

March 17, 2021

RE: SB-1 S.B. No. 1 (COMM) AN ACT EQUALIZING COMPREHENSIVE ACCESS TO MENTAL, BEHAVIORAL AND PHYSICAL HEALTH CARE IN RESPONSE TO THE PANDEMIC.

Dear: Senator Abrams and Representative Steinberg, Representative Anwar, Representative Kushner, Representative Gilchrest, and ranking members Senators, Hwang and Somers and Representative Petit,

Thank you so much for this opportunity to discuss increased funding for SBHC's "School Based Health Centers work". Rep Toni Walker. Rep Walker spoke those words to me 2 weeks at an appropriation hearing during my testimony.

My name is Jill Holmes Brown I have been working in SBHC's for over 20 years.

SBHC's provide access to those who may not otherwise have it.

They provide Services to vulnerable at-risk populations.

They help with absenteeism.

They help parents stay at work and avoid taking time off for necessary medical, dental, and therapy appts.

They build relationships within the school community.

But what is a SBHC? The Connecticut Association of SBHC's stands by the definition that it is comprehensive care consisting of both medical and mental health services.

SBHC's are operated by a variety of different agencies, Hospitals, Municipalities, FQHS's, non-profits. Each with its own separate unique funding model and reimbursements rates.

The standards to ensure that this level of quality is adhered to has yet to be made into statute.

While we would all agree that children and adolescents are in dire need of mental health services I would advocate that especially now and all that has transpired in the last year we ensure that we do not offer piece meal services, and that we treat the whole student/child.

Often times children and adolescents present with symptoms of a medical nature for example a stomachache when they are really stressed or anxious about something that may be happening at school with their grades or peers or a problem at home.

The same can be said of adolescents who manifest symptoms of a mental health issue but really there is an underlying medical issue that needs attention.

How can one become a partner with the school, teachers, administrators and students if they are only there a few days a week providing services to only those who have insurance? Those sites with DPH funded are mandated to treat ALL students regardless of their ability to pay.

I advocate for this integrated model as I have been working in SBHC 's for over 20 years and I can state that I have seen some sites have one or the other service or both and dental as

well, and what I can tell you is kids require consistency ! Access is not 2 days a week they are not going to have a crisis just cause the Social worker is there Tuesday and Thursdays, what about the other days they are In school. . It is about consistent care and not operating in a silo. We need to treat the WHOLE child!

Quantity does not mean quality so I would encourage that as we all are incredibly concerned about the social emotional health of our children, we are thoughtful about how any new potential funding is allocated and that the RFP Process is fair and equitable and addresses the WHOLE Child.

Healthy Kids make Better Learners!