



DRAFT



FAMILIES AND EDUCATION LEVY
Tuesday, January 20, 2009 • 4:00-5:30 p.m.
LEVY OVERSIGHT COMMITTEE
7th Floor, City Hall

MINUTES

MEMBERS PRESENT: Wanda Brown (for Carla Santorno), Tim Ceis, Frances Contreras, Michael DeBell, Kris Hildebrandt, David Okimoto, John Pehrson

OTHERS PRESENT: Peter Aberg (Legislative), Miae Aramori (PHSKC), Paul Barry (Swedish MC/Ballard THC), Eric Bruns (UW), Janet Cady (NeighborCare Health), Lin Carlson (SPS), N. Cheema (UW), Lori Chisholm (Parks), TJ Cosgrove (PHSKC), Jerry DeGriek (HSD), Becky Guerra (DOF), Kacey Guin (OFE), Kathie Huus (PHSKC), Bea Kelleigh (HSD), Patricia Lee (Council staff), Jill Lewis (SPS), Holly Miller (OFE), Alan Painter (HSD), Pat Philbin (Health), Sue Rust (OFE), Linda St. Clair (PHSKC), Anne Shields (PHSKC), Mark Secord (NeighborCare Health), Sid Sidorowicz (OFE), Sarah Walker (UW), Lindsey Watts (UW)

Tim Ceis called the meeting to order and noted that Michael DeBell is replacing Cheryl Chow as the representative from the Seattle Public Schools School Board. The minutes of the October 14, 2008 meeting of the Levy Oversight Committee (LOC) were approved.

Overview of the School-Based Health Services Investments

Jerry DeGriek gave an overview of the School-Based Health Centers' locations, their partners, and the services they provide. It is one of the largest investment areas of the Levy but the Levy funds only 2/3 of the resources needed. The rest of the funding comes from community partners.

J. Pehrson recalls the LOC questioning whether having five different community partners was the most efficient model and asked what came of that. J. DeGriek said they have concluded there is a benefit from having multiple providers, from both a fiscal and a collaborative perspective. There may be adjustments to this model in the future.

T.J. Cosgrove said there is a broad continuum of capacity for the partnering organizations to operate efficiently.

J. DeGriek discussed health-related strategies that SBHC staff utilize to contribute to student academic achievement. Kathie Huus discussed how public health is truly an investment in students, from both a health and academic achievement standpoint. These activities demonstrate a dramatic return on investment in the lives of young people. M. DeBell asked about the recent increase in teen pregnancies nationwide and whether we see the same trends in King County and Seattle. T.J. Cosgrove said that while current data are not available, anecdotally we are seeing the same patterns in this area. W. Brown asked about specific strategies that are being used to address particular high-risk

populations. Cosgrove said that, in past years, they developed an outreach strategy for non-English speaking students who were not using SBHCs at the same rate as other groups of students. The goal was to increase ELL students' use of the SBHCs, and staff worked with community-based organizations and the Bilingual Orientation Center to help reach these students. Over a 3-year period they have increased ELL students' use of SBHCs so that it is the same as the overall population. M. DeBell stated that programs had been available for teen moms but as the need went away, so did the programs. He asked if there was a need to reinstate these programs. Cosgrove said the new dilemma is the difference between planned and unplanned teen pregnancy, and how to be culturally sensitive to that. K. Huus said they continue to focus on reducing barriers to teens accessing services, be it location, language, etc. F. Contreras asked to what degree peers who are teen moms are used to discourage other teens from getting pregnant. Cosgrove said that peer education is used on a building-by-building level but they could learn more about this strategy.

J. Pehrson asked about how closely school nurses were working with staff of SBHCs. Cosgrove said that school nurses are vital to the work of the SBHCs and they are excellent partners, particularly in focusing on the most at-risk kids. They provide a nice complement to each other. J. Pehrson said common goals would be good. D. Okimoto asked for an example of what SBHC staff and nurses would do if they found out a student was low performing. Cosgrove said HIPPA and FERPA had previously been a barrier to sharing information. They are now doing a better job of sharing information and pursuing the appropriate permissions. In middle schools, the MSSP investments have teams that are targeting students who have not passed WASL. SBHCs are a part of those teams, to ensure that kids' health/mental health needs are being met, as a part of the plan. The school nurse provides the bridge between the MSSP and SBHC worlds. M. DeBell asks about emphasis on making sure students who moved from school to school receive consistent services. J. DeGrieck said that the sponsors are aware of mobility and work together to make sure health services are provided on an ongoing basis. He cited three levels of continuity: 1. Sponsoring organization to sponsoring organization. 2. Staff to staff at the school-level, and 3. Services attempting to follow kids to alternative schools but capacity to do this is limited.

Sarah Walker from UW presented findings from her study on service utilization of SBHCs. F. Contreras asked if they were looking beyond Seattle for this study. S. Walker said that currently data were available only for Seattle. The study showed use of the SBHCs to be positively correlated with improving GPA and with reduced rate of dropping out. W. Brown asked if there was an interest in tracking the long-term impacts of SBHC use. Cosgrove said he was not aware that such a study was being done. D. Okimoto asked how confident they could be that there is a valid comparison group. S. Walker said that you can only control for the variables that are available, so some things may be missing. M. DeBell asked what the literature said on this subject. Eric Bruns said that there have been very few studies in this area and this study would provide groundbreaking results to inform policy and practice, locally and beyond.

Paul Barry, a mental health counselor from Ballard High School, described what student needs and SBHC services look like on the ground. J. Pehrson expressed concerns about the overall effect size of SBHCs on academic achievement. He asked about SBHCs' ability to keep students in school. P. Barry says he can't speak to research but anecdotally says that many of the students he has served have been on the verge of dropping out. F. Contreras asked if the mental health counselor caseload is manageable. P. Barry said he often filled his slots every week but also kept some open to receive drop-ins. D. Okimoto asked how many mental health counselors are at each site. T.J. Cosgrove said every site has at least 1.0 FTE, with some having up to 1.7 FTE.

Jill Lewis discussed work of school nurses and their coordination of services with SBHCs. T.J. Cosgrove provided highlights of the HPV campaign. K. Hildebrandt noted she would like the LOC to hear more stories from SBHC nursing staff and how they serve young women.

Meeting adjourned at 5:35 p.m.