

Instructions for the SBHC Student Satisfaction Survey

ONLY students between **Ages 12-19** can fill out a survey. **DO NOT** give the survey to parents/guardians or to patients who are older or younger.

Surveys should be administered **after** a visit.

Steps for administering the surveys:

1. Start the surveys as soon as you receive this packet.
2. Right after a visit with a provider/nurse/mental health counselor:
 - Ask the student to fill out a survey. *If they say **NO***, then mark the REFUSAL on the Survey Reporting Form.
 - *If the student says **YES***, then ask if they have already filled one out. If they have already participated, then do **not** have them complete another one.
 - The student should fill out the survey in a private place and then place it into the envelope provided. Do not look at the surveys. They are confidential.
3. Continue this process **ALL** of your surveys are completed.

****All surveys in your packet must be filled-out. If one student refuses, ask the next student to complete the survey.****

4. Once the surveys are completed, put them in the return envelope with the Survey Reporting Form and mail them back no later than June 30th.

We now require a midyear check-in to ensure that everyone is making good progress on completing the surveys. Between January 1 and January 15, all sites should mail their completed surveys to date. Please use one of the enclosed self-addressed and stamped envelopes to the Loretta Jenkins at the State Program Office.

CALL Loretta Jenkins at 971-673-0246 when your packet has been mailed and notify your SBHC Coordinator you have completed ALL of the surveys.

Parental notification about the SBHC Satisfaction Survey:

All SBHCs will be required to make a reasonable effort to notify parents about the Client Satisfaction Survey for the 2016-17 school year. How sites do the notification and what it says is mostly up to the SBHC to decide what is best for them. Here are the guidelines:

1. The notification has to be posted or communicated somehow so that is easily accessible to parents of SBHC clients. For example, it could be printed on annual registration forms or informational materials that get sent out to parents each year, or be posted on a visible part of the SBHC web site, or some other method that would be accessible. It does NOT have to target parents of existing SBHC clients – it just has to be visible and available to parents of kids who might access the SBHC.
2. SBHCs can use the SPO sample language or create their own. If they create their own, it should say that the survey is anonymous, optional, and won't impact a student's ability to get care.
3. SBHCs will be asked to let the SPO know the method they use to notify parents and the language they used in their notification by October 1, 2016. SBHCs are welcome to notify the SPO much sooner if that is easier.

Sample Language for SBHC Satisfaction Survey Parental Notification

Students between the ages of 12 and 19 who visit the SBHC may be asked to complete an anonymous survey after their visit. The survey asks about the student's satisfaction and experience at the SBHC, as well as some general questions about their physical and mental health status. Students can refuse to take the survey and this will not affect their ability to get care at the SBHC. To see a copy of the survey, please go to the "SBHC Data Requirements" link on <http://healthoregon.org/sbhc>. If you have questions about the survey, please contact the SBHC State Program Office at sbhc.program@state.or.us

Sample Language for SBHC Satisfaction Survey Parental Notification – Spanish translation

A los estudiantes de entre 12 y 19 años que visitan el Centro de Salud en la Escuela (*School-Based Health Center* o SBHC) se les puede pedir que contesten una encuesta anónima después de su visita. La encuesta hace preguntas sobre la satisfacción y la experiencia del estudiante en el SBHC y otras preguntas generales sobre su estado de salud física y mental. Los estudiantes pueden negarse a participar en la encuesta y esto no afectará su capacidad de recibir atención médica en el SBHC. Para ver una copia de la encuesta, por favor vaya al enlace "*SBHC data requirements*" en <http://healthoregon.org/sbhc>. Si tiene alguna pregunta sobre la encuesta, póngase en contacto con la Oficina estatal del Programa SBHC en sbhc.program@state.or.us