



# SBHC Coordinators Meeting

April 11, 2017



# Agenda

State Program Office

- ✓ Staffing/Budget/Legislative Update
- ✓ Mental Health Update
- ✓ Data Update
- ✓ Policy Update

Reproductive Health Assessment

YAC Presentation

Oregon Immunization Program

Oregon School-Based Health Alliance

*We recognize that you are making an impact on the  
lives of young people everyday.*

Thank you.

# OHA statement on access to health services

- The Oregon Health Authority's mission is to advance the health of all Oregonians, regardless of immigration or refugee status, national origin or religion. Health is the foundation for thriving people, families and communities. When people cannot obtain health care due to lack of coverage, lack of adequate services or fears about immigration enforcement, our communities face greater risk – risks that can come from exposure to untreated disease, the burdens of unaddressed illness or added costs of delayed care.*



# OHA statement on access to health services

- OHA is committed to ensuring that the health programs and services we administer, fund, license and regulate are welcoming and inclusive for all Oregon residents. In keeping with Governor Brown's executive order 17-04, OHA does not condition access to health services for anyone based on immigration status, or report information about immigration to the federal government, except as required by federal and state law.*

# OHA statement on access to health services

- OHA protects the privacy of health information and encourages all state residents, including immigrants and refugees, to seek needed health services. Recent federal actions have not required the state's health programs to report new or additional information about an individual's immigration or refugee status. If that changes, we will alert the community and our health system partners.*

# Areas of needed support

Utilization changes

Funding

Billing & reimbursement

Provider recruitment/retention

Clinical trainings



# Poll Question

Which of these areas do you need the most support for in the next 1-2 years?

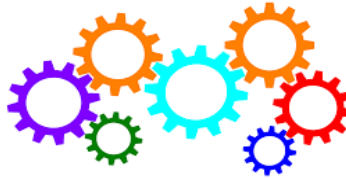
**What else???**

# SBHC Staffing and Budget Updates

# SBHC State Program Office Team



**Jessica**- Adolescent &  
School Health Manager



**Rosalyn** – Team Lead  
**Kate** – Systems Development Specialist  
**VACANT**- School MH Specialist



**Karen** – Public Health Nurse  
**VACANT**– Public Health Nurse



**Melanie** –  
Administrative Specialist

**Loretta** – Research Analyst  
**VACANT**– Research Analyst  
**Sarah** – Epidemiologist/ Health Economist

Oregon  
**SBHC**  
School-Based Health Centers

[sbhc.program@state.or.us](mailto:sbhc.program@state.or.us)

Oregon  
**Health**  
Authority

# SBHC Funding 17-19



- Our crystal ball is not clear.
- PHD Leadership has expressed hope that the SBHC budget will not be cut and we will be able to maintain current levels of support.
- Legislature will make ultimate budget decisions.

# Additional funding for FY17

- Awarded to all certified SBHCs evenly (77 SBHCs)
  - **Counties received a one-time award \$6,500 per certified SBHC.**
  - Part of February County Contract Amendment
- All funds must be spent by June 30, 2017
- No reporting requirements beyond existing County revenue and expenditure report.



# Suggested activities for funding

Funds are intended to support SBHC operations, technical assistance and professional development activities related to the program priorities of youth-friendly services and the State Health Improvement Plan.

Equipment	Marketing/outreach	Training and professional development
<ul style="list-style-type: none"><li>• iPads</li><li>• Technology/Apps</li><li>• Vaccine refrigerators</li><li>• Dental equipment</li></ul>	<ul style="list-style-type: none"><li>• Staff time (i.e. school tabling events, clinic coverage for staff to attend trainings)</li><li>• Website design/upgrades</li><li>• Signage</li><li>• Logo/branding</li><li>• Social media</li></ul>	<ul style="list-style-type: none"><li>• Motivational Interviewing</li><li>• Culturally Responsive Care</li><li>• Youth-friendly Services</li></ul>

# QUESTIONS???

# Mental Health Updates

# MH Expansion Grant, 2017-19

## Considerations...

- Current 2017-19 funding formula for the MH Grant assumes flat funding at the same level of 2015-17 biennium
- Final awards will be based on Legislatively Approved Budget.
- Pending approval from the Conference of Local Health Officials (CLHO) Healthy Structures and Executive Committees. Presenting in April for approval.

**Please be aware....there may be adjustments.**

# MH Expansion Grant 2017-19

## *Capacity Grants*

- Timeline:
  - Release application on April 21<sup>st</sup>
  - Application due June 1<sup>st</sup>
  - Release funds in summer 2017
- Two funding options:
  - Formula funds are available to 2015-17 MHEG grantee and planning grantees
  - Pooled funds are available to all certified SBHCs

# Formula funds: overview

- Each SBHC currently funded with a MH capacity grant and current planning sites are in the funding formula
  - Each SBHC will receive \$50,000 in mental health base funding for the 2017-19 biennium
  - Each SBHC is eligible for funds between \$10,000-\$90,000 based off of two variables: 1) previous year free and reduced lunch student population at the SBHC host school, 2) county mental health provider to population ratio. [Referred to as “points” funding]
  - SBHCs cannot receive a total award in 2017-19 that is more than 150% or less than 70% of their current award

# Pooled funds: overview

- Any remaining funds will be pooled and become available to sites via application.
- SBHCs that are not current grantees are not eligible for the base or points funding, but are eligible to apply for the pooled funding
- Funding is flexible and can be used anywhere within the SBHC system as long as it is supporting mental health capacity in SBHCs.
- We will fund based on justifications: Hardship (loss), expansion need, innovation.

# MH Expansion Grant 2017-19

## *YAC Grants*

- Timeline:
  - Release application on April 21<sup>st</sup>
  - Application due June 1<sup>st</sup>
  - Release funds in summer 2017
- Continuation Application for 2017-19 YAC Grant:
  - Open to current 2015-17 YAC grantees only
  - Only eligible for same funding amount as previous grant award.



# MH Expansion Grants

## *Potential Game Changers...*

- Total MH Grant budget is reduced
- Total MH Grant budget is increased
- CHLO does not approve the formula

# QUESTIONS???

# **MCHD SBHC Behavioral Health Pilot**

Kristin Case, FNP

April 11, 2017



# Unmet Need

50%

Patients seen in School-Based Health (SBH) who report *at least one mental health concern* (Parasuraman, 2014)

70%

Adolescent injury, morbidity and mortality due to *preventable behaviors* (e.g. poor dietary habits, physical inactivity, and drug and alcohol use)

(Brindis, Morreale, & English, 2003; Mulye, Park, Nelson, Adams, Irwin, Brindis, 2009)

<4.3%

Patients seen by *co-located mental health* therapist at pilot sites last year

# Mental Health vs Behavioral Health

Both are important!

Integrating behavioral health services while maintaining co-located mental health services

	Mental Health	Behavioral Health
<b>Treatment Type</b>	Individual, family, group mental health therapy Consultation, Crisis intervention	Brief, targeted, skills-based intervention Consultation, Crisis intervention
<b>Assessment</b>	Mental health assessment & diagnosis	Differential diagnosis/screening; Functional Analysis Initial assessment of mood/behavioral concerns
<b>Issues Addressed</b>	Multiple, moderate to severe, chronic, or complex concerns that may require frequent, long-term care Major Depression/Anxiety, current self-harm, active suicidal plan/intent, etc Trauma work	Focused on skills needed for single concern Mild to moderate mood concerns, academic stress, ADHD, health behaviors, etc If there is trauma history, it is not the focus of treatment (due to current readiness or needs)
<b>Insurance</b>	OHP or no insurance	No limitations
<b>Length of Treatment</b>	Issue(s) may require long- term (3 mos - 1 year or more) treatment	Issue can often be addressed in a few focused visits
<b>Session Length</b>	30-120 minutes(typically 60 minutes)	15-30mins
<b>Access</b>	Scheduled ahead	Same-day availability

# BH Integration into the SBHC Team

- SBIRT
- Reviewing positive health assessment items with a brief intervention at the same visit or future time
  - Depression
  - Anxiety
  - Behavior/parenting concerns
  - Stress
  - Obesity
- School coordination with academic concerns/ADHD follow up
- Brief intervention around multiple factors (stress, anxiety, relationship concerns)
- Suicide risk follow up

Same  
chart

Similar  
same day  
access

Similar goal of  
population  
health

Same  
metrics

Same  
team  
room

# Who do we refer to?

## Behavioral Health

- Brief assessment of behavioral health/psychosocial needs to inform treatment plan
- Determine need for and facilitate engagement in specialty services (including mental health)
- Patient would benefit from brief, focused skills-based intervention
- To assist patient in managing a chronic health condition.
- Client is not ready to engage in mental health therapy

## Mental health

- Patient would benefit from more **in-depth, long-term care** to address mental health concerns ie. trauma history
- Pt requests mental health therapy





**Mental Health**

## **Integrated Behavioral Health**





# QUESTIONS???

# Benton County SBHCs

Lori Diaz  
SBHC Site Coordinator  
Monroe SBHC  
610 Dragon Drive  
Monroe, OR 97456  
541-847-5143

[Lori.diaz@co.Benton.or.us](mailto:Lori.diaz@co.Benton.or.us)

Lynda Lovretta, LCSW  
Behaviorist  
Lincoln Health Center  
121 SE Viewmont Ave.  
Corvallis, OR 97333  
541-766-3546

[Lynda.lovretta@co.Benton.or.us](mailto:Lynda.lovretta@co.Benton.or.us)

# QUESTIONS???

# Certification Updates

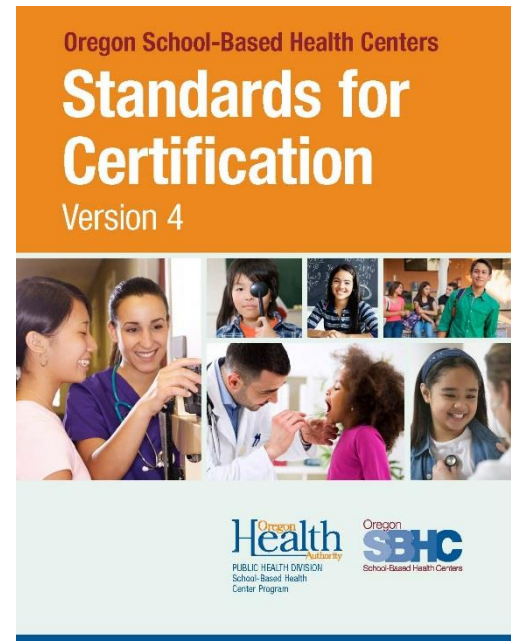
# Standards for Certification, Version 4

- **Sites are held to these new certification standards beginning July 1, 2017**
- Currently online on the Certification Standards page of our website ([www.healthoregon.org/sbhc](http://www.healthoregon.org/sbhc))
- Contact Karen if you have questions
  - [Karen.P.Vian@state.or.us](mailto:Karen.P.Vian@state.or.us)
  - 971-673-0247
- New Certification Review Tool coming soon!

# Coming to you soon!

## Standards for Certification, Version 4

- Standards should arrive by late April
- Distributed to addresses in Operational Profile
  - 10 to each SBHC
  - 1 to each SBHC Coordinator
  - 1 to each SBHC Administrator
  - 1 to each HD Primary SBHC Contact

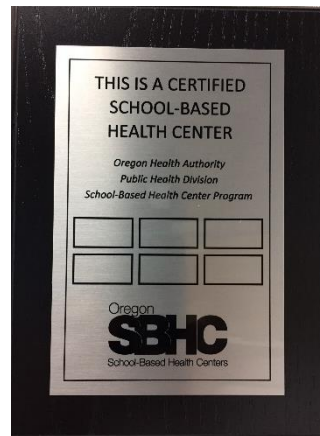


# Stickers, TOCs and tools oh my!

- One mailing to each SBHC include:
  - 17-19 Biennium plaque sticker
  - Updated certification binder TOC



New plaque →



← Old plaque



# QUESTIONS???



# Data Updates

# 2017 SBHA Census Coming Soon!

- National SBHA conducts a census of all SBHCs every 3 years
- 2016-17 Census rolling out early May
- Good News: MUCH shorter than prior years, esp for systems with multiple SBHCs
- Completing the Census is a requirement for SPO funding
- Look for an email from National

# Billing & Access to Care Memo

- Why? Questions/concerns about SPO expectations re: SBHC billing policies
- Affirms Certification Standards language
  - “Students shall not be denied access to services based on insurance status or ability to pay.”
  - Required Medicaid billing/maximize other billing
- Recognizes other billing requirements/standards
  - FQHC/RHC status
  - Specific contracts w/insurers

# SPO Expectations

- Understand referrals and warm hand-offs play an important role
- All services available to all clients regardless of:
  - Ability to pay
  - Insurance type/carrier
  - Assigned PCP
  - Need for confidential services
  - # of prior visits

# Availability of policies

- SPO encourages SBHCs to have clear, easily understood policies available to clients on:
  - Fee schedules/sliding scale
  - Process for requesting confidential services
  - How unpaid accounts are handled
  - Who to contact with questions
- Recognize juggling act & capacity issues
- Contact Sarah with questions!

# QUESTIONS???

# KPM Changes effective SY: 2017-18

- Updated CPT and ICD codes where appropriate
- Exclusion of clients:
  - Change in wording: SBHC clients “are excluded” as opposed to “may be excluded”. (See Guidance Documents)
  - Any age clients can refuse a screening.
  - Clients with two documented no-shows for a scheduled appointment where a KPM service was to be provided.
- SBHC must have a minimum of 20 eligible clients during the prior service year in order to keep their Optional KPM selection.

# KPM Changes for 2017-18 Service Year cont'd

- Benchmarks for all required and optional KPMs will be changed to 60%
- Updated Guidance documents are available on the SBHC website:

[Link to SBHC Data Requirements](#)



# Optional KPMs by Client age

		SBHC Clients 5-11 yrs old	SBHC Clients 12-21 yrs old
<u>Optional Measures</u>	Nutrition counseling	✓	✓
	Adolescent immunizations (13 year old clients only)		✓
	Chlamydia screening		✓
	Depression screening		✓
	Alcohol/substance abuse screening and brief intervention		✓

\*\*Contact Loretta Jenkins if you need help selecting an Optional Measure because you're concerned about whether or not you meet the requirement of having at least 20 clients in the eligible population.

# Optional KPM selection for 17-19 Biennium

All SBHCs must select an Optional KPM by 5/15/2017

- Go to KPM tab in the web-based Operational Profile

[Link to: Operational Profile](#)

Optional KPM - Biennial Selection

+ Optional KPM

	Date Created	Biennium	Optional KPM Measure
Select	1/7/2016	2015 - 2017	Adolescent Immunization

Press this button to create a new entry

# Encounter Data – new required variables

- All visits beginning July 1, 2017 (Mid-year encounter data report due on 1/15/18) must contain:
  - Patient Medicaid ID number (when appropriate)
  - CPT modifier code (when appropriate) must be in separate field from the CPT code (*Contact Loretta Jenkins with questions on format*)
  - Provider Name
  - National Provider Identifier Number
    - All health care providers who are HIPAA covered
    - Online application: <https://nppes.cms.hhs.gov/NPPES/Welcome.do>
- Changes will be made in the Epic/OCHIN automated encounter data extract

# Upcoming Data deadlines

- Optional KPM selection in Operational Profile
  - 5/15/2017
- Satisfaction surveys
  - 6/30/2017
- Year-end encounter data report
  - 7/15/2017
- KPM chart audit submission
  - 10/1/2017

# QUESTIONS???

# New Operational Profiles

- Operational Profile platform is being updated
  - It will function the same as our current system
- No Access July 10-14
- New link to access Operational Profiles starting July 17
  - Login information will stay the same
  - Keep an eye out for our emails this summer

# New Operational Profiles – SNEAK PEAK



HOME

SBHC Detail - Web



LIST

Oregon  
Health  
Authority

Oregon  
SBHC  
School-Based Health Centers

Fake SBHC

SBHC ID 9999

Details

Operations

Staff

Shift Hours

Services

Cert Waiver

KPM

Financial

SBHC Name Fake SBHC

Host School Name Yogurt High School

## SBHC Info

### SBHC Physical Address

Address Line 1 888 Fake Street SW

Address Line 2 Suite 244

Salem OR 972134

Phone 503-222-8887

Fax 503-222-8822

Mail Address Line 1 333 SW False AVenue

Mail Address Line 2 po box123

Salem OR 97214

InfoSystem Info

Primary Care EMR student health

Mental Health EMR nope

SBHC Mailing Address ☐ Same as Physical

Bill 3rd party ☒ Yes ☐ No

Electronic Claim ☒ Yes ☐ No

## County Info

Edit County Info

County Cascadiaq

Primary Contact Susan Jones

Phone 555-666-7777

Email ss@cascadiaq.co.gov

## System Info

Edit System Info

System zCascadia Fake

Primary Contact Josie Williamson

Phone 503-123-4567

Email jos@testsystem.net

## Medical Sponsor Info

Medical Sponsor zCascadia Fake

Primary Contact Josie Williamson

Phone 503-123-4567

Email jos@testsystem.net

## Accuracy Confirmation

This information is accurate ☒ 7/25/2016

Confirmed by Is

# New Tab - Services



HOME

SBHC Detail - Web



LIST

Oregon  
Health  
Authority

Oregon  
SBHC  
School-Based Health Centers

Fake SBHC

SBHC ID 9999

Details

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Staff

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Cert Waiver

KPM

Financial

## Comprehensive Pediatric Health Care Services

Most of the clinical services required by the *SBHC Standards for Certification, Version 4*, must be provided on-site. However, the following required services can be offered either on-site or by referral.

Please identify whether you are providing the following services **on-site** or **by referral**.

### Sensory Screening

Hearing

☐ On-site ☐ By referral

### Physical Health Services

Medical specialty services

☐ On-site ☐ By referral

### Developmental/Behavioral Services

Alcohol and other drug assessment

☐ On-site ☐ By referral

Prescriptions for mental health conditions

☐ On-site ☐ By referral

Individual, group, and family counseling and treatment

☐ On-site ☐ By referral

Social Services assessment and referral

☐ On-site ☐ By referral

### Oral Health Services

Comprehensive oral health evaluation and treatment

☐ On-site ☐ By referral

### Reproductive Health Services

Prescriptions for contraceptives

☐ On-site ☐ By referral

Condom availability

☐ On-site ☐ By referral

Prenatal care

☐ On-site ☐ By referral

HIV treatment

☐ On-site ☐ By referral



# QUESTIONS???

# Reproductive Health Assessment

- “Snapshot” of current RH services, successes, challenges in SBHC field
- Help SPO develop plan to support SBHCs to provide RH services in the future
- Please respond by:  
**May 12, 2017**



# QUESTIONS???

# Youth Advisory Council (YAC)

Tricia Schroffner  
4J School District  
Eugene, OR



# YAC Grant

- \$10,000 for one school year
  - \$5,000 between 2 High School Sites
- Tasked with 2 Roles:
  - Advisory
  - Advocacy





# YAC as SBHC Advisors



- We informally asked how our SBHC space could be more youth-friendly
- Changed seating at one site from an old weathered couch to individual chairs
- Added teen-friendly activities to the waiting room:
  - Adult coloring books with colored pencils/sharpener
  - Rubics cubes & other manipulatives

# YAC Advocacy

- School
  - Peer Education projects



- Community
  - State
  - County



# Two Sites / Two Approaches

North Eugene HS	Churchill HS
11 students (mostly So)	8 students (4 Sr/4 Jr)
Recruited through school staff recommendations; students completed application process	Recruited from Health Occupation Class
Incentivized as an extracurricular activity with opportunities for school volunteer hours	Incentivized with class credit
Majority are SBHC clients	Not active clients



# Two Sites / Two Approaches

North Eugene HS	Churchill HS
3 Involved Staff Members: School RN, Clinic HA, Grant-Funded Consultant	1 Primary Staff Member: School RN with ancillary support from Clinic HA
Meetings after school: 3 hr initial intensive mtg, then 1 ½ hr mtgs regularly	Meetings during school lunch break: 30 minutes
Bonding activities, deep discussions re: health care topics, advocacy training	Task-focused: Peer education on health topics
Work load done primarily during meetings	Work split up in pairs (1 Sr, 1 Jr), done outside of mtg time
Snacks provided	Lunch provided (pizza/salad)

# Two Sites / Two Approaches

North Eugene HS	Churchill HS
<b>1 Broad Health Topic:</b>	<b>4 Specific Health Topics:</b>
Healthy Relationships	Health Care Access (SBHC)
Interactive Instagram Initiative	Mental Health
	Pregnancy Prevention
	Sleep Hygiene

# North Eugene

- Instagram Initiative

- Benefits:

- Interactive with students
- Technology relevant

- Challenges:

- Permission slips for participants
- Staff adults not as technology savvy





# Churchill

- 4 Health Education Topics chosen based on student survey
- Benefits:
  - Conducive to the YAC members school program requirements:
    - Buy-in
    - Youth-driven
  - More topics to reach more students
- Challenges:
  - Less interactive with student population



# Community Advocacy: State

Oregon School-Based Health Alliance  
Awareness Day at the State Capitol 2/27/17





# Community Advocacy: County

- Lane County Public Health Advisory Committee monthly meetings
- SBHC Medical Sponsorship Communication



# Next Steps for YAC

- This Year:
  - Advisory: Mindfulness apps on SBHC iPad
- Next Year: (How to Sustain the Program)
  - Alternative funding source for staff, snacks and transportation
  - Recruiting vs. Sustaining current members





# Questions?

Feel free to contact me...

Tricia Schroffner FNP

[schroffner\\_t@4j.lane.edu](mailto:schroffner_t@4j.lane.edu)

541-790-4445

Thank you!





# QUESTIONS???

The logo features a stylized blue figure with a circular head containing a simple smiley face. The figure's body is a thick, curved line that arches over the word "oregon".

# oregon vaccines for children

## Quick Update

# 2017 Storage and Handling Reminders

## Update your temperature logs

Some of you may have already noticed that the Fahrenheit temperature range for refrigerated vaccines has been updated to 36 to 46 F. If you are using a temperature log with the old range, please update it as soon as possible.

## VFC Overview and Self-Assessment Online Training

This new CDC-mandated training provides a basic overview of the VFC program and your responsibilities as a participating clinic. Completion of this module is required by your primary and back-up VFC coordinator every year.

<https://public.health.oregon.gov/PreventionWellness/VaccinesImmunization/ImmunizationProviderResources/vfc/Pages/Required-VFC-Training.aspx>

ONLINE  
TRAINING



# 2018 Storage and Handling Changes

## **Beginning on Jan 1, 2018 all thermometers used by VFC providers must:**

- Be digital data loggers.
- Have an active temperature display visible from the outside of the unit without opening the door.
- Have a buffered temperature probe (glycol, glass beads, or similar).
- Be able to display a minimum and maximum temperature since the logger was last checked. Clinics will be required to document the minimum and maximum temperature once per day prior to administering vaccine for the day.

## **Strongly recommend features:**

- Include an alarm for out of range temperatures.
- Be accurate within +/- 0.5 C (1 F).
- Have a low battery indicator.
- Have a memory storage of at least 4,000 readings.
- Have a user programmable logging interval that can be set to at least once every five minutes.
- Please visit our updated 2017 thermometer guide for more information on VFC requirements and approved storage options:

<https://public.health.oregon.gov/PreventionWellness/VaccinesImmunization/ImmunizationProviderResources/vfc/Documents/VFCthermguide.pdf>

# HPV 2-dose Schedule

For persons initiating vaccination before their 15th birthday, the recommended immunization schedule is 2 doses of HPV vaccine. The second dose should be administered 6–12 months after the first dose (0, 6–12 month schedule).

For persons initiating vaccination on or after their 15th birthday, the recommended immunization schedule is 3 doses of HPV vaccine. The second dose should be administered 1–2 months after the first dose, and the third dose should be administered 6 months after the first dose (0, 1–2, 6 month schedule).

<https://www.cdc.gov/mmwr/volumes/65/wr/mm6549a5.htm>

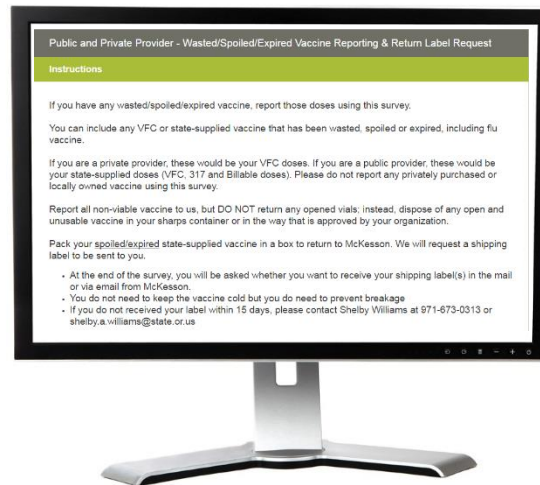


# Reporting Non-viable Vaccine

The process for reporting your wasted and expired VFC vaccine has changed. Moving forward, you will be asked to report via an online survey. Once complete, a return shipping label which will be sent your clinic via US mail. The survey can be found here:

[https://www.surveymonkey.com/r/WSE\\_dose\\_reporting](https://www.surveymonkey.com/r/WSE_dose_reporting)

Remember, If there is any question about the viability of your vaccine, stabilize the doses and then contact our program for assistance at **971-6734VFC**.



# Oregon VFC Helpline

The Oregon VFC program introduces a new way of getting help. We have created a helpline for all things VFC. Instead of waiting hours (or days) for a call back, contact our friendly helpline staff for a quick resolution.

Email: [VFC.help@state.or.us](mailto:VFC.help@state.or.us)

Phone: 971-673-4VFC

# QUESTIONS???





# OREGON SCHOOL-BASED HEALTH ALLIANCE

SBHC Coordinator's Meeting

April 11, 2017



## ABOUT OSBHA

**Oregon School-Based Health Alliance (OSBHA)** is a statewide 501(c)(3) **nonprofit** organization with the mission to strengthen school based health services and systems that promote the health and academic success of young people.

A large, light gray, stylized graphic of an apple is positioned on the right side of the slide. It has a simple, rounded shape with a small stem and leaf at the top, and several horizontal, wavy bands across its body, mimicking the design of the OSBHA logo.

## **Guiding Principles (criteria for our work):**

1. Sustaining, strengthening and expanding school based health centers
2. Promoting diversity and equity that engages community and youth voices
3. Advocating for and facilitating the integration of health, wellness and education

## STAFF

Laurie Huffman, Executive Director



Maureen Hinman, Policy Director



Megan Kovacs, Program Manager



Jessica Chambers, Administrative  
Coordinator





# Policy & Advocacy

## Our bill: HB 2408 Summary

### *3 components*

#### 1. School-Based Health Center Expansion

**PROBLEM**: There is interest in up to 25 more SBHCs but no operational funding is available from OHA.

**SOLUTION**: Funding for new planning grants and technical assistance at \$995,000 for the biennium.

#### 2. School-Based Mental Health Providers

**PROBLEM**: Access to mental health providers is limited statewide, and mental health issues are a huge cause of absenteeism and health problems.

**SOLUTION**: Increase the school-based mental health fund by \$3 million to put mental health providers in schools either directly or through SBHCs.

# HB 2408 Summary

## 3. Trauma Informed Schools Pilots

**PROBLEM**: Two schools received funding at the end of the biennium to pilot becoming trauma informed organizations. The pilot was intended to continue for two additional years to allow for comprehensive implementation and evaluation but new funding must be appropriated.

**SOLUTION**: Continue funding for trauma informed school pilots for the rest of the biennium.

## Policy & Advocacy

- Hearing for HB 2408 held on March 24
- OSBHA SBHC Legislative Awareness Day held on February 27
- Approximately 150 youth from 6 different counties met with 30 representatives
- Rep. Rob Nosse spoke on the house floor (while wearing a cape, like the superhero of health he is!) acknowledging February as Oregon School-Based Health Care Awareness Month







FORMED AND IS MAINTAINED  
BY THE VOLUNTARY UNION  
OF THE WHOLE PEOPLE  
JOINED TOGETHER  
UNDER THE SAME BODY OF LAWS  
FOR THE COMMON WELFARE  
AND THE SHARING OF BENEFITS  
JUSTLY



# You Can Help Advocate!

Send us your stories ([maureen@osbha.org](mailto:maureen@osbha.org))

Why Advocate?

"Unless someone like you cares  
a whole awful lot, Nothing is  
going to get better. It's not."  
- Dr. Seuss, The Lorax



- Working with undocumented students
- Stories about great partnerships with CCOs or other regional/community partnerships
- A story about how the SBHC helped a student be able to graduate or be more successful in school
- Helping a student significantly improve their health or behaviors
- Any other really inspiring story you would like to share

Watch for Action Alerts and be ready to respond!

Help connect us to parents who are SBHC champions willing to write letters or share their stories.

## Improving Medical Care for Transgender Patients

OSBHA is pleased to announce our partnership with the Attorney General's Sexual Assault Task to host this critical training for SBHC staff.

*Goal of training: support healthcare professionals in Oregon in caring for transgender-identified patients*

**Date:** Friday, May 5, 2017

**Time:** 08:30 AM - 04:30 AM

**Location:** Samaritan Albany General Hospital (Reimer Conference Room), Albany, OR

**Cost:** Free

**CEU:** 7

*Supported by funding from the Pride Foundation, the EC Brown Foundation*

Registration is now open, here: <http://oregonsatf.org/training/improving-medical-care-for-transgender-identified-patients/>.

## SBHC Advisory Committee

- Committed to building partnerships to best represent your interests
- Representation from across Oregon
- Update





# CONTACT US:

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# QUESTIONS???

# Contact Us

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