



Oregon School-Based Health Alliance

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School-Based Health Centers (SBHCs)

What are SBHCs?

A patient-centered, evidence-based health care model providing physical, mental, and preventive health. SBHCs are located on school grounds and operate during school hours.

Who is served by SBHCs?

SBHCs serve all students in a school or district regardless of ability to pay. In some cases they serve community members as well.

There are 77 SBHCs in 25 counties in elementary, middle and high schools.



Quality Services

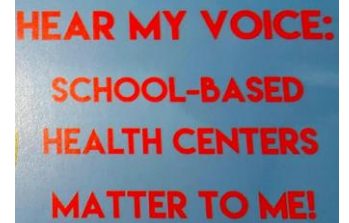
- ✓ Help CCOs meet state metrics such as adolescent well child visits and depression screenings
- ✓ Effective access points - sometimes the only access points
- ✓ Address health equity, serving a higher percentage of students of color than are represented in Oregon as a whole.
- ✓ Mental Health services are provided in 97% of SBHCs and make up 29% of visits.
- ✓ 96% of school based health centers have electronic health records
- ✓ 55% of them are Patient-centered Primary Care Home Certified



Impact of a 25% Budget Reduction

- Potential closure of 20 SBHC sites
- 13,700 students would not receive preventive or mental health services
- SBHCs leverage about \$4 for every state dollar received, so reducing SBHC funding reduces state resources overall
- Schools will need to choose between removing critical student health supports and using limited education dollars to provide them



A blue rectangular sign with red text. The text is arranged in four lines: "HEAR MY VOICE:", "SCHOOL-BASED", "HEALTH CENTERS", and "MATTER TO ME!".

HEAR MY VOICE:
SCHOOL-BASED
HEALTH CENTERS
MATTER TO ME!

Making a Difference

“Alex”* was brought to the clinic because he was anxious and distraught. He eventually divulged that he had taken an overdose earlier in the day in hopes of killing himself. After a physical exam to assure his safety, Alex tearfully shared the challenges he had experienced, that he felt like a failure. He really didn’t want to kill himself, but didn’t know how to reach out to his family. He was sure this event would damage a fragile relationship he had been rebuilding with his father.

The mental health provider was consulted and convinced him to talk to his father. His father came in and was briefed to know that his child was in a fragile state, and assisted in preparing a supportive response. With the help of the counselor, father and son were able to bridge their communication gap, the student left feeling supported by his father and the Health Center, and referral and appointments for follow up were made. The family was very grateful for the services received.

* Name changed to protect privacy