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## Introduction

### Mental Health Assistance Allocation Plan

s. 1006.041, 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

Other sources of funding will be maximized-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

A system is included 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

Yes

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

Yes

Curriculum and materials purchased using MHAA funds have received a thorough review and all content is in compliance with State Board of Education Rules and Florida Statutes.

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-4.0010, F.A.C.

Yes

Assisting a mental health services provider or a behavioral health provider as described ins. 1006.041, 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 ins. 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 ins. 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, 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

The Mental Health Assistance Allocation Plan must be focused on a multitiered system of supports to 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. s. 1006.041, F.S.

Yes

## District Program Implementation

<b>Evidence-Based Program</b>	Positive Behavior Interventions and Supports (PBIS)
<b>Tier(s) of Implementation</b>	Tier 1, Tier 2, Tier 3
Describe the key EBP components that will be implemented.	
<ul style="list-style-type: none"> <li>• A district PBIS support team provides ongoing professional learning and guidance to school-based teams through collaboration with the University of South Florida (USF)/PBIS project. These plans include specific behavioral interventions at Tier I, II, and III, in alignment with Response to Intervention (RtI). These interventions are tied with resiliency and mental health supports. The data from these interventions is routinely reviewed at School Wide Support Team (SWST) meetings and Children at Risk in Education (CARE) team meetings.</li> <li>• The district PBIS team has a set of behavioral expectations that set the framework and structure for school-based alignment throughout our district.</li> <li>• Every school has a PBIS team that meets on a regular basis along with a PBIS coach to ensure the implementation of school wide PBIS. PBIS teams include an administrator, instructional and support staff, students, and parents/guardians.</li> <li>• Sarasota County has a PBIS district team which consists of representation from each department and parents.</li> <li>• Quarterly district-wide PBIS Coaches professional learning.</li> <li>• Implementation of a monitoring system which allows teams to analyze risk data.</li> <li>• Student Service Program Managers will work with school-based teams using the Benchmarks of Quality and Tiered Fidelity Inventory to ensure implementation of PBIS at each Tier.</li> </ul>	
<p>Explain how your district will implement evidence-based mental health services for students to improve the early identification of social, emotional, or behavioral problems or substance use disorders, as well as the likelihood of at-risk students developing social emotional or behavioral problems, depression, anxiety disorders or suicidal tendencies, and how these will assist students dealing with trauma and violence.</p>	
<ul style="list-style-type: none"> <li>• Schoolwide PBIS Plans will be presented to the school-based Student Advisory Committees (SACs) and Parent Teacher Organization (PTOs) to ensure family awareness and participation.</li> <li>• Quarterly professional learning for school based PBIS coaches.</li> <li>• School PBIS Plans are posted on the district website.</li> </ul>	
<p>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.</p>	
<ul style="list-style-type: none"> <li>• This is a tier 1 implementation program- Schools are utilizing resiliency lessons aligned with Resiliency Standards.</li> </ul>	

<b>Evidence-Based Program</b>	Resiliency Florida (Buildingresiliency.org)
<b>Tier(s) of Implementation</b>	Tier 1
Describe the key EBP components that will be implemented.	
<p>Florida is leading a first-in-the-nation approach that empowers students to persevere and overcome life’s inevitable challenges. The Florida Department of Education (FLDOE) developed state education standards and resources to equip students with skills that build resiliency. FLDOE has identified the following 11 resiliency characteristics to help children overcome challenges: Perseverance, Grit, Gratitude, Responsibility, Responsible Decision Making, Critical Thinking &amp; Problem Solving, Self-Awareness &amp; Self-Management, Mentorship, Citizenship, Honesty, and Empathy.</p>	
<p>Explain how your district will implement evidence-based mental health services for students to improve the early identification of social, emotional, or behavioral problems or substance use disorders, as well as the likelihood of at-risk students developing social emotional or behavioral problems, depression, anxiety disorders or suicidal tendencies, and how these will assist students dealing with trauma and violence.</p>	
<ul style="list-style-type: none"> <li>• Summer work groups are scheduled to create lessons aligned with FLDOE resiliency standards.</li> <li>• School counselors and other support staff will provide classroom lessons aligned to the Resiliency standards by utilizing FLDOE Resiliency Toolkit as the primary resource.</li> <li>• Parent resources for all the resiliency characteristics are available on the Sarasota County Schools website, by searching Student Services and selecting family resources.  <a href="https://www.sarasotacountyschools.net/o/scs/page/family-resources">https://www.sarasotacountyschools.net/o/scs/page/family-resources</a> </li> </ul>	
<p>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.</p>	
<p>This is a tier 1 implementation program.</p>	

<b>Evidence-Based Program</b>	Teacher’s Encyclopedia of Behavior Management: 100 Problems/500 Plans (Safe and Civil Schools)
<b>Tier(s) of Implementation</b>	Tier 2
Describe the key EBP components that will be implemented.	
<p>This resource from Safe and Civil Schools provides evidence-based intervention plans for common challenging behaviors in schools:</p> <ul style="list-style-type: none"> <li>• Verbal conflict</li> <li>• Social conflict</li> <li>• Forgetting Materials</li> <li>• Homework Issues</li> <li>• Difficulty with Transitions</li> <li>• Work completion</li> <li>• Misuse of electronics</li> <li>• Cyberbullying</li> <li>• Skipping Class/Attendance</li> </ul>	
<p>Explain how your district will implement evidence-based mental health services for students to improve the early identification of social, emotional, or behavioral problems or substance use disorders, as well as the likelihood of at-risk students developing social emotional or behavioral problems, depression, anxiety disorders or suicidal tendencies, and how these will assist students dealing with trauma and violence.</p>	
<p>School-wide support teams at each school will meet and review relevant student data (discipline events, bullying incidents, behavior threat assessment documentation, teacher and parent reports) to identify students who may be at-risk for behavioral problems, and could benefit from systematic skill instruction utilizing the Teacher’s Encyclopedia lesson plans as part of their tiered intervention plan; within the Muti-Tiered System of Support (MTSS) framework implemented at each school. Some students will work in small groups with peers, participating in role playing and building skills that will support school success and resilience. Signed parental consent on the district’s Notice of Intervention (NoI) document is required prior to implementing the Teacher’s Encyclopedia of Behavior Management.</p>	
<p>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.</p>	
<p>Research suggests that students who receive tiered, early direct instruction in needed skills show decreased risk for out-of-school suspension, suicide risk, behavioral threat risk and improved social skills with peers, teachers and academic success. Students who receive specific skill instruction when deficits are identified are less likely to engage in bullying behavior and have improved resiliency. School-based mental health providers and building-based behavior coaches will use the Teacher’s Encyclopedia materials as a tiered intervention to students who exhibit behavioral and social challenges. This will allow for additional observation, progress-monitoring and opportunities for staff to refer students to additional mental health counseling or assessment based on their response to this EBP.</p>	

<b>Evidence-Based Program</b>	Check-in/Check-out (CICO)
<b>Tier(s) of Implementation</b>	Tier 2
Describe the key EBP components that will be implemented.	
<p>An evidence-based intervention that provides a structured process for frequent feedback on school-wide expectations in a daily progress report. This includes a.) increasing prompts to the student for desirable behavior, b.) increasing adult feedback, c.) improving the structure of the student’s schedule, and d.) facilitating feedback between students, their teachers, and their parents.</p>	
<p>Explain how your district will implement evidence-based mental health services for students to improve the early identification of social, emotional, or behavioral problems or substance use disorders, as well as the likelihood of at-risk students developing social emotional or behavioral problems, depression, anxiety disorders or suicidal tendencies, and how these will assist students dealing with trauma and violence.</p>	
<p>School PBIS teams will receive ongoing training and technical assistance to develop and maintain a Tier 2 CICO system. Successful implementation includes:</p> <ol style="list-style-type: none"> <li>1. Morning check-in with a CICO Mentor</li> <li>2. Monitoring, Evaluation, and Feedback allowing the teacher to communicate with the CICO mentor and parent on a point card.</li> <li>3. End of day check-out with the CICO mentor</li> <li>4. Parent/family feedback and participation (Signed parental consent on the district’s Nol document is required prior to implementing CICO.)</li> </ol>	
<p>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.</p>	
<p>The goal is to prevent future problem behavior by checking in with students daily to share clear expectations, feedback, and support and can be implemented by teachers in less than 10 minutes per day.</p>	



<b>Evidence-Based Program</b>	Student Assistance Program (SAP)
<b>Tier(s) of Implementation</b>	Tier 2
Describe the key EBP components that will be implemented.	
<p>The SAP is an evidence-based approach based on an employee assistance model that provides school-based prevention and engagement services designed to assist students when dealing with issues that impede academic achievement. Prior to referring a student to a SAP specialist, the parent/guardian is provided the pre and post survey that the SAP specialist will utilize when working with students. SCS staff must obtain signed parental consent prior to referring to a SAP specialist.</p>	
<p>Explain how your district will implement evidence-based mental health services for students to improve the early identification of social, emotional, or behavioral problems or substance use disorders, as well as the likelihood of at-risk students developing social emotional or behavioral problems, depression, anxiety disorders or suicidal tendencies, and how these will assist students dealing with trauma and violence.</p>	
<p>Sarasota County's SAP Specialists are staff employed by Light Share and are housed at each high school. There is regular and frequent collaboration with the SWST facilitator. SAP Specialists deliver substanceuse prevention, mental health prevention/intervention services and connect students to community providers for more intensive services. Using a systems approach, the SAP Specialists use effective practices to resolve these issues.</p>	
<p>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.</p>	
<p>An increase in student emotional well-being and academic success as measured by SAP quarterly reports and student SAP satisfaction surveys.</p>	

<b>Evidence-Based Program</b>	Zones of Regulation
<b>Tier(s) of Implementation</b>	Tier 2
Describe the key EBP components that will be implemented.	
<p>The Zones of Regulation is the original framework and curriculum (Kuypers, 2011) that develops awareness of feelings, energy and alertness levels while exploring a variety of tools and strategies for regulation, prosocial skills, self-care, and overall wellness. This curriculum provides us an easy way to think and talk about how we feel on the inside and sort these feelings into four colored Zones, all of which are expected in life. Once we understand our feelings and zones, we can learn to use tools/strategies to manage our different Zones to meet goals, like doing schoolwork or other tasks, managing big feelings, and healthy relationships with others. The simple, common language and visual structure of The Zones of Regulation helps make the complex skill of regulation more concrete for learners and those who support them.</p>	
<p>Explain how your district will implement evidence-based mental health services for students to improve the early identification of social, emotional, or behavioral problems or substance use disorders, as well as the likelihood of at-risk students developing social emotional or behavioral problems, depression, anxiety disorders or suicidal tendencies, and how these will assist students dealing with trauma and violence.</p>	
<p>School counselors, school psychologists, school social workers, behavior coaches, and behavior intervention coaches will all receive Zones of Regulation professional learning. All educators providing summer school are trained on Zones and provided materials to aide in expansion of this EBP in Sarasota. Signed parental consent on the district's Nol document is required prior to implementing Zones of Regulation.</p>	
<p>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.</p>	
<p>Trained staff will provide this intervention for small groups and individual students. Students will be identified through SWST team as school sites.</p>	

<b>Evidence-Based Program</b>	Motivational Interviewing
<b>Tier(s) of Implementation</b>	Tier 2, Tier 3
Describe the key EBP components that will be implemented.	
<p>Motivational interviewing (MI) is a guided, student-centered counseling approach used to facilitate motivation and confidence in our students to make positive changes resulting in increased academic performance.</p>	
<p>Explain how your district will implement evidence-based mental health services for students to improve the early identification of social, emotional, or behavioral problems or substance use disorders, as well as the likelihood of at-risk students developing social emotional or behavioral problems, depression, anxiety disorders or suicidal tendencies, and how these will assist students dealing with trauma and violence.</p>	
<p>Behavior coaches, behavior intervention coaches, school counselors, school psychologists, and school social workers will participate in Motivational Interviewing professional learning, which prepares them to become the school-based facilitators. Through the School Wide Support Team (SWST), students struggling to meet behavior expectations will be identified proactively. The above-mentioned support team will identify which team member will provide the tier 2/3 intervention with the student and its frequency and duration. Signed parental consent on the district’s Nol document is required prior to implementing Motivational Interviewing.</p>	
<p>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.</p>	
<ul style="list-style-type: none"> <li>• Increase in academic engagement as measured by office discipline referrals and suspensions.</li> <li>• Increased attendance rates measured by daily attendance rate.</li> <li>• Increased parent participation in the problem-solving process.</li> </ul>	

<b>Evidence-Based Program</b>	MindSet Safety Management- Verbal De-escalation
<b>Tier(s) of Implementation</b>	Tier 1, Tier 2, Tier 3
Describe the key EBP components that will be implemented.	
<p>The MindSet Safety Management Curriculum is structured around four guiding principles for a culture of prevention:</p> <ul style="list-style-type: none"> <li>• <b>Promote Choice and Trust</b></li> <li>• <b>Avoid Power Struggles</b></li> <li>• <b>Seek Pro-Action vs. Re-Action</b></li> <li>• <b>Set-up Everyone for Success</b></li> </ul> <p>The MindSet safety management curriculum is guided by 5 critical tenets:</p> <p><b>Punitive Measures are not appropriate</b>  <b>Emphasize everyone’s strengths to maximize safe environment</b>  <b>A Crisis situation is a learning opportunity</b>  <b>Consistency is Essential</b>  <b>Empowerment fosters learning and trust</b></p> <p>In SCS, every campus with ESE specialized programs has at least one certified MindSet trainer on campus to ensure yearly professional learning and refresher sessions are provided to core team, ESE classroom staff and all student services staff. Schools without specialized ESE programs send their core team to frequently offered district-level MindSet trainings to ensure a culture of prevention, student dignity, de-escalation and consistency is maintained within our organization.</p>	
<p>Explain how your district will implement evidence-based mental health services for students to improve the early identification of social, emotional, or behavioral problems or substance use disorders, as well as the likelihood of at-risk students developing social emotional or behavioral problems, depression, anxiety disorders or suicidal tendencies, and how these will assist students dealing with trauma and violence.</p>	
<p>Every school in Sarasota has a core team (SRO, admin, behavior coach, psychologist, social worker, school counselors and all ESE staff) who are trained yearly in either MindSet Foundations (prevention, verbal de-escalation and the 4-step counseling model) or MindSet Full Curriculum (prevention, verbal de-escalation, as well as physical intervention strategies to be used as a last resort for safety management). The district office maintains records of all MindSet trained staff in the county.</p>	
<p>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.</p>	
<ul style="list-style-type: none"> <li>• Increase in academic engagement as measured by office discipline referrals and suspensions.</li> <li>• Increased attendance rates measured by daily attendance rate.</li> <li>• Increased parent participation in the problem-solving process.</li> </ul>	

<b>Evidence-Based Program</b>	Coping Cat- Cognitive Behavior Intervention in Schools
<b>Tier(s) of Implementation</b>	Tier 2, Tier 3
Describe the key EBP components that will be implemented.	
School based, group and individual intervention is designed to reduce symptoms of PTSD, depression, and behavioral problems and to improve functioning, grades, attendance, peer, and parent/ family support.	
Explain how your district will implement evidence-based mental health services for students to improve the early identification of social, emotional, or behavioral problems or substance use disorders, as well as the likelihood of at-risk students developing social emotional or behavioral problems, depression, anxiety disorders or suicidal tendencies, and how these will assist students dealing with trauma and violence.	
Coping Cat is a cognitive behavioral intervention for children with anxiety. It incorporates four components: recognizing emotional and physical reactions to anxiety, clarifying thoughts and feelings, developing plans for coping, evaluating performance, and giving self-reinforcement. School psychologists implement this intervention in the high school setting when students are referred through the School Wide Support Team (SWST). Signed parental consent on the district’s NoI document is required prior to implementing Coping Cat.	
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.	
<ul style="list-style-type: none"> <li>• Increase in academic engagement as measured by office discipline referrals and suspensions.</li> <li>• Increase in school attendance rates as measured by district attendance tracking reports.</li> </ul>	

<b>Evidence-Based Program</b>	Teen Court
<b>Tier(s) of Implementation</b>	Tier 2, Tier 3
Describe the key EBP components that will be implemented.	
<p>Teen Court provides school-based prevention and engagement services designed to assist students when dealing with issues that impede academic achievement. Prior to referring a student for Teen Court Services SCS employees obtain signed parental consent.</p>	
<p>Explain how your district will implement evidence-based mental health services for students to improve the early identification of social, emotional, or behavioral problems or substance use disorders, as well as the likelihood of at risk students developing social emotional or behavioral problems, depression, anxiety disorders or suicidal tendencies, and how these will assist students dealing with trauma and violence.</p>	
<p>Six Teen Court client coordinators and one Program Manager to facilitate referrals will be employed through Teen Court. Each Client Coordinator is assigned to one feeder middle school and high school.</p>	
<p>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.</p>	
<ul style="list-style-type: none"> <li>* Healthy Digital Practices Group (Social media responsibility-adult facilitator)</li> <li>* Life Skills Group (Goal Setting &amp; Mission defining-adult facilitator)</li> <li>*Peer Circle (Career, Education and Communication groups with an adult facilitator)</li> <li>*Teen Court Sessions (Justice for Youth-by-Youth court sessions) offered in the evenings 4 times per month.</li> <li>*CAMP X-RAYD (Reality Tour of Consequences/or substance abuse program) with 4 week follow up Substance Abuse Education Group Classes (adult facilitator).</li> <li>*Mental Health Counseling (individual and family). Approximately 100 students (annually) will receive free mental health counseling as indicated in the initial intake assessment and with signed parental consent, with the families. Teen Court has a network of providers that are contracted out to provide shorter waiting periods at a reduced rate for our most at-risk youth.</li> </ul>	

<b>Evidence-Based Program</b>	Skillstreaming the Elementary School Child: A Guide for Teaching Prosocial Skills
<b>Tier(s) of Implementation</b>	Tier 2 and Tier 3
Describe the key EBP components that will be implemented.	
<p>Students with behavioral skill deficits and social skill deficits benefit from systematic, direct instruction in lacking skills. Skillstreaming employs a four-part training approach—modeling, role-playing, performance feedback, and generalization—to teach essential prosocial skills to children and adolescents. The skill areas that will be taught to students include:</p> <ul style="list-style-type: none"> <li>* Classroom Survival Skills</li> <li>* Friendship-Making Skills</li> <li>* Skills for Dealing with Feelings</li> <li>* Skill Alternatives to Aggression</li> <li>* Skills for Dealing with Stress</li> </ul>	
<p>Explain how your district will implement evidence-based mental health services for students to improve the early identification of social, emotional, or behavioral problems or substance use disorders, as well as the likelihood of at risk students developing social emotional or behavioral problems, depression, anxiety disorders or suicidal tendencies, and how these will assist students dealing with trauma and violence.</p>	
<p>School-wide support teams at each school will meet and review relevant student data (discipline events, bullying incidents, teacher and parent reports) to determine students who may be at-risk for behavioral problems, and could benefit from systematic skill instruction utilizing the Skillstreaming curriculum as part of their tiered intervention plan; within the MTSS framework implemented at each school. Some students will work in small groups with peers, participating in role playing and building social relationships with each other. Some students will work in 1:1 or daily intervention sessions with our school-based mental health providers, based on level of need. Signed parental consent on the district’s Nol document is required prior to implementing Skillstreaming the Elementary School Child.</p>	
<p>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.</p>	
<p>Skillstreaming lessons can be delivered in small groups or individually, based on student need and intensity of required intervention. Research suggests that students who receive tiered, early direct instruction in needed skills show decreased risk for out-of-school suspension, suicide risk, behavioral threat risk and improved social skills with peers, teachers and academic success. Students who receive specific skill instruction when deficits are identified, are less likely to engage in bullying behavior and have improved resiliency. School-based mental health providers will be utilizing Skillstreaming as a tiered intervention to students who exhibit behavioral and social challenges. This will allow for additional observation, progress-monitoring and opportunities for staff to refer students to additional mental health counseling or assessment based on their response to this EBP.</p>	

<b>Evidence-Based Program</b>	Skillstreaming the Adolescent: A Guide for Teaching Prosocial Skills
<b>Tier(s) of Implementation</b>	Tier 2 and Tier 3
Describe the key EBP components that will be implemented.	
<p>Skillstreaming the Adolescent will be offered to our middle and high school students in tiered intervention groups, or individually. Students with behavioral skill deficits and social skill deficits benefit from systematic, direct instruction in lacking skills. Skillstreaming employs a four-part training approach—modeling, role-playing, performance feedback, and generalization—to teach essential prosocial skills to children and adolescents. The skill areas that will be taught to students include:</p> <ul style="list-style-type: none"> <li>* Classroom Survival Skills</li> <li>* Friendship-Making Skills</li> <li>* Skills for Dealing with Feelings</li> <li>* Skill Alternatives to Aggression</li> <li>* Skills for Dealing with Stress</li> </ul>	
<p>Explain how your district will implement evidence-based mental health services for students to improve the early identification of social, emotional, or behavioral problems or substance use disorders, as well as the likelihood of at risk students developing social emotional or behavioral problems, depression, anxiety disorders or suicidal tendencies, and how these will assist students dealing with trauma and violence.</p>	
<p>School-wide support teams at each school will meet and review relevant student data (discipline events, bullying incidents, behavior threat assessment documentation, teacher and parent reports) to determine students who may be at-risk for behavioral problems, and could benefit from systematic skill instruction utilizing the Skillstreaming curriculum as part of their tiered intervention plan; within the MTSS framework implemented at each school. Some students will work in small groups with peers, participating in role playing and building social relationships with each other. Some students will work in 1:1 or daily intervention sessions with our school-based mental health providers, based on level of need. Signed parental consent on the district’s Nol document is required prior to implementing Skillstreaming the Adolescent.</p>	
<p>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.</p>	
<p>Skillstreaming lessons can be delivered in small groups or individually, based on student need and intensity of required intervention. Research suggests that students who receive tiered, early direct instruction in needed skills show decreased risk for out-of-school suspension, suicide risk, behavioral threat risk and improved social skills with peers, teachers and academic success. Students who receive specific skill instruction when deficits are identified are less likely to engage in bullying behavior and have improved resiliency. School-based mental health providers will be utilizing Skillstreaming as a tiered intervention to students who exhibit behavioral and social challenges. This will allow for additional observation, progress-monitoring and opportunities for staff to refer students to additional mental health counseling or assessment based on their response to this EBP.</p>	



<b>Evidence-Based Program</b>	Social Thinking Materials (socialthinking.com)
<b>Tier(s) of Implementation</b>	Tier 2 and Tier 3
Describe the key EBP components that will be implemented.	
<p>Training to SCS staff will take place for the following materials from Social Thinking publishers:</p> <ul style="list-style-type: none"> <li>• Think Social!</li> <li>• Superflex: A Superhero Social Thinking Curriculum</li> <li>• Thinking about YOU Thinking about ME</li> <li>• Social Explorers Curriculum</li> </ul>	
<p>Explain how your district will implement evidence-based mental health services for students to improve the early identification of social, emotional, or behavioral problems or substance use disorders, as well as the likelihood of at risk students developing social emotional or behavioral problems, depression, anxiety disorders or suicidal tendencies, and how these will assist students dealing with trauma and violence.</p>	
<p>Students with identified disabilities that may impact social skills, self-regulation and cognitive behavioral skills will be provided direct instruction in daily lessons and weekly counseling sessions as a part of their IEP or 504; students without identified disabilities will also receive tiered intervention supports based on identified skill deficits. Signed parental consent on the district’s Nol document is required prior to implementing Social Thinking Materials for students without an identified disability.</p>	
<p>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.</p>	
<p>Research suggests that students who receive tiered, early direct instruction in needed skills show decreased risk for out-of-school suspension, suicide risk, behavioral threat risk and improved social skills with peers, teachers and academic success. Students who receive specific skill instruction when deficits are identified are less likely to engage in bullying behavior and have improved resiliency. School-based mental health professionals will be utilizing Social Thinking materials as a tiered intervention to students who exhibit behavioral and social challenges. This will allow for additional observation, progress-monitoring and opportunities for staff to refer students to additional mental health counseling or assessment based on their response to this EBP.</p>	

<b>Evidence-Based Program</b>	Functional Behavioral Assessment (FBA)/Behavior Intervention Plan (BIP): Identifying and measuring individual student problem behaviors, creating hypotheses, and developing behavior intervention plans (based on positive behavior supports and evidence-based practices) to improve positive (desired) behaviors and decrease student problem behaviors.
<b>Tier(s) of Implementation</b>	Tier 3
Describe the key EBP components that will be implemented.	
<p>All district psychologists, behavior specialists and classroom teachers participate in regular development of FBA/BIPs for students who require a more targeted, intensive behavioral support plan during SWST and CARE school-based meetings. Parents are an integral part in the FBA/BIP team development process and signed parental consent is required prior to the development of the FBA/BIP. Sarasota County Schools will implement Prevent-Teach-Reinforce (PTR) FBA/BIP practices after receiving professional learning from our FL/PBIS partners.</p>	
<p>Explain how your district will implement evidence-based mental health services for students to improve the early identification of social, emotional, or behavioral problems or substance use disorders, as well as the likelihood of at-risk students developing social emotional or behavioral problems, depression, anxiety disorders or suicidal tendencies, and how these will assist students dealing with trauma and violence.</p>	
<ul style="list-style-type: none"> <li>• Increase in academic engagement as measured by office discipline referrals and suspensions.</li> </ul>	
<p>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.</p>	
<ul style="list-style-type: none"> <li>• Fidelity assessments and on-going data collection of target behaviors is conducted to ensure successful behavior plan implementation.</li> </ul>	

<b>Evidence-Based Program</b>	District Proactive Behavior Response Teams
<b>Tier(s) of Implementation</b>	Tier 3
Describe the key EBP components that will be implemented.	
<p>Proactive behavior response teams will report to Student Services (SS) administrator for weekly Professional Learning Community (PLC) meetings, supervision, training and on-site technical assistance and mentoring/support in the buildings. SS administration will help coordinate communication and prioritize behavior team assignments between Exceptional Student Education (ESE) and SS departments. The proactive behavior response team supports all schools throughout the district. Each team will consist of a school psychologist, behavior specialist or Board-Certified BehaviorAnalyst (BCBA), and a paraprofessional or Registered Behavior Tech (RBT).</p>	
<p>Explain how your district will implement evidence-based mental health services for students to improve the early identification of social, emotional, or behavioral problems or substance use disorders, as well as the likelihood of at-risk students developing social emotional or behavioral problems, depression, anxiety disorders or suicidal tendencies, and how these will assist students dealing with trauma and violence.</p>	
<p>Behavior Specialists /BCBA will assist schools with classroom support/modeling, classroom observations, writing FBA/BIPs, Safety Plans, analyzing data and interventions, attending MTSS meetings and attending IEP meetings. School Psychologists will assist schools with classroom modeling/support, facilitate wraparound mental health services, modeling/implementing interventions, assist with safety plans, writing FBA/BIPs, attending MTSS meetings and attending IEP meetings. Paraprofessionals/RBTs will assist with behavior data collection, classroom support, monitoring BIP implementation, and safely supporting a student in the Least Restrictive Environment. Based on individual student need, the team will use a variety of evidence-based practices to support students with identified needs and skill deficits. Signed parental consent on the district’s Nol document is required prior to implementing the identified intervention.</p>	
<p>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.</p>	
<ul style="list-style-type: none"> <li>• Increase in academic engagement as measured by office discipline referrals and suspensions.</li> <li>• Fidelity assessments and on-going data collection of target behaviors is conducted to ensure successful behavior plan implementation.</li> <li>• School psychologist on each behavior team assists school staff by conducting specialized assessments and advocacy for student/family access to community or school-based mental health partners.</li> <li>• Site-based administrative feedback reported and analyzed after each PBR consult/visit.</li> </ul>	

## Direct Employment

### MHAA Plan Direct Employment

#### School Counselor

*Current Ratio as of August 1, 2024*

**1:364**

*2024-2025 proposed Ratio by June 30, 2025*

**1:364**

#### School Social Worker

*Current Ratio as of August 1, 2024*

**1:1,275**

*2024-2025 proposed Ratio by June 30, 2025*

**1:1,275**

#### School Psychologist

*Current Ratio as of August 1, 2024*

**1:1,337**

*2024-2025 proposed Ratio by June 30, 2025*

**1:1,337**

#### Other Licensed Mental Health Provider

*Current Ratio as of August 1, 2024*

**1:2,732**

*2024-2025 proposed Ratio by June 30, 2025*

**1:2,732**

### 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.**

Sarasota County employs 104.8 school-based certified school counselors assigned directly to schools based on population and identified unique school needs. All schools have a minimum of one full time school counselor, with secondary schools having additional counselors depending on grade level, total population and unique school needs. Sarasota County employs 28.6 school psychologists, including 1 contracted school psychologist. Additionally, we are employing one school psychologist Master level intern for the 2024-2025 SY. Each school in the district is assigned a psychologist to serve the schools, based on student population and identified unique school needs. These psychologists are strategically positioned within a "Professional learning Community" to serve schools within a "feeder pattern" and for the promotion of mental and behavioral wellness. Sarasota County employs 20 Social Workers (SW) and 10 Home School Liaisons (HSLs). In addition, one master level SW intern for the 2024-2025 school year. SW are assigned to multiple school sites based on student population and identified unique school needs. Ten Title 1 identified school are supported by an HSL. There are 10 HSLs assigned to Title 1 schools throughout the district. School SW and HSLs support mental and behavioral health efforts throughout each tier of intervention and support. Behavior Coaches are also at every school for the 24-25 school year to further support emotional, behavioral, and mental wellbeing. Three district proactive behavioral response teams consisting of a school psychologist, behavior specialist/BCBA and paraprofessional/RBT support the

most intense student behaviors and cases, assisting the school base team with modeling, resources, FBA/BIP development and professional learning opportunities.

- A full-time school psych is assigned to Oak Park our separate day school to ensure the behavioral and cognitive needs of our students most in need of services are met.
- Each traditional high school is assigned a full-time school psychologist to maximize tiered resiliency and mental health
- Decrease elementary counselor ratio from 1:450 to 1:364
- Contracted Mental Health Services include a total of fourteen mental health providers.
- Fourteen primary mental health providers will be allocated to SCS elementary schools.
- Strengthen and enhance community partnerships through Navigating Systems of Care professional learning for all school based mental health providers and school teams.

**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).**

All student referrals for screening come from the School Wide Support Team (SWST) recommendation, including parent-based and administrative-based referrals. When a recommendation is made, the first step in this process is to communicate with the parent/guardian of the student. Prior to a referral being made to a licensed mental health provider, the parent/guardian must sign consent on the district Mental Health Consent form. Once consent is signed, the SWST facilitator works with the school based mental health provider to ensure a referral is made to an appropriate provider. All referral and screening activity are documented in the FOCUS platform.

School referrals are then shared with the community based mental health providers for screening and assessment. All services for school-based mental health services are initiated within 15 days of identification and assessment; Activity is recorded in the FOCUS platform.

All student referrals for screening come from the recommendation of school based SWST, including parent-based referrals and administrative based referrals. When a need for community-based mental health services are determined, the school-based staff making the determination for recommendation to community mental health services is responsible for ensuring initiation of services within 30 days of referral. Documentation is maintained in the SWST notes and maintained by the SWST facilitator.

If the parent/guardian declines the Mental Health Referral they sign the portion of the document which indicates declining of services. Annually district is required to report the total number of mental health referrals, the number of students referred for mental health therapy, and the number of students who received mental health therapy.

Upon initial enrollment and annually thereafter, families are asked to indicate if their student has any mental health concerns/conditions. This information is immediately filtered to our school-based health services providers (school nurses). The school health services provider reaches out to the family to further understand student need. The school health provider makes all necessary referrals to the SWS team. The SWS team determines needs of the student through intentional coordination of services the student's primary healthcare provider and any other mental health providers involved in the student's care. The SWS team regularly reviews and monitors progress of students and adjusts as necessary to ensure maximized support for the student.

**Counselors:**

- Utilize a Comprehensive School Counseling Plan as an integral component of the academic mission of the school
- Facilitate positive behavior intervention and support
- Deliver Weekly Resiliency lessons K-5
- Support PBIS initiative at the school level
- Monitor Progress

**Psychologists:**

- Evaluate students' learning needs
- Develop individualized plans to support academic, behavioral and social functioning.
- Consult with teachers and other school staff to boost understanding and interpretation of progress

data

- Assist school teams in selecting evidence-based interventions

Social Workers and Home School Liaisons

- Maximize of access to school-based and community-based resources

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

Counselors, Psychologists, Social Workers (SW):

- Deliver prevention, intervention, and post-vention services as part of comprehensive school safety plans
- Promote physical and psychological well-being
- Assist administrators and school resource officers during risk and/or threat scenarios
- Facilitate “next steps” in crisis situations, foster posttraumatic growth after emergencies occur.
- Ensure that schools have appropriate process for referring and reporting students at-risk for or in need of academic, behavioral, or mental health support services
- Foster student success in schools through increased attendance, feelings of acceptance, decreased discipline referrals, increased engagement and academic achievement
- Collaborate with family members and other professionals
- Advocate for the mental health needs of all students
- Classroom observations to support the problem-solving process for students
- Consultation and professional learning for school personnel
- Sharing resources and strategies with students and families
- Counseling as a Related Service for children with IEPs or 504s
- Provide referrals to school and community resources that treat mental health issues
- Provide individual and group-level behavioral, resiliency, and mental health services
- Provide short-term counseling and crisis intervention focused on mental health or situational concerns such as grief or difficult transitions
- Participates on multi-disciplinary teams
- Deliver instruction that proactively enhances awareness of mental health and resiliency;

Counselors:

- Large group guidance
- Conflict resolution
- Attendance
- Check in - Check out Interventions (CICO)
- Progress monitoring
- Facilitates re-entry meeting and the creation and implementation of a safety plan

Psychologists:

- Participate in the design and implementation of behavior intervention curricula
- Support regular progress monitoring and data reviews
- Participate in functional behavior and academic assessments
- Complete comprehensive psychological evaluations

Social Workers and Home School Liaisons

- Family support provided through case management
- Assist/support student attendance
- Complete individualized psycho-educational counseling to students
- Provide home visits
- Completion of social histories and parent rating scales as part of a comprehensive evaluation

#### SEDNET Project Manager

- Support family well-being
- Provide early engagement-early connection to help high-risk families, follow-up to families and support
- Initiate strategies to engage family in services
- Collaborate with local providers to ensure service linkage
- Monitor effective delivery of services
- Maximize appropriate resources available throughout Sarasota County
- Wrap families with intensive supports to maintain children in a safe, supportive environment

#### Contracted Mental Health Providers

- Collaborate with family members and other professionals
- Provide individualized mental health therapy for students
- Provide one on one parent education training/support
- Consultation to teachers and school teams
- Regular progress monitoring and data reviews
- Consult with staff

#### Department of Health Educators

- Work on the front lines and are familiar with and educated to recognize warning signs
- Adhere to appropriate guidelines regarding confidentiality.
- Promote student success
- Provide basic behavioral health skills
- Recognize care coordination
- Provide educational programming to teachers, administrators, parents and students

### 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.**

**Bay Area Youth:** works with individuals, families, and communities to inspire change, growth, and success.

**Big Brothers, Big Sisters:** One-to-one mentoring relationships to children ages 6-18.

**Brotherhood of Men Mentoring Group:** Provides a supportive environment, fostering life-skill enhancement and personal development in young males.

**Camelot Community Care Inc:** mental health therapy provided on campus

**Centerstone:** The Community Action Treatment (CAT) Team provide support for students with substance abuse, mental health, and co-occurring disorders.

**Circle of Friends:** Trauma-focused services to children and families in the home, school or via tele-health

**Circuit 12:** Effectively addresses educational, developmental or other disabilities, job training and employment issues by including all parties who are involved with a child in the dependency case planning process.

**Florida Center:** On campus mental health therapy wrap around supports. Coaching and professional learning provided to staff. Elementary Schools

**Forty Carrots Family Center:** Nurturing healthy children and family development through research-based, relationship-centered education and mental health services.

**Girls Inc.:** Mentorship, Researched based small group program for girls.

**Girls on the Run Greater Tampa Bay:** Positive youth development program for girls 3rd- 8th grade.



**Jewish Family Children’s Services: Adolescent Diversion and Assistance Program (ADAP):** offers individual and group counseling with an emphasis on learning better coping skills, anger management, and social skills to reduce the risk of repetitive destructive behaviors. Individual, group, and family counseling is available for adolescents and families needing support and offered at an affordable rate.

**Light Share:** Mobile Response Team (MRT): The MRT will be utilized to assist students that are in an emergent crisis; Family Life Intervention Program (FLIP):An outreach program designed to improve the lives of at risk students ages 7 to 17 and their families.

**NAMI :** Family Support Groups, Mental Health Therapy Supports, Lean on Me provides the access necessary to bridge mental health wellness and academics

**Phoenix Academy:** Phoenix Counseling is a non-profit behavioral health agency that provides evidence-based services to youth throughout the community. Every treatment offered begins with signed parental consent, with a focus on trauma informed care. Support provided is individualized based on each client’s needs.

**Sarasota Housing Authority:** empower youth to set and work toward goals that will enable them to break the intergenerational cycle of poverty.

**School House Link/Homeless Education:** Advocate helping students in transition attend and succeed in school.

**Take Stock in Children:** Combining a volunteer mentor, college readiness and coaching, and a Florida Prepaid Project STARS scholarship.

**Teen Court:** meet the specific needs of at-risk youth and student volunteers (ages 8-18).

**Valerie’s House:** Grief support program for children who have lost a loved one and/or parents and caregivers

## MHAA Planned Funds and Expenditures

### Allocation Funding Summary

**MHAA funds provided in the 2024-2025 Florida Education Finance Program (FEFP)**

\$ 2,823,897

**Unexpended MHAA funds from previous fiscal years**

\$ 963,705.78

**Grand Total MHAA Funds**

\$ 3,787,602.78

### 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.) 1006.041 Florida Statutes.

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:

*See Attached MHAA planned Funds and Expenditures Form*

## School District Certification

This application certifies that the **Sarasota 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 s. 1006.041(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**

0074 - Sarasota Military Academy, High School and Prep Campuses
0081 - Suncoast School for Innovative Studies
0083 - Sarasota School of Arts and Sciences
0120 - Dreamers Academy
0090 - Island Village Montessori 0103
0103 - Imagine School at North Port
0113 - Sarasota Academy of the Arts
0100 - Sarasota Suncoast Academy
0122 - State College of Florida Collegiate School Venice
0102 - Student Leadership Academy
0106 - Imagine School at Palmer Ranch
0110 - Sky Academy Venice
0117 - Sky Academy Englewood
1501 - College Prep of Wellen Park

**School Board Approval Date:**

**Mental Health Assistance Allocation (MHAA) Plan  
2024-2025  
Due: August 1, 2024**

## Planned Funds and Expenditures 2024-2025

**District Name:** Sarasota

Section 1. MHAA Plan Funding Summary		\$ Amount
Mental Health Assistance Allocation provided in the 2024-2025 Florida Education Finance Program:		\$ 2,823,897.00
Unexpended Mental Health Assistance Allocation funds from previous fiscal years.		\$ 963,705.78
<b>Total MHAA Plan Funds:</b>		\$ 3,787,602.78
Section 2. MHAA Planned Expenditure Summary –Funded by the MHAA Plan		Total \$ Amount
Profession	Total Number	Total \$ Amount
School Counselor(s) – DOE certified	1.5	\$ 150,402.27
School Psychologist(s) – DOE certified and/or DOH licensed	2	\$ 203,673.51
School Social Worker(s) – DOE certified and/or DOH licensed	6	\$ 626,214.00
Other (DOH) Licensed Mental Health Service Providers		
Mental Health Administrator(s):	2	\$ 275,620.00
Mental Health Support Staff:	4.5	\$ 366,226.66
<b>Total Planned Expenditures for the Employment of Staff/Personnel:</b>		\$ 1,622,136.44
Section 3. MHAA Continued Summary of Planned Expenditures		\$ Amount
Expenditures for services provided by community-based mental health program agencies or providers:		\$ 975,002.00
Expenditures for the professional development and training:		\$ 9,000.00
Expenditures for travel (in-county, out-of-state, and out-of-county):		\$ 9,000.00
Expenditures for supplies, materials, and equipment:		\$ 7,000.00
Other Expenditures:		\$ 753,549.00
<b>Total MHAA Planned Expenditures:</b>		\$ 3,375,687.44
Section 4. Allocation Expenditure Summary for Other Expenditures		\$ Amount
First Step of Sarasota: Student Assistant Professionals (SAPs) in each comprehensive high school		\$ 210,000.00
Proportionate Share for all Charter Schools		\$ 423,549.00
Teen Court Prevention Services		\$ 120,000.00
Community-Based Agencies: The Florida Center		

If you experience difficulty completing this form electronically, contact Marsha Studdard, Student Support Services, at 850-245-7846 or [Marsha.Studdard@fldoe.org](mailto:Marsha.Studdard@fldoe.org).

**CLEAR FORM**