Quarterly Meeting

Thursday, December 7, 2023



Welcome & introductions



Ohio School-Based Health Alliance "Ohio Alliance"

Serves as the only statewide organization created to advance and support the sustainability and expansion of school-based health care

Vision

Build a future in which **every student**, family, and community has the **equitable health services**, **supports and systems** they need to achieve **optimal health and education outcomes**

Mission

Improve access to comprehensive, integrated health services through school-based health care to advance equity and improve health and education outcomes for students, their families, and communities



Ohio Alliance team



Reem Aly, JD, MHAExecutive Director



Rachael Schilling, PhDProgram Manager



Bibiana Lagos, CHWOperations Manager

Agenda

- > Welcome & introductions
- > State policy updates
- > Connections between criminal justice and health: Impacts on children and families
- **➤** Ohio Alliance updates
- > Adjourn

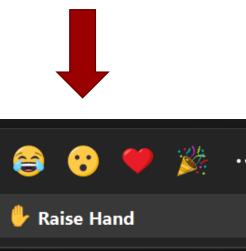


Objectives

As a result of participating in this meeting, attendees will:

- **Have information** on relevant school health-related state policy issues
- Understand the impacts of parental incarceration on children's health and well-being and strategies to support children and families
- Be aware of Ohio Alliance upcoming events and initiatives

Zoom participation

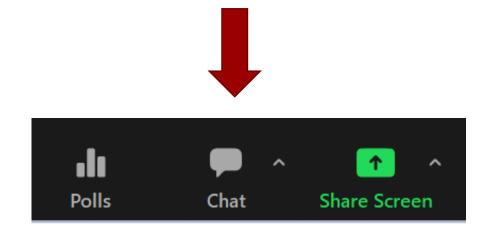


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Apps

Reactions

Support





State policy updates





Mike Dittoe, Partner High Bridge Consulting



Patrick Schwartz, Vice President for Government Affairs High Bridge Consulting





STATE POLICY UPDATE DECEMBER 7, 2023

PATRICK SCHWARTZ

VICE PRESIDENT FOR GOVERNMENT AFFAIRS HIGH BRIDGE CONSULTING

MIKE DITTOE

PARTNER
HIGH BRIDGE CONSULTING



WHAT HAPPENED IN THE FY 2024-2025 OPERATING BUDGET (HB 33)?

- Direct funding for school-based health centers included: \$7.5M in each fiscal year
 - Senate removed, added back during conference committee process
 - Coalition of schools, health care providers, and more advocated for inclusion
 - KEY SUPPORTERS: Senator Terry Johnson, Senator Theresa Gavarone, Representative Jay Edwards
- Student wellness and success funds (SWSF) included, requires districts and schools to spend at least 50% of SWSF for either physical or mental health based initiatives or a combination of both
- Department of Education renamed the Department of Education and Workforce, becomes a cabinet-level agency reporting to the Governor of Ohio
 - Most powers and duties of the State Board of Education have been transferred to the Department of Education and Workforce
- Department of Children and Youth created to provide services to children and their families in the areas of prevention, early education and support
- Continued phase-in of the previous budget's "Fair School Funding Plan" \$8B+ each fiscal year
- "EdChoice Expansion" scholarship universally available to every Ohio student
- Created the \$700 billion One-Time Strategic Community Investment Fund



THE "STATE" OF THE STATEHOUSE SINCE THE PASSAGE OF HB 33

- House/Senate divided on policy, session dates
- Redistricting: Bipartisan Ohio commission unanimously approves new maps
- Ballot Issues: Ohio's Issue I and 2 pass with strong support, go into effect this week
 - Rules and regulations related to Issues 1 and 2 being debated in committee
- House Leader 2025: House caucus still fractured, some calling for new leadership
- Capital budget process underway with new, one-time funds



CAPITAL BUDGET & ONE-TIME STRATEGIC INVESTMENT FUND PROCESS

- Typical capital budget agreement between House & Senate, bill quickly passes, goes into effect
- This time addition of \$700B in one-time strategic investment funds, disagreement on process
- House due date for submissions December 18, 2023
- Senate due date for submissions April 8, 2024
- Typically, projects must be submitted by Representatives & Senators covered that specific area
- Possible conference committee action to fix differences

THANK YOU!



PATRICK SCHWARTZ

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DOH53829 BCFH SFY24-25 Continuing Operational Support for School Based Health Centers (SBHCs)

Click the "Download" button to view this resource.

<u>Summary:</u> The project objective for this opportunity is to continue to support
operations of selected ARPA funded SBHC providers by increasing sustainability of
newly funded ARPA SBHC sites as well as increasing the provision of comprehensive
health services to student population in high need areas. This project will continue
the community engagement and partnership development in SBHC communities by
continuing to provide professional development and training opportunities to SBHC
staff.

Attachment



DOH53829 BCFH SFY24-25

Continuing Operational

Support for School Based

Health Centers RFP.pdf | 559

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DOWNLOAD

Inquiry Dates: Wednesday, December 6, 2023 – Friday, December 22, 2023. All questions must be submitted via email

to <u>Procurement@odh.ohio.gov</u> by December 22, 2023, at 4 p.m. Questions received after this date will not receive a response.

Solicitation End Date: Wednesday, January 3, 2024, by 4 p.m. All required application components must be received by Wednesday, January 3, 2024, at 4 p.m. Applications should be submitted via email to

Procurement@odh.ohio.gov. Each application component must be clearly labeled.



Connections between criminal justice and health:

Impacts on children and families





Jacob Santiago
Policy and evaluation specialist
Health Policy Institute of Ohio



Hailey Akah Vice President of operations and strategy Health Policy Institute of Ohio



Connections between Criminal Justice and Health:

Impacts on Children and Families



Hailey Akah and Jacob Santiago

Health Policy Institute of Ohio

December 7, 2023



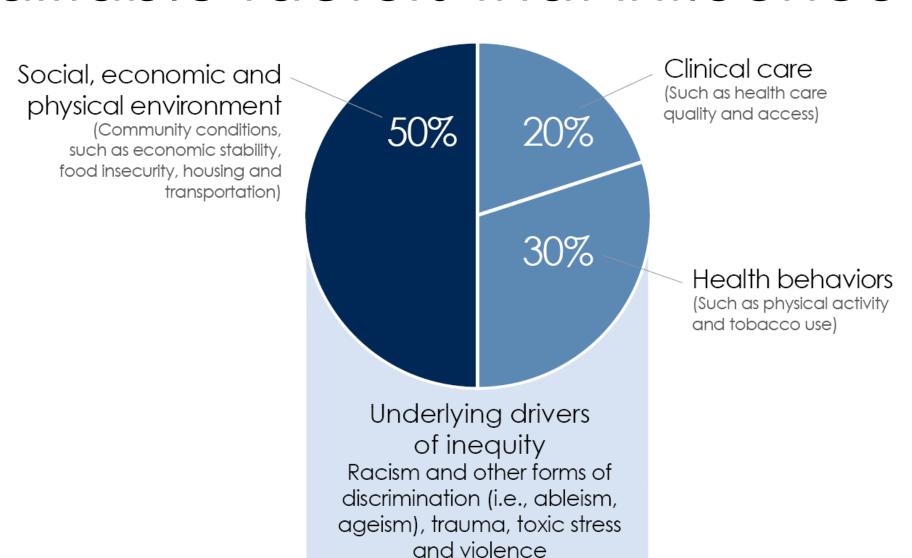
VISION

Ohio is a model of health, well-being and economic vitality

MISSION

To advance evidence-informed policies that improve health, achieve equity, and lead to sustainable healthcare spending in Ohio.

Modifiable factors that influence health



Source: University of Wisconsin Population Health Institute

Health

Health, including substance use and mental health, can impact criminal justice outcomes, such as:

- Arrest
- Pretrial detention
- Incarceration
- Community and collateral sanctions

Engagement with the criminal justice system impacts health, safety and well-being at all levels of society



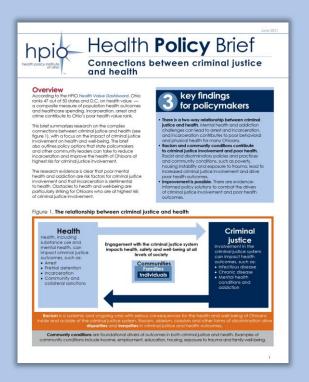
Criminal justice

Involvement in the criminal justice system can impact health outcomes, such as:

- Infectious disease
- Chronic disease
- Mental health conditions and addiction

Racism is a systemic and ongoing crisis with serious consequences for the health and well-being of Ohioans inside and outside of the criminal justice system. Racism, ableism, classism and other forms of discrimination drive **disparities** and **inequities** in criminal justice and health outcomes.

Community conditions are foundational drivers of outcomes in both criminal justice and health. Examples of community conditions include income, employment, education, housing, exposure to trauma and family well-being.



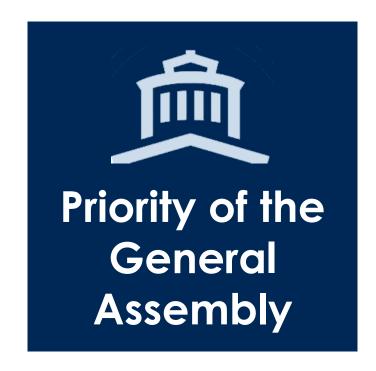






Statewide priority: Children and families







Generational cycle of justice involvement

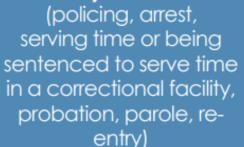
Generational effects



Exposure to parental justice involvement, and resulting negative outcomes and trauma, increases risk of future justice involvement for children throughout their lives, including juvenile justice involvement.



Involvement in the criminal justice system





Negative effects on the health and well-being of children and family members

- Increased risk of poverty
- Reduced family stability
- Increased exposure to ACEs
- Worsened educational outcomes
- Increased housing instability

- Worsened physical and mental health
- Increased substance use
- Increased risk of delayed child development
- Increased risk of children services involvement

Foundational drivers of criminal justice involvement

Poor community conditions (e.g., limited economic and educational opportunities, inadequate housing) and exposure to racism and discrimination increase the risk of criminal justice involvement, drive poor health outcomes and create disparities and inequities in both.

3 key findings for policymakers

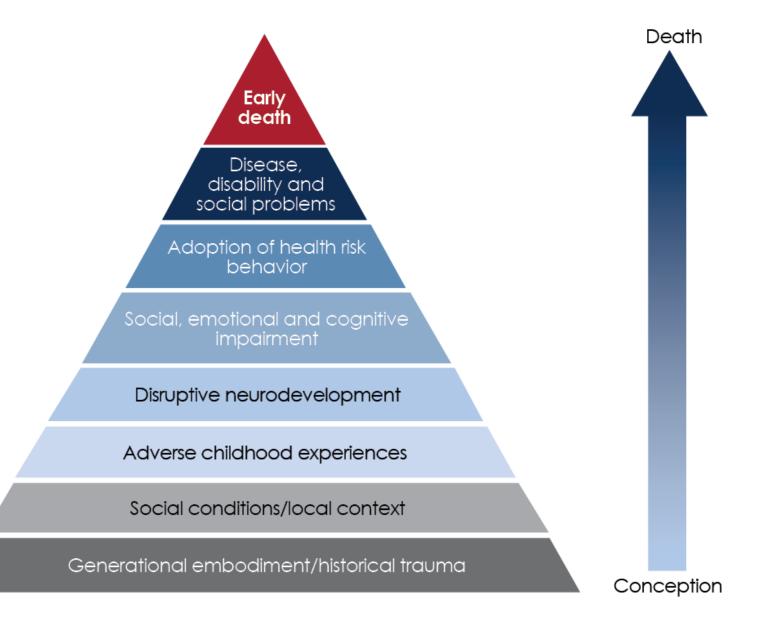
- Parental justice involvement negatively impacts the health, well-being and stability of children and families and increases the likelihood that children will become incarcerated later in life.
- Ohio has a strong foundation for supporting children and families, including several policies, programs and practices that connect parents with their children during re-entry from incarceration. Still, more can be done to prevent and mitigate the impacts of parental justice involvement.
- There are evidence-informed policy and program solutions to prevent and break generational cycles of justice involvement, support children and families who have an incarcerated parent, and improve community health and safety.

Familial justice involvement as an ACE



The ACE Pyramid

Mechanism by which ACEs influence health and well-being throughout the lifespan



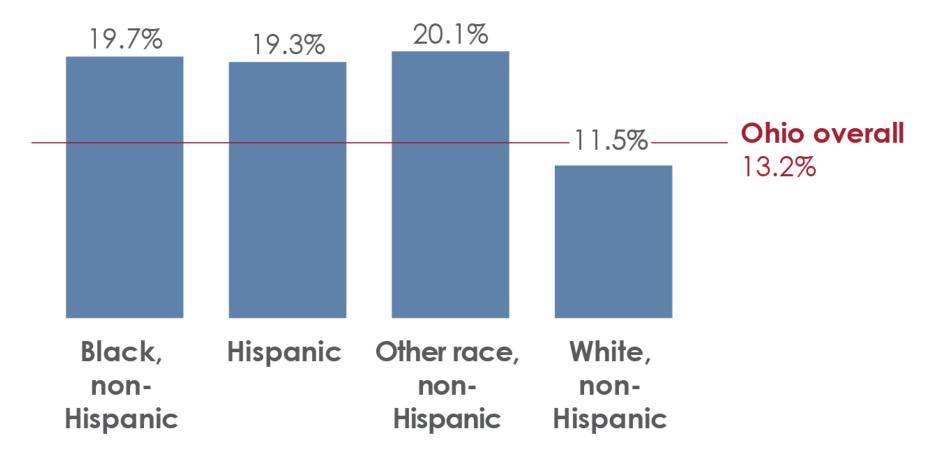
Source: Adapted from the CDC-Kaiser ACE Study." Centers for Disease Control and Prevention. Accessed July 13, 2020.

ACEs with significant health impacts

Abuse	Household challenges	Neglect
Emotional abuse Physical abuse Sexual abuse	 Intimate partner violence Substance use in the household Mental illness in the household Parental separation or divorce Incarcerated member of the household 	Emotional neglect Physical neglect

Source: Health Policy Institute of Ohio, "Adverse Childhood Experiences (ACEs) Health impact of ACEs in Ohio." Information from Behavioral Risk Factor Surveillance System, Centers for Disease Control and Prevention

Percent of adults who report having a parent or guardian serve time in jail after they were born, Ohio by race, 2021



Source: Data from the Ohio Medicaid Assessment Survey.

Key finding #1 Parental justice involvement negatively impacts child health and well-being



Foundational drivers of justice involvement

Community conditions and safety





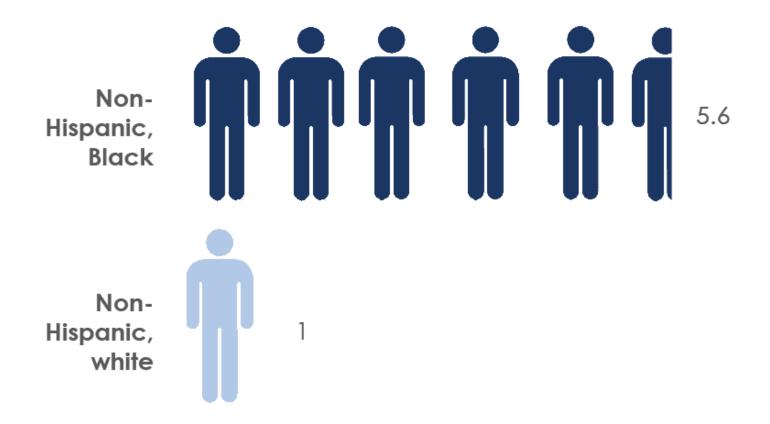








Ratio of people incarcerated in ODRC prisons, Per 100,000 population by race, 2021



Source: Health Policy Institute of Ohio policy brief, "Connections between Criminal Justice and Health: Impacts on children and families." Data from the Ohio Department of Rehabilitation and Correction annual report and U.S. Census Bureau, American Community Survey, 1-year estimates

\$6381

If racial disparities were eliminated, 40% fewer Ohioans would be incarcerated, with a savings of \$638 million per year in corrections spending.

Source: Health Policy Institute of Ohio. "Unlocking Ohio's Economic Potential," July 2023.



Policing and community surveillance

394,852 (18%) of the 2.2 million investigated reports to child welfare agencies in 2015 originated through police surveillance

Source: Edwards, Frank. "Family Surveillance: Police and the Reporting of Child Abuse and Neglect." RSF: The Russell Sage Foundation Journal of the Social Sciences 5, no. 1 (2019): 50. doi: 10.7758/rsf.2019.5.1.03



Prison and jail incarceration

Examples of upstream factors affected by parental incarceration

Child educational outcomes

Poverty and healthcare access

Family stability

Housing instability and homelessness

Examples of child health outcomes affected by parental incarceration

Mental health

Physical and behavioral development

Physical health

Substance use

5 3 9 7

In 2022, 5,397 Ohio children were removed from the home due to parent/family issues, including parental incarceration.

Source: Foster Care and Adult Protective Services Dashboard, Ohio Department of Job and Family Services

If household member incarceration (an ACE) was prevented, 12% fewer Ohioans would have limited healthcare access due to cost.

Source: HPIO, "Health Impacts of ACEs in Ohio," August 2020.

Youth residing in juvenile detention, correctional and/or residential facilities, Ohio vs. United States



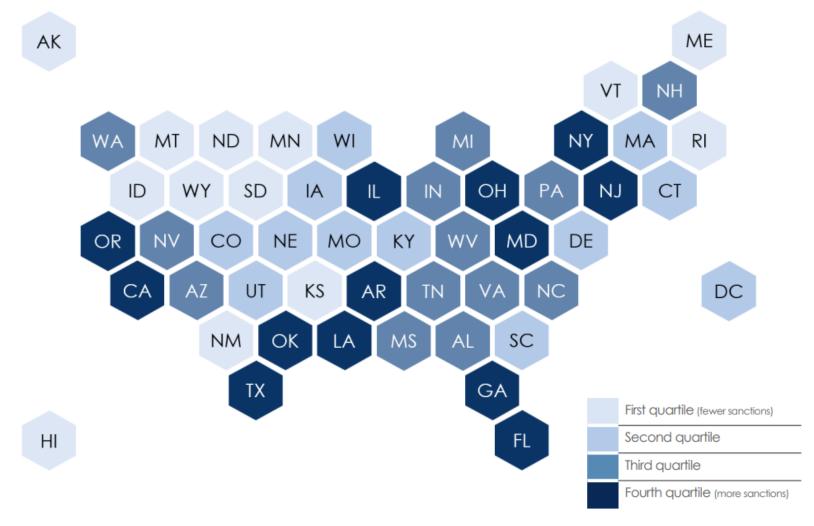
Source: Data from the Annie E. Casey Foundation Kids Count Data Center.



Re-entry and collateral sanctions

Number of collateral sanctions

by state, 2021



Source: Data from the National Inventory of Collateral Consequences of Conviction, Collateral Consequences Inventory.

Key finding #2 Ohio has a strong foundation for supporting children and families



Statewide priority: Children and families

What works example: Family health and well-being

Evidence-informed best practice

Trauma-informed schools.
Provide students with tiered trauma-informed programs for all students, and are beneficial for students with an incarcerated parent.

Ohio example

Student Wellness and Success
Funds and Disadvantaged Pupil
Impact Aid can be used by
schools to mitigate the impacts
of ACEs and trauma by support
student mental health.

What works example: Alternative to incarceration and justice diversion

Evidence-informed best practice

Pre-arrest diversion programs. Connect individuals accused of low-level crimes with treatment in lieu of detention, aiming to divert people away from the criminal justice system.

Ohio example

Northeast Ohio Medical University received a state grant to develop a **training and technical assistance program** for local communities to implement pre-arrest diversion programs.

What works example: Re-entry supports and collateral sanctions

Evidence-informed best practice

Re-entry programs. Support individuals re-integrating into their community after incarceration.

Ohio example

The Ohio Department of Rehabilitation and Correction issued guidance on local reentry coalitions, which promote successful re-entry.

Other policy change examples

- Fresh Start Act (133rd General Assembly)
- Senate Bill 288 (134th General Assembly)
- Second Chance Initiative

Key finding #3 There are evidenceinformed policy and program solutions

Foundational drivers of criminal justice involvement

Prioritize strategies that reduce disparities

Engage and listen to communities at risk

Prioritize strategies
that address
foundational
drivers

Example policy option: Family health and well-being



State and local policymakers and other stakeholders can expand and support local implementation of Ohio Handle with Care, which notifies schools when a child has experienced an ACE

Example policy option:
Policing practice

Ohio Department of Public Safety can develop guidance for local law enforcement to implement policies and procedures for protecting children who are present at a parent's arrest

Example policy option:
Alternatives to
incarceration and
Criminal justice diversion



State and local policymakers, including courts, can implement recommendations on Intervention in Lieu of Conviction from the Supreme Court of Ohio's HB 1 Impact Study Report

The Ohio Children of Incarcerated Parents Initiative can leverage state and philanthropic funding for the evaluation and expansion of Creating Lasting Family Connections and the **Second Chance Initiative**

Example policy option:
Re-entry and
collateral sanctions



The Ohio Department of Rehabilitation and Correction and local governments can foster the development of local reentry coalitions

"CJH: Impacts on Children and Families" policy brief at www.hpio.net/connections-between-criminal-justice-and-health-impacts-on-children-and-families/



QUESTIONS?



CONTACTINFORMATION

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THANK YOU

Ohio Alliance updates



Assistance available for behavioral health telehealth services in schools

12/4/2023

BroadbandOhio is searching for 10 school districts interested in implementing school-based behavioral telehealth services.

In the U.S., one youth in six aged 6-17 experiences a mental health disorder each year. In Ohio, one-in-three students report challenges with anxiety. Recognizing the need for school-based behavioral health services, BroadbandOhio partnered with Our Community Health Information Network to support district administrators in planning telehealth programs in their schools.

Interested district representatives may contact broadbandohio@development.ohio.gov.

School-based health center definition Advisory Group

Who?

- School-based health center (SBHC) provider operator
- Emerging or SBHC-like operator
- Other school-based health care partner

What?

Participate in five meetings to provide feedback on the establishment of working definitions for SBHCs and other school-based health care delivery models

When?

January - October 2024



School and health care provider bidirectional data sharing Advisory Group

Who?

- School-based health care provider
- School district team

What?

Participate in three meetings to provide feedback on to the development of recommendations for sharing data between health providers and schools

When?

January - May 2024



Poll Question



2024 Continuing education webinar series

- Series of quarterly topic-specific training opportunities to build capacity for the delivery of high quality, integrated, comprehensive school-based health care services
- Opportunity for interprofessional continuing education
- 1-1.5 hours



Bimonthly SBHC Learning Community



Register for the bimonthly learning community virtual meetings. Next meeting held on **Thursday**, **January 25**, **2024** from **7am** to **8:30am**

Registration is limited to school-based health care providers and education partners







Join us for the Ohio Alliance 2024 Annual School-Based **Health Care** Conference: **Healthy Kids Learn Better**

February 1, 2024 The Grand Event Center Grandview Heights, Ohio







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Poll Question



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