

# Program # 25075A - School Based Mental Health Services

Version 2/15/2013 s

Lead Agency: County Human Services Program Contact: Ebony Clarke

**Program Offer Type:** Existing Operating

**Related Programs:** 

**Program Characteristics:** 

#### **Executive Summary**

School Based Mental Health is an essential component of the mental health system of care for children and families. This program serves 1,150 children and teens with serious mental health disorders in over 89 school settings throughout the county. Mental health professionals provide culturally competent, family-focused, evidence-based treatment. Children and teens receive service that decreases the risk of hospitalization or other restrictive and costly services. Additional children with emotional and behavioral needs are helped through 11,003 consultation contacts with school-based health center staff and others that avert the need for a higher level of care.

### **Program Description**

Mental health treatment is provided in schools to decrease barriers such as stigma, cost and transportation for 1,150 underserved families. This program reaches youth who have not accessed services in a mental health center and 52% of those served were children of color. Approximately 93% of the children served were uninsured or insured by the Oregon Health Plan.

School based mental health consultants provide crisis intervention, mental health assessment, individual, group and family treatment and clinical case management as well as interventions with schools to help manage a child's mental health disorder. Consultation on children's mental health is provided to school and school based health clinic staff, as well as community providers. Mental health consultants are co-located in School-based Health Clinics when possible to provide integrated services. About 57% of the families receive linkage services for mental health screenings and referral to community mental health centers.

Locating mental health services in schools is a best practice and Multnomah County has been a leader in the nation by providing this program since 1967. Through this program children and teens who are at risk of harming themselves or others are identified and receive intervention. This is important because, in Oregon, suicide is the second leading cause of death among young people. Earlier identification and treatment can divert children from needing higher cost and more restrictive services. This program meets a child's basic need for mental health and is congruent with the goals of the School Age Policy Framework.

#### **Performance Measures**

| Measure<br>Type | Primary Measure   | Previous<br>Year Actual<br>(FY11-12) | Current<br>Year<br>Purchased<br>(FY12-13) | Current<br>Year<br>Estimate<br>(FY12-13) | Next Year<br>Offer<br>(FY13-14) |
|-----------------|---|--------------------------------------|---|--|---------------------------------|
| Output          | Total unduplicated children receiving mental health services                    | 1,152                                | 1,050                                     | 1,152                                    | 1,152                           |
| Outcome         | % of children receiving services showing improved school behavior & attendance* | 91.4%                                | 86.0%                                     | 92.4%                                    | 92.4%                           |

### **Performance Measure - Description**

<sup>\*</sup> Improvements in school behavior and attendance are measures that reflect a child's overall success at home, in school and in the community.

## **Legal/Contractual Obligation**

Revenue contracts with school districts.

## Revenue/Expense Detail

|                      | Proposed General Fund | Proposed Other Funds | Proposed General Fund | Proposed Other Funds |  |  |  |
|----------------------|-----------------------|----------------------|-----------------------|----------------------|--|--|--|
| Program Expenses     | 2013                  | 2013                 | 2014                  | 2014                 |  |  |  |
| Personnel            | \$573,237             | \$880,058            | \$586,759             | \$1,007,810          |  |  |  |
| Materials & Supplies | \$18,056              | \$29,182             | \$7,960               | \$22,945             |  |  |  |
| Internal Services    | \$114,356             | \$2,666              | \$58,489              | \$83,235             |  |  |  |
| Total GF/non-GF:     | \$705,649             | \$911,906            | \$653,208             | \$1,113,990          |  |  |  |
| Program Total:       | \$1,61                | 7,555                | \$1,767,198           |                      |  |  |  |
| Program FTE          | 5.12                  | 8.73                 | 5.12                  | 9.56                 |  |  |  |
| Program Revenues     |                       |                      |                       |                      |  |  |  |
| Intergovernmental    | \$152,212             | \$911,906            | \$152,213             | \$1,113,990          |  |  |  |
| Total Revenue:       | \$152,212             | \$911,906            | \$152,213             | \$1,113,990          |  |  |  |

## **Explanation of Revenues**

\$769,368 - State Mental Health Grant Flex Funds: Based on FY13 grant award

\$10,000 - Parkrose School District;

\$75,000 - Centennial School District;

\$26,497 - Roosevelt High School: All Based on FY13 revenue contracts

\$233,125 - Fee for Service Insurance Receipts: Based on current year projections

\$152,213 - FQHC: Based on FY13 revised budget

\$500,995 - County General Fund

## Significant Program Changes

Last year this program was: #25075, School Based Mental Health Services
A budget modification done in FY13 added 0.83 School Based Mental Health Consultant, funded by the Gresham-Barlow school district.