



2022-23 Mental Health Application

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

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Introduction

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 mentalhealth. This application is separated into two primary sections: Part II includes the YMHAT Plan and Part III includes the MHAA Plan.

Part II. Youth Mental Health Awareness Training Plan

In accordance with section (s.) 1012.584, Florida Statutes (F.S.), the YMHAT Plan 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 III. Mental Health Assistance Allocation Plan

In accordance with s. 1011.62, F.S., the MHAA Plan allocation is to assist districts with 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) by August 1, 2022.

There are two submission options for charter schools (MHAA Plan Only):

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

Part I: Youth Mental Health Awareness Training Plan and Projected Budget

YMHAT 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.

Currently Trained and Certified

In accordance with House Bill (HB) 1421 (2022), each school district shall submit a report to the Florida Department of Education (FDOE) confirming at least 80 percent of school personnel in elementary, middle, and high schools have received youth mental health awareness training. Additionally, as required in s. 1012.584, F.S., each school safety specialist shall ensure all school personnel within his or her school district receive youth mental health awareness and assistance training.

This report should include the total number and percentage of personnel trained district-wide, and those physically located at the elementary, middle and high schools. As a result, each district will report two sets of numbers:

- District-wide percentage and total number of personnel trained
- · School-wide percentage and total number of personnel trained

District Staff

Total # of employees 659

Total # of employees trained 203

Total percentage trained 31%

Elementary Schools

Total # of employees 2,402

Total # of employees trained 1,205

Total percentage trained 50%

Middle Schools

Total # of employees 566

Total # of employees trained 300

Total percentage trained 53%

High Schools

Total # of employees 1,227

Total # of employees trained 576

Total percentage trained 47%

Total Districtwide Personnel

Total # of employees 4,913

Total # of employees trained 2,284

Total percentage trained 47%

As of what date

Monday 7/11/2022

Explain the training goal(s) for the upcoming 2022-2023 school year.

Throughout the year YMHFA training opportunities will be offered in a variety of venues including but not limited to face to face, virtual, and blended options. School needs will be taken into consideration when trainings are offered. Schools with the lowest number of certified staff will be prioritized. YMHFA training opportunities will be offered during the school day, inservice day, planning days and early release days.

Annual Goal

In addition to the percentage listed above, the annual goal for the 2022-2023 school year is to train what percentage of employees?

35%

As of what date

Thursday 6/30/2022

Explain the training goal(s) for the next 3-5 years.

Achieving and maintaining the goal of 100% of all district staff trained in YMHFA requires an ongoing process to accommodate new and current staff. Clay County will continue to implement the district wide tracking of course completions and recertifications through our digital HR platform. Additional staff will become trainers in order to offer continual opportunities district wide for all staff to complete the YMHFA course. School principals and department leads will be responsible for ensuring that their staff have received YMHFA training and will receive support in reaching a goal of 100% of all staff through the district office's training program.

What is the procedure for training new personnel to the district?

During pre-employment new personnel will be given a schedule of upcoming YMHFA training opportunities that are available for them to meet this requirement. New personnel will be required to complete a YMHFA course within the first year of employment. Their completed certification will be recorded in the district's digital HR platform and tracked for future recertification needs.

Explain the district's plan for recertifying staff or maintaining certification of school district personnel.

YMHFA course completions will be recorded and tracked through the district's digital HR platform. Recertification opportunities through Relias will be offered on a regular basis when needed in order for all district personnel to maintain their YMHFA certifications.

YN	IHAT Projected Budget		
1	Stipends		\$0.00
2	Employees		\$10,150.00
	Budget Narrative	Per Employee	2022-23
	70 instructional staff will be provided with substitutes for their scheduled YMHFA training days.	\$145.00	\$10,150.00
3	Materials		\$29,727.00
	Budget Narrative	Per Unit	2022-23
	1020 Youth Mental Health First Aid Manuals and Guides for face to face course.	\$28.90	\$29,478.00
	Copy Paper, markers, etc.	\$0.00	\$249.00
4	National Council (YMHFA) Training		\$14,612.00
	Budget Narrative	Per Employee	2022-23
	360 Youth Mental Health First Aid blended course participants.	\$23.95	\$8,622.00
	200 Youth Mental Health First Aid recertifications.	\$29.95	\$5,990.00
		Total:	\$54,489.00

Part II: Mental Health Assistance Allocation Plan

s. 1011.62, F.S.

MHAA Plan Assurances

The District Assures

One hundred percent of state funds are used to establish or expand school-based mental health care; train educators and other school staff in detecting and responding to mental health issues; and connect children, youth and families with appropriate behavioral health services.

Yes

Mental health assistance allocation funds do not supplant other funding sources or increase salaries or provide staff bonuses or incentives.

Yes

Maximizing the use of other sources of funding to provide school-based mental health services (e.g., Medicaid reimbursement, third-party payments and grants).

Yes

Collaboration with FDOE to disseminate mental health information and resources to students and families.

Yes

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.

Yes

Review for compliance the Mental Health Assistance Allocation Plans submitted by Charter Schools who opt out of the District's MHAAP.

Yes

A school board policy or procedure has been established for

Students referred to a school-based or community-based mental health services provider, for mental health screening for the identification of mental health concerns and students at risk for mental health disorders are assessed within 15 calendar days of referral.

Yes

School-based mental health services are initiated within 15 calendar days of identification and assessment.

Yes

Community-based mental health services are initiated within 30 calendar days of referral.

Yes

Individuals living in a household with a student receiving services are provided information about behavioral health services through other delivery systems or payors for which such individuals may qualify if such services appear to be needed or enhancements in those individuals' behavioral health would contribute to the improved well-being of the student.

Yes

District schools and local mobile response teams use the same suicide screening instrument approved by FDOE pursuant to s. 1012.583, F.S., and Rule 6A-40010, Florida Administrative Code.

Yes

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. Such procedures 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.

Yes

The requirement that in a student crisis situation, the school or law enforcement personnel must make a reasonable attempt to contact a mental health professional who may initiate an involuntary examination pursuant to s. 394.463, F.S., unless the child poses an imminent danger to self or others before initiating an involuntary examination pursuant to s. 394.463, F.S. Such contact may be in person or using telehealth, as defined 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. Note: All initiated involuntary examinations located on school grounds, on school transportation or at a school sponsored activity must be documented in the Involuntary Examinations and Restraint and Seclusion (IERS) platform.

Yes

Parents of students receiving services are provided information about other behavioral health services available through the student's school or local community-based behavioral health service providers. Schools may meet this requirement by providing information about and internet addresses for web-based directories or guides for local behavioral health services.

Yes

Planned Outcomes

Identify two specific and measurable goals that will be accomplished within the 2022-23 school year, and specify which component of District Assurance 1.a. directs that goal (refer to the Guidance Tab if needed).

1) Expand and increase the overall number of students who receive mental health and support services by the addition of 4 mental health staff, the addition of 3 school social workers and the continued use of the third party referral source through Flagler Health. The increase of mental health staff will bring the total district mental health staff to ten. These mental health clinicians will be serving students who do not have Medicaid or face barriers to receiving therapeutic services in the community. The district mental health clinicians will primarily use the evidenced based modalities of Cognitive Behavior Therapy and Solution Focused Therapy to reduce individual symptoms and behaviors that impeded students' academic success and developmental progress. Progress will be measured through the use of pre and post assessment scales. We expect to see the overall number of students provided with mental health services to increase by 50%. Data gathered from referrals made into the Flagler Health System will be compared with the previous 21-22 school year to determine this increase. The increase in school social work staff will bring the district social work staff to 20. The school social workers are instrumental in providing Tier 2 services to students and families that often serves as a preventative barrier for students elevating to more intensive needs. We expect to see the overall number of students provided with social work services increase by 20%. Data gathered from our student information system will be compared with the previous 21-22 school year to determine the increase.

2) Identify students exposed to trauma in order to provide trauma specific mental health services to reduce trauma related behaviors and symptoms that interfere with academic atmosphere. Students will be identified using a screening tool for the evidenced based program Cognitive Behavioral Interventions for Trauma in Schools (CBITS). This will be measured comparing data regarding the number of students receiving trauma specific mental health services and number of suspensions from the previous 21-22 school year. By continuing to provide this service, we expect to see an overall increase in mental health services to trauma exposed students by 20% and a reduction in overall suspensions by 10%. Data from mental health referrals for this program will be used as well as discipline data from our student information system to measure these expectations.

District Program Implementation

Post-Traumatic Stress Disorder (PTSD), depression, and general
ms, services, policies and strategies. Frauma in Schools (CBITS) is a skills-based, child group intervention Post-Traumatic Stress Disorder (PTSD), depression, and general ultiple forms of trauma. CBITS has been used with students from 5th ed or experienced traumatic life events such as community and -made disasters. ent evidence-based mental health services for students to improve otional, behavioral problems or substance use disorders, as well as eloping social, emotional, behavioral problems, depression, anxiety
ultiple forms of trauma. CBITS has been used with students from 5th ed or experienced traumatic life events such as community and -made disasters. ent evidence-based mental health services for students to improve otional, behavioral problems or substance use disorders, as well as eloping social, emotional, behavioral problems, depression, anxiety
otional, behavioral problems or substance use disorders, as well as eloping social, emotional, behavioral problems, depression, anxiety
nts to complete a brief screening instrument to determine students consists of ten group sessions (6-8 children/group) of approximately once a week in a school setting. In addition to the group sessions, sions, usually held before the exposure exercises. CBITS also as and one teacher education session. CBITS teaches six cognitive- ut reactions to trauma, relaxation training, cognitive therapy, real life and social problem-solving. Qualified mental health professionals e this program.
iver evidence-based mental health care assessment, diagnosis, services to students with one or more mental health or co-occurring noses and to students at high risk of such diagnoses.

Students participating in CBITS program will be monitored for progress, as well as assessed for additional needs including mental health supports and services beyond the CBITS program sessions. River's Edge Counseling will provide the additional needed services and/or refer the student to the school social worker and/or make a referral through Flagler Health.

Evidence-Based Program	Cognitive Behavioral Therapy
Tiers of Implementation	Tier 2, Tier 3
	nents that will be implemented as well as any related activities, curricula, programs, services, policies and strategies.
be effective for a range of probl mental illness. Numerous resea functioning and quality of life. In	CBT) is a form of psychological treatment that has been demonstrated to ems including depression, anxiety disorders, eating disorders, and severe inch studies suggest that CBT leads to significant improvement in a many studies, CBT has been demonstrated to be as effective as, or more sychological therapy or psychiatric medications.
the early identification of socia the likelihood of at-risk studen	mplement evidence-based mental health services for students to improve al, emotional, behavioral problems or substance use disorders, as well as ts developing social, emotional, behavioral problems, depression, anxiety es, and how these will assist students dealing with trauma and violence.
weekly basis for 8-10 weeks. C strategies might include: learnin then to reevaluate them in light others, using problem-solving s sense of confidence in one's ow patterns. These strategies migh	neet with students who have been referred for mental health services on a BT treatment can involve efforts to change thinking patterns. These ing to recognize one's distortions in thinking that are creating problems, and of reality, gaining a better understanding of the behavior and motivation of kills to cope with difficult situations, and learning to develop a greater vn abilities. CBT treatment may also involve efforts to change behavioral at include: facing one's fears instead of avoiding them, using role playing to atic interactions with others, and learning to calm one's mind and relax
intervention, treatment, and rec	will deliver evidence-based mental health care assessment, diagnosis, covery services to students with one or more mental health or co-occurring e diagnoses and to students at high risk of such diagnoses.

District mental health staff will monitor students' progress through the use of pre and post assessments through the duration of services. If student results reflect a need for additional or more intensive services, mental health staff will work with families to ensure that additional services and supports are provided or referred as needed.

Tiers of Implementation	Tion 4
noro or implomentation	Tier 1
•	programs, services, policies and strategies.
decision making, self-awareness are mapped to grade-specific le provide mental health education	ence-baked, with content aligned to the competencies of responsible ss, social awareness, self-management, and relationship skills. Lessons earning objectives published by various federal and state boards. Lessons n to students in grades 6-12 on a wide variety of topics including mental o when they or someone they care about experiences symptoms of a
the early identification of sociation the likelihood of at-risk studen	mplement evidence-based mental health services for students to improve al, emotional, behavioral problems or substance use disorders, as well as its developing social, emotional, behavioral problems, depression, anxiety es, and how these will assist students dealing with trauma and violence.
A series of seven lessons design topics will be presented once a areas. Each lesson emphasizes providing a comprehensive Tea 360: Mental Health library inclu disorders and reducing stigma, assistance, awareness of local strategies to develop healthy co	gned to provide students with an overview of important mental healthcare month throughout the 22-23 school year by instructors in various subject s a student's need to take action to help themselves or others while also acher Companion Guide for each lesson to support teachers. The Suite des lessons on: recognizing signs and symptoms of mental health prevention of mental health disorders and mental health awareness and and community resources and the process for accessing treatment, oping techniques, strategies to support a peer, friend, or family member prevention of suicide, and substance abuse prevention.
A series of seven lessons design topics will be presented once a areas. Each lesson emphasizes providing a comprehensive Tea 360: Mental Health library inclu disorders and reducing stigma, assistance, awareness of local strategies to develop healthy co with a mental health disorder, p Explain how the supports of intervention, treatment, and red	gned to provide students with an overview of important mental healthcare month throughout the 22-23 school year by instructors in various subject s a student's need to take action to help themselves or others while also acher Companion Guide for each lesson to support teachers. The Suite des lessons on: recognizing signs and symptoms of mental health prevention of mental health disorders and mental health awareness and and community resources and the process for accessing treatment, oping techniques, strategies to support a peer, friend, or family member

Evidence-Based Program	N/A
Tiers of Implementation	Tier 1
Describe the key EBP compo	programs, services, policies and strategies.
N/A	
the early identification of soci	implement evidence-based mental health services for students to improve al, emotional, behavioral problems or substance use disorders, as well as nts developing social, emotional, behavioral problems, depression, anxiety
·	es, and how these will assist students dealing with trauma and violence.
N/A Explain how the supports intervention, treatment, and re	

Direct Employment

MHAA Plan Direct Employment

School Counselor

Current Ratio as of August 1, 2022 **1:472**

2022-2023 proposed Ratio by June 30, 2023 1:472

School Social Worker

Current Ratio as of August 1, 2022 **1:2333**

2022-2023 proposed Ratio by June 30, 2023 1:1984

School Psychologist

Current Ratio as of August 1, 2022 **1:2204**

2022-2023 proposed Ratio by June 30, 2023 1:2204

Other Licensed Mental Health Provider

Current Ratio as of August 1, 2022 **1:6612**

2022-2023 proposed Ratio by June 30, 2023 **1:3967**

Direct employment policy, roles and responsibilities

Explain how direct employment of school-based mental health services providers (school psychologists, school social workers, school counselors and other licensed mental health professionals) will reduce staff-to-student ratios.

The increased number of district mental health staff enables an increase in overall students to be served through individual and group services, case management, and referral resources. The additional staff proposed for the 22-23 school year creates a ratio of 1:300 in total mental health service providers.

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).

To ensure student needs are met data is reviewed quarterly by district staff. Data reviewed includes, but is not limited to: number of Columbia-Suicide Severity Assessments conducted, Mobile Response Team referrals, mental health referrals to school based and community based providers, Climate and Culture student surveys, and Climate and Culture staff surveys from all Clay County schools. The data is reviewed to look for county trends and to indicate specific needs at a school or needs in a geographical area. Once needs are identified, adjustments are made to increase staffing, contracted services, or implement lessons on mental health topics.

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

School based and community based mental health counselors provide tier 2 and 3 interventions for students in need of additional support. Additionally, school based mental health counselors provide crisis response services in the event of a student or staff death and/or tragedy.

Community Contracts/Interagency Agreements

List the contracts or interagency agreements with local behavioral health providers or Community Action Team (CAT) services and specify the type of behavioral health services being provided on or off the school campus.

Agreement MOUs and contracts are in process with listed community partners to provide district mental health services to students on school site on an as needed basis in a delivery format that is most appropriate for the given situation (group,individual). Included in the contracts is the implementation of Cognitive Behavioral Intervention for Trauma in Schools (CBITS). A shared funding model between the agencies and the district will capitalize on Medicaid funding options. These agencies all employ staff who are licensed or registered under Chapter 491 and the Florida Department of Health to provide clinical, counseling, and psychotherapy services. Additionally, significant funds are being allocated to Flagler Health to cover non insured services for students. Flagler Health's Care Connect+ uses the B.R.A.V.E. platform as a referral hub that links all district mental health referrals with the appropriate community provider depending on geography, insurance status, and overall need.

Community Partners

Clay Behavioral Health Center: contract for onsite services at select schools River's Edge Counseling: contract for onsite services and CBITS at select schools Flagler Health: contract for coverage of non insured student services Right Path Behavioral: MOU for onsite services as needed per referrals Children's Home Society: MOU for onsite services as needed per referrals Youth Crisis Center: MOU for onsite services as needed per referrals

MHAA Planned Funds and Expenditures

Allocation Funding Summary

MHAA funds provided in the 2022-2023 Florida Education Finance Program (FEFP) \$ 1,856,347.00

Unexpended MHAA funds from previous fiscal years as stated in your 2021-2022 MHAA Plan \$ 1,101,441.00

Grand Total MHAA Funds

\$ 2,957,788.00

MHAA planned Funds and Expenditures Form

Please complete the MHAA planned Funds and Expenditures Form to verify the use of funds in accordance with (s.) 1011.62 Florida Statues.

The allocated funds may not supplant funds that are provided for this purpose from other operating funds and may not be used to increase salaries or provide bonuses. School districts are encouraged to maximize third-party health insurance benefits and Medicaid claiming for services, where appropriate.

The following documents were submitted as evidence for this section:

MHAA_Planned_Expenditures_Report_2022-2023_(1).pdf *Clay County MHAA Funds and Expenditures Form* Document Link

School District Certification

This application certifies that the **Clay County Schools** School Superintendent and School Board approved the district's Mental Health Assistance Allocation Plan, which outlines the local program and planned expenditures to establish or expand school-based mental health care consistent with the statutory requirements for the mental health assistance allocation in accordance with section 1011.62(14), F.S.

Note: The charter schools listed below have **Opted Out** of the district's Mental Health Assistance Allocation Plan and are expected to submit their own MHAAP to the District for review.

Charter Schools Opting Out

0667 - St Johns Classical Academy

School Board Approval Date Monday 7/11/2022