



Operational Profile Training

Thursday, September 24th, 2015



Agenda

- ✓ SBHC Site Coordinator role
- ✓ Why, When & Where
- ✓ Operational Profile structure
- ✓ Staff – Who to include
- ✓ SPO changes to Operational Profile
- ✓ Common Trouble Areas
- ✓ Audit Process
- ✓ Operational Profile User's Guide

SBHC Site Coordinator role

- Operational Profile
 - Oct 1st deadline
 - Update as changes occur throughout the year
- Fill required SBHC roles
- Attend Coordinators Meetings
 - October (In-person)
 - Winter (webinar)
 - Spring (webinar)
- Communicate with partners
 - LPHA, SBHC Staff, SPO, etc.
- Encounter Data Submissions
 - Mid-year, year-end
- Satisfaction Survey Submissions
 - Mid-year, year-end

Why have an Operational Profile?

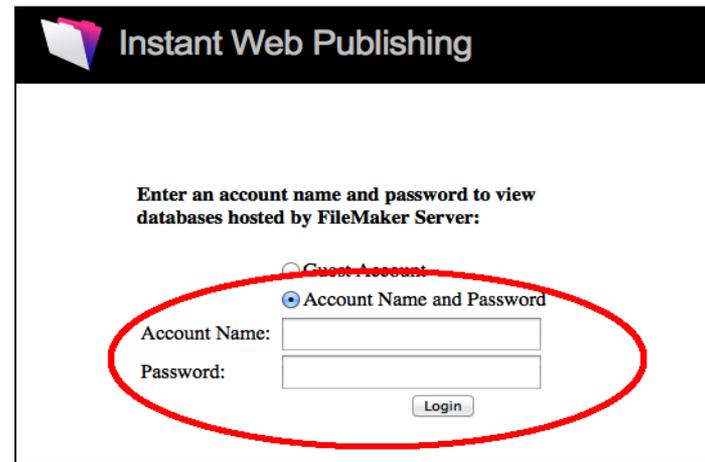
1. It's **required for Certification**
2. It demonstrates that sites are in compliance with the Standards for Certification such as:
 - Staffing roles & shifts, hours of operation, Key Performance Measures & financial information
3. Enables SPO to answer questions from legislators or partners regarding information such as:
 - PCPCH Status, number of centers with Youth Advisory Councils/Committees, number of centers with Dental Providers, etc.

When to fill out the profile

- Before initial certification: Prior to initial certification verification site visit (A.2.a.2.iii.b)
- After certification – October 1st Deadline: Yearly renewal **no later than October 1** to remain certified (A.2.a.2.iv.c)
- As changes occur throughout the year: Sites are required to keep their Operational Profile up to date
- Before certification renewal visits: Prior to a verification site visit

Where to get started

- Access the login page by visiting:
http://west-26.fmsdb.com/fmi/iwp/res/iwp_auth.html
 - Link can also be found on SPO website (Certification Standards page)
- Login information is issued by SPO to new sites and existing sites who have a new medical sponsor
- Login information does not change from year to year
- Feel free to contact us if you lose or forget your login information
sbhc.program@state.or.us



Instant Web Publishing

Enter an account name and password to view databases hosted by FileMaker Server:

Guest Account

Account Name and Password

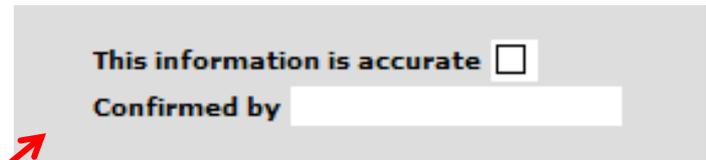
Account Name:

Password:

Login

Operational Profile structure

- You must review and update the following tabs/pages:
 - Details
 - Including County, System and Medical Sponsor information
 - Operations
 - Staff
 - Individual Staff pages (Staff & Shift Hours)
 - Shift Hours
 - KPMs
 - Financial
- Be sure to mark the accuracy confirmation boxes. If you don't we can only assume your Operational Profile is not done.



This information is accurate
Confirmed by

Reminder:

- **SBHC details, operations and staff/shift hours** information should be for the current fiscal year (July 1, 2015 to June 30, 2016).
- **KPM and Financial data** should be from the previous fiscal year (July 1, 2014 to June 30, 2015).
 - **NOTE:** If a new or recently reopened/recertified site was NOT open and certified by January 1st of the previous fiscal year it is NOT required to submit KPM and/or Financial data for that fiscal year.

Staff – Who to include

- Please include all staff that have clinical on-site shifts at the SBHC including:
 - Staff whose hours are not used to meet certification requirements
 - Staff whose data is not submitted to the SPO
 - I.e.: Support staff, community health workers, health educator, etc.
- Also include staff who do not have regular on-site clinical shifts but have other roles associated with the SBHC
 - I.e.: Health Department Administrator, SBHC Administrator, etc.
 - Use the ‘Comments’ box on their individual Shift Hour page to list their role, physical work location and typical weekly shift schedule (days/hours).
 - I.e.: HD Administrator. Works Mon-Fri, 8am-5pm at the county health dept.

Staff - Roles

- SBHCs are required to assign the following roles:
 - Health Department Administrator
 - Health Department Nursing Supervisor
 - Health Department Primary SBHC Contact
 - Immunization Coordinator
 - Laboratory Coordinator
 - Medical Director
 - Primary Care (MD, DO, ND, NP, PA)
 - Privacy Official
 - Quality Assurance Coordinator
 - SBHC Administrator
 - SBHC Site Coordinator
 - Support Staff
- Some staff may hold multiple roles
- Additional roles are available and should be assigned to appropriately reflect the SBHC staffing model (i.e.: QMHP, Dental Provider, etc.).
- SBHC role descriptions can be found on the Certification Standards page of our website (www.healthoregon.org/sbhc)

QUESTIONS???

SPO Changes to Operational Profile

- We have made changes to the following 'tabs':
 - Staff
 - Individual Staff & Shift Hours
 - Shift Hours
 - Cert Waiver
 - KPM
 - Financial
- No changes have been made to the following 'tabs':
 - Details
 - Operations

Details 'tab' – no changes

 SBHC Detail - Web 

HOME LIST

Fake SBHC SBHC ID 9999

Details | Operations | Staff | Shift Hours | Cert Waiver | KPM | Financial

SBHC Name: Fake SBHC Host School Name: Yo

SBHC	SBHC Physical Address	Mail Address Line 1	SBHC Mailing Address <input type="checkbox"/> Same as Physical
Address Line 1	999 Fake St.	D ST	
Address Line 2	Suite 2756		
	Fakertons OR 97213	Fakertons OR 97213	
Phone	503-222-8883	InfoSystem	Bill 3rd party <input checked="" type="radio"/> Yes <input type="radio"/> No
Fax	503-222-8883	Info System	Electronic Claim <input checked="" type="radio"/> Yes <input type="radio"/> No
		Primary Care EMR	
		The EMR	
		Mental Health EMR	

County Info To County

County: Cascadia
Primary Contact: Terry Smith
Phone: 555-555-5553
Email: TS@cascadiaq.co.gov

System Info To System

System: zCascadia Fake
Primary Contact: Joe Williams
Phone: 503-123-4563
Email: joe@testsystem.net

Medical Sponsor

Medical Sponsor: zCascadia Fake
Primary Contact: Joe Williams
Phone: 503-123-4563
Email: joe@testsystem.net

This information is accurate
Confirmed by: _____

Operations 'tab' – no changes

SBHC Detail - Web  HOME  LIST

Fake SBHC SBHC ID 9999

Details **Operations** Staff Shift Hours Cert Waiver KPM Financial

Hours of Operation

	Regular Open	Close	Open During Summer	Summer Open	Close
Monday	1:30 PM	4:30 PM	<input checked="" type="radio"/> Yes <input type="radio"/> No	10:30 AM	2:30 PM
Tuesday	8:30 AM	4:30 PM		8:30 AM	3:30 PM
Wednesday	9:00 AM	2:00 PM		9:30 AM	2:30 PM
Thursday	6:30 AM	1:30 PM		9:30 AM	3:30 PM
Friday	9:30 AM	2:30 PM		8:30 AM	2:30 PM

Populations Served

Serves students from other schools Yes No

Names of schools or districts that your SBHC serves
Fakeriffic

Serves Non School-aged Population Yes No

Population Served

- Pre-K (Children from birth through 5 years of age)
- Post High School individuals
- Faculty and Staff of the school
- Other

Please enter any other non-student populations served by this SBHC
Teachers and other staff members.

FQHC

Are you a Federally Qualified Health Center (FQHC)? Yes No

PCPCH

PCPCH Status Yes No

Tier 1

Date of Last Recognition 05/06/2012

Youth Advisory Committee

Do you have a Youth Advisory Committee?

This information is accurate

Confirmed by _____

Changes to Main Staff 'tab'

SBHC Detail - Web

HOME LIST

Fake SBHC SBHC ID 9999

Details Operations **Staff** Shift Hours Cert Waiver KPM Financial

Staff

To see all existing staff in system, **ADD** an existing staff member to this SBHC or **CREATE** a new staff member click here: [Staff List](#)

Staff Name	Roles
To Staff Gary Test	Dental Provider (DMD, EFDA, RDH); SBHC Administrator; SBHC Site Coordinator
To Staff Test First Test Last	Health Dept Administrator; Health Dept SBHC Primary Contact
To Staff Larry Test	Support Staff (Office/Health/Medical Asst)
To Staff Crystal Test	Health Dept Nursing Supervisor; Immunization Coordinator; Laboratory Coordinator; Medical (RN/LPN); Privacy Official; Quality Assurance Coordinator
To Staff Star Lord	Qualified Mental Health Provider (QMHP)
To Staff Blahmaster Salomon	Medical Director; Primary Care (MD, DO, ND, NP, PA)

Created: 3/16/2012 10:14:49 AM
Last Viewed: 9/21/2015 8:44:31 AM
View Count: 2804

This information is accurate
Confirmed by _____

Changes to Individual Staff 'tab'

Staff Detail - Web

HOME LIST

Test First Test Last Staff ID 360

Staff Shift Hours

First Test First Last Test Last

Email of staff member TLast@fake.com staff phone # 541-555-1234
Employer County X Public Health Department Alt. Phone # 541-555-4321

(If mailing address other than SBHC)

Organization County X Public Health Department
Address Line 1 123 South Jay Street
Address Line 2 Room 10
City Lost City State OR Zip 97522

Roles

- Dental Provider (DMD, EFDA, RDH)
- Health Dept Administrator
- Health Dept Nursing Supervisor
- Health Dept SBHC Primary Contact
- Immunization Coordinator
- Laboratory Coordinator
- Medical (RN/LPN)
- Medical Director
- Primary Care (MD, DO, ND, NP, PA)
- Privacy Official
- Qualified Mental Health Provider (QMHP)
- Quality Assurance Coordinator
- SBHC Administrator
- SBHC Site Coordinator
- Support Staff (Office/Health/Medical Asst)

Credentials

- MD
- DO
- ND
- PA
- NP
- RN
- LPN
- CNA
- Medical Assistant
- QMHP
- LCSW
- Alcohol & Drug Counselor
- Dentist (DMD)
- Registered Dental Hygienist (RDH)
- Expanded Function Dental Assistant (EFDA)
- Health Educator

SBHCs associated with Test First Test Last

To SBHC Fake SBHC

Systems associated with Test First Test Last

Cascadia Fake

Staff members can be associated with a system, even if they aren't staff members at any SBHC in that system

Created 6/19/12 2:38 PM by web test
Modified 9/3/15 12:51 PM by web test

Changes to Main Shift Hours 'tab'

SBHC Detail - Web

HOME LIST

Fake SBHC SBHC ID 9999

Details Operations Staff **Shift Hours** Cert Waiver KPM Financial

To see all existing staff in system, **ADD** a shift for an existing staff member to this SBHC or **CREATE** a new staff member click here: [Staff List](#)

	Day	Start	End	Shift Duration	Staff Member	Role
To Staff	Monday	8:00 AM	12:00 PM	4	Bob Salomon	Medical Director; Primary Care (MD, DO, ND, NP, PA)
To Staff	Monday	12:30 PM	5:30 PM	5	Larry Test	Support Staff (Office/Health/Medical Asst)
To Staff	Tuesday	7:00 AM	9:00 AM	2	Star Lord	Qualified Mental Health Provider (QMHP)
To Staff	Tuesday	8:00 AM	1:00 PM	5	Bob Salomon	Medical Director; Primary Care (MD, DO, ND, NP, PA)
To Staff	Tuesday	8:00 AM	3:30 PM	7.5	Gary Test	Dental Provider (DMD, EFDA, RDH); SBHC Administrator SBHC Site Coordinator
To Staff	Tuesday	1:30 PM	5:30 PM	4	Larry Test	Support Staff (Office/Health/Medical Asst)
To Staff	Wednesday	8:00 AM	5:00 PM	9	Larry Test	Support Staff (Office/Health/Medical Asst)
To Staff	Wednesday	1:00 PM	3:00 PM	2	Bob Salomon	Medical Director; Primary Care (MD, DO, ND, NP, PA)

To **EDIT** or **DELETE** existing staff shifts for this SBHC, use the **To Staff** button on the left side of the shift row

This information is accurate

Confirmed by _____

Changes to Individual Shift Hours 'tab'

Staff Detail - Web

HOME LIST

Bob Salomon *Shift Hours entry is missing information Staff ID 970

Staff Shift Hours

Day	Start	End	Duration	SBHC Name	Shift
Monday	8:00 AM	12:00 PM	4	Fake SBHC	X
Tuesday	8:00 AM	1:00 PM	5	Fake SBHC	X
Wednesda	1:00 PM	3:00 PM	2	Fake SBHC	X
Thursday	1:00 PM	5:00 PM	4	Fake SBHC	X
	7:00 AM	7:00 AM	0		X
Monday					
Tuesday					
Wednesday					
Thursday					
Friday					

Comments

Write a note here explaining staff members without clinic shift hours listed – i.e.: Site Administrator, Health Department SBHC Primary Contact

Changes to Cert Waiver 'tab'

SBHC Detail - Web

HOME LIST

Fake SBHC SBHC ID 9999

Details Operations Staff Shift Hours **Cert Waiver** KPM Financial

Certification Waivers + Waiver

Select	Date Created	Section Letter	Expected Completion	Approved	Date Approved	Date Resolved
Select	9/21/2015					
Select	11/4/2013	Data Collection/Reporting	11/21/2013	Yes	4/9/2014	2/10/2015
Select	11/4/2013	Sponsoring Agency/Facility	12/25/2013	Yes	4/9/2014	12/04/2013
Select	7/8/2013	Sponsoring Agency/Facility	10/15/2014	Yes	8/5/2013	4/3/2015
Select	12/5/2012	Data Collection/Reporting	7/16/2014	Yes	4/9/2014	12/4/2013
Select	11/29/2012	Sponsoring Agency/Facility	7/11/2014	Yes	4/9/2014	4/9/2015

Certification Waiver Info

Date Created 9/21/2015 10:21:56 AM

Submitter Contact

First
Last
Title
Email
Phone

County Contact

Has County Public Health been notified? Yes No

First
Last
Title
Email
Phone

Certification Section

Which standard is not being met?

Explanation of why standard is not met

Action plan to meet standard

Expected date of compliance

View Report

WAIVER INFORMATION COMPLETE: Submit to SPO

Waiver Instructions

Instructions on how to fill out a waiver are in the Operational Profile User's Guide located on the State Program Office website under the Certification Standards tab.

To submit the waiver, click the "Submit" button ONCE to send the waiver to the State Program Office for review.

Changes to KPM 'tab'

HOME
LIST
SBHC Detail - Web

Fake SBHC
SBHC ID 9999

Details
Operations
Staff
Shift Hours
Cert Waiver
KPM
Financial

Key Performance Measures

+ KPM

	Date Created	Fiscal Year	RA %	CPE %	BMI %	Date Submitted	
Select	9/21/2015						X
Select	4/8/2015	7/1/2013 to 6/30/2014	132.4%	55.6%	187.5%	7/30/2015	X
Select	8/5/2013	7/1/2011 to 6/30/2012	100.0%	444.4%	62.5%		X

Key Performance Measure Info

Date Created 9/21/2015 10:32:12 AM

Fiscal Year

Risk Assessments (RA)

Reviewed Number of charts reviewed

In compliance Number of charts in compliance

Percent of charts in compliance

Comprehensive Physical Exam (CPE)

Reviewed Number of charts reviewed

In compliance Number of charts in compliance

Percentage of charts in compliance

Body Mass Index (BMI)

Reviewed Number of charts reviewed

In compliance Number of charts in compliance

Percentage of charts in compliance

Please provide any explanations/feedback

KPM INFORMATION COMPLETE: Submit to SPO

Optional KPM - Biennial Selection

+ Optional KPM

	Date Created	Biennium	Optional KPM Measure
Select	9/21/2015		

Optional KPM - Biennial Selection Info

Biennium

Choose One

- Adolescent Immunization
- Chlamydia Screening
- Depression Screening
- Nutrition Counseling
- Substance Use Screening

This information is accurate

Confirmed by

Changes to Financial 'tab'

SBHC Detail - Web

HOME LIST

Fake SBHC SBHC ID 9999

Details Operations Staff Shift Hours Cert Waiver KPM **Financial**

Financial - Annual Revenue + Annual Rev

	Date Created	Fiscal Year	Total Op Rev	Date Submitted	
Select	9/21/2015	7/1/2014 to 6/30/2015	\$127,715.00	9/21/2015	X
Select	7/14/2015	7/1/2012 to 6/30/2013	\$68,131.00	7/31/2015	X
Select	8/5/2013	7/1/2013 to 6/30/2014	\$1,986.00	7/14/2015	X
Select	9/4/2012	7/1/2011 to 6/30/2012	\$5,000.00	7/14/2015	X

Annual Revenue Info

Date Created 9/21/2015 11:09:44 AM

Fiscal Year 7/1/2014 to 6/30/2015

Revenue Breakdown by Source

Public funds (federal, state, county, city)	\$92,500.00
Medical Sponsor Funds	\$2,500.00
One time grants or awards (public of private)	\$15.00
Fundraising and in-kind donations	
Patient fees	\$3,200.00
Third party billing	\$32,000.00
Other	
Total Operating Revenue	\$127,715.00

Please provide any explanations/feedback

[View/Edit Entry](#)

Changes to Annual Revenue Detail 'tabs'

 HOME

Annual Revenue Detail - Web

The purpose of this report is to identify all sources of operating revenue Oregon State-Funded SBHCs receive every year.

SBHC Name

Fiscal Year

First Name [Back to SBHC Detail](#)

Last Name Title

Phone Email

Public Funds/Grants/Donations Fees/Billing Other and Total

Please enter total revenue received for each category below for the entire fiscal year (July 1 - June 30).

**Revenue Source Breakdown:
Public/Medical Sponsor Funds**
(This does NOT include billing revenue)

Federal Funds
Description of Federal Funds

State Funds

SPO Base Funding
SPO/AMH (Mental Health) Funds
SBHC Innovation Grants
Other State Funds
Description of Other State Funds

County Funds
City Funds
School District Funds
Medical Sponsor Funds

Public/medical sponsor funds TOTAL

**Revenue Source Breakdown:
Grants** [+ Add Grant](#)

Grantor Name	Grant Name	Amount
SBHC Foundation	Gold Star	\$15.00
One time grants or awards TOTAL		\$15.00

**Revenue Source Breakdown:
Fundraising and in-kind donations** [+ Add Event](#)

Event Name	Revenue
Donations TOTAL	

[Next Page >>](#)

Changes to Annual Revenue Detail 'tabs'

HOME
Annual Revenue Detail - Web

The purpose of this report is to identify all sources of operating revenue Oregon State-Funded SBHCs receive every year.

SBHC Name

Fiscal Year

First Name

Last Name

Phone

[Back to SBHC Detail](#)

Title

Email

Public Funds/Grants/Donations
Fees/Billing
Other and Total

Please enter total revenue received for each category below for the entire fiscal year (July 1 - June 30).

Revenue Source Breakdown: Patient Fees

Registration fees

Co-pays/deductibles

Sliding scale fees from uninsured

Other patient fees

Description of other patient fees

Patient fees TOTAL \$3,200.00

Revenue Source Breakdown: Third Party Billing

Payor Type	Total Revenue	Does revenue include PMPM or Incentive Payments?
OHP (DMAP - FFS)	\$20,000.00	<input type="radio"/> Yes <input checked="" type="radio"/> No
OHP (CCOs)	\$10,500.00	<input checked="" type="radio"/> Yes <input type="radio"/> No
C-Care (Family Planning)	\$1,500.00	<input type="radio"/> Yes <input checked="" type="radio"/> No
Private Insurance	\$0.00	<input type="radio"/> Yes <input checked="" type="radio"/> No
Other third party payor(s)	\$0.00	<input type="radio"/> Yes <input checked="" type="radio"/> No
Third party billing TOTAL		
		\$32,000.00

<<Previous
Next Page >>

Changes to Annual Revenue Detail 'tabs'

Annual Revenue Detail - Web

HOME The purpose of this report is to identify all sources of operating revenue Oregon State-Funded SBHCs receive every year.

SBHC Name

Fiscal Year

First Name

Last Name

Phone

[Back to SBHC Detail](#)

Title

Email

Public Funds/Grants/Donations

Fees/Billing

Other and Total

Revenue Source Breakdown: Other funding source

[+ Add Other](#)

Source Description	Amount
Other funding sources TOTAL	

Revenue Breakdown by Source

Public funds (federal, state, county, city)	\$90,000.00
Medical Sponsor Funds	\$2,500.00
One time grants or awards (public of private)	\$15.00
Fundraising and in-kind donations	
Patient fees	\$3,200.00
Third party billing	\$32,000.00
Other	
Grand Total Operating Revenue for 7/1/2014 to 6/30/2015	\$127,715.00

Please provide any explanations/feedback

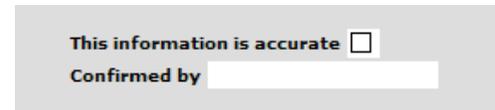
<<Previous

FINANCIAL
INFORMATION
COMPLETE:
Submit to
SPO

QUESTIONS???

Helpful Hints

- Do not use the browser 'back' button. Use the buttons provided in the Operational Profile.
- Any change you make will be automatically saved
- Check all the accuracy confirmation boxes
 - Located on Details, Operations, Staff, Shift Hours and KPM 'tabs'
- Make sure staff information is complete and accurate (i.e.: email, shift hours, off site addresses, etc.)
 - Be sure to use fill out all the requested information, spell names correctly, use proper capitalization, etc.
- Make sure all KPM percentages are under or at 100%
 - If it's over 100% the information is incorrect

A screenshot of a grey rectangular box containing the text "This information is accurate" followed by an unchecked checkbox. Below this, the text "Confirmed by" is followed by a white rectangular input field.

QUESTIONS???

SPO Operational Profile Audit Process

- Existing Certified SBHCs:
 - The profile audit begins after the October 1st deadline
 - What we are looking for:
 - All the required areas are complete and confirmed
 - » Details, Operations, Staff, Shift Hours, KPM & Financial information
 - SBHC has met minimum operating hours
 - SBHC has met minimum staffing requirements
 - SBHC has met minimum KPM requirements
 - Sites will be notified if they are out of compliance

Don't forget...

WE ARE HERE TO HELP!

The audit process is not meant to be an iron hammer. If things look amiss we will help you. Just like the verification site visits, we are your partners and want you to succeed!

Operational Profile User's Guide

- Step-by-step instructions for making changes in the Operational Profile
- Can be found on our website at:
www.healthoregon.org/sbhc

Operational Profile User's Guide

2015-16



Oregon
SBHC
School-Based Health Centers
www.healthoregon.org/sbhc

Oregon
SBHC
School-Based Health Centers

Oregon
Health
Authority

Contact Information

Melanie Potter

School-Based Health Center Program

Oregon Public Health Division

800 NE Oregon St., Ste. 805

Portland, OR 97232

P: 971-673-0871

F: 971-673-0250

sbhc.program@state.or.us or melanie.m.potter@state.or.us

www.healthoregon.org/sbhc

Oregon
Health
Authority