

2015-2016, Waterbury - School Based Health Centers, Mental Health Services (grades K - 12)

Driggs Elementary School, Crosby High School and Wallace Middle 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.

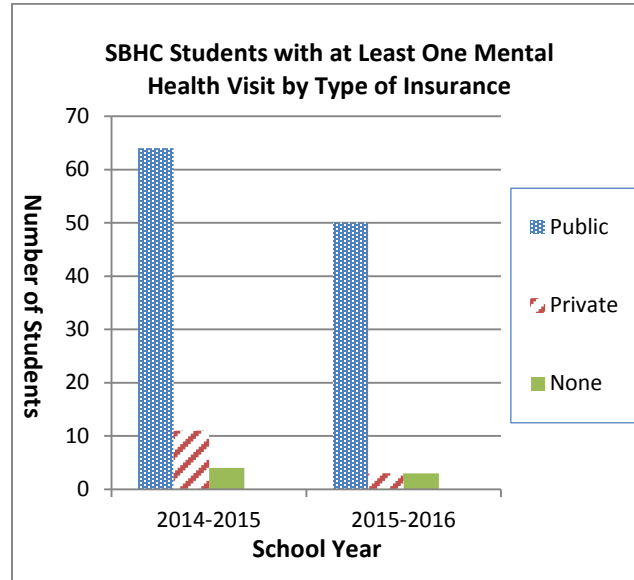
| Program Expenditures | DPH SBHC Funding | Other State Funding | Federal Funding (MCHBG, ACA) | Total Other Funding (Other federal, Local, Private) | Reimbursement Generated | Total Site Funding |
|----------------------|------------------|---------------------|------------------------------|---|-------------------------|--------------------|
| Actual SFY 16 | \$272,484* | \$0 | \$0 | \$0 | \$444,543* | \$717,027* |
| Estimated SFY 17 | \$256,435* | \$44,000** | \$0 | \$0 | \$444,550* | \$744,985* |

Sponsoring Agency: StayWell Health Center

Partners: Waterbury Board of Education, Teaching Faculty; School Nurses, Psychologist and Social Workers; Administrators, Parents, Wellmore Behavioral Health, University of New Haven, CASBHC, DPH, DSS, Bridge to Success Community Group/Advisory Board, CT Chapter of the AAP, School Based Health Alliance

How Much Did We Do?

Access and Utilization



Story behind the baseline:

In 2015-2016 the total student population for Driggs Elementary & Crosby/Wallace was 2,935, and the total enrolled in the School Based Health Centers (SBHC) was 2,107. Driggs has a high student turnover rate, which accounts for the number enrolled being higher than the school census. It is therefore difficult to determine the percentage of enrollment,

but we estimate it is close to 100%, which exceeded our goal of 70% student enrollment.

In 2015-2016 the total student population for Crosby High School and Wallace Middle School was 2,397, and the total enrolled in the School Based Health Center (SBHC) was 1,490 (62% of population), which exceeded our goal of enrolling 40% of students.

The number of students receiving mental health services was 56 or 2.7% of students enrolled in the SBHC. The average number of visits per student was 11.5 (56 students/646 visits). There was a decrease in the number of students served from 2014-2015 (79) to 2015-2016 (56), due to a vacancy in behavioral health staffing for part of the year. These services are sub-contracted through Wellmore Behavioral Health.

In 2015-2016, 50 (89.3%) students had public insurance, 3 (5.3%) had private insurance and 3 (5.3%) had no insurance. We continue to make considerable effort to acquire public insurance for students who qualified and had had a status of none or unknown in 2015-2016. Overall, students with any type of insurance remained steady at about 95%; however, we do note a decrease in those with private insurance.

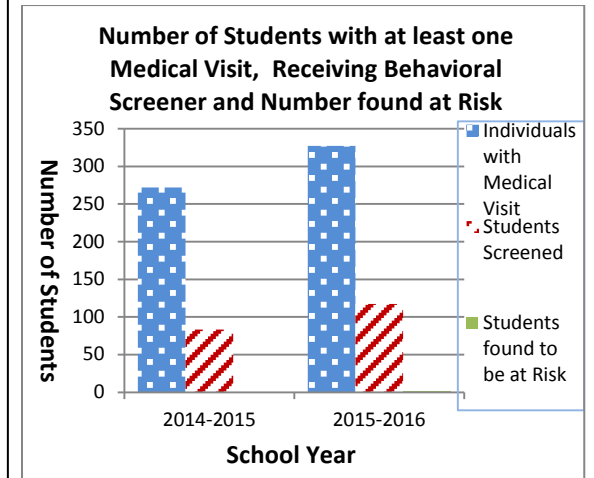
Trend: ◀▶

Students' Population, Enrollment, Mental Health Visits and Students Served at Driggs Elementary School 2015-2016

| Schools | Population | Enrolled | MH Visits | MH Served |
|----------------|--------------|--------------|------------|-----------|
| Driggs ES | 538 | 617 | 332 | 27 |
| Crosby/Wallace | 2,397 | 1,490 | 314 | 29 |
| Total | 2,935 | 2,107 | 646 | 56 |

How Well Did We Do?

Screen All Students for Mental/Behavioral Health Issues that received a Medical Visit.



Trend Going in Right Direction? ▲ Yes; ▼ No; ◀▶ Flat/ No Trend

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Story behind the baseline:

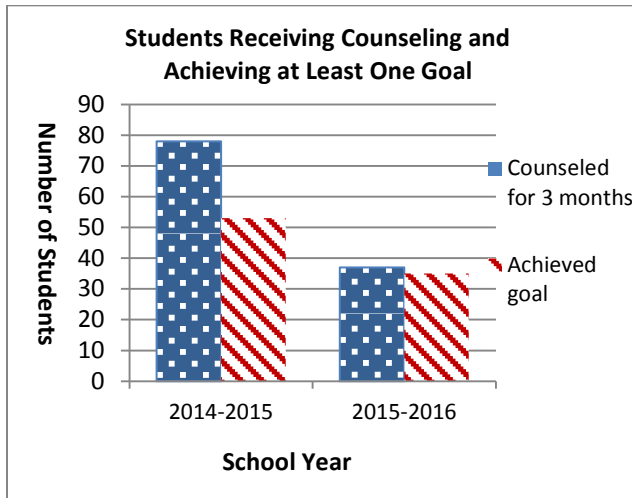
In 2015-2016, 117 (36%) students had a mental health screening at Crosby/Wallace, using the PQH-9, at the time of physical. Only 2 of these students were identified as being at risk, and were referred for and received counseling services at the SBHC. The PQH-9 is used to screen all students who have a physical at the SBHC who are age 12 or over.

While we do not utilize a standardized screening tool for our elementary school age students, the APRNs do ask questions, as a part of taking the student history, which screen for mental health issues. They then make referrals to the SBHC counselor based on those findings. However, we have not kept data on those referrals to date.

Trend: ◀▶

Is Anyone Better Off?

Students Receiving Counseling Meeting their Goals



Story behind the baseline:

Since we had a vacancy in our counseling staff for part of the year, we had a decrease in the number of students served by mental health services.

In 2015-2016, 37 of the 56 (66%) students that had a mental health visit received at least 3 months of counseling. Of those 35 (94.6%) met at least one goal. In 2014-2015, 78 students received counseling at least 3 months, while 53 (67.9%) achieved at least one treatment goal.

Trend: [▲]

Notes:

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

**Funding through OPM for facility renovations at Driggs SBHC.

Proposed Actions to Turn the Curve:

How Much Did We Do:

- Provide brochure along with enrollment form, to further explain SBHC programs and benefits to parents in order to increase enrollment.
- Provide outreach activities with parents, students and school staff, including new student kindergarten orientation.
- Implement use of automatic message system, which interfaces with EHR, to remind parents of scheduled appointments.
- At Crosby/Wallace, provide training at a staff development meeting to increase school staff's knowledge of what services are available at the SBHC.
- At Crosby/Wallace, Identify key staff members to meet with to increase number of students who attend scheduled appointments.

How Well Did We Do:

- Revise satisfaction survey to obtain additional information to gain perspective on how SBHC services are viewed, including a question to assess cultural sensitivity.

- Consider development of targeted mental health satisfaction survey.
- Develop a system to keep records on students screened for mental health issues during physicals and/or other medical visits and determined to require referral for counseling.

Is Anyone Better Off:

- Build more relationships with school staff (social workers, guidance counselors, etc) to promote referrals for mental health services.
- Provide counseling services for as many students as possible on site, and to refer students for off-site services when unable to accommodate students when SBHC counselor caseload is at capacity.

Data Development Agenda:

1. Refine methods of documenting in Greenway Intergy EHR, with the assistance of the Clinical Informatics Specialist, in order to obtain the most accurate data possible.
2. Work with EHR to ensure all data can be easily exported to DPH.
3. All returning clinicians will meet with the SBHC Manager re: data collection and discuss during quarterly staff meetings.
4. Data will continue to be shared by the schools in order to make data-driven decisions regarding service need and outcomes.

Trend Going in Right Direction? ▲ Yes; ▼ No; ◀▶ Flat/ No Trend