

Date of Hearing: July 15, 2015

ASSEMBLY COMMITTEE ON EDUCATION

Patrick O'Donnell, Chair

SB 118 (Liu) – As Amended April 7, 2015

[This bill was double referred to the Assembly Health Committee and was heard as it relates to that committee's jurisdiction.]

SENATE VOTE: 38-1

SUBJECT: School-Based Health and Education Partnership Program.

SUMMARY: Renames the "Public School Health Center Support Program" as the "School-Based Health and Education Partnership Program;" changes funding amounts for the grants; and, specifies that school health centers can provide alcohol and substance abuse prevention information and services. Specifically, **this bill:**

- 1) Specifies that sustainability grants shall be available on a one-time basis in amounts between fifty thousand dollars and one hundred thousand dollars for the purpose of developing new and leveraging existing funding streams to support a sustainable funding model for school health centers.
- 2) Specifies population health grants shall be available in amounts between fifty thousand dollars and one hundred twenty-five thousand dollars for a funding period of up to three years to fund interventions to implement population health outcomes and target specific health or education risk factors including, but not limited to, obesity prevention programs, asthma prevention programs, early intervention for mental health, and alcohol and substance abuse prevention.
- 3) Makes the following Legislative findings and declarations:
 - a) School health centers can be integral to providing the entire school community with prevention and health integration services by working collaboratively with school staff and administrators to meet the spectrum of health and prevention needs in a school community.
 - b) The federal Patient Protection and Affordable Care Act contains provisions that recognize the importance of school health centers in the delivery of quality, affordable health care and that would call for their expansion. Under the health care reform, California is developing new strategies to increase access to health care and reduce health care costs through investing in prevention services. School health centers are important sites through which to increase child and adolescent access to health care services and early identification of chronic diseases, such as asthma or obesity, and high-risk behaviors, such as mental health disorders, substance abuse, and teen pregnancy, that significantly impact health care costs later in life.
 - c) Through education finance reform, California has increased accountability strategies for local educational agencies that highlight the need for schools to address important health-related indicators, such as chronic absenteeism.

- d) School-based health centers serve as an effective foundation upon which schools and communities can build and implement a community schools strategy providing a range of wrap-around services to students and their families.

EXISTING LAW:

- 1) Requires the Department of Public Health to establish the Public School Health Center Support Program, in cooperation with the California Department of Education, to perform specified functions relating to the establishment, retention, or expansion of school health centers in California. (Health & Safety Code (HSC) 124174.2)
- 2) Defines “school health center” as a center or program, located at or near a school, that provides age-appropriate health care services at the program site or through referrals. Authorizes a school health center to conduct routine physical, mental health, and oral health assessments, and provide referrals for any services not offered onsite. (HSC 124174)
- 3) Establishes a grant program administered by the Department of Public Health to provide technical assistance and funding to school health centers, to the extent funds are appropriated for this purpose.
 - a) Planning grants in amounts between \$25,000-\$50,000.
 - b) Facilities and startup grants in amounts between \$20,000-\$250,000
 - c) Sustainability grants in amounts between \$25,000-\$125,000. (HSC 124174.6)
- 4) Requires school health centers that receive a grant to meet or have a plan to meet the following requirements:
 - a) Strive to provide a comprehensive set of services including medical, oral health, mental health, health education, and related services in response to community needs.
 - b) Provide primary and other health care services, provided or supervised by a licensed professional, which may include physical exams, diagnosis and treatment of minor injuries and medical conditions, management of chronic medical conditions, referrals and follow-up for specialty care, reproductive health services, mental health services as specified, and oral health services.
 - c) Work in partnership with the school nurse, as specified.
 - d) Have a written contract or memorandum of understanding between the school district and the health care provider or other community provider.
 - e) Serve all students regardless of ability to pay.
 - f) Be open during all normal school hours, as specified.
 - g) Establish protocols for referring students to outside services when the school health center is closed.
 - h) Facilitate transportation, as specified. (HSC 124174.6)

FISCAL EFFECT: According to the Senate Appropriations Committee, unknown costs to provide additional grants (General Fund or other, unknown fund source). The bill authorizes a

new category of grants that may be issued to schools with school health centers for interventions such as obesity prevention or mental health prevention. The bill does not identify a source of funds for these new grants. The current program has been authorized in statute for eight years, but has never been funded.

COMMENTS: This bill changes the name of the "Public School Health Center Support Program" to the "School-Based Health and Education Partnership Program;" changes funding amounts for the grants; and, specifies that school health centers can provide alcohol and substance abuse prevention information and services.

According to the author, school based-health centers (SBHCs) provide a range of services that are designed to meet the specific needs of the local student population. The Public School Health Center Support Program has existed in statute for nine years but has yet to be funded. Further, this program is outdated. Without intervention, California lacks a coherent and comprehensive system of support for schools to build and sustain the partnerships, resources, and programs necessary to address issues that affect students and the school environment. This bill updates and enhances the framework of how SBHCs may be funded and provides schools with guidance on developing optimal and sustainable SBHC funding strategies.

Existing school health centers. Schools currently have the discretion to provide health services to students, or refer students to county and community organizations. Of the existing 231 school-based health centers, 40% are in high schools, 25% are in elementary schools, 10% are in middle schools, and 25% are "school-linked" or mobile medical vans. They serve over 242,000 students and providing a range of services including comprehensive health assessments, treatment for acute illness, asthma treatment, oral health education, dental screenings, mental health assessments, crisis intervention, brief and long-term therapy, and other services. Services are provided on-site by qualified professionals and those that require expertise or specialization beyond the school health center's capacity may be referred to county agencies and community organizations.

School health centers are administered by a variety of organizations, including school districts, Federally Qualified Health Centers, county health departments, hospitals, community-based agencies, and private physician groups. School health centers are financed through various sources, including grants, reimbursements from public programs such as the Child Health and Disability Prevention Program and Medi-Cal, partnerships with local community clinics and nonprofit, and fundraising efforts by school districts.

This bill modifies the existing grant program to assist school districts to establish and maintain school health centers. This bill does not provide funding for the school health center grant program.

Changes to School Health Center Grants. The Public School Health Center Support Program has existed in statute for eight years but has never been funded, and therefore never implemented. This bill makes the following substantive changes to this grant program:

- 1) Establishes population health grants, in amounts between \$50,000-\$125,000 for up to a three-year period, to fund interventions to target specific health or education risk factors that affect a larger segment of the population including, but not limited to obesity prevention programs, asthma prevention programs, early intervention for mental health, alcohol and substance

abuse prevention.

- 2) Limits sustainability grants from a three-year period to a one-time basis, increases the minimum grant amount from \$25,000 to \$50,000, and decreases the maximum grant amount from \$125,000 to \$100,000.
- 3) Adds the following to the elements that school health center grantees must include or provide:
 - a) Strive to address the population health of the entire school campus by focusing on prevention services such as group and classroom education, schoolwide prevention programs, and community outreach strategies.
 - b) Strive to provide integrated and individualized support for students and families, and to act as a partner with the student or family to ensure that health, social, or behavioral challenges are addressed.
 - c) Alcohol and substance abuse services.
- 4) Adds the referral to evidence-based mental health treatment services or alcohol and substance abuse treatment services to the list of mental health services that may be provided or supervised by an appropriately licensed mental health professional.

This bill does not modify the existing condition that the grant program be implemented only to the extent that funds are appropriated to the Department of Public Health for that purpose. It is unclear if the program is intended to be funded in the near future.

Related and Previous Legislation. AB 766 (Ridley-Thomas) from 2015, is pending hearing in the Senate, expands the characteristics of schools that are to receive preference in the awarding of Public School Health Center Support grants to include schools with a high percentage of youth who receive free- or low-cost insurance through Medi-Cal or Covered California.

SB 1055 (Liu) from 2014 was identical to this bill. SB 1055 passed the Senate Education, Health and Appropriations committees but was re-referred to and held in the Senate Rules Committee prior to a vote on the Senate Floor.

AB 174 (Bonta) from 2013 would have required the Department of Public Health to establish a pilot program in Alameda County, to the extent that funding is made available, to provide grants to eligible applicants for activities and services that directly address the mental health and related needs of students impacted by trauma. AB 174 was vetoed by the Governor, with the following veto message:

“I support the efforts of the bill but am returning it without my signature, as Alameda County can establish such a program without state intervention and may even be able to use Mental Health Services Act funding to do so.

Waiting for the state to act may cause unnecessary delays in delivering valuable mental health services to students. All counties - not just Alameda- should explore all potential funding options, including Mental Health Services Act funds, to tailor programs that best meet local needs.”

REGISTERED SUPPORT / OPPOSITION:

Support

Advancement Project
Alliance for Boys and Men of Color
Auburndale Intermediate School
California Association of School Business Officials
California Association of School Business Officials
California Black Health Network
California Council of Community Mental Health Agencies
California Pan Ethnic Health Network
California Primary Care Association
California State PTA
Children Now
Children's Defense Fund-California
Common Sense Kids Action
Community Clinic Association of Los Angeles County
James Morehouse Project
Mental Health America of California
National Association of Social Workers, California Chapter
Planned Parenthood
PolicyLink
Steinberg Institute
The Greenlining Institute
An Individual

Opposition

None on file.

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