Transforming School-Based Health Centers into Adolescent-Centered Medical Homes

Adolescent Health Initiative
University of Michigan Health System

November 30, 2016
Our Presenters

Monique Selimos, MSW
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Vani Patterson, MPH
Transforming School-Based Health Centers into Adolescent-Centered Medical Homes

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Objectives

Participants will...

1. Describe components of an adolescent-centered medical home
2. Identify opportunities to improve delivery of adolescent-centered care in their own practice
3. Obtain resources to enhance adolescent-centered practices
Why is adolescent-centered care important?
Missed opportunities for providing patient-centered care and impacting adolescent patient outcomes.
Adolescent Health Initiative

Vision

*To transform the healthcare landscape to optimize adolescent and young adult health and well-being.*

Mission

*To advance innovative adolescent-centered healthcare through practice improvement, education, research, and youth and community engagement.*
Drawing a Picture: Adolescent-Centered Medical Homes
https://youtu.be/vAu5ad827I8
Chat

What can the consequences be when teens don’t feel comfortable with their healthcare experience?
Adolescent Champion Model
Development of the Champion Model

Developed by Multidisciplinary Team:
• Adolescent Collaborators
• Family Medicine
• Pediatrics
• Adolescent Medicine
• Obstetrics & Gynecology
• Psychiatry
• Public Health
• Social Work

Informed by:
• United States Preventive Services Task Force (USPSTF)
• Centers for Disease Control and Prevention (CDC)
• American Academy of Pediatrics (AAP)
• American Academy of Family Physicians (AAFP)
• Society for Adolescent Health and Medicine (SAHM)
Adolescent Champion Model

Baseline ACE Assessment
Implementation Plan
Quality Improvement Process
Training Opportunities for Providers and Staff
Year-End ACE Assessment

*ACE = Adolescent-Centered Environment
Adolescent-Centered Environment (ACE) Assessment

1. Access to Care
2. Adolescent-Centered Environment
3. Confidentiality
4. Best Practices & Standards of Care
5. Reproductive & Sexual Health
6. Mental Health
7. Nutritional Health
8. Cultural Responsiveness
9. Staff Attitude & Respectful Treatment
10. Adolescent Engagement & Empowerment
11. Parent Engagement
12. Outreach & Marketing
Poll: Which of the following ACE components is most challenging for your SBHC?

- Adolescent-Centered Environment
- Confidentiality
- Adolescent Engagement & Empowerment
- Parent Engagement
- Outreach & Marketing
Outcome Highlight

At baseline, participating SBHCs had implemented **55%** of adolescent-centered indicators on the ACE assessment.

Implementation rates increased to **73%** at year-end.
Outcome Highlight

SBHC Areas of Greatest Improvement

<table>
<thead>
<tr>
<th>ACE Section</th>
<th>Baseline %</th>
<th>Year-End %</th>
</tr>
</thead>
<tbody>
<tr>
<td>Adolescent Appropriate Environment</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cultural Responsiveness</td>
<td></td>
<td></td>
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<td>Parent Engagement</td>
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What can you do to make your health center an adolescent-centered medical home?
# Adolescent-Centered Environment Self-Assessment – Sample Questions

<table>
<thead>
<tr>
<th>Health Center</th>
<th>H – HEDIS Measure</th>
<th>P – PCMH Alignment</th>
<th>* – Focus area for new clinics</th>
</tr>
</thead>
<tbody>
<tr>
<td>Special Considerations</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Priority Level</td>
<td>High Priority</td>
<td>Medium Priority</td>
<td>Lower Priority</td>
</tr>
</tbody>
</table>

**Special Considerations**

1. Has a comfortable and inclusive décor for waiting rooms to indicate that adolescents of all genders, gender identities, races, ethnicities, sexual orientation, religions, and abilities are welcome.

2. **H** - Has a confidential system for calling students from class to appointments.

3. **P** - Collaborates with students' PCP to coordinate care and services for shared patients.

4. **P** - Has a clear policy and procedure to prepare adolescents for the transition from SBHC health services to adult primary care health services.

5. **P** - Uses a method to routinely gather feedback from adolescent patients, and uses this feedback to improve clinic access, quality, clinic physical appearance, and services.

6. **P** - Maintains an active and engaged Youth Advisory Council (YAC), allowing adolescents the opportunity to give feedback to clinic leadership.

7. **P** - Regularly meets with school officials, administration, and teachers to foster collaboration and positive relations between school and health center.

8. **P** - Totals /15
# Adolescent-Centered Environment Self-Assessment – Sample Questions

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<td>Priority Level</td>
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**Score Key:**
- 0 = Not Implemented
- 1 = Partially Implemented
- 2 = Fully Implemented

**Scoring Example:**
- Services are provided to adolescents at no out of pocket cost.
- 0 - Does not offer services at no out of pocket cost
- 1 - Offers some services at no out of pocket cost
- 2 - Services are provided to adolescents at no out of pocket cost

**ACE Indicator**
1. Uses a standardized health assessment survey for adolescents to complete confidentially at least yearly.
2. Has a comfort level of staff for use.
3. Has a comfort level of staff for use.
4. Collaborates with local and state organizations.
5. Has a clear understanding of the services offered.
6. Uses a regular reviewer of the service.
7. Maintains an active and engaged Youth Advisory Council (YAC), allowing adolescents the opportunity to give feedback to clinic leadership.
8. Regularly meets with school officials, administration, and teachers to foster collaboration and positive relations between school and health center.

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<td></td>
<td></td>
<td></td>
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<td>2 - Services are provided to adolescents at no out of pocket cost</td>
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Total: 16
Adolescent-Centered Environment Self-Assessment – Sample Questions

5. Has a clear policy and procedure to prepare adolescents for the transition from SBHC health services to adult primary care health services.

Score Key: 0= Not Implemented 1= Partially Implemented 2= Fully Implemented

Scoring Example:
0- Does not offer services at no out of pocket cost.
1- Offers some services at no out of pocket cost.
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Total /16
Poll: Health Assessment Survey

Uses a standardized health assessment survey for adolescents to complete confidentially at least yearly.

0 = Not Implemented

1 = Partially Implemented

2 = Fully Implemented
Establish a confidential workflow that allows patients to complete survey alone

Health Rights for Teens

1. You will not be treated differently because of your race, skin color, place where you were born, religion, sex, age, sexual orientation, gender identity, disability, or health insurance.

2. You will be treated with respect by all health center staff.

3. If your parents are with you, we ask your parents to leave for part of your visit - this is your time to talk to our provider. We also encourage you to share with your parent/caregiver or another trusted adult in your life the information we discuss.

4. The private information you share with our health center staff will not be shared with other people without your written consent.

      a. According to Michigan law, all teens can get the following services without the permission of his/her parent or legal guardian:
         - Pregnancy Testing, Preventive Care and Preventive & Sexual Health Care
         - Birth Control Information and Contraceptives
         - Testing and Treatment for Sexually Transmitted Infections
         - Substance Abuse Treatment

      b. According to Michigan law, teens 14 or older can get the following services without the permission of his/her parent or legal guardian:
         - Counseling or mental health services, up to 12 visits

5. We may share your private information the last when:

   a. Your child is at risk of harm or death.
   b. Your child need not be hurt or harm you.
   c. Your child need not hurt someone else.
   d. Your child need not be a sexual activity.

6. We will work to determine if you want to become a minor. You will receive the best possible care and will have your options for care explained to you.

7. You have the right to review your health center record.

8. If you have questions about your rights or feel you have been mistreated, please talk to the health center staff.

   “Some insurance plans may want a list of your recent treatment in your home. Talk to your provider if you are using your family’s insurance and want confidential care.”

Display health education materials

Effectively counsel patients and have accurate referral information
Poll: Comfortable & Inclusive Décor

Has a comfortable and inclusive décor for waiting rooms to indicate that adolescents of all genders, gender identities, races, ethnicities, sexual orientation, religions, and abilities are welcome.

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2 = Fully Implemented
A private check-in area, warm paint colors, and comfortable chairs will put adolescents more at ease.
Docking stations for cell phones in the waiting and exam rooms

Post WiFi information in the waiting and exam rooms

Display *safe space* decals throughout clinic

Place gadgets in waiting areas to keep adolescents occupied
Poll: Adolescent Patient Feedback

Uses a method to routinely gather feedback from adolescent patients, and uses this feedback to improve clinic access, quality, clinic physical appearance, and services.

0 = Not Implemented
1 = PartiallyImplemented
2 = Fully Implemented
Administer patient satisfaction surveys to adolescents

Form a YAC with help from AHI’s manual

http://umhs-adolescenthealth.org/archives/yac-yac
Poll: School Collaboration

Regularly meets with school officials, administration, and teachers to foster collaboration and positive relations between school and health center.

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SBHC-School Collaboration

**Barriers to school-based health center (SBHC)-school collaboration**

Creating and maintaining positive relations between your SBHC and school can be challenging. There can be frequent staff and administration turnover, varied understanding of the services provided by the SBHC, and concerns about students missing class for appointments. Additionally, the importance of maintaining confidentiality can be hard to express to professionals outside of the health field.

**Strategies to improve SBHC relationships**

**Participate in school events and initiatives**
- Immerses yourself in the school.
  - Observe and learn about your school’s climate and culture. Every school is different.
  - Be present during passing times, when SBHC staff can get to know students and teachers. Also, since passing time is a common time for incidents to happen, SBHC staff can serve as informal hall monitors – a presence that will be appreciated by teachers and administration.
  - Offer school-wide programs or initiatives to promote students’ personal development, peer support, respect, safety, and academic engagement. This toolkit of YAC resources has a variety of project samples to work from.
- Attend school events such as parent/teacher nights, fundraisers, open houses, school board meetings, athletic events, and other extracurricular events.
  - Set up a table to provide information, answer questions, and assist in filling out enrollment forms with family members. Translate forms into languages spoken by parents or have an interpreter available.
  - Establish relationships with the Athletic Director and coaches to encourage them to recommend the SBHC for injuries during practice or games.
  - IF its within your budget, offer to sponsor a school event.
- Promote school events through the SBHC’s bulletin board, website, social media, etc.
- Coordinate SBHC enrollment with school and sports enrollment to increase students with consent to be seen in the health center.
  - Add SBHC consent forms to the school registration forms to increase the chances of receiving completed consent forms.
  - The front desk office is often the most centrally avoided location for all students at the school and their parents. Place extra consent forms in the front office and educate front desk staff on how to help parents complete the form.
  - Establish relationships with the Athletic Director and coaches to ensure that they are recommending the SBHC for sports physicals (which should be used as an opportunity to do well-child exams) over any other options.

**Participate in school events & initiatives**
- Engage youth ambassadors to foster connections

**Provide active teacher & staff support**

**Establish & maintain close relationships with school administrators**

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What changes did youth notice at their clinic since their last visit?
“More friendly environment”
Chat

• What is your site doing well?

• What can you do to make your site more youth-friendly?
Resources

• Adolescent Health Initiative (AHI)
  – Starter Guides
  – TAC TAC Videos
  – YAC Manual

• Adolescent Health Working Group (AHWG)

• Adolescent Reproductive & Sexual Health Education Program (ARSHEP)

• CDC Sexual Health Checklist

• CDC Infographic

• Healthy Teen Network Checklist
Questions?

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Thank you!
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