



FLORIDA DEPARTMENT OF
EDUCATION
fldoe.org



2023-24 Mental Health Application

Mental Health Assistance Allocation Plan

Table of Contents

Introduction	3
Mental Health Assistance Allocation Plan	3
Section A: MHAA Plan Assurances	3
Section C: District Program Implementation	4
Section D: Direct Employment	7
Section E: MHAA Planned Funds and Expenditures	8
Section F: School District Certification	9

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, 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	Cognitive Behavioral Therapy (CBT)
Tier(s) of Implementation	Tier 3
Describe the key EBP components that will be implemented.	
Using strategies to interrupt the thought-behavior-feeling triangle such as cognitive reframing of thought distortions and behavioral activation strategies	
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.	
Parents are contacted for consent if a student does not appear to be responding to our Tier 2 services, meaning they continue to demonstrate a high level of need for emotional support throughout their school day, to receive more focused and individualized interventions. Students are typically referred to Tier 3 services from school counseling. Counselors and school psychologists have been trained in CBT strategies to improve student outcomes.	
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.	
Co-occurring disorders will be screened during student and family interview. If present, appropriate services will be recommended to the parent, aside from the group setting that may or may not be appropriate. The skills developed during CBT may help supplement more intensive interventions the student may need for their specific co-occurring diagnoses, but may not be appropriate on their own.	

Evidence-Based Program	Brief Solution Focused Therapy (BSFT)
Tier(s) of Implementation	Tier 2
Describe the key EBP components that will be implemented.	
BSFT is a goal-directed approach that helps students overcome daily obstacles such as interpersonal conflicts, low motivation, and future planning needs.	
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.	
If a student is identified as in need of more support to build their resiliency than is offered within our Tier 1 model, parents are informed of the concerns and students begin to see counselors for Tier 2 services. Students are typically referred for Tier 2 services through teachers, parents, or student self-referral. Meetings with counselors are more frequent than service delivery at the core level (Tier 1) and less frequent than Tier 3 services. Meetings will be tailored to specific student needs and focused on working toward specific goals.	
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.	
Co-occurring disorders will be screened during student and family interview. If present, appropriate services will be recommended to the parent, aside from the group setting that may or may not be appropriate. The skills developed during BSFT may help supplement more intensive interventions the student may need for their specific co-occurring diagnoses, but may not be appropriate on their own.	

Evidence-Based Program	River Phoenix Center for Peacebuilding
Tier(s) of Implementation	Tier 1
Describe the key EBP components that will be implemented.	
Community building, restorative practices, and resiliency building	
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 faculty are trained in these peacebuilding practices which are incorporated into teaching at all levels. Teachers utilize what is learned in the training to develop prosocial skills within the classroom, which is an important protective factor in preventing a need for higher level mental health interventions. Teachers monitor students' behavior throughout the year and refer to counseling team if concerning behaviors are noted allowing for early intervention.	
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.	
Prosocial skill development can aid in preventing co-occurring disorder by teaching a skill set that uses alternative strategies for coping with distress. When such diagnoses are present, these instructional practices can help support students during academic times.	

Direct Employment

MHAA Plan Direct Employment

School Counselor

Current Ratio as of August 1, 2023
1:650

2023-2024 proposed Ratio by June 30, 2024
1:650

School Social Worker

Current Ratio as of August 1, 2023

2023-2024 proposed Ratio by June 30, 2024

School Psychologist

Current Ratio as of August 1, 2023
1:1300

2023-2024 proposed Ratio by June 30, 2024
1:650

Other Licensed Mental Health Provider

Current Ratio as of August 1, 2023

1:650

2023-2024 proposed Ratio by June 30, 2024

1:650

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.

Current funding allows continued employment of school counselors at the recommended ratio and the decrease of the ratio of student:school psychologists.

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).

Weekly meetings are held to monitor students' progress as it relates to school-based mental health services. This allows us to track current need and address any increases in student need as they arise. Go Guardian tracks all student progress in school to provide more accurate information for at-risk students.

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

School based mental health providers use evidence-based interventions when working with students. They provide a list to parents of local providers that might meet the students' needs if parents wish to utilize community resources, but UF Lab School does not have community-based partners that provides direct services to 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.

We currently have no interagency agreements.

MHAA Planned Funds and Expenditures

Allocation Funding Summary

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

\$ 166,741.00

Unexpended MHAA funds from previous fiscal years

\$ 0.00

Grand Total MHAA Funds

\$ 166,741.00

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 **P.K Yonge Developmental Research School** 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

-

School Board Approval Date

Monday 7/24/2023