

## 2018-2019, Danbury Sites - School Based Health Centers, Mental Health Services (grades 6-12)

Broadview Middle School, Rogers Park Middle School, and Danbury 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.

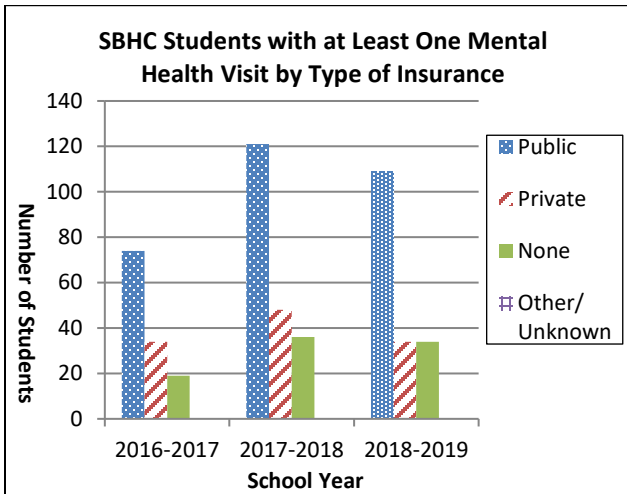
Program Expenditures	DPH SBHC Funding	Other State Funding	Federal Funding (MCHBG, ACA)	Total Other Funding (Other federal, Local, Private)	Reimbursement Generated	Total Site Funding
Actual SFY 19	\$209,704*	\$0	\$0	\$0	\$75,937	\$285,641
Estimated SFY 20	\$209,704*	\$0	\$0	\$0	\$80,000	\$289,704

*Sponsoring Agency:* Connecticut Institute for Communities – Greater Danbury Community Health Center

*Partners:* CASBHC, DPH, DSS, DMHAS, DCF, School Based Health Alliance, School Administrators and Faculty, Family and Children's Aid

### How Much Did We Do?

Access and Utilization



### Story behind the baseline:

The total student population in 2016-2017 for Danbury High School (DHS), Broadview Middle School (BMS) and Rogers Park Middle School (RPMS) was 4,949. The total number enrolled at SBHC sites was 3,137 (63%). The number of students served was 127 (4% of enrolled). 127 students had at least one mental health visit, data was only available for BMS and RPMS due to system crash and loss of data for DHS. Out of those 127 students, 74 (58%) had public insurance, 34

(27%) had private insurance, and 19 (15%) had no insurance.

In the 2017-2018 school year the total student population for Danbury SBHC sites was 4,950 and the total number enrolled was 3,809 (77%). The number of students served was 205 (5% of enrolled). Of the 205 students with at least one mental health visit, 121 (59%) had public insurance, 48 (23%) had private insurance, and 36 (18%) had no insurance.

During the 2018-2019 school year, the total student population was 5,034. The total number enrolled in the SBHC was 4,119 (82%) and the total number served was 177 (4% of enrolled). Of the 177 students with at least one mental health visit, 109 (62%) had public insurance, 34 (19%) had private insurance, and 34 (19%) had no insurance.

There were barriers and challenges with staffing, the addition of block scheduling at one school, and the introduction of electronic medical records that may have caused the decrease in number of students served from 2016-2017 to 2018-2019. The gradual increase in public insurance for students utilizing mental health services from 2016-2017 to 2018-2019 could be related to rising healthcare costs and a larger number of students enrolled in state insurance.

Students' Population, Enrollment, Mental Health Visits and Students Served at Danbury School Sites 2018-2019				
Schools	Population	Enrolled	MH Visits	MH Served
Broadview	973	627	559	76
Rogers Park	1005	815	650	52
Danbury HS	3056	317	544	49
<b>Total</b>	<b>5034</b>	<b>4119</b>	<b>1753</b>	<b>177</b>

Trend: [▼▲]

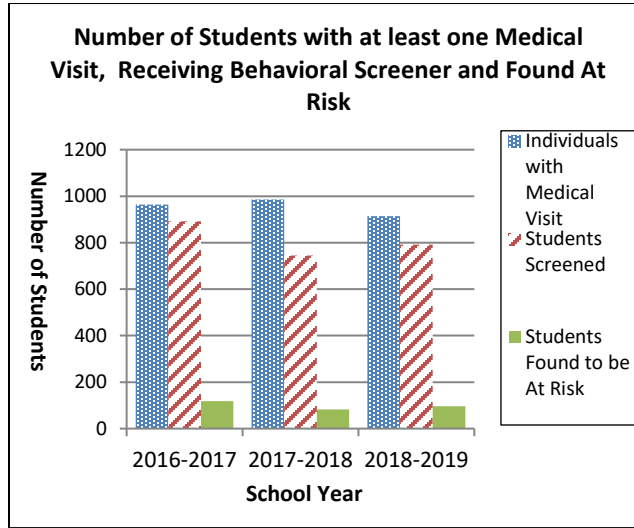
Trend Going in Right Direction? ▲ Yes; ▼ No; ◀▶ Flat/ No Trend

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## How Well Did We Do?

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



### Story behind the baseline:

In 2016-2017, the number of students who had at least one medical visit was 963 (31% of 3,137 enrolled). Of those 892, (93%) students received a behavioral screening. The number of students found at risk was only available for BMS and RPMS in relation to a system crash at DHS. 118 of the 502 screened at BMS and RPMS (24%) were found at risk.

In 2017-2018, the number of students who had at least one medical visit was 985 (26% of 3,809 enrolled). 744 (76%) students received a behavioral screening and 82 (11%) were found at risk.

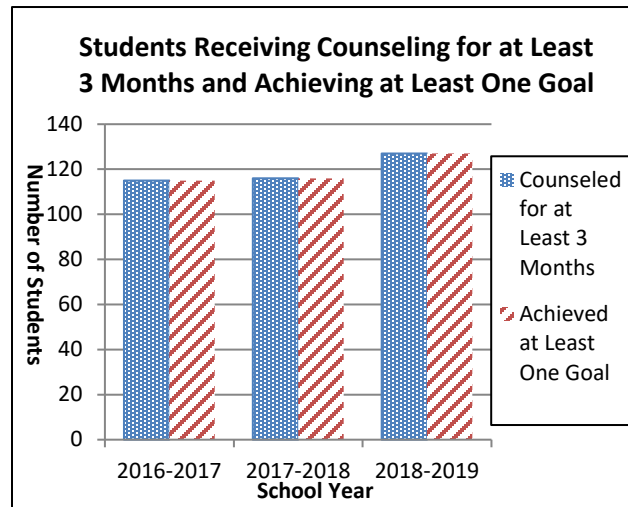
In 2018-2019, the number of students who had at least one medical visit was 914 (22% of 4,119 enrolled). Of those, 792 (87%) students received a behavioral screening and 96 (12%) were found at risk.

From 2016-2017 to 2017-2018, there was a decrease in students who received a behavioral screening at a medical visit. Efforts were made in 2018-2019 to increase behavioral screenings completed for students who had a medical visit, which increased by 14%. The trend of students found at risk from 2017-2018 to 2018-2019 stayed fairly consistent.

Trend: [▲]

## Is Anyone Better Off?

Students Receiving Counseling Meeting their Goals



### Story behind the baseline:

In 2016-2017, 115 students received counseling for at least three months and 100% achieved at least one goal.

In 2017-2018, 116 received counseling for at least three months and 100% achieved at least one goal.

In 2018-2019, 127 received counseling for at least three months and 100% achieved at least one goal. Visible efforts were made by the new social worker at BMS to counsel more patients than in past years.

Trend: [◀▶]

## Notes:

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

## Proposed Actions to Turn the Curve:

### How Much Did We Do:

- Outreach efforts include enrollment forms sent home at the beginning of the school year, attendance at all open house nights, transition services to the DHS SBHC site, and individual outreach to students as needed.

### How Well Did We Do:

- Every student completes a Rapid Assessment Adolescent Preventative Services (RAAPS) screening at their first visit to a Danbury SBHC site each school year.

### Is Anyone Better Off:

- The nationwide trend for adolescence indicates increased anxiety and depression. Therefore, providing behavioral health services in school allows students to access their own mental health services without barriers to care.
- Will continue to collect Student Satisfaction Survey information to meet students' needs

### Data Development Agenda:

1. Document measurable goals and progress made in eClinical Works.
2. Data reports will be easily generated in eClinical Works for DPH

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