



The Red Apple Award for Exemplary School-Based Health Centers

The California School-Based Health Alliance is launching a new statewide award to recognize school-based health centers (SBHCs) for exemplary school health practices.

Do you have an exceptional outreach program which draws students into your clinic? Are you addressing the social determinants of health by improving the health of the entire school community? Are your chronic disease management programs improving school attendance? If so, we want to hear all about it!

To be considered for the award, tell us about the SBHC, the sponsoring agency, and the person completing the application. Additionally, the SBHC should use the best practices checklist to identify areas of strength in clinic practices as well as choose an exemplary practice in one area and describe it. SBHCs are strongly encouraged to also share supporting materials including websites, flyers, reports, testimonials, pictures, and videos.

Awardees will be selected by the CSHA Board of Directors, and will be publicized by CSHA. Recipients will be presented with the Red Apple Award at the CSHA conference in Sacramento on May 6, 2016. Good luck and we look forward to learning about your SBHC and your outstanding work!

Part A. Tell Us About Your School-Based Health Center

I. About the SBHC

Name of SBHC:	
Date SBHC established:	
SBHC Address:	
Name of School:	
School where SBHC is based is (CHECK all that apply).	<input type="checkbox"/> Elementary school <input type="checkbox"/> Middle school <input type="checkbox"/> High school
Enrollment at host school (#):	
# SBHC patients: (<i>This # should include all unique patients within a 1-year period</i>)	
SBHC operating hours:	
Clinic services offered (CHECK all that apply).	<input type="checkbox"/> Medical <input type="checkbox"/> Mental health <input type="checkbox"/> Reproductive health <input type="checkbox"/> Health education <input type="checkbox"/> Dental health <input type="checkbox"/> Youth engagement <input type="checkbox"/> Nutrition/fitness

II. About the SBHC sponsoring agency

Agency:	
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Type of organization (CHECK only one).	<input type="checkbox"/> Community health center <input type="checkbox"/> FQHC <input type="checkbox"/> School district <input type="checkbox"/> Hospital	<input type="checkbox"/> Non-profit organization <input type="checkbox"/> Other:
Chief Executive Officer:		Email
Chief Medical Officer:		Email

III. Person completing the application:

Name:	
Title:	
Years at SBHC:	
Please describe your role at the SBHC in a few sentences:	
Contact Email:	
Contact Phone #:	

Part II. Use the Best Practices Checklist to Assess Your School-Based Health Center

The checklist gives us an overview of the clinic but we do not expect perfection. We expect SBHCs to display a range of practice across the principles. The checklist will be used as part of a holistic evaluation of your application.

1= not really happening, 2 = in process, sporadic, depends on funding, 3 = well-established, consistent

Principle A. Our SBHC delivers enhanced access by bringing health care directly to where students and families are and conducting active school-based outreach to connect students with care. **1 2 3**

1. There is someone in the health center (even if not a medical provider) every day that school is open.	1	2	3
2. Clinical services (medical, mental health or dental) are provided at the SBHC at least 16 hours a week.	1	2	3
3. The SBHC does not wait for patients to walk through the door but rather reaches out proactively to students by conducting mass screenings, establishing a clear process for school staff to make referrals, or following up on referrals by calling students out of class or contacting their families (when appropriate).	1	2	3
4. The SBHC accepts drop-ins/walk-ins.	1	2	3
5. There are no physical barriers that prevent students from accessing the SBHC (e.g., locked gates) or school policies that limit access (e.g., refusing to release students from class).	1	2	3
6. If serving teens, the SBHC maintains a teen-friendly environment by ensuring confidentiality, having a separate entrance/waiting area, having teen-only hours, and hiring staff interested in working with teens and/or training staff to work effectively with teens.	1	2	3
7. If serving children and/or parents, the SBHC hires staff members that understand the culture of parents in the school community and can speak their language.	1	2	3
8. The SBHC conducts active outreach in the school or community to inform students and	1	2	3

families about the services available (including, when relevant, services that minors can access without parent consent.)			
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Principle B. Our SBHC strengthens prevention and population health by connecting clinical care with public health approaches such as group and classroom education, school wide screenings and prevention programs, creation of healthier environments, or efforts to address the social determinants of health.

9. The SBHC regularly runs group programs for students on health and mental health (e.g., nutrition education, trauma support groups, asthma education, fitness, health careers).	1	2	3
10. The SBHC regularly delivers health education in the classroom, conducts schoolwide health campaigns or events, or has presentations or events to educate parents and family members.	1	2	3
11. The SBHC participates in efforts to establish a healthier environment in the school or community (e.g., school food policies, water availability, space for physical activity)	1	2	3

Principle C. SBHCs offer intensive support for the highest need students by being present on a daily basis to manage chronic disease, address behavioral health issues, deal with crises, and help students and families access resources.

12. The SBHC provides medical case management for all students as needed, such as monitoring or follow up for chronic disease, hospitalizations, injuries, acute illnesses, or medication administration. (Note: this function may be performed through coordination with a school nurse.)	1	2	3
13. The SBHC provides enabling or collateral services to help students access services (e.g., meeting with teachers, setting up appointments, assisting with insurance enrollment, explaining medical issues or health benefits)	1	2	3
14. The SBHC offers behavioral health services and psychosocial case management for students with emotional, social, or mental health issues.	1	2	3

Principle D. SBHCs have a shared mission with the school to improve academic achievement by working together to address absenteeism, school climate, and classroom behavior and performance.

15. SBHC staff and school administrators meet regularly to discuss policies and procedures.	1	2	3
16. The SBHC and school staff work together to address the needs of students who are struggling with attendance, behavior, or academic performance issues.	1	2	3
17. The SBHC helps students develop leadership skills and have opportunities for student career pathway development.	1	2	3
18. The SBHC and school staff work together on activities and programs that promote positive climate and school safety.	1	2	3
19. The SBHC supports teachers' health and wellness (e.g., support groups, stress management, workplace wellness).	1	2	3

Principle E. SBHCs are committed to functioning as part of an integrated health care system by communicating and coordinating care with other providers, partners and payers.

20. When serving patients who have an assigned primary care provider that is not the SBHC's sponsoring organization (for example patients of Kaiser or private doctors), the SBHC shares information about non-confidential services and coordinates care when needed.	1	2	3
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Total Score: _____ out of 60

Part III. Describe Your Exemplary Practice

Which principle does your exemplary practice fall under? (please choose one)

- **Principle A.** SBHCs deliver enhanced access by bringing health care directly to where students and families are and conducting active school-based outreach to connect students with care.
- **Principle B.** SBHCs strengthen prevention and population health by connecting clinical care with public health approaches such as group and classroom education, school wide screenings and prevention programs, creation of healthier environments, or efforts to address the social determinants of health.
- **Principle C.** SBHCs offer intensive support for the highest need students by being present on a daily basis to manage chronic disease, address behavioral health issues, deal with crises, and help students and families access resources.
- **Principle D.** SBHCs have a shared mission with the school to improve academic achievement by working together to address absenteeism, school climate, classroom behavior, and performance.
- **Principle E.** SBHCs are committed to functioning as part of an integrated health care system by communicating and coordinating care with other providers, partners, and payers.

In 500 words or less, please describe your exemplary practice. Use these guiding questions to craft your response.

What community need does your practice address? How did the practice develop? How did you work with your school to implement the practice? What have the challenges and successes of this practice been? What has the result of this practice been? How does this practice relate to the principle you selected?

*A sample exemplary practice is described on the following page.

List and briefly describe supporting materials that you are attaching to support your application. Supporting materials are optional but appreciated.

Sample Exemplary Practice: Schoolwide Screenings

Sunnyside SBHC has been open for five years at Sunnyside High, a comprehensive high school in an urban neighborhood. At the beginning of each school year, the Sunnyside SBHC conducts a registration drive with all 9th graders. The goal is to have every 9th grade student come through the clinic, meet a provider, and complete a brief screening. The registration drive was conducted over a period of two days dedicated exclusively to this activity. Of the 250 9th grade students at the school in 2015, 100 were screened during the two-day drive. Another 25 had already made a visit to the clinic and 50 were contacted during the 8 weeks following the drive.

Our steps for conducting a successful 9th grade registration drive:

- Obtain list of ninth grade students from the school principal.
- Cross check against registered patients and remove students who have already accessed services at the SBHC.
- Work with school administration to determine which class to pull students from for the registration drive. This should be a class that all students in 9th grade take. At Sunnyside SBHC, 9th grade English was chosen.
- Visit classes and help students fill out registration paperwork in class.
- Set dates for registration drive; secure two to three additional staff to help with screening; clear schedule so that providers have no regular patients.
- Get drinks and snacks to have for students when they enter the SBHC.
- Print out intake forms.
- Obtain class lists from English teacher for each period. Send a “runner” to class and bring students to the health center in groups based on the number of providers you have. At Sunnyside, we had four providers seeing students: nurse practitioner, health educator, social worker, and our clinic director. Because our nurse practitioner was able to bill only for students with Medi-Cal, we created the groups so that there is one student with Medi-Cal in each.
- Ask students to complete intake forms in the waiting area. Have the front desk staff person assign them to a provider. Call the student in to meet with the provider in a confidential space when the provider is available. Each visit takes approximately 10-15 minutes.
- Sign all students up with Family PACT and give them their card, unless they want it to be kept at the clinic.

Of the 100 students screened, 52 required a follow up appointment. The most common reason for a follow-up visit was for mental health services, with 22 students requiring follow-up. Common issues were frequent sadness or depression, family issues, school performance and social issues including bullying. One young man who was getting mostly F's and using marijuana everyday reported that his father is struggling with alcoholism and his mother worked until midnight so the student is frequently alone. A second frequent need was for services related to sexual activity. Fifteen students were in need of STI testing or birth control. In addition, 9 students needed general check-ups or immunizations and 9 students requested appointments for nutrition education or weight loss.

This practice exemplifies **Principle B** by connecting clinical care with population health approaches such as school wide screenings. In addition, our screening process has allowed us to work with the school in way that integrates our work with theirs. The screenings were so well-received that the principal has already asked us to do them again in 2016!