

## 2015-2016 New London – School Based Health Centers, Mental Health Services (grades 6-8)

ISAAC: Inter-district School For Arts And Communication

*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.

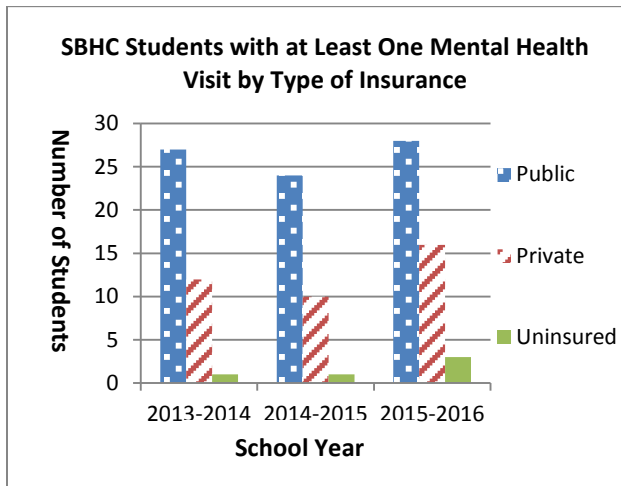
Program Expenditures	DPH SBHC Funding	Other State Funding	Federal Funding (MCHBG, ACA)	Total Other Funding (Other federal, Local, Private)	Reimbursement Generated	Total Site Funding
Actual SFY 16	\$113,424*	\$0	\$0	\$0	\$78,229	\$191,653*
Estimated SFY 17	\$113,424*	\$0	\$0	\$0	\$78,229	\$191,653*

*Sponsoring Agency:* CHC Inc.

*Partners:* Parents, Students, CASBHC, DPH, DSS, School Administrators and Faculty.

### How Much Did We Do?

Access and Utilization



#### Story behind the baseline:

During the 2013-2014 school year, 40 students (16% of the total student population of 246) had at least one mental health visit. Of those, 27 students (68%) had public insurance, 12 students (30%) had private insurance, and only 1 student (2%) had no insurance.

Student visits decreased slightly during the 2014-2015 school year, with 35 students (13% of the student population of 262) having a mental health

visit. Of the 35 students, 24 of them (69%) had public insurance, 10 students (29%) had private insurance, and again, only 1 student (2%) had no insurance.

Visits increased for the 2015-2016 school year, with a total of 47 students (17% of the student population of 271) had at least one mental health visit. Of these 47 students, 28 (60%) had public insurance, 16 (34%) had private insurance, and 3 (6%) did not have any insurance.

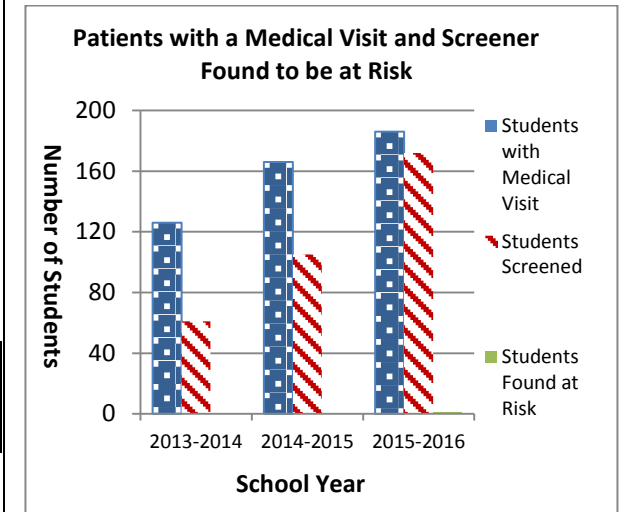
If a student is uninsured, the student and family are referred to the Access to Care program for assistance with insurance eligibility and enrollment.

Student Population, Enrollment, Number of Medical Visits, and Number Served in ISAAC 2015-2016				
School	Population	Enrolled	MH Visits	MH Served
Isaac	271	47	658	47

**Trend:** [▲]

### How Well Did We Do?

Screen All Students for Mental/Behavioral Health Issues That Received a Medical Visit



#### Story behind the baseline:

In 2015-2016, 186 students had a medical visit, and 172 of those (92%) received a mental health screener. Only one student screened (1%) was at risk and referred to the SBHC behavioral health provider for a full assessment. The percentage of students receiving a mental health screener

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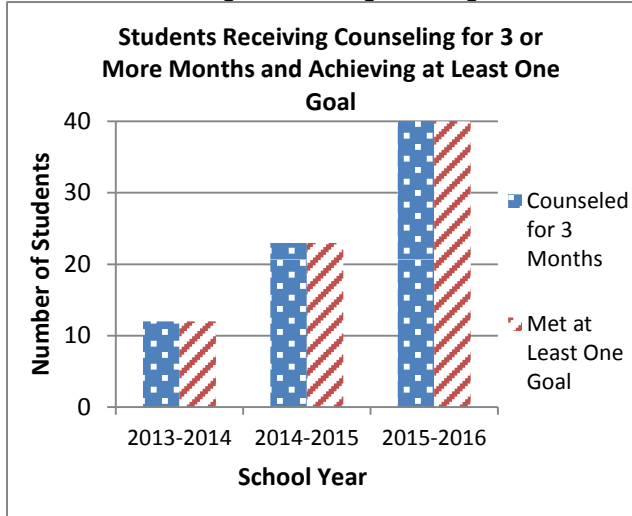
### ISAAC: Inter-district School For Arts And Communication

increased from the previous year, which was only 63% (105 students of the 166) that had a medical visit receiving a mental health screener.

Trend: [▲]

#### Is Anyone Better Off?

Students Receiving Counseling Meeting Their Goals



#### Story Behind the Baseline:

In the 2015-2016 school year, 40 students participated in therapy for 3 or more months. All 40 of those students (100%), achieved at least one therapeutic goal. The most frequently achieved goal was that the participants consistently attend scheduled therapy sessions and participate regularly. The number of students receiving 3 months or more of counseling has increased over the past three school years, and this is due to an increased awareness of services provided in the school.

Trend: [▲]

Notes:

\* Reflects funding provided to the SBHC for Medical and Mental Health.

#### Proposed Actions to Turn the Curve:

##### How Much Did We Do:

- The SBHC staff will attend school functions, including parent nights, conferences, and other school functions where families are present.
- Staff will provide presentations to health classes, and enhance the publicity of school based services in a variety of mediums including websites and newsletters.
- Enrollment forms are now available on an electronic platform and posted on district wide websites
- The SBHC staff will work toward decreasing the uninsured rate by improving the process of referrals of uninsured patients to the Access to Care Program.

##### How Well Did We Do:

- Providers will do screener at more types of visits, beyond new patients and physicals.

##### Is Anyone Better Off:

- Clinical Regional Directors will provide professional development on care planning and documentation of care planning.
- LCSW's will work closely with clinical supervisors to develop and manage both short and long term goals.
- LCSW's will encourage participants to develop self-management goals, both short term and long term.

##### Data Development Agenda:

- To align EHR (Eclinical Works) generated reports to meet DPH requirements.
- Work to ensure EHR data can be extracted and sent to DPH.

- To streamline the process of exporting our data from EHR to DPH.
- The SBHC and the business intelligence team will work together to develop a data pull system to track referrals both internally and externally for higher levels of care. This will allow our SBHC clinical staff the ability to track referrals to psychiatrists and outside higher level of care programs.