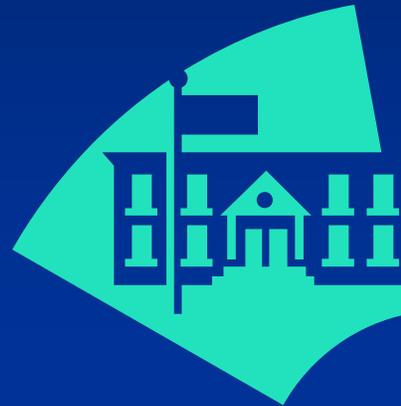
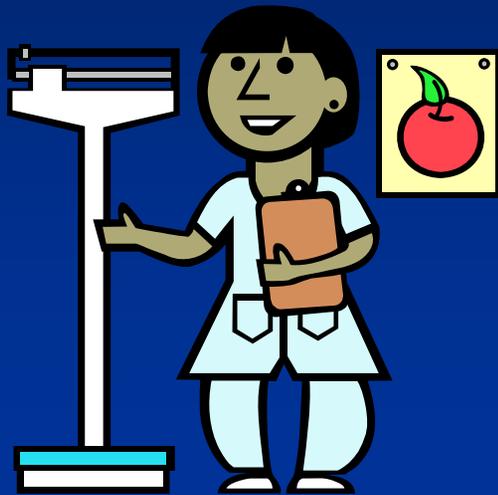


Maryland's School-Based Health Center Program



Presenters

Anne Walker, MS, MHS

SBHC Specialist

MD State Department of Education

Donna Behrens, RN, MPH, BSN

Executive Director

MD Assembly on School-Based Health Care



Topics

1. Background
2. Maryland SBHC Programs
3. Important Developments
4. Challenges
5. How MCHRC Can Help SBHCs



*What is a
School-Based Health Center?*



A SBHC is a “health center located in a school or on school grounds that provides, at a minimum, on-site primary and preventive health care, mental health counseling, health promotion, referral and follow-up services for young people enrolled (National Health & Education Consortium, 1995, p. 2)



Or...

A clinic in a school



School-Based Health Centers:

Always:

- provide somatic health services
- provide screening & prevention services
- obtain parental consent
- operate under the auspices of a licensed health care organization
- coordinate care with a child's family and primary care provider



School-Based Health Centers:

May provide:

- mental health services
- oral health services
- substance abuse services
- nutritional services
- licensed laboratory services
- services to school staff



School-Based Health Centers:

Do not:

- serve as a child’s “primary medical home”
- compete with other providers of care
- operate after-hours or on weekends
- provide care outside the scope of licensure and policy guidelines



School-Based Health Centers:

Supplement and complement School Health Services (the “school nurse”):

- School Health Nurses are in all 1412 schools
- SBHCs are in 62 schools that have a need for enhanced medical and psychosocial services



SBHCs in Maryland

- Baltimore City 18
- Baltimore Co. 14
- Caroline Co. 6
- Cecil Co. 2
- Dorchester Co. 4
- Harford Co. 5



SBHCs in Maryland

• Montgomery Co.	3	(soon to be 7)
• Prince George's Co.	4	
• Talbot Co.	3	(and one pilot)
• Washington Co.	2	(soon to be 3)
• Wicomico Co.	1	
•		
<hr/>		
TOTAL	62	



SBHCs in Maryland

- Elementary Schools 25
- Middle Schools 12
- High Schools 21
- K-8 Schools 3
- Special Schools 2



SBHCs Under Consideration in:

- Frederick County
- Somerset County
- A private school in Baltimore City (St. Francis Academy)



Reasons to Implement SBHCs

- Poverty, uninsurance or underinsurance
- Lack of access to care (few providers, transportation issues, working parents)
- Chronic health conditions
- Medically fragile children



Health Issues Addressed by SBHCs

- Acute illnesses and injuries
- Management of chronic illnesses (asthma, diabetes, allergies)
- Screenings & Immunizations (e.g. FluMist)
- Sports physicals
- Mental health needs
- Health education



Positive Effects of SBHCs

- Improved attendance
- Improved health status
- Enhanced health knowledge/care-seeking
- Increased academic performance
- Reduced emergency room use
- Reduced health expenditures
- Reduced behavioral issues



Who works in SBHCs?

- A health care provider (MD, NP, PA)
- A registered nurse
- A certified nursing assistant (CNA), LPN, medication technician, medical office assistant, or health aide
- Billing and/or administrative staff
- Dental and mental health professionals
- Other specialists (nutritionist, substance abuse counselor, etc.)



MD SBHC Statistics 2004-2005

- 30,504 students enrolled in SBHCs
- 19,198 students used SBHC services
- 80,070 SBHC visits



Funding Sources for SBHCs

- State General Funds
- Local (County) Funds
- Federal (330 CHC) Funds
- In-Kind Funds
- Billing & collections
- Private donations



Average Cost of a SBHC

- \$100,000 - \$200,000 per year, each
- Total cost of Maryland's 63 SBHCs:
\$6,200,000 - \$12,400,000
- FY '07 MD General Funds: \$2,875,206
or between 23% and 46% of the cost



Important Developments

- 2006 SBHC Standards
- Billing & reimbursement project
- Federal authorization of SBHCs
- MASBHC advocacy
- MSDE's ability to study student outcomes
- 2005 MD legislation creating PAC



MD SBHC Policy Advisory Council

Legislative Charge (HB 932; 2005)

“ The purpose of the Council is to coordinate the interagency effort to develop, sustain, and promote quality school-based health centers in Maryland. “



SBHC Policy Advisory Council

25 Members

1. Special Secretary of the Governor's Office for Children (or designee)
2. The State Superintendent of Schools (or designee)
3. The Secretary of Health (or designee)
4. The Secretary of Juvenile of Services (or designee)
5. The Secretary of Human Resources (or designee)
6. The Secretary of Budget and Management (or designee)
7. One member of the Senate of Maryland appointed by the President of the Senate
8. One member of the House of Delegates of Maryland appointed by the Speaker of the House



SBHC Policy Advisory Council

The following appointed by the Governor:

9. One individual with experience or expertise with the Maryland Medical Assistance Program
10. One local health officer
11. One local superintendent of schools
- 12-14. Three individuals from local jurisdictions, including at least one representative of a local management board
- 15-17. Three community leaders
- 18-20. Three consumers
21. A pediatrician
22. A nurse practitioner who serves children in a school-based health center
23. A member of the Maryland Assembly of School-Based Health Care
24. A dental health professional
25. A representative of the Mental Hygiene Administration or a core service agency



Challenges Facing MD SBHCs

- Funding
 - State, Local, Reimbursement, Federal
- Standards
- Staffing; recruiting, training, retaining
- Community acceptance & involvement
- Institutional acceptance & support



How can the MCHRC help?

- Policy study & advocacy
- Funding for system-wide projects
- Leveraging other funds (local jurisdictions put up matching funds, etc.)



Thank you! Questions?

