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LEGISLATIVE ACTION

Senate	.	House
Comm: RCS	.	
04/12/2019	.	
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The Committee on Appropriations (Passidomo) recommended the following:

1 **Senate Amendment to Amendment (313546) (with directory and**
2 **title amendments)**

3
4 Between lines 906 and 907
5 insert:

6 (16) MENTAL HEALTH ASSISTANCE ALLOCATION.—The mental health
7 assistance allocation is created to provide funding to assist
8 school districts in establishing or expanding school-based
9 mental health care and mental health programs that increase
10 awareness of mental health issues among children and school-age



662486

11 youth; train educators and other school staff in detecting and
12 responding to mental health issues; and connect children, youth,
13 and families who may experience behavioral health issues with
14 appropriate services. These funds shall be allocated annually in
15 the General Appropriations Act or other law to each eligible
16 school district. Each school district shall receive a minimum of
17 \$100,000, with the remaining balance allocated based on each
18 school district's proportionate share of the state's total
19 unweighted full-time equivalent student enrollment. ~~Eligible~~
20 Charter schools that submit a plan separate from the school
21 district are entitled to a proportionate share of district
22 funding. ~~At least 90 percent of a district's allocation must be~~
23 ~~expended on the elements specified in subparagraphs (b)1. and 2.~~
24 The allocated funds may not supplant funds that are provided for
25 this purpose from other operating funds and may not be used to
26 increase salaries or provide bonuses. School districts are
27 encouraged to maximize third-party ~~third-party~~ health insurance
28 benefits and Medicaid claiming for services, where appropriate.

29 (a) Before the distribution of the allocation:

30 1. The school district must develop and submit a detailed
31 plan outlining the local program and planned expenditures to the
32 district school board for approval. This plan must include all
33 district schools, including charter schools, unless a charter
34 school elects to submit a plan independently from the school
35 district pursuant to subparagraph 2.

36 2. A charter school may ~~must~~ develop and submit a detailed
37 plan outlining the local program and planned expenditures to its
38 governing body for approval. After the plan is approved by the
39 governing body, it must be provided to the charter school's



662486

40 sponsor.

41 (b) The plans required under paragraph (a) must be focused
42 on a multi-tiered system of supports to deliver ~~delivering~~
43 evidence-based mental health care assessment, diagnosis,
44 intervention, treatment, and recovery services to students with
45 one or more mental health or co-occurring substance abuse
46 diagnoses and to students at high risk of such diagnoses. The
47 provision of these services must be coordinated with a student's
48 primary mental health care provider and with other mental health
49 providers involved in the student's care. At a minimum, the
50 plans must ~~treatment to children and~~ include the following
51 elements:

52 1. Direct employment of school-based mental health services
53 providers to expand and enhance school-based student services
54 and to reduce the ratio of students to staff in order to better
55 align with nationally recommended ratio models. These providers
56 include, but are not limited to, school counselors, school
57 health staff, school psychologists, school social workers, and
58 other licensed mental health professionals. The plan also must
59 identify strategies to increase the amount of time that school-
60 based student services personnel spend providing direct services
61 to students, which may include the review and revision of
62 district staffing resource allocations based on school or
63 student mental health assistance needs ~~Provision of mental~~
64 ~~health assessment, diagnosis, intervention, treatment, and~~
65 ~~recovery services to students with one or more mental health or~~
66 ~~co-occurring substance abuse diagnoses and students at high risk~~
67 ~~of such diagnoses.~~

68 2. Contracts or interagency agreements with one or more



662486

69 nationally accredited local community behavioral health
70 providers or providers of Community Action Team services to
71 provide a behavioral health staff presence and services at
72 district schools. Services may include, but are not limited to,
73 mental health screenings and assessments, individual counseling,
74 family counseling, group counseling, psychiatric or
75 psychological services, trauma-informed care, mobile crisis
76 services, and behavior modification. These behavioral health
77 services may be provided on or off the school campus and may be
78 supplemented by telehealth ~~Coordination of such services with a~~
79 ~~student's primary care provider and with other mental health~~
80 ~~providers involved in the student's care.~~

81 3. Policies and procedures, including contracts with
82 service providers, which will ensure that students who are
83 referred to a school-based or community-based mental health
84 service provider for mental health screening for the
85 identification of mental health concerns and ensure that the
86 assessment of students at risk for mental health disorders
87 occurs within 15 days of referral. School-based mental health
88 services must be initiated within 15 days after identification
89 and assessment, and support by community-based mental health
90 service providers for students who are referred for community-
91 based mental health services must be initiated within 30 days
92 after the school or district makes a referral ~~Direct employment~~
93 ~~such service providers, or a contract-based collaborative effort~~
94 ~~or partnership with one or more local community mental health~~
95 ~~programs, agencies, or providers.~~

96 4. Programs to assist students in dealing with anxiety,
97 depression, bullying, trauma, and violence.



662486

98 5. Strategies or programs to reduce the likelihood of at-
99 risk students developing social, emotional, or behavioral health
100 problems, suicidal tendencies, or substance use disorders.

101 6. Strategies to improve the early identification of
102 social, emotional, or behavioral problems or substance use
103 disorders and to improve the provision of early intervention
104 services.

105 7. Information and data on the following:

106 a. The number and types of school-based student services
107 personnel employed from the funds provided through the
108 allocation;

109 b. The number of students who received school-based mental
110 health interventions during the prior school year; and

111 c. The number of students referred to community-based
112 mental health care providers for services during the prior
113 school year.

114 (c) School districts shall submit approved plans, including
115 approved plans of each charter school in the district, to the
116 commissioner by August 1 of each fiscal year.

117 ~~(d) Beginning September 30, 2019, and annually by September~~
118 ~~30 thereafter, each school district shall submit to the~~
119 ~~Department of Education a report on its program outcomes and~~
120 ~~expenditures for the previous fiscal year that, at a minimum,~~
121 ~~must include the number of each of the following:~~

122 ~~1. Students who receive screenings or assessments.~~

123 ~~2. Students who are referred for services or assistance.~~

124 ~~3. Students who receive services or assistance.~~

125 ~~4. Direct employment service providers employed by each~~
126 ~~school district.~~



662486

127 ~~5. Contract-based collaborative efforts or partnerships~~
128 ~~with community mental health programs, agencies, or providers.~~

130 ===== D I R E C T O R Y C L A U S E A M E N D M E N T =====

131 And the directory clause is amended as follows:

132 Delete lines 845 - 848

133 and insert:

134 Section 14. Effective July 1, 2019, paragraph (b) of
135 subsection (6), subsection (15), as amended by this act, and
136 subsection (16) of section 1011.62, Florida Statutes, are
137 amended to read:

139 ===== T I T L E A M E N D M E N T =====

140 And the title is amended as follows:

141 Between lines 1091 and 1092

142 insert:

143 expanding the purpose of the mental health assistance
144 allocation; providing that charter schools that take a
145 specified action are entitled to a proportionate share
146 of certain funding; deleting a requirement that
147 restricted to certain elements how a specified
148 percentage of a district's mental health assistance
149 allocation could be expended; revising requirements
150 for a plan required to be developed by school
151 districts before distribution of such allocation;
152 requiring that the plans include charter schools,
153 except in certain circumstances; authorizing, rather
154 than requiring, charter schools to develop and submit
155 a specified plan; revising requirements for school



662486

156 | districts' and charter schools' plans; deleting a
157 | requirement for school districts to submit a specified
158 | report to the department;