental health disorder, and prevention of the abuse of and addiction to alcohol, nicotine, and drugs. To assure continuity in services and delivery of curriculum, the FSUS Mental Health Support Team will meet quarterly to review data and progress towards the goals. Counselors and Deans will meet with students weekly to offer services, strategies and guidance on healthy coping skills.

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

The FSUS Mental Health Services Team will coordinate mental health services and seek to establish partnerships with community based agencies and mental health providers. These partnerships will include:

- Florida State University Multidisciplinary Evaluation and Consulting Center (MDC) - provide a range of services including diagnostic evaluation and consultation services for children and youth identified as having complex medical, educational, emotional, and/or behavioral problems, as well as consultation, pre-service and in-service training for parents, teachers, other school and district personnel, and related providers and professionals.
- FSU Human Services Center - The Human Services Center offers mental health counseling to children, adolescents, adults, couples, and families in the Big Bend area. The counselors are graduate students supervised by faculty with clinical licensure. The center operates Fall and Spring semesters; it is closed during the summer.
- Tallahassee Memorial Healthcare - The Psychiatric Emergency Response Program (PERP) provides emergency psychiatric evaluations for persons experiencing a serious mental health crisis.
- Apalachee Crisis Mobile Unit- The Psychiatric Emergency Response Program (PERP) provides emergency psychiatric evaluations for persons experiencing a serious mental health crisis.

The focus of these partnerships will be to support education, early intervention, evaluation, peer support, counseling, crisis intervention, treatment, rehabilitation, and follow-up services.

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.

FSU Multidisciplinary Center (MDC)- Provides individual counseling support, conducts observations, and provides feedback.

Seminoles ASPIRE Program (FSU/FSUS Partnership)- Provide individual and group counseling support by clinicians working under the supervision of a licensed psychologist.

MHAA Planned Funds and Expenditures

Allocation Funding Summary

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

\$ 200,634.00

Unexpended MHAA funds from previous fiscal years

\$ 8,878.00

Grand Total MHAA Funds

\$ 209,512.00

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 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 **Florida State University 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

Tuesday 8/22/2023