



Do School-Based Health Models Expand Your Community Reach? Yes!

Tuesday, May 17th, 2022 2:00 – 5:00 PM ET



THANK YOU TO ALL COMMUNITY HEALTH CENTERS

#ThankYouCHCs

This program is supported by the Health Resources and Services Administration (HRSA) of the U.S. Department of Health and Human Services (HHS) as part of an award totaling \$6,625,000 with 0 percentage financed with non-governmental sources. The contents are those of the author(s) and do not necessarily represent the official views of, nor an endorsement, by HRSA, HHS, or the U.S. Government. For more information, please visit HRSA.gov.



www.nachc.org

HRSA-Funded National Training & Technical Assistance Partners (NTTAPs)

- Association of Asian Pacific Community Health Organizations (AAPCHO)
- Association of Clinicians for the Underserved STAR2 Center (ACU)
- Capital Link
- Community Health Center, Inc.
- Corporation for Supportive Housing
- Farmworker Justice
- Futures Without Violence
- Health Outreach Partners
- Health Information Technology Training and Technical Assistance Center (HITEQ)
- MHP Salud
- Migrant Clinicians Network
- National Association of Community Health Centers

- National Center for Equitable Care for Elders (Harvard University)
- National Center for Farmworker Health
- National Center for Health in Public Housing
- National Center for Medical-Legal Partnership
- National Health Care for the Homeless Council
- National LGBTQIA+ Health Education Center
- National Network for Oral Health Access
- National Nurse-Led Care Consortium
- School-Based Health Alliance



Tailored Technical Assistance and Training Resources: Free and Tailored for Health Centers

ARE YOU LOOKING FOR RESOURCES?

Please visit our website www.healthcenterinfo.org





Poll: Select Your Organization Type

- School or School District
- 330-Funded FQHC
- FQHC Look-Alike
- Other Health Care Provider
- Primary Care Association
- NTTAP
- Other





Poll: What is Your Primary Funding Source for Providing School-Based Health Services (Select All That Apply)

- Existing 330-Funds (U.S. Department of Health and Human Services' / HRSA Health Center Program)
- School-System (U.S. Department of Education / Local Education)
- Philanthropy
- Fundraising
- Medicaid/CHIP Revenues
- Other
- Don't Know





Poll: Why are you interested in today's topic?

- Applied but not funded for SBHCs
- Identified Need to Serve School-Age Children
- Beginning to build new partnerships or expand existing partnerships
- Exploring new expansion opportunities
- Other





NACHC's Health Center Growth & Development Training & Technical Assistance Resources

- Building & Strengthening the Health Center Pipeline
 - Starting a Health Center / Service Site
 - 330-Funding New Access Point Awards
 - FQHC Look-Alikes
 - Unique Models (i.e. Public Centers, Special Population Funding, Rural Health Clinics, etc.)
 - Health Center Program Compliance
- Service Delivery & Expansion
 - Needs Assessments
 - Strategic Planning
 - Scope of Project
 - Service Line Expansion

For more information: <u>https://www.nachc.org/health-center-issues/health-center-</u>







Today's Webinar: Setting the Context

Katie Ballengee Deputy Director, Office of Health Center Investment Oversight

Sarah Trinidad Director, Infrastructure Improvement Investment Management





National Association of Community Health Centers/ School-Based Health Alliance: Virtual Workshop

May 17, 2022

Katie Ballengee

Deputy Director, Office of Health Center Investment Oversight

Sarah Trinidad

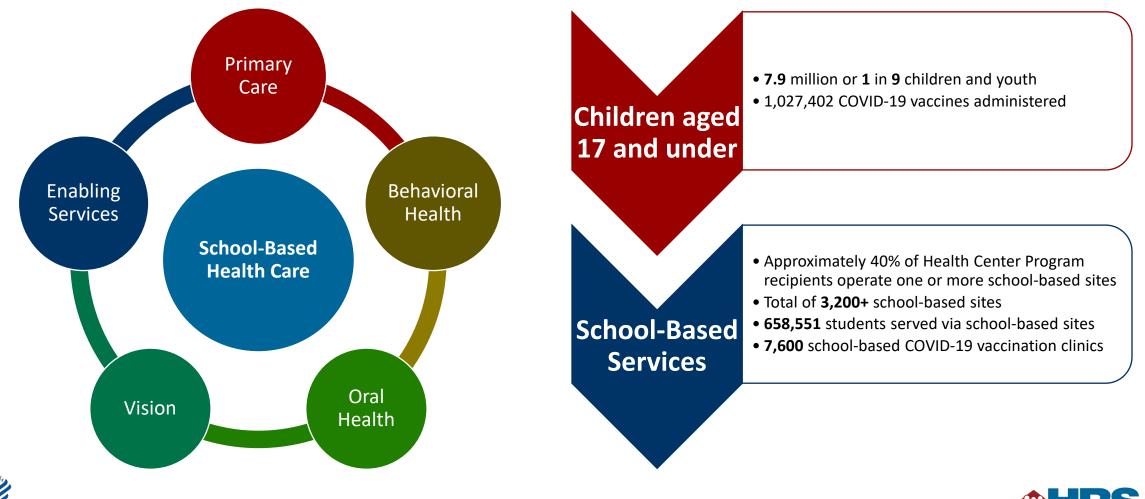
Director, Infrastructure Improvement Investment Management

Health Resources & Services Administration (HRSA)/Bureau of Primary Health Care (BPHC)

Vision: Healthy Communities, Healthy People



UDS Data for School-Based Health Care





Source: Uniform Data System, 2020 and Health Center COVID-19 Surveys



HRSA's Investments in School-Based Health Care

- Over the past 10 years, BPHC's investments in school-based health care have included FY 2011-13, and FY 2019 School-Based Health Center Capital (SBHCC) awards totaling over \$200 million.
- HRSA awarded \$5.4 million to 27 HRSA-funded health centers in September 2021 through the FY 2021 School-Based Service Sites (SBSS) funding opportunity.
- HRSA's FY 2022 final appropriation included an additional \$25 million to fund additional SBSS applications to support approximately 125 awards.
- These investments will position school-based health centers to expand mental health services to children and adolescents who otherwise might not be able to access this type of care.



Source: Uniform Data System, 2020 and Health Center COVID-19 Surveys



FY 2021 School-Based Service Sites (SBSS)

Implementation Trends

- Increasing Workforce Capacity: Medical/Behavioral Health Provider and Support Staff Recruitment
- Increasing Organizational Capacity: Building Telehealth Infrastructure
- Enhancing Physical Structure: Adding New Sites (Permanent, Seasonal, Mobile)
- Enhancing Collaboration and Community Awareness: Partnerships with Local School Districts

Barriers to Implementation

- Staffing/Recruitment Challenges
- Supply Chain Delays/Rising Supply Costs
- State Approval Backlogs
- School Closures Due to Increase in COVID-19 Cases

Focus on Award Performance & Improved Health Outcomes

- Specialized Team
 - Post-Award Monitoring & Oversight
 - Performance Data Analysis
 - Targeted Technical Assistance
- Webinars/Live Q&A Sessions
- Peer-to-Peer Support, Learning Collaboratives, Communities of Practice
- Linkages to National Training & Technical Assistance (TA) Partners





Thank You!

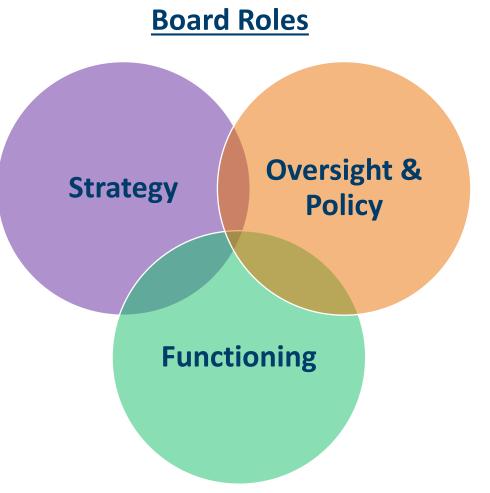
Katie Ballengee Deputy Director, Office of Health Center Investment Oversight Sarah Trinidad Director, Infrastructure Improvement Investment Management Bureau of Primary Health Care (BPHC) Health Resources and Services Administration (HRSA)

bphc.hrsa.gov





Health Centers are governed by a patient-majority community-based board of directors



Strategy

- Strategic Board Composition
- Strategic Planning & Thinking

Functioning

- Board Meetings
- Board Committees
- Board Culture

Oversight & Policy

- Approve Policy
- Provide Oversight

 CEO Oversight &
 Partnership
 Financial
 - -Quality
 - -Corporate
 - Compliance
 - -Risk Management
 - -Health Center Program Compliance



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Health Center Boards and School-Based Health Care

A health center board would be involved in many strategic and oversight decisions related to a school-based site including:

- Assessing the health center's needs assessment and other data to support the opening of a school-based health center
- Prioritizing school-based health centers in the center's strategic plan
- Approving hours, locations, and services at sites
- Among others



Learn More About Health Center Boards

The National Association of Community Health Centers (NACHC) has <u>over</u> <u>50 resources</u> on health center governance including:



- <u>Governance Guide for Health Center Boards</u> (English + Spanish)
 - 11 focus areas
 - 20 customizable tools
- <u>Health Center Board Roles</u> (video in English, coming soon in Spanish)

Learn more at <u>https://www.nachc.org/trainings-and-</u> <u>conferences/governance</u>



In order to learn more about federal requirements of health centers, please visit the Health Resources and Services Administration (HRSA) Website at https://bphc.hrsa.gov/programrequirements/compliancemanual/index.html



www.nachc.org



TODAY'S PRESENTERS & FACILITATORS



Tammy Alexander, M.Ed. VP, State Relations Visit bio







Emily Baldi, MSW Program Manager Visit bio



Andrea Shore, MPH Chief Program Officer Visit bio



Shameka Davis, MPA Program Manager <u>Visit bio</u>



Katherine Cushing, MPH Senior Program Manager of Quality, Research & Evaluation <u>Visit bio</u>



Laura Brey, MS Chief Operating Officer & Chief Strategy Officer <u>Visit bio</u>

TODAY'S FACULTY



Clifton Bush, MSM Chief Operating Officer AAPHC <u>Visit Bio</u>



LaVenice "Vince" Grace Principal of the "Premier" Turner Elementary School Albany, Georgia <u>Visit Bio</u>



Patricia Collett, PA-C Chief Operations Officer Community Care of West Virginia <u>Visit Bio</u>



Debra Harrison, Ed.D. Assistant Superintendent, Upshur County Schools <u>Visit Bio</u>



Tammy Greenwell, MPH, CPHQ, CPME Chief Operations Officer Blue Ridge Health Organization <u>Visit Bio</u>



Deborah Calhoun, MPH Director of Community Partnerships United Way of Asheville and Buncombe County <u>Visit Bio</u>





School-Based Health Alliance Transforming Health Care for Students

Our Focus

The School-Based Health Alliance Works to Support & Grow SBHCs



We support the improvement of students' health via school-based health care by supporting and creating community and school partnerships <u>www.sbh4all.org</u>





Time (ET)	Content			
2:20-2:45 PM	SBHC 101			
2:45-3:00 PM	Strong Partnerships			
3:00-3:15 PM	Sound Business Model			
3:15-3:30 PM	High Quality Practice			
3:30-3:40 PM	Break			
3:40-4:05 PM	GA - Albany Primary Health Care & Premier Turner Elementary			
4:05-4:30 PM	WV - Community Care of WV & Upshur County Schools			
4:30-4:55 PM	NC - Blue Ridge Health & United Way of Asheville & Buncombe			
4:55-5:00 PM	Closing			



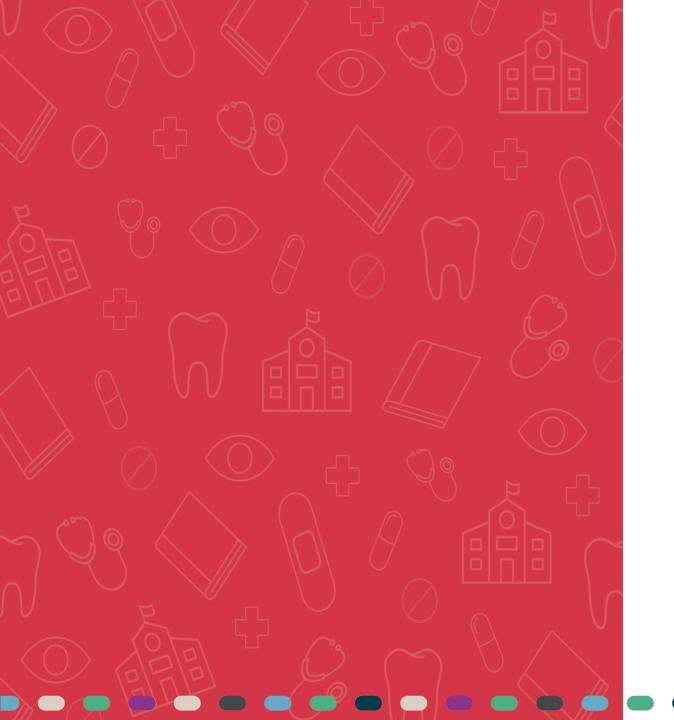
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Today's session is being recorded.





- Explain the difference between a school-based health center and a community health center.
- Identify elements of success and pitfalls to avoid during the SBHC planning process.
- **Explain** the challenges and benefits of delivering care at the intersection of education and health.
- Be familiar with and know how to utilize tools to assist with SBHC planning and start-up.



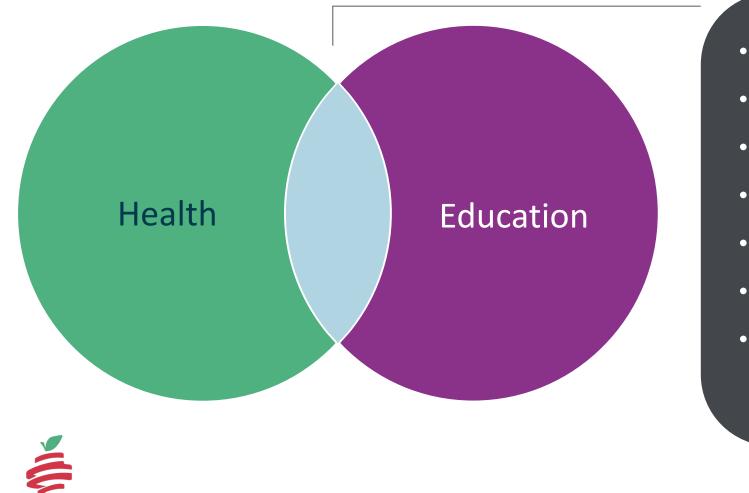


SCHOOL-BASED HEALTH CARE 101

School-Based Health Services



Types of Services



- School nurses
- School psychologists
- School counselors
- School social workers
- Health educators
- Nutritionists
- School-based health care/
 - school-based health centers

WHY SCHOOL-BASED HEALTH CARE?

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Only when we meet our most vulnerable young people where they are...





A school-based health center is a shared commitment between a school, community, and health care organizations to support students' health, well-being, and academic success by providing preventative, early intervention, and treatment services where students are: in school.

About School-Based Health Centers:

Consents

- Parents/guardians involvement is important and encouraged. They decide what services are or are not beneficial for their children, and their consent is required for care.
- Available services are NOT provided without permission except as allowed by state minor consent law.
- Confidentiality laws and requirements between patients and providers differ across states.

Scope of Services

• Services determined at the local level and in accordance with state and local policies and/or law.

Existing Services

- Does NOT replace required school health services for FAPE but instead supports and enhances.
- Does NOT replace parents/guardians, school nurses, school counselors, pediatricians, or other existing services.

RESOURCE

SBHC PLANNING CHECKLIST



School-Based Health Center (SBHC) Planning Checklist

- Stablish SBHC regional planning committee
- ✓ Orient SBHC planning committee to the SBHC model
- Identify a medical sponsor organization and other potential health care provider partner organizations
- Visit existing SBHC(s)
- Establish SBHC advisory group (e.g. principal, other school leadership, school social worker, students, parents/guardians, school nurse, sponsor organization member, and others.)
- Conduct community readiness assessment
- Conduct SBHC needs assessment
- Develop and implement marketing and engagement plan for target audiences and gatekeepers
- Identify potential SBHC location(s) via site visit(s) Select a well-considered location for the SBHC based on readiness assessment, needs assessment, site visit(s), and needed construction/renovation
- Determine appropriate staffing
- Develop narrative business plan

www.sbh4all.org | (202) 638-5872 | 1010 Vermont Ave. NW #816, Washington, DC 20005



Consulting Services The School-Based Health Alliance is a highly respected provider of extensive technical assistance and training to the school-based health care field. Our school health consulting staff has decades of experience in designing, operating, and evaluating school-based health center (SBHC) programs. Let us put that expertise to work for you!

- Complete a pro-forma business plan to determine funding needs and potential revenue
- Solicit capital and operational funding from variety of sources
- Develop necessary agreements and procedures to bill commercial and public insurance
- Draft and execute a memorandum of understanding among SBHC partners (e.g. school district, medical sponsor organization, behavioral health, oral health, local department of health.)
- Develop comprehensive SBHC consent form that includes bi-directional information sharing to promote continuum of care (e.g. school nurse, school counselor, PCP, dentist, parent/guardian.)
- Complete SBHC renovation/construction process
- Engage students to ensure SBHC space is student-friendly
- Purchase appropriate equipment and supplies
- Ensure appropriate technology access in collaboration with school

🅑 @sbh4all 💫 🚯 SchoolBasedHealthAlliance



SCHOOL-BASED HEALTH CENTER SPONSORS



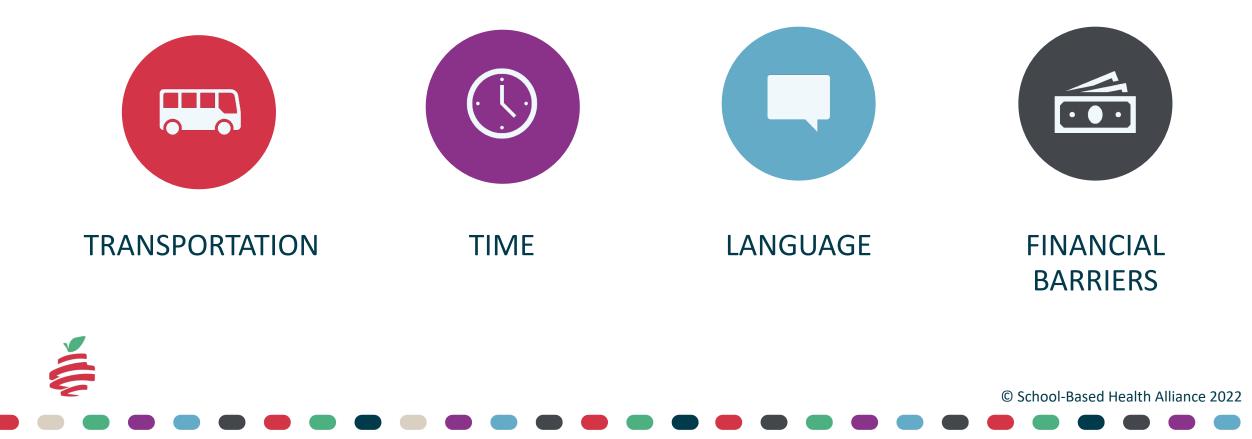
Most school-based health centers are operated by an external medical sponsoring agency.

Federally Qualified Health Centers

Nonprofit or Community-Based Organizations Local Health Departments ool Districts



Help students and their families overcome access barriers





https://www.thecommunityguide.org/

Evidence Based Approaches and Recommendations

https://www.thecommunityguide.org/sit es/default/files/assets/OnePager-SBHC.pdf

Health Equity

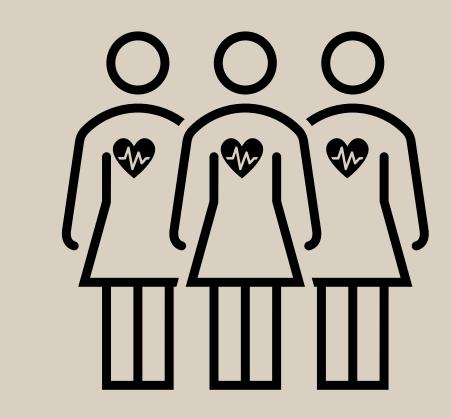
School-Based Health Centers: recommends the implementation and maintenance of school-based health centers in low-income communities to improve educational and health outcomes.

Vaccination Programs

Schools and Organized Child Care Centers: strong evidence of effectiveness in increasing vaccination rates, and decreasing rates of vaccine-preventable disease and associated morbidity and mortality.

- Increased access to care → decreased health disparities
- Increased use of primary care (better care coordination)
- Reduction in inappropriate emergency room use
- Improvements in social competency and behavioral/emotional functioning
- Reduction in hospitalizations

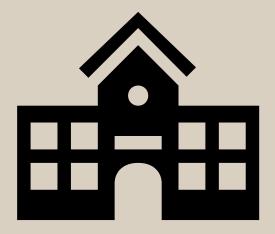
THE IMPACT OF SCHOOL-BASED HEALTH CARE: HEALTH





- Increased school engagement, safety, and respect
- Improvements in academics (GPA, test scores)
- Increased teacher retention
- Decreased absenteeism and tardiness
- Increased graduation rates

THE IMPACT OF SCHOOL-BASED HEALTH CARE: EDUCATION





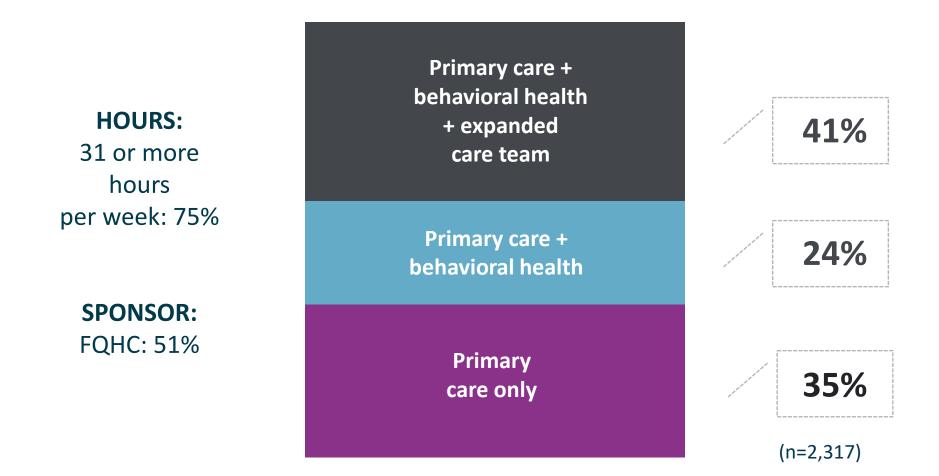
SBHC DELIVERY MODELS

	Traditional (87.1%)	School-Linked (3.8%)	Mobile (3.0%)	Telehealth Exclusive (11.5%)
Location where a <u>student accesses care</u>	A fixed site on school campus	A fixed site near school campus	Mobile van parked on or near school campus	A fixed site on school campus
Location where providers deliver care	Physically onsite, and remotely for some services	Physically onsite, and remotely for some services	Physically onsite, and remotely for some services	All primary care delivered remotely and other services may be available onsite or remotely





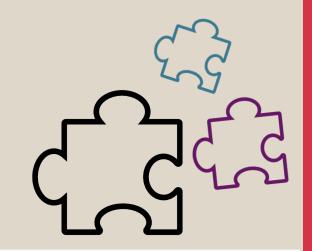
SBHC PROVIDER TEAMS



Note: Expanded care team is defined as at least one of the following providers: Dentist, Dental assistant, Dental hygienist, Care coordinator, Health educator, Nutritionist, Ophthalmic technician, Optometrist or ophthalmologist, Outreach coordinator, or Registered dietician.

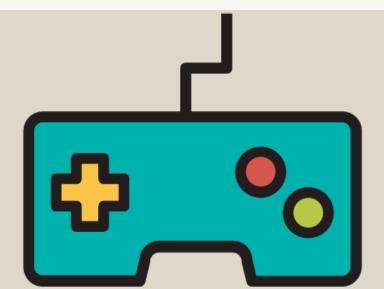






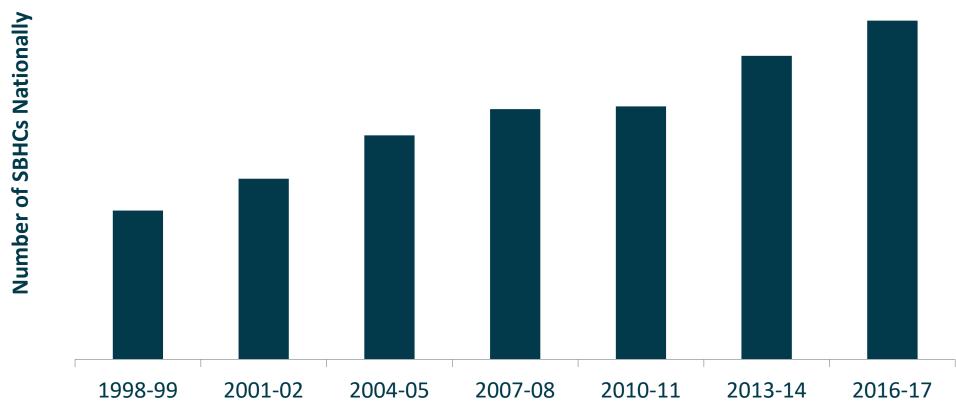
How many school-based health centers are there nationwide? A. <1,200</td> B. 1,800 C. 2,200 D. 2,500+







National School-Based Health Care Census



Number of School-Based Health Centers, 1998-2017

Note: From 1998-99 through 2013-14, behavioral health and oral health only programs were included in the overall count of SBHCs. For the 2016-17 Census, we elected to only include SBHCs with primary care and SBHCs that we confirmed are open.





6.3 million* students in 10,629 schools have access to

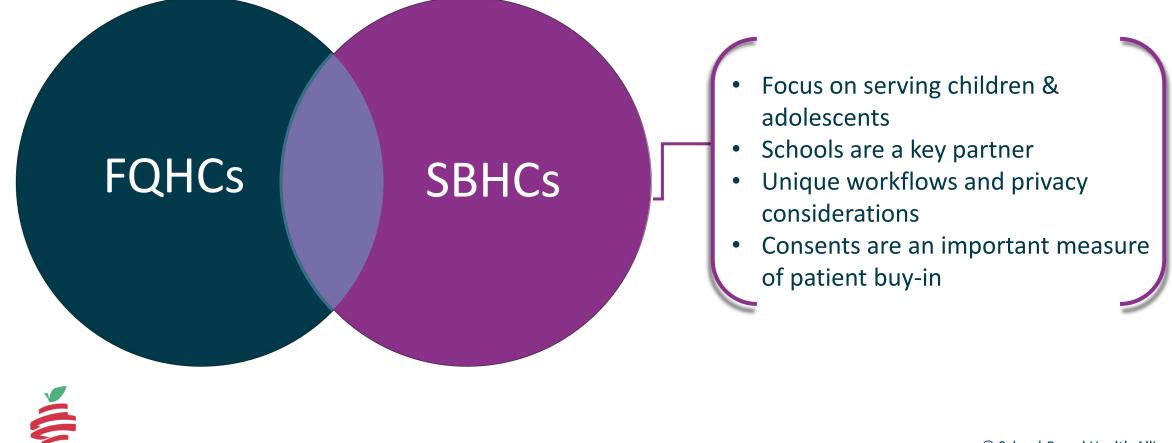
an SBHC

*Exact number is 6,344,907 students representing 13% of students and 10% of public

schools nationwide.



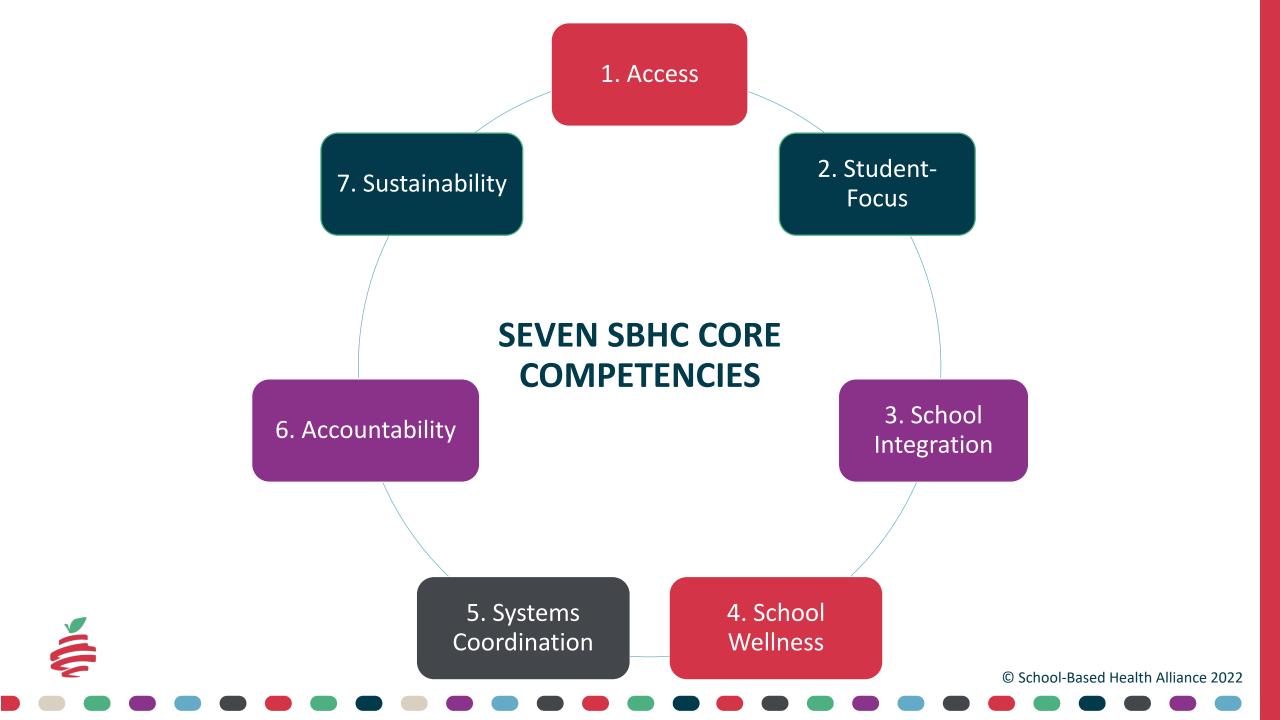
SIMILARITIES & DIFFERENCES: HEALTH CENTERS & SBHCs



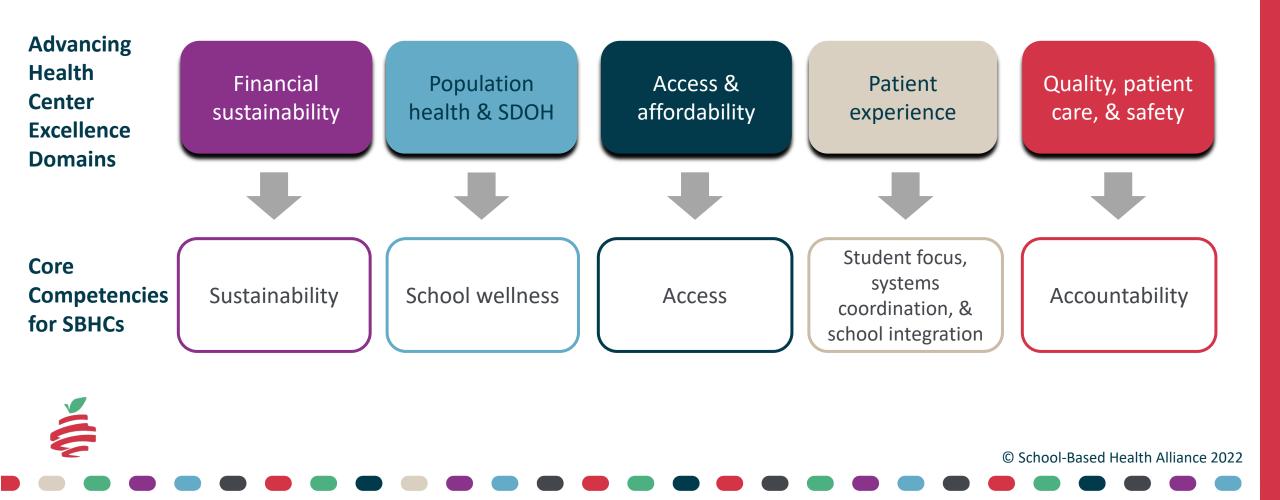
Advancing Health Center Excellence & SBHC Core Competencies

 BPHC - Advancing Health Center Excellence is a framework aimed at advancing health center maturity and innovation in seven key domain areas which align with HRSA's mission

 SBHA - The Core Competencies for School-Based Health Centers represent the knowledge, expertise, policies, practices, and attributes that every SBHC is expected to demonstrate in its pursuit of student wellness. SBHC staff and administrators can use these as a framework to achieve excellence in delivering care in a school setting



MAKING CONNECTIONS





Prom ticket selling was stationed in the SBHC. Got students to come tour the SBHC, to learn more about the center and see it's accessibility.

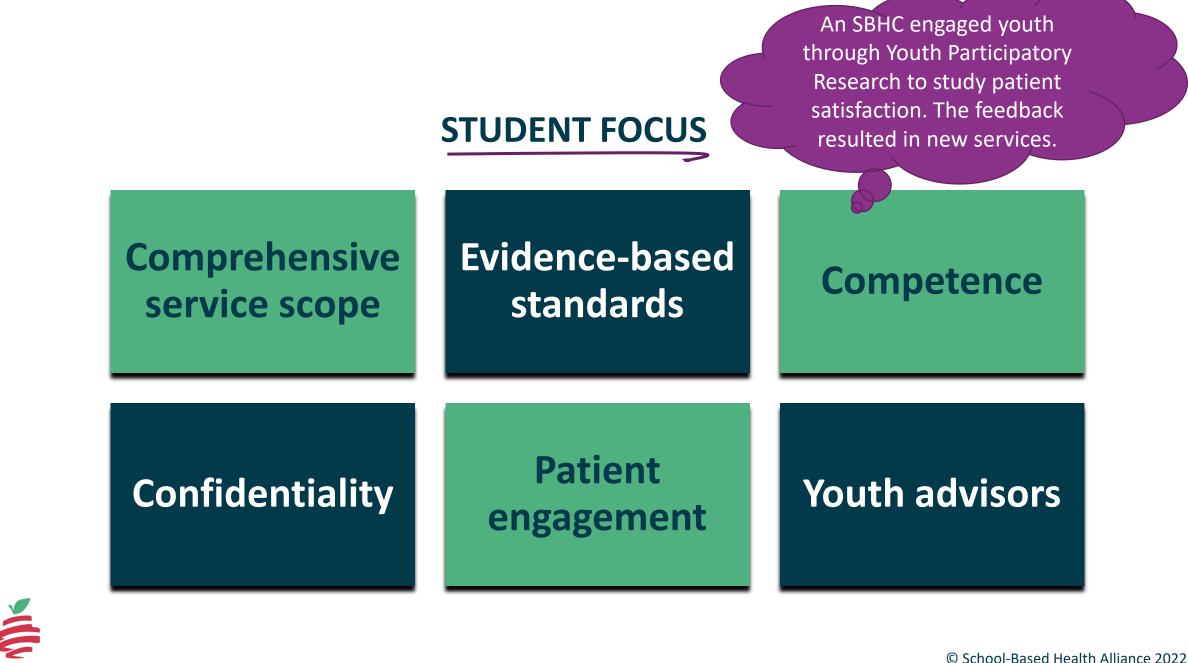
Location: SBHCs are traditionally located on site.

Operations: The health center structures its operations such that the SBHC makes on-site services available whenever the school is open, or as needed.

Facility: To ensure access, the health center facility operates within an appropriate physical plant.

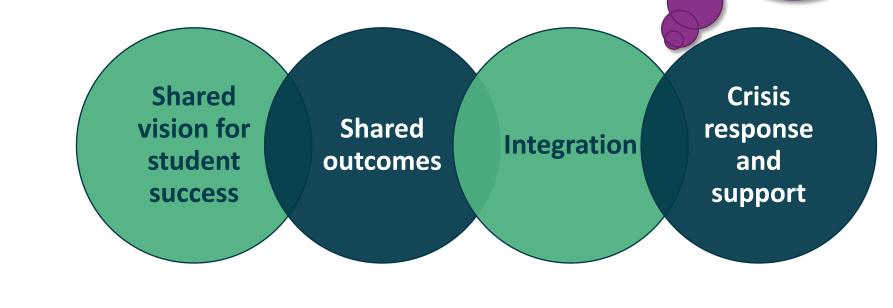
Consent: The health center obtains consent from parents/ guardians of enrolled students.

After-hour care: SBHCs provide after-hours care Non-Discrimination: The health center does not discriminate against patients. Other populations: Health centers make services available to populations other than students or outof-school.



SCHOOL INTEGRATION

SBHC staff at an elementary school are visible at school events, offer health education lessons in classrooms, and walk students to and from SBHC appointments. Offered flu shots and wellness visits to school staff, participate in faculty and PTA meetings, and eat in the faculty break room.



An SBHC led an effort to implement a school garden to help address food insecurity issues in the school community.

SCHOOL WELLNESS

Student body wellness

Family wellness

Staff wellness

School climate

-/-- Health authority

SYSTEMS COORDINATION

Care coordination

To address some family needs, an elementary school SBHC brought other agencies and dedicated personnel into the SBHC periodically to assist parents with applications for SNAP, Medicaid, and other social service programs.

Care partners

Parent/guardian/caregiver engagement



Quality improvement

Through QI efforts, an SBHC found that by converting acute care visits to comprehensive well-care visits, their providers gave more WCVs to patients, improved the relationships with those patients, and felt more satisfied in their work.

Satisfaction

Performance



Administrative systems

Billing infrastructure

Many SBHCs sponsors establish a separate SBHC cost center. SBHC administrators can then generate a monthly cost report including SBHC visits, revenue, and expenses to share with staff and partners for joint planning.

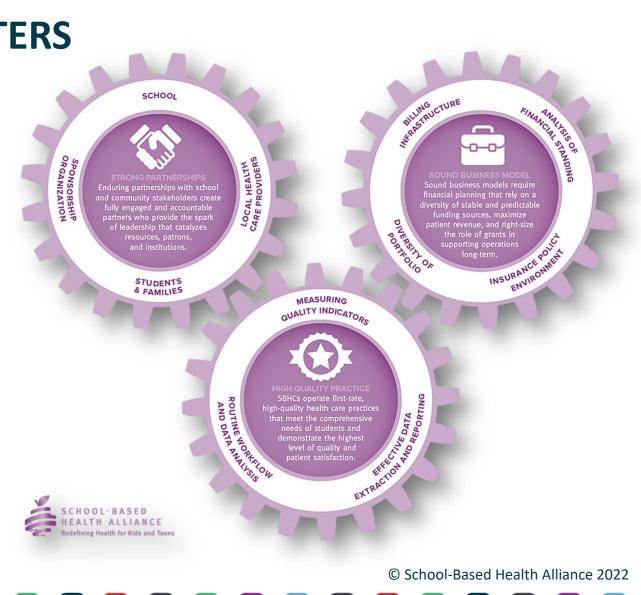
Analysis of financial standing

Sustainable resources



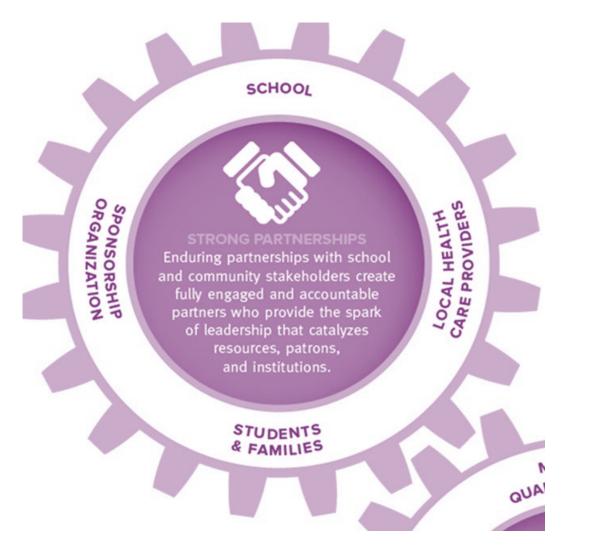
A MODEL FOR EXCELLENCE IN SCHOOL-BASED HEALTH CENTERS

- Strong Partnerships
- Sound Business Model
- High Quality Practice



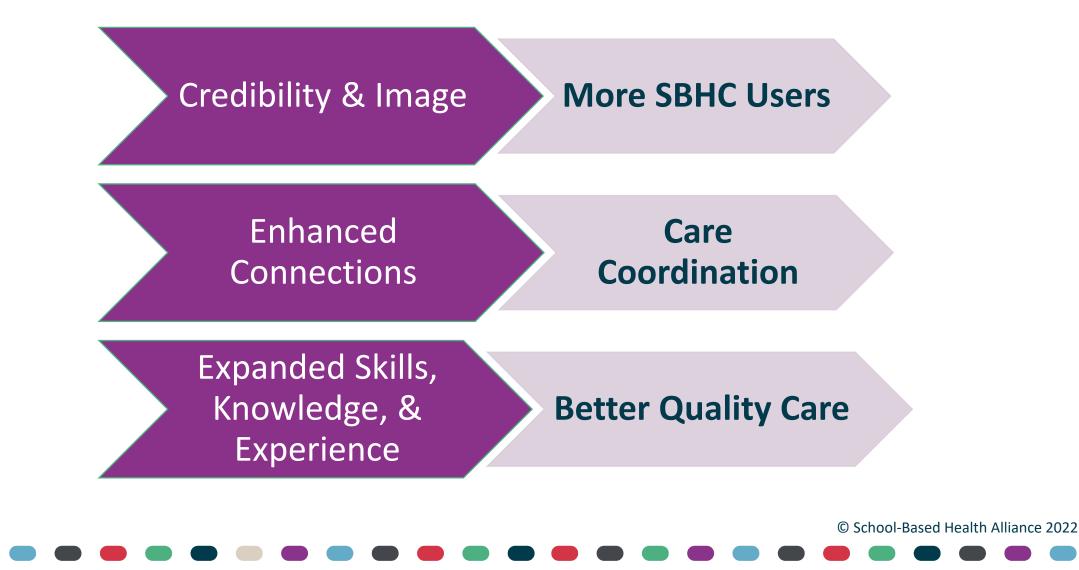
NUTS & BOLTS STRONG PARTNERSHIPS







WHY ARE STRONG PARTNERSHIPS CRITICAL FOR SBHCS?



HOW DO PARTNERSHIPS RESULT IN GREATER FINANCIAL SUSTAINABILITY?





- Rent, utilities, vaccines, staff, etc.
- Referrals for SBHC
- Quality assurance
- SBHC advocacy & support
- Community benefit/Return on Investment (ROI)



POTENTIAL PARTNERS



- Students
- Parents/guardians
- School/district staff
- Community organizations/foundations
- Faith community
- Colleges/universities
- Local nonprofits
- Local businesses/business associations



- Other SBHC sponsors
- State/local health departments
- Hospitals
- Community health centers
- Pediatricians
- Behavioral health agencies
- Community dentists
- Medicaid MCOs
- Private insurers





SHARING INFORMATION



- Fall under FERPA if under contract or direct supervision of a school.
- Must receive parental consent before sharing any part of the student's record.
- <u>Must</u> allow parents to see the student's record.



- Fall under HIPAA Privacy Rule.
- May share information with school health providers for "treatment purposes," without consent.
- May treat minors without parental consent in some situations and required to keep some information confidential, if requested to do so by the minor.
- Many have consents to allow bi-directional information sharing between SBHC, school nurse and primary care provider.

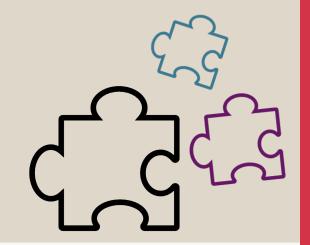
PARENT/GUARDIAN ENGAGEMENT



- Advocates for their children's health
- Advisory committee
- Gatekeepers for utilization of SBHC
- Volunteer (parent teacher organization)
- Ambassadors for SBHC: marketing, word of mouth
- Consent rates are an indicator of parent engagement



Poll: Trivia Questions



Where was the first SBHC located?

- A. Cambridge, Massachusetts
- B. Dallas, Texas
- C. St. Paul Minnesota





CONSENTS



Most SBHCs have parental consent policies

Consent form should include: Services offered

Statement about confidentiality/HIPAA Billing considerations

Statement about the relationship between the sponsoring organization and any collaborators including the school district Length of consent

Bidirectional information sharing

Review state minor consent statutes



MEMORANDUM OF UNDERSTANDING (MOU)



Establishes the relationship between/among collaborating partners

Formalizes commitments and agreements regarding the operation of the SBHC



Hallways to Health: Creating a School-Wide Culture of Wellness

Wellness is determined in great part by where children live, learn, and grow. Recognizing this, schools across the country are collaborating to create a culture of wellness that extends beyond the health clinic walls into school hallways, classrooms, cafeteria, teachers' lounges and campus spaces.



SBHA Youth Development

SBHA's Youth Focused Website: Youthhealthhub.org

Created for young people involved with a school-based health center or interested in the intersection of health and education to build a community, find national and local opportunities, browse articles, find events, and more

Youth Development Digest: bit.ly/YDDSBHA

 Designed with young readers in mind, it promotes upcoming events, showcases powerful youth in our country, and is a resource that highlights current topics, issues, and opportunities for young people today

Consulting Services: youthdevelopment@sbh4all.org

 SBHA offers youth development focused technical assistance, trainings, and coaching for youth and adult audiences







LEAD THE WAY: ENGAGING YOUTH IN HEALTH CARE



Community asset mapping/needs assessment

Health center service

Outreach and enrollment

Peer to peer education



Youth Engagement Toolkit

PARTNERSHIPS IN ACTION



- SBHC Advisory Committee
- Youth Advisory Council
- Partner with existing parent groups (e.g. PTA)
- Get to know school staff!
 - Sponsor a welcome breakfast
 - Offer staff wellness activities
 - Collaborate with teachers on health education lessons



NUTS & BOLTS SOUND BUSINESS MODEL

BILLING BILLING TRUCTURE ENANCIAL STANDING Sound business models require financial planning that rely on a diversity of stable and predictable funding sources, maximize DIVERSITY OF patient revenue, and right-size INSURANCE POLICE PORTFOLIO the role of grants in supporting operations ENVIRONMENT long-term. TORS

CONDITIONS

- No billing/revenue collection
- Minimal outcome data collection
- Limited business capacity
- Limited accountability
- Limited concern re: sustainability
- No systems of care



FIRST GENERATION SBHCS...

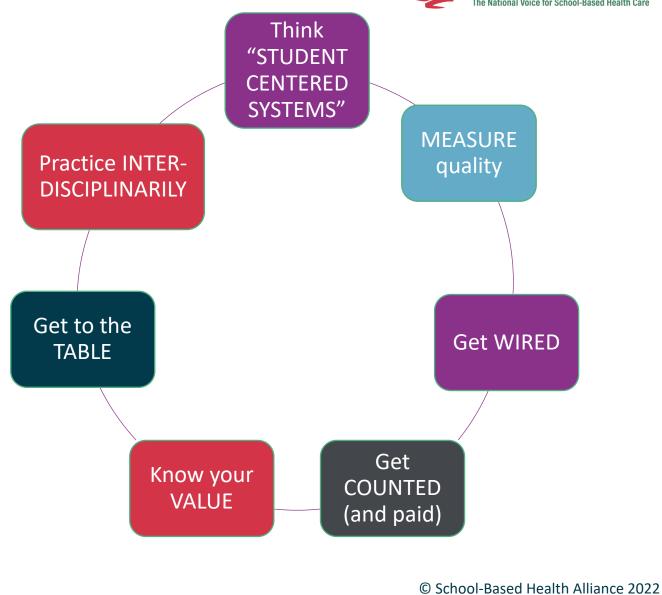






NEW EXPECTATIONS FOR SBHC BUSINESS MODELS









Maximize patient revenue

Maximize partner in-kind

Right-size role of grants to offset losses

SBHC SUSTAINABILITY RECOMMENDATIONS





School population >750 for full time staffing



Minimum of 70% free and reduced lunch rate 50% of students consented/ registered end of year 1 70% + students consented/ registered end of year 2

50% one visit to the SBHC

CHARACTERISTICS OF SUCESSFUL SBHCs

- Advisory committee
- Student and/or family engagement
- Strong memorandum of understanding
- **Comprehensive range of services**
- Adequate space in school
- Appropriate staffing

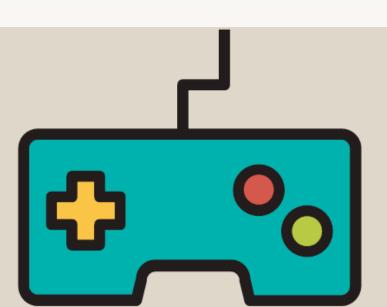


Poll: Trivia Questions



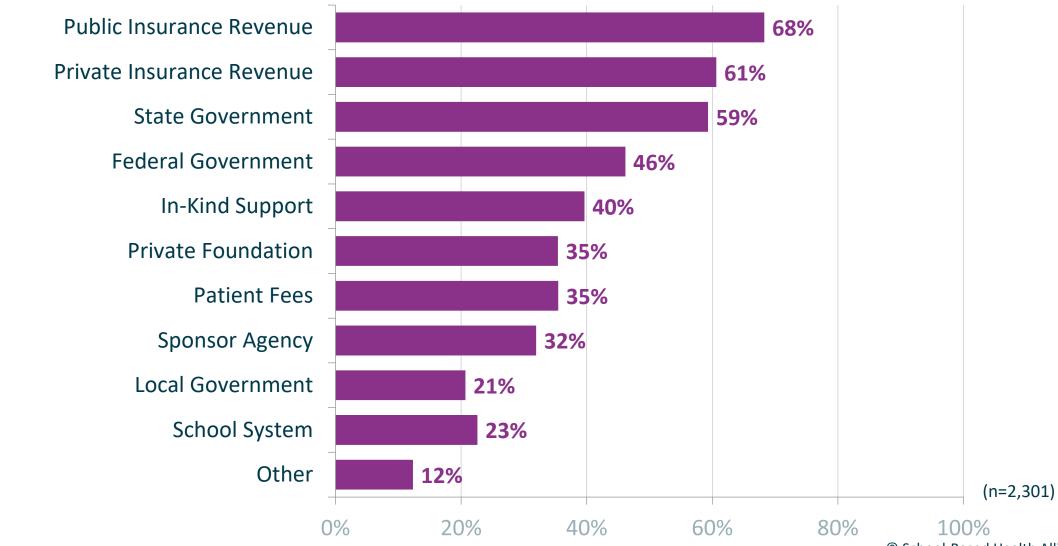
School-Based Health Center's

- A. Increase access to health care
- B. Contribute to positive educational outcomes
- C. Reduce emergency room use
- D. All of the above





SBHC Funding



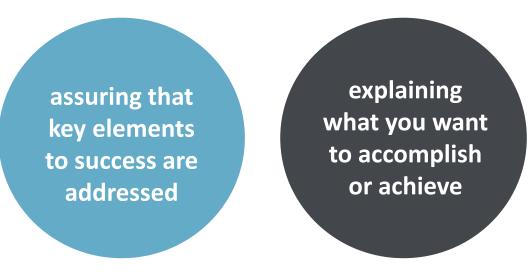
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Why a Business Plan?





Guides the SBHC project planning process by...



Information can be used...

✓ To develop grant proposals

In presentations to potential community partners

 ✓ To ensure accountability to funders

YEAR ONE SBHC BUSINESS PLAN





WHY A PRO-FORMA BUSINESS PLAN?

So new and existing SBHCs can....



And assess the implications of proposed changes such as...

- ✓ Expansion of services
- ✓ New patient population

Transitioning to a new medical sponsor

Quality Counts: Sustainable Business Practices QI Toolkit



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SCHOOL · BASED

HEALTH ALLIANCE The National Voice for School-Based Health Care

BUSINESS MEASURES QI TOOLKIT







Frequently Asked Questions



What can my SBHC do to create strong school partnerships?

Create buy-in, support, and promotion of your SBHC from school board members, district staff, school administration, and staff. Proven strategies for accomplishing this include:

- Give members of the school administration, staff, and students a voice in SBHC operational decisions by asking them to join the SBHC advisory group.
- Share your health expertise with school personnel, perhaps during teacher in-service days, by organizing in-services on employee wellness, stress management, mental health first aid, asthma triggers.

https://tools.sbh4all.org/sustainable-business-practices-toolkit/sustainable-business-practices-toolkit-home/

SOUND BUSINESS MODEL IN ACTION



Create an SBHC-specific business plan, including a Pro Forma

Make a plan to distribute and collect consent forms

- Homeroom consent drives
- Immunization/sports physicals events
- Colored consents to indicate when consent forms were distributed (to track which outreach efforts are most impactful)
- SBHC tours as part of health classes

Understand your sponsor/SBHC's billing processes

NUT & BOLT High Quality Practice

- Measuring Quality Indicators
- Effective Data Extraction and Reporting
- Routine Workflow and Data Analysis















SBHC PARTICIPATING IN QUALITY BENCHMARKS AND PROGRAMS



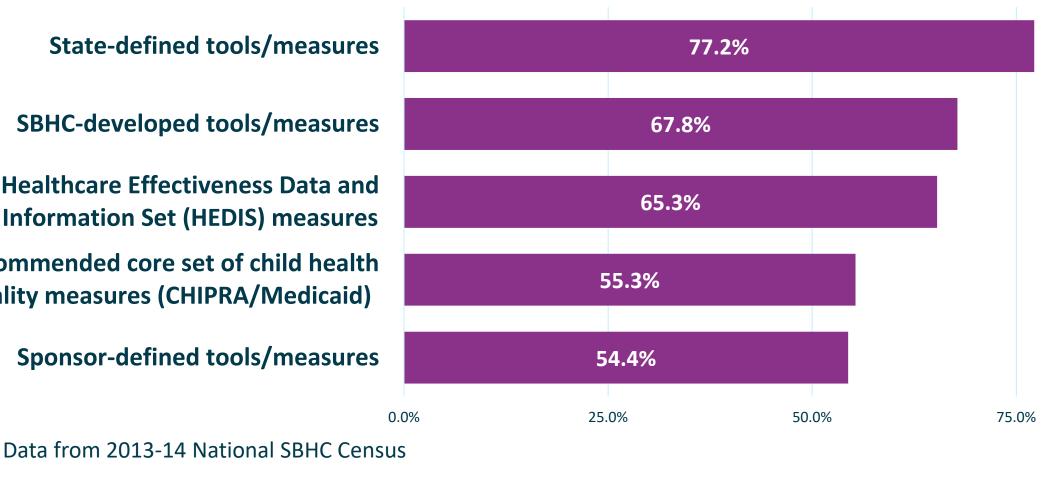
State-defined tools/measures

SBHC-developed tools/measures

Healthcare Effectiveness Data and **Information Set (HEDIS) measures**

Recommended core set of child health quality measures (CHIPRA/Medicaid)

Sponsor-defined tools/measures





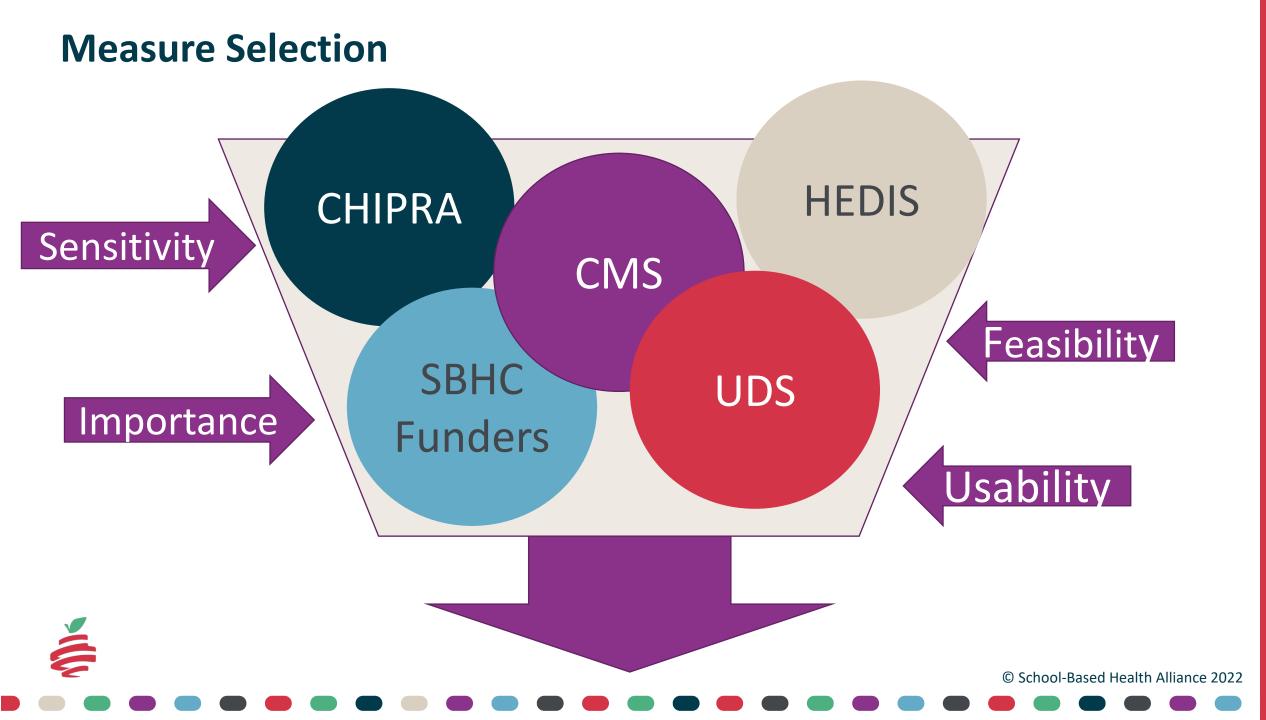
School Health Services NATIONAL QUALITY INITIATIVE

Accountability • Excellence • Sustainability

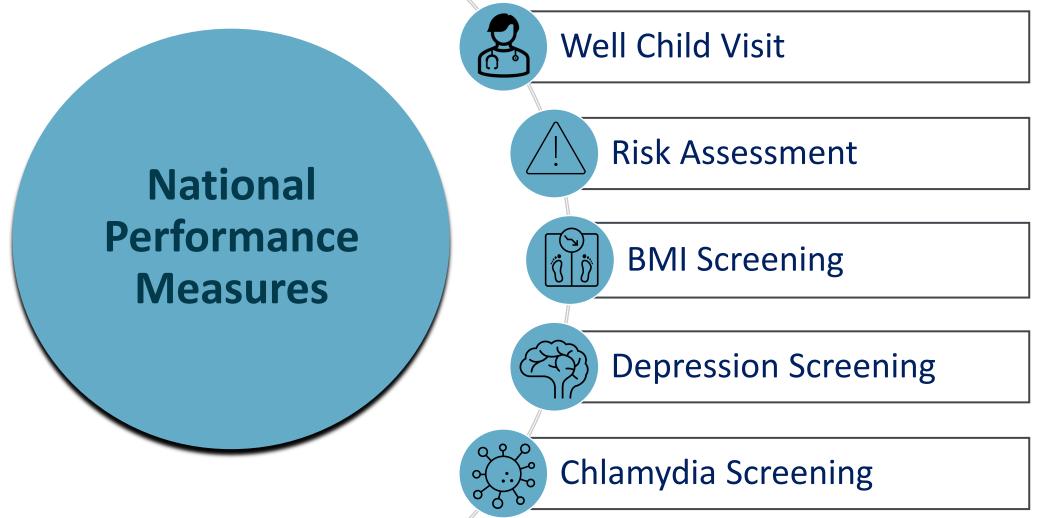
an initiative of the School-Based Health Alliance and the Center for School Mental Health

Quality Counts

Challenging the SBHC field to adopt the first ever set of standardized performance measures

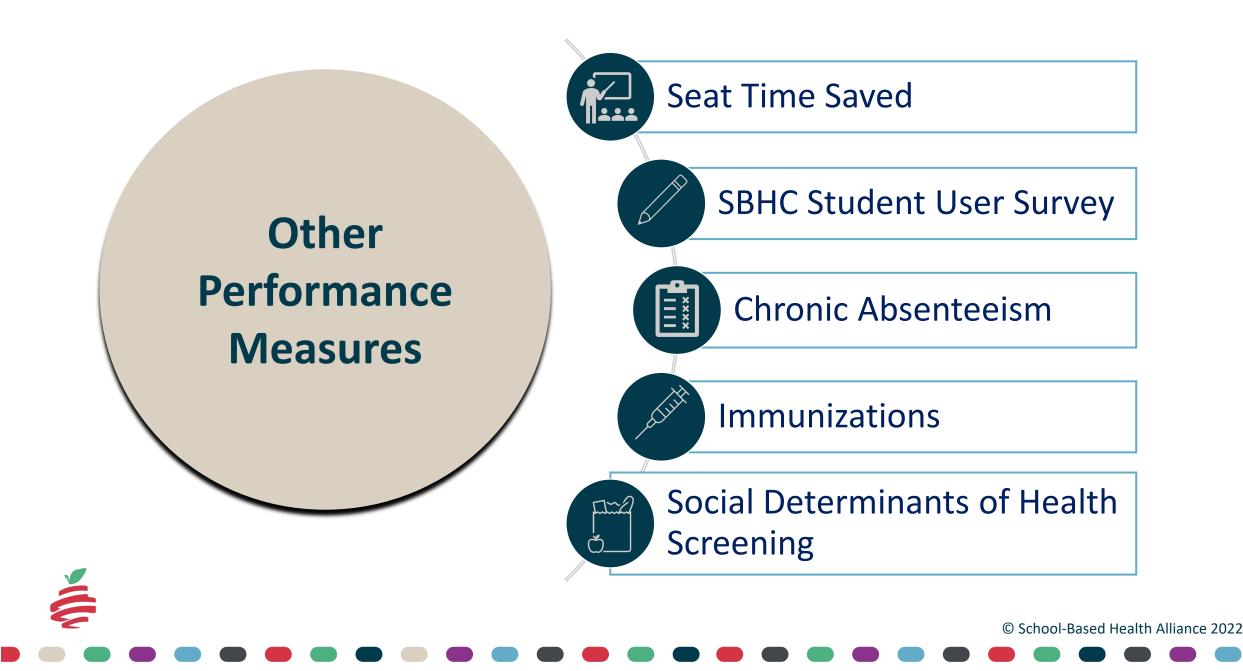






https://www.sbh4all.org/wp-content/uploads/2018/06/Quality-Counts-Standardized-

Performance-Measure-Definitions-112717.pdf



CLINICAL PERFORMANCE MEASURES QI TOOLKIT



Quality Counts Clinical Performance Measures QI Toolkit

https://tools.sbh4all.org/quality-counts/quality-counts-home/

CLINICAL PERFORMANCE MEASURES QI TOOLKIT







Frequently Asked Questions

Back to Top

• What are some promising strategies I can use to increase the number of SBHC patients who receive an annual well-child visit?

How do I document the well-child visits that happen outside of my SBHC?

- Check your regional or state health information exchange/registry. Some regions and states have a health
 information exchange or registry where information on care received is publicly available.
- Build relationships with providers in your community. Meet with them to tell them about the services your SBHC
 offers, your interest in coordinating care with them, and the specific information you'd need from them about
 WCVs.
- Ask the client, the client's family, primary care provider (PCP), school nurse and/or school record system if that client received a WCV during the past 12 months.
- Create a process to document and extract data: If you're entering WCVs performed outside the SBHC as a note, narrative, or comment field in your EHR, convert those to discrete fields so you can extract that data more easily.

• How can I tell if a well-child visit completed outside of my SBHC was comprehensive?

https://tools.sbh4all.org/quality-counts/quality-counts-home/

EFFECTIVE DATA EXTRACTION AND REPORTING

Quality improvement efforts can be sustained with quality systems that collect and report data you need.

The right information is actionable, and can be shared with clinic staff, sponsors, and key stakeholders.

ELECTRONIC HEALTH RECORDS (EHRs) & TEAMWORK







QUALITY IMPROVEMENT DATA PURPOSES



Research

 Hypothesis, measure, analyze, report

Judgment

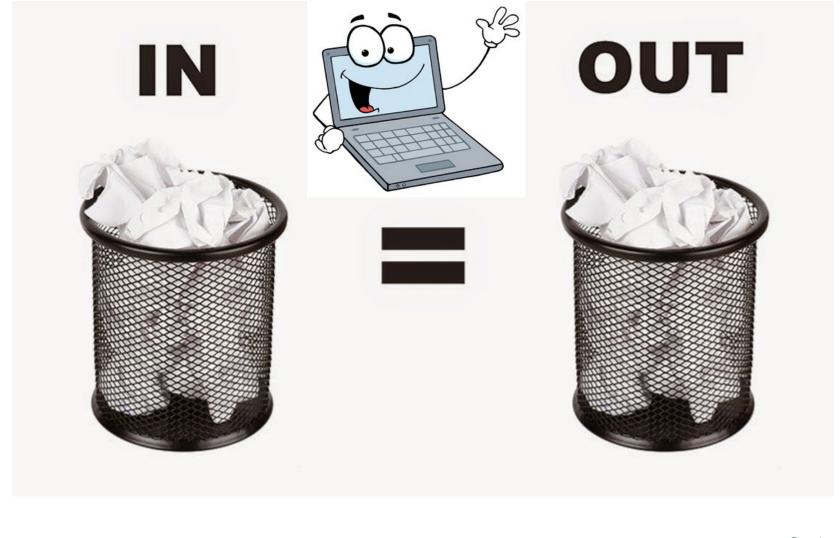
 Audit, inspect, maintain standards, often for public good

Improvement

 We fix our work ourselves, with our ideas and our approaches

Garbage In = Garbage Out



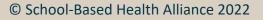


TIPS AND RESOURCES

EHR

https://www.sbh4all.org/current_initiatives/nqi/preparin g-to-participate-general-tips

- Verify that procedure/diagnosis codes are in the EHR.
- Convert text fields to discrete fields.
- Build customized reports and data queries.





ROUTINE WORKFLOW TIPS

STAFF EDUCATION

Conduct in-service training for SBHC/sponsor staff on Sustainable Business Operations including:

- coding, EOBs, billing and collection P&P
- utilization, reimbursement & efficiency

ROUTINE WORKFLOW TIPS

STAFF PRODUCTIVITY EXPECTATIONS

- Clearly define productivity "aka what is required to keep the lights on"
- SBHC Cost Center
- Provide staff monthly expense & revenue reports

DATA ANALYSIS TIPS

WORKING WITH PARTNERS

Meet regularly (i.e. huddles, advisory committee)

Share a simplified report with partners

- What services do students need
- What are the SBHC expenses
- What are the SBHC sources of income

Work together on ways to reach students and increase utilization to ensure availability of continued services

HIGH QUALITY PRACTICE IN ACTION



 Consider adopting the National Performance Measures

2. Work with sponsor organization to create a cost center for your SBHC

3. Consider implementing regular meetings for QI

A MODEL FOR EXCELLENCE IN SCHOOL-BASED HEALTH CENTERS

Strong Partnerships Sound Business Model High Quality Practice



LET'S TAKE A BREAK

TODAY'S FACULTY



Clifton Bush, MSM Chief Operating Officer AAPHC <u>Visit Bio</u>



LaVenice "Vince" Grace Principal of the "Premier" Turner Elementary School Albany, Georgia <u>Visit Bio</u>

Albany Area Primary Health Care, Inc.

School Based Health Centers... What's the Deal?

Clifton Bush, MSM, Chief Operating Officer May 17, 2022



Information about AAPHC

- Corporation initially established in 1978 and current institution was incorporated in 1979.
- Grant for FQHC Grant to develop clinic in Lee County was based on thesis project regarding lack of care for women and babies in the community, particularly prenatal care.
 AAPHC did not implement OB services until 2009...thirty years later.
- AAPHC had three locations in 1982 and has grown to include 18 clinical locations, 2 adjunct locations, 8 schoolbased sites and 1 administrative site.
- AAPHC opened the doors to it's inaugural School-Based Health Center in March 2013.



AAPHC SBHC Sites



Turner Elementary SBHC



Alice Coachman Elementary SBHC



Robert Harvey Elementary SBHC



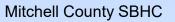
Live Oak Elementary SBHC



Terrell County SBHC









Albany Middle SBHC



SBHC Services

- Primary Care Services (Adults & Pediatrics)
- Dental Services
- Optometry/Vision Services
- Behavioral Health Services
- Transportation Services (via school bus systems)
- Mobile Health Services





Turner Elementary SBHC (inaugural site)

- Approximately 500 students
- Approximately 50 Faculty & Staff
- Grades K-5
- 99% free and reduced lunch
- Over 90% African American
- Less than 5% utilize English as a Second Language





Why an FQHC as a Sponsoring Agent?

Prospective Payment System Community Involvement Federal Grants- HRSA, NAPs, etc. Sliding Fee Scale Program Medication Programs FTCA- Malpractice



SBHC Set-up...What Does It Take?

Needs Assessment School Location School System & School Support Parent Involvement Sustainable Staffing Model Engagement & Consistency



Just the Numbers – Initial Start-up

Initial Budget Needs		Funds	Funding Source
Clinic Site Renovation (within School Setting);	\$50,000 (renovation)	\$50,000 (Renovation)	
Annual Space (rent & utilities)	\$70,000 (annual expenses	In Kind	
Staff – Midlevel *Includes Fringe	\$80,000	\$80,000	Grant Funding
Staff – Medical Assistant <i>*Includes Fringe</i>	\$22,000	\$22,000	Grant Funding
Equipment & Supplies; Physician Oversight	\$45,000	\$45,000	Grant Funding; & Existing Program Income

*After initial start-up , patient revenue is expected to cover all expenses; this has been the case for AAPHC.



SBHC Planning

- Emory Urban Health Program Planning Grant March 2011
- Advisory Board Developed
- School System Involvement
- School Selection Process (potential sites, education, needs assessment)
- Target Site Selected
- Promotion/Marketing for SBHC





SBHC Sustainability (Financials)

- Medicaid and CMO Enrollment
- Sliding Fee Scale and the SBHC



- Collections- How Do We Make It Happen?
- Faculty and Staff- How Do We Handle Insurance?
- Billing Assignments SBHC
- Communication
- Chart Auditing and Peer Review
- Credentialing



SBHC Sustainability

Student/Staff Enrollment

- Consent forms distributed prior to start-up
- Poster Contests & Prizes for Students
- School Activity Involvement (PTO, etc.)
- Relationship with School Administrators
- Wellness Campaigns (Flu Vaccinations)
- Focus on Well Child Exams for all engaged students
- Annual Health Fair Event
- Faculty/Staff Engagement
 - Promotional activities (i.e. Adult Health Month)



SBHC Marketing Activities



Hibany Area Primary Health Care, Inc. (AAPHC)

in cooperation with the Dougherty County School System and Network of Trust School Nurse Program, is excited to announce a new primary care clinic for the children of Turner Elementary!

Your children will be able to access direct medical services right here in the school. Once parental consent is provided, the medical team from AAPHC may provide on-site care to them. This includes: well-child checks, immunizations, and sick visits.

For more details, please see our informational brochure in the school office or call us at 229-435-9934.





Turner Elementary

The School-Based Health Center



With the school based health center, you now have the opportunity to get your child's well child exam done at Turner Elementary School-Based Health Center!

Please place a check in the box below to let us know if you would like for your child to have their Well Child Check done at the Turner Elementary School-Based Health Center.

If yes, we will call you to schedule an appointment!

□ YES

CHILD'S NAME _____ GRADE _____

HOME # _____ CELL # _____

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PARENT/GAURDIAN Name

We will be glad to call you to provide more information on the well child check process before you make a decision, please let us know if you would like a phone call to discuss this by checking here. 🗆



Alice Coachman Elementary School-Based Health Center



Attention 5th Grade Parents: Get your Child's Wellness Exam **BEFORE** they move to middle school!

School is in full swing and before you know it the school year will be over!

You have the opportunity to get your child's well child exam (including immunizations) done at Alice Coachman Elementary School-Based Health Center before he/she takes off to middle schoolI

> Please place a check in the box below to let us know if you would like for your child to have their Well Child Check done at the Alice Coachman Elementary School-Based Health Center. If yes, we will call you to schedule an appointment!

NO

CHILD'S NAME _____ Date of Birth _____

HOME # _____ CELL # _____

PARENT/GAURDIAN Name

We will be glad to call you to provide more information on the well child check process before you make a decision, please let us know if you would like a phone call to discuss this by checking here.



May is Adult Health Month at **AAPHC's School-Based Health Centers**



Have you had your annual wellness screening completed? Did you know that it is a requirement for SHBP Wellness program insured members? It's also a great way for everyone to stay as healthy as possible. Even if you are not sick, annual wellness screenings can help catch any underlying health issues before they become a much larger problem!

The SBHC staff can help!

You now have the opportunity to get your annual health exam done at Your School-Based Health Center!

Please place a check in the box below to let us know if you would like to have your annual exam (if not already completed by another provider) done at the School-Based Health Center.

If yes, we will call you to schedule an appointment!

YES D NO

NAME

Contact # _____ Preferred Appt Time AM PM

We will be glad to call you to provide more information on the annual exam requirements before you make a decision, please let us know if you would like to discuss this by checking here. []

Please return this form to the SBHC or to the location assigned by your school for SBHC communications.





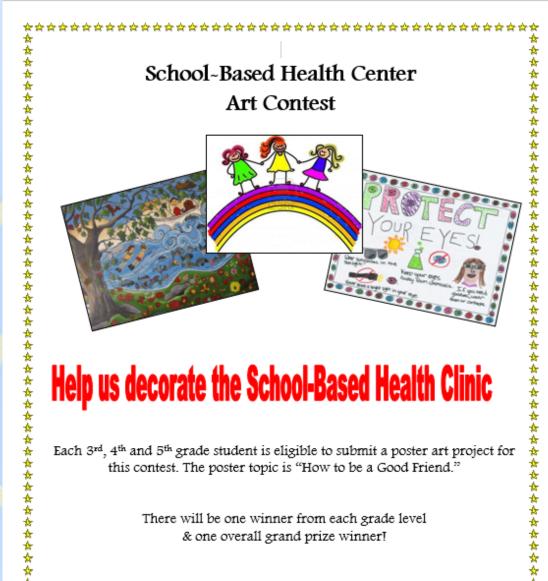
Germs don't take school breaks! Help keep your child from getting the flu this year by having them vaccinated!

Flu Vaccines are now available at Turner Elementary SBHC



The Turner Elementary School-Based Health Center now has flu shots available for students and faculty. We will work with school officials to offer a schedule for vaccination to ensure the children have access to obtain the vaccine with parental permission. Please see the following consent form which is required for your child to be vaccinated. If you have any questions, please contact the clinic office at 435-9934.





Grade winners will receive \$20 gift cards each & the Grand Prize Winner will receive a \$50 gift card!!!

☆☆☆☆☆

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*

**

Entries must be submitted by Friday, September 27th and the winners will be announced on Friday October 4th.



School-Based Health Center Art Contest







Help us celebrate dental health!

Each student is eligible to submit a poster art project for this contest.

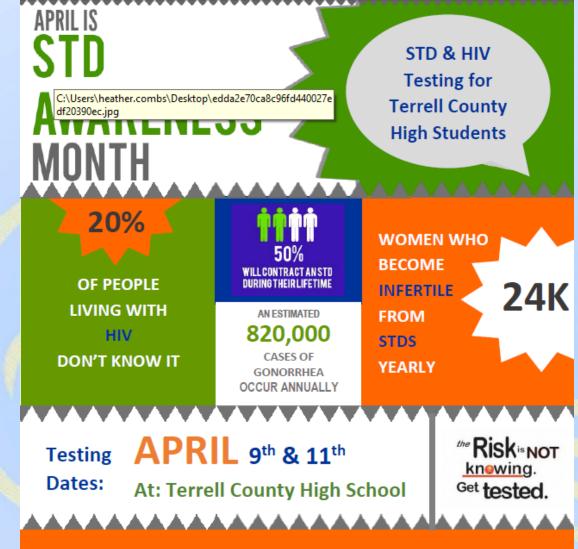
The poster topic is "Join the Super Smile Team."

There will be one winner from each grade level & one overall grand prize winner!

Grade winners will receive \$20 gift cards each & the Grand Prize Winner will receive a \$50 gift card!!!

Entries must be submitted by Friday, January 30th and the winners will be announced on February 6th.





The Terrell County School-Based Health Center will be conducting voluntary & confidential STD (chlamydia and gonorrhea) & HIV testing for students of Terrell County High School. All 9th – 12th graders can be tested confidentially (GA CODE § ANN. 31-17A-2). Testing will be conducted on a completely voluntary basis and will be strictly confidential. Treatment services will be available by referral or through the SBHC.

It is our hope to bring awareness and education to this vulnerable population.



Telehealth, Vision and Dental

We utilize telehealth services for primary care and behavioral health services

Vision services started through a grant provided by the OneSight Foundation. Full vision service program

Dental services started through a grant provided by the Delta Dental Foundation in 2014.



SBHC Transportation and Mobile Unit Services

- The School Systems that we work with provide transportation services so that all the students within the school system have access to all the SBHC services.
- MOU and Consent Form- Transportation Services
- Mobile Unit Services
 - Primary Care
 - Optometry
 - Dental Services (Coming Soon)



SBHC – User & Encounter Data 2014-2015





Current Productivity Data - Turner Elementary SBHC

Medical Services													
	January	February	March	April	May	June	July	August	September	October	November	December	Total
2013			130	133	69	0	7	139	158	253	203	143	1,235
2014	181	170	226	210	117	0	14	270	251	392	238	200	2,269
2015	237	237	242	286	176	0	0	63	277	322	226	200	2,266
2016	219	261	210	236	218	0	0	305	275	336	302	156	2,518
2017	77	351	275	332	274	0	0	377	206	351	289	144	2,676
2018	303	237	188	257	160	0	0	301	249	315	293	237	2,540
2019	222	258	235	297	237	0	0	306	244	329	271	169	2,568
2020	323	270	250	175	129	0	0	256	187	274	177	189	2,230
2021	135	175	270	277	227	0	0	243	283	279	173	146	2,208
'				(C.).									,

						Denta	al Services							
	January	February	March	April	May	June	July	August	September	October	November	December	Total	
2013													0	
2014													0	
2015									94	97	68	45	304	
2016	38	59	62	66	79	0	0	0	66	77	55	21	523	
2017	3	39	45	82	77	0	0	31	40	80	41	23	461	
2018	60	78	82	89	46	0	0	75	72	88	71	29	690	
2019	35	48	38	37	40	0	0	46	74	87	58	44	507	
2020	50	34	37	0	0	0	0	0	0	0	0	0	121	
2021	0	0	0	0	0	0	0	0	73	51	38	27	189	1



Productivity for all SBHC Sites

SBHC Productivity	2013	2014	2015	2016	2017	2018	2019	2020	2021
Turner Elementary SBHC	332	1,807	2,543	2,232	2,683	2,512	2,644	2,466	2,208
Alice Coachman Elementary SBHC				1,841	1,892	1,954	2,045	1,505	1,350
Robert Harvey Elementary SBHC						1,107	1,829	1,091	452
Live Oak Elementary SBHC						884	1,197	219	315
Albany Middle SBHC								178	587
All Dougherty County									
SBHC Sites	332	1,807	2,543	4,073	4,575	6,457	7,715	5,459	4,912
Terrell County SBHC				939	2,016	2,170	2,397	1,236	1,254
Dooly County SBHC				1,017	1,594	1,719	1,668	539	865
Specialty Services									
Turner Elementary - Dental			464	523	461	690	507	121	189
Albany Middle - Dental				435	283	255	453	96	154
Alice Coachman - Vision						948	1,121	495	350

SBHC Quality Sustainability

Establishing Health Outcomes Benchmarks Asthma

- Asthma Severity
- Asthma Assessment
- Asthma Action Plan
- Pharmacological Therapy
- Annual Flu Vaccine

Obesity

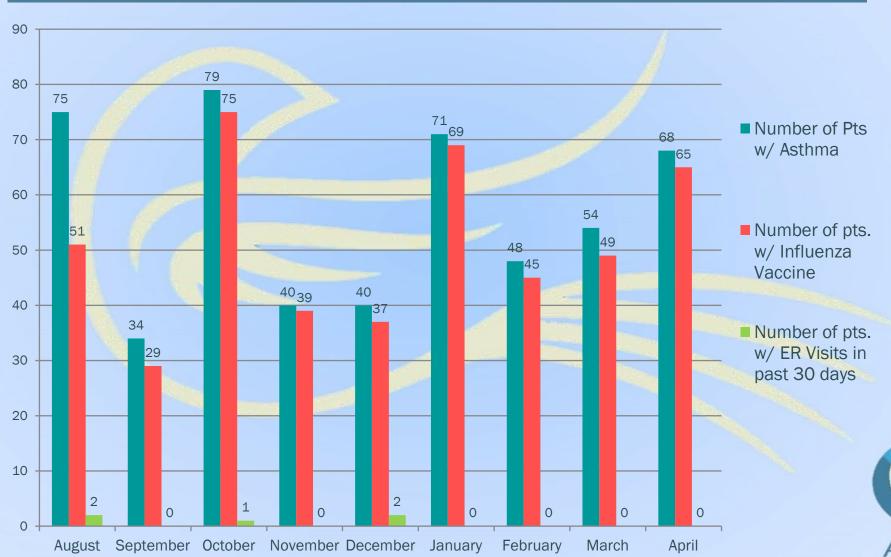
- BMI
- Blood Pressure
- Lipid Profile
- Hemoglobin A1c

Health Maintenance

- # Health Checks
- Screenings for Behavioral Health/Development
- Immunizations

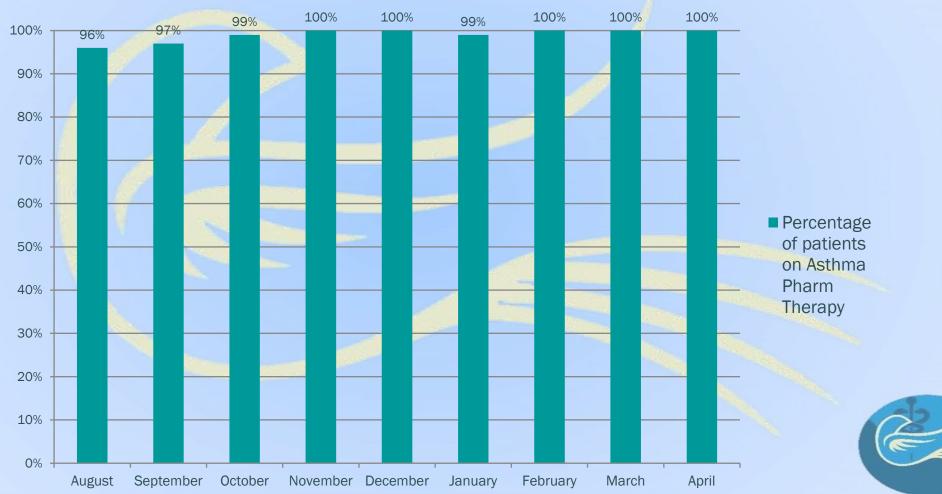


Asthma Quality Data 2014-2015



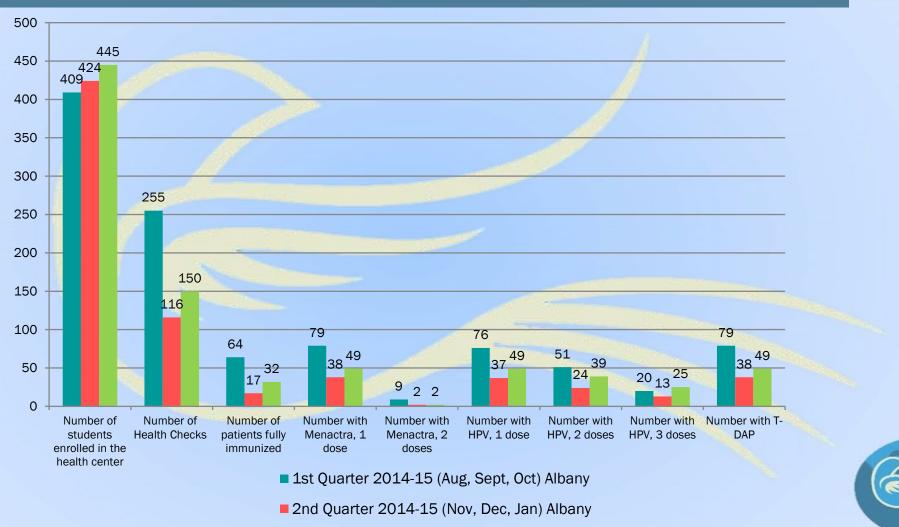


Asthma Quality Data 2014-2015



AAPHC

SBHC Health Maintenance Data 2014-2015



Srd Quarter 2014-15 (Feb, March, April) Albany



Supplementary Programs

 Hallways to Health (Obesity Prevention, Social & Emotional Health, and Employee Wellness)

- District Wellness (local & beyond)
- Fuel Up to Play 60 (school nutrition and exercise program)
- SHAPE America Grant (Wellness & Physical Fitness)
- Alliance for A Healthier Generation (Healthy Habits)
- SBHA DASH Project
- Others (YMCA Yoga, Employee Breakfast)



School & System Administration

Remember it's always about people

Build those relationships Who are the key players?

- Principal
- Assistant Principal
- School secretary
- PE teacher
- School counselor
- School nutrition
- Janitorial staff









Questions & Answers

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TODAY'S FACULTY





Patricia Collett, PA-C Chief Operations Officer Community Care of West Virginia <u>Visit Bio</u>

Debra Harrison, Ed.D. Assistant Superintendent, Upshur County Schools <u>Visit Bio</u> Delivering Innovative Healthcare to Rural West Virginia via School-Based Health

Presented by:



Patricia Collett, PA-C Chief Operations Officer



Debra Harrison, Ed.D. Assistant Superintendent, Upshur County Schools

Description of School-Based Services

Community Care of West Virginia established their first school-based health centers in Clay County in July 1995. Currently, Community Care has 54 school-based health centers in Braxton, Clay, Harrison, Lewis, Randolph, Upshur, and Pocahontas counties, including services provided at West Virginia Wesleyan College and Davis & Elkins College.

Services have included:

- Chronic health management
- Acute care
- Basic dental services
- Behavioral Health services
- Addiction & Recovery services

While all services are not provided in each county, fully-integrated services are available to students through a partnership with Upshur County Schools.

Timeline of School-Based Services



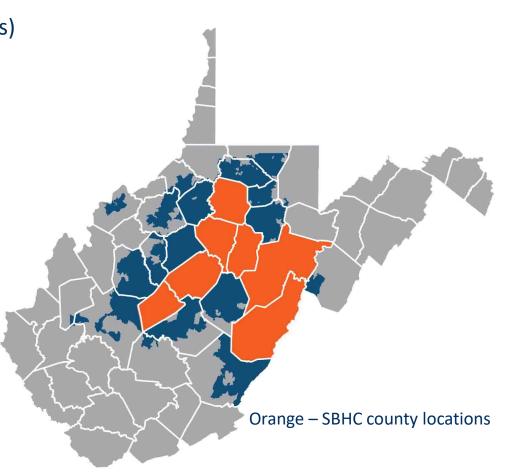
School-Based Health Current Program Enrollment

County School Enrollment (public schools) 2021-2022 Academic Year Braxton County: 1,715 Clay County: 1,624 Harrison County: 10,231 Lewis County: 1,826 Pocahontas County: 861 Upshur County: 3,475 Total: 19,732

2021-2022 Academic Year Enrollment in School-Based Health Students Enrolled: 13,091 (66% of total student enrollment)

Well Child Visits To-Date: 1,410 Provider Visits To-Date: 7,864

*enrollment numbers do not include virtual students.



School-Based Health Centers



Buckhannon-Upshur High School

> (Upshur County) French Creek Elementary School





Braxton County High School

Upshur County Schools – Student Demographics

Number of Students Enrolled: 3,941 (includes virtual students)

Male/Female Ratio: 594/606

Socio/Economics: 52.74% of students are living in households below the poverty level.

Racial/Ethnic Groups - Total Numbers: Asian: 10 Black: 30 Hispanic: 49 American Indian/Alaskan Native: 2 Multi-Race: 42 White: 3,808

<u>2021 – 2022 Academic Year – Upshur County Schools</u>

Behavioral Health Visits: 691

Addiction & Recovery Treatment Visits: 25

Medical Visits: 4,438

Questions & Answers

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TODAY'S FACULTY



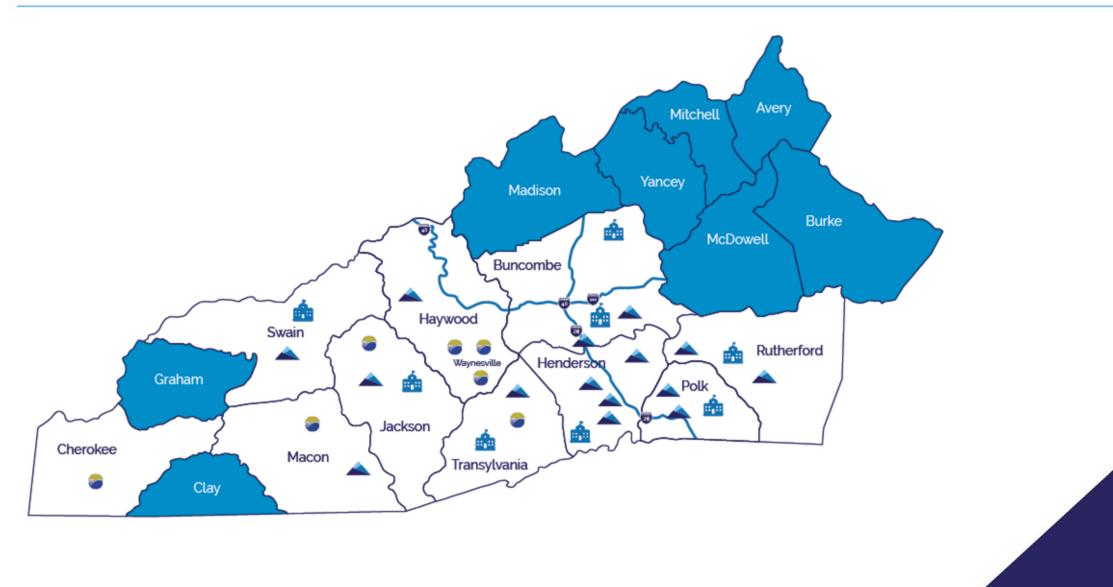
Tammy Greenwell, MPH, CPHQ, CPME

Chief Operations Officer Blue Ridge Health Organization <u>Visit Bio</u>

Deborah Calhoun, MPH Director of Community Partnerships United Way of Asheville and Buncombe County Visit Bio

Blue Ridge Health – School Based Services





Blue Ridge Health School-Based Services



- 7 county service area in Western North Carolina with over 30 SBH sites
- Sites are a combination of:
 - Physical locations with comprehensive services
 - School-linked services
 - Telehealth (medical) services
 - Tele-mental health services
 - Behavioral health only onsite



- Blue Ridge Health has utilized a school-based health services model of care since 1996
 - Original funding through federal 330 grant program
 - "Speak Out For Kids"
- From 2008 2011, we began expanding our program in Henderson County from (1) site to (4) traditional, comprehensive models
- Since 2011, expansion has taken many forms and models and spread to different counties
- This growth is due to overall organizational growth to multiple counties, embracing the SBHC model of care, and being responsive to school needs and providing support in those communities with the highest needs

What have we learned (and continue to learn)?



- Determined staffing models over time for efficiency and cost effective care
- Begin with Behavioral Health services and then expand primary care
- We rely on start-up funding for our first 2-3 years until the school-based health services model of care becomes sustainable
 - Partnerships with funders = success
- Leverage FQHC/CHC Infrastructure:
 - Billing for services under PPS rate
 - HRSA Grant opportunities NAP, SB-specific grants, others that fit model of care
 - Mobile dental and vision screening
 - Linkage to local CHC in service area as Medical Home/EMR integration
 - Teaching Health Center access to residents for SBHC
- Partnerships must be maintained, don't take them for granted! (both new and old)
 - Update MOU and BAA language to clarify FERPA versus HIPAA
 - Be flexible to the needs of your partners be a good listener!

COVID Pivots – we will keep!



- Continue to support COVID-19 testing, vaccinations/boosters, provide masks and in-home testing kits for families
- Assist students and families with missed medical care:
 - Well Child Care
 - Immunization needs (work with school nurses)
 - Other missed care during COVID-19
- Continue offering flexibility for medical and behavioral health services
 - Hybrid models between school and home



What partnerships have been successful?



Partnerships:

- Schools Providing SBHC sites and services, training for school teams, building protocols together, support the whole school/community/child
- Collaborative agencies Behavioral Health, PCPs, other FQHCs
- Associations SBHA, NCSBHA, NACHC, state PCA share resources and knowledge with others
- Funders local, regional, state, and national Dogwood Health Trust, NCORH, NCDPH
- *Newest Partner* Full Service Community School partnership UWABC

United Way of Asheville and Buncombe County





Community Schools



Public schools that partner with families and community organizations to provide well-rounded educational opportunities and supports for student and family success



Community Schools





Co-Creating a UNITED and Resilient Community



A Day In The Life



Community Schools

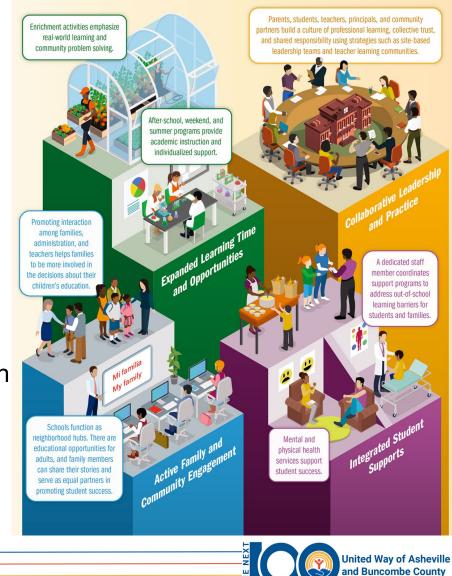
What the Four Pillars of Community Schools Look Like in Action

Four Pillars of Community Schools

- Integrated Student Supports
- Expanded and Enriched Learning Time and Opportunities
- Active Family and Community Engagement
- Collaborative Leadership and Practices

Full Service Community Schools

 Coordination of academic, social, and health services through partnerships.



A Bold Goal

By 2035, ALL Asheville City and Buncombe County students graduate from high school ready and fully prepared to pursue their goals and dreams.



School-Based Health Partnerships







United Way of Asheville and Buncombe County









Thank you!

Tammy Greenwell, MPH, CPHQ, CMPE

Chief Operations Officer

Blue Ridge Health

tgreenwell@brchs.com

Office:828-233-2288

Cell: 864-551-3395

Deborah Calhoun, MPH Director of Community Partnerships United Way of Asheville and Buncombe County deborah.calhoun@unitedwayabc.org Cell: 828-779-4875





Questions & Answers

SBHC RESOURCE HUB

https://www.sbh4all.org/resources/

- The Blueprint tools, examples, guides, and helpful resources
- Clinical Performance Measures QI Toolkit
- Sustainable Business Practices Toolkit
- School-Based Telehealth Playbook
- Vaccines and Immunizations

- Hallways to Health Playbook
- School Oral Health Playbook
- Children's Health & Education Mapping Tool
- Health Care Transition
- TA & Consulting
- And More!

RESOURCES

SBHC PLANNING CHECKLIST

https://www.sbh4all.org/ what-we-do/services/ School-Based Health Center (SBHC)

(SBHC) Planning Checklist

- 🗹 Establish SBHC regional planning committee
- ✓ Orient SBHC planning committee to the SBHC model
- Identify a medical sponsor organization and other potential health care provider partner organizations
- Visit existing SBHC(s)

SCHOOL·BASED HEALTH ALLIANCE

- Establish SBHC advisory group (e.g. principal, other school leadership, school social worker, students, parents/guardians, school nurse, sponsor organization member, and others.)
- Conduct community readiness assessment
- Conduct SBHC needs assessment
- Develop and implement marketing and engagement plan for target audiences and gatekeepers
- Identify potential SBHC location(s) via site visit(s) Select a well-considered location for the SBHC based on readiness assessment, needs assessment, site visit(s), and needed construction/renovation
- 🗹 Determine appropriate staffing
- Develop narrative business plan
- www.sbh4all.org | (202) 638-5872 | 1010 Vermont Ave. NW #816, Washington, DC 20005



Consulting Services The School-Based Health Alliance is a highly respected provider of extensive technical assistance and training to the school-based health care field. Our school health consulting staff has decades of experience in designing, operating, and evaluating school-based health center (SBHC) programs. Let us put that expertise to work for you!

- Complete a pro-forma business plan to determine funding needs and potential revenue
- Solicit capital and operational funding from variety of sources
- Develop necessary agreements and procedures to bill commercial and public insurance
- Draft and execute a memorandum of understanding among SBHC partners (e.g. school district, medical sponsor organization, behavioral health, oral health, local department of health.)
- Develop comprehensive SBHC consent form that includes bi-directional information sharing to promote continuum of care (e.g. school nurse, school counselor, PCP, dentist, parent/guardian.)
- Complete SBHC renovation/construction process
- Engage students to ensure SBHC space is student-friendly
- Purchase appropriate equipment and supplies
- Ensure appropriate technology access in collaboration with school

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RESOURCES INFOGRAPHICS



Since 1995, the School-Based Health Alliance (SBHA), a 501(c)(3) nonprofit corporation, has supported and advocated for highquality healthcare in schools for the nation's most vulnerable children. Working at the intersection of healthcare and education, SBHA is recognized as a leader in the field and a source for information on best practices by philanthropic, federal, state, and local partners and policymakers.

Among its primary functions, SBHA:

- Establishes and advocates for national policy priorities
- Promotes high-quality clinical practices and standards
- Supports data collection and reporting, evaluation, and research
- Provides training, technical assistance, and consultation

Why is School-Based Health Care so important?

Health is a critical factor in setting our children up for success. Healthy children are more likely to attend school ready to learn and achieve higher levels of educational attainment, providing greater access to future opportunities and a pathway out of poverty. Schoolbased health centers (SBHCs) have demonstrated their ability to increase access to health care, reduce emergency room use, lower Medicaid costs, and increase the use of sensitive services like mental health counseling. The Community Preventive Services Task Force recommends SBHCs as an evidence-based intervention to improve educational and health outcomes in low-income communities.

What is a School-Based Health Center?

School-based health centers (SBHCs) provide the nation's vulnerable children and youth with access to primary care, behavioral health, oral health, and vision care where they spend the majority of their time – at school. Working at the intersection of health and education, SBHCs collaborate with school districts, school principals, teachers, school staff, families, and students. This collaboration, care coordination, and youth engagement results in not only improved student, school staff, and community health literacy and outcomes, but also contributes to positive educational outcomes including reduced absenteeism, decreased disciplinary actions and suspensions, and families, provide them with a safe haven, and serve as a protective factor that reduces poor health and education outcomes.

School-Based Health Centers

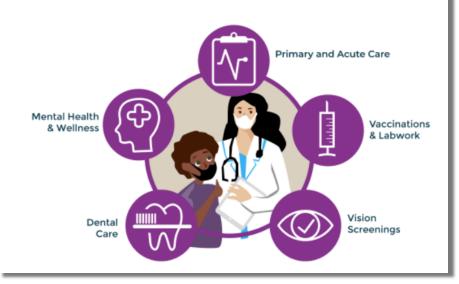
The Intersection of Health and Education

Health is a critical factor in setting our children up for success in life inside and outside of school. Schoolbased health centers (SBHCs) increase access to health care, contribute to positive educational outcomes, reduce emergency room use, lower Medicaid costs, and expand access to mental health services.



Healthy **Benefits**

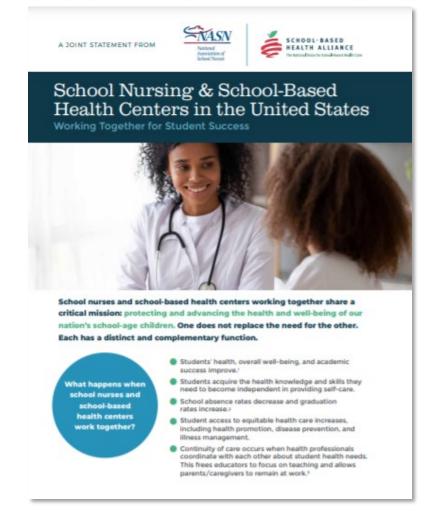
Services that SBHCs Provide



https://www.sbh4all.org/what-we-do/

School Nursing & School-Based Health Centers in the United States: Working Together for Student Success

https://www.sbh4all.org/wp-content/uploads/2021/05/SBHA_JOINT_STATEMENT_FINAL_F.pdf





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Spaces are Limited

National School-Based Health Care Conference

ACHIEVING XXX HEALTH EQUITY

THROUGH SCHOOL-BASED HEALTH CARE

VIRTUAL CONFERENCE J

June 27-30, 2022

Conference will include:

- Opening session begins June 27 at noon ET
- "School-Based Health Alliance Resources, Tools, and Technical Assistance Hour" each morning
- Keynote speakers and workshops will feature experts on a wide range of topics
- Poster session
- Earn a maximum of 6 CE hours for workshop sessions
- And more....

Visit our website for more information: <u>www.sbh4all.org</u>





Thank you!

Do School-Based Health Models Expand Your Community Reach? Yes! Come Learn the Recipes for Success-recording will be available on the Health Center Resource Clearinghouse. <u>https://www.healthcenterinfo.org</u>

Contact Us: School-Based Health Alliance info@sbh4all.org

Workshop Evaluation