

June 2<sup>nd</sup>, 2025 3:00 PM – 4:30 PM Zoom

#### TCB School-Based Workgroup June Meeting Agenda

- 1. Welcome & Introductions
- 2. TCB Updates
  - a. Legislative Updates
  - b. Workgroup updates
  - c. 2025-2028 TCB Strategic Plan
- 3. School Behavioral Health Services Overview
  - a. Workgroup Input/Discussion
  - b. Q&A
- 4. School Based Health Center (SBHC) Presentation
  - a. Q&A
- 5. SBHC Study and School Behavioral Health Services Billing Recommendation
  - a. Discussion



School-Based Workgroup Monday June  $2^{nd}$ , 2025 ZOOM

#### **TCB School-Based Workgroup June Meeting Summary**

**Attendees TYJI Staff** LaToya Hinton Aracely Centeno Allison Whitman Erika Nowakowski Elizabeth Connors Stephanie Bozak Emily Bohmbach Christina L. Morales Robyn Moran Jacqueline Marks Edith Boyle Ellen Brezovsky Stacey Olea Kate Bohannan Marissa Mangone Carli Rocha-Reaes Katerina Vlahos Gent Daniels **Christopher Trombly** Melanie Wilde-Lane Megan Bourgillon Jennifer Nadeau Melanie Bonjour

#### Agenda:

- **❖** TCB Updates (TYJI)
  - ➤ Legislative Updates
  - ➤ Workgroup updates
- **❖** TCB Strategic Plan & Workplan Overview
- **School Health Services Presentation**
- **❖** School-Based Health Centers (SBHC) Presentation

#### **Meeting Summary:**

#### **Administrative Updates:**



- A) A TYJI Staff member gave an overview of TCB monthly meetings, and what was presented at the May TCB meeting. The next TCB meeting will be on June 18<sup>th</sup> from 2 PM to 4 PM.
- B) Additionally, TYJI Staff members provided legislative updates on HB 6951, HB7109, and HB 7263. The staff member identified that all three bills have been merged into HB 6951. More updates on legislation will come after the legislative session.
- C) Lastly, an overview of current focus areas of the Prevention, Services, and System Infrastructure Workgroups were given along with their next meeting dates and times. The TYJI staff member reminded workgroup members if they are interested in joining a workgroup, to please contact them.

#### School Based Workplan & Strategic Plan Overview:

- A) The workgroup co-chairs provided information on where the 2025 TCB Strategic plan is located and can be found.
- B) The workgroup co-chairs provided a brief overview the purpose statement of the workgroup, as well as the priorities of the School-Based Workgroup, which are the School-Based Health Center Study, and the school-Based Behavioral Health Services Billing recommendation. The third priority is to be determined by the workgroup.
- C) Workgroup Co-chairs also gave an overview of the School Based section of the TCB's 2025-2028 Strategic Plan. The workgroup co-chairs briefly touched upon the partners and measures of success.
- D) Lastly, the workgroup chairs provided an overview of the short-, medium, and long-term goals identified in the 2025 School Based Workplan.

#### **School Health Services Overview Presentation:**

- A) The Workgroup Co-chairs provided a presentation on school health services, and provided an overview of what school health services are.
  - a. The co-chairs went through what it means when we look at school, health, and services, and went through an umbrella illustration of school health services.
  - b. A co-chair identified that when looking at school health services, school refers to services provided on school grounds, or school campus within all schools, before, during, or after school hours, from Pre-k through higher education.
  - c. When looking at health, a workgroup co-chair touched upon that health encompasses physical, social, emotional, and behavioral health and wellbeing, including substance use or risk.
  - d. An overview of Services within school health services was provided, a workgroup co-chair identified that these services are multi-tiered, and went through the definitions of tier 1, tier 2, and tier 2 services.



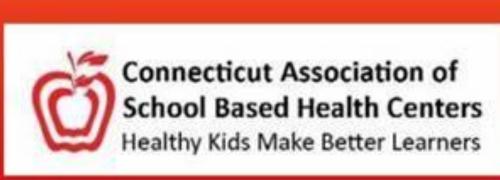
- e. A workgroup co-chair provided an overview of who delivers school health services, including school employed providers, community partnered providers, and School Based Health Centers.
- f. Discussion was had amongst the workgroup around roles of school health employees in schools. The co-chair noted that we will continue to discuss school health personnel in a future meeting with workgroup members.

#### **School-Based Health Centers Presentation:**

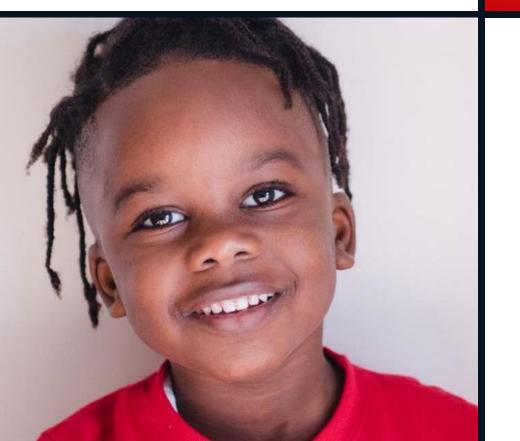
- A) The Executive Director of the CT Association of School-Based Health Centers (SBHCs) provided a PowerPoint presentation to the workgroup on SBHCs.
- B) The Executive Director began the presentation with the history of SBHCs as well as who can access the SBHC services. The presenter noted that all Students who attend a school with a SBHC are eligible to receive services; no one is turned away. Students can receive services regardless of income, documentation status, and insurance.
- C) The presenter touched upon confidentiality within SBHCs, noting that all SBHC services are confidential, and that SBHCs follow both HIPPAA and FERPA rules and regulations.
  - a. The presenter noted that parents must sign a parent permission form for students to receive services through SBHCs.
- D) The presenter went through funding sources of SBHCs and noted that there is no one size fits all for funding of some of the SBHCS. Funding sources can include HRSA funding, DPH, Insurance Reimbursement, Foundations, District Support, and Self Pay.
- E) Next, the presenter touched upon licensing of SBHC's SBHCs are licensed or can be licensed by two different entities; DPH, and DCF.
- F) The presenter then touched upon services in SBHCs, including Medical, Dental, and Mental health services. Additionally, the presenter touched upon who staff are at SBHC's. The presenter elaborated that clinical direction is provided by a medical and/or behavioral health director, and that other staff may include a medical assistant and/or an administrative assistant. The Presenter then touched upon the role of School Nurses, SBHC Practioners and their role together.
- G) Additionally, the presenter touched upon how SBHCs address quality and outcomes and provided an overview of DPH Funded in School Based Health Centers, and where SBHCs are located throughout the State.
- **H)** The floor was open to questions from the workgroup. The presenter put SBHC training modules in the chat for those interested in learning more

Next Meeting: July 7th, 2025, from 3 PM to 4:30 PM

### School Based Health Centers







Melanie Wilde-Lane

**Executive Director** 

The CT Association of School Based Health Centers

## History of School-Based Health Centers



The first Connecticut comprehensive School-Based Health Center was established in 1982 in response to community need and is still in operation at New Haven's Wilbur Cross High School.

### SBHCs Can Serve All Students

### No one is turned away!

All students who attend a school with a SBHC are eligible to receive services

All SBHCs have optin only enrollment

Student can receive services regardless of income or insurance status

# Confidentiality in SBHCs



All SBHC services are **confidential.** SBHCs follow both HIPAA & FERPA rules and regulations



Parents must sign Parent Permission Form: an enrollment form, for students to receive services through the SBHC What does the enrollment form contain?

What is FERPA?

How can a SBHC share information with the primary care physician or other treating professionals?

# Funding Sources

- HRSA
- DPH
- Insurance Reimbursement
- Foundations
- District Support
- Self Pay

# Licensing

Licensed by Connecticut
Department of Public Health (DPH)
as hospital satellite clinics or
outpatient clinics

Licensed by Department of Children and Families (DCF) for mental/behavioral health services

SBHCs can be licensed by both DPH and DCF

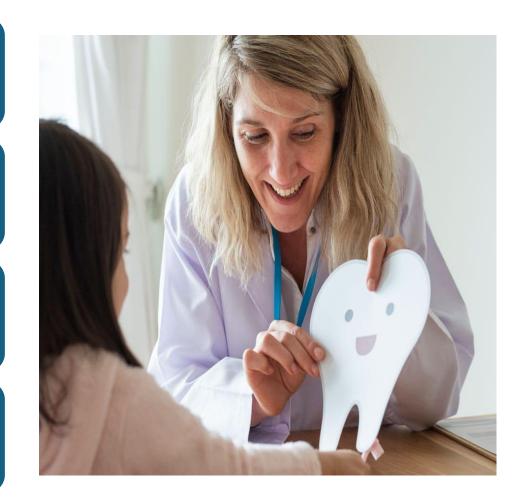
### Services in School-Based Health Centers

Medical health

Mental health

Dental health

SBHCs can include any combination of these three.



# SBHC are staffed by...

Staffed by an expertise in child & adolescent health

Other staff may include a Medical Assistant and/or an Administrative Assistant

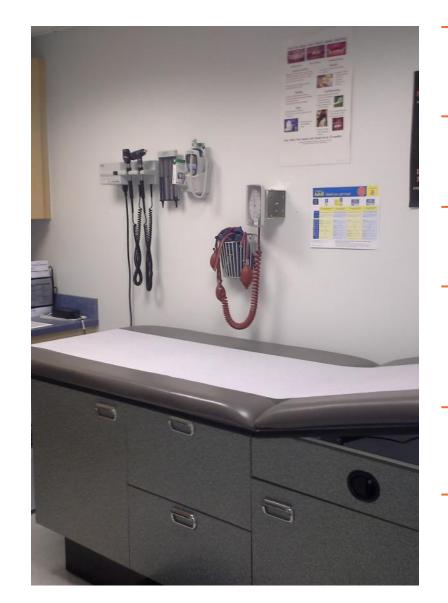
Clinical direction is provided by a medical and/or behavioral health director

Minimum staffing includes:

APRN

LCSW, LPC, LMFT

### Medical Services Provided



**Assessment/Diagnosis/Treatment of acute illnesses** 

Physical Examination including immunizations

Management/treatment of chronic diseases

Referrals for specialty care (orthopedics, pulmonology, gastrointestinal disorders, cardiac care, etc.)

Health education both in the SBHC and in the classroom including health related support groups

Mental health risk assessments with referral to SBHC mental health, when warranted

## What can SBHC medical practitioners do?



#### SBHC practitioners can:

- Complete any follow-up services from private provider visits, communicate the outcome, and provide documentation
- Complete Asthma Action Plans for school use, provide health education and follow-up education
- Complete physicals and immunizations when students cannot visit private provider office
- Complete a sports physical and provide private provider office with documentation
- Follow up on student who is lost to care in a private office
- Collaborate with private providers on disease management
- Accept behavioral health referrals, and with an appropriate enrollment form and release of information, two-way communication can occur
- SBHCs can provide on-site or telehealth services for psychiatry. Referrals can be made, concerns discussed with clinical staff to ensure continuity of care
- Feedback is shared with the treating pediatrician

## School Nurses and SBHC Practitioners

#### **School Nurses**

- Lead the school heath services team to address actual or potential barriers to student health and academic success
- Treat minor illnesses and injuries
- Ensure that students meet the state mandates for physicals and immunizations
- Coordinate care by communicating between the school and family
- Educate families on what health care services are available to their child at school

#### **SBHC Practitioners**

- Partner with the school nurse to increase access to healthcare
- Assess, diagnose, and treat
- Provide follow-up care
- Provide education to school staff, parents, students
- Conduct physicals and provide immunizations
- Coordinate care by communicating with the school nurses, family, and treating physicians
- Www.sbh4all.org

#### **Together**

- Ensure that students receive quality healthcare
- Create a culture of health within the school community to include students, families, school staff and private practitioners
- Assume leadership roles to advocate for healthcare & education reform
- Reciprocal communication and respect to ensure continuity of healthcare services inside and outside the school
- Coordination of care
- Collaboration to address social determinants of health and their causes

### Mental Health Services Provided



Mental health services and screenings

Individual, group, and family therapy

**Crisis Intervention** 

Referral for psychiatric evaluations, medical evaluations, and specialty care.

Risk assessment and health education

**Support groups** 

# School Social Workers and SBHC Behavioral Health Clinician

#### **School Social Workers**

- Participate in special education assessment meetings as well as individual Educational Planning Meetings
- Can work with any student
- Working with those problems in a child's living situation that affect the child's adjustment in school. (home, school, and community)
- Preparing a social or developmental history on a child with a disability.
- Counseling (group, individual and/or family)
- Mobilizing family, school, and community resources to enable the child to learn as effectively as possible in his or her educational program
- Assisting in developing positive behavioral intervention strategies.

#### **SBHC Clinical Social Workers**

- Provide clinical assessment, diagnosis and treatment for student that meet criteria of Axis I diagnosis.
- Requires parental consent, and completion of biopsychosocial treatment plan.
- Provide outpatient individual, group, and/or family therapy.
- May attend PPT's to collaborate and provide clinical insight.
- Access to psychiatrist that can provide further assessment as well as medication management.
- May provide crisis intervention and assessment.
- Referral to additional outpatient services based on clinical necessity (IOP, IICAPS, FFT, EDT)

#### **Together**

- Collaboration to provide wrap around services to student.
- Both can attend PPT's.
  - School social work writes IEP goals and can service special education hours.
  - SBHC social worker can provide update on treatment progress with consent of parent. SBHC social worker can advocate on behalf on students based on clinical insight.

### **Dental Services Provided**



Oral health screenings

**Prophylaxis** 

**Sealants** 

**Restorative care** 

Mobile dental

# How SBHCs Address Quality and Outcomes

Timely school admission

Support compliance with state mandates

Day of appointments

Increased seat time

Acute and chronic illness management

Safe space

Mental health care

Time management for families

**Reduction of barriers:** 

**Transportation** 

Insurance coverage

Financial burdens

Access to care

# DPH Funded Services in School-Based Health Centers

Based on 90 SBHCs funded by DPH

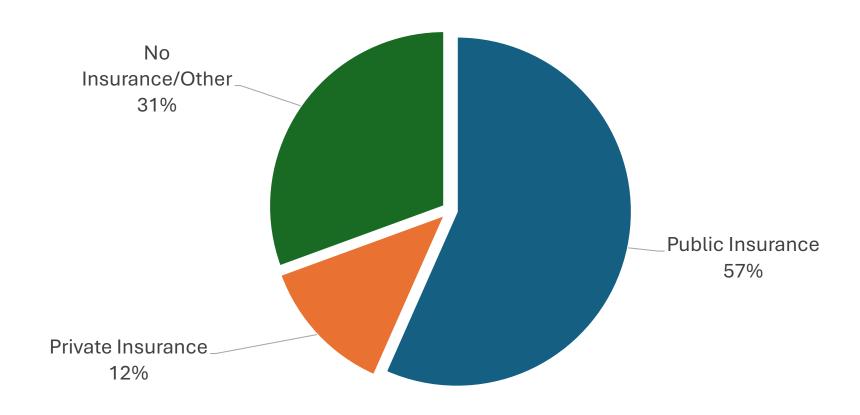
	2019-2020	2020-2021	2021-2022	2022-2023
Medical Visits	44,955	25,711	57,485	55174
Medical Users	17,254	9,831	18,017	18829
Average # of Medical Visits	2.6	2.6	3.2	2.9

	2019-2020	2020-2021	2021-2022	2022-2023
Mental Health Visits	49,297	51,182	63,556	67967
Mental Health Users	4,344	4,515	4,091	3942
Average # of Mental Health Visits	11.3	11.3	15.5	17.2

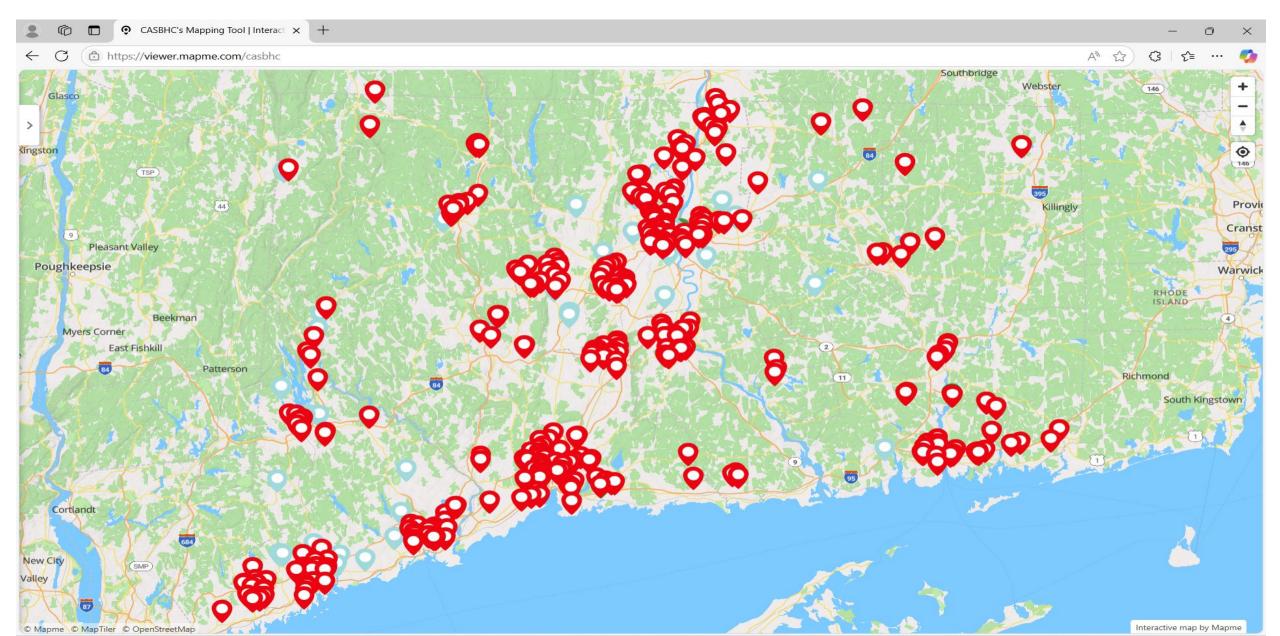
	2019-2020	2020-2021	2021-2022	2022-2023
Dental Visits	5,914	2,880	7,324	6898
Dental Users	3,181	1,674	4,213	3481
Average # of Dental Visits	1.9	1.7	1.7	2

### SBHCs Can Serve All Students





## Where are our SBHC's?





# TCB School Based Workgroup – June Meeting

**June 2nd, 2025** 



# **Meeting Agenda**

Welcome

TCB Reminders and Updates

School Behavioral Health Services Overview

School Based Health Center Presentation

Discussion: SBHC Study and School Behavioral Health Services Billing

# **TCB Monthly Meetings**

TCB Meetings are hybrid and held monthly in the Legislative Office Building (LOB) and on zoom. All meetings are recorded and streamed on the TYJI YouTube Channel and through the Connecticut News Network (CTN)

Meeting Materials are posted on the <u>TCB's Connecticut General Assembly (CGA)</u> website prior to the Monthly meeting

#### **May Meeting Overview:**

At the May 14th TCB meeting, Health Equity Solutions (HES) conducted a focus group session around transformative engagement with the committee. Additionally, TCB Prevention workgroup co-chairs presented on Prevention terminology, topics, and frameworks.

**Next TCB Meeting: June 18th 2-3:30PM (hybrid)** 



# **Legislative Updates**

The TCB currently has three bills going through the legislative process, **HB 6951**, **HB 7109**, and **HB7263**. The bills are linked below.

#### HB 6951

- ☐ This bill includes the crisis continuum study recommendation, school-based health center study, and funding for mobile crisis recommendation.
- ☐ As of 5/8, the bill has been reported out of the Legislative Commissioner's Office, and is House Calendar Number 551

#### HB 7109

- □ This bill included our recommendations regarding amending the age of insurance coverage for Applied Behavioral Analysis (ABA) therapies for individuals with Autism Spectrum Disorder (ASD), the Urgent Crisis Center (UCC) Study, Intensive In Home Child & Adolescent Psychiatric Services (IICAPS) recommendation, and the design of the Certified Community Behavioral Health Clinic (CCBHC) planning grant.
- ☐ As of 5/19, the bill was reported out of the Legislative Commissioner's Office, tabled for House, and is File Number 937

#### HB 7263

- ☐ This bill would allow for the Behavioral Health Advocate and two providers of substance use disorder who treat youth to be appointed members of the TCB.
- LAS of 57.7 the bill was reported out of the legislative's commissioner's office, and is House File Number 543

# Workgroup Updates

Workgroup	Upcoming Meeting	Meeting Topics/ Focus Areas for Upcoming Months
	Date	
Services	June 4th, 2025 2-	The Services Workgroup had a presentation on the Peer-to-Peer Support Study from CHDI at their May meeting. As Peer
Workgroup	3:30PM (ZOOM)	to peer is a priority for the group, CHDI will be coming back to present the results once complete.
		The workgroup additionally had a discussion around the Crisis Continuuum Recommendation and will be diving deeper into what
		data already exists and what is needed, the workgroup will have a presentation at the June meeting from CHDI on what data
		currently exists.
		Additionally, the workgroup is working with UConn Innovations on the Services Array Survey.
Prevention	June 26th, 2025 3-	On the May 15th meeting, the Prevention workgroup had presentations regarding the SEPI CT Program, and Early Childhood
Workgroup	4:30PM (ZOOM)	Prevention.
		The group will begin mapping services, barriers to services, and data collection methods of services, and funding of services
		as identified in the workplan.
System	June 17th, 2025	On May 20th, the workgroup had presentations on Systems of Care in CT (history, where we are now). The workgroup will
Infrastructure		continue evaluating systems of care both in CT and other States.
Workgroup		





#### Transforming Children's Behavioral Health Policy and Planning

PA 23-90, There is established a Transforming Children's Behavioral Health Policy and Planning Committee. The committee shall evaluate the availability and efficacy of prevention, early intervention, and behavioral health treatment services and options for children from birth to age eighteen and make recommendations to the General Assembly and executive agencies regarding the governance and administration of the behavioral health care system for children.

#### Membership



#### Contact

#### Transforming Children's Behavioral Health Policy and Planning Committee

TAYLOR AITKEN - APPROPRIATIONS COMMITTEE CLERK

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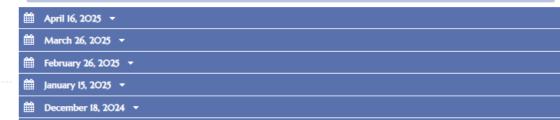
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#### ☑ TCB Meeting Schedule 2025 Meet The UNH Staff PA 23-90 Tracking ⚠ Workgroup Descriptions TCB Presentation Highlights Interim Progress Report TCB Annual Agenda 2023-2024

#### **Documents and Meetings**

May 14, 2O25 ▲

- 20190718-samhsa-risk-protective-factors (1) (2)
- 2025 Pathways To Success Flyer
- 40 developmental assets
- Developmental-Assets-Framework ages 3 to 18 (2)
- Prevention Presentation
- seven-strategies-for-community-change (1)
- TCB Focus Group deck
- TCB May Meeting Agenda
- TCB May Meeting Presentation (1)





- May 29, 2O24 ▼ m April 3, 2O24 ▼ March 6, 2024 ▼

- September 6, 2023 ▼
- iii July 10, 2023 ▼





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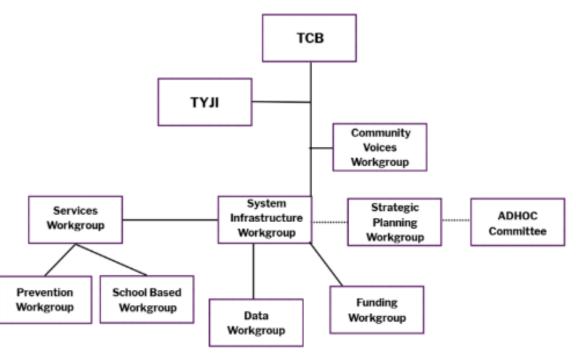


# **TCB Organizational Structure**

### **Abbreviations**

TCB = Transforming Children's Behavioral health Policy and Planning Committee

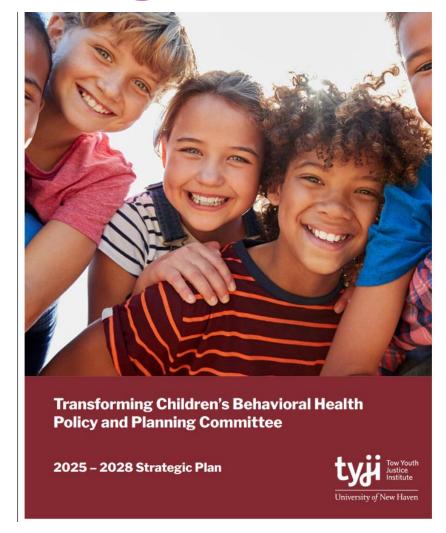
TYJI = Tow Youth Justice Insitute



The Image above is the TCB's organizational chart, which reflects the workgroups and structure of the committee.



# 2025-2028 Strategic Plan





# **School Based Workgroup**

#### Yale school of medicine

Bridgeport Prospers
CRADLE TO CAREER

#### **Co-chairs:**

Dr. Elizabeth Connors, Associate Professor of Psychiatry, Division of Prevention and Community Research, Yale School of Medicine Katerina Vlahos, Executive Director, Bridgeport Prospers

#### **Purpose Statement:**

Promote mental health, well-being, and academic success for children birth to age 22 by increasing the reach and quality of school-based behavioral health services. Reach refers to equitable availability of timely and appropriate school-based behavioral health services in all CT jurisdictions, through a multidisciplinary array of coordinated community-partnered and school-employed service providers. Quality refers to effective, student- and family-centered, interventions and approaches which are culturally responsive, equitable, inclusive, and evidence-based.

#### **Priorities:**

- School Based Health Center Study
- 2. School Based Behavioral Health Services Recommendation
- 3. TBD with input from community



## **School-Based Services**

Goal: Expand access to high quality school-based behavioral health services for all students in Connecticut.

#### **Partners**

- State Departments of: Education, Mental Health and Addiction Services, Public Health and Social Services
- Office of Health Strategy
- ·National Association of Social Workers CT Chapter
- CT Association of School Psychologists
- CT School Counselor Association
- · Community Child Guidance Clinics
- Commercial insurance providers to address reimbursement challenges
- Association of School Based Health Centers

#### Information needed

- ·Data on workforce needs
- Program funding to ensure sustainability
- Data on potential partnerships and resource allocation from Department of Public Health or other agencies
- ·Reporting requirements for SBHCs

#### Outputs

- · Models to integrate community partners into school based care
- Transparent reporting mechanisms and reporting standards
- Models for integrating prescribers into school-based careImproved staff retention and job satisfactions
- ·Funding for sustainability of school-based behavioral health services
- Sustainable systems of collaboration with state agencies

#### Measures of Success

- · Improved school mental health quality
- ·Increased number of school-community partnerships across the State
- Number of policy and planning conversations and decision incorporating Family and Youth voice



# **School Based Workgroup Short Term Goals**

#### **Establish a Workgroup Foundation**

- Set terms of engagement and community engagement for the workgroup to set the tone and operationalize how we engage
- Create space for workgroup members to share their personal priorities, biases, or special interests that bring them to the workgroup, connect, feel a sense of belonging and discuss how that intersects with the priorities of the workgroup

Identify Meeting Schedule, frequency of meetings, and meeting presentations with the workgroup

Identify and finalize workgroup priorities with feedback from the workgroup

Review of 2025 TCB Recommendations with the workgroup, refine how this workgroup will monitor and track the recommendations

#### Provide education and clear, inclusive language:

- Map the array of school based behavioral health professionals and models of service
- Create an infographic or other resources to communicate who school-based mental health professionals are in terms of discipline, training, role, employer type, and funding sources
- Compile, discuss and share initial definitions important for active participation, clear communication within the workgroup and future glossary
- Develop and maintain a glossary of terms related to school based behavioral health to promote diverse engagement in the
  efforts of the workgroup among stakeholders with an array of personal and professional backgrounds and expertise



# **School Based Workgroup Medium Term Goals**

#### SBHC study design and monitor the implementation of the study

- o Develop RFQ in partnership with DPH, OPM and CASBHC
- Once awarded, work with researcher on study implementation to obtain information on existing data collection practices and anticipated challenges and opportunities of a more comprehensive data collection system at all centers
- o Monitor study progress, review findings and data analysis

#### **School Behavioral Health Services study**

- o Develop a scope of work for the intent of conducting a review of Medicaid and private insurance billing codes (e.g., behavioral health services provided and billed within schools) to ensure non-duplicative billing, opportunities to fully claim reimbursement for services provided, and effective team coordination and collaboration among school-based mental health professionals.
- o TYJI to release RFQ for research partner on the study (if applicable)
- o If applicable, once awarded, work with research partner on the study
- Monitor progress of study, review findings and data analysis

Identify potential third priority area in partnership with the workgroup (e.g., early childhood)

Develop a set of 2026 draft recommendations with the workgroup and present recommendations to the TCB Committee in fall of 2025





## **School Health Services Overview**

### Elizabeth H. Connors, PhD

Associate Professor of Psychiatry, Division of Prevention and Community Research, Yale School of Medicine

### **Katerina Vlahos**

**Executive Director, Bridgeport Prospers** 

Yale school of medicine



### What are School Health Services?



### **School**

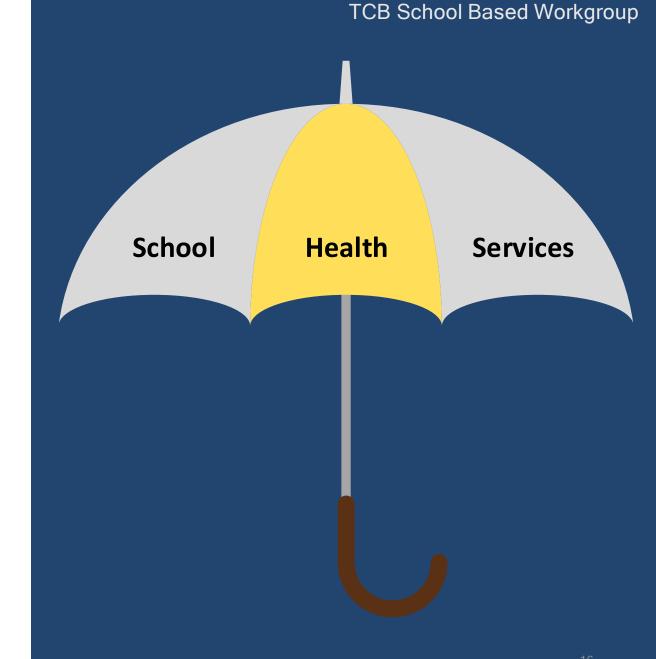
- On school grounds or school campus
- Before, during, or after school hours
- Public, private and charter schools
- Pre-K through higher education





### Health

- Physical, social, emotional, and behavioral health and wellbeing
- Including substance use or risk



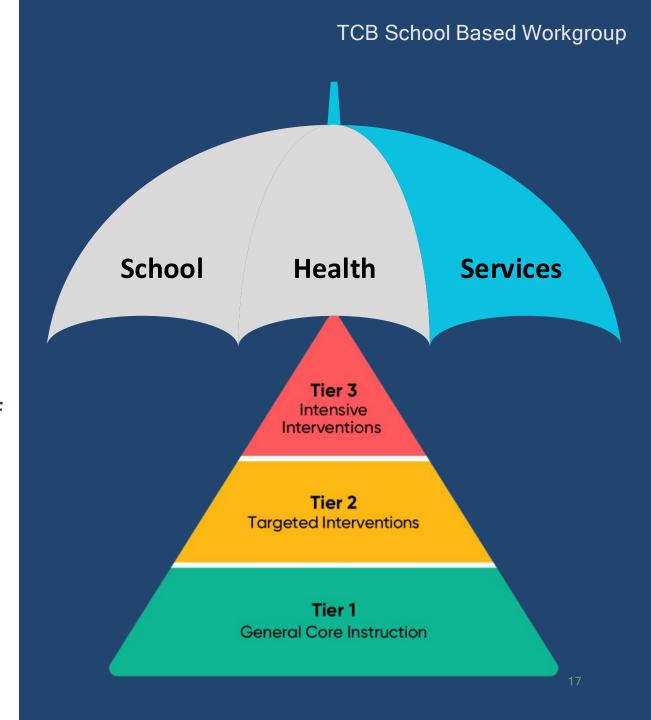


### **Services**

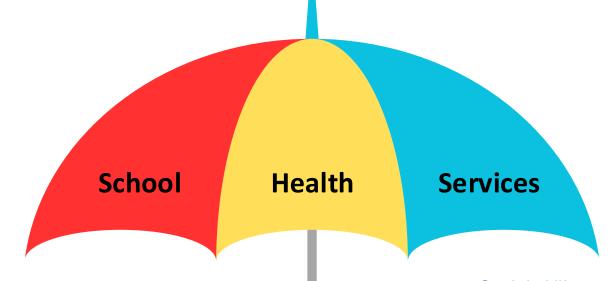
### "Multi-tiered":

- Intervention or treatment for students with an identified diagnosis or disability
- Early intervention and supports for some students showing early signs of risk or need
- Promotion and prevention for all students





### **Examples of School Health Services**



Social emotional learning education delivered by teachers

Health and mental health screening

Yale school of medicine

School nursing services

Student-led mental health awareness clubs

Parent outreach and support

School-based health centers



**Immunizations** 

Trauma sensitive practices

School-wide prevention programs

Social skills groups

Restorative practices

School psychologists

Community mental health organizations providing school-based therapy

School counselors

Positive Behavior Supports

School social workers

Disability and diagnostic

Health class

assessment

Food pantries

### Who Delivers School Health Services?

# School employed providers

School social workers, school psychologists, school counselors, paraprofessionals, board certified behavior analysts, school nurses

# Community partnered providers

Community mental health centers, child guidance clinics, and local health departments contracted to work in schools

### School Based Health Centers

Comprehensive primary health care facilities licensed as outpatient clinics located within or on school grounds serving students in grades pre-K-12. Includes multi-disciplinary child/adolescent health specialists.



## Who Pays for School Health Services?

School distribudgets	rict
_	

Cover the costs of most school-employed mental health professional salaries

# Insurance companies

School districts and community partners can bill insurance to cover billable services

### CT State Agencies

CT Departments of Health, Children and Families, Early Childhood, Education, Mental Health and Addiction Services

# Federal or Foundation Grants

School districts, community partners, and/or state agencies apply for and receive



### **School Health Services**

School = on school grounds/school campus, during or before/after school hours

Health = physical, social, emotional, and behavioral health including substance use

Services = promotion and prevention for all students, early intervention and supports for some students showing early signs of risk or need, intervention or treatment for students with an identified diagnosis or disability



