

# Making Schools the Center of Wellness

**CCSESA General Membership  
Meeting  
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**David W. Gordon – Sacramento County  
Superintendent of Schools**



# Why School-Based Mental Health?

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A comprehensive and integrated school-based mental health program addresses **prevention, school climate, diagnosis, and treatment** *which leads to* **improved health, wellness, and improved academic achievement.**

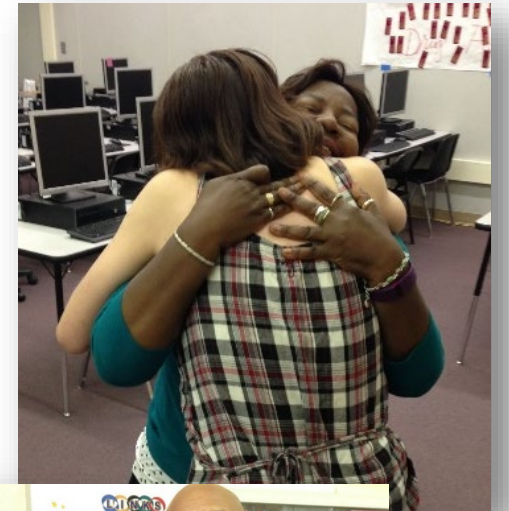
# Why School-Based Mental Health?

## Student Need

When confronted with the fallout of childhood trauma, why do some children adapt and overcome, while others bear lifelong scars that flatten their potential?

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A very important factor: At least one stable and committed relationship with a supportive adult.

Shonkoff et. al., 2015



# A Vision for Comprehensive School-Based Mental Health

SCOE, school districts, and County DBHS currently implement a variety of initiatives supporting mental health

**Need for coherent, integrated, scalable system**

Countywide vision for school-based mental health

# Vision

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Bring the education and health systems together as partners to create a continuum of care for mental health and wellness throughout Sacramento County's education system(s) which will intervene as early as possible to: eliminate the school-to-prison pipeline, reduce the number of 'system- involved' adults and adolescents, and mitigate the onset and impact of mental health disorders in Sacramento County.

# Mission

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In collaboration with our 13 school districts, identify and address the mental health and wellness needs of all students in Sacramento County, by placing a SCOIE employed mental health professional in EVERY SCHOOL and creating a system in which all adults understand their role and contribute to supporting the school-community-continuum-of-care.



# Funding

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- Extending the Primary Care Center (PCC) Federally Qualified Health Center (FQHC) status to satellite centers, i.e. School sites
- Enhanced Medi-Cal billing through PCC mental health
- SCOE Clinicians complete paperwork for clinical sessions
- County handles the billing process

# Essential Components

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- 1) Clinicians are hired as SCOPE employees under FQHC model
- 2) Clinicians provide direct clinical mental health services to student
- 3) Clinicians act as Navigators/Partnership Managers
  - 1) Tier I – SEL
  - 2) Tier II – Student-Led Initiatives



# Essential Components

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- 4) Penetrate 0-5 years via partnerships with First 5 and other partners
- 5) MOUs are in place between SCOE and each school site
- 6) All of this is covered by Medi-Cal

# First Cohort - School Sites for 2020-2021

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**6 Elementary Schools**

**4 Secondary Schools**

**Across 6 Districts and 1 SCOE Court and Community School**

# CalHOPE Student Support

Partnering with the California Department of Health Care Services to support Mental Health, Wellness, and Social Emotional Learning

# What is the FEMA CalHOPE Grant?

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California Department of Health Care Services (DHCS) received \$70 million to support crisis response statewide as a result of COVID 19.

DHCS is contracting with SCOE (\$6.8 million) to implement “CalHope Student Support”. **We will use a Community of Practice model to:**

- Further position education agencies as trusted “Centers of Wellness” for their community;
- build capacity of COEs to lead and support SEL for the districts/schools they serve; and
- provide educators with concrete strategies to work with students and each other while experiencing an ongoing crisis.

# What is an SEL Community of Practice?

## California Social Emotional Learning Community of Practice Goals

- Offering a collaborative space for professional learning around SEL and connected equity efforts
- Providing ongoing networking and sharing of best practices
- Showcasing successful SEL efforts in COEs/districts/schools
- Integrating COE/district/school action planning opportunities



# What is an SEL Community of Practice?

## California (County Leads) SEL Community of Practice

- Building a shared understanding/foundation for COEs across California
- Building a statewide infrastructure that allows COEs to share best practices and build collective capacity (building the capacity of our capacity builders)
- Creating, vetting, and sharing high quality resources
- Modeling structures and activities that COEs can turnkey for their County SEL Community of Practice

# Questions?