SUSTAINABLE SCHOOL MENTAL HEALTH PROGRAMS

In an Era of Trauma and Instability





OBJECTIVES

 Participants will have an expanded understanding of trauma responsive program engagement during periods of unrest

- Participants will be able to list three strategies to reduce silos in behavioral health programming
- Participants will be able to list three strategies to evaluate a school-based program

EMBEDDING SCHOOL BEHAVIORAL HEALTH

Impetus of Behavioral Health Programs in City Schools

GROWTH OVER 30 YEARS

Partnership Initiation

- Baltimore City Public Schools (City Schools)
- Baltimore City Health Department (BCHD)

Population Identification

- Over 85% of the students qualify for free lunch (universal free breakfast and lunch as well as supper for schools with late afternoon/ evening programs provided)
- Most students are Medicaid or Children's Health Insurance Program (CHIP) eligible

Initial Model

- Focused on Mental Health Only
- Initially began in 1 school then expanded to 4 schools

Partnership Growth

- Baltimore Mental Health Systems (BMHS)
 - Expansion of Mental Health
 - Addition of Prevention Funding (6th Grade Initiative; carved out FY2019)
- Baltimore Substance Abuse Systems (BSAS)

CURRENT OVERVIEW

FISCAL YEAR 2020

Early Childhood Mental Health

 FY2020 ECMH program facilitates access to early childhood mental health consultation in 3 Head Start Programs with 30 sites

Expanded School Mental Health

• FY2020 Expanded School Mental Health (ESMH) program facilitates access to school-based outpatient services in 128 public schools.

School Based Substance Use Disorder Program

• FY2020 School Based SUD Program facilitates access to school-based outpatient services in 15 schools.

Includes

- Prevention
- Early Intervention
- Ongoing Care

TRAUMA RESPONSIVE COMMUNITY ENGAGEMENT

Service Provision During Periods of Unrest



NOUN

1. A DEEPLY
DISTRESSING OR
DISTURBING
EXPERIENCE.

Baltimore erupts: State of emergency declared; National Guard activated to stem violence

Baltimore Ranks 4th Most Dangerous City in America-CBS Baltimore 10/26/2019

Baltimore City schools' deep freeze

14 Shot in 24 hours in Baltimore, 5 in Single Incident-Baltimore Sun Feb2019

Baltimore school system reports assaults by students against adults last year

3 guns recovered at Baltimore City schools this year; BB gun found yesterday at an elementary school

Frederick Douglass High School Shooting Victim Released From The Hospital Frederick Douglass High Staffer Hospitalized After Confronting Armed Suspect At The School's Entrance

Baltimore schools mourn, remember 12 students lost in another year of violence

CURRENT OVERVIEW

A COLLECTIVE RESPONSE

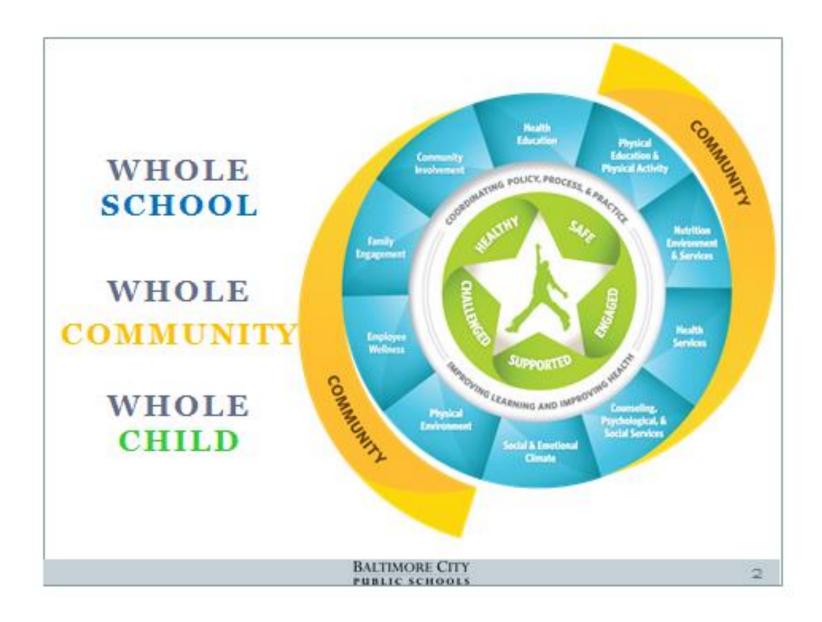
Focus:

- Sustainable Funding (ESMH)
- Workforce Development (Training)
- Collaborations/Partnerships
 - Including Youth/Caregiver/Community Engagement

Current Collaborations/Partnerships (alphabetical)

- Alliance for a Healthier Generation
- Baltimore School Climate Collaborative (BSSC)
- B'More Resilient
- Child Fatality Review (CFR)
- Expanded School Behavioral Health (ESBH)
- Fetal Infant Mortality Review (FIMR)
- Casel Partnership
- Local Care Team (LCT)
- Promoting Student Resilience (PSR)
- School Health and Wellness Council
- Supporting Our Students (SOS)
- Student Wholeness

INTENDED IMPACT OF THE WORK



INTENDED IMPACT OF THE WORK



LESSONS LEARNED

Culturally Responsive Treatment: Workforce

- Challenge: Ensuring a well-trained workforce in the areas of culturally responsive treatment and cultural humility
- Solution: June 2019 BCPS School Board
 Decision and ongoing training of our identified
 workforce, resourcing and monitoring of
 additional contract deliverables adding
 additional oversight opportunities

Trauma Responsive Treatment: Workforce

- Challenge: Ensuring a well-trained workforce in the area of trauma responsive treatment
- Solution: Ongoing training of our identified workforce to ensure equitable student responses and additional contract deliverables adding additional oversight opportunities

LESSONS UNDERWAY

Trauma/Culturally Responsive Treatment: Sustainable Funding

- Challenge: Funding is often time limited, impacting sustainable implementation
- Solution: Ongoing outreach to funders and braiding of funding resource

Diversity in Treatment Providers: Workforce Development

- Challenge: Ensuring treatment providers are reflective of the communities they are serving
- Solution: Incorporation of procurement priorities related to organizations identified as MBEs; open and honest discussion regarding equity in recruitment, hiring and retention

• Leveraging Efforts: Collaborations/Partnerships

- Challenge: Strong efforts are being made to support youth and families through city schools, which often leads to duplication reduced leveraging of funds
- Solution: Using the ESBH program as an example of proactive collaboration/partnership and sharing of funding

FUNDING SCHOOL BEHAVIORAL HEALTH

Balancing the Braid

BRAIDED FUNDING

- Baltimore City Public Schools (Initial Funder)
- Baltimore City Health Department (Initial Partnership)
- Public Behavioral Health
 System (PBHS, 1115 Waiver)
- Baltimore Mental Health
 Systems (State Block Grant)
- Baltimore Substance Use
 Systems (Prevention Funding)
- Foundations (Private Grants)

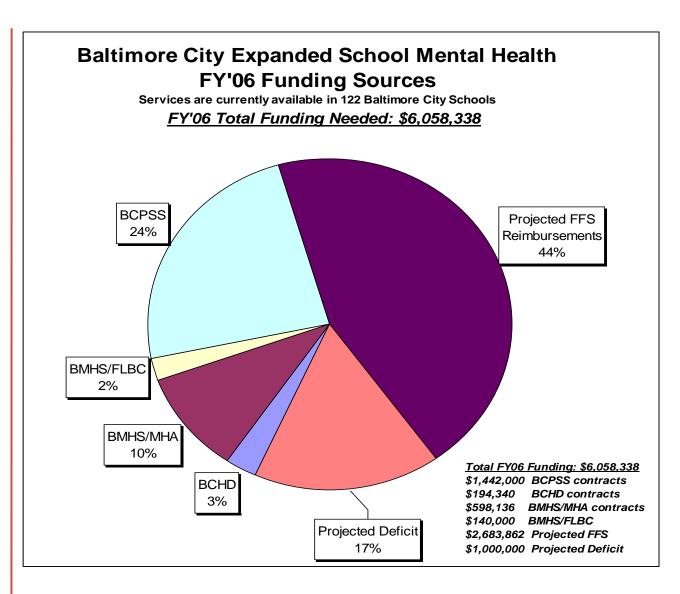
1996 1115 WAIVER

- Behavioral Health Administration (BHA) and Maryland Medicaid (in partnership with the Maryland Department of Health) applied for this Waiver
- Created a Public Behavioral Health System October 1996
- Moved mental health treatment from grant funding to fee for service
- Outpatient Mental Health Clinics (OMHCs) could bill for school based services using schools as a "separate site" (usually through the use of a billing "modifier)
- More information about Maryland's 1115
 Waiver can be found at the following:
 https://www.medicaid.gov/medicaid/sectio
 n-1115-demo/demonstration-and-waiver list/?entry=8488

2016 PROVIDER ALERT

- PBHS Provider Manual has been updated to offer guidance on how to document when delivering services in the school setting
- As long as providers are delivering services within their scope of practice and license, behavioral health providers may have arrangements with schools in which they deliver their services
- Place of service code must reflect "03" as an identifier that the service occurred within the school

FISCAL YEAR 2006



CURRENT OVERVIEW

FISCAL YEAR 2019/2020

- FY20 Unduplicated Number of Schools Supported (MH/SUD):
 - MH: 128* (*includes 4 MOU Schools)
 - SUD: 15
- FY20 Number of FTEs Supported:
 - MH: 77* (*does not include FTEs in 4 MOU Schools)
 - SUD: 7.5
- FY19 Number of Youth Served: 11,090
- FY19 Teacher Consultations: 43,805
- FY19 ESMH Funding Source/Amount:
 - Public Behavioral Health System: \$4,366,000
 - State Block Grant (MH327): \$742,113
 - Foundation/HMO (Kaiser): \$24,000
 - City Schools (BCPS): \$1,500,000
- FY19 SUD Funding Source/Amount:
 - City Grant: \$490,000
- FY19 Total Funding: \$7,122,113

LESSONS LEARNED/ UNDERWAY

Sustainability (Reductions)

- Challenge: Significant reductions in state and federal funding streams due to economic pressures
- Solution: Finding alternative funding under affordable care and pooling resources as well as partnering with the large HMO's

Sustainability (Time Limited Dollars)

- Challenge: Utilization of Foundation/Miscellaneous funding to expand services
- Solution: Diversifying with multiple partners while engaging larger systems in funding commitments (e.g. DSS/DJS/etc.)

Funder Requirements

- Challenge: Shifting priority areas for focus of funding
- Solution: Ongoing engagement of funders in discussions and utilization of data to advocate for continued opportunities

EVALUATING SCHOOL BEHAVIORAL HEALTH

In Data We Trust

EVALUATION TOOLS

- Integration of City Schools Outcomes via the Office of Achievement and Accountability (OAA)
- **Botvin's Life Skills Survey** instrument used to examine changes in knowledge, attitudes, and skills; consists of 60 items to measure drug refusal skills, assertiveness skills, relaxation skills, and self-control skills.
- CAGE is a 4-item, screening test for problem drinking and potential alcohol problems (alcoholism)
- **CRAFFT Screening Tool** is a behavioral health screening tool used with children under 21 to assess substance use; consists of 6 questions to screen adolescents for high-risk alcohol and other drug use disorders.
- Screen for Child Anxiety Related Disorders (SCARED) is designed to screen for anxiety disorders in children ages eight and above; consists of 41 items that measure general anxiety, separation anxiety, social phobia, school phobia, and physical symptoms of anxiety
- Vanderbilt is used for helping to diagnose ADHD in children

IDENTIFIED OUTCOMES

- Student Attendance: percentage of students attending at least 90% of school days
- Suspension: percentage of students with no suspensions after beginning services
- Special Education referrals: decrease in the number of behavior-based referrals to IEP teams
- Promotion: percentage of students promoted to the next grade

RESULTS

- Georgetown University
 - Comprehensive program evaluation
 - Found that students receiving ESMH services had increased promotions, better attendance and less suspensions than their peers not receiving services
- 2015 Re-Evaluation
 - Conducted of a sample of schools
 - Found better attendance and fewer suspensions

CURRENT OVERVIEW

FISCAL YEAR 2020

- Evidence-Based Assessment (EBA) Initiative involves:
 - Use of assessments that are reliable, valid, and clinically useful for the intended population
 - Data collection at regular intervals throughout treatment
 - Informing diagnosis, treatment planning, and outcome
 - Ongoing progress monitoring to inform changes in treatment

EVIDENCE-BASED ASSESSMENT

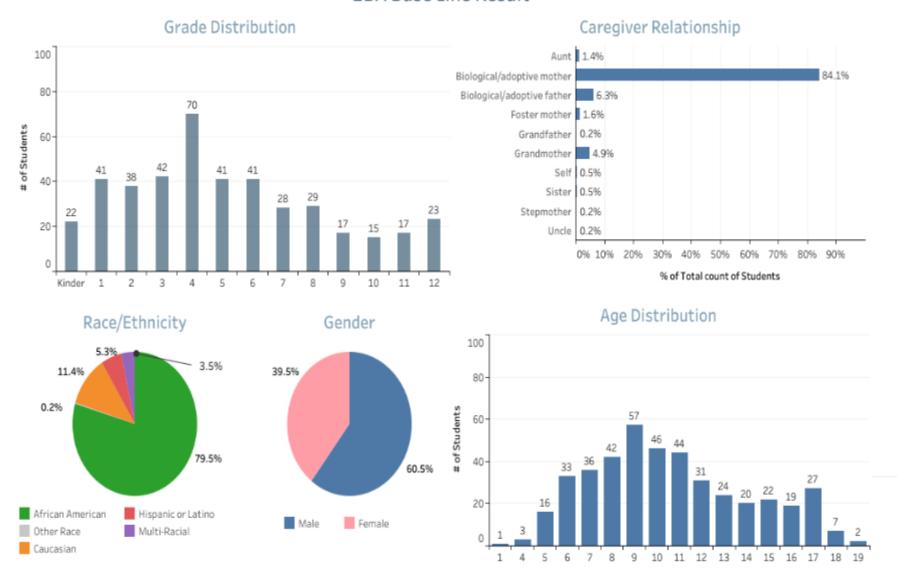
- Selected Tool: PSC-17
- Sample Size: Six (6) youth per school (125 schools)

• THE PEDIATRIC SYMPTOMS CHECKLIST (PSC-17)

- A psychosocial questionnaire with 3 subscales:
 - Attention Problems
 - Internalizing Problems
 - Externalizing Problems

EBA BASELINE - DEMOGRAPHICS

EBA Base Line Result



FINDINGS-SUMMARY

- Mental Health (MH) risk decrease, 4 percent overall
- No changes in Internalizing subscale
- Borderline decrease in Attention subscale (5 percent)
- Borderline decrease in Externalizing subscale (8 percent)
- Stratified Analyses:
 - MH risk decrease significantly in Male students
 - MH risk decrease significantly in African American students
 - Significant difference in Attention Subscales in African American Male students
 - Significant difference in Externalizing Subscales in African American Male students

LESSONS LEARNED

Choice of Tool

- Challenge: Identification of tool which provides the needed data and can be easily implemented across service lines
- Solution: Intensive and ongoing collaboration with sub-vendors, data analysis team and consultants to evaluate tools and determine choices

Evidence Based <u>Assessment</u> vs. Evidence Based <u>Intervention</u>

- Challenge: Results may allow for hypothesis regarding impact of enrollment/treatment but do not point to a particular intervention
- Solution: Ongoing data process development and analysis with sub-vendors and the data analysis team

Data Analysis (Capacity and Collaboration)

- Challenge: Analysis of data takes time and staff which challenges capacity
- Solution: Monthly collaboration meetings to evaluate and prioritize needs and determine distribution of work

LESSONS UNDERWAY

Academic Demands

- Challenge: Academic demands of the school day with the common core and PARCC assessment as focus of the program with little left-over time for supplemental service
- Solution: Presentation of data that supports better academic achievement when mental health services are provided (Georgetown report)

Sub-Vendor Engagement

- Challenge: Engaging sub-vendors to be willing to participate in the Evidence Based Assessment Initiative via completion and submission of the PSC-17
- Solution: Active and ongoing sharing of results and hypothesis with sub-vendors, including potential benefits of a larger sample size

Caregiver Engagement

- Challenge: Due to services being provided on-site at schools, in person engagement of caregivers can be limited
- Solution: Selection of a tool which can be completed via phone and or electronic device

RE-SIL-IENCE /RƏ'ZILYƏNS/

NOUN

1. THE CAPACITY TO RECOVER **QUICKLY FROM DIFFICULTIES**; TOUGHNESS.

Council bill seeks to boost city's response to youth trauma

After gunfire erupted at her school, a Douglass High School student helped a councilman craft a bill that deals with trauma suffered by young people 31 Baltimore City students publish their first book "I Am the CEO"





BALTIMORE (WBFF) 31 Baltimore City youth shared their personal stories of triumph in their first published book, "I am the CEO: Chief Executive Overcomer."

Moms, students rally in Baltimore for gun legislation









QUESTIONS?

CONTACT INFORMATION

Louise L Fink, PhD

Director, Home and Hospital/Health Services (410) 396-0775; LLFink@bcps.k12.md.edu

Heather Dewey, LCSW-C

Associate Director, Child & Family Services 443-615-7814; Heather.Dewey@BHSBaltimore.org

Ashley Collins, MPH

Rehabilitation and Treatment Coordinator, Child & Family Services 410-735-8552; Ashley.Collins@BHSBaltimore.org

LEARN MORE ABOUT CITY SCHOOLS

- Baltimore City Schools website
- <u>www.baltimorecityschools.org/cityschoolsinside</u>
- Click here to for news and updates
- https://www.facebook.com/baltcityschools
- Learn about our exciting Building a Generation: City Schools' Blueprint for Success

LEARN MORE ABOUT BHSB

- BHSB Youth and Families Website: <u>http://www.bhsbaltimore.org/for-individuals-and-families/youth-and-families/</u>
- BHSB News and Updates: Click here to sign up
- BHSB Events; learn more by visiting https://www.bhsbaltimore.org/get-involved/events/
- BHSB Trainings; learn more by visiting https://www.bhsbaltimore.org/get-involved/trainings/

CONTACT US



Envisioning a city where people live and thrive in communities that promote and support behavioral health

100 S. Charles Street Tower II, 8th Floor Baltimore, MD, 21201

Phone: 410-637-1900

Website: <u>www.BHSBaltimore.org</u>

Facebook:

www.facebook.com/BHSBaltimore

Twitter: @BHSBaltimore