



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**

## **The School District of Manatee 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.

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### 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	57%	% of employees trained and certified as of	6/30/2021 (date)
<p>The goal for the 21-22 school year is to continue the initial training/certification of all School District of Manatee County employees; therefore, during the 21-22 school year, SDMC will offer Blended, Virtual, and In-Person trainings. The Training Schedule is as follows: Schedule is as follows:</p> <p>August – April District Level employees Elementary certified and non-certified school-based employees New certified and non-certified school-based employees (secondary) Food Service Transportation Maintenance and Operations</p> <p>August – June Recertifications</p>			
	85	% of employees as of	6/30/2022 (date)
Currently new employees will sign up for one of the many YMHFA trainings offered throughout the school year.			
Currently new employees will sign up for one of the many YMHFA trainings offered throughout the school year.			
<ul style="list-style-type: none"> <li>• YMHFA</li> </ul> <p>SDMC will offer Blended, Virtual, and In-Person trainings throughout the 21-22 school year. Utilizing YMHAT and Mental Health Allocation funds, employees who participate in YMHFA trainings outside of their contracted work day will receive a stipend.</p>			
<ul style="list-style-type: none"> <li>• YMHFA Recertification</li> </ul> <p>At the beginning of the 21-22 school year, the Mental Health Coordinator will notify principals of staff members who are up for recertification. The recertification course is to be completed by the end of the 21-22 school year. Upon completion of course participants will send the updated YMHFA certificate to the Mental Health Coordinator. Mental Health Allocation and YMHAT funds will be used to pay for recertification</p>			
<ul style="list-style-type: none"> <li>• Kognito At-Risk Modules (at all three levels: elementary, middle, high school)</li> </ul>			

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Since YMHFA training of all district employees is a multiyear project, during the 2019-2020 school year the following department participated in the Kognito At-Risk Modules: Food Service, Custodial, Elementary Schools, ESE, SLPs, OT/PT. SDMC is currently not utilizing Kognito.

### *Section B: YHHAT Projected Budget*

Categories	Detailed Description, number of activities within each category	Cost Per/Each	Total Projected Budget by Category
<b>1. Stipends</b>  (Detailed # of personnel and stipend cost per person)	Teacher salaries in the form of stipends, for 379.64 personnel who participate in Virtual/Blended Youth Mental Health First Aid Training, outside of contracted days/hours	\$15/hour for 6.5 hours per participant = \$37,015 10% Retirement for Teacher salaries/stipends = \$3702 7.65% FICA/Social Security for teacher salaries/stipends = 2832	\$ 43,549.00
<b>2. Materials</b>  (Detail # of units x individual unit cost, plus shipping)	Virtual/Blended Youth Mental Health First Aid seats	106 seats at \$23.95 each	\$2538.70
<b>3. National Council (YMHFA) Training</b> (Detailed description of each training activity to include # of personnel and individual training costs)	Teacher salaries in the form of stipends, for 43.2 personnel who train participate in Virtual/Blended Youth Mental Health First Aid Training, outside of contracted days/hours	Estimated salary of \$40/hour for 5.5 hours per trainer = \$9505 10% Retirement for Teacher salaries/stipends = \$951 7.65% FICA/Social Security for teacher salaries/stipends = \$727	\$11,183.00

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<b>4. Additional Kognito Modules</b> (Provide the name of training module and cost)	Since YMHFA training of all district employees is a multiyear project, during the 2019-2020 school year the following department participated in the Kognito At-Risk Modules: Food Service, Custodial, Elementary Schools, ESE, SLPs, OT/PT. SDMC is currently not utilizing Kognito.	\$0	\$0
<b>TOTAL 2021-2022 BUDGET:</b>			\$57,270.70
<b>5. Additional narrative (optional):</b>			
<p>The Youth Mental Health Awareness Training Allocation will be used to help with meeting the mandate of Youth Mental Health Awareness Training as referenced in section 1012.584. The School district of Manatee County will use this allocation to assist with the cost of providing stipends to employees and trainers who participate in YMHFA training outside of their contracted work hours/days.</p>			

### 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.

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### 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.**

1. To complete 99% initial training/certification of all certified/noncertified school-based employees and 70% of non-school- base district personnel in Youth Mental Health First Aid.
2. The School District of Manatee County will increase the number of schools providing mental health and social emotional programs/services for students by 20%, through the utilization of a multi-tiered system of supports.

### 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](#)

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**Table 1: District Program Implementation**

1. EBP and Description	2. EBP Implementation	3. Outcome Measures	4. MTSS		
			1	2	3
<p><b>PurposeFull People (CharacterStrong)</b> offers a K - 5th Grade Elementary curriculum teaching Student Emotional Learning and Character skills lessons that are aligned with CASEL’s five Social Emotional Learning Competencies. PurposeFull People is comprised of four key components: Classroom, Staff, Family, and Playground. The CLASSROOM component consists of lessons that follow a S.E.R.V.E. model: Start Intentionally, Engage Relationally, Respond with empathy, Values practiced, Exit Intentionally. The STAFF component involves a weekly character challenge related to that month’s trait so that the adults in the building are role-modeling what character development looks like in action. The FAMILY component includes a letter home that has conversation starters, simple activities, and Family character challenges “PurposeFull Pursuits” related to the monthly trait. The PLAYGROUND portion offers some practical games and tools for focused, character-trait based play and/or experiences.</p>	<p><b>PurposeFull People</b> Starting in August of 2021 every elementary school will have a unique login to access materials that are developmentally appropriate for each grade range. PurposeFull People curriculum provides several character trait calendars to help ground the SEL work and bring a uniform and centralized theme for schools to follow. Schools can then create a unique plan to address specific needs as indicated by their school’s data (Office Referrals, School Climate data, etc.) Students will be given a SEL/School Climate survey at least two times a year. Data is provided to each school to identify areas of need that require Tier 1 or Tier 2 supports. Under the guidance of the School Climate Grant Coordinator and two social workers, elementary school-based SEL teams will create a plan for implementing PurposeFull People into their school. Working with the School Climate Grant Coordinator and a social worker, school-based SEL teams will train staff on the implementation of the curriculum and the collection of classroom/school data.</p>	<p><b>PurposeFull People:</b> Through the implementation of PurposeFull People, students in grades K-5 will learn the connection between knowledge, skills, and dispositions and positive social, emotional, behavioral, and academic outcomes.</p> <p>To decrease mental health referrals by increasing prosocial behavior, emotion management and regulation, mindfulness-based strategies, growth mindset, character virtues, values, and traits, and goal setting to drive future orientation</p> <p>(Goal 2)</p>	1		



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<p><b>CharacterStrong</b> offers a 6th - 12th curriculum teaching Student Emotional Learning and Character skills lessons that are aligned with CASEL’s five Social Emotional Learning Competencies. The curriculum is for ALL students in grades 6-12. Lessons were built to be taught once a week and are about 30 minutes in length.</p> <p>CharacterStrong provides low-burden, high-impact activities that increase connection and compassion, and cultivate trust. Curricula focus on character development and social-emotional learning competencies to help students develop a stronger identity and purpose. The activities teach both SEL competencies and character education side-by-side. There is also a strong focus on adult SEL through the incorporation of Staff CharacterDares activities for school staff. Staff CharacterDare provides practical strategies to put a focus on proactive classroom management, character building, and relationship development over the course of a year.</p>	<p><b>CharacterStrong</b> 6-12 Curriculum Every grade level has its own set of 4 community building menus that are developmentally appropriate, and student tested (there will also be “Game Drops” throughout the year where new, unique games added to every grade). All sessions are designed to be delivered in an in-person environment and include built-in virtual adaptations. Every session can be used in a variety of different time constraints/configurations. All sessions are delivered directly through the slides with supporting iconography to simplify implementation. Every session includes quick insights into how this content fits into the greater whole and other key information at-a-glance.</p> <p>Starting in August of 2021 every secondary school will have a unique login to access materials that are developmentally appropriate for each grade range. CharacterStrong curriculum provides several character trait calendars to help ground the SEL work and bring a uniform and centralized theme for schools to follow. Schools can then create a unique plan to address specific needs as indicated by their school’s data (Office Referrals, School Climate data, etc.) Students will be given a SEL/School Climate survey at least two times a year. Data is provided to each school to identify areas of need that require Tier 1 or Tier 2 support. Under the guidance of the School Climate Grant Coordinator and two social workers, secondary school-based SEL teams will create a plan for implementing CharacterStrong into their school. Working with the School Climate Grant Coordinator and a social worker, school-based SEL teams will train staff on the implementation of the curriculum and the collection of classroom/school data.</p>	<p><b>CharacterStrong:</b></p> <p>Through the implementation of CharacterStrong, students in grades 6-12 will learn the connection between knowledge, skills, and dispositions and positive social, emotional, behavioral, and academic outcomes.</p> <p>To decrease mental health referrals by increasing prosocial behavior, emotion management and regulation, mindfulness-based strategies, growth mindset, character virtues, values, and traits, and goal setting to drive future orientation</p> <p>(Goal 2)</p>	1	
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1. EBP and Description	2. EBP Implementation	3. Outcome Measures	4. MTSS		
			1	2	3
<p><b>Edgenuity Purpose Prep</b> is a comprehensive digital curriculum offering of mental health awareness and assistance lessons for students in grades 6-12. Lessons are delivered through interactive videos with teacher facilitated follow up discussion questions. Lessons provide students strategies, resources and awareness on youth prevention and education related to youth mental health awareness and assistance, including suicide prevention, and the impacts of substance abuse.</p>	<p><b>Edgenuity/Purpose Prep:</b> Following the suggested progression of the Edgenuity/Purpose Prep’s mental health curriculum, the district Mental Health Coordinator creates an overall lesson plan for each grade level (6-12) and a template for schools to outline their plan on how to implement the lessons. Each grade level lesson includes a group of short videos, Check on Learning Questions and teacher facilitated Discussion Questions (teachers have the option of utilizing a PowerPoint or Word Document to guide the facilitated discussions). For easy access lesson plans and template are upload into the Mental Health folder located in Schoology.</p> <p>Utilizing the Implementation template, schools then complete a plan that works best for their individual school. In order to meet the 5 hours of required mental health awareness education each school must complete all lessons. Once a lesson is complete the school updates their plan with the exact date of implementation, attendance, and uploads the updated plan into Schoology.</p> <p>Each school designates a Mental Health Awareness person who oversee the school’s plan. All secondary teachers are certified in Youth Mental Health First Aid which provides them with the skills needed to facilitate discussions, identify warning signs, and get students mental help supports as needed.</p>	<p><b>Edgenuity Purpose Prep</b> provides students in grades 6-12 with age appropriate instruction and skill building in: recognition of signs and symptoms of mental health disorders, prevention of mental health disorders, mental health awareness and assistance, reducing the stigma of mental health, awareness of resources, and prevention of suicide and alcohol, nicotine, and drug addiction.</p> <p>To decrease mental health and substance abuse referrals through increasing awareness of signs and symptoms of mental health disorders and suicide, substance abuse, where and how to access resources</p> <p>(Goal 2)</p>	1		

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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	409:1	409:1
School Social Worker	1741:1	1741:1
School Psychologist	1899:1	1899:1
Other Licensed Mental Health Provider	2786:1	2786:1

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.	By contracting with two community mental health providers, SDMC can provide 18 more mental health personnel to support students thus reducing the overall staff-to-student ratio to: School Counselor 342:1, School Social Worker 995:1, School Psychologist 1044:1
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).	In the 21-22 school year SDMC is using MHAA funds to begin a partnership with Palm Shores Behavioral Health Center. Through this partnership SDMC will contract with Palm Shores for three licensed or master level inters to provide mental health services to students in SDMC schools. These partnership will allow our SBMHSps an increased amount of time providing direct mental health service to 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 Counselors oversee the implementation of all tier 1 EBPs in their schools. School Counselors and School Social workers, School Psychologist implement tier 2 EBPs, and School Psychologist and School-Based Community partners implement tier 3 EBPs.

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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>	<b>Agency:</b>	<b>Services Provided:</b>	<b>Funding Source:</b>
Registered Master Level Interns (15)	Centerstone	School-Based therapy	MHAAP
Licensed Therapists (3)	Palm Shores Behavioral Health	School-Based therapy	MHAAP
Community Action Team: Licensed and MA Therapists	Centerstone	Provides mental health services to students of The School District of Manatee County beyond the scope of the contract between the School Board and Centerstone	Free to District
Intervention and Prevention Team: BA and MA level cross-trained specialists	Centerstone	Provides substance abuse intervention and prevention services to the students of The School District of Manatee County	Free to District

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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:	\$187,040
School district expenditures for mental health services provided by staff who are employees of the school district:	\$202,035
School district expenditures for mental health services provided by contract-based collaborative efforts or partnerships with community-based mental health program agencies or providers:	\$1,350,000
<b>Other expenditures (see below):</b>	<b>\$663,579</b>
<b>Total MHAA expenditures:</b>	<b>\$2,215,614</b>

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

Type: Narrative description with detailed cost	Total Amount
Allocation to Charter Schools (approximately)	\$305,892
Professional Development and Training that are aligned with list EBPs	\$25,000
Youth Mental Health First Aid Participant Curriculum (Supplemental manuals, virtual seats, recertification) to supplement YMHAT funds	\$61,998
Stipends for Youth Mental Health First Aid Trainings for employees who participate outside of their contract work hours to supplement YMHAT funds	\$100,000
Materials for YMHFA Trainings (chart paper, printing, markers, etc.)	\$1489
Mental Health Curriculum (Rule 6A-1.09401)	\$169,200
<b>Total Other Expenditures:</b>	<b>\$663,579</b>

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### Certification

This application certifies that the \_\_\_\_\_ 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 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

\_\_\_\_\_  
Printed Name of District Superintendent

\_\_\_\_\_  
Board Approval Date

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### 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

\_\_\_\_\_  
Printed Name of Charter School Administrator

\_\_\_\_\_  
Governing Board Approval Date



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1. EBP and Description	2. EBP Implementation	3. Outcome Measures	4. MTSS		
			1	2	3
<p><b>School of Behavioral and Learning Excellence (SABLE) and The School of Therapeutic and Academic Resources (STAR)</b> programs are a short-term alternative education school for students who have a mental health diagnosis and are engaging in significantly challenging behaviors that have shown little or no response to the intensive and targeted interventions of a multi-tiered system of support. SABLE consists of one middle school classroom and three elementary school classrooms. STAR is a short-term alternative education school within SABLE consisting of two PreK-K classrooms. Students appropriate for referral to SABLE are in grades 1–8. Students appropriate for STAR are in PreK &amp; K. Generally, the length of stay for a student will be one to two quarters. All cases, however, are considered on an individual basis. A School Social Worker, School Psychologist, and Community Mental Health School-Based Therapist are available to provide individual, small group and family counseling. Bi-weekly a contracted Board-Certified child psychiatrist provides on-site mental health evaluations for students at SABLE as well as medication evaluations and medication regulation for families who do not have a private psychiatrist.</p>	<p><b>School of Behavioral and Learning Excellence (SABLE) and The School of Therapeutic and Academic Resources (STAR):</b> Students appropriate for referral to SABLE are in grades 1 – 8 who are attending a Manatee County Public School. Students must have a mental health diagnosis and be engaging in significantly challenging behaviors that have shown little or no response to the intensive and targeted interventions of a multi-tiered system of support. An observation by Student Services Staff and/or an ESE Behavior Specialist will be conducted to document the implementation of tiered interventions.</p> <p>Once the team at SABLE determines that this is an appropriate student referral a meeting will be scheduled at the sending school to discuss SABLE as an option for the student. Present at this meeting must be the ESE Resource Compliance Specialist and the parent/guardian. If the team determines that SABLE is the most appropriate option for the student at this time the specialist will document that decision either in the IEP or on a Report of Conference Form. The file is then delivered back to SABLE where SABLE Staff will contact the parent/guardian and set up a day and time for the parent/guardian to register the student and for the student to start at SABLE.</p> <p>Dismissal from SABLE will be based on individual student data. A student length of stay beyond one quarter will be considered on an individual case basis. A dismissal meeting will be scheduled at SABLE. The parent/guardian and receiving school staff will be invited to this meeting. Dismissal paperwork and an IEP revision if appropriate will take place. Positive behavior interventions and the student’s response to those interventions will be discussed. This meeting will occur within five to ten days of the student’s dismissal from SABLE</p>	<p><b>School of Behavioral and Learning Excellence (SABLE) and The School of Therapeutic and Academic Resources (STAR):</b> To transition students with a mental health diagnosis in grades prek-8 back to their home schools through SABLE/STAR use of individually designed mental health plans (stabilizing of the student, teaching appropriate coping strategies, medication management, therapy/counseling, etc..) within one to two quarters</p> <p>(Goal 2)</p>			3

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<p><b>Handle with Care:</b> Manatee County’s Handle with Care (HwC) program is modeled after the West Virginia Defending Childhood Initiative and is a multiagency collaborative effort to increase knowledge and awareness when a student has experienced a traumatic event in their home or community.</p> <p>The School District of Manatee County partners with all local law enforcement agencies to establish an immediate notification system when a student enrolled in a district school becomes involved with an active case. This system is designed to notify school principals, teachers, and counselors that a student may be experiencing some level of trauma and to simply be aware, if outward signs of problems begin to emerge.</p>	<p><b>Handle with Care</b> is a just-in-time intervention situational to the student who has experienced a recent traumatic event. Each morning local law enforcement notifies the school district of students who may have experienced a traumatic event in the previous evening (i.e. police or EMS visit, removal from home, etc.).</p> <p>The designated HWC school personnel will alert the student’s principal and teacher(s) with an email with the Subject Line: Handle with Care and the message of Student ID number and initials.</p> <p>A Handle with Care icon will appear next to the student’s name in FOCUS.</p> <p>The school psychologist or assistant principal then conducts a 5-minute stand-up meeting with the student’s teachers to verbally share need-to-know information about the recent traumatic event; review signs of distress and trauma sensitive interventions and advise them of who to call for help if signs of distress worsen or persist after 2-3 weeks.</p>	<p><b>Handle with Care</b> supports the evidence that creating a safe and supportive school environment, building secure attachments, and developing a student’s noncognitive skills can lead to student stability and success.</p> <p>To ultimately create a safe and supportive school environment, build secure attachments, and develop a student’s non-cognitive skills to lead to the student’s stability and success.</p> <p>To monitor student for signs of distress and contact school counselor or school psychologist to request assistance if needed.</p> <p>(Goal 2)</p>	<p>2</p>
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1. EBP and Description	2. EBP Implementation	3. Outcome Measures	4. MTSS		
			1	2	3
<p><b>Start with Hello</b> is one of Sandy Hook Promise’s Know the Signs programs and teaches students to be more socially inclusive and connected to each other. With activities and curricula available for all ages, students are empowered to end social isolation in three easy steps: Learn how to recognize the signs of loneliness and social isolation, find out what they can do to help others feel included, and discover how to break the ice and strike up a conversation. This program is introduced to all students in grades 6-12.</p>	<p><b>Start with Hello</b> is introduced to students in grades 6-12 through grade level class meetings. Through an interactive presentation, a representative from Sandy Hook Promise teaches empathy to empower students to end social isolation. The presentation includes a video training for students, an Educators’ Guide, and a handbook to help schools build and reinforce a culture of inclusion. The follow up to the initial introduction to the program includes video training for students, and Educators’ Guide and handbook to help schools build and reinforce a culture of inclusion. Utilizing various school clubs/organizations schools participate in the national Start With Hello week by planning inclusive activities.</p>	<p><b>Start With Hello:</b> To decrease bullying and other harmful behavior by teaching skills students need to reach out to and include those who may be dealing with chronic social isolation and create a culture of inclusion and connectedness within their school or youth organization.</p> <p>Skills:</p> <p>How to recognize the signs of loneliness and social isolation</p> <p>How to break the ice and strike up a conversation.</p> <p>How to help others feel included</p> <p>(Goal 2)</p>	1		

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<p><b>Ripple Effects</b> is a NREPP SEL program and National Dropout Prevention Center Model Program. Ripple Effects is an evidence-based, research proven program. Ripple Effects for Teens is a Comprehensive Intervention System to address both presenting behavior problems and the reasons behind them, from simple skill deficits, to cultural alienation, to personal trauma. This program will be available to all secondary Alternative to Out of School Suspension (ATOSS) and Emotional and Behavioral Disorder (EBD) classrooms.</p>	<p><b>Ripple Effects</b> is comprised of personalized technology to address non-academic barriers to school success. Software allows students to work through skills training specialized to their individual social skills/mental health needs. Students can track their progress with a built-in scorecard; Data Manager app makes it easy for educators to track individual and group student progress. This program will be available to all secondary Alternative to Out of School Suspension (ATOSS) and Emotional and Behavioral Disorder (EBD) classrooms.</p>	<p><b>Ripple Effects:</b> From exposure to Ripple Effects students should demonstrate:</p> <ul style="list-style-type: none"> <li>• Significantly higher grades, especially among previously failing students</li> <li>• Significantly higher scores for problem solving skills, a resiliency asset</li> <li>• Significantly higher empathy scores, a resiliency asset</li> <li>• Significantly lower dropout rates</li> <li>• Significantly higher scores on perception of harm of alcohol</li> </ul> <p>To increase academic success, empathy, and reduce dropout rates among At-Risk students.</p> <p>(Goal 2)</p>	<p>2</p>
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## 2021-2022 Mental Health Application

1. EBP and Description	2. EBP Implementation	3. Outcome Measures	4. MTSS		
			1	2	3
<p><b>TeachTown:</b> comprehensive, character- based video-modeling curriculum for students with special needs connects the treatment and progress made in the clinical setting to what children are learning in the school setting. Features include: Structured curriculum to systematically target social behaviors, Fun, animated videos are engaging and teach socially appropriate behaviors, which serve as a positive model for children, Systematic data collection tool which provides automatic reporting and graphing features that can be shared with parents and school staff. This program is available for all Autism Spectrum Disorder (ASD) classrooms</p>	<p><b>TeachTown</b> is a comprehensive, character- based video-modeling curriculum for students with special needs connects the treatment and progress made in the clinical setting to what children are learning in the school setting. K-5 Students with ASD have access to a structured curriculum that systematically target social behaviors, has, animated videos that are engaging and teach socially appropriate behaviors, and serves as a positive model for children. Teachers have access to a Systematic data collection tool which provides automatic reporting and graphing features that can be shared with parents and school staff</p> <p>Students with ASD in grades 1-5 work independently for approximately 20 minutes three times a week on bothe academic and social skills computer-generated lessons. To reinforce the social emotional lessons, related group social skill lessons are taught weekly.</p>	<p><b>TeachTown:</b> Through the use of TeachTown students with ASD in grades K-5 will learn to cooperate, listen, respect personal space, express emotions appropriately. TeachTown is comprised of five behavioral Domains: Following Rules, Interpersonal Skills, Self-Regulation &amp; Coping, Good Communication, and Friendship.</p> <p>To reduce inappropriate behavior and anxiety by improving students’ interpersonal and self-regulation skills</p> <p>(Goal2)</p>	2		

## 2021-2022 Mental Health Application

<p><b>Check-In/Check-Out:</b> provides additional support for students who need more support to meet their goals socially, emotionally, and/or academically. CICO gives students a boost and allow them to meet behavioral goals that can lead them back to Tier 1. Check-In/Check-Out intervention forms can be customized to reflect behaviors that need additional focus. Teachers provide feedback to the student on these behaviors throughout the day. Criteria used to identify students for CICO: A student who struggles with Tier 1 goals and behaviors, Little to no classwork participation or completion, Poor performance in submitting homework, Lack of participation in class, Poor organizational and/or time management skills, Struggles with emotion, focus, attentiveness, staying on-task.</p>	<p><b>Check-In/Check-Out:</b> Students are assigned to a CICO intervention check in with a coach/mentor at the beginning of the day to set goals for the day. This adult can be a counselor or other staff member who is not an instructor for that student. Typically, the student uses a “points card” that spells out the goals for each part of the day. As the student progresses through the day, their teachers evaluate behavior and assign points for meeting their daily goals. At the end of the day, the student checks out with the same staff member they began the day with, assessing their points total for the day. The final component of this process involves the student taking their points card to a parent at home, returning it signed at the next morning check-in. The mentor encourages the student to reflect on what they did well, how they feel, and what they need to work on.</p>	<p><b>Check-In/Check-Out:</b> At its most basic, the check-in/check-out meeting is an opportunity for student and mentor to work together to improve behavior. CICO doesn’t focus on the student’s struggles in behavior. Instead, it centers on the positive behavioral goals met and the efforts made by the student to attain those goals. Because Tier 2 interventions provide additional assistance to students, the expectation is that those students will eventually progress into Tier 1.</p> <p>(Goal2)</p>	<p>2</p>
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## 2021-2022 Mental Health Application

1. EBP and Description	2. EBP Implementation	3. Outcome Measures	4. MTSS		
			1	2	3
<p><b>Youth Mental Health First Aid</b> is a 6.5 hour training that teaches district personnel how to identify, understand and respond to signs of mental illness and substance use disorders in youth. This training gives adults who work with youth the skills they need to reach out and provide initial support to children and adolescents (ages 6-18) who may be developing a mental health or substance use problem and help connect them to the appropriate care. The School District of Manatee County is in the process of providing all district personnel with this training.</p>	<p><b>Youth Mental Health First Aid</b> training is provided to all district personnel through virtual, blended, and in-person platforms. Trainings are offered throughout the school year during both the school day and noncontracted hours. Virtual training consists of 2 hours of independent self-paced work with 4 hours of live virtual training, Blended training consists of 2 hours of independent self-paced work with 4 hours of in-person training. In-person training consists of 6 hours of face to face training. Employees sign up for training through the districts professional learning site.</p>	<p><b>Youth Mental Health First Aid:</b> Upon completion of Youth Mental Health First Aid participants: Grow their knowledge of signs, symptoms and risk factors of mental illnesses and addictions, identify multiple types of professional and self-help resources for individuals with a mental health or substance use challenge, increase their confidence in and likelihood to help an individual in distress, show increased mental wellness themselves.</p> <p>To increase adult skill-building techniques to reduce adolescent panic attacks, suicidal thoughts or behaviors, nonsuicidal self-injury, acute psychosis (e.g., hallucinations or delusions), overdose or withdrawal from alcohol or drug use, reaction to a traumatic event</p> <p>(Goal 1)</p>	1		

## 2021-2022 Mental Health Application

<p><b>Zones of Regulation</b> is a metacognitive framework for regulation and treatment approach that is based on immense evidence in the fields of autism, attention deficit disorders (ADD/HD), and social-emotional theories. It integrates best practices around Trauma Informed Care and mental health supports and aligns with the CASEL SEL core competencies. The Zones integrates Systemizing Theory, Central Coherence Theory and Cognitive Behavior Management. It ties in Social Thinking®, visual supports and is a tool to build self-management skills. Some of these evidence-based practices are developmental in nature, while others are related to learning-styles, concepts or characteristics important to neurodiverse populations. Zones of Regulation is provided to all SDMC Emotional and Behavioral Disorder (EBD) classrooms.</p>	<p><b>Zones of Regulation</b> framework and curriculum teaches students scaffolded skills toward developing a metacognitive pathway to build awareness of their feelings/internal state and utilize a variety of tools and strategies for regulation, prosocial skills, self-care, and overall wellness. This includes exploring tools and strategies for mindfulness, sensory integration, movement, thinking strategies, wellness, and healthy connection with others. The Zones of Regulation provides students and teachers with a common language and compassionate framework to support positive mental health and skill development. Implementing Zones within the EBD classroom serves as an inclusion strategy for students who have experienced trauma, and/or have specific needs in terms of social, emotional, and behavioral development. Working with The Multiagency Network for Students with Emotional/Behavioral Disabilities (SEDNET) discretionary project, EBD teachers implement Zones into their classrooms.</p>	<p><b>Zones of Regulation:</b> Through the implementation of Zones of Regulation in the EBD classroom setting students will learn how to effectively self-regulate their emotions.</p> <p>To increase the ability to independently regulate emotions by:</p> <ul style="list-style-type: none"> <li>•Identifying emotions</li> <li>•Identifying triggers</li> <li>•Coping strategies</li> <li>•Problem-solving.</li> <li>•Expected behavior vs unexpected behavior:</li> </ul> <p>(Goal 2)</p>	<p>2</p>