



FLORIDA DEPARTMENT OF
EDUCATION
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2021-2022 Mental Health Application

Part I: Youth Mental Health Awareness Training Plan

Part II: Mental Health Assistance Allocation Plan

Walton County School District

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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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)	As most trainings will be offered during designated PD days, subs will not be needed.	\$0	\$0
2. Materials (Detail # of units x individual unit cost, plus shipping)	Clickers (presenter remotes) Ink/Toner Easel Pads (set of 4) Storage Boxes File Folders Shipping	13.66 each X6 94.40 each X4 70.01 each X2 22.68 each X6 9.99 each X2	\$81.96 \$377.60 \$140.02 \$136.08 \$19.98 \$6.56
3. National Council (YMHFA) Training (Detailed description of each training activity to include # of personnel and individual training costs)	YMHFA Trainings: In Person training with 2 instructors, up to 30 participants per training x8 YMHFA manuals Re-certification for 168 YMHF aiders, (Relias) by June 30, 2022	236 manuals @ \$18.95 per manual \$29.95	\$4472.20 \$5031.60
4. Additional Kognito Modules (Provide the name of training module and cost)	n/a		
TOTAL 2021-2022 BUDGET:			\$10,266
5. Additional narrative (optional):			

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 reduce the number of alternative school placements during SY 2021-2022 related to substance abuse, vaping by 6% using tiered intervention supports to include use of evidence-based core mental health education and targeted tier 2/3 intervention, including Suite 360 Intervention and mental health counseling.

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>WCSD will use Suite 360-Mental Health Suite for all students as a Tier 1 intervention to educate and address early identification of mental health and substance abuse disorders. This educational component will provide critical information while also assisting in identification of those students needing additional support. Students needing supplemental support will have access to Suite 360 Intervention, targeting specific areas of need related to skill deficits, mental health disorders to include alcohol, substance abuse and vaping.</p>	<p>The mental health suite includes lessons related to substance abuse. Most students receiving this education/training will be successful with this level of Tier 1 – school wide intervention. For those students caught vaping on campus, they will be referred to the American Heart Association Vaping education course, to include pre & post-tests, lessons/education on the medical risks associated with vaping. For those students that continue to engage in vaping, they will receive a referral to the district mental health counselor assigned to their school, in addition to the Suite 360 Intervention suite of in-depth lessons related specifically to vaping, as well as any other relevant lessons specific to areas of mental health struggles as identified by the mental health counselor. Students will also be referred to small group or individual counseling with the mental health counselor and/or transitional coach.</p>	<p>Providing both an educational training component, in addition to group or individual counseling with district providers will help students identify more appropriate coping mechanisms to deal with stress, better decision making processes, which will reduce the number of school related referrals to alternative school placement among at-risk youth, with outcome measures to include the review of data, looking for a decrease in number of referrals to alternative school placement.</p>	X	X	X

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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	1:628	1:628
School Social Worker	N/A	N/A
School Psychologist	1:2,800	1:2,200
Other Licensed Mental Health Provider	1:1,634	1:1,634

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.	Direct employment allows for increased access to mental health providers through regularly scheduled days assigned, to include problem solving with other school faculty/staff through established school-based problem solving MTSS team meetings
Describe your district’s established policies and procedures to increase the amount of time student services personnel spend providing direct mental health services (e.g., review and revision of staffing allocations based on school or student mental health assistance needs).	School Based Mental Health providers are housed directly at schools and spend the majority of their day working directly with students, providing individual and group counseling. Referrals, threat assessment, counseling service case loads are monitored closely to provide schools/students with support to meet the level of need at each school.
Describe the role of school based mental health providers and community-based partners in the implementation of your evidence based mental health program.	District mental health providers work directly with students to provide counseling and support within the school setting. They also link students to community resources. However, as wait lists are long for un/under insured students, school based mental health counseling helps provide a resource to students and families they would otherwise not be able to access.

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.

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

Mental Health Provider:	Agency:	Services Provided:	Funding Source:
Licensed therapists or registered interns working under supervision of a licensed supervisor	Chautauqua Healthcare Services (CAT)	Referral source for community base support/services for student/family	State Funded
Licensed therapists or registered interns working under supervision of a licensed supervisor	Mobile Response Team	Onsite or Telehealth crisis diversion services and wrap around support/services	State Funded
Master’s Level providers, to include BCaBA, registered Clinical Social Work Intern, working under supervision	School Based Healthcare Solutions Network	In-school Tier 2 small group direct counseling/educational training, support provided by master’s level clinicians	Grant Funded

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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:	\$502,431.72
School district expenditures for mental health services provided by contract-based collaborative efforts or partnerships with community-based mental health program agencies or providers:	\$0
Other expenditures (see below):	\$11,765.28
Total MHAA expenditures:	\$514,197

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

Type: Narrative description with detailed cost	Total Amount
Travel/Millage	\$6,020.28
Supplies/Materials	\$5,745.00
Total Other Expenditures:	\$11,765.28



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APPROVED BY

SEP - 7 2021

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on or before August 1, 2021

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Certification

This application certifies that the Walton County 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 (MSJD) 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

APPROVED BY

A. Russell Hughes
Printed Name of District Superintendent

SEP - 7 2021

WALTON COUNTY SCHOOL BOARD

9/7/2021

Board Approval Date