



Expanding School-Based Health in Massachusetts: An Analysis

Lunch and Learn Webinar

June 23, 2020

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Vision: Healthy Communities, Healthy People



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Objectives

Today we are going to:

- Provide an overview of school-based health in the U.S.
- Discuss the purpose and benefit of school-based health
- Compare school-based health and school health services
- Discuss areas of opportunity for school-based health in Massachusetts
- Discuss policies that impact school-based health success in Massachusetts



Overview of School-Based Health Centers

What: School-based health centers (SBHC) provide a combination of **medical, mental, and dental health** services to children in Kindergarten through 12th grade.

Where: SBHCs serve communities in urban (46%), rural (36%), and suburban (18%) areas. SBHCs are in **48 states**, D.C., and Puerto Rico, giving over **6 million students access nationwide**.

When: The first few SBHCs began in the late 1960s/early 1970s; today there are over **2,500 SBHCs**.

Why: SBHCs provide health care access to **underserved youth**. They are **strategically located in low-resource** neighborhoods and communities.

How: SBHCs work closely with and **complement the work of school nurses** by providing a referral site for comprehensive primary, mental, oral, or vision health care. SBHCs are administered and **sponsored by health organizations** such as FQHCs or hospitals.



Comparison of School Health Models

Model	Staffing	Services Provided
School Health Services	A school nurse operating under the license of an off-site physician	<ul style="list-style-type: none"> - Assessment and treatment of a range of illnesses - Management of chronic diseases - Administration of medication prescribed by a PCP - First aid and emergency care - Identification of students at risk for a variety of issues such as alcohol abuse, bullying, and depression - Health screenings
School-Based Health Center	A multidisciplinary team of advanced practice providers operating under their own licenses , which typically includes nurse practitioners, physicians, physician assistants, social workers, counselors, and community health workers	<p>All services provided in the school health services model, and:</p> <ul style="list-style-type: none"> - Primary medical care - Integrated behavioral health care - Dental/oral health care - Reproductive health services - Health education and promotion - Substance abuse counseling - Case management - Nutrition education



Comparison Continued

Model	Eligible Students	Records
School Health Services	Services available to all students	<ul style="list-style-type: none"> - FERPA - In general, parents have access to the educational information of unemancipated minors
School-Based Health Center	<ul style="list-style-type: none"> - All students are eligible; parental consent is required - SBHC can also provide services to enrolled school staff members, students' families, and other community members. 	<ul style="list-style-type: none"> - HIPAA - In general, parents have access to the health information of unemancipated minors. - Parents do not have access to information that pertains to a service for which minors may give consent - Under Massachusetts law, a minor can consent to their own medical treatment for substance use disorder, inpatient mental health treatment, diseases dangerous to the public health and sexually transmitted diseases, pregnant teens, parenting teens, and family planning services.



School-Based Health Delivery Models

1. Traditional (82%)

- The SBHC and providers are physically on-site at the schools' campus

2. School-linked (4%)

- The SBHC site is off campus, but in close proximity to the school

3. Mobile (3%)

- A mobile van parked on or near campus provides all SBHC services

4. Telehealth Exclusive (12%)

- There is a site on campus through which all services are delivered remotely

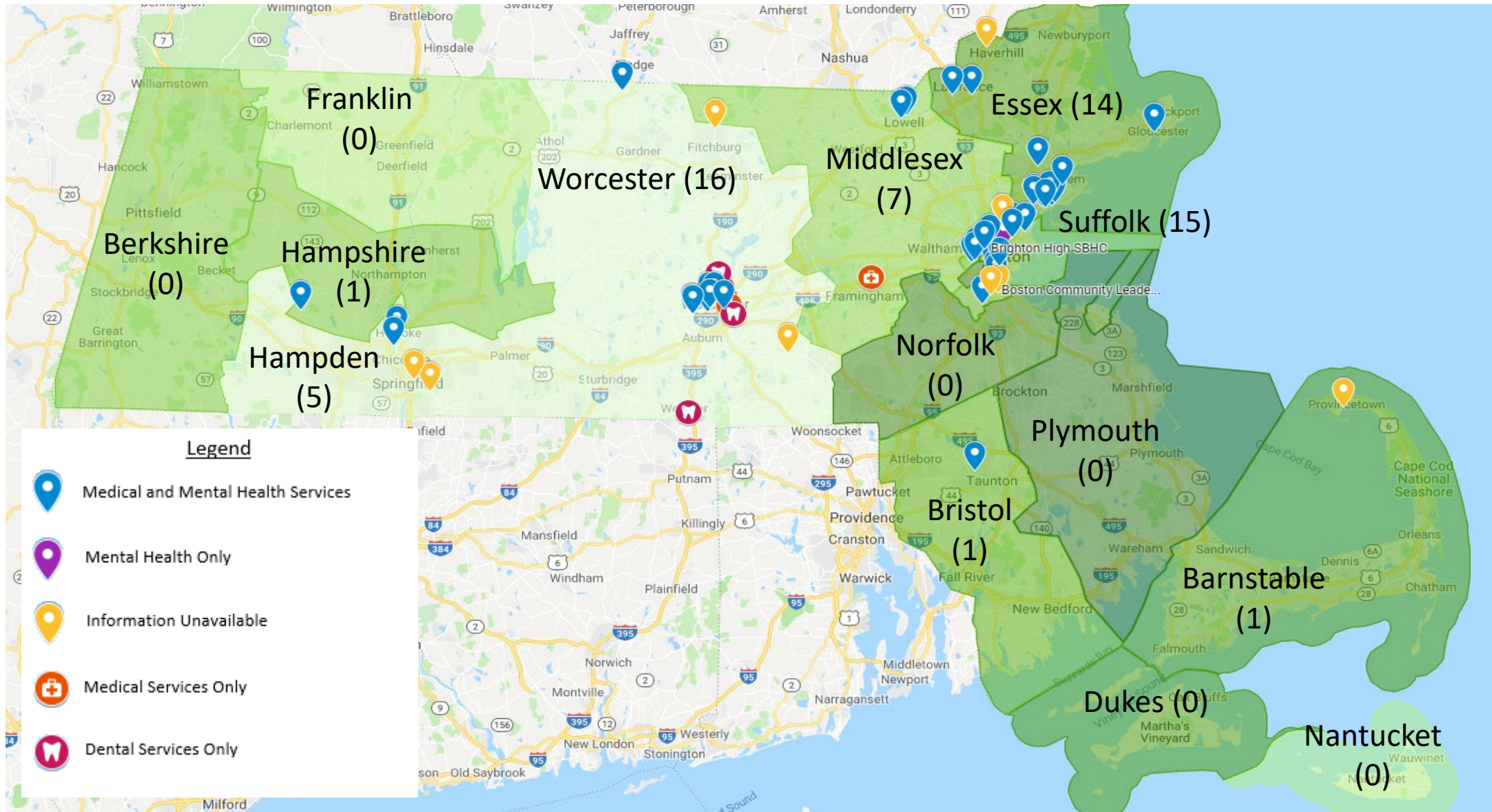


Impact of School-Based Health Centers

- SBHC improve both **health and educational outcomes**
 - Health: decreased asthma morbidity, increased recommended immunizations, improved self-report mental health status, increased contraceptive use among sexually active females
 - Education: Reduced school suspension and high school non-completion rates
- SBHC **promote health and educational equity**



Massachusetts SBHCs



SBHCs to Advance Health Equity



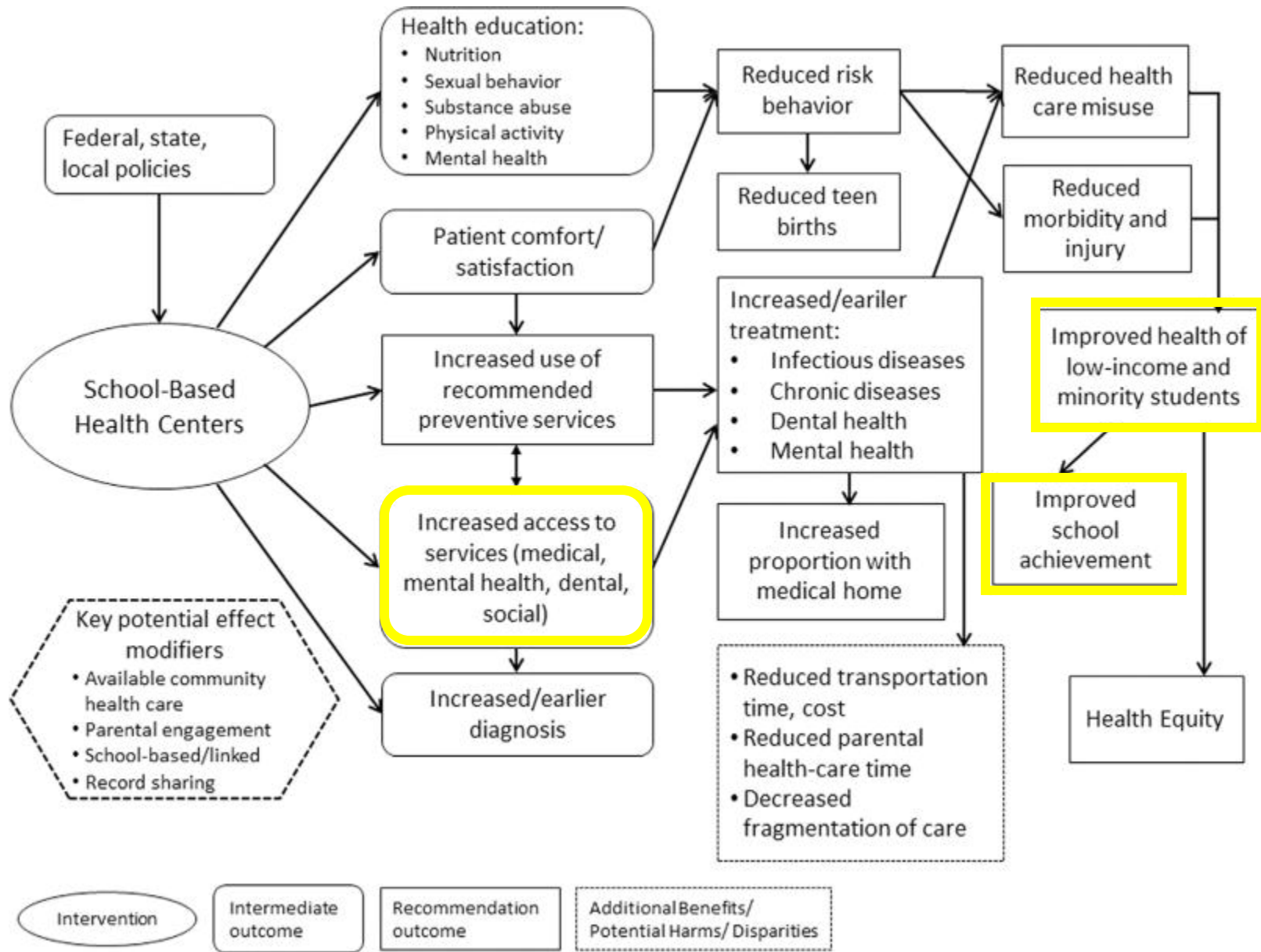
“If school-based health centers (SBHCs) can overcome educational obstacles and increase receipt of needed medical services in disadvantaged populations, they can advance health equity”



Knopf, J. A., Finnie, R. K., Peng, Y., Hahn, R. A., Truman, B. I., Vernon-Smiley, M., Johnson, V. C., Johnson, R. L., Fielding, J. E., Muntaner, C., Hunt, P. C., Phyllis Jones, C., Fullilove, M. T., & Community Preventive Services Task Force (2016). School-Based Health Centers to Advance Health Equity: A Community Guide Systematic Review. *American journal of preventive medicine*, 51(1), 114–126. <https://doi.org/10.1016/j.amepre.2016.01.009>

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Office of Regional Operations

Analytical Framework



Knopf, J. A., Finnie, R. K., Peng, Y., Hahn, R. A., Truman, B. I., Vernon-Smiley, M., Johnson, V. C., Johnson, R. L., Fielding, J. E., Muntaner, C., Hunt, P. C., Phyllis Jones, C., Fullilove, M. T., & Community Preventive Services Task Force (2016). School-Based Health Centers to Advance Health Equity: A Community Guide Systematic Review. *American journal of preventive medicine*, 51(1), 114–126. <https://doi.org/10.1016/j.amepre.2016.01.009>

Assessing Areas of Opportunity for SBH

Indicators used to identify:

- Counties with higher proportions of economically disadvantaged students
 - Free and reduced price lunch enrollment rate
 - Population under 18 living under the poverty level
- Educational attainment
 - 5 year high school graduation rate
- Health status and access to healthcare
 - Asthma related hospitalization and emergency department visit rates
 - Children not meeting school immunization requirements



Indicators by County in Massachusetts

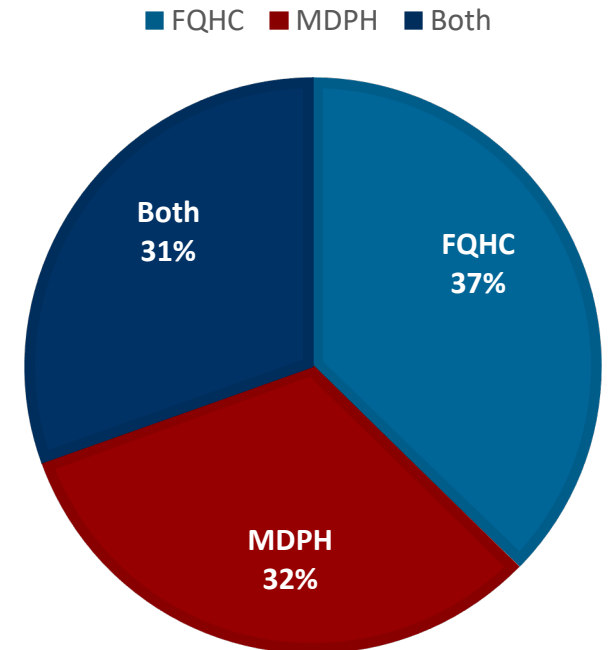
County and Number of SBHC	Number of School Districts	Free and Reduced Price Lunch Enrollment Rate	Population Under 18 living Under the Poverty Level	5 Year High School Graduation Rate	Asthma-related Hospitalization and ED Visit Rates	Children Not Meeting School Immunization Requirements
Barnstable: 1	17	Below Average	Below Average	Near Average	Near Average	Below Average
Berkshire: 0	17	Near Average	Near Average	Near Average	Near Average	Above Average
Bristol: 1	27	Below Average	Above Average	Near Average	Above Average	Below Average
Dukes: 0	6	Below Average	Below Average	Above Average	Below Average	Below Average
Essex: 14	37	Below Average	Above Average	Near Average	Near Average	Below Average
Franklin: 0	18	Near Average	Near Average	Below Average	Near Average	Near Average
Hampden: 5	16	Above Average	Above Average	Below Average	Above Average	Above Average
Hampshire: 1	17	Below Average	Below Average	Near Average	Below Average	Below Average
Middlesex: 7	68	Below Average	Below Average	Near Average	Below Average	Below Average
Nantucket: 0	1	Below Average	Above Average	Below Average	Above Average	Below Average
Norfolk: 0	33	Below Average	Below Average	Above Average	Below Average	Below Average
Plymouth: 0	28	Below Average	Below Average	Above Average	Near Average	Above Average
Suffolk: 15	19	Above Average	Above Average	Below Average	Above Average	Above Average
Worcester: 16	53	Below Average	Near Average	Near Average	Near Average	Below Average



Massachusetts SBHC Strengths

Funding

- **Massachusetts is one of 17 states that direct funds to SBHCs**
 - 22 SBHCs are funded by FQHCs
 - 19 SBHCs are funded by MDPH
 - 18 SBHCs are funded by both



Strengths Continued

Policy

- Billing
 - MassHealth allows community health centers that sponsor SBHCs to **bill services provided at SBHCs directly to MassHealth** rather than to the beneficiary's ACO.
 - Of note is that this policy currently only applies to CHC-sponsored (and not hospital-sponsored) SBHCs.
- Authorization
 - **SBHCs are not required to obtain authorization** from the student's primary care provider before providing care and receiving reimbursement through MassHealth.

Momentum

- Current Legislation
 - Special commission formed through the Children's Health and Wellness Bill (H.4012) to **strengthen and expand the school-based health center model**



Massachusetts SBHC Opportunities

- Federally Qualified Health Centers as Sponsors
 - FQHCs receive better reimbursement through Medicaid and have avenues for funding through federal and state safety-net grant programs, making **FQHC sponsorship a sustainable model**[†]
 - In Massachusetts there are 52 FQHCs with over 300 locations
 - 16 of the 52 FQHCs (about 30%) sponsor over half of all SBHCs in Massachusetts
 - 70% of FQHCs in Massachusetts do not sponsor any SBHCs, which presents **expansion opportunities**



[†] Love, H. E., Schlitt, J., Soleimanpour, S., Panchal, N., & Behr, C. (2019). Twenty Years Of School-Based Health Care Growth And Expansion. *Health Affairs*, 38(5), 755–764. doi: 10.1377/hlthaff.2018.05472

SBHC Response to COVID-19

SBHCs have continued to provide student-centered care during covid-19





MASSACHUSETTS

**SCHOOL-BASED
HEALTH ALLIANCE**

Healthy Youth, Healthy Schools, Healthy Communities

OUR MISSION

The mission of the Massachusetts School-Based Health Alliance is to promote the health, resilience and academic success of children and adolescents in collaboration with community partners committed to advocating for student well-being through school-based health centers.

WHAT WE DO

- Advocacy and Awareness Building
 - Why youth health matters, who makes youth health possible, what systems advance youth health, policy making that affects youth health
- Relationship Building
 - Connecting people that value youth health
- Coalition Building
 - Creating groups that work together to advance youth health
- Systems and Structure Alignment
 - Empowering people to influence systems that determine support for youth health at all levels
- Technical Assistance
 - Enabling the sharing of skills to develop and deliver effective youth health programs

HOW WE DO IT

- Statewide Legislative Advocacy to promote School-Based Health Care
 - Annual Advocacy Day
 - SBHC visits by legislators
- Partnering with National SBHA to learn, grow, share expertise
 - Attendance at SBHA National Advocacy Day on Capitol Hill
- Networking and learning opportunities to build strong collaborative foundation
 - Sharing best practices, building relationships
- Social Media to disseminate information
- Technical Assistance to stakeholders interested in expanding model

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Website: <https://www.mass.gov/school-based-health-centers-here-for-the-kids>



Questions

Please use this opportunity to ask any questions about today's webinar

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