



SBHC Coordinators Meeting

January 20th, 2016



Agenda

- ✓ Welcome
- ✓ Staffing and Budget
- ✓ Legislative
- ✓ Reproductive Health
- ✓ Immunizations
- ✓ Oregon Pediatric Improvement Partnership
- ✓ Youth Listening Session
- ✓ State Program Office
- ✓ Oregon School-Based Health Alliance

SBHC team

- ❖ Jessica Duke – Adolescent and School Health Manager
- ❖ Rosalyn Liu - Systems Development Specialist- Lead
- ❖ Kate O'Donnell – Systems Development Specialist
- ❖ Stefanie Murray - School Mental Health Specialist
- ❖ Karen Vian- Public Health Nurse
- ❖ Lisa Stember –Public Health Nurse
- ❖ Loretta Jenkins- Research Analyst
- ❖ Sarah Knipper – School Health Epidemiologist/Economist
- ❖ Melanie Potter – Administrative Specialist
- ❖ Georgia Wilson – SBHC intern



Budget - Funding for New SBHCs

- SB 5507 - \$300,000 for “newly certified sites”
- Applications must be received by June 30, 2016

No certification applications have been received

- Unspent funds may go out as SBHC Planning Grants for 2016-2017 school year
- SPO will notify field in **Spring 2016**

Questions? kathryn.m.odonnell@state.or.us or 971.673.1054

QUESTIONS???

Update on Relevant Bills from 2015 Session



Liz Thorne, MPH

Adolescent Health Policy & Assessment Specialist

HB 2758: What the law DOES

- Requires commercial health insurance carriers to permit any member to submit a confidential communications request
 - Written, oral, electronic communication is directed to the enrollee instead of the certificate holder
- Development of standardized form. Requests may also be made by phone or Internet.
 - Request acted upon within 30 days (mail) or 7 days (electronic)

HB 2758: What the law does NOT do

HB 2758 *does not*:

- Apply to clients with Oregon Health Plan (Medicaid)
- Suppress an EOB or other communication. Only redirects it to another location.
- Impact deductible or out-of-pocket maximum amounts.
- Impact communication generated by providers.
- Change access to information in online patient portals.

Important points to consider and share



7 Days



30 Days

Important points to consider and share



Client should confirm with insurance company that request has been received and processed.

If the confidential communication request has not been fully processed, information about the visit may be sent to the policy holder.

<http://tinyurl.com/ORPatientPrivacy>



Department of Consumer and Business Services / Division of Financial Regulation / Get help / Health / Patient right to privacy

Patient right to privacy

[File a complaint](#)

[Appeals process](#)

[Health insurance](#)

[Preventive care services](#)

► [Patient right to privacy](#)

⊕ [Individual \(nongroup\)](#)

⊕ [Employers](#)

[Health insurance report](#)

[Enrollment data](#)

[Common questions](#)

[Long-term care](#)

[Avoid fraud](#)

[Insurers contact information](#)

[External review](#)

Oregon law guarantees you the right to have protected health information sent directly to you instead of to the person who pays for your health insurance plan (the primary account holder).

You can have this information shared with you directly through a number of different ways:

- Email
- Telephone
- At a different mailing address

To make this request, complete, sign, and send [this form](#) to your insurer. You can send it by mail, fax, or email. Contact your insurance company to find out where to send your form.

Download the [Oregon Request for Confidential Communication](#) form.

PLEASE NOTE: If you change insurance companies, you must make a new request to the new insurance company. Until your request is processed, the insurance company may continue to send your protected health insurance to the person who is paying for your health insurance.

Information for health care providers

What is protected health information?

Protected health information is individually identifiable health information your insurer has or sends out in any form. Confidential communication of protected health insurance covered under this request includes:

- The name and address of a provider, a description of services provided, and other visit information
- An explanation of benefits notice
- Information about an appointment

Next Steps- Awareness and Education

- Developing a **client information** poster to be distributed to SBHCs and Reproductive Health Program providers
- **Provider information** document drafted
 - We need reviewers!
- Webinar for SBHC and Reproductive Health providers
February 18th 2016 from 9-10am



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School-Based Health Centers

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Health
Authority



Update: Youth Marijuana Prevention Activities

The Public Health Division's Role

- **Protect** the public's health
 - Educate about health issues related to marijuana use
 - Understand and minimize negative public health impact
 - **Protect children and vulnerable populations from marijuana exposure**
 - **Prevent youth marijuana use**
- **Regulate** medical marijuana dispensaries
- **Accredit** laboratories that test cannabis in Oregon

Youth Prevention Messages

- Brain development is not complete until your twenties. For the best chance to reach your full potential, you should not use marijuana to get high while you are young.
- When you get high, you may have difficulty learning, memory issues and lower math and reading scores.
- Getting high can get in the way of achieving your goals.
- The more you get high, the harder it may be to learn.
- Being high will impair your ability to drive, play sports, play video games, bike or do other activities.
- It may be hard to stop using marijuana if you start at a young age.
- Most youth in Oregon do not use marijuana.

Message Testing

- Focus groups conducted among youth (14-17) and young adults (18-20)
- Held in four locations
 - Medford, Portland, Pendleton, Bend
- Messages assessed for:
 - Believability
 - Motivating to not use marijuana
 - Clarity

Message Testing

Highly believable and highly motivating to not use marijuana:

- Brain development is not complete until your twenties. For the best chance to reach your full potential, you should not use marijuana to get high while you are young.
- When you get high, you may have difficulty learning, memory issues and lower math and reading scores.

Youth and young adults did not believe:

- Most youth in Oregon do not use marijuana.

Trusted Messengers

- Youth and young adults did not trust those strongly against or strongly in support of marijuana.
 - Dispensaries and some parents and schools

Trusted Messengers

Youth 14-17

- Parents or “educated teachers”
- Few teens identified doctors as trusted sources.
- Likely to turn to online sources for information.
 - Government, or health department

Young Adults 18-under 21

- More likely to say parents and schools are biased
- Turned to siblings or family members
- More likely to list doctors

Other Resources

Oregon Marijuana Parent Guide

- Types of marijuana products
- Short-term and possible long-term impacts of youth marijuana use
- Strategies for talking to youth about marijuana use
- Resources

www.healthoregon.org/marijuana

Next Steps

- Translating prevention messages to Spanish for testing.
- Pulling key messages from Parent Guide for testing and translation.
- Additional focus on a youth prevention media campaign.
- Working with Department of Education and stakeholders on best method to integrate evidence-based practices around environmental policies and curriculum.

What resources would be helpful for you?

- Informational brief for providers
- Tips on how to talk to youth about marijuana use
- More information on screening, brief intervention, or referral to treatment for marijuana
- Other (type in chat box)



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Authority

Contact me with questions!

Liz Thorne, MPH

Adolescent Health Policy & Assessment
Specialist

elizabeth.k.thorne@state.or.us

971-673-0377

Reproductive Health Legislative and Program Update

SBHC Coordinator Meeting
January 20, 2016

Emily Elman, Policy and Research Analyst
Reproductive Health Program
Emily.l.elman@state.or.us



PUBLIC HEALTH DIVISION
Adolescent, Genetics, and Reproductive Health Section

RH Legislative & Program Update

2015 Legislative Session

- HB 2879, Pharmacist Prescribing of Contraception

Reproductive Health Program

- Brief Oregon ContraceptiveCare (CCare) Program Overview

2015 RH Legislation – HB 2879

- Effective January 1 2016, HB 2879 allows pharmacists to prescribe *hormonal contraceptive patches and self-administered oral hormonal contraceptives* to a person who is:
 - 18 years of age and over, regardless of whether the person has evidence of a previous prescription
 - **Under 18 years of age, *only* if the person has evidence of a previous prescription from a primary care practitioner or women’s health care practitioner for the patch or oral contraceptives**



2015 RH Legislation – HB 2879

- Each new patient, and annually thereafter, must complete an Oregon Self-Screening Risk Assessment Questionnaire

Hormonal Contraceptive Self-Screening Questionnaire

Name: _____ Health Care Provider's Name: _____ Date: _____
 Date of Birth: _____ Age* _____ Weight: _____ Do you have health insurance? Yes / No
 What was the date of your last women's health clinical visit? _____
 Any Allergies to Medications? Yes / No If yes, list them here: _____

Background Information:

| | | |
|---|--|--|
| 1 | Do you think you might be pregnant now? | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| 2 | What was the first day of your last menstrual period? | / / |
| 3 | Have you ever taken birth control pills, or used a birth control patch, ring, or shot/injection? | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| | Did you ever experience a bad reaction to using hormonal birth control? | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| | - If yes, what kind of reaction occurred? | |
| | Are you currently using any method of birth control including pills, or a birth control patch, ring or shot/injection? | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| | - If yes, which one do you use? | |
| 4 | Have you ever been told by a medical professional not to take hormones? | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| 5 | Do you smoke cigarettes? | Yes <input type="checkbox"/> No <input type="checkbox"/> |

Medical History:

| | | |
|----|---|--|
| 6 | Have you given birth within the past 6 weeks? | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| 7 | Are you currently breastfeeding? | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| 8 | Do you have diabetes? | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| 9 | Do you get migraine headaches? If so, have you ever had these kinds of headaches that start with warning signs or symptoms, such as flashes of light, blind spots, or tingling in your hand or face that comes and goes completely away before the headache starts? | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| 10 | Do you have high blood pressure, hypertension, or high cholesterol? | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| 11 | Have you ever had a heart attack or stroke, or been told you had any heart disease? | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| 12 | Have you ever had a blood clot? | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| 13 | Have you ever been told by a medical professional that you are at risk of developing a blood clot? | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| 14 | Have you had recent major surgery or are you planning to have surgery in the next 4 weeks? | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| 15 | Have you had bariatric surgery or stomach reduction surgery? | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| 16 | Do you have or have you ever had breast cancer? | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| 17 | Do you have or have you ever had hepatitis, liver disease, liver cancer, or gall bladder disease, or do you have jaundice (yellow skin or eyes)? | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| 18 | Do you have lupus, rheumatoid arthritis, or any blood disorders? | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| 19 | Do you take medication for seizures, tuberculosis (TB), fungal infections, or human immunodeficiency virus (HIV)? | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| | - If yes, list them here: | |
| 20 | Do you have any other medical problems or take any medications, including herbs or supplements? | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| | - If yes, list them here: | |

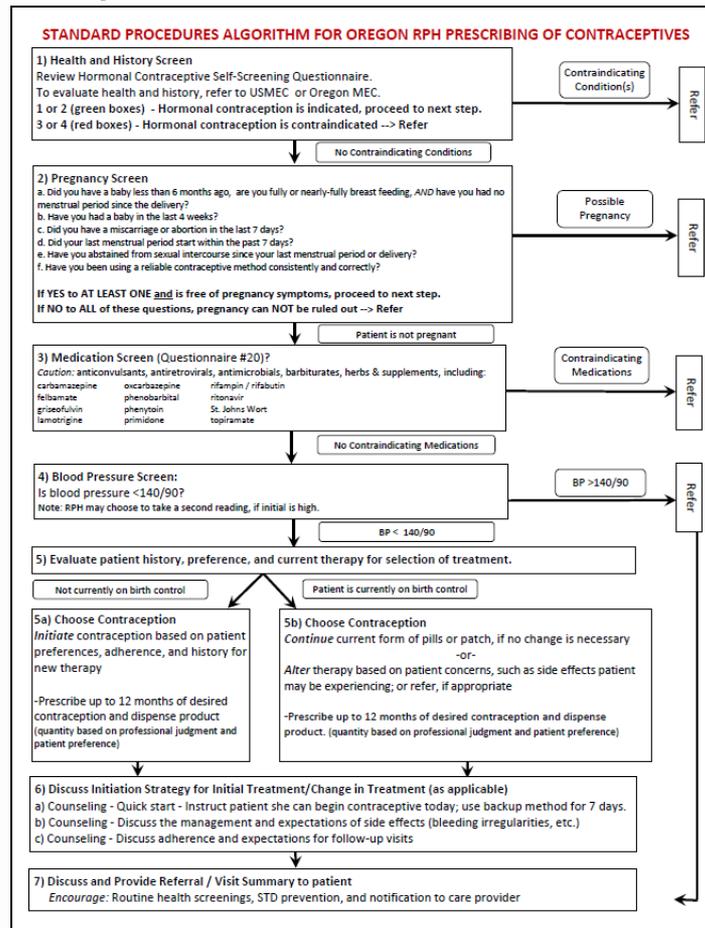
Do you have a preferred method of birth control that you would like to use?
 A pill you take each day A patch that you change weekly Other (ring, injectable, implant, or IUD)

Internal use only verified DOB* with valid photo ID BP Reading: _____ / _____
 Pharmacist Name _____ Pharmacist Signature _____
 Drug Prescribed _____ (or) _____ or: Patient Referred (circle reason(s))
 Sig: _____ (Pharmacy Phone _____ Address _____)

2015 RH Legislation – HB 2879

- Pharmacist uses and follows the [Oregon Standard Procedures Algorithm](#) to perform the patient assessment

This algorithm is based on the [US Medical Eligibility Criteria \(US MEC\) for Contraceptive Use](#)



2015 RH Legislation – HB 2879

- After assessment is complete, pharmacist either:
 - Prescribes, if clinically appropriate, the patch or oral contraceptives
OR
 - Refers patient to a healthcare practitioner
- Pharmacist provides all patients with a Visit Summary
- A pharmacist may not:
 - Require a patient to schedule an appointment with the pharmacist
 - Continue to prescribe and dispense beyond three years from the initial prescription without *evidence* of a clinical visit

| | |
|--|------------|
| Patient Name _____ | Date _____ |
| Pharmacist Referral and Visit Summary | |
| ___ Today you were prescribed the following hormonal contraception: _____ (Notes: _____) | |
| If you have a question, my name is _____ | |
| Please review this information with your primary care or women's health provider. | |
| - or - | |
| ___ I am not able to prescribe hormonal contraception to you today, because: | |
| <input type="checkbox"/> Pregnancy cannot be ruled out. (Notes: _____) | |
| <input type="checkbox"/> You have a health condition than requires further evaluation. (Notes: _____) | |
| <input type="checkbox"/> You take medication(s) or supplements that may interfere with patches or pills. (Notes: _____) | |
| <input type="checkbox"/> Your blood pressure reading is higher than 140/90 units. (___/___) | |
| Each requires additional evaluation by another healthcare provider. Please share this information with your provider. | |
| Pharmacist Name _____ | |
| Pharmacy Name _____ | |
| Address _____ | |
| Phone _____ | |

2015 RH Legislation – HB 2879

Considerations

Hormonal Contraceptive Self-Screening Questionnaire

Name _____ Health Care Provider's Name _____ Date _____
Date of Birth _____ Age* _____ Weight _____ Do you have health insurance? Yes / No
What was the date of your last women's health clinical visit? _____
Any Allergies to Medications? Yes / No If yes, list them here: _____

- Age restrictions sunset January 1, 2020
- Law does not mandate *coverage* of encounter with pharmacist or contraceptives supplies; patients without insurance will be required to pay out-of-pocket
- Pharmacist participation *voluntary* (5-hour training required for certification to participate)

2015 RH Legislation – HB 2879

SBHC Considerations

- Outreach and education to *pharmacists*. Are local pharmacists participating? Do they know about the SBHC(s) in the community? Do they know about the family planning clinic(s) in the community?
- Outreach and education to *students*. Discuss considerations of: cost, confidentiality, preventive services and [potentially] full range of birth control methods available at your site.



2015 RH Legislation – HB 2879

Oregon Board of Pharmacy website:

<http://www.oregon.gov/pharmacy/Pages/ContraceptivePrescribing.aspx>

Tool-Kit Resources

The Oregon Board of Pharmacy has approved one educational training program related to the prescribing of contraceptives by a pharmacist.

It is available at this link: [ACPE Educational Training Program](#)

- Ø *Required:* [Oregon Standard Procedures Algorithm](#)
- Ø *Required:* [Oregon Self-Screening Risk Assessment Questionnaire](#)
- Ø [MEC Corresponding to Oregon Questionnaire](#)
- Ø [Visit Summary Template](#)
- Ø [Family Planning and Health Department Clinic Listing](#)
- Ø [Oregon Health Authority Patient Educational Materials](#)
- Ø [CDC's Preconception Health Site](#)
- Ø [US Selected Practice Recommendations](#)
- Ø [ACOG Well-Woman Recommendations](#)
- Ø [The Choice Project](#)
- Ø [Effectiveness of Family Planning Methods](#)
- Ø [JCCP Pharmacist's Patient Care Process](#)
- Ø [Empathy and Emotional Intelligence](#)
- Ø [OSPA Informational - NPI/Taxonomy](#)

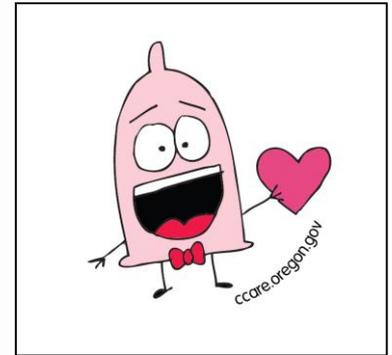
RH Program – CCare Overview

| Program Requirement | Oregon ContraceptiveCare (CCare) |
|-----------------------|--|
| Client definition/age | Person of reproductive capacity who is not seeking pregnancy |
| Eligibility | US citizenship or LPR status 5+ years, Oregon residency, <250% FPL, reproductive capacity, insurance status* |
| Client fee assessment | All services and supplies free of charge |
| Services offered | Narrow definition of services: only for the prevention of pregnancy |
| Reimbursement | Bundled fee-for-service encounter rate + supplies at acquisition cost |

*Clients can not be enrolled in both OHP and CCare

RH Program – CCare Overview

- Covered services include:
 - Annual exams
 - Follow-up visits to evaluate contraceptive method
 - Counseling and education
 - Laboratory tests (as clinically indicated for contraceptive management)
 - Medical procedures (e.g. IUD or implant insertions/removals)
 - Full-range of contraceptive supplies and devices *dispensed onsite*
 - Up to one-year supply of contraceptive method of choice
- Confidentiality provisions allow clients with private insurance to enroll in CCare and bypass billing to private insurance



RH Program – CCare Provider Requirements

- Participate in a CCare-specific billing and data collection system. A [Clinic Visit Record \(CVR\)](#) must be completed for each visit.
- Screen and document client eligibility using the [CCare Enrollment Form](#).
- Maintain an on-site contraceptive dispensary of a full range of contraceptive drugs and supplies, and directly dispense to clients at the time of their appointment



RH Program – CCare Provider Requirements

School-Based Health Center Exception:

- SBHCs are exempt from the requirement to make contraceptive methods available for on-site dispensing.
- Because some school boards prohibit dispensing contraceptives on school grounds, SBHCs may offer contraceptive methods to clients either on-site or by referral.
- When offered by referral, SBHCs must have an established referral agreement in place, preferably with another CCare clinic.
- RH Program must be notified of the parties involved in order to ensure proper billing and audit practices.
- Dispensing by any clinic must not result in a charge to the client.

RH Program

Contact Information:

Oregon Reproductive Health Program

971-673-0355

www.healthoregon.org/rh

Emily Elman, Policy and Research Analyst

971-673-0219

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QUESTIONS???

Youth Sexual Health

Shelagh Johnson

971-673-2016

SHELAGH.M.JOHNSON@dhsoha.state.or.us



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Immunizations: What's New for 2016?

SBHC Webinar

January 20, 2016

Senate Bill 895 (Part 1)

What?

- Nonmedical exemptions from before March 1, 2014 are no longer valid.

Who?

- ~30,000 students statewide.

When?

- Updates needed before Exclusion Day.

What should SBHCs expect?

- The number of exclusion orders will increase. This will lead to more people seeking vaccines and nonmedical exemptions in February.

Senate Bill 895 (Part 2)

What?

- Schools are required to share immunization and exemption rates by vaccine with parents.

Who?

- Schools, preschools, Head Starts and certified child cares with 10 or more kids enrolled.

When?

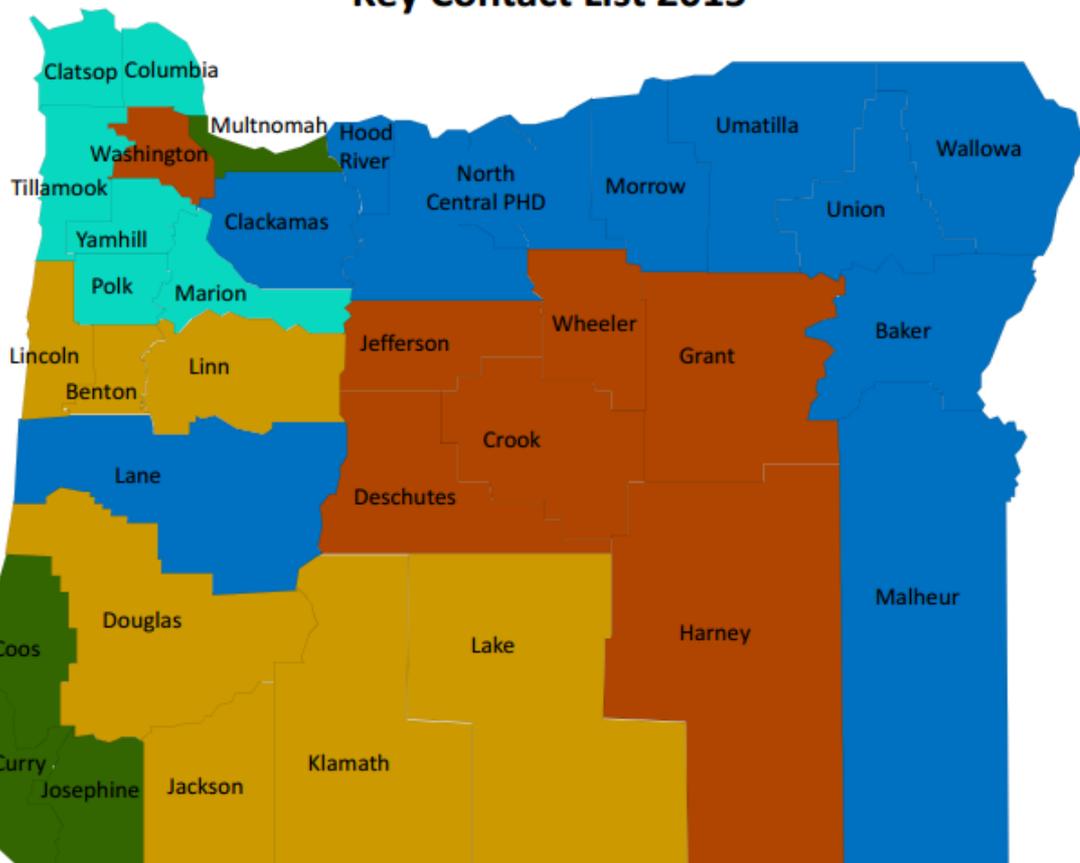
- Within 30 days after the start of school, and within 30 days after Exclusion Day.

What should SBHCs expect?

- Questions from parents about what these immunization and exemption rates mean. The Oregon Health Authority is working on communications and templates for schools now.

New VFC Health Educator Regions

Oregon VFC Provider Services Team Key Contact List 2015



Customer Service Hours: Monday - Friday 9:00 am to 4:00 pm

| | |
|---|--|
| Tuesday Graham – Health Ed/ Compliance Lead 971-673-0317 | Jennifer Steinbock - VFC Customer Service 971-673-0309 |
| Providence Yakima Valley OYA | ALERT IIS Helpdesk 800-980-9431 |
| Albert Koroloff – Health Ed 971-673-0330 | Rex Larsen - VFC/AFIX Coord. 971-673-0328 |
| Kaiser OHSU | Mimi Luther - Manager 971-673-0296 |
| Jody Anderson – Health Ed 971-673-0430 | Ana McMurry - Billing 971-673-0301 |
| Indian Health Services Planned Parenthood Virginia Garcia | Kerry Lionadh - Inventory/Accountability 971-673-0518 |
| Mallory Metzger – Health Ed 971-673-0480 | Shelby Williams - Shipping 971-673-0313 |
| Peacehealth | Erin Corrigan - Quality and Training 971-673-2376 |
| Sydney Running – Health Ed 971-673-0305 | |
| Samaritan Health Services | |

New Compliance Specialists

Gaby

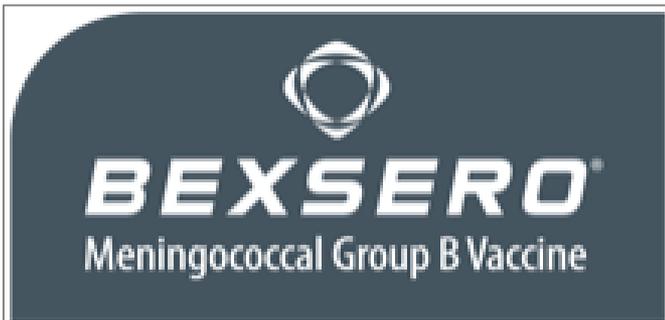


Dustin



Meningococcal B Vaccine

- “Permissive” recommendation for ages 16-23 years.
- Watch the video at <https://youtu.be/fHSu66RRG6w>



Questions?

stacy.d.matthews@state.or.us

971-673-0528

janis.s.betten@state.or.us

971-673-0292

peggy.hillman@state.or.us

971-673-0292

Improving Access to and Quality of Adolescent Preventive Services: Overview of OPIP Project with Two Pilot SBHCS



OHA Adolescent Health - SBHC Coordinator Call
January 20th, 2016

Colleen Reuland, MS



Goals

- Spotlight OPIP's project, funded by MODA/OEBB, working with two pilots SBHCs to **improve access to and quality of well-visits**, partnerships with **primary care providers**
 - Heads up on March Webinar focused on educational materials for youth developed
- Obtain **input and guidance** on any previous models that should be built off as they relate to **coordination with primary care providers**

Improving Access to and Quality of Adolescent Well-Care Services Through Partnerships With School Based Health Centers

Project is funded by OEGB/MODA Health Grant to OPIP.



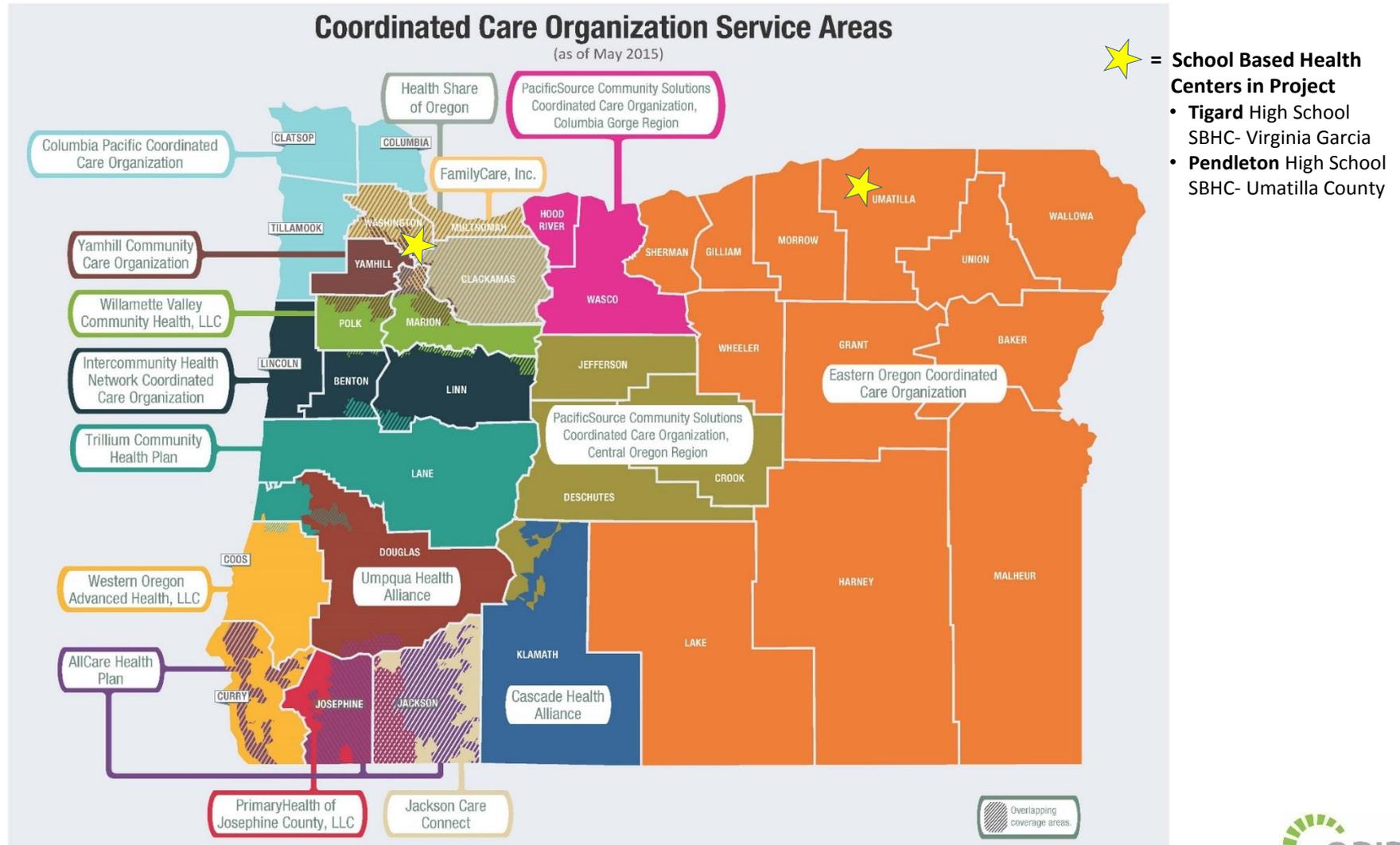
Aim:

- To improve the **provision of adolescent well-visits** at a community-level by leveraging partnerships with School Based Health Centers (SBHCs)

Objectives:

- To provide on-site **training and support** to **pilot SBHCs** ($N=2$)
- To develop **educational materials for adolescents and their parents** that provide information about why well-care is important, what to expect, and the unique role SBHCs can play in providing well-child care.
- To develop and assess models for enhancing the SBHC's **population management and care coordination** with primary care practices.
- To identify **policy-level improvements** that address barriers and incentives identified through the project.

Improving Access to and Quality of Adolescent Well-Care Services Through Partnerships With School Based Health Centers



Improving Access to and Quality of Adolescent Well-Care Services Through Partnerships With School Based Health Centers

Areas of Focus Within the SBHC:

- **Education About Services in SBHC and Value of Well-Care**
 - Within school, outside of school
 - To adolescents, parents, primary care providers
 - Engagement of youth to provide feedback
- **Improved provision of Adolescent Well-Visits**
 - Aligning care provided in the SBHC with Bright Futures recommendations
 - Includes screening and follow-up aligned with CCO/KPM Metrics related to Depression Screening and SBIRT
- **Care Coordination with Primary Care Providers**
 - Communication with adolescent-identified primary care provider
 - For primary care providers who identify at-risk adolescents and want to refer to the SBHC to address risks at a location the adolescent may be more likely to go

OPIP Development of Educational Materials for Youth about Health Services

- **Save the Date!**

Webinar to share tools developed & key learnings to date: **March 16th at 11 am**

- Development process included five rounds of **review with youth**
- Materials developed:
 1. Poster about SBHC
 2. Poster about Services You Can Get at SBHC Aligned with Well-Visits
 3. Other dissemination methods for parts of the messages included in the poster
 - Flyers strategically placed in places where teens sit (e.g. counseling office)
 - Posters in bathroom stalls
 - Table tents for the lunch rooms
 - Instagram posts/ Facebook posts
 - Info cards that fit into cell phone carriers
 - Mood Pencils/Stress balls
 - QR Scan codes to website

HAVE YOU HEARD ABOUT THE HEALTH CENTER AT PHS?



As you become more independent, there is a lot to think about – school, friends, family, body image, self-esteem... What's on your mind matters to us, and our trained staff at **Pendleton High School Health Center** are here for you! At the Health Center you can get the same kinds of health services that you get at a regular primary care clinic, and we are conveniently located **here at school!** Our health providers are specifically trained to work with teens and are available to help you with whatever you need.

COMMON TOPICS YOU CAN HAVE ADDRESSED:

- ✓ What you want to talk about - our priority is partnering with you
- ✓ Emotional health and feelings
- ✓ Guidance for healthy relationships
- ✓ Bullying
- ✓ Health exams and sports physicals
- ✓ Drug or alcohol use or experimentation
- ✓ Treatment for illness and infections
- ✓ Dental and Vision exams
- ✓ Immunizations and vaccines

YOUR PRIVACY IS IMPORTANT

At the Health Center we have specific policies around confidentiality. For the most part, what you talk about will stay between you and your health provider and will not be shared with your parents or others. If something needs to be shared, we will always talk with you about it first, and work with you on how to do that.

BILLING & INSURANCE

No student will be turned away due to ability to pay. We welcome ALL students, and accept most insurance including the Oregon Health Plan. If you don't have insurance, don't worry – we will still see you.

WHERE ARE WE LOCATED?

The Health Center is located at Pendleton High School, on the second floor **near the cafeteria.**

WHEN ARE WE OPEN?

The Health Center is open during the school year: **Tuesdays, Wednesdays, & Thursdays @ 7:30 am - 3 pm**

Stop by or call us @ (541) 966-3857

We want to partner with you to provide the best care possible. Make your appointment at the PHS Health Center today!

Follow us on Twitter @PHShealth



Trustworthy * Convenient * Confidential



Designed and distributed by Oregon Pediatric Improvement Partnership, www.oregon-hip.org



Example of
Poster:

Information
about the SBHC
at Pendleton
High School



DID YOU KNOW?

Only **1 in 5** Oregon teens gets an **annual check-up**, and the odds of having **poor physical and mental health** in adulthood can be **52% higher** for people who **don't receive needed care** early in life.

1 in every 3 Oregon teens **experienced depression** last year, and **1 in 6** seriously considered **suicide**.

Each year there are **9.5 million** new **STD infections** among young adults.

Teens who start drinking at an earlier age are **4 to 5 times** more likely than others to develop **alcohol abuse** as adults.



That's why it's important to have a check-up each year... even when you are NOT sick.

From sprained ankles, to feeling stressed, to relationships and even sexual health, confidential services are available to you at the **Tigard School Based Health Center (SBHC)**.

Our Health Center providers are specifically trained and interested in working with teens and they will never judge you. They will listen and help you overcome challenges to become successful and independent both in body and mind.

The Tigard SBHC Clinical Staff Include:

- Nurse Practitioner
- Qualified Mental Health Professional
- Dental Hygienist

WHERE ARE WE LOCATED?

* **We are conveniently located here at school**, in between the Child Development Center and the Caring Closet.

* **We are open during the School Year:**
Monday - Friday @ 8 am - 4:30 pm

* **We also accept walk-ins based on availability.**

If you have **QUESTIONS** or want to make an **APPOINTMENT**, stop by or call us @ **(503) 431-5775**

COMMON TOPICS ADDRESSED AT A CHECK-UP:

- ✓ Your health questions- our priority is to partner with you
- ✓ Emotional health and wellness
- ✓ Guidance for healthy relationships
- ✓ Bullying
- ✓ Health exams and sports physicals
- ✓ Weight, diet and overall physical health
- ✓ Drug or alcohol use or experimentation
- ✓ Sexual health
- ✓ Treatment for illness and infections
- ✓ Vision exams and hearing screenings
- ✓ Immunizations and vaccines
- ✓ Dental cleanings

YOUR PRIVACY IS IMPORTANT

At the Tigard SBHC we have specific policies around confidentiality. For the most part, what you talk about will stay between you and your health provider and will not be shared with your parents or others. If something needs to be shared, we will always talk to you first and work with you on how to do that.

BILLING & INSURANCE

No student will ever be turned away due to ability to pay. We welcome all students of the Tigard/Tualatin School District, and accept most insurance including the Oregon Health Plan (Medicaid). If you don't have insurance, don't worry, payment can also be made based on what you can afford.

Example of Handout: Information about Adolescent Well-Care Visits



Trustworthy * Convenient * Confidential

**Our goal is to partner with you to provide the best care possible.
Make your appointment at the Tigard School Based Health Center today!**

<http://virginia Garcia.org/locations/tigard-school-based-health-center/>



Designed and distributed by Oregon Pediatric Improvement Partnership, www.oregon-pip.org



Models for Enhancing the SBHC's Population Management & Care Coordination with Primary Care Practices

Work to date:

- Meetings with CCOs/Private Payors to learn about any related efforts and potential payment & policy barriers to coordination
- Collecting data & documenting current processes related to:
 - Information about the teen's primary care provider, contact information
 - Models and methods used to communicate with the PCP
 - » For sensitive services vs. For non-sensitive services
 - » Obtaining consent from adolescent to share information
 - Models and methods for PCP to communicate with you
 - » For basic services (e.g. weight check)
 - » For follow-up services to the screens they are doing (depression and substance abuse)
- Recruiting primary care practices to participate in pilot

Input From You that Would be Valuable

1) Models and methods used to communicate with the PCP

- » For sensitive services vs. For non-sensitive services
- » Obtaining consent from adolescent to share information
- » **Examples of forms sent to PCPs, methods used to establish agreements, type of information, forms used to obtain adolescent consent, HIT technologies used**

2) Models and methods for PCP to communicate with you

- » For basic services (e.g. weight check)
- » For follow-up services to the screens they are doing (depression and substance abuse)
- » **Examples of forms sent you, HIT technologies used**

Email: reulandc@ohsu.edu or 503-494-0456

THANK YOU!!

Link to Resources OPIP Has Developed Related to Adolescent Services

<https://projects.oregon-pip.org/resources/adolescent-care/adolescent-well-visits-and-claims/policy-and-practic-level-strategies-to-improve-adolescent-well-visits/view>

Webinars/online resources that share innovative tools and strategies:

- Implementing Bright Futures Aligned Adolescent Well-Visits

<http://www.pccpci.org/resources/webinars/enhancing-adolescent-well-visits>

- Addressing the Adolescent SBIRT and Depression Screening and Follow-Up Incentive Metrics:

<http://pccpci.org/resources/webinars/depression-screening-sbirt-adolescents-practical-considerations-implementing-cc>

- Practice-Based Adolescent Care Tools & Resources

<https://projects.oregon-pip.org/resources/adolescent-care>



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Youth's Experience with Health Care: Findings from Listening Sessions

Liz Thorne, MPH

Adolescent Health Policy & Assessment
Specialist



Listening Sessions

- Goal: understand youth's experience with health care (preventive) and how it can be improved.
- Locations
 - Umatilla County
 - Jackson County
 - Tri-County area (in partnership with FamilyCare CCO)
- Approximately 135 total youth engaged across sessions

Key Findings

- Youth get care from a wide variety of settings
- Common critiques
 - Waiting
 - Being rushed
 - Feeling judged by the provider
 - Frustration with paper work

Key Findings

Most commonly cited barriers to care:

- Cost and/or lack of insurance
- Belief that preventive care is not a priority
- Fear and uncertainty surrounding care
 - Don't want to find out something is wrong
 - confidentiality
 - not enough information about their care
 - lack of trusting relationship

Key Findings

Opportunities to improve care

- Provide free or low cost care
- More provider choice (time and person)
- Flexibility in getting care outside of 8-5 hours
- Make youth feel like they are a priority
 - More time with provider during visit
 - Taking concerns seriously
 - Providing more information, easy to understand
 - More provider outreach to youth
- Greater access to health information
- Raise awareness of why teens and young adults should get a check up every year.

[healthcare] would be better if my doctor actually called or sent me a text to remind me that I need to come in for a check up. To show that they care and that I am priority to them.

**-- Central High School Student,
Medford OR**

It's hard to remember to go to the doctor when you are not sick. We have so many other things going on, it's not a priority.

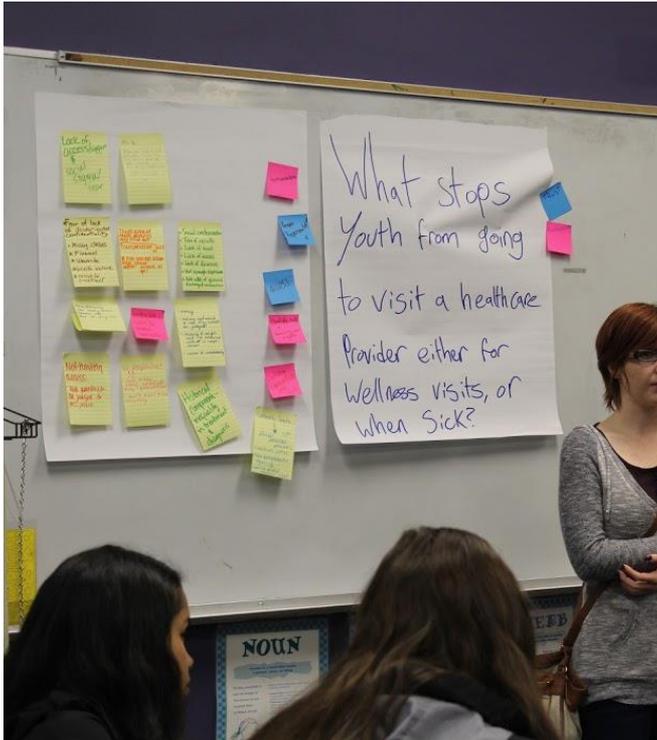
Phoenix Talent HS Student

I want more information about my health and medicine, in a way I can understand. It would be better if there were more [providers] who understand my culture and background. There are alternative remedies that my doctor would think are weird.

-- Jackson County Health Equity Coalition member

You hear about why you should go to the doctor if you are over 65, have COPD...or if you are a little kid. But not if you are our age or in your 20's.

-Umatilla HS Student





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Updated Certification Review Tool

- Immunization section updated with input from State Immunization Program
- Lab section updated with input from Compliance Section at State Public Health Lab



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800 NE Oregon St., Ste. 805
Portland, OR 97232
Phone: 971-673-0873
SBHC.Program@state.or.us
www.healthoregon.org/sbhc

Certification Verification Review Tool
[Reference: Oregon School-Based Health Centers Standards for Certification 2014](#)

Site Name: _____ Date: _____

Site Staff: _____ SPO Staff: _____

Initial on-site verification review
 On-site verification review with notice
 On-site verification review without notice
 Administrative review of compliance at request

Waiver(s) in place at time of review: _____

| Section A.1-4: Certification Process | | |
|---|---|----------|
| Certification Standard | Compliant? | Comments |
| A.2.iii(b)iv(c): The Operational Profile is complete and up-to-date; all SBHC roles are assigned: | | |
| <input type="checkbox"/> Dental Provider (DMD, EFDA, RDH) <input type="checkbox"/> Health Dept Admin <input type="checkbox"/> Health Dept Nursing Supervisor <input type="checkbox"/> Health Dept Primary SBHC Contact <input type="checkbox"/> Immunization Coordinator <input type="checkbox"/> Laboratory Coordinator <input type="checkbox"/> Nurse (RN/LPN) <input type="checkbox"/> Medical Director <input type="checkbox"/> Primary Care (MD, DO, ND, NP, PA) <input type="checkbox"/> Privacy Official <input type="checkbox"/> Qualified Mental Health Professional (QMHP) <input type="checkbox"/> Quality Assurance Coordinator <input type="checkbox"/> SBHC Administrator <input type="checkbox"/> SBHC Site Coordinator <input type="checkbox"/> Support Staff (office, health, medical assistant) | <input type="checkbox"/> YES <input type="checkbox"/> NO | |

As of October 14, 2015
Page 1 of 17

New Checklist for **NEW** SBHCs

| | |
|---|---|
|  | <p>800 NE Oregon St., Ste. 805 Portland, OR 97232 Phone: 971-673-0871 SBHC.Program@state.or.us www.healthoregon.org/sbhc</p> |
| <p>Certification Process for NEW SBHCs</p> | |
| <p>STEP 1: Prepare to Apply for Certification</p> <p>In order to be eligible to apply for certification, the SBHC must be:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Open and fully operating <input type="checkbox"/> Meeting all Standards for Certification* <input type="checkbox"/> YFC Certified (www.healthoregon.org/yfc) <input type="checkbox"/> Currently certified by CLIA to perform appropriate levels of testing (www.healthoregon.org/ll) <input type="checkbox"/> Be ready to submit these items to the SPO: <ul style="list-style-type: none"> <input type="checkbox"/> Required policies and procedures as outlined in Standards for Certification <input type="checkbox"/> SBHC floor plan <input type="checkbox"/> Organizational chart identifying partnerships/structure <input type="checkbox"/> Partnership agreements (i.e. MOU, IGA) <input type="checkbox"/> Copy of current CLIA certificate <input type="checkbox"/> OCHIN visit/encounter data permission form OR data sample of 2-4 weeks of data (for non-OCIN sites) ** | |
| <p>STEP 2: Submit Initial Certification Application and Required Materials</p> <ul style="list-style-type: none"> <input type="checkbox"/> Complete the SBHC Initial Application for Certification* online <input type="checkbox"/> Email the following application materials to sbhc.program@state.or.us within one week of application submission: <ul style="list-style-type: none"> <input type="checkbox"/> SBHC floor plan <input type="checkbox"/> Organizational chart identifying partnerships/structure <input type="checkbox"/> Partnership agreements (i.e. MOU, IGA) <input type="checkbox"/> Copy of current CLIA certificate <input type="checkbox"/> Fax OCHIN visit/encounter data permission form to 971-673-0250 OR secure email the data sample to sbhc.program@state.or.us (2-4 weeks of data) | |
| <p>STEP 3: State Program Office (SPO) Reviews Application and Submitted Materials</p> <p>SPO will send letter of approval or denial to Local Public Health Authority (LPHA) and applicant (if not the LPHA) within 30 days.</p> | |
| <p>STEP 4: If Application is Approved, SPO will schedule Certification Verification Site Visit</p> <p>SPO will contact LPHA and applicant (if not the LPHA) to schedule site visit. SBHC is assigned a Public Health Nurse as per the SPO Certification Team Territories*</p> | |

| |
|--|
| <p>STEP 5: Fulfill Pre-site Visit Requirements</p> <ul style="list-style-type: none"> <input type="checkbox"/> Complete Online SBHC Operational Profile (login information provided by SPO)* The following Operational Profile tabs must be completed prior to site visit: <ul style="list-style-type: none"> <input type="checkbox"/> Details <input type="checkbox"/> Operations <input type="checkbox"/> Staff <input type="checkbox"/> Shift Hours Instructions to complete Operational Profile include: <ul style="list-style-type: none"> Operational Profile Users Guide* SBHC Role Descriptions* <input type="checkbox"/> Email required materials to assigned Public Health Nurse no less than two weeks prior to site visit. This may include, but is not limited to: <ul style="list-style-type: none"> <input type="checkbox"/> Required policies and procedures <input type="checkbox"/> ALERT IIS vaccine eligibility by age report <input type="checkbox"/> ALERT IIS vaccine eligibility by vaccine report <input type="checkbox"/> ALERT IIS vaccine accountability report |
| <p>STEP 6: Prepare for Site Visit</p> <ul style="list-style-type: none"> <input type="checkbox"/> Review Standards for Certification* <input type="checkbox"/> Check Certification Verification Review Tool* for areas that will be assessed during the site visit <input type="checkbox"/> Schedule two well-child visits of school-aged youth to occur during site visit <input type="checkbox"/> Assemble certification binder with partnership agreements and policies and procedures (tabbed binder provided by SPO after application has been approved) |
| <p>STEP 7: Day of Site Visit Requirements</p> <p>SPO will conduct the following activities:</p> <ul style="list-style-type: none"> Review of documents, policies and procedures, and records Review of electronic medical record systems, review of electronic health records systems, and review of practice management systems Review of data reports from electronic systems or other patient registry and tracking systems Interviews with practice management, clinical and administrative staff On-site observation of practice staff with at a minimum 2 patients, with consent of the patient On-site observation of patient environment and physical environment <p>Applicant will participate in site visit including having Site Coordinator on site, invite partners to exit interview, and participate in exit interview</p> |
| <p>STEP 8: Site Visit Report</p> <p>SPO will send written site visit report within two weeks of site visit</p> <ul style="list-style-type: none"> <input type="checkbox"/> Complete any indicated Action Items by listed deadlines |
| <p>STEP 9: Congratulations – Your SBHC is CERTIFIED!</p> |

*More information can be found on the [Certification Standards](http://www.healthoregon.org/sbhc) page at www.healthoregon.org/sbhc.

New Checklist for Certified SBHCs

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www.healthoregon.org/sbhc

Re-Certification Process for CERTIFIED SBHCs

ANNUAL CERTIFICATION REQUIREMENTS

To remain certified, SBHCs must stay in compliance per Standards for Certification. The list below outlines reoccurring due dates and deliverables, as required by the Standards for Certification and the SBHC State Program Office.

JULY 15: • Visit/encounter data submission from prior school year*

OCTOBER 1: • Update the Online SBHC Operational Profile for the current school year. More info in the Operational Profile User's Guide**

- Includes entire profile (Details, Operations, Staff, Shift Hours)
- Includes Key Performance Measures*
- Includes Annual Operating Revenue Information*

OCTOBER: • In-person Coordinator meeting (usually in Portland)***

- SBHC Coordinators receive new Satisfaction Surveys (paper or electronic)*

WINTER: • Coordinator Meeting via webinar***

JANUARY 15: • Visit/encounter data mid-year submission for current school year*

- Satisfaction Surveys mid-year submission*

SPRING: • Coordinator meeting via webinar***

JUNE 30: • Satisfaction Surveys end-of-year submission*

ONGOING: • Update Operational Profile as changes occur (e.g., staffing, operating hours, contact information or other updates). More info in the Operational Profile User's Guide**

CERTIFICATION VERIFICATION SITE VISIT REQUIREMENTS

After the initial on-site verification review, the SPO will conduct an on-site verification review (site visit) every two years for a representative sample of certified SBHC in each SBHC system

STEP 1: SPO will schedule Certification Verification Site Visit

SPO will contact applicant to schedule site visit. SBHC is assigned a Public Health Nurse as per the SPO Certification Team Territories**

As of November 2015 Page 1 of 2

STEP 2: Fulfill Pre-site Visit Requirements

Review and update, if needed, the Online SBHC Operational Profile prior to site visit (login information provided by SPO)**

- Details
- Operations
- Staff
- Shift Hours

Instructions to complete Operational Profile include:

- Operational Profile Users Guide**
- SBHC Role Descriptions**

Email required materials to assigned Public Health Nurse** no less than two weeks prior to site visit. This may include, but is not limited to:

- Required policies and procedures
- ALERT IIS vaccine eligibility by age report
- ALERT IIS vaccine eligibility by vaccine report
- ALERT IIS vaccine accountability report

STEP 3: Prepare for Site Visit

Review Standards for Certification**

Check Certification Verification Review Tool** for areas that will be assessed during the site visit

Schedule two well-child visits of school-aged youth to occur during site visit

Assemble certification binder with partnership agreements and policies and procedures

STEP 4: Day of Site Visit Requirements

SPO will conduct the following activities:

- Review of documents, policies and procedures, and records
- Review of electronic medical record systems, review of electronic health records systems, and review of practice management systems
- Review of data reports from electronic systems or other patient registry and tracking systems
- Interviews with practice management, clinical and administrative staff
- On-site observation of practice staff with a minimum 2 patients, with consent of the patient
- On-site observation of patient environment and physical environment

Applicant will participate in site visit including having Site Coordinator on site, invite partners to exit interview, and participate in exit interview

STEP 5: Site Visit Report

SPO will send written site visit report within two weeks of site visit

Complete any indicated Action Items by listed deadlines

STEP 6: Congratulations – Your SBHC is CERTIFIED!

*More information can be found on the [Data Requirements](http://www.healthoregon.org/sbhc) page at www.healthoregon.org/sbhc

**More information can be found on the [Certification Standards](http://www.healthoregon.org/sbhc) page at www.healthoregon.org/sbhc

***Archived meetings can be found on the [Coordinators Meetings](http://www.healthoregon.org/sbhc) page at www.healthoregon.org/sbhc

Certification Standards Review Update

- October 2015 – February 2016:
 - Workgroup meetings
- April 2016:
 - Draft changes released
 - Field feedback opportunity
- June 2016:
 - Present to CLHO



Certification Standards Review Update

- June – December 2016:
 - Rules change process
- Fall 2016:
 - New Standards to field
- July 2017:
 - New Standards in effect





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SBHC Resource Networks



SBHC Resource Networks

Question:

In which topic areas, if any, would your SBHC want some additional assistance from others in the field?



Upcoming Webinars

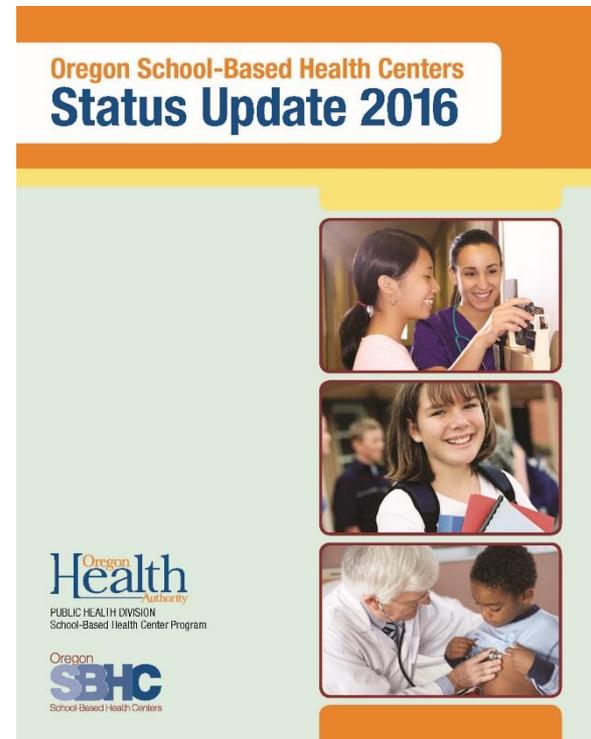
- KPM Data Collection/Chart Auditing
 - Wednesday February 24th, 10:00-11:00am
- OPIP Marketing & Youth Feedback on SBHCs
 - Wednesday, March 16th, 11:00am-12:00pm
- Spring SBHC Coordinators Meeting
 - Tuesday, April 12th, 1:00-3:00pm

2016 Status Update is now online!

www.healthoregon.org/sbhc

Hard copies are being mailed to SBHCs, Coordinators and Health Departments this month

[Poll Questions](#)



QUESTIONS???



OSBHA 2016 Legislation

- Short Legislative Session: February 1-March 6
- LC 0063: Coordinated Student Success Act
 - Funding to pilot trauma informed school environment
 - Must have an SBHC or equivalent
 - Highlights the value of SBHCs
 - Perfect marriage for addressing education and health disparities and utilizing SBHCs as a resource and integral part of a school-wide effort



Follow up from 2015 Legislative Session

- \$10 million for Safety Net Capacity Grants
- Dental
 - HB 2972 Schools required to have a dental screening
 - SB 660 Dental sealant programs in elementary and middle schools with >40% FRL
 - HB 2024 directs OHA to adopt rules and procedures for training and certifying traditional health workers to provide oral disease prevention services.
- School Nurse Task Force

Awareness Day February 9th 9am-3pm

- Registration is now OPEN!
- Transportation scholarships are available
- Contact Suzanne:
suzanne@osbha.org



You Can Help Advocate! Watch for Alerts!

Why Advocate?

“Unless someone like you cares
a whole awful lot, Nothing is
going to get better. It's not.”
- Dr. Seuss, The Lorax



Send us your stories:

- Working with undocumented students
- Stories about great partnerships with CCOs or other regional/community partnerships
- A story about how the SBHC helped a student be able to graduate or be more successful in school
- Helping a student significantly improve their health or behaviors
- Any other really inspiring story you would like to share



CORE Grants 2016-2017

The CORE grant program assists school-based health centers (SBHCs) as they work with adolescents to develop healthy relationship skills and knowledge, with a specific focus on social and sexual health.

Projects should have a budget up to \$10,000 and must be achievable within a one-year timeframe (School year 2016-2017).

Menu Options Available in CORE RFA
Including approx. budget + staff capacity required

Menu Options are aligned with core health education concepts to facilitate dialogue with teachers and school administration who may participate in the project

Menu Options allows OSBHA to provide streamlined technical assistance to CORE grantees, as well as promote collaborative working relationships between CORE grantees



CORE Grants 2016-2017

Eligible applicants are:

Certified school-based health centers in the State of Oregon or
Single sites or multiple site systems, or
Planning sites

AND

Current members of the Oregon School-Based Health Alliance.

OSBHA will release the CORE RFA in early February 2016; grantee notification will be in April 2016

If you are interested in doing a short project, funding can be tailored to best fit your program and capacity needs.

Please contact Suzanne Flory, Member Services Program Manager, if you have questions about CORE grant funding: suzanne@osbha.org



Membership

Voice

Technical Assistance and
Training

Pass through Grants

Learning Opportunities

Invoices

Critical to supporting your
work and the changes in
SBHC

Contribute today!





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Contact Us

School-Based Health Center Program

Oregon Public Health Division

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