

School Based Mental Health Network Data Collection Reference Document

2022-2023

*Data captured based on the fiscal year- July 1 through June 30

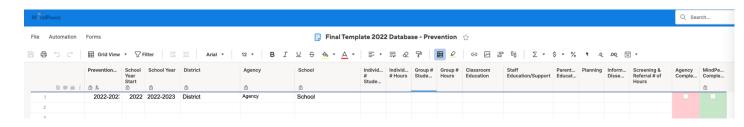
This document should be used in conjunction with your agency spreadsheets sent by MindPeace. Each agency will be given access to a Prevention, Treatment, Barrier and Med/Som spreadsheet through the project management tool, Smartsheet.

- The words *highlighted* below indicate the name of the columns in Smartsheet. The definition of the data needed in those columns is listed in the following pages.
- The last two columns of each spreadsheet are red and green.
 - The <u>red</u> column is named "<u>Agency Complete</u>." This box should be checked by the agency when that <u>row of data is complete</u>, and the agency is ready for MindPeace to review the data. Once checked, the row will be locked, and a notification will be sent to MindPeace to review the data. If there are errors MindPeace will send an email directly to the agency representative completing the data.
 - The <u>green</u> column is named "<u>MindPeace Complete</u>." When the <u>data in that row</u> <u>is accepted</u>, MindPeace will check "MindPeace Complete".



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Prevention



To reflect recent changes from OhioMHAS prevention services definitions, prevention data columns have been added, changed or removed. The explanation of what is needed in those columns is listed below.

Please note, the column labeled "Consultation" has been removed. This service is now listed as support and that data will be shared in two columns: "Staff Education/Support" and "Parent/Guardian Education/Support" separated by who (parent/guardian or staff) participates in the education/support. "Information Dissemination" and "Screening & Referral" columns have also been added.

The services recorded in this section are those that are not billed or tracked as treatment services through a lead mental health provider. The School Based Mental Health Network has decided that prevention data will be collected in the following categories and definitions:

Individual Prevention- including one-on-one crisis support, therapeutic mentoring, developing a plan, or any one-on-one services.

- *Individual # of Students* the total number of students who receive prevention services including one-on-one crisis support.
- *Individual # of Hours* total number of hours spent with student for prevention services.

Group Prevention-The number of students in the group should only be counted once. In the case that the group has several sessions, you should only increase the number of hours. Group prevention could include crisis support provided to a small group of students. School or class-wide education should go under "Classroom Education/Support".

- *Group # Students* the total number of students who received group prevention services.
- *Group # Hours* the total number of hours spent with the students for group prevention services. The number of hours would increase with each session.

Group Example 1 - The anger management group includes 8 students. There are 6 group sessions. Each session lasts approximately 1 hour. 1 staff member is providing the session.

# Students Total	# of Staff Hours Total
8	6

Group Example 2 - A grief group includes 7 students and is staffed by 2 people at your agency. There are 10 group sessions. Each session lasts approximately 45 minutes.

# Students Total	# of Staff Hours Total
7	15

• *Classroom Education* - total hours spent on social emotional learning, social skills, or educational presentations to classrooms (conflict resolution, bullying prevention, self-esteem). other training provided to a classroom of students (ex: PATHS's). The number of hours would increase with each session.

Example 1: Mrs. Frank's 9 classroom education sessions on conflict resolution. Each session was approximately 45 minutes, staffed by one person.

Classroom Education		
6.75		

9 classrooms x .75 hours x 1 staff = 6.75 hours $(9 \times 0.75)(1) = 6.75)$

Example 2: Mary and Sam provided 24 classrooms 2 educational sessions that lasted 30 minutes.

Classroom Education		
	48	

2 staff x 24 classrooms x 2 sessions x .50 hours = 48 hours

- **Staff Education/Support** Total hours spent providing trainings and having discussions directly with school staff on mental health topics or referral methods, individually or as a group. This also includes consultation with professional staff (teachers, principals, ILT, IAT), trainings during the school's professional development days, or help on PBIS or PSC committees.
- **Parent/Guardian Education/Support** Total hours spent providing trainings and having discussions with non-patient parents/guardians on mental health topics, individually or as a group. This also includes presentations or conferences.

Consultation/Support - NOW LOGGED UNDER STAFF AND PARENT EDUCATION.

• **Planning** – Total administrative time (i.e.-managers, supervisors etc.,) used to assist with the planning of universal or school wide initiatives (I.L.T., P.S.C. teams). Also includes partnership meetings like referral meetings and administrative planning support for universal or school wide initiatives (ILT, LSDMC).

Example 1: Joan the case manager, Sally the therapist and Chris the agency supervisor attended 5- 45 minute referral meeting at ABC School during the course of the school year.

Planning		
11.25	5	

(3 staff x 5 hours x .75 minutes) = 11.25 hours
OR
(3)
$$(5 \times .75) = 11.25$$

- *Information Dissemination* number of hours spent at an open-house, building mental health awareness or stigma reduction, or other *one-way* communication from source to audience.
- Screening & Referral number of hours providing evidence-based screening programs and supporting these programs, like Signs of Suicide. Includes support and work provided to move a student to a higher level of care.

Treatment

School based mental health services including but not limited to:

- CPST (Community Psychiatric Supportive Treatment)/TBS (Therapeutic Behavioral Services)
- Therapy
- Therapeutic Skill Building
- Treatment groups
- Parent consultation if their child is in treatment services
- Does NOT include day treatment

The School Based Mental Health Network has decided that treatment data will be collected in the following categories/definitions. Please make sure to only count the student once. If a student receives services but is not in individual treatment, list them under prevention services. If a student was provided prevention services, then was opened and provided treatment, the student would be counted under both prevention and treatment.

Each student should only be counted once.

- # Treatment Referrals (New)- Students recommended for therapy or case management
 - Total number of <u>NEW</u> referrals, including not appropriate referrals (not including students carried over from last year)
 - This could also include students who received crisis intervention and were recommended for ongoing therapy
 - This includes students who are transferring care from a different school
 - If a student is referred multiple times, only count them once.
- # Not Appropriate Referrals- Examples: developmental disability services needed, truly
 discipline related needs, or symptom presentation did not meet criteria for a mental health
 disorder.
- Treatment Referrals Total
 - "# Treatment Referrals (New)" minus "# Not Appropriate Referrals"
 - PLEASE DO NOT ENTER ANY DATA HERE. There is a formula embedded in this cell calculating this automatically.
- # Students Treated (New)- total number of brand-new students who are in treatment with your agency at the school. Students in group therapy can be included. To be counted, these students have had an assessment, consent was received, and billable services have begun.

- **#Carryover Students Treated** total number of <u>CARRYOVER</u> students who are receiving a continuation of treatment services from the previous school year.
- Treated All- Total number of new students plus carryover. All students treated through school-based therapy (new and carry over).
 - PLEASE DO NOT ENTER ANY DATA HERE. There is a formula embedded in this cell calculating this automatically.

• Students Triaged (Treated Elsewhere)

- Total number of children who were referred to your agency and your agency triaged this student to another agency, provider, program (day treatment, etc.), or level of care. This could include triaged because school-based cannot treat that specific diagnosis or unable to meet the family's needs.
- Only include students you know were connected to care.
- No DAF was done; no treatment provided.

• Open Treatment Case (Other Agency)

• Total number of children referred to your agency for treatment, but not opened because they already have treatment services in place with another agency. The student is connected to another level or type of service elsewhere.

Not Served

- Total number of students not treated.
- Once you enter the other columns, this formula should come up with a number that should be the same as "Total Barriers" on the Barrier spreadsheet. (see red circle below)
- The formula is "New Referrals" minus "Students Treated", "Students Triaged" and "Open Treatment Case"
- PLEASE DO NOT ENTER ANY DATA HERE. There is a formula embedded in this cell calculating this automatically.



New % Access

• PLEASE DO NOT ENTER ANY DATA HERE. There is a formula embedded in this cell calculating this automatically.

- Total % Access (New and Carryover)
 - PLEASE DO NOT ENTER ANY DATA HERE. There is a formula embedded in this cell calculating this automatically.
- # Treatment Hours
 - Total number of service hours for all students receiving treatment.
- Average Number of Hours in Treatment Per Student
 - PLEASE DO NOT ENTER ANY DATA HERE. There is a formula embedded in this cell calculating this automatically.

Barriers



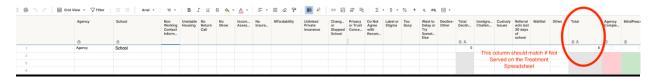
The following have been identified as the most common barriers to providing school based mental health services. Please provide the total number of each barrier experienced per school site. Use only one barrier per student. For instances with several barriers for a single student, use your judgement to pick the largest barrier to care. Only track for patients not seen/billed for treatment.

- Non-Working Contact Information The phone number or contact information (email, address) is not correct.
- **Unstable Housing** homelessness/coach surfing, mobility/transient
- No Return Call- after Attempt(s) to Contact
- No Show- Parent/Guardian/Student no shows for enrollment into treatment
- Incomplete Assessment- or DAF, including unsigned paperwork
- **No Insurance** (if related to immigration status, choose "immigration challenges" as the barrier)
- Affordability- student/family could not afford services
- Unlinked Private Insurance could NOT be linked to services (in your agency or another's) because of their insurance
- Changed or Stopped School- this could be because the student changed schools or stopped attending all together
- Declined Patients (student or parent/guardian)
 - Privacy or Trust Concern
 - **Do Not Agree with Recommendations-** disagree with the referral for mental health treatment
 - Label or Stigma- concerns regarding receiving a label or stigma with receiving treatment
 - **Too Busy** explains they are too busy for treatment
 - Wants to Delay or Try Something Else- explains they are not ready for treatment or want to try an alternate method

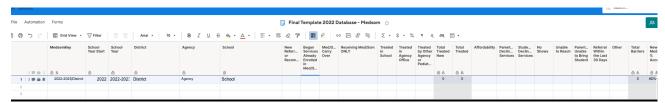
• Other- declines services for another reason or a reason is not given

Total Declined

- PLEASE DO NOT ENTER ANY DATA HERE. There is a formula embedded in this cell calculating this automatically.
- Immigration Challenges- no SSN or parent concern over immigration status
- **Custody Issues** disagreement between guardians about treatment
- Referral Received Within Last 30 Days of School- this could include students still pending
- Waitlist- student could not be seen been because of a long waitlist or staff shortages
- Other
- Please include an explanation (as a comment)
- Total
 - PLEASE DO NOT ENTER ANY DATA HERE. There is a formula embedded in this cell calculating this automatically.
 - This column should match the number on the column "# Not Served" on the Treatment Spreadsheet.



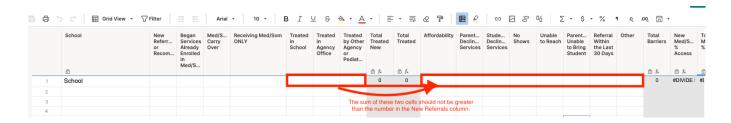
Med/Som



The School Based Mental Health Network has decided that med/som treatment data will be collected in the following categories/definitions:

- New Referrals or Recommendations -Total number of med/som referrals or recommendations made within this school year.
- **Began Services Already Enrolled in Med/Som** Student began therapy but already has an active prescriber for med/som.
- Med/Som Carryover Total amount of students already receiving med/som services continuing from the previous school year.
- Receiving Med/Som ONLY- Students not enrolled in therapy/treatment, but do receive Med/Som from the school-based agency.
- Total New Students Treated –Total number of <u>new</u> student referrals that are appropriate for med/som treatment services and result in an open med/som case. The next three cells (treated in school, treated in agency office and treated by other agency or pediatrician) show where care is received for the <u>new</u> referrals.
 - Treated in School students which received med/som at school.
 - Treated in Agency Office- students which received med/som at the agency office.
 - Treated by Other Agency or Pediatrician students receiving med/som by another mental health agency or by their pediatrician.
- Total Treated New- The sum of the three previous cells (treated in school, treated in agency office and treated by other agency or pediatrician).
 - PLEASE DO NOT ENTER ANY DATA HERE. There is a formula embedded in this cell calculating this automatically.
- Total Treated (New & Carryover) -New students receiving med/som <u>plus</u> carryover
 - PLEASE DO NOT ENTER ANY DATA HERE. There is a formula embedded in this cell calculating this automatically.

- Barriers to Med/Som Treatment <u>new</u> med/som referrals only, list only 1 barrier per student
 - Affordability- <u>Did not</u> receive med/som treatment because the parent/guardian could not afford the medication.
 - Parent/Guardian Declined Services <u>Did not</u> receive med/som treatment because the parent/guardian refused services.
 - **Student Declined Services** <u>Did not</u> receive med/som treatment because they declined services.
 - No Shows- Student did not show up for initial appointment (only count 1 no show per child).
 - **Unable to Reach** Parent, guardian, or student is unreachable by phone or email.
 - Parent/Guardian Unable to Bring Student- Student can't get to the appointment with their parent/guardian. This could be because of transportation issues, inability to get off work, or other reasons.
 - Referral Within the Last 30 days- Referrals for med/som are still pending or unable to get resolved because of the referral happening the last month of school.
 - Other Other reasons the student was unable to obtain to med/som services
 - Please include an explanation (as a comment)
- Total Barriers Summary of all barriers (listed in the previous eight cells) to med/som
 - PLEASE DO NOT ENTER ANY DATA HERE. There is a formula embedded in this cell calculating this automatically.



New Med/Som % Access

• PLEASE DO NOT ENTER ANY DATA HERE. There is a formula embedded in this cell calculating this automatically.

New Med/Som % Access

• PLEASE DO NOT ENTER ANY DATA HERE. There is a formula embedded in this cell calculating this automatically.

For questions, please contact MindPeace at (513) 803-0844 or carnevalee@mindpeacecincinnati.com