



#### Objectives for today

- Describe the SBHC model.
- Describe services offered in SBHCs.
- Describe some of the prevention and early intervention work of SBHCs.

#### Do you know...?

- What is the age someone can self-consent for nonemergency medical care in Washington?
- What is the age someone can self-consent for nonemergency medical care in Oregon?

## What is a school-based health center (SBHC)?

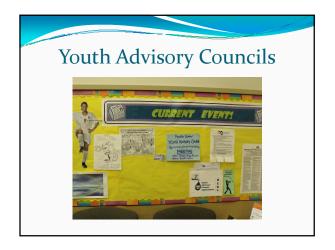
 Partnership created by schools and community health organizations to provide on-site medical, mental and preventive health services that promote the health and educational success of school-aged children and adolescents.





#### Partnership model

- SBHCs in Oregon and Washington must have a medical organization that acts as a "medical sponsor."
- Some SBHCs have advisory councils/steering committees that help set policies and decide on the level of services (can include, families, students, communities, schools, health providers).



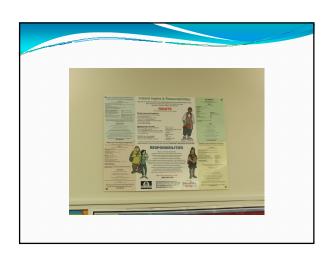
#### What is an SBHC? cont.

- SBHCs see kids regardless of their ability to pay or insurance status.
- Staffing with health care professionals (ex. NP, PA, RNs, QMHP)
- Provide core set of primary health care services (physical, mental, preventive).

# What is an SBHC? cont. National model designed to ease access to health care by reducing barriers that have historically prevented adolescents from seeking health care services that need. SBHCs are designed to be youth friendly.







#### In their words...

- "I really like that this school has a health clinic because its really easy and fast to get help when ever we need it and people/staff at the clinic are really friendly and I feel really comfortable to talk with them."
- "The staff do their best to make students comfortable in an environment that usually makes people nervous.'
- "At first it was very awkward but when I got comfortable with the staff and it become more easier to spill everything.'

#### SBHC Services

- Performing routine physical exams, including sports physicals;
- Diagnosing and treating acute and chronic illnesses;
   Prescribing medications;
- Treating minor injuries;
- Providing vision, dental and blood pressure screening;
- Administering immunizations;
- Providing well child exams and risk assessment screenings;
- Health education, counseling and wellness promotion;
- Providing and/or connecting students with mental health services;
- Giving classroom presentations of health and wellness

## **Health Promotion**



#### More health promotion



#### School Nurse Vs. SBHCs

- - Employed by school/school district/ESD
  - Manages student immunizations programs
  - Coordinates screenings
  - Chronic school health case
  - management Manage chronic medication
  - delivery during school Oversees school health
  - programs
  - FERPA regulated

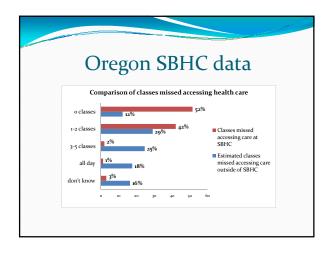
- - Employed by medical sponsor
  - Administers immunizations
  - Administers immunizations
     Conducts screening, physical exams
     Care of both acute and chronic needs
     Administers and prescribes medications
- Counseling, prevention and wellness promotion
   HIPAA regulated

#### Why SBHCs work?

- Improve access to health care services for children and adolescents.
- See children and adolescents who might otherwise not
- Able to reach students to emphasize prevention and early intervention.
- Ensure services are developmentally appropriate.

#### Why SBHCs work? cont.

- Save parents/family time by reducing missed work hours.
- Succeed through private-public partnerships (schools, health departments, community providers, hospitals).
- Promotes kids health so they are able to learn.
- Gets students back to the classroom faster.



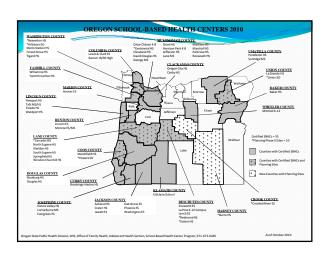
# Oregon SBHC data Students report likelihood of receiving care if their school did not have an SBHC BLikely to receive care (have access and will go) Unlikely to receive care (won't go, no access or don't know if they have access)

## In their words... • "It's been a really good thing to have a health center so close. Otherwise I would have to drive across town to be seen." • "You have made it possible for me to get the medical attention I needed these past couple of years even though my parent's financial situation didn't allow it. Thanks for everything!"

#### Do you know...?

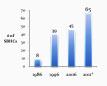
Based on the 2007-08 National Assembly on Schoolbased Health Care Census, how many SBHCs are there in the entire county?

- A. About 100
- B. Roughly 750
- C. Around 1900
- D. Over 2500



#### Oregon SBHCs

- Currently 55 certified SBHCs in 22 counties in Oregon
  - 32 in high schools
  - 4 in middle schools
  - 11 in elementary schools
  - 8 in combined grade schools
  - (10 planning communities)
- 2009-10 Oregon SBHCs served
  - 23,881 total clients
  - 69,468 total visits



#### Oregon SBHCs

- Certification is a voluntary process in Oregon
  - Center must be certified to receive state funding.
  - Oregon Standards for Certification state the minimum staffing and service requirements and required policy and procedures.
  - Site Visit
  - Review of required data elements
  - Certification must occur once a biennium

#### **Oregon SBHC Operations**

- Minimum of 20 hr/wk clinical service
- Open 20-40 hrs/wk during school year
- Staffing:
  - Primary Care provider (NP/PA/MD/DO)

  - · Qualified Mental Health Professional
  - · Office/Medical Assistant

#### Funding in Oregon SBHCs

- Cost of operating an SBHC is can range from our \$100K to \$400K (depending on model).
- Each county with state-certified SBHC is eligible for state dollars through their local public health authority (LPHA).
- Each state dollar is used to leverage about \$3-4 local
- State funding formula:
  - Only 1 certified SBHC →LPHA receives \$60,000 per year
  - >1 certified SBHC → LPHA receives \$41,000 per year for each center

#### **Additional Funding Sources**

- · County funds
- School districts
- Hospitals
- Community health providers
- Grants
- Local fundraising
- Third-party reimbursement (Medicaid, private insurance etc.)

#### Washington SBHCs **King County**

#### SBHCs in High Schools

- Ballard HS
- · Cleveland HS • Franklin HS
- · Garfield HS
- Ingraham HS
- · Kent Pheonix Academy
- Nathan Hale HS
- Rainier Beach HS
- Roosevelt HS
- Sealth HS • Tyee HS
- West Seattle HS

- SBHCs in Middle Schools
  - Aki Kurose MS

  - Denny MS · Madison MS

  - Washington MS

#### Washington SBHCs

- Kitsap County
  - Spectrum Community School
- Jefferson County
  - Chimacum HS
  - Port Townsend HS
- Walla Walla County
  - Jefferson HS

#### Washington SBHCs

- 20 SBHCs in 4 counties
  - 16 in high schools
  - 4 in middle schools
  - No elementary schools ...yet
- During 2009-10, Seattle's 14 SBHCs served
  - 5,590 total clients
  - 30,893 total visits (57% medical, 43% mental health)

#### Washington SBHC Operations

- Staffing: 1.0 FTE Primary Care Provider (NP/PA), 1.0 FTE Mental Health Provider, 1.0 FTE Administrative Support
- Middle Schools have 0.5 FTE medical provider
- Some sites offer "enhanced" services (health education, nutrition, naturopathic medicine)

#### SBHC Funding in Washington

- Operating costs of Seattle SBHCs is about \$300-350K
- Pays for provider/program staff, medical equipment/supplies, other operating expenses and indirect costs.
- Cost of clinics in Seattle come from
  - City levy
  - Third party reimbursement (Medicaid, private insurance etc)
  - Contributions from SBHC sponsoring organizations
  - Other miscellaneous revenue.

#### What do SBHCs look like?









#### Do you know...?

How many 11<sup>th</sup> graders in Oregon reported not eating breakfast during the past week.

- A. 2%
- B. 9%
- C. 18%
- D. 25%

#### Do you know...?

How many 8<sup>th</sup> graders in Oregon reported feeling harassed at school in the past 30 days?

- A. 7%
- B. 15%
- C. 29%
- D. 41%

#### Prevention and Early Intervention







 Because of their unique vantage point and access to students, SBHCs are able to reach out to students to emphasize prevention and early intervention and work with kids around risky behaviors.

#### Prevention and Early Intervention

- SBHCs are a public health (read prevention) model
- Incorporate prevention and risk assessment into everyday practice
- Implement policies to support sustaining prevention services
- Recognize achievement

### Metrics of prevention & early intervention

- Key Performance Measures (KPMs)
  - Foster positive change in school-based health care practice
  - Demonstrate school-based health centers' commitment to meeting— in fact, surpassing— key child health quality standards
  - Assess the challenges of adapting quality improvement models for school health centers
- Annual patient satisfaction survey
  - · Assess satisfaction of students using SBHCs

#### **Key Performance Measures**

- Performance evaluation framework
- Collects data via chart review on 3 core activities
  - · Comprehensive physical exams
  - · Risk assessments
  - · Assessment of body mass index (BMI)

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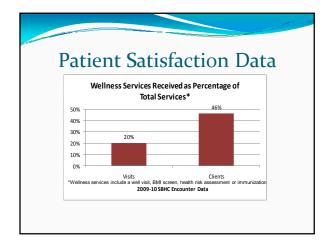
#### Patient Satisfaction Survey

 Data from the 2010 Patient Satisfaction Survey were collected from a random sample of 900 students grades six through twelve. Each of the 55 SBHCs are represented. The annual survey is a chance for students to voice their opinions on the health care they receive at their SBHC.

#### Patient Satisfaction Data

- The results from the survey demonstrate how much value SBHCs have for students:
  - Ninety-seven percent are comfortable receiving health care at the SBHC.
  - Ninety-five percent find it easy to talk to SBHC staff.
  - Eighty-nine percent say they are likely to follow the advice given to them at the SBHC.
  - Sixty-one percent say their health has improved because of the SBHC.

# Prevention messages reported Eating with family Brushingyour teeth every day Fruits and vegetables Dangers of tobacco Feeling sad or angry Dangers of drugs and alcohol Eating breakfast Physical activity Safe sex choices 0 10 20 30 40 50 60



#### Challenges

- Reimbursement issues
  - No reimbursement for prevention activities
  - · Not all health plans reimburse SBHCs
  - Confidential services (EOBs)
- Funding
  - · No perfect funding strategy
  - Grant/funding issues due to location
  - · Medical clinic in an educational setting

#### **Additional Challenges**

- Community perceptions
- Partnerships
  - Different organizations with different approaches
- Work force issues
  - Difficulty recruiting and retaining staff in rural areas
  - Fewer primary care providers available
- Information sharing
  - HIPAA vs. FERPA

#### **Strategies for Success**

- Broad partnerships
- Demonstrate results and evidence (i.e., tell your story)
- · Connect with national and state SBHC agendas
- Recognize SBHCs as important part of health care and education reform

#### In their words...

- "You have made it possible for me to get the medical attention I needed these past couple of years even though my parent's financial situation didn't allow it.
- "This is probably the best thing this school has. I don't know what I would do without the health center."

#### For more information...

- Oregon SBHC State Program Office http://www.oregon.gov/DHS/ph/ah/sbhc/sbhc.program@state.or.us
   971-673-0249
- King County Dept of Health http://www.kingcounty.gov/healthservices/health/child/yhs.aspx