2015-2016, Branford - School Based Health Centers, Mental Health Services (grades PreK-12)

Mary T. Murphy, Walsh Intermediate, and Branford High School

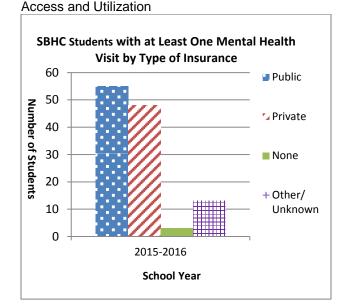
Quality of Life Result: All Connecticut children will grow up in a stable environment, safe, healthy and ready to succeed. *Contribution to the Result:* School Based Health Centers provide healthcare access for school aged students, so that they are healthy and ready to learn.

Program Expenditures	DPH SBHC Funding	Other State Funding	Federal Funding (MCHBG, ACA)	Total Other Funding (Other federal, Local, Private)	Reimbursement Generated	Total Site Funding
Actual SFY 16	\$328,828*	\$O	\$0	\$4500**	\$42,818	\$376,146
Estimated SFY 17	\$307,578*	\$0	\$0	\$4500**	\$44,000	\$356,078

Sponsoring Agency: Branford Board of Education

Partners: Parents, Students, CASBHC, DPH, Yale New Haven Hospital, Yale Child Study Center, School Based Health Alliance, Board of Education, Branford Counseling Center, Fairhaven Health Clinic, East Shore Health Center, Community Diningroom, Branford Cares, End Hunger, Soundview YMCA, Branford Parks and Recreation, School Administrators and Faculty and New York State Coalition for School-Based Health Center, Montefiore Medical Center's School Health Program.

How Much Did We Do?



Story behind the baseline:

The total student population for all 3 schools was 2,280 for the school year 2015-2016. The total number enrolled in the SBHC was 1,573 (69%). The number of students served for mental health was 119 or 8 % of the total enrolled population. The average

number of visits per student was 15 (1,798 visits for 119 students).

Of the 119 students served, 55 (46%) were publically insured, 48 (40%) were privately insured, 3 (3%) had no insurance, and 13 (11%) had an insurance status of other/unknown.

In 2015-2016 considerable effort made to acquire public insurance for students who qualified for those who had had a status of none or unknown at the end of the previous school year. This resulted in a decrease to just 3 students with no insurance and these 3 students were undocumented. During the 2015-2016 school year, staff also worked to identify "other or unknown" insurances and will continue to connect with families to identify these plans and document them during the next school year.

The SBHC clinician made a visit to every health class to inform the students about the medical and mental health services provided at the SBHC.

This is the first year that those having a mental health visit by insurance type is being reported.

Students' Population, Enrollment, Mental Health Visits and Students Served at Branford's 3 Schools

Schools	Population	Enrolled	MH Visits	MH Served
Murphy	422	392	640	34
Walsh	907	649	563	38
Branford HS	951	532	595	47
Total	2280	1573	1798	119

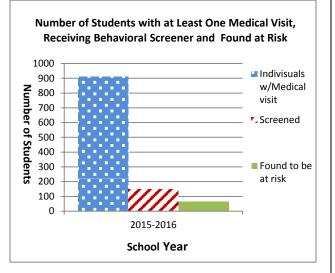
Trend: ◀► Flat/ No Trend

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How Well Did We Do?

Screen All Students for Behavioral Health Issues that Received a Medical Visit.



Story behind the baseline:

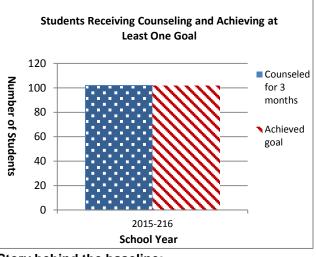
In 2015-2016, 911 students had at least one medical visit. Of the 911 students with a medical visit, 147 (16%) had a mental health screener completed at the time of a physical visit and 66 (45%) were found to be at risk.

This is the first year that those with a medical visit and screener are being reported.

Trend: ◀► Flat/ No Trend



Students Receiving Counseling Meeting their Goals



Story behind the baseline:

There were 119 students that received mental health counseling and 102 that received counseling for 3 or more months during the school year. All 102 (100%) of these students met at least one treatment goal.

Of the 119 students who received counseling, 100% had a completed psychosocial on their first visit with a mental health clinician. Of those, 17 students were assessed to need further evaluation. These 17 students were referred to Yale Child Study and were evaluated by the psychiatrist during the year. These 17 students were also provided on-site intakes with Yale Child Study along with monthly counseling sessions, family sessions and medication management as needed.

This is the first year that those in counseling for 3 months and met at least one treatment goal is being reported.

Trend: ◀► Flat/ No Trend

Notes:

* Reflects funding provided to all of the SBHC for Medical and Mental Health Services.

** Funding was provided to the SBHC by the Connecticut Association of School Based Health Centers (CASBHC) as a stipend for participating in a PC-SBHC project that was grant funded to CASBHC by the Connecticut Health Foundation.

Proposed Actions to Turn the Curve: How Much Did We Do:

- SBHC staff will attend school functions, including parent nights, conferences, and back to school nights to promote the SBHC.
- Increase access to enrollment forms by posting them on the district and individual websites.
- Participation in collaborative such as the Opioid Prevention and Education Network, the Health Departments Community Health Improvement Collaborative, and the School's Student Support Team.

How Well Did We Do:

- Provide professional development on care planning and documentation of care planning.
- Provide professional development on tracking referrals. Work with YNHH and PC-SBHC to determine best practices for tracking referrals.

Is Anyone Better Off:

• In the upcoming year possibly track referrals made other than psych referrals, such as DCF, other outpatient treatment centers.

Data Development Agenda:

- 1. Document in EPIC (EHR) goals that students are trying to reach and progress.
- 2. Do pre and post-test screeners on all students that receive counseling.
- 3. Work with EHR to ensure all data can be easily exported to DPH.