



# SBHC Coordinators Meeting

May 12, 2020





# Welcome to new School Mental Health Specialist!

**Mikah Rotman, MSW**

(they / them or he / him pronouns)

Originally from the mountains of Northern New Mexico but have been living in Portland since 2007.

Educational and professional background centered on working with youth in a variety of settings including programs for unhoused youth, community mental health services, and education.



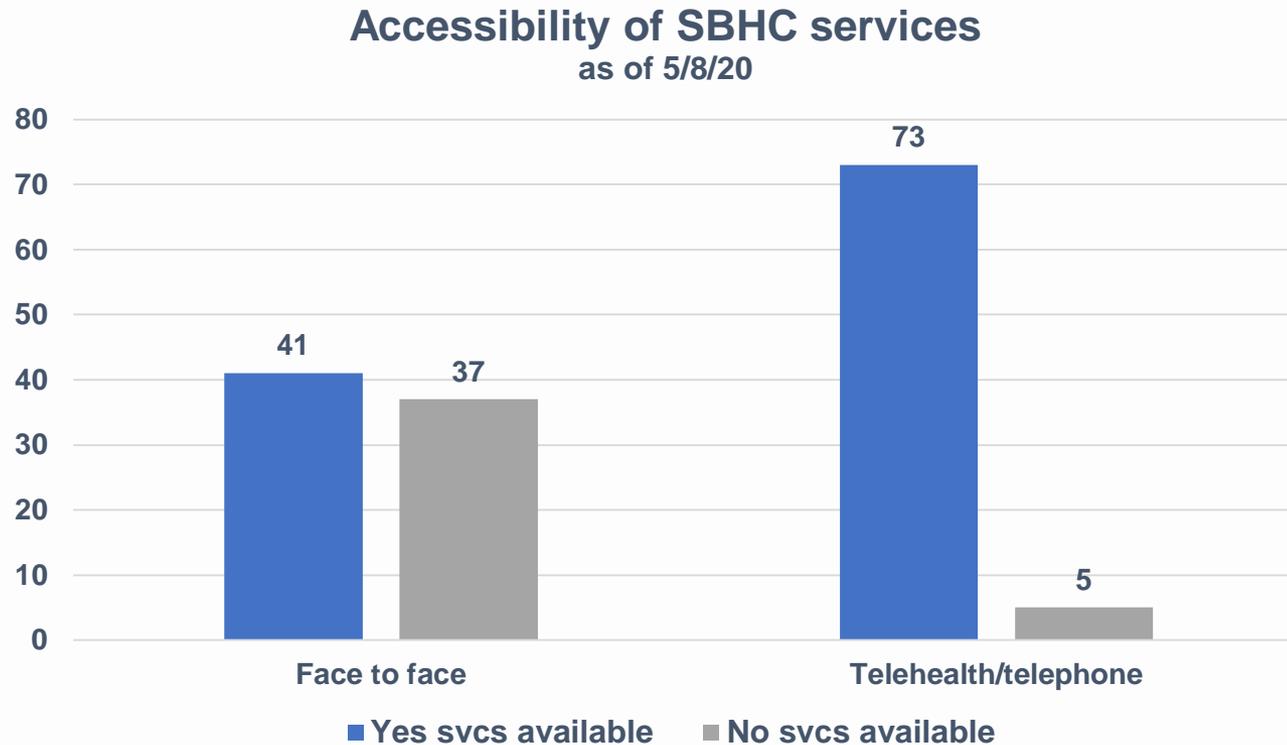
# Funding Updates

- **SBHC Budget:**
  - Agencies were asked to submit reduction scenarios
  - Reduction submitted for SBHC Program can be absorbed by program savings and has no impact to SBHC system.
  - MHEG funds are part of Health System Division budget. Separate from PHD reductions.
- **Use of current SBHC fund:**
  - Agencies under program elements or grant agreements can use SBHC funding for COVID-19 response if they are closed.
  - Unspent funds from FY20 **should be able** to be carried over and used in FY21.

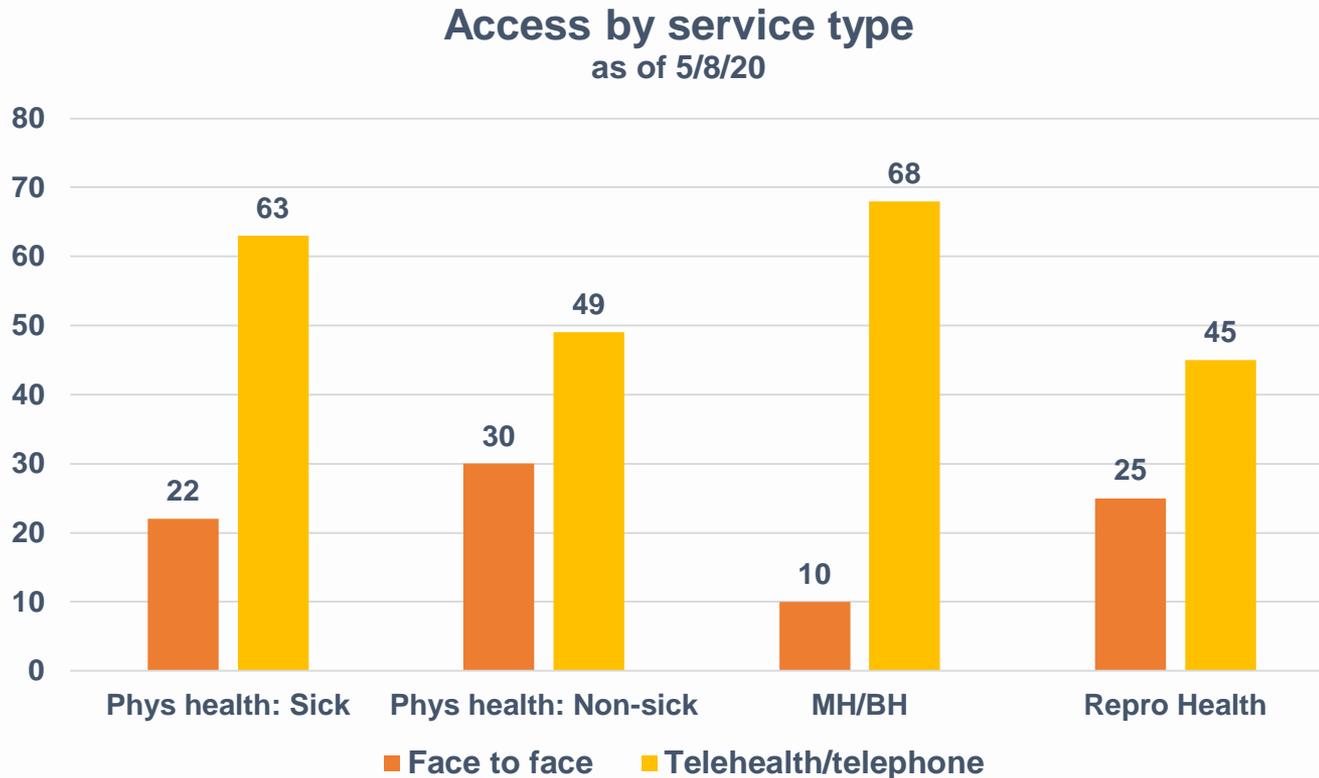
# SBHC Access to Services

- Thank you all for your time!
- Interview data collected from 78 SBHCs

# SBHC Access to Services

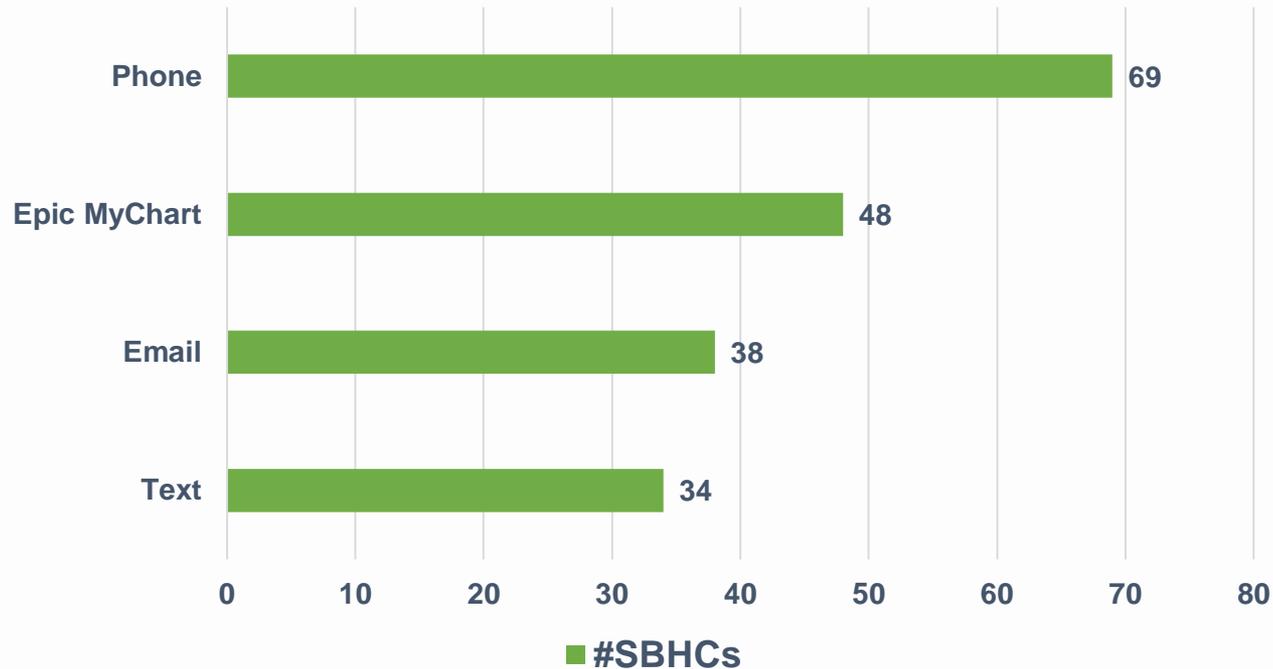


# SBHC Access to Services



# SBHC Access to Services

Method of communicating with SBHC clients  
as of 5/8/20





# SBHC Office Hours

- SPO held open “office hours” in March.
- Discussion topics included:
  - Some SBHCs are open and busy because they are triaging non-sick visits to SBHCs
  - Service provision at SBHCs
    - AAP recommendations
  - Use of MyChart in EPIC
  - Use of SBHC funding.
  - Collection of SBHC telehealth data



**Julie Scholz, Executive Director**  
**julie.scholz@oraap.org**

To access behavioral health webinars: [www.oraap.org/education](http://www.oraap.org/education)

**For More Information on ACEs/SDoH and BH Projects:**  
**Amber Ziring, Project Manager**  
**amber.ziring@oraap.org**

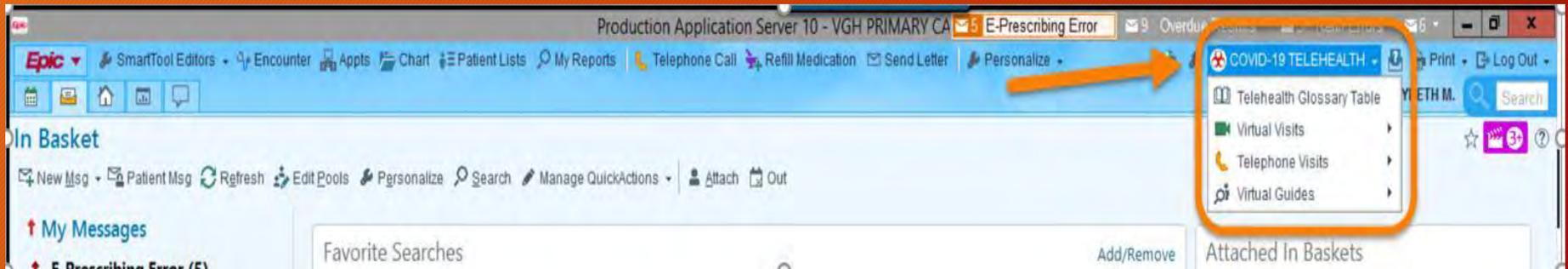


# MyChart Tips

Dr. Tera Roberts, DNP, FNP-C

# EPIC TELEHEALTH AIDS COVID-19

There is also a link to OCHIN resources in Epic PRD itself:



# HIPPA Concerns

The patient's identity was verified at the start of the encounter. The patient and/or their guardian have given their verbal consent to this telemedicine visit. Patient and/or their guardian are aware they may incur fees and/or data charges for use of their telephone and/or internet by their service provider.

This visit took place via Telemedicine. The patient's location is the home.  
Persons present or tele-presenters on the call: {PERSONS; ADULT RELATIVES:18481}  
Interpreter used/present: {Yes Comment/No Default:21071::"No":0}

# My Chart Workflows

## Virtual Care

- **Reducing Barriers to Access:** I'd like to remind you that OCHIN has streamlined the eCheck-in process to make MyChart Virtual Visits easier for patients. The simplified process is reflected in OCHIN's [workflows](#) and patient-facing instructions—within MyChart and available by video on YouTube (Spanish: <https://youtu.be/rgRQ41F708I> / English: <https://youtu.be/J4DXt4Z44Dg>). Links to Zoom video visits can also be texted directly to a patient or their parent or guardian for easier access. For patients with limited English proficiency, you can call out from a Zoom meeting or Virtual Visit to bring in a third-party participant (e.g., interpreter service) by phone. Virtual care and telehealth documentation for providers, dentists, and patients is available [here on Ella](#).

[Group Virtual Visits](#) are also available for organizations who are interested. Please contact your OCHIN Account Manager or submit a JIRA to get started.



# Certification

- Site Visits
  - Remaining visits cancelled for this service year.
  - No visits will be scheduled in early fall to allow sites plenty of time to be open and operational.
  - For larger systems, the representative sample of sites needing a visit might be a smaller number.
- Upcoming SY20-21 visits:
  - **Karen:** Benson, Clatskanie, Estacada, Oregon City, Rex Putnam, La Pine, Lynch, Madras, Sisters, Redmond, Baker, Grant Union, Hood River, Ione, La Grande, Mitchell, Reynolds.
  - **Rebecca:** Bethel, Butte Falls, Table Rock, White Mountain, Central, Crater, Hanby, Jewett, Phoenix, Merlo Station, North Eugene, Roseburg, Springfield, Newport, Waldport

# Waivers

- Current waivers
  - SPO will change due dates to the Fall
- New waivers will NOT be required
  - Staffing
  - Hours of Operation
  - Incomplete sample for 19-20 Satisfaction survey
- Action items
  - All deadlines are being changed to 10/15/20



# Data Requirements & Reporting

- Encounter Data
- Satisfaction Survey
- Mental Health Grant Report
- Operational Profile
- Key Performance Measures

# Data Requirements & Reporting

Encounter data report due **7/15/20**

- Feel free to send data report early if SBHC has already closed 😊
- Request secure email from Loretta before submitting
- As in the past, data reports only include visits where the client was in the SBHC (or in the host school for some mental health providers)
- We will likely be requesting additional voluntary data from sites that are able to provide it, to help us better understand current SBHC services

# Data Requirements & Reporting

- Satisfaction Surveys due **7/1/20**
  - Sync iPad or mail paper surveys if possible (not required)
  - **No waiver needed** for incomplete sample
- Mental Health Grant report due **7/15/20**
  - Format and content is being finalized

# Data Requirements & Reporting cont'd

Operational Profile entries and updates due **10/1/20**

Standard OP updates:

- Staffing shifts/contact info
- Operations
- Services
- Financial entries/revenue
  - Primary care/dental health
  - Mental Health

# Data Requirements & Reporting cont'd

## Key Performance Measure (KPM) Audits due 10/1/20

- Audit all types of visits for school age clients:  
Primary care, mental/behavioral health and dental
- ONLY audit visits that occurred between 7/1/19 and 3/16/20 regardless of whether your SBHC closed.
- Do NOT review visits after 3/16/20 to determine if a chart is in compliance.
- **No waiver needed** for not meeting benchmark
- Feel free to submit results sooner 😊
- **Loretta will send an email with FAQs on the KPMs along with helpful hints/reminders in the next 2 weeks!**

# Data Requirements & Reporting cont'd

## KPM Audits cont'd

- KPM Audit Process and Audit Tracking documents must be approved by Loretta before entering results in the Operational Profile
- Recommend sending the audit process document BEFORE doing chart audit
- Audit tracking spreadsheet must include why a chart was excluded:
  - Refusal (client or parent/guardian)
  - No-show for 2 scheduled appointments
  - Not in target population for Optional KPM – examples might include  
Client's age, existing diagnosis of mood disorder, gender, sexually active
  - Unable to obtain records from outside provider for well visit or chlamydia screening
  - Confidential visit prohibits records request from outside provider for well visit or chlamydia screening



# Immunizations during COVID-19



# Clinic Modifications in Response to COVID-19



# Oregon Clinic Survey: Overview

- Survey purpose: To inform the VFC Program about changes that clinics were making as a response to COVID-19 that were impacting immunization services
- Open from April 14-30<sup>th</sup>
- 281 respondents
  - 240 primary care clinics that serve children (either pediatric or both adult and child)

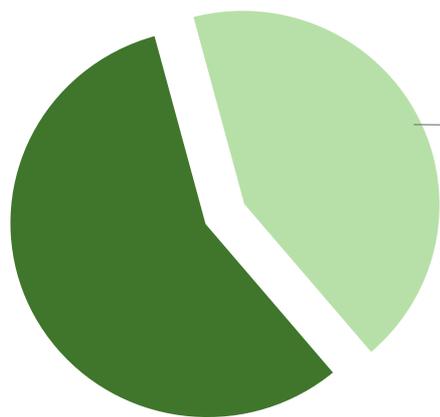


# Oregon Clinic Survey: Results

- Almost all respondents said that they had modified clinic operations to adapt to coronavirus (95%)
  - Limited well-care visits (65%)
  - Prioritizing newborn / infant immunizations (61%)
  - Separating sick and well patients (69%)
  - Increasing telemedicine (84%)
  - Rescheduling teen and older child immunizations (50%)



# Oregon Clinic Survey: Results



43% changed their immunization workflow due to COVID-19

# Oregon Clinic Survey: Results



## Changes that Limit

- Rescheduling immunizations for later date
  - Many clinics prioritizing immunizations for <1 or <2 year olds, some for <5 yo
- Immunization visits now scheduled (no more walk-in)
- Rescheduling well-visits for patients who don't need immunizations
- Limiting well-visits that need immunizations to the morning appointments and sick visits in the afternoon
- Not doing immunizations—referring patients to their nearest FQHC\*\*

\*\* Need to ensure that patients can get immunizations at nearest FQHC; many require that patients are established for care

# Oregon Clinic Survey: Results



## Changes that are Neutral

- “Clean” room and “Sick” rooms for visits
- Opened an immunization-specific schedule on certain days
- Giving vaccines in the parking lot at the vehicle. Patients are not coming into the clinic unless necessary.
- Limiting wait room occupancy by rooming immediately
- Screening questions done via phone and reviewed with nurse when they come for a vaccine
- Split clinics within a system so some clinics are “sick clinics” and other clinics are “clean clinics”. SBHCs are “clean clinics” and are immunizing.

# Oregon Clinic Survey: Results

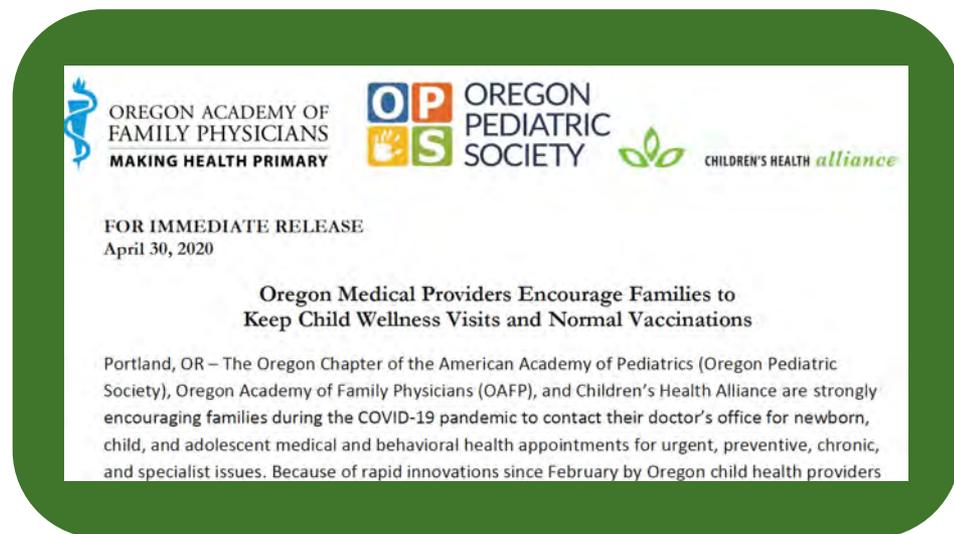


## Changes that Enhance

- Pulling alerts (for immunizations) at every visit, not just well-visits
- Holding walk-up vaccine clinics and prioritizing well-visits for those <2
- Hosting drive-thru or outdoor vaccine clinic
- Outreach to bring well-visit appts into well “sites” for vaccines and keeping well-visits on schedule as much as possible
- Offering more nursing visits for immunization only; or in-home vaccine visits
- Keeping a recall list to get patients who need immunizations in ASAP
- Sent letters notifying patients that they’re due for immunizations and that clinic is still open for well-visits

# Moving Forward: Things to Consider

- We know that vaccines are important to protect children from preventable childhood illness
- Patients and parents may be reluctant to access care for the foreseeable future
- Your services may be even more critical as we open back up



Screengrab from a press release put out by key family medicine organizations encouraging parents to keep well-visits and normal vaccinations.

# Working with Schools



# Timing Matters

1. Schools collect immunization records from new students.
2. They manually enter the immunization and exemption information into their student information system.
3. They run reports to see who is missing shots.
4. Notify families of students who are missing shots.
5. In January, they report to the local health department who is missing shots and records. Exclusion letters are sent to families in early February.



[This Photo](#) by Unknown Author is licensed under [CC BY-ND](#)

# Know the timing and plan together

- When does your school plan to do their data entry? Some start at kindergarten roundup and others in December.
- How do they notify parents? Some send notices with student specific information. Others send general, “all 7<sup>th</sup> graders are required to have a Tdap vaccine” notices.
- When do they notify parents? Shot clinics must be aligned with parent notifications.



# Tools to Use

- Schools can run reports to determine who needs shots and what shots they need. This can be very helpful for planning vaccine supply needs.
- Note: Schools generally only track school required vaccines. We encourage clinics to forecast and offer all ACIP recommended vaccines.



# What do you need?

- Let schools know what you need to help get kids vaccinated.
- Do you need permission from parents?
- Do you need billing information?
- Help schools have the conversations with parents.



# Thank you!

VFC Program contact: Stefanie Murray, [stefanie.l.murray@state.or.us](mailto:stefanie.l.murray@state.or.us)

School Law contact: Mallory Metzger, [Mallory.s.Metzger@state.or.us](mailto:Mallory.s.Metzger@state.or.us)





# School Health Services Planning Grant

- SHSPG funds 11 grantees for 2 years to conduct a needs assessment and implementation activities for either a School Nursing Model or SBHC
- Timeline and deliverables adjusted in response to COVID-19 limitations
  - One deliverable: SHSPG Needs Assessment Progress Report due June 15
- All grantees can opt to move to Year 2
  - Year 2 timeline and Letter of Support required by June 15
  - Needs Assessment Activities can continue in Year 2 as needed
- Goal of being fully prepared for SBHC or School Nursing Model implementation by the end of Year 2 (June 2021)





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HEALTH ALLIANCE

# OREGON SCHOOL-BASED HEALTH ALLIANCE

SBHC Coordinator's Meeting  
May 12, 2020





# The OSBHA Team



Laurie Huffman  
Executive Director



Antonia Rangel-Caril  
Youth Programs  
Coordinator



Maureen Hinman  
Director of Policy and  
Strategic Initiatives



Jessica Chambers  
Administrative Coordinator



Ashley McAllister  
Youth-Adult  
Partnerships  
Manager

Our mission is to strengthen school-based health services and systems that promote the health and academic success of young people.



# Upcoming Changes

Following a long period of planning, Laurie Huffman is moving on from her role as Executive Director as of June 12.

We're all happy that our Director of Policy and Strategic Initiatives, Maureen Hinman, will be moving into an Interim Executive Director role.

OSBHA is stronger than ever

- Innovative programming that elevates the youth voice
- Strong advocacy & policy work
- Expanding partnerships in health & education sectors



## OSBHA Current Advocacy

OSBHA is working diligently to advocate for school health providers by doing the following:

- Working with the national School-Based Health Alliance and affiliates in other states to develop a funding proposal for school-based health centers. We are collectively advocating for \$100 million to be included in the next CARES Act.
- Encouraging District leaders and the Oregon Department of Education to include school health providers in decision-making and planning processes.
- Reaching out to our school health partners in Oregon as well as California and Washington to identify school health needs and align advocacy efforts as our three states align reopening plans.
- Working with other human service oriented organizations to advocate for supports for children and families with the Oregon legislature.



## How You Can Help

- Share your stories, concerns, and insights with our team by joining our SBHC Advisory Group.

*Chat Box*

- 
- A white speech bubble with a black outline and a drop shadow, containing a checklist of four items.
- ✓ Name
  - ✓ SBHC/System
  - ✓ Email
  - ✓ Phone



# Closing

- Fall Coordinators Meeting – More information to come

# Contact Us

School-Based Health Center Program

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[www.healthoregon.org/sbhc](http://www.healthoregon.org/sbhc)



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