



Council on the Advancement of School Based Health Centers
August 23, 2016 ♦ Meeting Minutes (Draft for Review)

In Attendance:

Council Members - Senator Richard Madaleno, Delegate Bonnie Cullison, Uma Ahluwalia, Cathy Allen, Kate Connor, Jennifer Dahl, Michelle Hinton, Nicole Johnson, Kristina Kyles, Mark Luckner, Maura Rossman and Raquel Ellen Samson

Visitors - Judy Covich, Cheryl DePinto, Robyn Elliot, Joanie Glick, Sapna Hencinski, Lorri King, Beth Spencer, Derek Simmons, Don Schlium, Alicia Mezu, Jang Lee Tisdale and Sam Zwerling

Summary of Presentations and Discussion

Kristina Kyles opened the meeting with a welcome, and introduced Derek Simmons to provide an overview of the legal and ethics requirements for the Council.

Overview of Legal and Ethics Requirements

- *Open Meetings Act.* D. Simmons provided an overview of council proceedings and the requirement for public notice and access to attend meetings. Mr. Simmons advised the council of restrict outside discussions of the work of this group (be cautious of discussing this work). The Council has the option to allow for public comment. This can be advertised in advance letting people know ahead of time. Closing a meeting may be necessary but not always needed. Council meeting should always be open.

When sending emails, be aware of “reply all” using caution when discussing council business through the email system. Workgroups can be created, and they are also subject to open meetings act and must be advertised and held in a public place.

- *Conflict of Interest.* Special notice to be aware of any conflicts of interest among council members.
- *Quorum.* This is based upon the number of seated members. Presently, nine members constitutes a quorum for the total group of 16-17.

Mr. Simmons will send the ethics guidelines for members to review.

Council Introductions/Table Talk

Nicole Johnson facilitated a table talk discussion for introductions and reflection on two questions by meeting participants: (1) What are your expectations for the Council? What do you hope to accomplish? (2) What contributions would you, or your organization, like to make to the sustainability of SBHCs?

Responses are summarized here:

- What are your expectations for the Council? What do you hope to accomplish?
 - Student health/mental health additional mandates and costs
 - Thread the needle for addressing student wellness while not stepping on local autonomy/values
 - Think big. Maximize the benefit of this resource (dispelling mythology about SBHC)
 - Systems alignment in order to make programs sustainable long term

- What contributions would you, or your organization, like to make to the sustainability of SBHCs?
 - Address legal statues/barriers
 - Update standards
 - Consider innovations, address levels of care
 - How can health insurance plans get involved, reimbursement eligible benefits
 - Medicaid. Maximize billing
 - Educate school board members across the state about SBHCs

Historical Context: Reflections from the PAC, Landscape of SBHC Centers and Services

N. Johnson and Judy Covich provided an overview of the current landscape of SBHCs and the Policy Advisory Council (PAC) that supported issues of SBHC at the state level for many years prior to the formation of the Council. See attached presentation slides and PAC annual report for details.

SBHC Operations, Connections to SHS and Funding

Alicia Mezu provided an overview of the SBHC operations and structure. She highlighted the following:

- Diversity of sponsors:
 - County health departments
 - Federal qualified health centers school districts
 - Universities
- Connection to school health services
- Funding resources include education funding from local government, districts, private funding and state aid via MSDE

Following the overview of the historical context and operations, meeting participants shared the following comments/reflections:

- Historically, funding amounts were awarded based on community needs, as well as availability of other resources on both direct care for students as well as funding resources. This should be considered again if the council looks at reallocation. small rural jurisdictions are often lacking both and transportation challenges are present for many families, making school access more critical.
- See a total amount of MSDE breakdown grant of sponsors by \$ and how many SBHC their portion funds.
- Clarify annual renewal for all 84 SBHWC's process. MSDE grant (total \$\$), funds(xx) SBHC run by (xx) sponsors.
- 13 of 24 LEAs have SBHCs; what about the other 11 LEAs.

Parking Lot Reflections and Hot Topics

Additional comments and issues shared during the meeting included:

Mental Health

- Mental health services -- where does it fit in the current standards for SBHCs?
- Substance abuse services and behavioral health how do we capture the data?
- Can a workgroup be established that brings together SBHCs that are providing behavioral health services to discuss operation and innovation?
- SA/BH carve-out effects the outcomes MCO – used to pay for SA/BH it may be a reason for finding as it relates to SBHC

Funding and Sponsorship

- Alternatives for sponsorship open to diverse sponsors for sustainability; Understand better the role of “sponsorship” of SBHC
- Funding sources for sponsorship open opportunity for diverse sponsors to increase sustainability
- A new education funding commission was authorized in the 2016 session this topic should be part of their consideration (AKA Thornton II; Kerwin Commission)
- Regulations around provision and billing for services in mental health. Need to address whether sustainability based on billing is realistic. Need to address sponsor types under MA.
- MCO enrollment the idea of inclusion -- examples SBHC (benefits) (initiatives)
- Understanding of funding resources for dedicated SBHC program staffing resources at the state agencies, MSDE and DHMH

Operations, Authorization and Grantmaking

- Timeline for one-time launch in schools; Review grant application that is released before the fiscal year starts.
- Clearer more transparent timeline and funding available
- Current resources – reauthorizations vs. new grants
- Request sustainability plan in SBHC applications balance with needed by sites to operate
- Provision of technical assistance
- Unfunded grow capacity at program agencies [two mandated (Caroline and Baltimore city)]
- Understand who staffs SBHCs – what level of health care practitioner? Where do they come from?
- Early priority – identify some successful practices currently in use and also some of the challenges SBHC in MD are facing

Data Collection and Analysis

- Stress the importance of impact data that we can receive from MSDE to make our work @ MASBHC look as rich as it is. In order to continue our work and ensure ours and SBHC sustainability. *anecdotal *impact on grades *attendance

Administrative Next Steps

- Review the policy recommendations reporting parking lot issues
- Set priorities for the council efforts and organize more work group committees
- Establish executive committee -- chair and other officers
- Schedule meetings for the remainder of the calendar year

Closing Remarks/Evaluations

K. Kyles concluded the meeting and participants completed evaluations. A summary of the evaluation results is presented here.

Evaluation Respondents

- 9 Council Members; 2 Unknown; 5 Visitors

General Comments/Feedback:

- Please set up tables in a square

- It would be great to have an overview document summarizing SBHC in MD- #'s of counties and other documents which are run by the health department, hospital FQHC other. Copy of application, basic tools, and resources binder of requirements, key legislation, billing for MCO packet, etc.
- Wish there was more time to discuss
- Great meeting
- Thank you for bringing us to this critical point

Evaluation Data

