



FLORIDA DEPARTMENT OF
EDUCATION
fldoe.org



2021-2022 Mental Health Application

Part I: Youth Mental Health Awareness Training Plan

Part II: Mental Health Assistance Allocation Plan

Madison County

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

2021-2022 Mental Health Application

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 application must be submitted to the Florida Department of Education (FDOE) ShareFile <https://fldoe.sharefile.com/r-rc3dac894fc9c4e6c9ff43fbc331a4286> by the deadline **August 1, 2021**.

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.

2021-2022 Mental Health Application

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 YMHAT?
There are 85% of employees trained and certified as of 7/13/21 (date)
2. Explain the training goal(s) for the upcoming 2021-2022 school year.
The district plans to train all new administrators, teachers, school staff, and bus drivers through face to face Youth Mental Health First Aid. The district plans to recertify faculty and staff that have certification expiring during the 2021-22 school year through the online modules offered through Youth Mental Health First Aid.
3. In addition, the annual goal for the 2021-2022 school year is to train:
100 % of employees as of 6/30/22 (date)
4. Explain the training goal(s) for the next 3-5 years.
The district plans to train all new administrators, teachers, school staff, and bus drivers through face to face Youth Mental Health First Aid. The district plans to recertify faculty and staff that have certification expiring during the school year through the online modules offered through Youth Mental Health First Aid.
5. What is the procedure for training new personnel to the district?
New personnel with direct contact with students will participate in the face to face Youth Mental Health First Aid class administered by trained district personnel that is offered 3 times per year.
6. Explain how the district will utilize the following three YMHAT programs:
<ul style="list-style-type: none"> • Youth Mental Health First Aid (YMHFA) 3 YMHFA face to face classes will be offered. (2 during preplanning and 1 during the school year)
<ul style="list-style-type: none"> • YMHFA Recertification Any employee that needs to recertify will be contacted and provided the opportunity to purchase the recertification webinar for reimbursement.
<ul style="list-style-type: none"> • Kognito At-Risk Modules (at all three levels: elementary, middle, high school)

2021-2022 Mental Health Application

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)	Clerical Assistant stipend – inputting data into web YMHFA portal, balancing budget, processing invoices	\$13.10 per hour (12.08 hours)	\$158.3
2. Materials (Detail # of units x individual unit cost, plus shipping)			
3. National Council (YMHFA) Training (Detailed description of each training activity to include # of personnel and individual training costs)	126 recertification modules for district and charter employees	\$29.95 each	\$3773.70
4. Additional Kognito Modules (Provide the name of training module and cost)			
TOTAL 2021-2022 BUDGET:			\$3932
5. Additional narrative (optional):			

2021-2022 Mental Health Application

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 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 school-based 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 employee.

2021-2022 Mental Health Application

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

The district will increase the number of student sessions received by school based mental health service providers through Cognitive Behavioral Intervention for Trauma in Schools (CBITS) by 5% by increasing the mental health provider to student ratio to 1:440 students by June 30, 2022 in order to reduce Baker Acts and hospitalizations due to mental illness.

The district will increase parent involvement of students receiving mental health services by facilitating three (3) parent education sessions per child by June 30, 2022.

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 [Blue Menu of Evidence-Based Psychosocial Interventions for Youth](#) and the [SAMHSA Evidence-Based Practices Resource Center](#).

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](#)

2021-2022 Mental Health Application

Table 1: District Program Implementation

1. EBP and Description	2. EBP Implementation	3. Outcome Measures	4. MTSS		
			1	2	3
<p>Bounce Back based on the Cognitive Behavioral Intervention for Trauma in Schools (CBITS) is comprised of 10 one-hour group sessions, two to three individual sessions and one to three parent education sessions that last over a three-month period.</p> <p>Group sessions are typically held during school hours and cover a range of topics such as relaxation training, cognitive restructuring, social problem solving, positive activities, trauma-focused intervention strategies and emotional regulation and coping skills.</p> <p>These topics and methods derive from established successful interventions for children with post-traumatic stress disorder (PTSD), including a gradual approach of anxiety-provoking situations and a modified trauma narratives approach.</p>	<p>School Mental Health Providers will administer the sessions to students grades k-12. Students will learn to identify feelings, and their links to thoughts and actions, using journaling, diaries, music, arts and crafts, hobbies or published storybooks to relate concepts and connect engagement activities and create personal storybooks or journals as an age-appropriate concrete trauma narrative. Student participation will be encouraged with games and activities specific to age groups. Group sessions are very structured and include agenda setting; review of activity assignments; introduction of new topics through games, stories and experiential activities; and assigning activities for the next group meeting. Group sessions are small, with only four to eight students all in the same age range. Individual sessions are prescribed for students who require tier 3 supports.</p> <p>The School Mental Health Provider will review the skills the children are learning with the student’s parent, so parents can support the children at home.</p> <p>The School Mental Health Provider will help each child develop a “My Story” trauma narrative. Near the end of the program, the School Mental Health Provider meets with the parent and child to share the child’s story.</p>	<p>Frequency and duration of student sessions and parent contact will be tracked by all school mental health providers to determine effects of increased ratio on reduced student Baker Acts and hospitalizations.</p>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

2021-2022 Mental Health Application

1. EBP and Description	2. EBP Implementation	3. Outcome Measures	4. MTSS		
			1	2	3
<p>Support for Students Exposed to Trauma based on Cognitive Behavioral Intervention for Trauma in Schools</p> <p>A school-based group or individual intervention for students who have been exposed to traumatic events and are suffering from symptoms of PTSD</p>	<p>Teachers, School Counselors, and/or Mental Health Providers will teach many cognitive and behavioral skills, such as social problem solving, psychoeducation and relaxation.</p> <p>The program consists of ten (10) 45-60 minute lessons.</p> <p>These lessons focus on:</p> <ul style="list-style-type: none"> -common reactions to trauma -relaxation techniques -coping strategies -learning to approach difficult situations -developing a trauma narrative -problem solving 	<p>Frequency and duration of student sessions and parent contact will be tracked by all school mental health providers to determine effects of increased ratio on student Baker Acts and hospitalizations.</p>	✓	✓	✓

2021-2022 Mental Health Application

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 : 600	1 : 600
School Social Worker		
School Psychologist	1: 2200	1:2200
Other Licensed Mental Health Provider	1:1100	1:440

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.	The district has: three (3) school counselors for mental/behavior needs; one (1) school psychologist for assessment/services; two (2) mental health providers; RTI specialist at each school, Certified MTSS Deans, & school nurses have been trained in tiers to reduce ratios
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.	District will address staffing regularly for the need of additional staff based on monthly data from site meetings to review mental health services and needs as well as progress of students.
Describe the role of school based mental health providers and community-based partners in the implementation of your evidence based mental health program.	Mental health providers, both school based and private, will serve on the intervention teams to help identify students in need of services, to assist with progress monitoring of services and interventions, as well as to monitor the recovery progress.

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

Mental Health Provider:	Agency:	Services Provided:	Funding Source:
Community Action Team: Social Work and Mental Health Counseling (LCSW, MSW)	Apalachee Center	Direct	Interagency Agreement
Mental Health Counselors (LCSW, MSW)	New Horizons	Direct	Interagency Agreement
Mental Health Student Interns	FSU Multidisciplinary Counseling	Direct	Interagency Agreement
Mental Health Counselors (LCSW, MSW)	Panhandle Therapy Center	Direct	Interagency Agreement

2021-2022 Mental Health Application

Section E: Planned Expenditures

Table 4: MHAA Planned Expenditures

Allocation Expenditure Summary	Total
Unexpended Mental Health Assistance Allocation funds from previous fiscal years:	\$
School district expenditures for mental health services provided by staff who are employees of the school district:	\$160,499
School district expenditures for mental health services provided by contract-based collaborative efforts or partnerships with community-based mental health program agencies or providers:	
Other expenditures (see below):	\$ 32,210
Total MHAA expenditures:	\$192,709

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

Type: Narrative description with detailed cost	Total Amount
LEAPS: Renewal of SEL site licenses for 6-12 grades for 2 public and 3 charter schools	\$ 9980.00
BIMAS 2: Universal Screener (800 licenses for 2 public and 3 charter schools)	\$ 3830
Reimbursement for Supervision by LCSW for 4 MSW (up to \$50/month per district MSW)	\$4800
2 Colored Printers/Scanner/Fax/Copier	\$600
Supplies for office and delivery of services (paper, ink, folders, pens, staples, staplers, storage containers, posters, puzzles, games)	\$6000
Travel to deliver services \$0.445 per mile	\$5000
4 laptops (\$500 each)	\$2000
Total Other Expenditures:	\$ 32210

2021-2022 Mental Health Application

Charter School Certification

This application certifies that the _____ Charter School Governing Board approved the school's Mental Health Assistance Allocation Plan, which outlines the 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(16), F.S.

Charter School Administrator Signature: _____

Governing Board Approval Date: _____