

Report to the Public Health and Education Committees
of the Connecticut General Assembly
On
School Based Health Centers

Submitted by
The School Based Health Center Advisory Committee
(Established by P.A. 11-242 as amended in Section 44 of the CT General
Statutes)

January 2013

School Based Health Center Advisory Committee (SBHC)
January 1, 2012 – December 31, 2012 Summary

Background and History

In response to Public Act 11-242, §44 , (a) there is established a school based health center advisory committee for the purpose of assisting the Commissioner of Public Health in developing recommendations for statutory and regulatory changes to improve health care through access to school based health centers. The committee shall be composed of the following members: the Commissioners of Public Health, Social Services, Mental Health and Addiction Services, Education or the commissioners' designees; and three school based health center providers appointed by the Connecticut Association of School Based Health Centers. Administrative support for the activities of the committee may be provided by the Connecticut Association of School Based Health Centers (CASBHC).

The committee met nine times between January 2012 and December 2012. Committee members submitted information reflecting work done on behalf of SBHCs during the last year for purposes of this report. The following topics were identified as priority areas for SBHCs:

1. The developers (the Children's Hospital Colorado and the University of Colorado) of the Clinical Fusion[®] software used in Connecticut's SBHCs made a decision to terminate the selling of software licenses and providing technical support after July 1, 2012. SBHCs need an alternate data collection tool
2. Resolve licensure of behavioral health services provided in School Based Health Centers
3. Develop language that provides a definition of "School Based Health Centers" in Connecticut
4. Monitor the progress of School Based Health Centers in the implementation of electronic health records

The activities identified below are aligned with the School Based Health Center Advisory Committee focus areas:

In February 2012, the Legislative Program Review and Investigations Committee released its report of *Adolescent Health in Connecticut*. Section II addressed School Based Health Centers in detail, and included recommendations for the continued performance improvement of the program at both the state and local levels. The committee focused on several key areas recommended in the report:

- The federal definition of school based health center contained within the Social Security Act should be codified in Connecticut. The Department of Public Health should establish formal performance goals for state-funded school based health centers

- Develop plans for replacing the current automated management information system; elicit feedback from all centers as to what data are most relevant and collectible for program performance purposes.

Committee Activities

In the period represented by this report, the committee engaged in the following statutory and regulatory activities:

- ♦ The SBHC Advisory Committee reviewed the federal definition of School Based Health Centers and provided input into codifying a definition in Connecticut statute. The committee discussed focused on the comprehensive model of care provided in Centers in Connecticut – a model that includes both primary care medical and behavioral health services
- ♦ Connecticut’s School Based Health Centers have provided medical and behavioral health services for more than twenty years. SBHC medical and dental services are licensed by the Department of Public Health (DPH) under the outpatient clinic license or hospital satellite license. SBHC behavioral health services are described in the Department of Social Services’ definition of a freestanding medical clinic, are described in the Behavioral Health Partnership provider manual as reimbursable services, but are not licensed by the Department of Public Health. Committee members and staff from the DPH Licensure Division met on several occasions to discuss the issue. Staff from the Department of Children and Families, the licensing authority for children’s behavioral health, participated in two conference calls. Discussions are ongoing as the issue has not yet achieved resolution
- ♦ Committee members addressed the requirement set forth in PA 12-1, Section 96 School Based Health Center Communications Agreement. PA 12-1, Section 96 requires, by July 1, 2013, each SBHC that receives operational funding from DPH to enter into an agreement with the school’s local or regional board of education to establish minimum standards for the frequency and content of communications between the SBHC and the school’s nurses or nurse practitioners. Members of the Committee created template language to assist each state-funded SBHC program meet the requirement. A draft of the template language is in review
- ♦ The Education Reform Act (PA 12-116, Section 8(b) described the expansion of SBHCs through Alliance Districts: for the school year commencing July 1, 2012, the Commissioner of Public Health shall establish or expand a minimum of twenty school based health clinics that are located in Alliance districts.

State Agency Partners

- The Department of Public Health developed an Access database to replace the terminated Clinical Fusion. The database has been implemented in a significant number of SBHC sites and contains indicators to measure outcomes of health interventions. The database continues to be modified to improve data input and collection
- The SBHC Advisory Council representative of the Department of Mental Health and Addiction Services provided a presentation of the 1 Word, 1 Voice, 1 Life suicide prevention campaign, developed by the Connecticut Suicide Advisory Board
- SBHCs are represented at the Behavioral Health Screening Workgroup convened by the Department of Social Services. In November 2012, an SBHC nurse practitioner presented a model of behavioral health screening utilized by primary care providers in the SBHC setting.

Other Committee and Member Activities

- School Based Health Centers, as safety net facilities for children and adolescents, are strengthened through their participation in the state's emergency preparedness networks. With funding from the Department of Public Health, CASBHC was able to support training, community collaboration with preparedness networks, the acquisition of necessary pandemic influenza/infection control supplies, and the development of emergency operations plans
- Throughout the period of this report, Committee representatives attended meetings of the Medicaid Assistance Program Oversight Council and the Primary Care Case Management committee to determine the role of SBHCs in the Person Centered Medical Home model
- The Committee discussed the engagement of SBHCs in transformations in health information technology. SBHC sites in eleven communities have converted to electronic health records (EHR) or are in the process of doing so. The Committee will continue to explore the ability to collect and transfer data collected through EHR systems to avoid double data collection tools
- In December 2012, nine Connecticut organizations were awarded federal funds for construction, renovation, or equipment purchases through the Health Resources Services' Administration (HRSA) School Based Health Center Capital grants program in the last round of available funding. Funds cannot be utilized to support operational costs; however, all newly constructed centers must be operational within two years.

Advocacy

School Based Health Centers are engaged in multiple statewide committees and councils. These partnerships expand the resources of SBHCs. Committee representations include:

- ♦ Medical Assistance Program Oversight Council: member of Executive Committee and co-chair of Quality Assurance Subcommittee/membership on Care Management Committee for Person-Centered Medical Home initiative
- ♦ Connecticut Behavioral Health Partnership Oversight Council
- ♦ Connecticut Dental Health Partnership
- ♦ Connecticut Coalition for Oral Health
- ♦ DPH Public Health Preparedness Statewide Hospitals and Healthcare Partners committee
- ♦ Medicaid Strategy Workgroup
- ♦ Keep the Promise Coalition Children's Mental Health Committee
- ♦ National Assembly on School Based Health Care: State Executive Directors' Leadership Council.

Recommendations to the Commissioner of Public Health

School based health centers are a critical element of the safety net for vulnerable children and adolescents. SBHCs are active participants in the changing healthcare landscape, and are currently involved in initiatives to meet state and federal requirements. Based upon the four priority areas identified for the 2012 year, the SBHC Advisory Committee makes the following recommendations to improve health care through access to School Based Health Centers.

Recommendations

- Follow the recommendations of the 2006 Ad Hoc Report to bring all DPH-funded SBHCs up to the DPH Standard Model for a full-time comprehensive School Based Health Center as the highest standard of care available (National Gold Standard) with respect to the range and quality of SBHC services (Robert Wood Johnson Foundation's 2003 report *Making the Grade: State and Local Partnerships to Establish School-Based Health Centers*)
- Utilize language from the 2006 Ad Hoc Report to create a definition of a Comprehensive School Based Health Center, described as "a unique service delivery model that provides *medical care and preventive and behavioral health services* provided by a team of licensed interdisciplinary professionals (at a minimum, medical and behavioral) with particular expertise in child/adolescent health who work side-by-side to address and coordinate a broad spectrum of students' health needs and routinely offer to students time-intensive anticipatory guidance and health education. Optional preventive and restorative dental services may also be provided." Align the definition with the federal SBHC

designation as described in the Child Health Insurance Program Reauthorization Act:

http://www.nasbhc.org/site/c.ckLQKbOVLkK6E/b.7543209/k.78CE/Childrens_Health_Insurance.htm

- Create a stepped approach or glide-path to achieve the Comprehensive SBHC Model based on 1) part time operation during the academic year including all hours of school operation, 2) full time operation during the academic year including all hours of school operation, and 3) part time or full time operation year round
- Work with the Department of Children and Families, the Department of Public Health, and the Department of Social Services to resolve the licensure of behavioral health services provided in the state's School Based Health Centers
- The SBHC Advisory Committee should continue its work on crafting a more formal definition of school based health centers
- To ensure sustainability of SBHCs in the changing healthcare landscape, the Committee recommends that all SBHCs implement electronic health records. The Committee will continue to monitor the progress of Centers to achieve this recommendation
- Expand the number of SBHCs that provide dental services or have partnerships with community dental programs.

Committee members will identify and choose priorities for the group to address for the remainder of the year. The intent of this report, particularly the recommendations, is to implement strategies or create regulatory changes that will strengthen and expand the delivery of care provided through SBHCs to Connecticut children, their families, and their communities.

APPENDIX A

School Based Health Center Advisory Committee Members 2012-2013

Department of Public Health	
Rosa Biaggi	Section Chief, Family Health Section
Janet Brancifort	Public Health Services Manager, Family Health Section
Meryl Tom	Social Work Consultant, Adolescent and Child Health Unit, Family Health Section
Mark Keenan	Supervising Nurse Consultant, Adolescent and Child Health Unit
Jill Kentfield	Legislative Liaison, Office of Government Relations
School Based Health Centers	
JoAnn Eaccarino	Child and Family Agency
Melanie Bonjour	City of Danbury
Deborah Poerio	Integrated Health Services
Carlos Ceballos	New Haven Public Schools
Rita Crana	Griffin Hospital
Jesse White-Fresé	Connecticut Association of School Based Health Centers
Department of Children and Families	
Anne Kiwanuka	Clinical Nurse Director, Adolescent and Juvenile Division
State Department of Education	
Stephanie Knutson	School Health Consultant
Department of Social Services	
Nina Holmes	Medical Policy Consultant
Carolyn Treiss	Legislative Program Manager
Department of Mental Health and Addiction Services	
Andrea Duarte	Behavioral Health Program Manager