Starting a School Health Center in Illinois: What you need to know

Panel:

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Objectives

• Define the school health center model nationally and in Illinois
• Define partners and collaborators in your community
• Understand the importance of the needs assessment
• Identify potential funding sources
• Identify resources
• Identify potential staffing and collaboration models
EverThrive Illinois
formerly Illinois Maternal and Child Health Coalition

EverThrive Illinois works to improve the health of women, children, and families over the lifespan through community engagement, partnerships, policy analysis, education, and advocacy.

www.ilmaternal.org

School-Based Health Alliance
formerly the National Assembly of School Based Health Centers

SBHA mission is to improve the health status of children and youth by advancing and advocating for school-based health care.

www.sbh4all.org
Core Mission of School Health Centers

- Bringing services to students where they learn and grow
- Addressing critical health issues
- Serving kids in need
- Supporting parents
- Supporting schools

- Accessible
- Affordable
- Child & Adolescent friendly staff
- Safe environment
- Promotes healthy lifestyles
- “One stop shop”
State of the Union:
School Health Centers in IL
Data from 2012

Number of school health centers in Illinois that provide quality health care services that help students succeed in school

Number of students enrolled to receive services including mental health counseling, immunizations, nutrition counseling and asthma care

Number of visits for medical, mental, oral health, and health education services in 2012.
Types of School Health Centers and Service Models

Types:
1. Health centers, located on school grounds
2. Health centers, located off school grounds close to a school, or they serve more than one school

Service Models:
- Students of home school only
- Students of several schools
- Students and Family
- Students and Community
- Primarily Community
Organizational Structure

• Planned partnerships and on-going advisory from health care providers, school districts, local health departments, faith leaders, community leaders and organizations, parents and students

• Sponsoring agencies can be hospitals, health departments, universities, community health centers, schools and community agencies
Collaborative Partnerships

Benefits
• Share responsibility
• Share resources
• Share authority
• Share accountability
• Share rewards

Challenges
• Territorial questions
• Confidentiality
• Conflicting priorities
• Political roadblocks
• Financial resources
Who to consider for the Advisory Board

- Local health department
- Community or rural health center
- Community and/or teaching hospital(s)
- Mental health, substance abuse, and social service agencies
- Private physicians
- University faculty
- Elected Officials
- Business and community leaders
- Faith community
- School superintendent, board, or designee
- School administration and Faculty (school nurse, teachers, principals, guidance counselors, physical education, nutrition/food services)
- Students
- Parents
The Role of the School Nurse

• Maintain school nurse mandated functions (vision and hearing screening, immunizations)

• Member of the school health center team
  – Know medical needs of school population and Identify students for services at the school health center
  – Partner with school staff for health education
  – Market the center to students, parents and school staff
  – Serve as a liaison between the school health center and school staff
Role of the Superintendent, Principal, Social Worker, and School Secretary

• Member of the School Health Center Team
• Assist with outreach, marketing, parent involvement
• Advisory Board member
• Biggest Advocate or Biggest Foe
• Meeting with Principal is required as part of Certification Review
Conduct the Needs Assessment

A process for:
- identifying needs and resources in a community
- determining gaps between what a situation is and what it should be
- establishing priorities

An opportunity to paint a picture of the conditions in a community and sharpen your perceptions of the critical issues children and families face.
Why Identify Needs and Resources?

• Better understand the community in which you will be working
• Become aware of needs and concerns you never knew about
• Locate hidden strengths or underutilized resources that could be developed
• Document need
• Make sure future actions are aligned with expressed community needs
• Garner greater support and involve more people in subsequent action
• Give voice to individuals in the community who have not traditionally been solicited for comment
• Convince outside funders and supporters
• Make decisions based on priorities and documented needs
Funding for School Health Centers

Maslow’s Hierarchy of Need

It’s hard to focus on best practice standards when your needs are rooted in basic survival.
Multiple Funding Sources/ Models for School Health Centers

- Federal grants
- State grants
- Local funding
- Community partnership contributions
- Foundations
- Patient Revenue
- Mixing several or all funding sources
“The community benefit standard is the legal standard for determining whether a nonprofit hospital is exempt from federal income tax under section 501(c)(3) of the Internal Revenue code”

- Provide treatment and/or promote health and healing as a response to identified community needs

- ACA requirements - community health needs assessment and planning
  - Responsive strategic plan
  - Failure may result in a $50k fine

- How can SHCs participate?
Patient Revenue

- Medicaid/All Kids
- Private insurance
- Patient fees

**REMEMBER:** No child can be refused services because of inability to pay.
Other Funding

• Education funding
  – ISBE
  – NCLB (No Child Left Behind)/ESEA
  – IDEA (health-related special education services)
• State Funding for SHCs in Illinois
  – Title XX (least)
  – Tobacco Tax Settlement
  – Title V Block Grant

• Public and private grants (Universities, United Way)
• City and county funds
• Local businesses (banks, insurance companies)
• Churches
Community partners

• In-kind contributions (staff, facilities, supplies) from
  – Schools,
  – Hospitals,
  – Health departments, and
  – Community agencies

• Examples of partners
  – Parents’ employers
  – Parents’ health insurance agencies
  – Local businesses
  – School districts
  – Universities
Foundations

• Robert Wood Johnson
• WK Kellogg Foundation
• Illinois Children’s Healthcare Foundation
• McDonald Foundation
• Donors Forum (www.donorsforum.org)

For other foundation funding opportunities visit
  – The Grantsmanship Center at http://www.tgci.com
  – The Foundation Center at http://fdncenter.org
Illinois Requirements for School Health Centers
Illinois Requirements

- Data reporting (FUNDED VS UNFUNDED)
- Policies and Procedures
- Certification
- Compliance with standards and guidelines set by:
  - ACOG - NCQA
  - AAFP - AAP
- EPSDT Standards

- Advisory Board
- Services
  - Basic medical-acute care, physicals, immunizations
    - Pregnancy testing
    - STI testing and treatment
    - Family planning --on site or by referral
  - Health risk assessment
    - Regular clinic users
  - Documented appropriate anticipatory guidance
  - Mental health
  - Dental
  - Health education

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Illinois Requirements

• Accessibility
  – 24 hour access to medical services

• Confidentiality
  – HIPAA (Clinic)
  – FERPA (School)
      Family Education Rights and Privacy Act
  – Medical Records
  – Relationship to school
Parental Consent

- SHCs must have a parental consent policy
- Consent form must include:
  - Services to be offered
  - Statement about confidentiality/HIPAA
  - Billing information
  - Release of information
- Review state statutes regarding age of consent for various health care services
Confidentiality

- Confidential versus non-confidential services
- Access to confidential services as allowed by Illinois state law (IL Minor Consent Law)
- Release of information
- Providing follow-up information to school personnel and outside agencies
- Informing students of confidentiality procedures and limits of confidentiality
Services to Consider for All Grade Levels

- Primary Care including annual risk assessment
- Immunizations
- Health Education
- Physical Examinations
- Mental Health
- Laboratory Services
- Medications
- STI/HIV Screening and Treatment

- Nutrition Counseling
- Vision, Hearing, and Dental Screening
- Social Services
- Chronic Disease co-management
- Specialty Care Referrals
- Dental
- Substance Abuse Counseling
Staffing

• Required Staffing
  – Medical Director
  – MD, Nurse Practitioner, or Physician Assistant

• Recommended Staffing
  – Clinically-trained Mental Health Practitioner
  – Health Educator
  – Medical Receptionist/Other Support Staff
Where are Requirements Documented?

- Illinois Standards of Care for School Health Centers: Illinois Administrative Code, Chapter I, Subsection 2200.60
- Healthcare and Family Services: www.hfs.illinois.gov
- EPSDT guidelines: www.hfs.illinois.gov/mch/wellchild_prov.htm
- Illinois State Board of Education: www.isbe.state.il.us
Illinois Department of Public Health

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