



**Boston  
Children's  
Hospital**

Neighborhood  
Partnerships

# Annual Report 2020

Reaching children where they live and learn



# CONTENTS



---

**0 3**

A MESSAGE FROM LEADERSHIP

---

**0 4**

OUR PROGRAM

---

**0 5**

OUR PARTNER SCHOOLS

---

**0 6**

BCHNP PARTNERSHIP DURING  
REMOTE LEARNING

---

**0 8**

2019-2020 SCHOOL YEAR

---

**1 7**

ACKNOWLEDGEMENTS

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# A MESSAGE FROM LEADERSHIP

Dear Friends,

Our annual report has always been an opportunity for reflection. The impacts of the pandemic along with ongoing incidents of significant racial injustice and racism continue to have a profound effect on school communities. At BCHNP, we are proud of our ability to respond with flexibility and adaptability to promote the social, emotional, and behavioral health and well-being of the students, families, schools, and school staff within our partnering schools. This time, challenging as it has been, has also allowed us to reimagine our work and the way we partner with schools and communities and has opened up space in our program for innovation, ongoing learning, and persistence. We continue to collaborate with community members and organizations to engage in equitable and culturally responsive clinical care, consultation, professional development, research and advocacy in school communities most impacted by systemic inequities. We remain energized by our commitment to social justice and to working intentionally to create changes both within our program and our partnerships.

We thank our partners and supporters of our program. We are honored to be a partner with the Boston Public Schools and value our shared commitment to working to better Boston for all students. This past year, we partnered with 16 schools providing behavioral health services to over 1,100 students, and providing 45 professional development workshops and 1,500 hours of training and consultation to Boston school staff. In addition, we have shared workshops nationwide through [TAP Online](#), our free innovative training series for educators. To help educators prepare for school re-entry, we launched an online series ([www.tapreturntoschool.com](http://www.tapreturntoschool.com)) and have had over 900 educators enroll to date.

The [BCHNP team](#) has been working tirelessly to support the community. We extend a special thank you to them for their hard work, expertise, compassion and dedication. We are deeply grateful for their courage in a time of uncertainty and unpredictability.

We are pleased to share the BCHNP Annual Report for the 2019-2020 school year highlighting accomplishments both on the ground and virtually. Thank you for your support and commitment to Boston's youth and families as our schools navigate these challenging times and always.

With gratitude,

**Sheila Dennery, PhD, LICSW**  
Director, BCHNP

**David R. DeMaso, MD**  
Psychiatrist-in-Chief

# OUR PROGRAM

In an 18-year partnership with our community, the Boston Children's Hospital Neighborhood Partnerships Program (BCHNP) has promoted the social, emotional, and behavioral health of diverse youth and families through high quality, innovative, and culturally relevant clinical care, education, training, and advocacy in Boston's schools.

## VALUES

- Diversity & Equity
- Community Centered
- High Quality Care
- Building Trust Across Differences
- Building a Community
- Engaged Learning

## GOALS

1. Increase access to high quality, culturally relevant behavioral health services for children and adolescents in schools;
2. Promote healthy social-emotional development in youth;
3. Build the sustainable behavioral health capacity of partner organizations;
4. Promote systemic change in behavioral health service delivery; and
5. Provide services that achieve a high rate of satisfaction with all stakeholders.

## OUR TEAM

# 18

Total BCHNP Staff Members

# 8

Social Workers

# 4

Psychologists

# 155

Collective Years of Experience Working in Schools

# OUR PARTNER SCHOOLS

BCHNP partners with school communities in three primary ways:

## 1) FULL SERVICE SCHOOLS

BCHNP clinicians work onsite in 6 partnering schools to provide a range of clinical, early intervention, and prevention and promotion services to students, as well as professional development, consultation, and capacity building services to each school community. [A BCHNP study of three-year outcomes is published in the Journal of School Health.](#)

## 2) CLOUGH FOUNDATION TRAINING AND ACCESS PROJECT (TAP) SCHOOLS

BCHNP-TAP consultants provide high quality professional development and consultation over the course of a two year partnership in 10 schools. The goal of BCHNP-TAP is to build the capacity of these partnering schools to develop the systems, protocols, and procedures needed to effectively and sustainably address the social, emotional, and behavioral health needs of their students. [An evaluation of this professional development and consultation model is published in Children and Schools.](#)

## 3) COMMUNITY COLLABORATIONS

To extend its reach further within and beyond Boston, BCHNP also provides specific professional development, consultation, and/or capacity building services outside of the context of a full service or BCHNP-TAP partnership for targeted needs.

16

Total Number of Partnering Schools

6

Full Service Schools

10

TAP Schools

# BCHNP PARTNERSHIP DURING REMOTE LEARNING

Following the announcement of school closure on March 13th, 2020, BCHNP clinicians continued to support the social, emotional, and behavioral health needs of students, families, and school communities as they transitioned to remote learning. Data presented on this page represent BCHNP services provided after this announcement and through the end of July 2020.

# 616

Student Contacts  
With

# 103

Students

---

# 167

Family Contacts  
With

# 67

Family Members

---

# 525

Hours of Consultation With  
School Staff and Community  
Members

The majority of consultation (61% of hours) was with educators and administrators and the most frequent topic of consultation (26% of hours) was school climate.

When asked specifically about supports provided during remote learning...

97%

Of BCHNP school staff members agreed the BCHNP clinician helped their school identify resources to support students, families, and/or staff

97%

Agreed the BCHNP clinician provided supports that enhanced existing supports and systems in their school community

### School staff members said...

*"The BCHNP clinician was able to join Zoom classes with students and help them deal with these unprecedented issues and feelings."*

*"Knowing the BCHNP clinician is there and seeing her in staff meetings was wonderful for my personal mental health which, in turn, translates to me being a better support for my students."*

*"The BCHNP clinician was always available and even though I'm sure she had a million things going on she always took the time to listen and help problem solve."*



# 2019-2020 SCHOOL YEAR

BCHNP's service delivery model is consistent with the multi-tiered system of supports model (MTSS; Hess et al., 2012; Stoiber, 2014). This best practice model is aligned with the public health model of stepped care, with each level of service increasing in intensity for students with higher levels of need. Services provided at each partner school are individualized based on a collaborative assessment of each school's specific needs and resources. The below figure represents this model with data depicting BCHNP's reach throughout the 2019-2020 school year.

# 1147

Total Students Reached

## CLINICAL INTERVENTION

Crisis Encounters: 151 Encounters  
Individual Therapy: 44 Students

## EARLY INTERVENTION

Care Coordination: 189 Students  
Targeted Groups: 61 Students

## PREVENTION AND PROMOTION

Classroom Interventions: 797 Students

## CAPACITY BUILDING

Behavioral Health Workshops: 1056 Participants  
Behavioral Health Consultation: 1515 Hours



# CAPACITY BUILDING

In collaboration with teachers, administrators, school staff, caregivers, and other adults in students' lives, these services aim to support adults' abilities to address student behavioral health needs through strengthening school-wide systems and building behavioral health knowledge, skills, and self-efficacy.

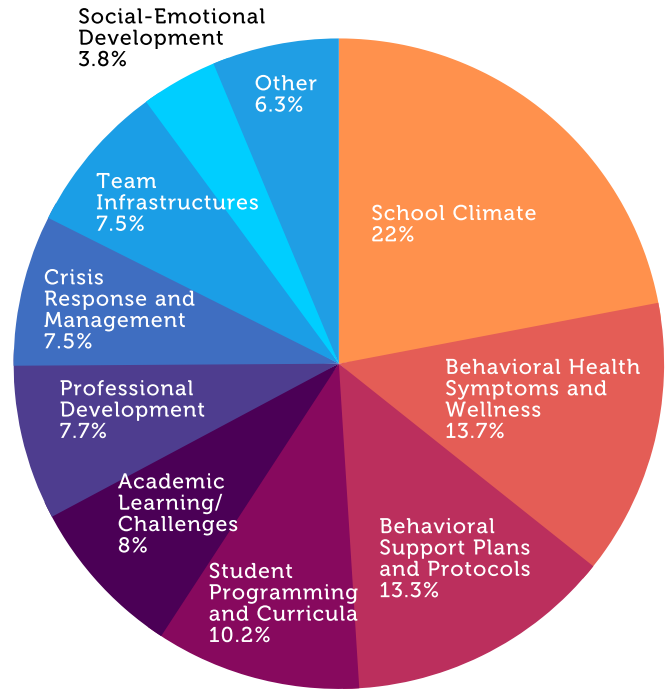
## CONSULTATION

Consultation involves working collaboratively with adults involved in students' lives in order to effect change. This may be one-on-one, in small or large groups, or through meeting facilitation or participation.

**1515**  
Hours Overall

**927**  
Hours in Full Service Schools

**588**  
Hours in TAP Schools



Primary Topics of Consultation (N = 1515 Hours)

\*Other: Community Partnerships, Family Engagement

## PROFESSIONAL DEVELOPMENT WORKSHOPS

Professional development workshops are presentations, activities, and/or discussions facilitated in partnership with adults in students' lives to promote knowledge, skills, and self-efficacy to support students and families.

**1056**

Total Workshop Participants

**14** workshops with **331** full service partner school staff members

**23** workshops with **452** TAP partner school staff members

**07** workshops with **267** participants from community collaborations

**01** workshop with **06** caregivers

**45**

Total Workshops

When asked about capacity building services...

99%

Of BCHNP school staff members agreed that the BCHNP clinician helps their school better address behavioral health needs

99%

Agreed that the BCHNP clinician helps their school support their students' academic success

School staff members said...

*"The BCHNP clinician facilitates a huge group and it feels like she's talking only to me. Her pace and her thoughtful explanations helped me understand deeply."*

*"The BCHNP clinician treats teachers as co-experts, and she is fantastic at building people up to feel empowered and listened to."*



# PREVENTION AND PROMOTION

These services involve classroom interventions, community events, and school-wide initiatives with students that teach social-emotional skills, promote healthy social-emotional development, and foster a positive school climate.

Classroom interventions involve promoting students' social and emotional learning through didactic presentations, collaborative learning activities, and discussions facilitated in classrooms.

47

Classroom Interventions Reaching

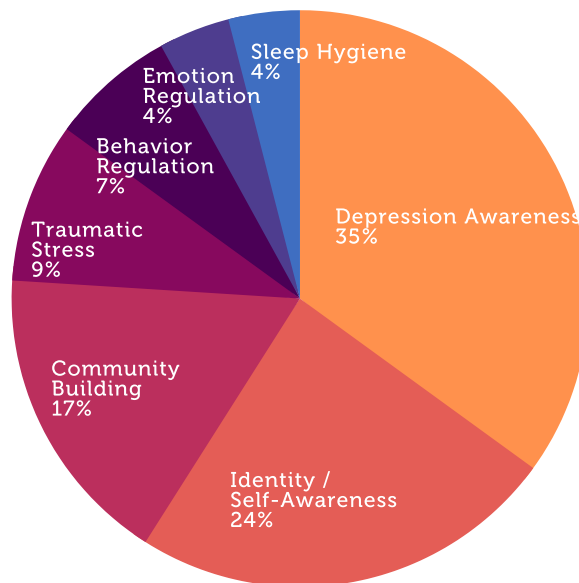
797

Students With an Average of

3

Sessions Per Intervention

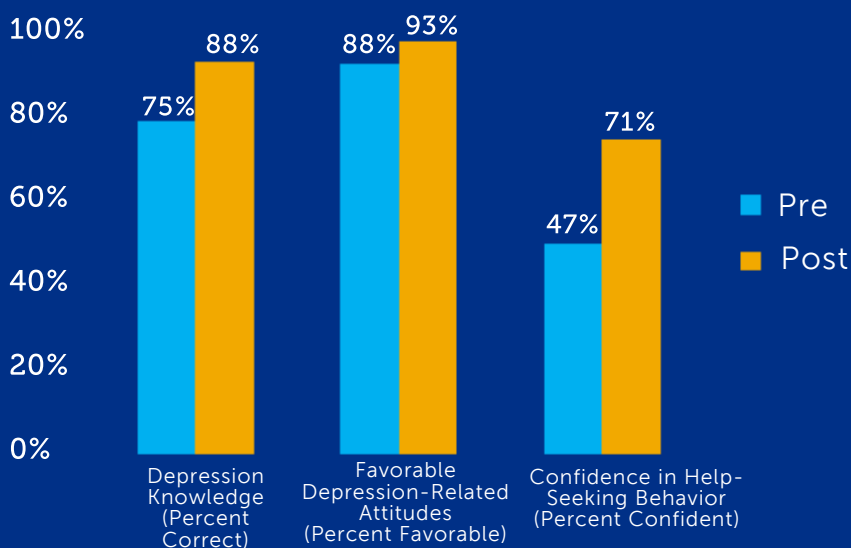
## CLASSROOM INTERVENTIONS



Primary Focus of Classroom Interventions (N = 47 Classroom Interventions)

## BREAK FREE FROM DEPRESSION (BFFD)

The depression awareness interventions noted in the pie chart above implemented BFFD, a 4 session classroom intervention designed by BCHNP to enhance adolescents' depression awareness skills through a combination of didactic presentations, a compelling documentary, and interactive activities.



Matched Pre and Post Survey Results (N = 160 Matched Student BFFD Participants)

237 Students Reached in

15 Classrooms

*"The BCHNP clinician has been a major resource for staff to grow in understanding of psychological and sociocultural aspects of our students' lives and to be sensitive in how we interact and structure instruction. She helps us on numerous levels, from developing school-wide systems down to leading class-based circles."*

**- School Staff Member**

*"I learned a lot from this lesson and I want my class to always be like this!"*

**- Student Classroom Intervention Participant**

*"The BCHNP clinician makes the students feel comfortable, as a result they are willing to share."*

**- Teacher Following a Classroom Intervention**



# EARLY INTERVENTION

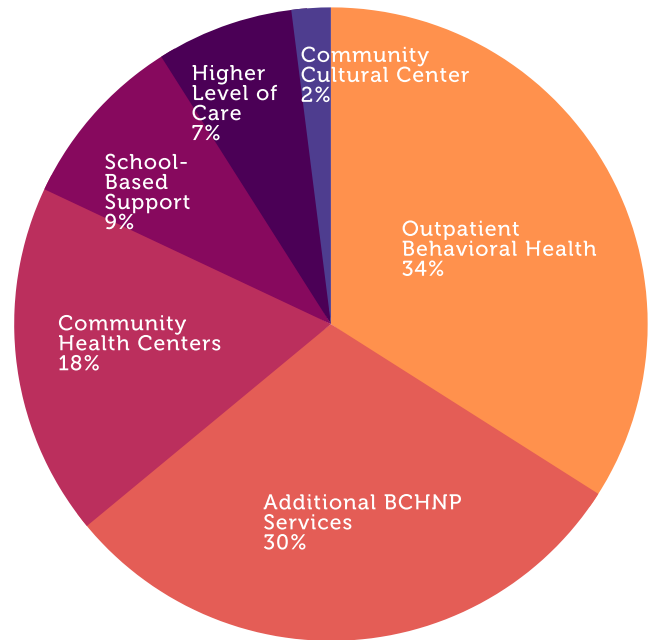
For students who are demonstrating early signs of behavioral health concerns, these services involve brief targeted group interventions, referrals for additional supports, and/or care coordination to promote resilience and reduce the risk of developing more extensive concerns.

## CARE COORDINATION

Care coordination involves working collaboratively with students, caregivers, school staff, and community professionals to assess needs, support access to appropriate referrals for additional behavioral health services, and facilitate communication amongst adults involved in students' lives.

# 189

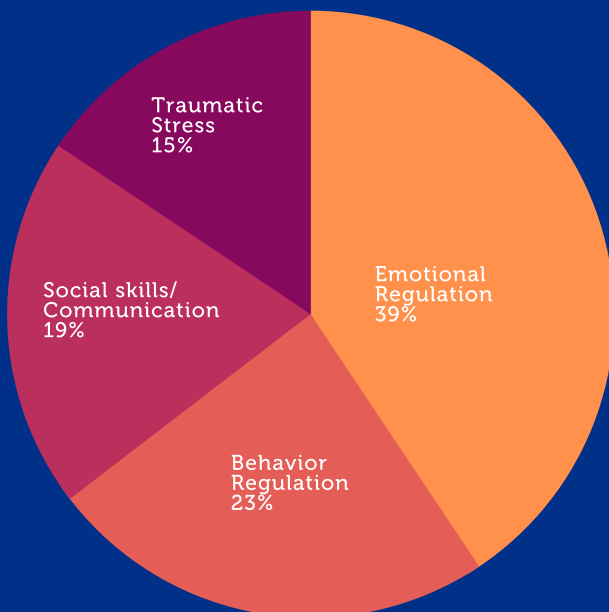
Students Reached



Referral Sites for Students Referred to Other Services (N = 300 Referrals)

## TARGETED GROUPS

Targeted groups involve working with small groups of students together to build social-emotional skills.



Primary Focus of Targeted Groups (N = 13 Targeted Groups)

# 13

Targeted Groups Reaching

# 61

Students With An Average of

# 6

Sessions Per Group

*"The BCHNP clinician is part of our team. We communicate daily, multiple times a day in order to support our students in all aspects of their life. She is always available and brings a wonderful diverse understanding of the work we do."*

**- School Staff Member**

*"The BCHNP clinician gives me practical steps I can take to support a family. Also, she uses her time wisely and is student-focused. Her many small social groups with students gave students the attention and resources they need to address behavioral health concerns."*

**- School Staff Member**



# CLINICAL INTERVENTION

For students with immediate, urgent, or clinically significant behavioral health needs, these services involve providing or referring students for crisis assessment, crisis intervention, and/or ongoing clinical treatment to address these needs.

Crisis intervention may involve assessment, providing support, discussing coping strategies, referral to more acute care, and/or consultation with other adults involved in students' lives.

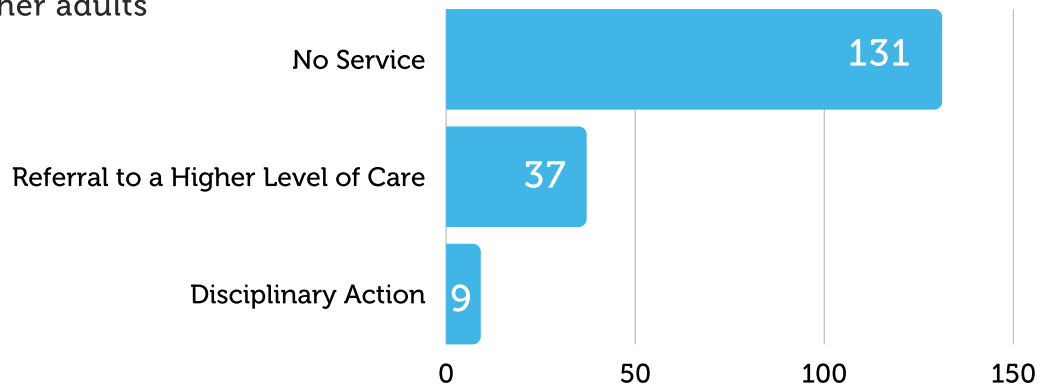
## CRISIS INTERVENTION

151

Crisis Encounters With an Average

5

Minute Wait Time



Number of Encounters in Which Adverse Outcomes Were Prevented By BCHNP's Presence in the School Building (N = 177 Total Outcomes Prevented in 151 Encounters)

Individual therapy involves collaboratively setting and addressing goals through a combination of one-on-one student sessions, consultation with other adults involved in students' lives, and/or referrals to and coordination with additional school and community-based supports.

## INDIVIDUAL THERAPY

44

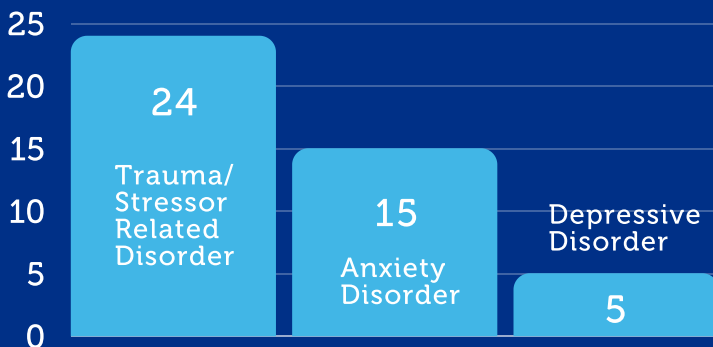
Students Reached With an Average

18

Sessions Per Student and a Median

7

Days Wait Time after Referral



Primary Diagnostic Categories for Students Engaged in Individual Therapy (N = 44 Students)

*"The BCHNP clinician helped me feel better. I like her a lot. She is so nice to me and is kind. I like how she helps me with mindful breathing."*

**- Student**

*"My child had such a good connection with the BCHNP clinician and we loved working with her during this school year and hope to continue next school year! Thank you!"*

**- Parent**

*"BCHNP staff stays in contact, is open to any anecdotal information I can provide, and welcomes me as a valued perspective in strategizing for positive student outcomes."*

**- School Staff Member**

**Take  
Turns!**

**Be  
Polite!**

**Ne  
Qu**



# ACKNOWLEDGMENTS

BCHNP is grateful for our partnerships and collaborations in the community and at Boston Children's Hospital. We would like to thank the Boston Public Schools for their support and ongoing partnership. We extend our gratitude to the leaders, teachers, and staff in our partner schools. We wish to acknowledge and thank the following individuals for their contributions and support:

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We thank the BCHNP clinicians and staff who are dedicated to supporting students, staff, families, and school communities in the city of Boston and beyond. Through extraordinary circumstances, the BCHNP team continues to be inspiring in their commitment and thoughtfulness in their work with schools. We are grateful and extend appreciation to the BCHNP team.

This report was prepared by members of the BCHNP Research & Evaluation Team: Amy Kaye, PhD, Vanja Pejic, PhD, Kathryn Moffa, PhD, Samantha Corralejo Falker, PhD, Claudia Gonzalez Erigolla, PhD, Courtney Teasdale, BS, Vincent Donofrio, BS, Maureen Burns, BS, BA, Dayna Keane, MS, & Shella Dennerly, PhD, LICSW.

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