

Module 1 Understanding school-based health centers (SBHCs)



What's inside Module 1

This module will guide you in understanding:

- [Key components of an SBHC](#)
- [Other school-based health care delivery mechanisms](#)
- [Relationship between SBHC and school health services team](#)



This Toolkit also includes:

- [Module 2: Planning for an SBHC](#)
- [Module 3: Setting up an SBHC](#)

What is an SBHC?

School-based health centers (SBHCs) are an evidence-driven strategy that brings health care to where our youngest Ohioans spend most of their time – school. By placing children at the center of services, delivering care in a safe and nurturing environment, and removing barriers to accessing health care, SBHCs:

- Keep kids healthy and in school so their education is not interrupted
- Reduce high costs to the healthcare system and Medicaid by decreasing emergency department visits, hospitalizations, and improving care coordination and medication management
- Allow parents or guardians to stay at work so they are better able to support their families, and prevent work productivity loss for employers

An SBHC is created through a partnership between a school/school district and a healthcare provider to provide access to, at minimum, comprehensive primary care services to students on a school campus. The healthcare provider (also referred to as the **SBHC operator**) serves as the operator and administrator of the SBHC, working closely with the school to provide continuity of care and ensure student needs are met. This collaborative health and education partnership puts students and families at the heart of its services, and is transformational in reducing disparities and improving health and education outcomes.

In addition to providing comprehensive primary care services, SBHCs often provide:

- Behavioral health
- Oral health
- Vision
- Care coordination
- Social services and supports

Although SBHCs prioritize serving students, some centers also provide health care to school personnel and faculty, families of students, and community members. In some rural, Appalachian, and urban regions of Ohio that are underserved, SBHCs are the only available healthcare provider for students and the broader community. The Ohio School-Based Health Alliance **census** provides location and operational information on SBHCs.



Tools: Evidence and support for SBHCs

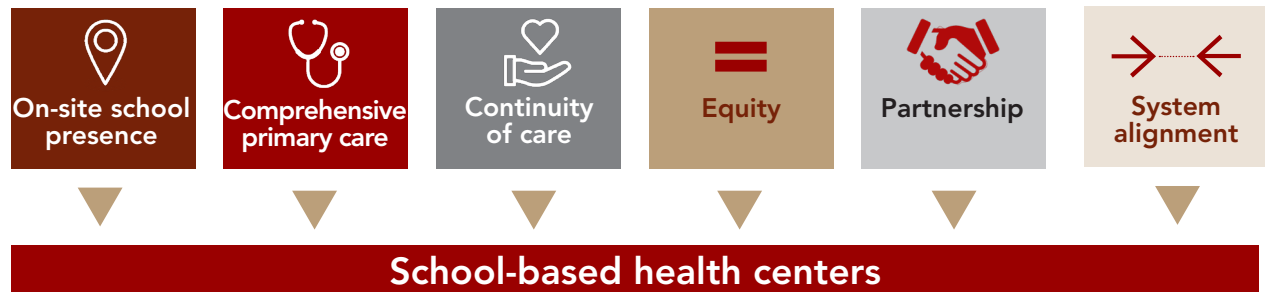
- **School-based health care in Ohio: A closer look at school-based health centers (SBHCs)** *Ohio School-Based Health Alliance*. This brief provides an overview of the state's SBHC landscape and key education and health impacts of SBHCs.
- **Social Determinants of Health: School-Based Health Centers** *Community Preventive Services Taskforce*. This resource provides a systematic review of the evidence supporting SBHCs.
- **School-Based Health Centers and Pediatric Practice** *The American Academy of Pediatrics (AAP) Policy Statement from October 2021*. This policy statement outlines the benefits of SBHCs.
- **The Evidence on School-Based Health Centers: A Review** *Global Pediatric Health*. This resource discusses how SBHCs promote social mobility and impact health equity.

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What are the key components of an SBHC?

An SBHC is a specific model of school-based health care delivery that has been proven to be sustainable and effective at improving health and education outcomes. There are six key components that are integral to this model. Each of these components plays a critical role in ensuring SBHC efficacy and sustainability.

Key components of an SBHC



On-site school presence

SBHCs prioritize serving students in the school or district in which the SBHC is located. With specific parental/guardian consent, SBHCs can see a student without their parent/guardian present. For this reason, SBHCs are located and operate on a school campus. The on-site presence of SBHCs is a key distinguishing feature of the SBHC model. Co-location of the SBHC on the school campus supports:

- Timely responses to students' healthcare needs
- Reduced student absenteeism and increased academic seat time
- Removal of student barriers to accessing health care (e.g., transportation, wait time, scheduling issues, provider access)
- Integration of the SBHC care team into the school community to build student and family trust

Comprehensive primary care

SBHCs are designed to provide, at minimum, comprehensive primary care services to students. Primary care services include, but are not limited to, comprehensive health assessments/well child exams, primary care mental health, diagnosis and treatment of minor, acute, and chronic medical conditions, and referrals to specialty care. Services offered in an SBHC should be comparable to the offerings of a community-based primary care practice.

Notably, many SBHCs extend their services beyond primary care to include oral, vision, and behavioral health services, case management, group health education, youth advisory programs, and support for school staff wellness.

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Continuity of care

An SBHC is a team of clinicians that are known to patients and that work cooperatively with one another to serve a school community and provide continuity of care. This includes:

- Operating with regular frequency to ensure the provision of continuous and appropriate care
- Coordinating care, including a systematic follow-up and referral process for patients
- Establishing a method for the communication of health information between the SBHC and, if applicable, existing care provider(s)
- Communicating with the appropriate school personnel to ensure the provision of integrated care
- Establishing a system to connect patients to care outside of SBHC operating hours



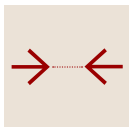
Equity

SBHCs are an evidence-based model for improving health and education outcomes and reducing disparities. Care provided by an SBHC should be responsive to the community, meeting the cultural and linguistic needs of the populations served.



Partnership

SBHCs are created through a collaborative partnership between the community, the school, and an entity that operates and administers the SBHC (“operator”), with students and families being central to this partnership. Authentic engagement and collaboration among SBHC partners and with students, family, and community should be a central consideration in setting up and maintaining SBHC operations.



System alignment

SBHCs align healthcare and education systems to support a student’s success both inside and outside of school. Care provided by the SBHC complements and supports but does not replace or duplicate existing health services provided by the school. SBHC operators and school districts should enter into a legally binding agreement that clearly delineates SBHC partner responsibilities, workflow integration, communication pathways, and aligned goals and incentives.

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Tools: SBHC core competencies

The national School-Based Health Alliance identifies core competencies of an SBHC to provide a common guiding framework for SBHCs to achieve sustainable, high quality, and optimal healthcare delivery in schools:

- [Core competencies infographic](#)
- [Core competencies one-pager](#)

What are other ways to deliver school-based health care services?

This Toolkit focuses on SBHCs as an evidence-based and sustainable model of school-based health care delivery. However, there are other innovative ways to deliver school-based health care services being implemented across Ohio and the nation. These delivery mechanisms vary widely in their evidence base, purpose, goals, outcomes, sustainability, and structure. Depending on the health needs of students, the following school-based health care delivery mechanisms can be explored if an SBHC is not the right fit for a school community, as a precursor to setting up an SBHC, or if there is a desire to supplement or extend the services provided by an SBHC.



Hub and spoke

A hub and spoke model is typically implemented as an extension of an SBHC. The SBHC is co-located in a school building or on a school campus, and students from other school buildings within the district are transported to and from the SBHC site or connected via telehealth. This model provides students in other school buildings with access to the SBHC, typically without relying on family members to provide transportation.



Mobile unit

Mobile units parked on a school campus are often used to increase student access to healthcare services across multiple school buildings or districts. Mobile units can be buses, trailers, or vans that are staffed and fully fitted with the equipment and medical supplies needed to provide clinical services to students. Mobile units can be equipped to deliver primary care services to students or other specific health services such as dental care, vision, or specialty services. Often, mobile units will be scheduled on a school building rotation and notice will be provided to families when the mobile unit is on site or visits will be pre-scheduled based on a school building rotation.



Telehealth

Telehealth can be used in a variety of ways in the school setting. School-based telehealth requires an adult “telepresenter” who triages the student and facilitates the visit with the receiving telehealth provider. This telepresenter can be an employee of the school system, like a school nurse, or an employee of the SBHC healthcare provider operator who travels to or is based at the school. For example, telehealth is used to:

- Provide care by an on-call provider on days when in-person care at the school is not available.

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- Connect students at an SBHC to specialists at the SBHC operator’s off-site location (i.e., traditional healthcare facility located outside of the school building campus) or another health system.
- Support an SBHC hub and spoke model — delivering care to students in other school buildings in the district.



Portable provider

A clinical provider or team travels from one school building to another, operating in various spaces within the school building as designated or available. Typically, the provider carries any healthcare supplies or equipment with them. Services may be provided on a regular or intermittent schedule.



School-linked

School-linked health services refers to a relationship between a school and a community healthcare provider that is located near a school building or campus but is not on site. The community provider may set aside appointments for students and/or the school may refer students to the provider for services. Services delivered to students can vary depending on the provider’s capacity and the students’ needs. In some school-linked health service models, the school or healthcare provider arranges for the transportation of the student to and from services.



Tools: Other school-based health care delivery mechanisms

- **School-Based Mobile Healthcare Toolkit** *School-Based Health Alliance*. This toolkit describes promising operations and sustainability practices for school-based mobile units.
- **Telehealth and School-Based Health Centers: Lessons and Best Practices from Early Adopters** *School-Based Health Alliance*. The webinar provides guidance and highlights best practice on school-based telehealth services.
- **School-Based Telehealth Playbook** *School-Based Health Alliance*. This playbook guides SBHCs through the design, implementation, and operation of a telehealth program that meets the needs of children and adolescents.

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How do SBHCs work with the school health services team?

An SBHC complements and supports but does not replace or duplicate health services provided by the school. In fact, the most successful SBHCs have strong relationships with a school or district's health services team. Together, the SBHC and school health services team can provide a more robust school-based health care infrastructure that meets the school community's needs and improves student health, well-being, and academic success.

Key distinctions between an SBHC and the school health services team

SBHC

- Created through a partnership with the school (i.e., memorandum of understanding)
- SBHC team is employed and managed by the SBHC operator
- Students served by the SBHC must have a consent on file
- Provides comprehensive primary care services and may provide additional services including, but not limited to, behavioral, vision, and oral health
- Connects and coordinates care with a patient's other care providers
- Important support for school health services team in connecting students to comprehensive health care

School health services team

- Contracted or employed professionals including, but not limited to, school nurses, health aides, psychologists, counselors, social workers, etc.
- Available for all students, with some services based on need
- Provide health services which may include chronic disease management, early detection screenings, ensuring students are up to date on immunizations, and counseling
- First line of triage for students
- Important student and family referral source to the SBHC

A successful partnership between the SBHC and school health services team includes:

- Ensuring the school health services team serves on the SBHC planning committee
- Establishing clear communication pathways between the SBHC and school health services team
- Collaborating on student immunizations, health education and prevention programming, and communicable disease surveillance
- Engaging the school health services team as a liaison to increase student, family, and community awareness of SBHC services and securing parent/guardian consent

Learn more

Surveying your school's needs to determine whether an SBHC is the best model to implement in your community is the next step and discussed in more detail in:

[Module 2. Planning for an SBHC](#)

