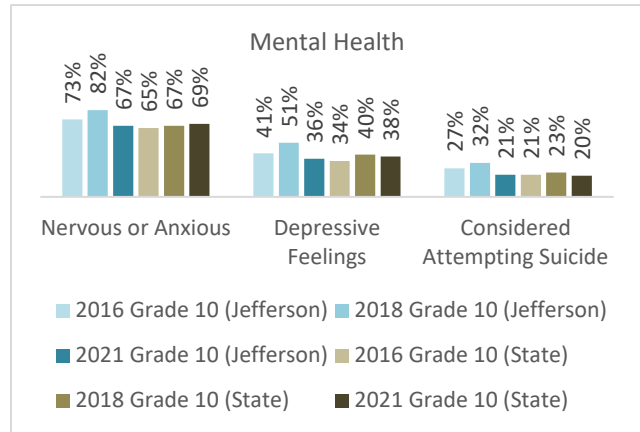


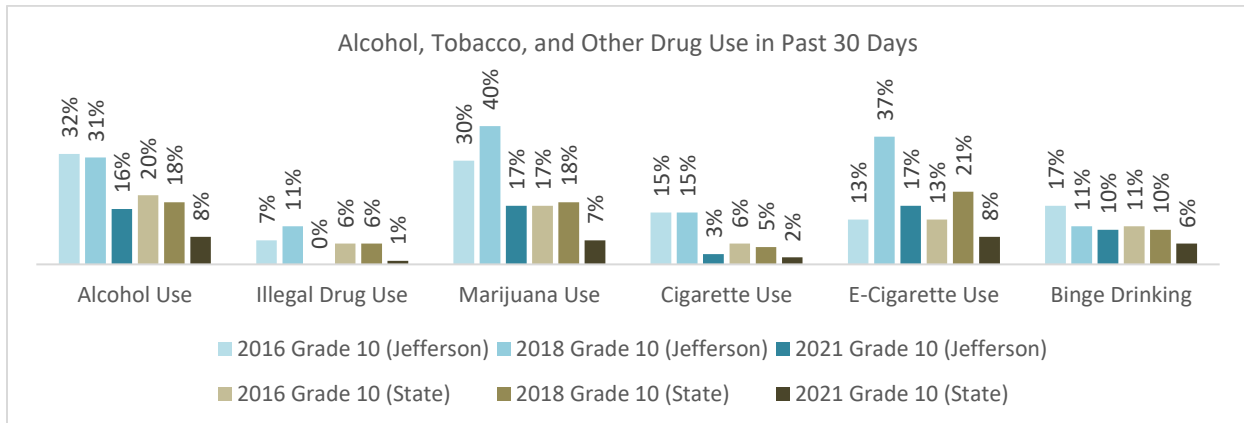
# Jefferson County: School Based Health Centers 2022-2023 Participation Report

## The State of Jefferson County Youth, At A Glance:

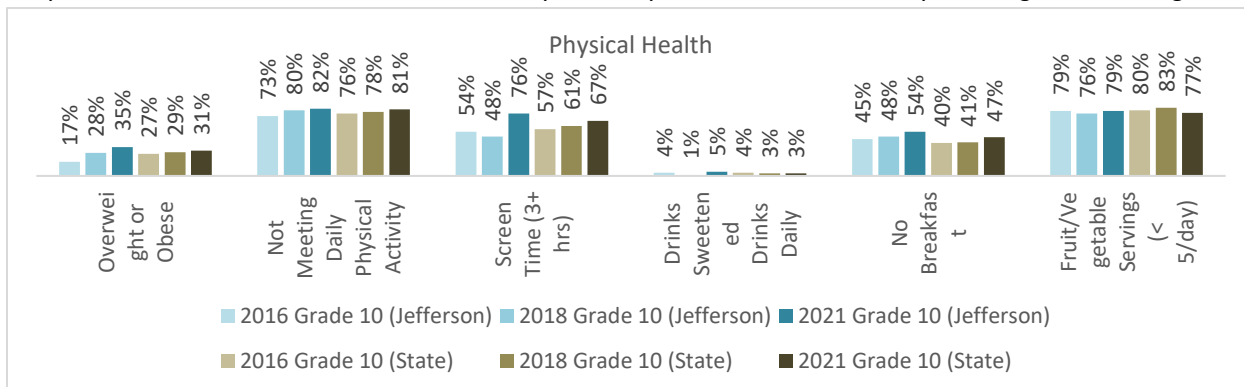
In 2021, the 10<sup>th</sup> grade participants of the Healthy Youth Survey (HYS) had a participation rate of 81% in Jefferson County; in 2018, the rate was 77%. The Healthy Youth survey is conducted every two years, the next survey will be administered in Fall of 2023. In the survey, more than 6 in 10 Jefferson 10<sup>th</sup> graders reported feeling nervous or anxious in the past 2 weeks; more than 3 in 10 reported depressive feelings for 2 weeks or more in the past year and over 1 in 5 reported considering suicide in the past year.



Percentages of students using substances decreased for all substances from 2018 to 2021. About 16% of Jefferson 10<sup>th</sup> graders report using alcohol and 17% report using marijuana in the past 30 days. More than 8 in 10 Jefferson 10<sup>th</sup> graders report their parents feel youth marijuana use is wrong compared to 91% statewide. Nearly half of tenth graders feel that marijuana is easy to get (45%), 32% statewide. Six in ten tenth graders report that their parents have talked to them about not using alcohol; 58% report that parents have talked to them about not using marijuana, both similar to the state.



Healthy eating and activity levels have areas to improve. More than eight in 10 Jefferson 10<sup>th</sup> graders are not meeting daily physical activity recommendations. More than 3 in 4 Jefferson 10<sup>th</sup> graders report over 3 hours of daily screen time, less than half eat breakfast daily, and only 1 in 5 consume five daily fruit/vegetable servings.



Twenty-seven percent of 10<sup>th</sup> and 47% of Jefferson County 12<sup>th</sup> graders report ever having had sex (HYS 2021). Notably, in 2021, Jefferson County has a lower teen (age 15-19) pregnancy rate at 1 per 1,000 compared to Washington at 8 per 1,000. (WA State Dept. of Health, Community Health Assessment Tool, August 2023). In 2022, Jefferson’s rate of sexually transmitted infections in people aged 15-19 (9 per 1,000) was similar to Washington’s (9 per 1,000) (WA State Dept. of Health, Community Health Assessment Tool, August 2023).

**School Based Health Center Background:**

School-Based Health Centers (SBHCs) were established during the 2008-09 school year to address a need for adolescent primary and mental health care in East Jefferson County. During the 2022 – 23 school year, the Chimacum SBHC provided 12 hours of medical services. The SBHC in the Port Townsend School District provided students with 12 hours of medical service. Medical services were provided in Quilcene with 6.5 hours per week. Medical services are provided by Advanced Registered Nurse Practitioners (ARNP) and/or Naturopathic Doctors. During the 2022 – 23 school year, 21 hours of mental health services were provided at Port Townsend, 21 hours at Chimacum Jr/Sr High School, 18 hours at Quilcene per week, and 7 hours at Brinnon. Additional hours for mental health services in each of the SBHCs were added with new funding provided from a grant awarded through the new School Based Health Centers program at the Department of Health (Operations and Expansion grant for SBHCs). Mental health services were delivered by contractors of OESD.

<b>Free and Reduced Lunch Rates</b>	
Source: OSPI, 2022 - 23 school year	%
<b>Brinnon School District</b>	<b>82</b>
Brinnon Elementary	82
<b>Chimacum School District</b>	<b>73</b>
Chimacum Creek Primary	82
Chimacum Elementary	79
Chimacum Junior and Senior HS	61
<b>Port Townsend School District</b>	<b>46</b>
Salish Coast Elementary	45
Blue Heron Middle School	46
Port Townsend High School	46
<b>Quilcene School District</b>	<b>50</b>
Quilcene High and Elementary	50

Medical services were funded by Jefferson County Public Health and Jefferson Healthcare. Mental health counseling services were funded by a Jefferson County, Behavioral Health (Mental Health/Substance Abuse) Sales Tax contract with OESD, Chimacum Prevention Coalition, grant funding through Washington Department of Health School Based Health Centers Program, and individual school districts. Services are available regardless of insurance or ability to pay – more than 4 in 10 students at each school served are low-income (see Free and Reduced Lunch Rates table). Medical care focuses on preventive services including immunizations, tobacco cessation, nutrition, eating and weight concerns, reproductive health care, physicals, and mental health counseling. Injury, illness, and infection visits are also common throughout the year.

**Evaluation Methods:**

For every medical visit, data on student concerns, clinician addressed topics, and referrals are recorded by the SBHC clinicians. Demographic and health care access data are collected at each client’s first visit by SBHC clinical support staff. For every mental health visit, data on student concerns, clinician addressed topics, referrals, and visit experience are recorded by the MH clinician. Demographic data are collected at each client’s first visit.

Data in this report were collected from August 2022 through June 2023.

**SBHC Medical Services Report:**

**Pages 3-7**

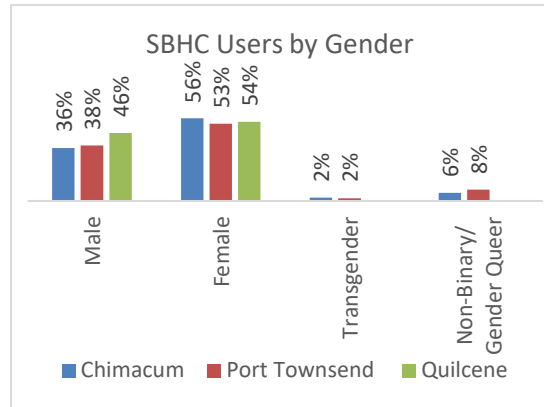
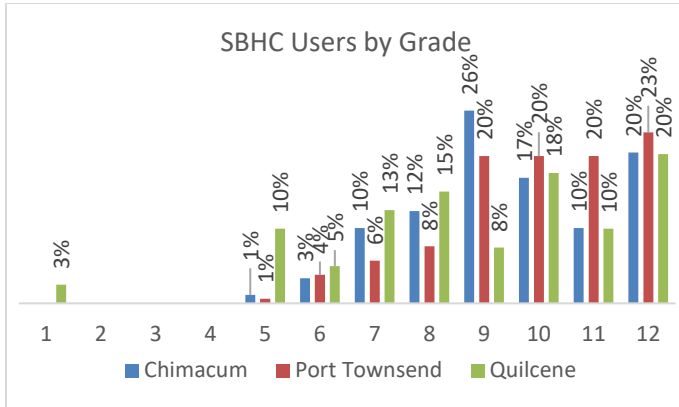
**SBHC Mental Health Services Report:**

**Pages 8-13**

# SBHC Medical Services

## Demographics

Chimacum and Port Townsend had students from grades 5 - 12, and Quilcene had students from grades 1 - 12. At Chimacum, Port Townsend and Quilcene, SBHC users were more likely to identify as female. At Chimacum, 6% of users and at Port Townsend, 8% of users identified as non-binary/gender queer.



For SBHC reported race/ethnicity, any selection of two separate race categories were recoded to the two or more races category. Each SBHC had users who did not report their race/ethnicity, in Chimacum, Port Townsend, and Quilcene 8% of students did not report.

Overall, most students in Chimacum, Port Townsend, and Quilcene identify as white, similar to the percentage of students for their districts, respectively.

In Chimacum, among SBHC users there was a higher representation of American Indian/Alaska Native, Native Hawaiian/Pacific Islanders, and Multiracial students than the district population. In Port Townsend, there was a higher representation of Black, Hispanic/Latino, Native Hawaiian/Pacific Islanders, and Multiracial students than the district population. In Quilcene, there was a higher representation of students who identify as American Indian/Alaska Native, Hispanic/Latino, and Multiracial than the district population.

Racial Composition	Chimacum (Grades)		Port Townsend (Grades)		Quilcene (Grades)	
	SBHC (5-12)	Dist. (K-12)	SBHC (5-12)	Dist. (K-12) *	SBHC (1-12)	Dist. (K-12) *
American Indian / Alaska Native (AIAN)	3.7%	0.6%	0.7%	1.0%	2.7%	1.2%
Asian	1.2%	1.5%	1.4%	1.8%	0.0%	1.4%
Black	0.0%	0.6%	2.1%	1.4%	0.0%	0.5%
Hispanic/Latino (Any race)	3.7%	11.9%	11.7%	10.0%	8.1%	7.0%
Native Hawaiian / Pacific Islanders (NHOPI)	2.4%	0.1%	1.4%	0.3%	0.0%	0.2%
Multiracial	18.3%	7.9%	13.1%	8.7%	10.8%	8.1%
White	70.7%	77.4%	69.7%	76.8%	78.4%	81.5%

\*Note: Data unavailable to restrict by grade.

\*\*Note: Totals may not equal 100% due to rounding.



Insurance type distributions for SBHC utilizers was similar for all schools. Overall, less than 10% of all SBHC utilizers had an unknown insurance type. Most students who reported their insurance, reported having Apple Insurance (60% - 73%). The second most common type of insurance was private (17% - 28%). Quilcene had the highest percentage of students who took the charge of services (10%). Approximately 4% - 5% of utilizers reported no insurance.

Overall, less than two thirds of students at each school reported having usual medical and dental providers. Even less reported having usual mental health providers (20% - 29%).

For students reporting having visited a provider in the past year the percentage varied by district, in Port Townsend 61% had visited a provider and in Quilcene only 38%. For dental it varied as well, in Port Townsend 62% visited and in Quilcene only 25%. The lowest service visited was mental health providers.

Compared to the 2021 HYS results for Jefferson County 10<sup>th</sup> graders, SBHC utilizers reported similar percentages who visited a medical provider, but less than the HYS for those who visited a dental provider. Overall, Jefferson County report fewer routine checkups for medical and dental compared to the state.

		Medical	Dental	Mental
SBHC Students report having a usual place for care:	Chimacum	61%	55%	20%
	Port Townsend	70%	73%	29%
	Quilcene	60%	55%	25%
SBHC Students report having visited a provider in the past year:	Chimacum	54%	38%	21%
	Port Townsend	61%	62%	29%
	Quilcene	38%	25%	10%
2021 HYS 10th graders report a routine checkup in the past year:	Jefferson County	58%	68%	-
	Washington State	67%	76%	-

## SBHC Referrals

Both school districts follow similar trends of student referral sources to the SBHC. Referral by the school was the most common, followed by parent, friend, and school counselor.

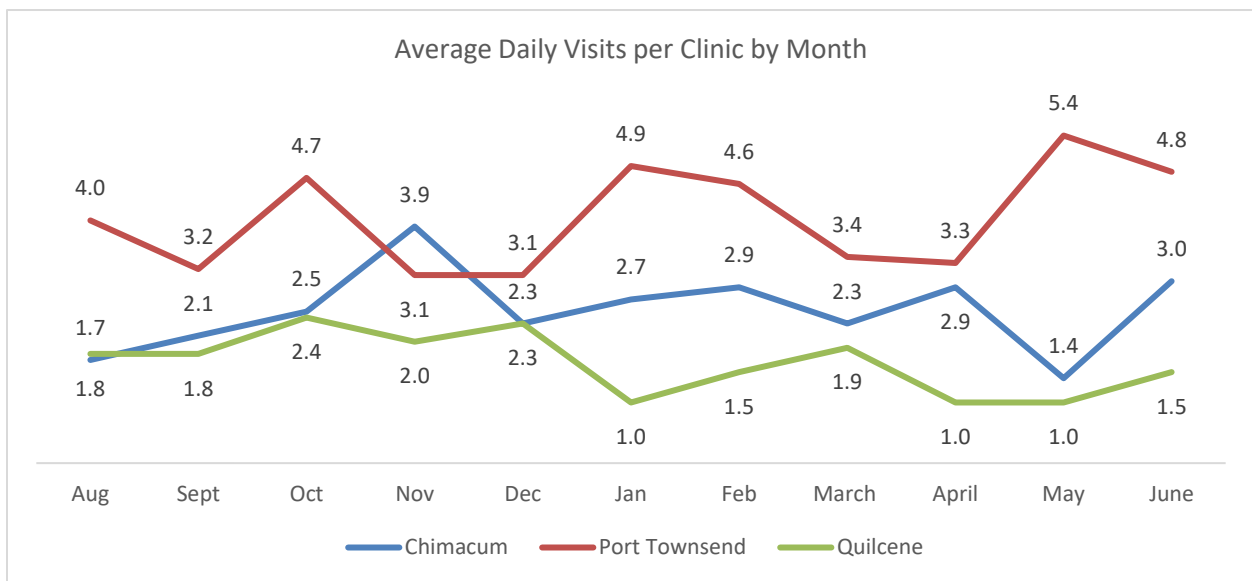
The most common referrals from the SBHCs were for the school-based mental health program, medical services, and mental health outpatient services. Clinicians refer SBHC participants to a variety of providers and organizations in the area on a consistent and ongoing basis depending on identified needs.

	Return Client	Parent	Friend	Teacher	Coach	Couns.	Pr/VP	SBHC MH	School	Class	Poster	Other
Chimacum	0	18	6	2	0	4	0	5	24	2	0	4
Port Townsend	0	32	25	5	11	11	1	4	47	5	9	5
Quilcene	0	15	1	1	0	3	0	1	7	0	0	3
<b>Total</b>	<b>0</b>	<b>65</b>	<b>32</b>	<b>8</b>	<b>11</b>	<b>18</b>	<b>1</b>	<b>10</b>	<b>78</b>	<b>7</b>	<b>9</b>	<b>12</b>

## SBHC Usage

SBHC Utilization Summary				
	Chimacum	Port Townsend	Quilcene	Overall
<b>Total visits</b>	200 (G 9-12: 158)	325 (G. 9-12: 296)	79 (G. 9-12: 43)	604 (G 9-12: 497)
<b>Total users</b>	89 (G 9-12: 65)	157 (G. 9-12: 129)	40 (G. 9-12: 22)	286 (G 9-12: 216)
<b>Clinic days with visits</b>	80	82	45	154
<b>Ave. visits by clinic days<sup>1</sup></b>	2.5	4.0	1.8	3.9
<b>Ave. visits per month<sup>2</sup></b>	18	30	7	18
<b>Ave. visits by client</b>	2.2	2.0	2.0	2.1
<b>Range of visits by client</b>	1 - 14	1 - 16	1 - 8	1 - 16
<b>Total Enrollment<sup>3</sup></b>	G. 1-8: 420 G. 9-12: 210	G. 1-8: 736 G. 9-12: 437	G. 1-8: 430 G. 9-12: 94	G. 1 - 8: 1,586 G. 9 - 12: 741
<b>Utilization Rate</b>	G 1-8: 6% G 9-12: 31%	G 1-8: 4% G 9-12: 30%	G 1-8: 4% G 9-12: 23%	G 1-8: 4% G 9-12: 29%

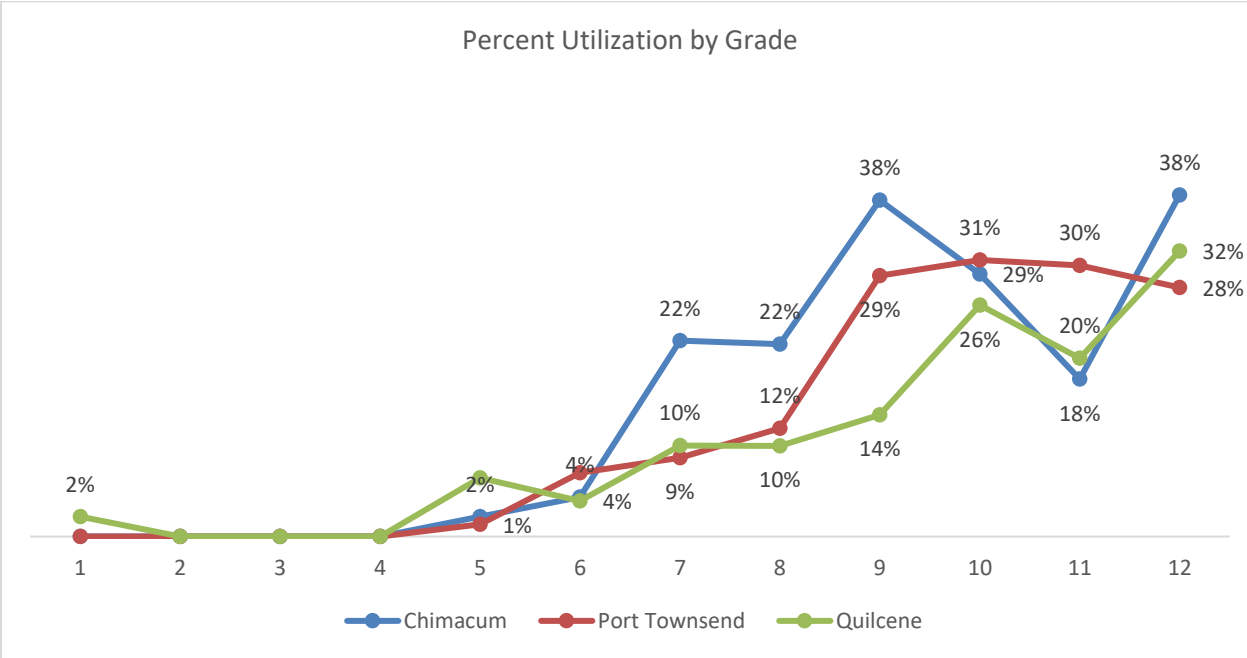
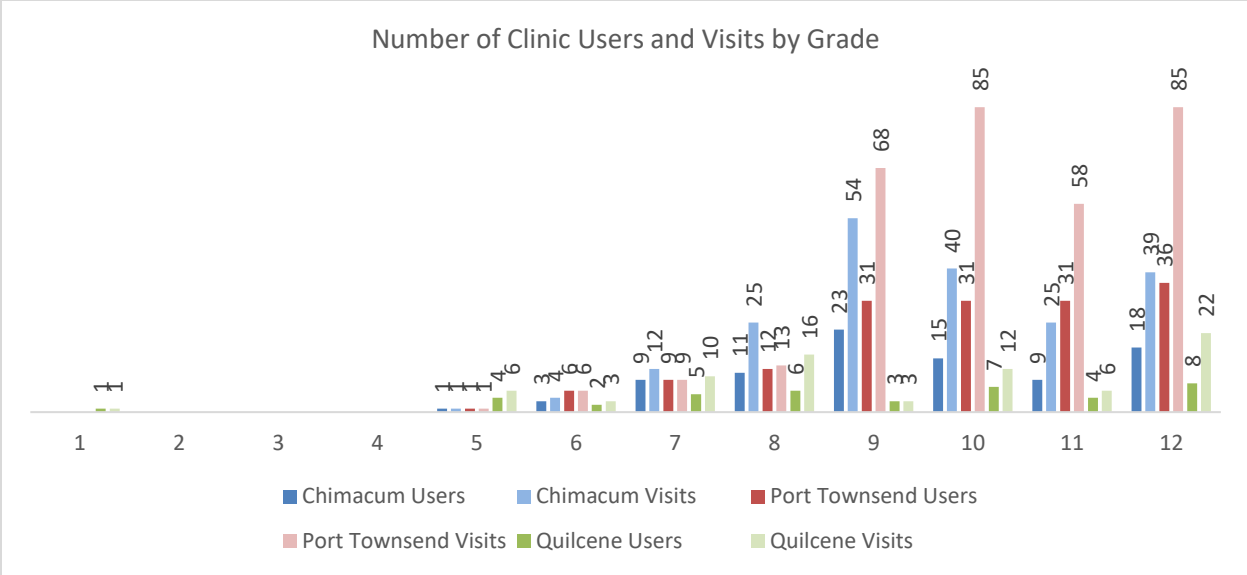
During the 2022 – 23 school year, the primary users and visits were from 9 – 12<sup>th</sup> grade students. SBHCs had 497 visits by students in 9-12<sup>th</sup> grades during 154 clinic days. Visits per day vary considerably month to month, between 1.0 and 5.4. At Chimacum, 9<sup>th</sup> graders had the greatest number of clinic users (23), and the greatest number of visits (54). At Port Townsend, 9<sup>th</sup>, 10<sup>th</sup>, and 11<sup>th</sup> graders had the greatest number of clinic users (31) and 12<sup>th</sup> graders had greatest number of visits (85). At Quilcene, 12<sup>th</sup> graders had the greatest number of clinic users (8), and 12<sup>th</sup> graders had the greatest number of visits (22). The highest percent utilization for Chimacum was for 9<sup>th</sup> and 12<sup>th</sup> graders, 10<sup>th</sup> graders for Port Townsend and Quilcene was for 12<sup>th</sup> graders.



<sup>1</sup> Values not directly comparable because of different clinic day lengths.

<sup>2</sup> Only months for which services were provided were included in this calculation.

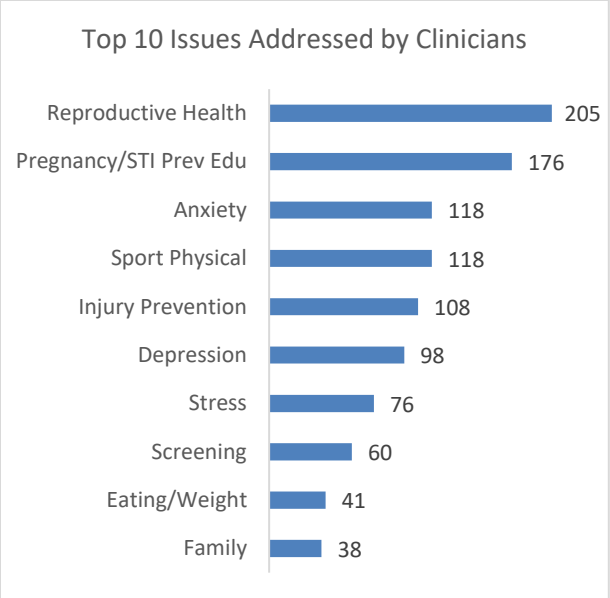
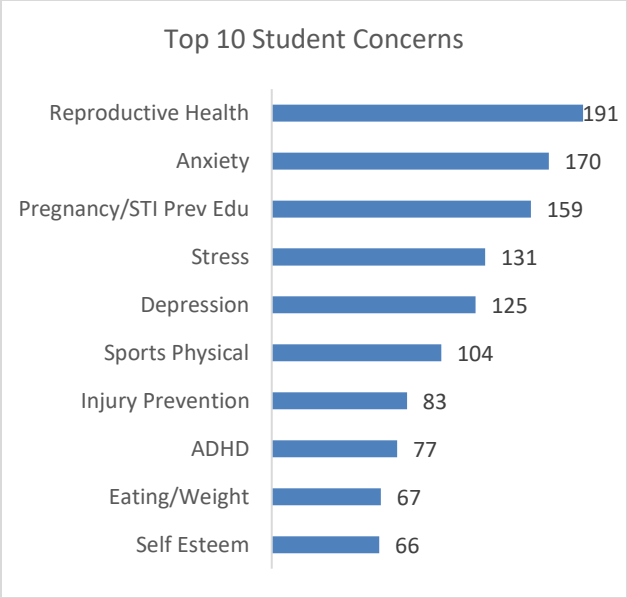
<sup>3</sup> Source: Washington State Report Card. Accessed 10/2022 at <https://washingtonstatereportcard.ospi.k12.wa.us>.



## SBHC Visit Reasons

Top five reasons for clinic visits by category:

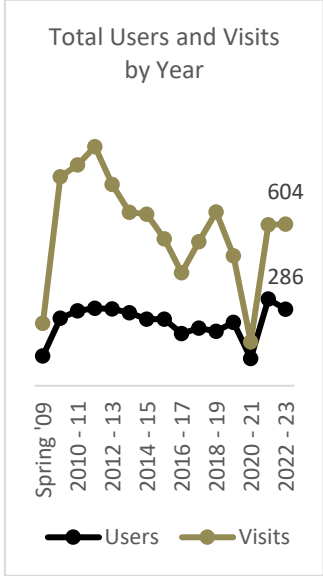
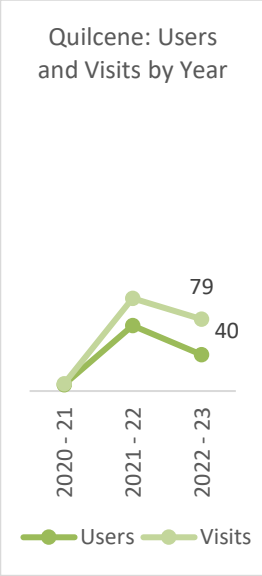
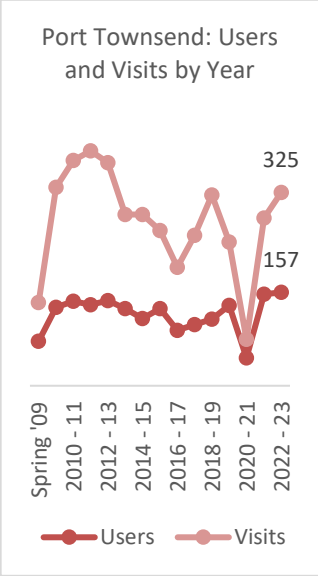
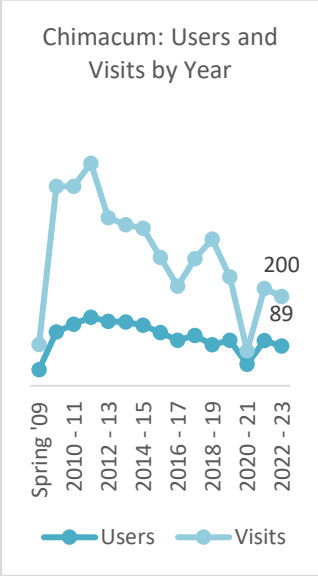
	BEHAVIORAL HEALTH		PHYSICAL HEALTH		HEALTH EDUCATION	
	Student Concern	Clinician Addressed	Student Concern	Clinician Addressed	Student Concern	Clinician Addressed
1	Anxiety	Anxiety	Reprod. Health	Reprod. Health	Preg. / STI Prev.	Preg. / STI Prev.
2	Stress	Depression	Sports Physical	Sports Physical	Injury Prev.	Injury Prev.
3	Depression	Stress	Screenings	Screenings	Immunizations	Nutrition
4	ADHD	Eating/Weight	Injury	Injury	Eating Disorders	Immunizations
5	Eating/Weight	Family	Pain	Pain	Nutrition	Tobacco



Most visits were for reproductive health, which may include STI screening, pregnancy test, birth control, emergency contraception, and education on sexual behavior and harm reduction techniques. Emotional well-being represents the next largest group of SBHC visit concerns by both students and clinicians (anxiety, stress, depression).

## SBHC Clinic Usage Over Time

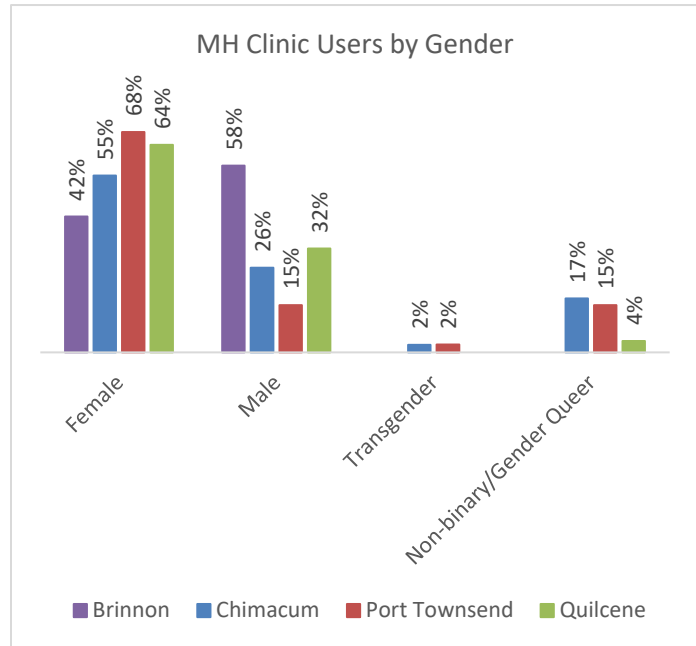
The number of users and visits in 2022 - 23 were slightly lower for all school districts compared to the previous school year, except Port Townsend. Due to the COVID-19 pandemic, the number of users and visits in the 2019 - 20 and 2020 - 21 school year were impacted.



# SBHC Mental Health Services

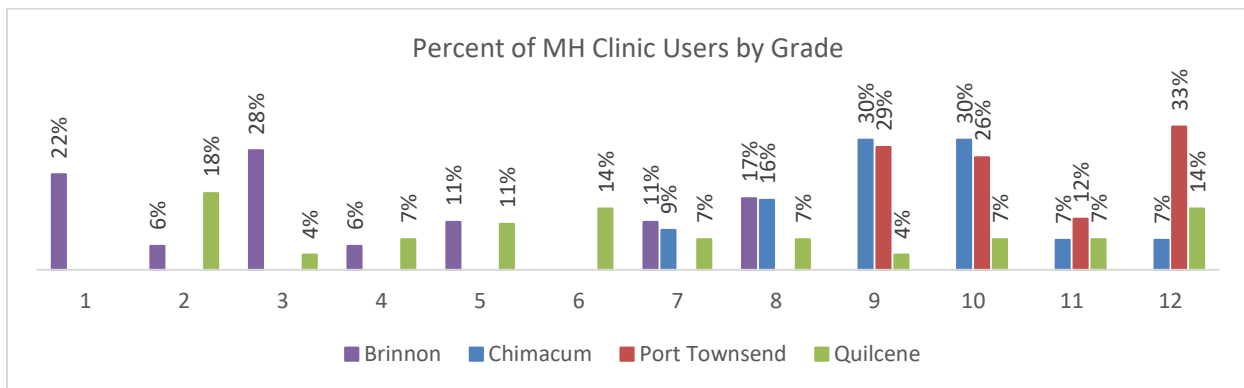
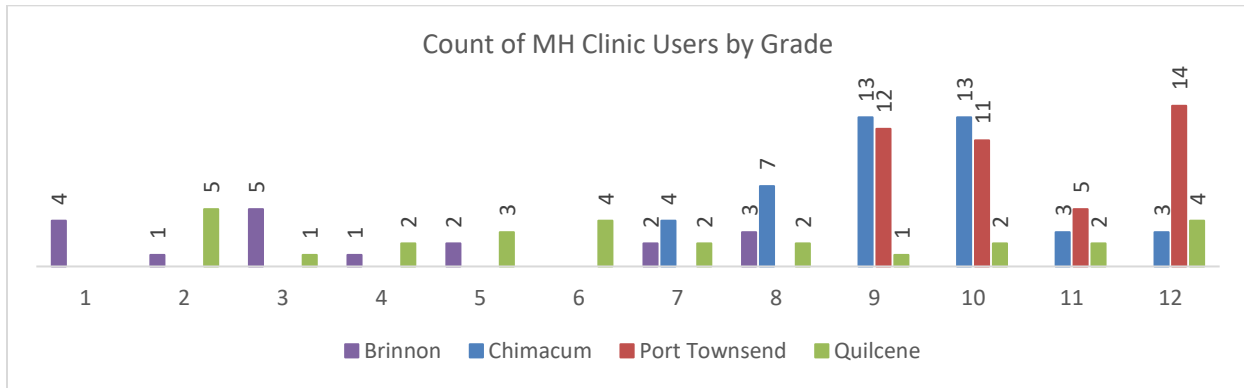
## Demographics

Overall, more females than males were seen at school clinics, except for Brinnon. Ten percent of MH clinic users did not report their gender. The majority of the MH clinic users identified as White (78%), followed by 7% identifying as American Indian/Alaska Native, 4% identifying as Asian and Multiracial, and 2% identifying as Black, Hispanic, and Native Hawaiian/Pacific Islander. Forty-two percent of users did not report their race/ethnicity.



### Total Unique Individuals and Total Visits by Grade:

Overall, a total of 144 unique individuals were served by the SBHC with mental health services, this included 20 clients from Brinnon, 47 clients from Chimacum, 42 clients from Port Townsend, and 35 clients from Quilcene. Nine percent of MH clinic users did not report their grade. For Chimacum and Port Townsend, the MH clinic users are in high school, Chimacum includes some middle school students. Quilcene serves all grades. Brinnon serves elementary and middle. At Brinnon, 3<sup>rd</sup> grade had highest use, 9<sup>th</sup> and 10<sup>th</sup> for Chimacum, 12<sup>th</sup> for Port Townsend, and 2<sup>nd</sup> for Quilcene.

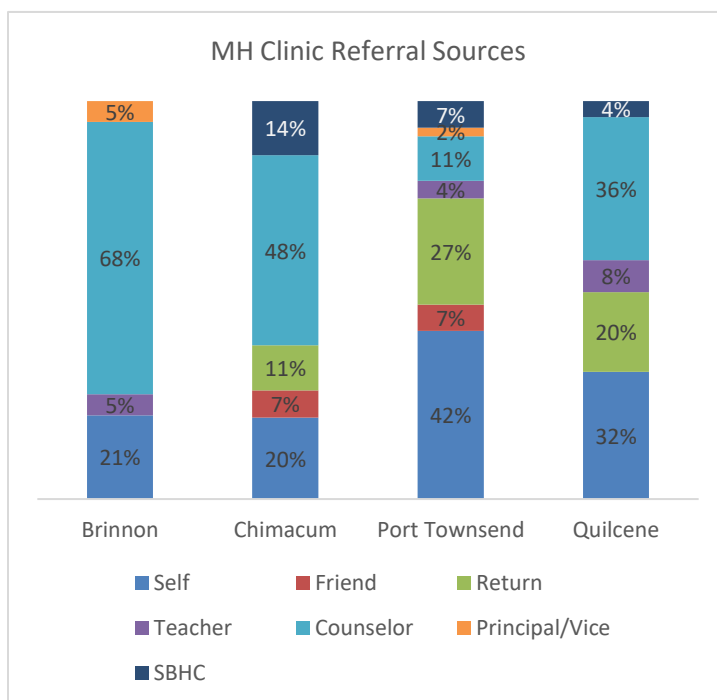




## SBHC MH Referrals

Referrals to SBHC mental health originated from a variety of sources. The leading referral sources are detailed as follows. With all sites combined referrals from the school counselor were the most common. The most common type of referrals at each site was counselor referral at Brinnon, Chimacum, and Quilcene, and self-referral at Port Townsend.

Chimacum, Port Townsend, and Quilcene tracked their referrals to outside services for 2022 – 2023. The most common type of referral out for Quilcene was school-based medical clinic, and mental health outpatient for Chimacum and Port Townsend.



## SBHC MH Visits

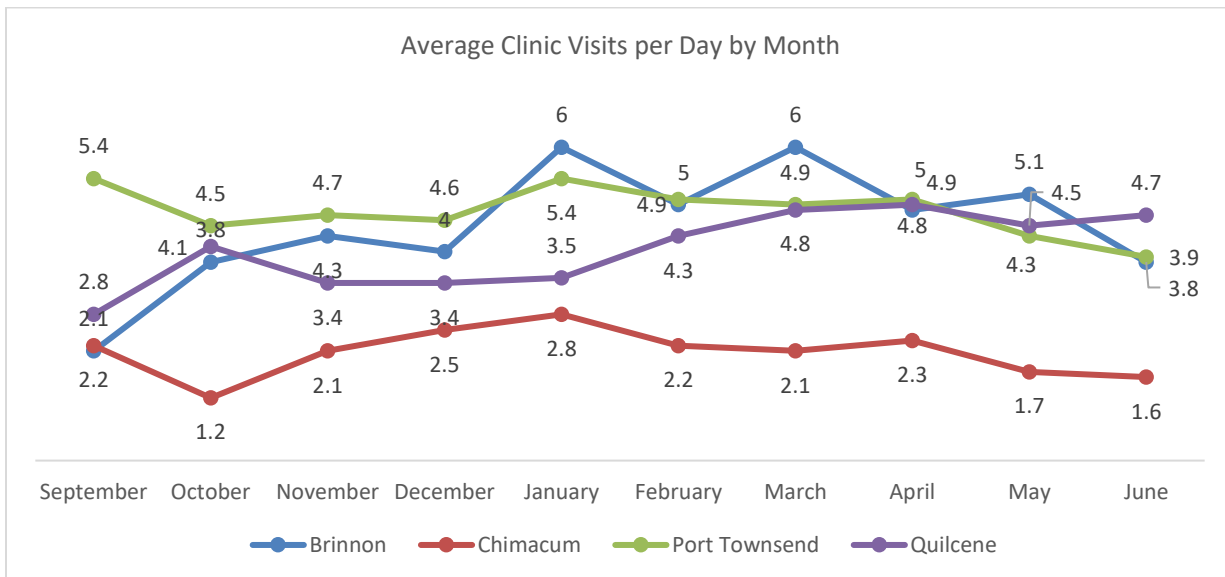
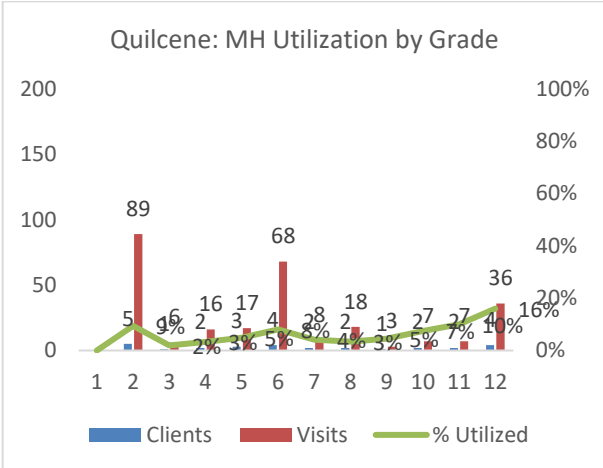
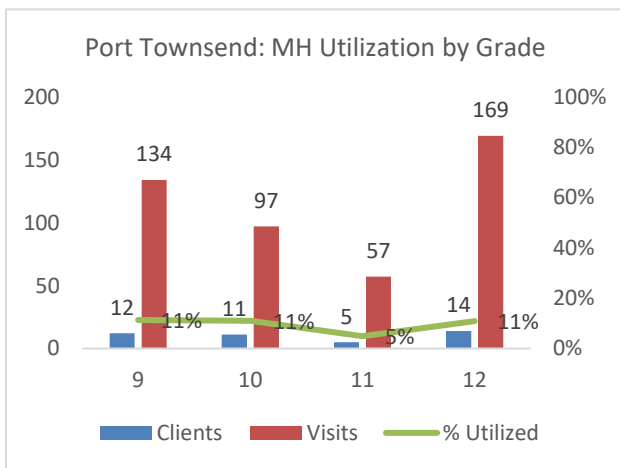
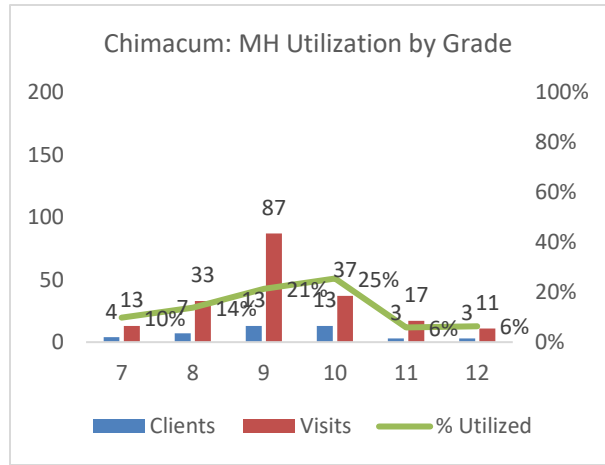
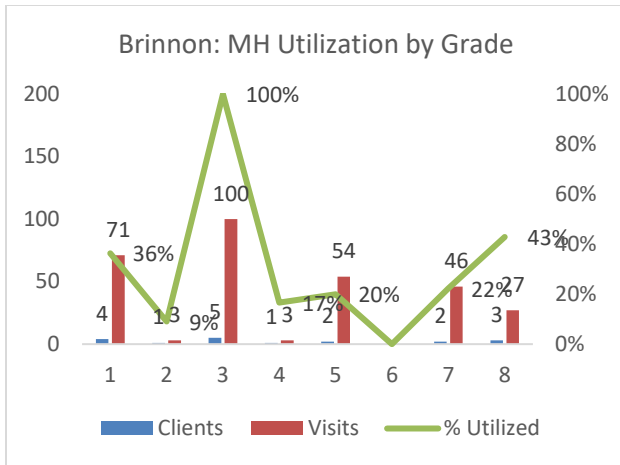
Port Townsend had the highest number of visits (457) and Chimacum had the highest number of clients (47). Chimacum had the most clinic days (99) followed by Quilcene (97). Port Townsend had the highest number of visits per clinic day (4.8 visits per day) while Chimacum had the lowest (2.1 visits per day). The highest utilization rates belonged to Brinnon (30%) for grades 1-8 and Port Townsend and Quilcene (17%) for grades 9-12.

SBHC MH Utilization Summary					
	Brinnon	Chimacum	Port Townsend	Quilcene	Overall
<b>Total visits</b>	307	203	457	392	1359
<b>Total users</b>	20	47	42	35	144
<b>Clinic days with visits</b>	68	99	95	97	175
<b>Average visits by clinic days<sup>4</sup></b>	4.5	2.1	4.8	4.0	7.8
<b>Average visits per month<sup>5</sup></b>	31	20	46	39	136
<b>Average visits by client</b>	15.4	4.3	10.9	11.2	9.4
<b>Range of visits by client</b>	1 - 27	1 - 18	1 - 28	1 - 31	1 - 31
<b>Total Enrollment<sup>6</sup></b>	G. 1-8: 67	G. 1-8: 420 G. 9-12: 210	G. 1-8: 736 G. 9-12: 437	G. 1-8: 430 G. 9-12: 94	G. 1 - 8: 1,653 G. 9 - 12: 741
<b>Utilization Rate</b>	G. 1-8: 30%	G. 1-8: 3% G. 9-12: 17%	G. 1-8: 0% G. 9-12: 10%	G. 1-8: 4% G. 9-12: 17%	G. 1-8: 3% G. 9-12: 13%

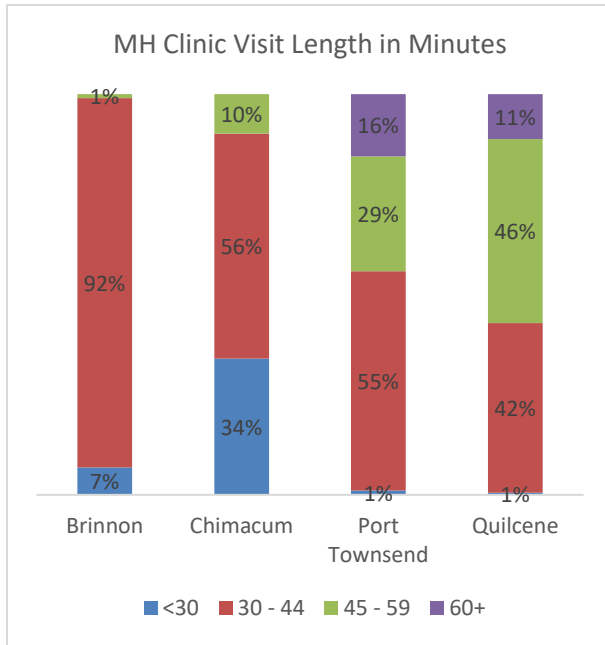
<sup>4</sup> Values not directly comparable because of different clinic day lengths.

<sup>5</sup> Only months for which services were provided were included in this calculation.

<sup>6</sup> Source: Washington State Report Card. Accessed 9/2022 at <https://washingtonstatereportcard.ospi.k12.wa.us>.

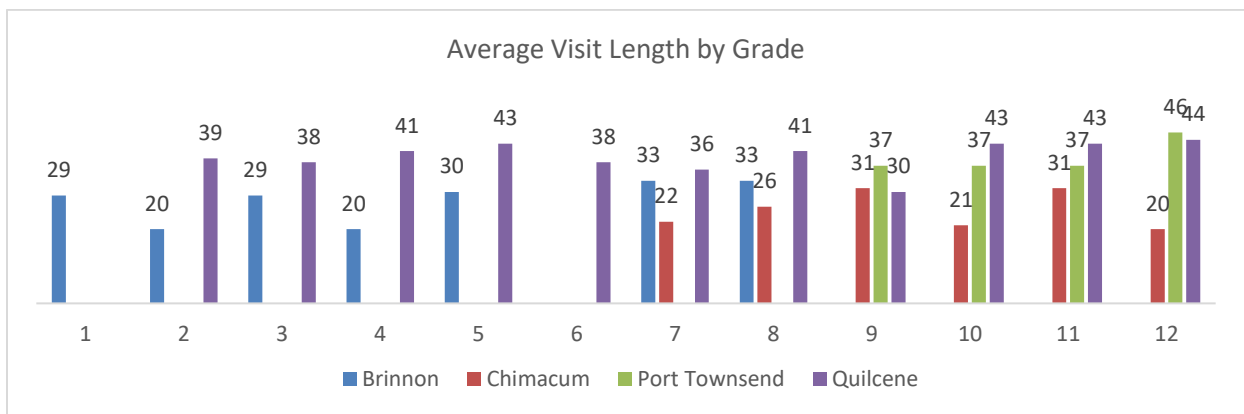


The highest average MH visits per clinic day was in January and March (6.0) for Brinnon; in January (2.8) for Chimacum; in September and January (5.4) for Port Townsend, and in April (4.8) for Quilcene.



**SBHC MH Visit Length:**

Most MH visits (60%) were 30 – 44 minutes long. Brinnon had the least variation in visit lengths with 92% of their visits 30 – 44 minutes. In Quilcene, the most common length of appointments was 45 – 59 minutes, unlike the rest of schools. In Brinnon and Chimacum, the next most common length of appointments following 30 – 44 minutes was less than 30 minutes. In Port Townsend, the next most common length of appointments following 30 – 44 minutes was 45 to 59 minutes. Overall, higher grades had longer average visit lengths.



**Top Reasons for SBHC MH Visits:**

		Brinnon	Chimacum	Port Townsend	Quilcene
Student Concern	1	-	Anxiety	Stress	Relationships
	2	-	Stress	Family	MH Wellness
	3	-	Family	Anxiety	Family
	4	-	Self Esteem	Relationships	Anxiety
	5	-	Depression	Future	Grief

		Brinnon	Chimacum	Port Townsend	Quilcene
Clinician Concern	1	Family	Anxiety	Stress	Relationships
	2	Anger	Stress	Family	Anxiety
	3	Stress	Family	Anxiety	Family
	4	Grief	Self Esteem	Relationships	MH Wellness
	5	School	Depression	Future	Stress

Top concerns of students and clinicians varied by school. The top concerns of students were anxiety, stress, and relationships. The top concerns of clinicians were family, anxiety, stress, and relationships.

The following charts display the reasons for visits identified by the student and clinician for each school. The sum of the bars may exceed 100% as students may present multiple reasons for each visit.

**MH Visit Reasons: (ranked by clinician concern, top of chart = top rank)**



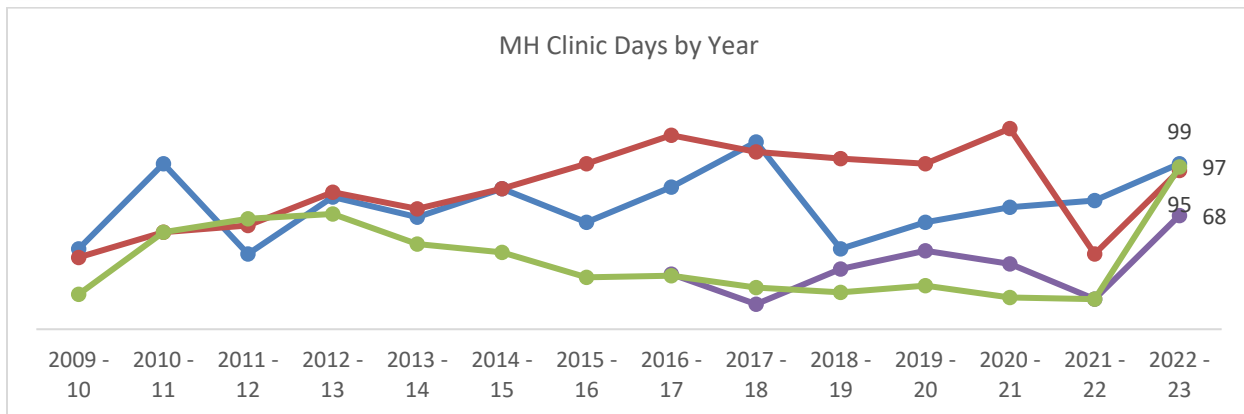
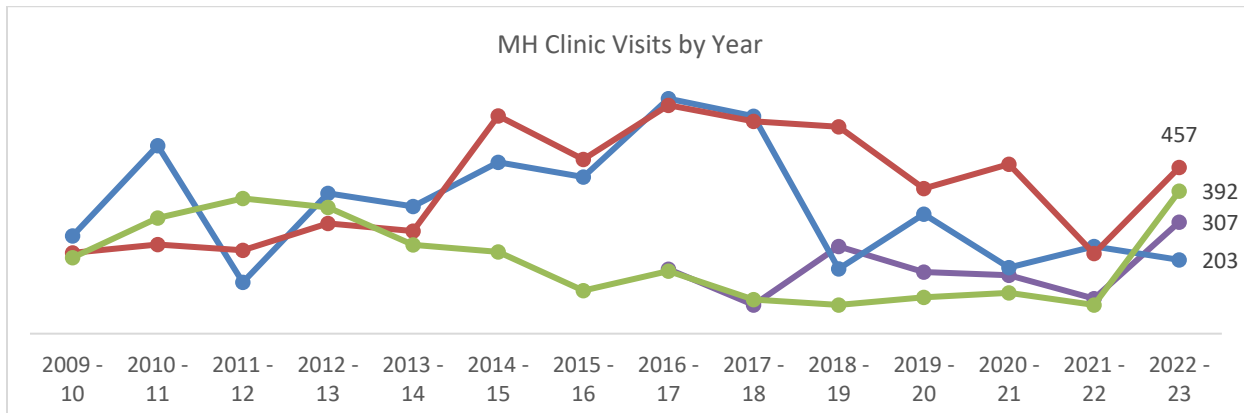
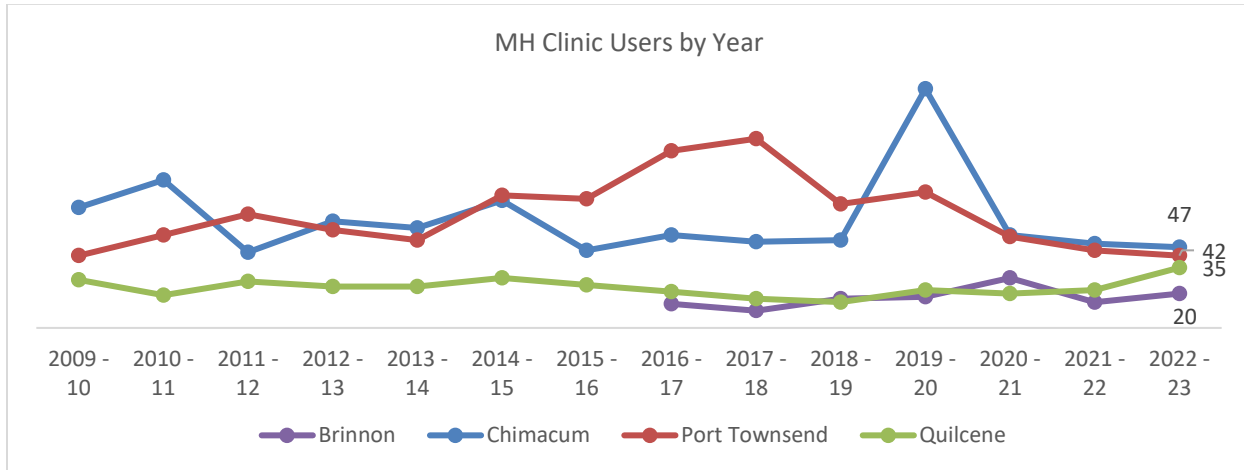
**Services Provided**

Most services provided were individual therapy (92% across all schools) – 100% at Brinnon, 93% at Chimacum, 92% at Port Townsend, and 92% at Quilcene. Other services were provided, often along with individual therapy, and included primarily contacting/working with other agencies, family, or school staff and crisis intervention.

## SBHC MH Visits Over Time

Trends for SBHC MH services are difficult to interpret due to changes in hours over the years. SBHC MH services were first offered at Brinnon in Fall 2016 but were interrupted in winter 2017 - 18. Due to the COVID-19 pandemic, schools closed in March 2020. This impacted clients and visits during the 2019 – 20 school year and continued for the 2020 – 21 school year. Staff were able to provide telehealth appointments despite closures.

In 2022 - 23 compared to 2021 – 22, users remained similar at all schools. Visits increased at all schools, except Chimacum. Clinic days increased for all schools, except Chimacum.



Note: The spike in 2010-11 in Chimacum resulted from increased services after the suicide of a classmate. The drop in Brinnon in 2017 - 18 was due to an interruption in services.