2015-2016, Norwich - School Based Health Center, Mental Health Services (Grades 9-12)

Norwich Free Academy (NFA)

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.

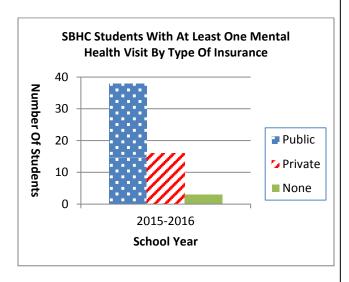
| Program Expenditures | DPH SBHC Funding | Other State Funding | Federal Funding (MCHBG, ACA) | Total Other Funding (Other federal, Local, Private) | Reimbursement Generated | Total Site Funding |
|----------------------|------------------|---------------------|---------------------------------|---|----------------------------|-----------------------|
| Actual SFY 16 | \$310,392* | 0 | \$2,645** | \$966*** | \$89,646* | \$403,649 |
| Estimated SFY 17 | \$328,724* | 0 | \$2,971** | \$3,649*** | \$89,064* | \$424,408 |

Sponsoring Agency: Child & Family Agency of SE CT, Inc.

Partners: CASBHC, DPH, DSS, DMHAS, DCF, School Based Health Alliance, School Administrators and Faculty, Behavioral Health Partnership (BHP), Child and Family Agency's Child Guidance Clinics and Home-based programs, Emergency Mobile Psychiatric Services, Backus Hospital

How Much Did We Do?

Access and Utilization



Story behind the baseline:

In 2015-2016 the total school population was 2,233, with 1,085 (49%) enrolled in the SBHC. The number of students served was 57 (5% of enrolled and 3% of the total population). The average number of visits per student was 21.9 (1,248 / 57).

Of the students served, 38 (67%) were publically insured, 16 (28%) were privately insured and 3 (5%) had no insurance.

Eligible families who do not have HUSKY are directed to the website to complete the application. If they have difficulty accessing/navigating the website, they are referred to Access to Care workers at the local Community Health Centers for assistance.

SBHC staff conduct orientation sessions for students and parents to inform them of the medical and mental health services offered at the SBHC.

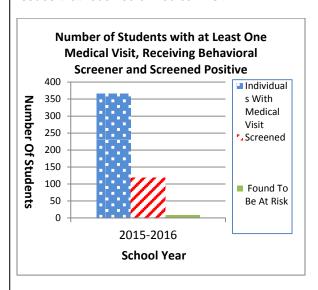
This is the first year that those having a mental health visit by insurance type is being reported.

Trend: [◀▶]

| Student Population, Enrollment, Number of Mental Health Visits And Number Served at NFA 2015-2016 | | | | | | | |
|--|------------|----------|--------------|--------------|--|--|--|
| Schools | Population | Enrolled | MH Visits | MH Served | | | |
| NFA | 2,233 | 1,085 | 1,248 | 57 | | | |

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 SBHC medical providers began conducting a mental health screening at medical visits using an evidence-based screener. Of the 366 students that had medical visits, 119 (33%) received a mental health screening. Of those, 8 (7%) were found to be at risk.

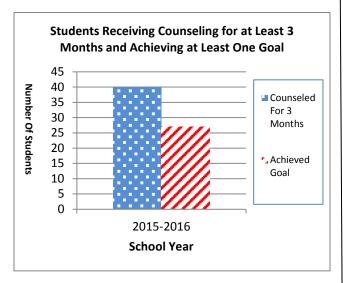
Trend: [◀▶]

2015-2016, Norwich - School Based Health Center, Mental Health Services (Grades 9-12)

Norwich Free Academy (NFA)

Is Anyone Better Off?

Students Receiving Counseling for at least 3 months Meeting their Goals



Story behind the baseline:

Of the 57 students served in 2015-2016, 40 (70%) received 3 or more months of counseling. Of the 17 students (30%) who were not seen for at least 3 months or more, some were due to requiring a higher level of care (Partial Hospitalization or Intensive Home-Based Program), did not follow through with counseling recommendations either by choice or choice of parent/guardian, or become uncommunicative/unable to be reached, and were eventually discharged. Often times, it is later discovered that these students moved out of district without sharing that information.

Of the 40 students who received 3 or more months of counseling, 27 (68%) achieved at least one goal and 13 (32%) did not achieve at least one goal. At the time of the 2015-2016 data collection, we were not

entering information in a structured data format to collect where the student went after the 3 months of counseling.

In addition to the individual counseling provided, the SBHC mental health clinician facilitated 3 groups utilizing the Cognitive Behavioral Intervention for Trauma in Schools (CBITS) model. Some of the students made significant gains with CBITS, per the model standards. However, they are not included in this data-set.

Since 2015-2016 was the first year that information was provided using goal achievement as a measure, this data is considered baseline.

Trend: [◀▶]

Notes:

- * Reflects funding provided to all of the SBHC for Medical and Mental Health Services.
- ** Maternal and Child Block Grant Funds
- *** United Way

Proposed Actions to Turn the Curve:

How Much Did We Do:

- Survey the staff to assess knowledge of the medical and mental health services available at the SBHC.
- Conduct a review of referral criteria with school staff and administration.

How Well Did We Do:

• Establish protocols for conducting mental health screenings at medical visits.

Is Anyone Better Off:

 Educate SBHC mental health clinicians regarding the new benchmark for determining treatment outcomes (using treatment goals vs. a specific tool with pre and post-tests).

Data Development Agenda:

- 1. Document in eClinicalWorks goals that students are trying to reach and progress.
- 2. Work with eClinicalWorks to ensure all data can be easily be reported and exported to DPH.
- 3. Further refine data collection capability of eClinicalWorks for better identification and management of the outcomes of students who have received at least 3 months of counseling.