



Program #40082B - School Based Mental Health Services - In/Out of Scope Services FY 2024 Proposed

Department: Health Department **Program Contact:** Yolanda Gonzalez
Program Offer Type: Existing **Program Offer Stage:** Proposed

Related Programs:

Program Characteristics:

Executive Summary

School Based Mental Health and K-12 case management are essential components of the system of care for children and families. Our 26 clinicians serve over 800 children and teens with mental health needs in 36 schools across six school districts: Centennial, David Douglas, Gresham Barlow, Reynolds, Parkrose, and Portland Public Schools. Mental health professionals provide evidence-based treatment, utilizing an anti-racist equity lens, in school and Student Health Center settings and via telehealth. Additionally, children, parents, and school staff receive consultation from Mental Health Consultants to assist with mental health needs during education planning in order to retain students in school and reduce the risk of needing higher levels of care.

Program Description

This program offer is to fund 2.31 FTE Positions for the School-Based Mental Health Program. While volume of clients has reduced due to COVID there has been an increased need/acuity per client which necessitates this FTE. Clinicians are spending more intensive time with each youth due to higher levels of acuity. Schools are also requesting more mental health services for students due to the increased need.

Since 1969, Multnomah County has been a leader in the nation in providing access to mental health services in schools, which is considered a best practice. Mental health assessment and treatment services provided in schools decrease barriers such as stigma, cost, and transportation. This program reaches youth who are traditionally underserved and have barriers to accessing mental health services. Providing culturally specific mental health outreach and treatment continues to be a priority. Over 50% of the youth served are youth of color served by a diverse staff with seven African American Knowledge Skills and Abilities (KSA), eight Latinx KSA, one Asian/Immigrant KSA and 10 non KSA. Cultural alignment with students increases therapeutic alliance which can assist with addressing mental health concerns, building trust, and improving school attendance. This culturally specific approach contributes to youth completing school, which is a strong indicator for lifelong economic wellbeing and improved overall health. School Based Mental Health Consultants provide screening, crisis intervention, mental health assessment, clinical case management, as well as individual, group, and family treatment. Mental Health Consultants also provide training and consultation to school staff to optimize educational planning for youth with mental health concerns. Mental Health Consultants are co-located in ten Student Health Centers to provide integrated physical and mental health services.

Multnomah County and School Districts collaborate to address the continuum of needs for students and their families. School Based Mental Health Consultants provide over 3,800 hours of treatment, prevention, education, consultation, and outreach to students, school staff, and families every school year. K-12 Case Managers provide comprehensive case management services to students and families in kindergarten through 12th grade with a focus on connecting families to resources to increase attendance and improve educational success.

Performance Measures

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Total unduplicated youth referred to SBMH for assessment and/or treatment services	679	1,000	700	700
Outcome	ACORN Distribution of Patient Change Rate reported by client/student as their perception of improvement	51%	65%	48%	65%

Performance Measures Descriptions

¹A Collaborative Outcomes Resource Network (ACORN): Client reported outcomes are accepted as more valid as the person receiving services is reporting changes through a global distress scale measure reported over the course of treatment. The percentage is the number of clients reporting significantly improved or somewhat improved. Some staff were not consistently obtaining ACORN and we are completing a quality improvement project and investigating a more culturally responsive outcome measure.

Legal / Contractual Obligation

Revenue contracts with school districts. Oregon Health Authority, Intergovernmental Agreement for the Financing of Community Addictions and Mental Health Services.

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2023	2023	2024	2024
Personnel	\$370,310	\$0	\$400,150	\$0
Materials & Supplies	\$4,068	\$0	\$2,968	\$0
Internal Services	\$186,040	\$0	\$190,877	\$0
Total GF/non-GF	\$560,418	\$0	\$593,995	\$0
Program Total:	\$560,418		\$593,995	
Program FTE	2.31	0.00	2.35	0.00

Program Revenues				
Total Revenue	\$0	\$0	\$0	\$0

Explanation of Revenues

Significant Program Changes

Last Year this program was: FY 2023: 40082B School Based Mental Health Services - In/Out of Scope Services

The ACORN outcome measure has not reached 65% as expected, we are currently working on a quality improvement project and considering moving away from the ACORN.

SBMH referrals did not reach the anticipated 1,000 because our referral process has become more efficient and we are able to turn off the referral form when MHCs are full and we have asked the SHC to not send higher acuity to the program. The K12 case management services have expanded to cover Kindergarten through 12th grade. There will be six Case Managers hired, which accounts for the FY24 Output increase. The K12 output was lower than expected due to the fact that we had multiple staff vacancies.