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## Introduction

### Mental Health Assistance Allocation Plan

s. 1006.041, F.S.

#### MHAA Plan Assurances

##### The District 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

Review for compliance the Mental Health Assistance Allocation Plans submitted by Charter Schools who opt out of the District's MHAAP.

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 school 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 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

<b>Evidence-Based Program</b>	Navigate 360
<b>Tier(s) of Implementation</b>	Tier 1, Tier 2
Describe the key EBP components that will be implemented.	
<p>Navigate 360 is an evidence-based program that is aligned with the core components of the CASEL framework. This program is used for grades 6-12 and lessons are specific to the Florida resiliency education requirements. Monroe County School District (MCSD) is using Navigate 360 to deliver this core instruction at the Tier 1 level. All students in grades 6-12 will receive lessons during a 30-minute weekly instructional block from September 2023-January 2024. Students will then be universally screened and that screening data, along with other student information such as grades and discipline, will be used to identify students who need additional support. Students identified as Tier 2 will receive small group instruction via additional Navigate 360 lessons, based on area of need, during the 30-minute instructional block. These small group lessons will be led by school counselors or school social workers. Students identified as Tier 3 will receive individual lessons via Navigate 360 during the 30-minute instructional block. Tier 3 lessons will be led by school social workers.</p> <p>The first half of the year is planned so all students receive Navigate 360 Tier 1 core instruction during the 30- minute weekly instructional block. The second half of the year is planned so that students identified as needing Tier 2 or Tier 3 support, receive small group or individual instruction during the remaining 30-minute weekly instructional block.</p> <p>MCSD is using a data-driven targeted approach to tiered support with the Navigate 360 program.</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>Students in grades 6-12 are universally screened at the start of the school year. Those students will then receive their core resiliency instruction from September through January. In January the students are screened again and change scores are used to identify students who may not have benefitted from the core instruction. Students will be identified as either Tier 2 or Tier 3 and will receive small group or individual support. The evidence based program used for this is Navigate 360.</p> <p>In addition, MCSD has monthly behavior data chats that focus on analyzing student early warning system data. These meetings start in August and run monthly through May. Data analyzed includes grades, discipline, attendance, and either prior or current screening data. Students identified as needing support will be assigned as either Tier 2 or Tier 3. Students will receive additional support via the Navigate 360 program that is facilitated by either a school counselor or school social worker. These supports are in place as soon as a student is identified, regardless of time of year.</p> <p>Navigate 360 lessons address topics such as coping skills, substance abuse, accessing available resources, and overcoming adversity.</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>	

Lessons through Navigate 360 at the Tier 2 and Tier 3 level require parental, and when appropriate, community agency collaboration. When school counselors and school social workers work with students more closely at the Tier 2 and Tier 3 level they get parental consent and work with the student and their family to access any needed additional community agency supports. This is especially relevant for students with mental health or co-occurring substance abuse concerns. School counselors and school social workers will collaborate with the local community mental health agency, Guidance Care Center, to review skills taught at school to ensure there is continuity of care and no overlap of services.

<b>Evidence-Based Program</b>	Panorama Universal Screening
<b>Tier(s) of Implementation</b>	Tier 1, Tier 2
Describe the key EBP components that will be implemented.	
<p>Panorama provides the district with a research-based universal screener for student wellness. Students in grades 5-12 self-rate in the areas of positive feelings, challenging feelings, self-management, grit, emotional regulation, and well-being. Screenings are completed twice a year, once in September and again in January. Results, along with early warning system data, are used to determine students in need of support from a school or community-based mental health provider. If students have significantly low areas on the screener, in addition to an early warning system indicator, they are referred for Tier 2 or Tier 3 support. If students have significantly low areas on the screener but there are no indications of difficulty in school, then parents of those students are notified and provided with a list of outside agency supports or are directly referred to a community agency.</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>The sole purpose of the Panorama universal screener is for early identification. By screening students at the very start of the school year MCSD is able to quickly identify and begin targeted tiered supports via the district MTSS framework. By re-screening students in January, MCSD is able to determine if students who have already been identified, and are receiving tiered support, have progressed or not. MCSD is also able to provide tiered support for students who may not have been at-risk at the start of the year, but are by mid-year.</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>When a student is identified using the Panorama screener the school-based behavior team (administrator, school counselor, school social worker, MTSS coordinator) looks at the whole-child and determines if the student is Tier 2 or Tier 3. The team also decides which school-based mental health provider will support the student. Once tiered support begins, various evidenced-based strategies are employed. For example, at the Tier 2 level, students may receive small group instruction, small group social skills practice sessions, or Check-In Check-Out. At the tier 3 level, students receive individual support with evidenced-based programs such as Zones of Regulation or WhyTry. Data regarding behavior of concern is collected weekly and analyzed at least monthly to monitor progress and determine need for tier movement. The school-based behavior team reviews student data and will make direct referrals to outside agencies as needed.</p>	

<b>Evidence-Based Program</b>	New Immigrant and ELL Student Groups
<b>Tier(s) of Implementation</b>	Tier 1, Tier 2
Describe the key EBP components that will be implemented.	
<p>MCSD is launching New Immigrant and ELL Student Groups in the 23-24 school year for students in grades K-12. These groups will be led by school social workers and EL contacts. Any student who is new to the country or who is actively receiving ELL support is eligible to join these groups. Groups will meet weekly and discuss topics such as what school is like in the United States, what the behavioral expectations are in MCSD, how to make friends, local resources, and other supports for assimilation. In addition, students will be led through guided discussions that will allow the school social workers to assess for past trauma and current sources of stress/anxiety. Students identified as needing extra support will continue in the group, but will also be referred to either a school counselor, a school social worker, or outside agency for additional support.</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>Grant funding has allowed MCSD to train 40 staff members in Spanish. Of those 40 staff members, 30 are school counselors and social workers, and 5 are EL contacts. This will improve the group facilitator's ability to communicate with new immigrants and ELL students. ELL students have difficulty with our universal screener. It is more reliable to reach out to them directly to assess for need. These groups provide a direct platform to do this. By speaking to these students in their native language, a more authentic relationship is formed allowing the school social workers to better assess for mental health services. As soon as a need is determined, the school social worker and EL contact work together with the student and family to determine the level of support needed and best intervention course to take. If there are school-based needs they will enter the MTSS process and begin receiving Tiered support. If there are more significant concerns, or co-occurring substance abuse issues, outside agency referrals are made. Many of our immigrant students and their families have directly or indirectly experienced trauma and violence on their journey to this country. These groups give students a place to share their stories and receive the support they need.</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>Any student in the group identified as needing additional support will be referred for MTSS support and/or to an outside agency for support. For some students the group is a place to meet new students and become acclimated to the school environment. In these cases, the group serves as a Tier 1 support. For other students, the group will serve as a place to learn social interaction skills, behavioral expectations, and coping skills. In these cases, the group serve as a Tier 2 support. When there are two to three students in the group who need targeted and more intensive support, the social worker will form a smaller group just for them. They may still join the larger group as a Tier 2 support, but the smaller group will be geared toward developing a very specific skill or working through a specific area of difficulty the students have in common. In these cases, the smaller specialized groups would be considered Tier 3.</p>	

**Direct Employment**



**MHAA Plan Direct Employment**

**School Counselor**

*Current Ratio as of August 1, 2023*

**1:359**

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

**1:359**

**School Social Worker**

*Current Ratio as of August 1, 2023*

**1:479**

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

**1:479**

**School Psychologist**

*Current Ratio as of August 1, 2023*

**1:1197**

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

**1:1197**

**Other Licensed Mental Health Provider**

*Current Ratio as of August 1, 2023*

**n/a**

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

**n/a**

**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.**

MCSD school counselors are in line with the national standards for staff to student ratios. MCSD was awarded a USDOE grant that allowed the district to hire nine additional school social workers. These nine positions have all been filled. This decreased the school social worker to student ratios from 1:1197 to 1:479. With the addition of these new positions, school social workers no longer have to split their time between more than one school. The additional staff also allows them to take on more Tier 2 students, thus decreasing the caseload of the school counselors allowing them to see more students.

**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 counselors have traditionally been assigned special duties by school administrators such as bus and lunch duty. District leadership has directed school administrators to not assign school-based mental health providers these special duties, specifically so they can use that time to meet with students. That gives them an additional hour each day to provide direct mental health services to students. MCSD used ESSER funds to hire a guidance tech at each school to support the school counselor. With the tech completing paperwork and clerical duties required of the counselors, the counselors were able to use that time to work directly with students. Once ESSER funds ran out,

MCSD used district funds to maintain these positions in the schools. MCSD made it a priority to actively search for and apply for grants that would provide funding specifically to increase the number of school based mental health providers. In January 2023 the district was awarded a five year grant allowing the hiring of nine additional school social workers.

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

Guidance Care Center(GCC) is the local mental health agency for Monroe County. MCSD and GCC have an MOU where there is a collaborative approach to school-based mental health support. GCC has mental health and prevention counselors in all of our schools. School counselors and school social workers meet with GCC school-based staff monthly to ensure continuity of care. GCC staff is given access to the Navigate 360 scope and sequence so they are aware of what lessons students are learning and when. This allows them to either front-load support prior to a lesson or piggy-back afterward to expand on lessons as needed.

**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.**

MCSD has a contract with the Guidance Care Center (GCC), which is the local community mental health agency. GCC provides each school with mental health and prevention counselors to support students in the school setting. Referrals to GCC mental health counselors typically come from school-based mental health providers. These referrals are made when students present with mental health issues that require more support than what a school-based mental health provider can provide. This typically involves students identified as needing more therapeutic than skill-based support, medication management, or family counseling. Referrals are also provided to GCC prevention counselors for students identified as having a nicotine, alcohol, or substance abuse issue. GCC provides support for students who are in crisis, due to either a threat to self or others, via their Mobile Crisis Response (MRT) team. GCC also has a CAT team for students who are struggling in school and have DJJ involvement. The CAT team provides these students and their families with complete wrap around support.

**MHAA Planned Funds and Expenditures**

**Allocation Funding Summary**

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

\$ 545,500.00

**Unexpended MHAA funds from previous fiscal years**

\$ 0.00

**Grand Total MHAA Funds**

\$ 545,500.00

**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*

**School District Certification**

This application certifies that the **Monroe County School District** School Superintendent and School Board approved the district's 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 s. 1006.041(14), F.S.

**Note:** The charter schools listed below have **Opted Out** of the district's Mental Health Assistance Allocation Plan and are expected to submit their own MHAAP to the District for review.

**Charter Schools Opting Out**

44-0382 - Somerset Academy
44-0371 - Treasure Village Montessori
44-0391 - Big Pine Academy
44-0351 - May Sand Montessori
44-0381 - Ocean Studies Charter
44-0341 - Sigsbee Charter
44-0332 - College of the Florida Keys Academy

**School Board Approval Date**

Tuesday 7/11/2023