SBHCs

(School-Based Health Centers)

101

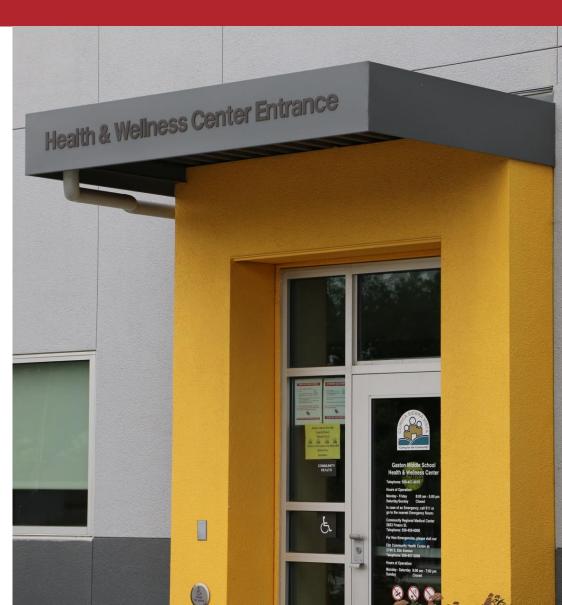


Putting Health Care in Schools

The California
School-Based Health
Alliance is the statewide
non-profit organization
dedicated to improving
the health & academic
success of children &
youth by advancing health
services in schools.

Learn more: schoolhealthcenters.org





Become a member, get exclusive benefits

- Conference registration discount
- Tools & resources
- Technical assistance

Sign up today: bit.ly/CSHAmembership







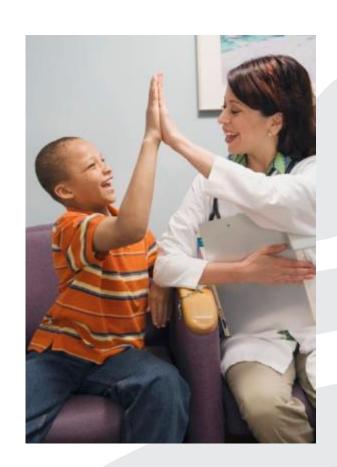
WORKSHOP OBJECTIVE

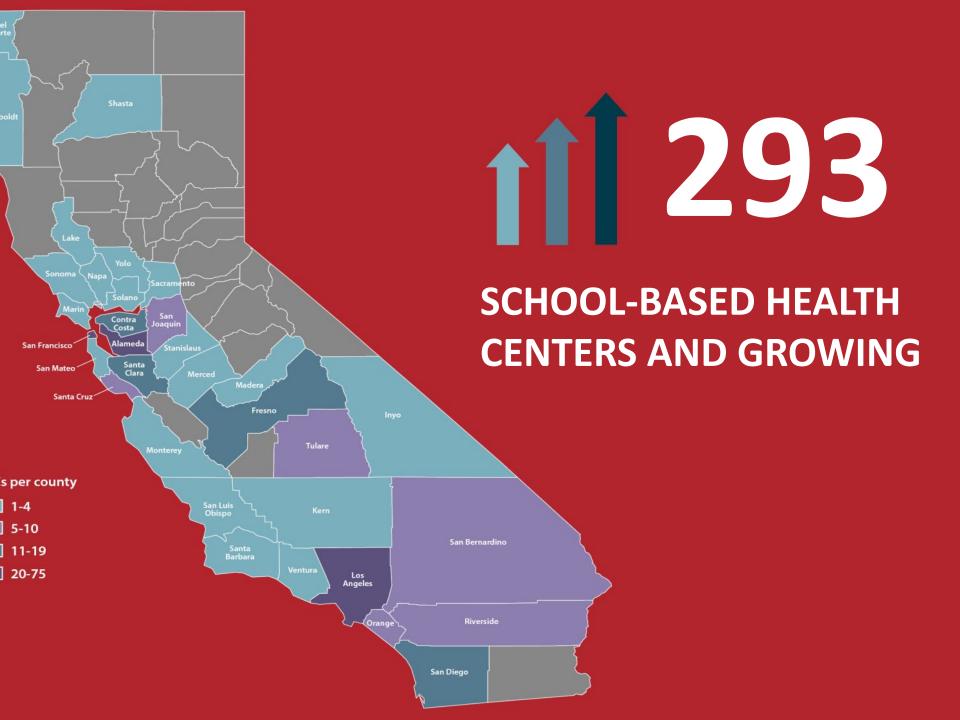
Provide attendees with the tools to launch the first steps in SBHC planning process



WHAT IS A SCHOOL-BASED HEALTH CENTER?

- Delivers primary medical care PLUS other services
- Located on or near a school campus
- Serves students and sometimes siblings, family members, and the community
- Promotes school-wide health







WHAT SERVICES ARE PROVIDED?

Medical 85%

Mental Health 70%

Dental Prevention 65%

Reproductive Health 60%

Youth Engagement 51%

Dental Treatment 35%



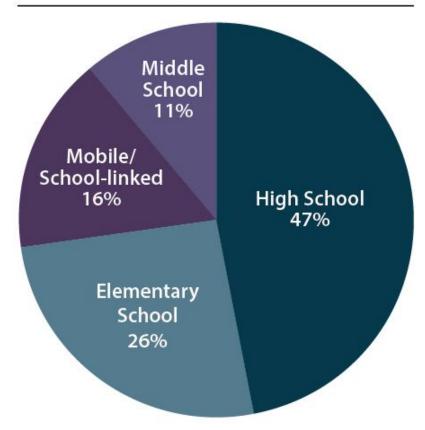
WHO IS SERVED?



83% of SBHCs serve broader community

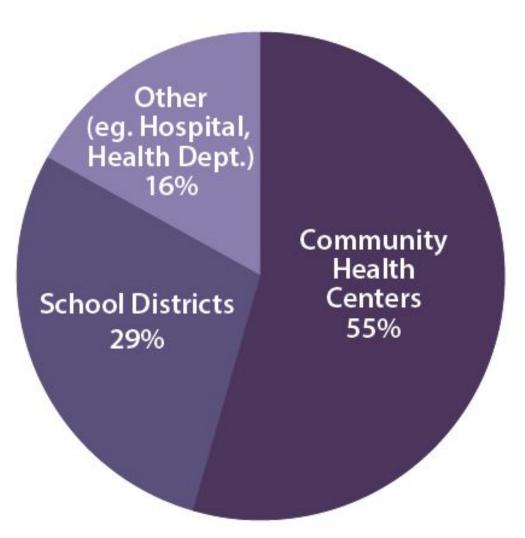
1 7% of SBHCs serve students only

School Levels Served





WHO RUNS SCHOOL-BASED HEALTH CENTERS?



School-Based Health Centers Are a Proven Approach to Health & Education Equity



EASY & SAFE ACCESS

Meet students where they are in school



INTEGRATED HEALTH CARE

Coordination between school and community health care providers



WHOLE CHILD APPROACH

Physical + Mental + Social Emotional Health

SBHC IMPACT

- Increased seat time, decreased absenteeism ^{1,2}
- Increased access to health care 3,4,5,6,7,8
- 10-21x more likely to use MH services at SBHC²
- Reduced ED utilization for asthma ⁹
- Increased school connectedness 10,11,12
- Reduced risky behaviors esp.
 LGBTQ youth^{13,14}



An example of SBHCs in action



MORE THAN HEALTH CARE – ITS PUBLIC HEALTH

SBHCs can sometimes see 90%+ of the student body

Ongoing & Mass Screening for medical home, insurance, vaccines, legal needs, STIs etc.

Holiday Food, Clothing & School Supply Giveaways

Health Fairs & Wellness Campaigns

Staff Wellness Activities

PBIS & COST Support

PD For Staff & Teachers





Peer Health Educators

Youth Engagement Models

- Youth Advocacy Projects
- Research Teams (CBPR)
- Youth Advisory Boards
- Health Career Pipeline Projects





SBHCS THRIVE ON PARTNERSHIPS

- The best SBHCs are a result of a strong link between the school district and clinic provider.
 Other beneficial partners can include:
 - Community-based organizations
 - Municipalities
 - County public health departments
 - Mental health providers
- SBHCs work best when well integrated into the school environment



Best Practices in Coordination

Communication:

- Have a strong MOU!
- Monthly partner meeting
- Weekly Coordination of Services Team (COST) meetings
- Teacher/staff outreach & PD

Student Access:

- Get consents at registration!
- Plan on how students access services

Plus Tb tests for teachers/staff

How SBHCs Are Financed



- Reimbursement through Medi-Cal, health plans, Family PACT, Child Health and Disability Prevention Program (CHDP), and contracts for mental health services
- School district contributions and in-kind support of space, nurses, utilities, and custodial services
- Sponsoring agency contributions or subsidies
- Government and private grants

HOW ARE FACILITIES FINANCED?

While some facilities require substantial investment, some are more affordable. Services can be housed in:

- converted classrooms
- on-site portables
- mobile vans

Facility funding options:

- school modernization or construction grants
- local bond measures
- federal & foundation grants



Opportunities to Leverage New State Funding for SBHCs

Student Behavioral Health Incentive Program

- \$400 million
- Incentive program through health plans



Behavioral Health Infrastructure Grants

- \$310 million
- capital projects to address child and youth BH infrastructure

Community Schools Partnership Program

- \$2.6 billion
- to start and expand community Schools

School-Linked Behavioral Health Partnerships

- \$500 million
- competitive grants to build partnerships and network for providers

First Steps



Use the <u>Student Health Index</u> to identify schools in your region



Download <u>Vision to Reality</u> - updated version coming soon



Start planning your SBHC

- Form a planning committee
- Conduct a needs assessment
- Identify potential partners
- Brainstorm facility funding sources

CSHA is here for you!



Tour a SBHC in your region
(Or <u>watch virtual tours</u> from across the state)

Explore our resources on funding, sustainability, start-up, outreach and more

Become a member of CSHA

STAY CONNECTED





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Citations

- 1. VanCura M. (2010). The Relationship between School-Based Health Centers, Rates of Early Dismissal from School, and Loss of Seat Time. Journal of School Health. 80(8): 371-377.
- 2. Walker SC, Kerns SEU, Lyon AR, et al. (2010). Impact of School-Based Health Center Use on Academic Outcomes. Journal of Adolescent Health. 46: 251-257.
- 3. Soleimanpour S, Geierstanger SP, Kalley S, et al. (2010). The Role of School Health Centers in Health Care Access and Client Outcomes. Am J Pub Health. 100(9): 1597-1603.
- 4. Guo JJ, Wade TW, & Keller KN. (2008). Impact of School-Based Health Centers on Students with Mental Health Problems. Public Health Reports. 123: 768-780.
- 5. Wade TJ, Mansour ME, Guo JJ et al. (2008). Access and Utilization Patterns of School-Based Health Centers at Urban and Rural Elementary and Middle School. Public Health Reports. 123: 739-750.
- 6. Allison MA, Crane LA, Beaty BL, et al. (2007). School-Based Health Centers: Improving Access and Quality of Care for Low-Income Adolescents. Pediatrics. 120(4): e887-e894.
- 7. Anglin TM, Naylor KE, & Kaplan DW. (1996). Comprehensive School-Based Health Care: High School Students' Use of Medical, Mental Health, and Substance Abuse Services. Pediatrics. 97: 318-330.
- 8. Santelli JS, Kouzis A, & Newcomer S. (1996). School-Based Health Centers and Adolescent Use of Primary Care and Hospital Care. J of Adol Health. 19(4):267-275.
- 9. Mansour et al. (2008). Webber MP, Carpinello KE, Oruwariye T, et al. (2003.) Burden of Asthma in Inner-city Elementary Schoolchildren: Do School-Based Health Centers Make a Difference? Archives of Pediatric and Adolescent Medicine. 157: 125-129.
- 10. Strolin-Goltzman J. (2010). The Relationship between School-Based Health Centers and the Learning Environment. Journal of School Health. 80(3): 153-159.
- 11. McCord MT, Klein JD, Foy JM & Fothergill K. (1993). School-Based Clinic Usage and School Performance. Journal of Adolescent Medicine. 14(2): 91-98.
- 12. Geierstanger SP, Amaral G. School-Based Health Centers and Academic Performance: What is the Intersection? April 2004 Meeting Proceedings. White Paper. Washington, DC: National Assembly on School-Based Health Care; 2005.
- 13. Ricketts SA & Guernsey BP. (2006). School-Based Health Centers and the Decline in Black Teen Fertility During the 1990s in Denver, Colorado. American Journal of Public Health. 96(9): 1588-1592.
- 14. Braun, R.A. & Provost, J.M. (2010). Bridging the Gap: Using School-Based Health Services to Improve Chlamydia Screening Among Young Women. American Journal of Public Health. 100(9): 1624-1629.