2026-27

HOPE
COMMUNICATION
RESILIENCE
WELLNESS
KINDNESS

FAMILY
POSITIVITY
AWARENESS
WELLNESS
MENTAL HEALTH

FAU Lab School

MENTAL HEALTH APPLICATION

Mental Health Assistance Allocation Plan

FLORIDA DEPARTMENT OF EDUCATION
fldoe.org

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I. Introduction

Plan Purpose

The Mental Health Assistance Allocation (MHAA) is created to provide funding to assist local education agencies (LEA) in implementing their school-based mental health assistance program pursuant to section (s.) 1006.041, Florida Statutes (F.S.).

Each LEA must implement a school-based mental health assistance program that includes training classroom teachers and other school staff to detect and respond to mental health concerns and connect children, youth and families experiencing behavioral health needs with appropriate services. The program must also implement a multi-tiered system of supports to expand access to evidence-based mental health services, including assessment, diagnosis, intervention, treatment and recovery, for students with mental health or co-occurring substance use needs and those at high risk.

These funds are allocated annually in the General Appropriations Act to each eligible LEA.

Each LEA shall receive a minimum of $100,000, with the remaining balance allocated based on each school district's proportionate share of the state's total unweighted full-time equivalent student enrollment

Charter schools that submit a plan separate from the LEA are entitled to a proportionate share of LEA funding. A charter school plan must comply with all of the provisions of this section, must be approved by the charter school's governing body, and must be provided to the charter school's sponsor. *(Section [s.] 1006.041, Florida Statutes [F.S.])*

Submission Process and Deadline

The application must be submitted to the Florida Department of Education (FDOE) by **August 1, 2026.**

There are two submission options for charter schools:

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

II. MHAA Plan

A. MHAA Plan Assurances

1. LEA Assurances

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.

Other sources of funding will be maximized 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.

A system is included for tracking the number of students at high risk for mental health or co-occurring substance use disorders who received:

- targeted mental health screenings or assessments;
- the number of students referred to school-based mental health services providers;
- the number of referrals made to school-based mental health services providers;
- the number of students referred to community-based mental health services providers;
- the number of referrals made 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.

MHAA Plans for charter schools that opt out of the LEA MHAA plan have been reviewed by the LEA charter school sponsor.

Curriculum and materials purchased using MHAA funds have reviewed by the LEA and all content is in compliance with State Board of Education Rules and Florida Statutes.

The MHAA Plan is focused on a multi-tiered 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. Section 1006.041, F.S.

2. LEA School Board Policies and Procedures

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.

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

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

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 services providers.

Individuals living in a household with a student receiving services are provided information about behavioral health services through other delivery systems 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.

LEA-adopted assessment procedures, at a minimum, include the use of a Department-approved functional assessment tool as required in Rule 6A-4.0013, Florida Administrative Code (F.A.C.) (effective February 24, 2026).

LEA 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.

Procedures to assist a mental health services provider or a behavioral health provider as described in s. 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.

Procedures 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 LEA 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 LEA 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.

B. LEA Program Implementation

1. MHAA-Funded Evidence-Based Program (EBP)

#1

Evidence-Based Program (EBP)
Monique Burr Foundation

Identify the source of the evidence-based program chosen.

If there are multiple sources, please select only one.
Practice Wise (https://bit.ly/4dM66i9)

Tier(s) of Implementation
Tier 1, Tier 2

Describe the key EBP components that will be implemented.

Informs children and teens of all types of bullying, abuse and victimization through a progression of 3 grade level components: MBF Child Safety Matters (K-5), MBF Teen Safety Matters (6-8), Mental Health Matters (K-12). Students will learn strategies to cope with real-life stressors and increase levels of peer and parent support by asking for help.

Early Identification
Explain how your program strategies will reduce 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.

Implementation of the MBF curriculum will concentrated in grades K-5: Child Safety Matters. Each component is presented in comprehensive lessons in scripted, interactive PowerPoint lessons ranging from 35-55 minutes or in four shorter lessons by trained facilitators (teachers/school counselors/support facilitators). Lessons include lecture, group discussions, skill-practice activities, videos and games. Pre and post-tests are given to measure student learning and skill development.

High Risk Students
Explain how the multitiered system of supports will deliver evidence-based mental health assessment, diagnosis, intervention, treatment and recovery services to students with one or more mental health or co-occurring substance abuse diagnoses and students at high risk of such diagnoses.

Improve learning and skill building to effectively prepare students in dealing with real-life problems and stressors while increasing their ability to ask for help and support as measured by the pre and post tests for student learning.

#2

Evidence-Based Program (EBP)
Cognitive Behavior Therapy

Identify the source of the evidence-based program chosen.

If there are multiple sources, please select only one.
American Psychological Association APA (https://bit.ly/3ZeBYpv)

Tier(s) of Implementation
Tier 2, Tier 3

Describe the key EBP components that will be implemented.

Cognitive Behavior Therapy (CBT) is a therapeutic approach that helps the individual explore the links between thoughts, emotions, and behaviors. CBT is a structured and time-limited approach that works well in school settings and involves mutually agreed upon goal setting. CBT is considered an Evidence Based Practice for a variety of mental health conditions, including anxiety and depression.

Early Identification
Explain how your program strategies will reduce 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.

School-based mental health providers (school psychologist and school-based mental health counselor) have been trained to provide CBT. These school-based mental health providers will implement CBT in their individual and group counseling with students who are referred to them. School Counselors will work collaboratively with teachers and families to structure holistic system of support.

High Risk Students
Explain how the multitiered system of supports will deliver evidence-based mental health assessment, diagnosis, intervention, treatment and recovery services to students with one or more mental health or co-occurring substance abuse diagnoses and students at high risk of such diagnoses.

CBT is an evidence-based treatment methodology that can be used for a multitude of mental health and co-occurring substance abuse diagnoses or for those at risk of such diagnoses. CBT is provided in individual or group counseling sessions by school-based mental health professionals. Referrals for further medical care will be made to support family systems for the student to be successful both at home and at school.

#3

Evidence-Based Program (EBP)
Question, Persuade, Refer Enhanced Professional Development

Identify the source of the evidence-based program chosen.

If there are multiple sources, please select only one.
Other: National Registry of Evidence-based Practices and Policies (NREPP)

Tier(s) of Implementation
Tier 1

Describe the key EBP components that will be implemented.

The QPR Enhanced is a 3-hour online or face-to-face is an evidence-based suicide prevention professional development program for K-12 instructional staff. Staff will learn the early warning signs of suicide and how to get help for students in crisis using the question, persuade and refer techniques. Staff will also increase their understanding of the flow of the school based student crisis plan and community resource options.

Early Identification
Explain how your program strategies will reduce 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.

Instructional personnel will complete the 3-hour online QPR Enhanced course and earn certification. Certification will be uploaded for tracking and the school based student crisis plan will be reviewed at all level meetings. Building instructor confidence in recognizing early warning signs of changes in student behavior will increase wrap around services during the MTSS process to increase student well-being and success. Certification will be renewed every three years for application to the FDOE to become a suicide prevention school and district.

High Risk Students
Explain how the multitiered system of supports will deliver evidence-based mental health assessment, diagnosis, intervention, treatment and recovery services to students with one or more mental health or co-occurring substance abuse diagnoses and students at high risk of such diagnoses.

The QPR Enhanced Suicide Prevention Training, an evidence based suicide prevention program, encourages follow up with students who may need additional intervention. These follow up meetings with students allow for further assessment and intervention with students who either have a mental or co-occurring at-risk diagnosis.

2. Additional Programs (optional)

#1

Program Name
Navigate360 Compass Curriculum

Tier(s) of Implementation
Tier 1, Tier 2

Program Description
Provide a brief description of the program and its purpose.

Educates students in grades 6-12 through series of scaffolding curriculum covering the state required Resiliency Standards of character, personal responsibility, mentorship and citizenship, and critical thinking and problem solving. Additional prevention lessons cover teen safety, bullying, substance abuse, victimization and human trafficking. Students will learn coping skills and strategies to build resilience, seek support from a trusted adult/parent, and contribute positively to the school and community culture.

Each lesson build on students' prior knowledge with a pre-test, includes a teacher companion guide, videos for engaging discussion on the topic and a post-test to check for understanding. Lessons will be taught in partnership by teachers, school counselors and support facilitators. Additional school counseling activities to differentiate instruction and apply to real life situations will be implemented as part of the in-depth companion guides. The Family Resource Guides will be broaden the lessons by informing parents of the same key concepts building a community of caring support and positive character culture.

Fostering a positive school environment and helping students develop strategies to succeed academically through personal growth and consistent digitally monitoring of lessons. Continual needs assessment based upon student responses will improve school climate and students' sense of belonging. Tier 3 supports will be put in place for individual students/families in need of additional support. Effective communication, growth mindset, relationship skills, responsible decision-making, and self-management are key components to resilient character traits.

3. Policy, Roles, and Responsibilities

Direct Employment

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 direct employment of school-based mental health service providers reduces staff-to-student ratios by allowing more counselors to see more students and provide more direct services, such as classroom Tier 1 instruction, individual and group counseling, and consultation. With the increase in direct services, school counselors can focus on proactive school counseling practices meaningful Tier 2 and Tier 3 interventions. Additionally, the comprehensive counseling program has been designed to prioritize 80% of the school-based mental health professionals' time on delivering direct and indirect services to students.

Policies and Procedures

Describe your LEA’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.

FAU Laboratory School's Comprehensive School Counseling Program is an integral component of the district's mental health plan. The FAUS School Counseling Program is aligned with the American School Counselor Association Model to provide counseling that is preventative, data driven, and developmental in nature. FAUS employs three school counselors to serve grades 9-12, one school counselor to serve grades 6-8, and one school counselor to serve grades K-5. The FAUS comprehensive school counseling program prioritizes direct and indirect services to students 80% of the time. All students receive Tier 1 school counseling interventions and instruction that align with ASCA's academic, social-emotional/resilience, and college-career readiness domains. The school counseling team uses the Navigate 360 Compass Curriculum to educate students in grades 6-12 through a series of scaffolding curriculum covering the state required Resiliency Standards of character, personal responsibility, mentorship and citizenship, and critical thinking and problem solving. Additional prevention lessons cover teen safety, bullying, substance abuse, victimization and human trafficking. Students will learn coping skills and strategies to build resilience, seek support from a trusted adult/parent, and contribute positively to the school and community culture. Students in need of Tier 2 and Tier 3 services, as identified through universal screening tools, are provided in collaboration with the FAUS mental health professional or referred to community-based resources. Other Tier 2 and 3 supports provided by school counselors include small group counseling, intervention collaboration with teachers and parents, the individual brief counseling model, and school support wrap-around services.

Providers and Partners

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

FAU Laboratory School employs one full-time mental health counselor (MHC) to provide therapeutic services to targeted/identified and referred students grades 9-12 and consultation to students in grades K-8. The school-based MHC provides therapeutic Tier 2 and Tier 3 services including mental health assessment, diagnosis, and individual and group counseling to treat students with one or more mental health or co-occurring substance abuse diagnoses and students at high risk of such diagnoses. Also, the MHC provides psychoeducational therapy aimed at the prevention of mental and emotional disorders. FAU Lab Schools continues to focus on expanding collaborative partnerships to improve the referral based system between the provider, family, and student. All referrals to community partners include informing parents of the collaborative approach to addressing students' needs and parents are asked to complete a signed release form for 2-way communication between the school and care provider (with respect to all FERPA and HIPPA regulations).

4. Community Contracts/Interagency Agreements

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.

1) Florida Atlantic University: Counseling and Psychological Services

Provides ongoing therapeutic services to FAUS 9-12 grade students through the application of principles of psychotherapy, human development, learning theory, group dynamics, and the etiology mental illness and dysfunctional behavior of individuals with the purposes of promoting optimal mental health. Services include individual and group therapy. All services are provided based on parent authorization.

2) Faulk Center for Counseling

Provides free and low cost counseling services to people of all ages. Group, individual and family therapy is provided using a variety of treatment modalities. FAUS counselors work collaboratively with the Faulk Center to connect students and families in need of mental health support to the appropriate services.

3) Henderson Behavioral Health

Provides free and sliding scale comprehensive behavioral health therapeutic services to students and families, including in-home therapy, 24-hour mobile crisis response, community support and housing assistance. The crisis stabilization unit includes short term, intensive, inpatient treatment, and

stabilization. The FAU Lab School's counselors work with case managers to assist families with immediate and longer term therapeutic care.

4) South County Mental Health Center
Provides a network of services and programs for children and adolescents. Services include crisis and emergency response and evaluation (Mobile Crisis Team available), case management and an on-site therapeutic program that serves children ages 3-18 who have been victims of abuse and neglect or are otherwise in need on in-home support services.

5) The Chrysalis Center
Provides free and sliding scale mental health services to children, adolescents, adults and families. Services include a thorough assessment to determine treatment needs that are delivered at center sites, in schools and in homes. FAU Lab Schools' counselors work collaboratively with the Chrysalis Center to connect students and families in need of mental health support to the appropriate services.

5. Employment Verification

#1

No Document Uploaded

#2

Mental Health Support Staff Statement for 26-27 MHAAP.docx

C. MHAA Planned Funds and Expenditures

1. Allocation Funding Summary

MHAA funds provided in the 2025-2026 Florida Education Finance Program (FEFP):	**$184,098**
Unexpended MHAA funds from previous fiscal years:	**$0.00**
Grand Total MHAA Funds:	**$184,098**

2. 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, F.S.

LEA's are encouraged to maximize third-party health insurance benefits and Medicaid claiming for services, where appropriate.

Uploaded Document:
26-27 FAU Lab Schools MHAA Planned Funds and Expenditures Form rev..xlsx

D. LEA School Board Approval

This application certifies that the School Superintendent and School Board approved the district's MHAA 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 MHAA in accordance with s. 1006.041(14), F.S.

Note: The charter schools listed below have ***Opted Out*** of the LEA's MHAA Plan and are expected to submit their own MHAA Plan to the LEA for review.

No charter schools opting out.

Approval Date: