What's inside Module 2
This module will guide you through the SBHC planning process including:
- Establishing a planning team
- Assessing need and engaging the community
- Determining whether to move forward with an SBHC
- Developing school and healthcare provider partnership

This Tookit also includes:
- Module 1: Understanding SBHCs
- Module 3: Setting up an SBHC

How do you establish a planning team?

Planning for an SBHC takes significant time and energy and is best completed collaboratively with a team. The planning team has two initial primary objectives: (1) assessing a community's school-based health needs and (2) determining whether an SBHC is the appropriate model for meeting the community's needs. If there is consensus to move forward with setting up an SBHC, then the planning team will also be instrumental in (3) developing the buy-in and necessary partnerships to establish an SBHC and (4) creating the mission, vision, and structure of the SBHC.

In establishing an **SBHC planning team**, it is important to identify members with a breadth of complementary skills and perspectives. At minimum, the planning team should include the following key stakeholders:
- Students and their families
- Community members
- School building and/or school district health services teams (e.g., school nurses, counselors, psychologists, and social workers)
- School building and/or district contracted health professionals, such as community behavioral health providers
- School building and/or district administrators (e.g., superintendents, building principals, resource coordinators, and student/pupil services)

✓ Planning team checklist

As you put together a planning team, think about:

Composition
- ☐ Are there specific leaders or experts at your institution or partner organizations that should be involved?
- ☐ What types of disciplines or organizations should be represented on the planning team outside of health and education (such as legal, human resources, unions, or business/accounting)?
- ☐ How will students, families, and community members be invited to participate?

Logistics
- ☐ How often will the planning team convene?
- ☐ Where/how will meetings be held? Will meetings be virtual or in-person?

Process
- ☐ Who is responsible for convening and coordinating the planning team?
- ☐ Are there key roles and responsibilities that need to be assigned to planning team members?
- ☐ How will planning decisions be made and recorded?
- ☐ How will planning team members share in responsibility and accountability?

Module 2 Planning for an SBHC

- Teachers, coaches, school faculty, educational services centers, and other school partners
- Community healthcare and public health organizations (i.e., Federally Qualified Health Centers or Look-Alikes, hospital/health systems, community pediatricians, family physicians, dentists, optometrists, ADAMH boards and behavioral health providers, local health departments, specialty practices, etc.)

Additional groups to consider include: philanthropy/foundations, community employers/businesses, academia or higher education, community development and social service organizations, among others.

Tools: Planning team
- **Planning Team Outreach Worksheet** *Ohio School-Based Health Alliance.* A planning chart to track planning team membership and outreach.
- **Checklist for Starting a School-Based Health Center** *Ohio School-Based Health Alliance.* The checklist provides planning team members with an understanding of the scope of work to be accomplished.

How do you conduct a needs assessment?

The next step is to conduct a needs assessment for the school building or school district of focus. A **needs assessment** is a process that combines the analysis of health, education, other data, and community member engagement, to assess a school's health needs. A needs assessment also identifies the potential for improving academic outcomes by addressing identified health needs. For example, needs assessment findings may demonstrate an opportunity to improve chronic absenteeism by increasing students' access to healthcare services. Needs assessments include:

- Use of quantitative and qualitative data to gauge student and/or community health need, identify health and education gaps and trends, and establish benchmarks
- Engagement of students, families, community members, school personnel, and others whose lives and work might be impacted by an SBHC through focus groups, town halls, or other forums
- Mapping existing community resources and strengths to identify assets and potential gaps
- Review of the historical context and root causes of community health and education outcome disparities

The end product of a needs assessment is a shareable report that summarizes quantitative and qualitative data analysis and community conversations, including trend, benchmarks, disparities and inequities, assets and resources, and key findings. Ultimately, a needs assessment should inform whether an SBHC could meet the identified needs of the school community.

When evaluating local data, you do not need to recreate the wheel. Many organizations within a community, such as hospitals/health systems, local health departments, and local Alcohol, Drug and Mental Health (ADAMH) boards, are tasked with creating a community needs assessment. These assessments document community health and well-being data and provide information on community trends and priorities. Instead of developing an entirely separate needs assessment, planning teams can utilize and build upon these existing documents.

Module 2 Planning for an SBHC

Health needs assessments

Organization	Examples of community health needs assessments
Hospital/health system	Cincinnati Childrens' Community Health Needs Assessment Akron Children's Mahoning Valley Community Health Needs Assessment
Local health department	Pickaway County Health Assessment, July 2023 Zanesville-Muskingum County Health Department Community Needs Assessment, 2022
ADAMH board	ADAMH of Franklin County, Community Needs Assessment, 2020
Joint assessment by multiple partners	2022 Cuhayoga County Community Health Needs Assessment Ottawa County and Magruder Hospital Community Health Needs Assessment, 2023

Tools: Needs assessment
Summary reports
- **Alliance & Elmhurst Middle Schools School Health Needs Assessment** *Alameda County School Health Services Coalition*. A comprehensive report developed during a needs assessment in California that outlines 9 key recommendations.
- **San Pablo Community School Needs Assessment Report** *Hatchuel Tabernik and Associates*. A report discussing the methodology and findings of a needs assessment that identifies priority areas for improvement.
- **East Community School Needs Assessment** *East Community School and the University of Rochester*. A website that lists the timeline and steps of their needs assessment and includes links to their report.

Processes, templates, and data sources
- **CDC's CHANGE Tool** *Centers for Disease Control and Prevention*. An eight step tool using a community team to identify needs and prioritize areas for improvement.
- **Comprehensive Needs Assessment PDF** *Office of Migrant Education*. A PDF worksheet that outlines possible needs assessment steps to consider.
- **School mental health quality guide: Needs assessment & resource mapping** *University of Maryland*. A guide for community organizations assessing the need for mental health care programs in schools that can be used to inform SBHCs.
- **Quantitative data sources** *Ohio School-Based Health Alliance*. Table contains local and national sources of data to include in a needs assessment.

Module 2 Planning for an SBHC

Qualitative data and community engagement

Qualitative data provides context and captures the lived experiences or perspectives that may not be represented by the quantitative data alone. In other words, while quantitative data can help identify gaps in health care or health issues that an SBHC could address, it may not be able to tell you *why* those problems exist or *how* they can be addressed in your community.

Qualitative data can be collected in a variety of ways, including through townhall meetings, listening sessions, focus groups and interviews, and surveys. A common mistake well intentioned organizations make is developing solutions before querying the community about problems. This is why qualitative data collection is so important and should focus on assets and resilience in the community as much as needs. Valuing students, families, and community members as the foremost experts in their own lives helps ensure a high-quality needs assessment.

As you are organizing the logistics of qualitative data collection, consider the following:
- What questions do you have about your quantitative data, and who might be able to provide context?
- Which groups have you noticed are not represented or are underrepresented in your quantitative data? Similarly, which groups are not represented on the planning committee?
- How might you tailor your outreach and data collection methods to encourage participation from all groups in your community? Consider potential barriers to participation, and how you can reduce them (e.g., childcare, translators, phone or online options, compensation through dinner or a gift card, etc.).
- How will you share the results of the needs assessment back with participants? How will you provide opportunities for them to confirm their voices and perspectives are represented accurately?

When soliciting input from community members, it is important to:
▶ Share details on time commitment and goals of the interaction
▶ Build rapport at the beginning of convenings through ice breakers or introductions
▶ Demonstrate respect to participants as people and not just data points

Tools: Qualitative data and community engagement
- **A recipe for meaningful community engagement** *Health Leads*. A guide for building community relationships and centering equity.
- **Principles of community engagement** *Department of Health and Human Services*. A primer for understanding and implementing community engagement in health promotion research, including needs assessments.
- **Community Planning Toolkit — Community Engagement** *Community Commons*. This toolkit provides detailed instructions, guiding questions, examples, things to be aware of, and tools to help with enabling relationships and building trust with the community.
- **Program evaluation tools** *Centers for Disease Control*. The CDC has several evaluation tools, including briefs describing both quantitative and qualitative data collection and analysis methods and tips for reporting findings.
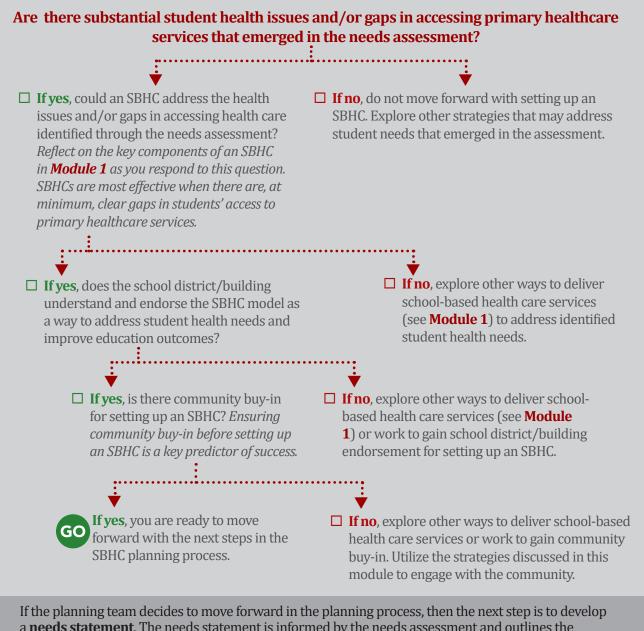
OHIO
School-Based
Health Alliance
Healthy kids learn better

SBHC 101 Toolkit

⬆ back to the top

Module 2 Planning for an SBHC

Should you move forward with an SBHC?

After conducting a needs assessment, the planning team must pause and review the findings. There are a few necessary questions to ask at this stage to determine whether or not an SBHC is the best model to implement to meet the needs of students. The flowchart below highlights those questions and next steps.

Are there substantial student health issues and/or gaps in accessing primary healthcare services that emerged in the needs assessment?

☐ **If yes**, could an SBHC address the health issues and/or gaps in accessing health care identified through the needs assessment? *Reflect on the key components of an SBHC in* **Module 1** *as you respond to this question. SBHCs are most effective when there are, at minimum, clear gaps in students' access to primary healthcare services.*

☐ **If no**, do not move forward with setting up an SBHC. Explore other strategies that may address student needs that emerged in the assessment.

☐ **If yes**, does the school district/building understand and endorse the SBHC model as a way to address student health needs and improve education outcomes?

☐ **If no**, explore other ways to deliver school-based health care services (see **Module 1**) to address identified student health needs.

☐ **If yes**, is there community buy-in for setting up an SBHC? *Ensuring community buy-in before setting up an SBHC is a key predictor of success.*

☐ **If no**, explore other ways to deliver school-based health care services (see **Module 1**) or work to gain school district/building endorsement for setting up an SBHC.

GO **If yes**, you are ready to move forward with the next steps in the SBHC planning process.

☐ **If no**, explore other ways to deliver school-based health care services or work to gain community buy-in. Utilize the strategies discussed in this module to engage with the community.

If the planning team decides to move forward in the planning process, then the next step is to develop a **needs statement**. The needs statement is informed by the needs assessment and outlines the foundational "whys" of your initiative:
- Why is there a need for an SBHC? (i.e., What are the health needs and gaps the SBHC will address?)
- Why is an SBHC the best school-based health care model for meeting those needs?

The needs statement will be helpful in messaging your project to other partners and the community.

Module 2 Planning for an SBHC

Community Learning Centers

If the needs assessment showed needs outside the scope of an SBHC, the planning team may want to learn more about the Community Learning Center (CLC) model. CLCs, defined in ORC **§3302.16**, are a coordinated, community-driven model for providing comprehensive services and supports to meet the multi-faceted needs of students, families, and community members. CLCs promote academic achievement by focusing on the whole child, and integrating health and health care, as well as social services, community development, and community engagement into the school building. SBHCs can be one component of a CLC. In other states, the CLC model is referred to as the community schools model. For this reason, the references below may use both CLC and community school in referring to CLCs. It is important to note that, in Ohio, the term community schools refers to a separate category of schools that should not be confused with the CLC model.

Tools: CLCs

- **What the Four Pillars of Community Schools Look Like in Action** *Learning Policy Institute.* An infographic describing the four components that define community schools.
- **Framework: Essentials for Community School Transformation** *Community Schools Forward Project.* A narrative summary that highlights the key steps to becoming a community school.
- **Community Schools Playbook: A practical guide to advancing community schools strategies** *Partnership for the Future of Learning.* A comprehensive manual that can be used to guide implementation of the model.
- **Community Learning Centers (CLCs) In Ohio: CLCs are a strategy that aligns to many strategies and goals in the state of Ohio** *Community Learning Center Institute.* A document that outlines how the CLC model aligns with Ohio state goals.

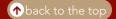## How do you develop school and healthcare provider partnership?

Successful SBHCs are built on purposeful collaboration between a healthcare provider and school district partner. Sometimes, a needs assessment can result in a clear partnership between a community healthcare provider and school partner. However, often, a school may need to identify a community healthcare provider to serve as an SBHC operator. In these scenarios, a school can issue a request for proposal (RFP) outlining the goals of the SBHC and the characteristics needed in an SBHC operator. An RFP can be a great way to solicit interest from community healthcare providers and put in place a systematic process for assessing which organization is the best suited to serve as an SBHC operator.

Reminder

What is an SBHC operator?

The **SBHC operator** is typically a community healthcare provider that runs the day-to-day operations and serves as the administrator of the SBHC. In Ohio, SBHCs are typically sponsored by Federally Qualified Health Centers (FQHC) or FQHC Look-Alikes, a hospital or health system (adult or pediatric), critical access hospital, rural health clinic, or a local health department. The SBHC operator employs the staff to provide healthcare services in the SBHC and provides clinical and billing operations that are independent of the school or school district. Strong collaboration between the SBHC operator and school is critical to ensure that student needs are met.

The **Ohio School-Based Health Alliance census** provides an inventory of SBHC operators in the state and can be a starting place for identifying potential healthcare provider partners for an SBHC.

📝 SBHC operator RFP considerations

There are many factors that impact what may make a great SBHC operator and partner. The following considerations can inform a planning team's selection of an SBHC operator:

☐ Is the organization able to deliver on-site comprehensive primary healthcare services to students?
This is a key component of the SBHC model.

☐ Can the organization serve populations outside of the student body (i.e., school faculty and administration, students' family members, and/or community members?)
While this is not a requirement of an SBHC, particularly for smaller school buildings or districts, the ability for a healthcare provider to serve more than the student population contributes significantly to SBHC sustainability.

☐ Can the organization meet other student health issues identified in a needs assessment? Or, can the organization partner with other providers of those services?
This may include behavioral, vision, or oral health providers.

☐ Is the organization a trusted healthcare provider in the community that it serves?
Consider how long the organization has operated in the community or if it has a plan for community engagement.

☐ Can the organization operate with regular frequency to ensure continuity of care for patients and connect patients to care outside of SBHC operating hours?
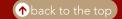*This is a key component of the SBHC model.*

Tools: Request for proposal process

- **School-based health center sponsors** *School-Based Health Alliance.* An overview of common types of healthcare sponsoring organizations.
- **Request for proposal: Establishment of school-based health centers** This is a county-level RFP based in Maryland that includes helpful timelines and appendices.

Allocating partner responsibilities

Once the SBHC operator has been identified, the next step in the planning process is to allocate responsibilities between partners. The allocation of responsibilities between the healthcare and school partner and other details of an SBHC partnership should be codified in a legal document called a Memorandum of Understanding (MOU). An MOU, or other similar agreement, is often developed alongside an SBHC business plan (business planning is discussed in more detail in **Module 3**).

Module 2 Planning for an SBHC

An MOU is drawn up by partners' lawyers and ensures that the school and SBHC operator fully understand the scope and breadth of their partnership. In addition to detailing the allocation of responsibilities between partners, the MOU often includes details about data and information sharing, security, insurance coverage, SBHC services provided, patient population, and parental/guardian consent. MOUs should exist between the school and SBHC operator, but can also extend to other partners that may support services provided in an SBHC. The SBHC business plan, discussed in **Module 3**, will inform the decision points that are detailed in the MOU.

The graphic below provides examples of the common distribution of responsibilities between the school and the SBHC operator in the establishment of an SBHC. Roles and responsibilities may vary depending on the resources and capacities of each of the partners involved.

Responsibilities for SBHC partners

School partner lead responsibilities
- Secure space in the school building for the SBHC
- Provide housekeeping and security services
- Ensure SBHC compliance with FERPA
- Coordinate school health services team, resources, and relevant partners to ensure SBHC integration

Shared responsibility
(note either partner may be designated as the lead)
- Secure funding for SBHC construction and start-up operations
- Manage facilities planning and construction
- Develop student/family consent form for SBHC services
- Promote SBHC services and consent forms to students and families
- Coordinate student transportation in scenarios where the SBHC may serve students in other school buildings
- Develop SBHC quality and utilization indicators
- Develop data and information sharing mechanisms and pathways
- Design school referral processes to the SBHC (i.e., school nurse or school health services team referrals)
- Meet regularly to assess workflow, utilization, and impact and make SBHC service and delivery changes

SBHC operator lead responsibilities
- Provide input and clinical standards for facilities, planning, design, and construction of the SBHC
- Procure clinical equipment and supplies
- Ensure compliance with HIPAA
- Employ SBHC staff and manage day-to-day SBHC operations

Tools: Memorandum of Understanding (MOU)
- **MOU** Example 1
- **MOU** Example 2

When developing an MOU, it is also helpful to consider how the school and SBHC operator will navigate HIPAA and FERPA and develop the consent for SBHC services. The sections below provide additional information on these topics.

Module 2 Planning for an SBHC

Navigating HIPAA and FERPA

The healthcare and education sectors are separately governed by federal laws that regulate the confidentiality, use, and sharing of data and information. SBHC healthcare provider operators are regulated under the Health Insurance Portability and Accountability Act (HIPAA), while educational agencies and institutions, including school districts, are regulated under the Family Educational Rights and Privacy Act (FERPA). When exploring the sharing of data and information between these two systems, it is important that any disclosure of student health information is in compliance with HIPAA, FERPA, and relevant state and local laws and respects parental/guardian rights.

It can be helpful to iron out the details of how the school and SBHC operator will protect student health information and the processes for sharing/communicating on student/patient information in the MOU. In addition, there should be robust communication with parents and guardians, students, school administration and staff, and other groups served by the SBHC regarding SBHC protocols and adherence to relevant patient privacy and confidentiality laws.

Tools: HIPAA and FERPA
- **A Resource Guide to HIPAA and FERPA** *School-Based Health Alliance.* A guide providing a broad overview and considerations for navigating HIPAA and FERPA.
- **HIPAA/FERPA Learning Burst** *American Academy of Pediatrics.* This training explains how HIPAA and FERPA laws apply to health information-sharing in the school setting.

Developing consent for SBHC services

SBHCs follow the same laws and guidelines for parental/guardian consent and **release of health information** as any other community healthcare provider. An SBHC consent form must be filled out by a parent/guardian for any patient under the age of 18. Developing the SBHC consent form at the same time as the MOU is a best practice, as the content of the MOU will impact the legal language in the SBHC consent form. In addition, what is included in the SBHC consent form will directly influence the clinical workflows and information sharing between the SBHC operator and school. In developing an SBHC consent form, partners should:
► Develop robust policies and procedures for SBHC consent and documentation to ensure transparency and accountability
► Identify how data will be stored and used, including outlining when data will be captured for evaluation or research
► Provide the ability to opt in or out of specific SBHC services
► Outline how the SBHC will communicate with parents/guardians before, during, and after a visit (e.g., phone call, after visit summary, electronic health record (EHR) portal)
► Determine whether the consent will be evergreen (i.e., remains effective through the duration of the student's enrollment in the district) or must be updated on an annual basis
► Consider how the consent form will follow the student to different school building enrollments within the district

Module 2 Planning for an SBHC

▶ Identify multiple mechanisms for distributing the consent form to families (e.g., back-to-school registration, QR codes, on-line forms, family events, etc.)

▶ Determine whether a joint consent form can be developed for families if there are multiple SBHC operators in a school district

▶ Encourage formal and informal opportunities for parent and guardian engagement and feedback on consent processes

Similarly to the MOU, legal counsel for the SBHC operator and school should work closely together in developing the student consent form.

Tools: SBHC consent form examples

- **Columbus City Schools school health program consent form** *Columbus City Schools.* This form can be used by families to provide consent to three different operators of school-based health centers within Columbus City Schools.
- **Example of an electronic consent form** *MetroHealth System.* This consent form is filled out by the family and goes directly to the electronic medical record of the healthcare partner, without a need for paper forms.

Learn more
With this foundation, you are ready to move forward to the next step:

Module 3. Setting up an SBHC