



Part I: Youth Mental Health Awareness Training Plan Part II: Mental Health Assistance Allocation Plan

(Insert District Name)

Jefferson County K-12, a Somerset Charter School

Deadline for submission to ShareFile on or before August 1, 2021

#### **Purpose**

The purpose of the combined mental health application is to streamline and merge two programs into one application. The Youth Mental Health Awareness Training (YMHAT) Plan and the Mental Health Assistance Allocation (MHAA) Plan are to provide supplemental funding to districts so schools can establish, expand and/or improve mental health care, awareness and training and offer a continuum of services. These allocations are appropriated annually to serve students and families through resources designed to foster quality mental health. This application is separated into two primary sections: Part I includes the YMHAT Plan and Part II includes the MHAAP

#### Part I. Youth Mental Health Awareness Training Plan

In accordance with section (s.) 1012.584, Florida Statutes (F.S.), the YMHAT allocation is to assist districts with providing an evidence-based youth mental health awareness and assistance training program to help school personnel identify and understand the signs of emotional disturbance, mental illness and substance use disorders, and provide such personnel with the skills to help a person who is developing or experiencing an emotional disturbance, mental health or substance use problem.

#### Part II. Mental Health Assistance Allocation Plan

In accordance with s. 1011.62(16), F.S., the MHAA Plan allocation is to assist districts in establishing or expanding school-based mental health care; training educators and other school staff in detecting and responding to mental health issues; and connecting children, youth and families who may experience behavioral health issues with appropriate services.

#### **Submission Process and Deadline**

The a	application	on m	ust	be si	ubmitt	ed to	the	Flo	orida	Dep	artm	nent	of E	Educa	atio	n (F	FDC	DE)	Sha	ıreFi	le b	y
the d	leadline A	Augu	ist 1	1, 20	<b>21</b> .					-												
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There are two submission options for charter schools:

- Option 1: District submission includes charter schools in both parts of the application.
- Option 2: Charter school(s) submit a separate application from the district.

#### Part I. Youth Mental Health Awareness Training Plan

**YMHAT Objective:** provide an evidence-based youth mental health awareness and assistance training program to help school personnel identify and understand the signs of emotional disturbance, mental illness and substance use disorders, and provide such personnel with the skills to help a person who is developing or experiencing an emotional disturbance, mental health or substance use problem.



## Part I. Youth Mental Health Awareness Training Plan and Projected Budget

## Section A: YMHAT Training Plan

1. What is the percentage of employees currently trained and certified in Youth Mental Health First Aid (YMHFA)?
There are 60 % of employees trained and certified as of 8/1/21 (date)
2. Explain the training goal(s) for the upcoming 2021-2022 school year.
Jefferson County K-12 will train 40% of their employees on Youth Mental Health First Aid (YMHFA) on October 18, 2021 and/or specified teacher planning days throughout the 2021-2022 school year.
Jefferson County K-12 will provide YMHFA recertification to the employees that received the training 3 years ago by June 2022
3. In addition, the annual goal for the 2021-2022 school year is to train:
40 % of employees as of 5/25/22 (date)
4. Explain the training goal(s) for the next 3-5 years.
Somerset Charter will no longer be under contract for the Jefferson District.
5. What is the procedure for training new personnel to the district?
New personnel are identified in the month of August and then registered for the first Teacher Planning Day to be trained on YMHFA.
6. Explain how the district will utilize the following three YMHAT programs:
□ YMHFA
The district will provide YMHFA training to new employees by the school trainers (Liliana L. Salazar and Allyn Howard) on October 18, 2021 and/or specified teacher planning days throughout the 2021-2022 school year.
☐ YMHFA Recertification
The district will provide YMHFA recertification to employees that received the training 3 years ago by the school trainers (Liliana L. Salazar and Allyn Howard) by June 2022.
☐ Kognito At-Risk Modules (at all three levels: elementary, middle, high school)
Kognito At-Risk Modules will not be used as 60% of the employees still have their three year coverage and those that are new to the school will be trained on October 18, 2021. All employees will receive a Mental Health Program Overview that includes procedures for referrals and identification of signs and symptoms during the Opening of Schools teacher planning days meeting.

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# Section B: YHHAT Projected Budget

Categories	Detailed Description, number of activities within each category	Cost Per/Each	Total Projected Budget by Category
1. Stipends  (Detailed # of personnel and stipend cost per person)			
2. Materials  (Detail # of units x individual unit cost, plus shipping)	105 Youth Mental Health First Aid Participant Manuals for trainings throughout the 2021-2022 school year	\$18.95	\$1,989.75
3. National Council (YMHFA) Training (Detailed description of each training activity to include # of personnel and individual training costs)			
<b>4. Additional Kognito Modules</b> (Provide the name of training module and cost)			
5. Additional narrative (op		21-2022 BUDGET:	\$1,989.75
3. Additional narrative (op	ional).		

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#### Part II. Mental Health Assistance Allocation Plan s. 1011.62 (16), F.S.

#### Section A: MHAA Plan Assurances

# The district assures... One hundred percent of state funds are used to expand school-based mental health care; train educators and 1 other school staff in detecting and responding to mental health issues; and connect children, youth and families with appropriate behavioral health services. Mental health assistance allocation funds do not supplant other funding sources or increase salaries or provide staff bonuses or incentives. Maximizing the use of other sources of funding to provide school-based mental health services (e.g., Medicaid reimbursement, third-party payments and grants). Collaboration with FDOE to disseminate mental health information and resources to students and families The district website includes local contacts, information and resources for mental health services for students and families. Includes a system 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 schoolbased mental health services providers; the number of students referred to community-based mental health services providers; the number of students who received school-based interventions, services or assistance; and the number of students who received community-based interventions, services or assistance. A school board policy or procedure has been established for... Students referred for a mental health screening assessed within 15 calendar days of referral. School-based mental health services initiated within 15 calendar days of identification and assessment. Community-based mental health services initiated within 30 calendar days of referral coordinating mental health services with a student's primary mental health care provider and other mental health providers involved in student care. Assisting a mental health services provider or a behavioral health provider as described in s. 1011.62, 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. Procedures include must include strategies to de-escalate a crisis situation for a student with a developmental disability as that term is defined in s. 393.063, F.S. 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 in s. 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, or the local mobile response team, or be a direct or contracted school district

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employee.

#### Section B: Planned Outcomes

Identify one or two specific and measurable outcomes for your district's plan to achieve through the 2021-2022 evidence-based mental health program.

Goal 1: Based on the 2020-2021 Mental Health Assistance Allocation Plan Outcome and Expenditures Report, Jefferson County K-12, a Somerset Charter School will increase the number of students who receive mental screenings or assessments by 10% during the 2021-2022 school year.

Goal 2: Based on the 2020-2021 Mental Health Assistance Allocation Plan Outcome and Expenditures Report, Jefferson County

#### Section C: District Program Implementation

#### Please include the following in this section:

### 1. Evidence-Based Program (EBP) and Description

Name and provide the essential elements of the EBP you will be implementing through a Multi-Tiered System of Supports (MTSS) using one or more of the preferred EBP/Practices found in <u>Blue Menu of Evidence-Based</u>

Psychosocial Interventions for Youth and the <u>SAMHSA Evidence-Based Practices Resource Center</u>.

Describe the key EBP components that will be implemented as well as any related activities, curricula, programs, services, policies and strategies.

\*If you will be using another EBP other than those provided above please explain using the same format listed.

#### 2. EBP Implementation

This should include:

- Explain how your district will implement evidence-based mental health services for students to 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, suicidal tendencies and how these will assist students dealing with trauma and violence.
- □ 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.

#### 3. Outcome Measures

□ Provide the outcome measures of your EBPs and how each aligns with your overall annual program goals in Section 2.

#### 4. Multi-tiered System of Support (MTSS)

☐ Identify the tier(s) of the EBP being implemented.

#### **Appendix Examples**

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**Table 1: District Program Implementation** 

1.	2.	3.	M	4. ITS	$\mathbf{S}$
EBP and Description	EBP Implementation	Outcome Measures	1	2	3
Evidence-based behavioral interventions & support have been proven effective through outcome evaluations. As such, these treatments are effective in changing target behavior when implemented with integrity.  (https://education.missouri.edu/ebi/what-are-evidence-based-interventions-ebi/)	expectations aligned with school-wide expectations, a continuum of procedures for encouraging expected behavior, a continuum of procedures for discouraging problem behavior and procedures for encouraging school-family partnership.  Tier 2 systems, data, and practices provide targeted support for students who are not successful with Tier 1 supports alone. The focus is on supporting	evidence-based program, students will have improved student outcomes in academic performance, social-emotional competence, social and academic outcomes for Students with		7	
set of social, emotional, behavioral, and character skills required to succeed in schooling, the workplace, relationships, and citizenship. The scope and focus of SEL interventions are based on research and developmental theory and captures the critical elements of SEL programs for children and youth. These elements include recognizing and expressing emotions, and cognitive regulation and executive functioning skills such as the mental processes required to focus, plan, and control behavioral responses in service of a goal.	Grades K-8. The high school (grades 9-12) will use Live, Growth, Focus ad the SEL. Student response to this Evidence-Based Practice will increase the number of students who receive mental health screenings and services as SEL instruction empowers students to recognize their mental health needs and informs them of resources available at the school site.  Harmony SEL is a social and emotional learning program for Pre-K-6 grade students, accessible online and at no cost. Harmony fosters knowledge, skills, and attitudes boys and girls need to develop healthy identities, create meaningful relationships, and engage productively by providing SEL learning resources, tools, and strategies.  Harmony SEL will be integrated into the weekly Specials rotations for grades K-5 and electives for	cognitive, emotional, interpersonal, and additional skills that are linked to child outcomes will develop and mature. Under cognitive skills, attention and inhibitory control, working memory and planning skills, and cognitive flexibility will be developed. Under emotional skills, emotion knowledge and expression, emotion and behavior regulation, and	<u></u>	<i>y</i>	

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1.	2.	3.	N	4. 1TS	SS
EBP and Description	EBP Implementation	Outcome Measures	1	2	3
place, positive youth development is promoted and the chronicity and severity of mental health concerns can be eliminated or reduced.  Sometimes these are referred to as "selective" mental health "prevention" or "secondary prevention" services.	Tier 2 early intervention services and supports will be provided by our School's Behavior Specialist and Guidance Counselor through: small group interventions for students identified with similar needs, brief individualized interventions (e.g., motivational interviewing, problem solving), mentoring, and/or low intensity classroom-based supports such as a daily report card, daily teacher check-in, and/or home/school note system.  Tier 3 mental health treatment address mental health concerns for students who are already experiencing significant distress and impaired functioning. They will be provided by our School's Social Worker or by the community organizations we have current Memorandum of Understandings with such as: Capital City Youth Services, Panhandle Therapy, DISC Village, Florida Therapy, Families First, Camelot Community Care, Community Wellness, A Better Way, and Apalachee Center. Examples include individual,	Through the use of this evidence-based program, a reduction in mental health issues will be evident as mental health treatment in schools has strong effects when the treatment is integrated into students' academic setting. Fidelity monitoring will be used to assess how the program is being implemented and will determine if the outcome measures are being met. The Fidelity Monitoring Checklist will be used for fidelity monitoring planning (https://dm0gz550769cd.cloudfront.net/shape/6a/6ace1f979015ac4593afa1281ec7361d.pdf).		<u>~</u>	<b>∀</b>
(FBA) is a systematic set of strategies that is used to determine the underlying function or purpose of a behavior, so that an effective intervention plan can be developed. FBA consists of describing the interfering or problem behavior, identifying antecedent or consequent events that control the behavior, developing a hypothesis of the behavior, and testing the hypothesis. Data collection is an important part of the FBA process. A Behavior Intervention Plan (BIP) is a formal, written plan that teaches and rewards good behavior. The purpose is to prevent or stop misbehavior. The BIP will have three key parts: (1) Lists the problem behavior (2)	<ul> <li>Identification and description of target behavior in observable, measurable terms</li> <li>A review of events related to the onset, duration, and severity of the target behavior, asking questions</li> </ul>	of decreasing inappropriate behavior and teaching or			<u> </u>

Additional narrative may be added here

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### Section D: Direct Employment

**Table 2: MHAA Plan Direct Employment** 

Position	Current Ratio as of August 1, 2021	2021-2022 Proposed Ratio by June 30, 2022
School Counselor	1:700	1:700
School Social Worker	1:700	1:700
School Psychologist	0	0
Other Licensed Mental Health Provider	0	0

Direct employment policy, roles and responsibilities	Description
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.	According to the American School Counselor Association (2019-2020), the Florida state average for the student-to-school-counselor ratio is 449 to 1. Our School has established 9 partnerships with outside agencies along with our Social Worker and Behavior Specialist to provide mental health assistance
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.	Our School will create a schedule that the student services personnel will implement to increase the amount of time they will spend providing direct mental health services. The ESE Director will include all outside agencies into the schedule to provide services as well.
Describe the role of school based mental health providers and community-based partners in the implementation of your evidence based mental health program.	According to Murphy et al., from the Harvard Review of Psychiatry (2017), the utilization of school-based mental health services:  • Promotes mental health and reduces stigma by enhancing mental health literacy of students, educators and parents;

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.

Table 3: MHAA Plan Contracts or Interagency Agreements and Services Provided

<b>Mental Health Provider:</b>	Agency:	Services Provided:	<b>Funding Source:</b>
CAT	Apalachee Center	Counseling and Medication Management	State
Northwest Florida Health Netw	DISC Village, Inc	Health and Wellness	State
Northwest Florida Health Netw	Capital City Youth Services	Mental Health and Counseling	State
Children's Medical Service	Community Wellness Counseling & S	Mental Health, Counseling, Outpatient Tr	State

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## Section E: Planned Expenditures

## **Table 4: MHAA Planned Expenditures**

Allocation Expenditure Summary	Total
Unexpended Mental Health Assistance Allocation funds from previous fiscal years:	0
School district expenditures for mental health services provided by staff who are employees of the school district:	0
School district expenditures for mental health services provided by contract-based collaborative efforts or partnerships with community-based mental health program agencies or providers:	\$128,823.00
Other expenditures (see below):	0
Total MHAA expenditures:	\$128,823.00

Other expenditures (specify details such as type, supplies, training and amount):

Type: Narrative description with detailed cost	Total Amount
Somerset Jefferson will use their mental health allocation to continue providing teletherapy through Let's	\$128,823.00
Talk Interactive. Let's Talk Interactive is the mental health company being used to implement the	
"Expanding Access to Mental Health and Telehealth Student Services in Florida Public Schools" grant.	
The funding source is CARES and GEER. Due to set up and equipment costs, the dollars available for	
actual teletherapy have been reduced. The mental health assistance dollars will ensure the students at	
Somerset Jefferson receive an additional 1,288 hours of teletherapy to ensure continuity of the program	
through the 21-22 school year. Hourly rate is \$100.00.	
Total Other Expenditures:	\$128,823.00

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#### **District Certification**

This application certifies that the  $\underline{\text{Jefferson County K-12, a Som}}$ 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 section  $\underline{1011.62(16)}$ , F.S.

School (MSID) Number	Charter School Name

Note: Charter schools not listed above will be included in the school district youth mental health awareness plan and mental health assistance allocation plan. If you have more Charter schools to add, please list them on a separate sheet.

Signature of District Superintendent
Todd German
Printed Name of District Superintendent
09 / 27 / 2021
Board Approval Date

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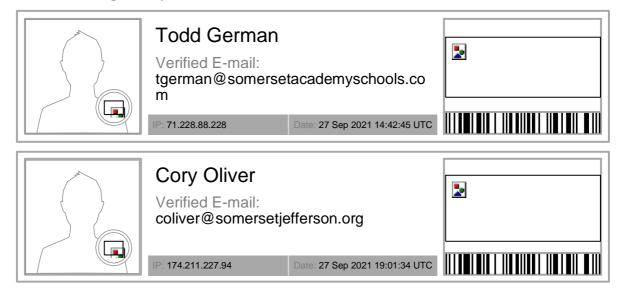
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# Signature Certificate

Document Ref.: S7ECP-GAWKQ-A3DVG-WIFPU

## Document signed by:



Document completed by all parties on:

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