Program # 40038B - School Based Health Centers - Middle Schools	Version 6/28/2006 s

Priority:	Education	**Lead Agency:**	Health Department
Program Offer Type:	Existing Operating	**Program Contact:**	WHITTLESEY Valerie L
Related Programs:	40038A		

Program Characteristics:

Executive Summary

School Based Health Centers (SBHC) ensures children's health needs are met through delivery of age-appropriate, culturally competent healthcare in a safe, supportive environment. Provides early interventions to support lifelong health and educational success, and to reduce risk behaviors contributing to teen pregnancy. Program supports school attendance and readiness to learn, and promotes healthy lifestyle choices.

Program Description

THIS OFFER REPRESENTS CURRENT SERVICE LEVEL AND SITES IN MIDDLE AND ELEMENTARY SCHOOLS, where the Health Deparment operates four fully-equipped medical clinics located in middle schools and one in an elementary school. In FY05, the middle and elementary school clinics saw 1,646 clients for a total of 6,858 visits. 48% of clients had no health insurance; 57% were racial/ethnic minorities. Services include chronic and acute health care; well-child exams, risk assessments, and age-appropriate reproductive health. Comprehensive approach enables early identification and intervention, thereby reducing risk behaviors. Parent/guardian involvement is essential to ensure successful clinical outcomes and to support educational success.

Program Justification

The program strives to ensure that basic physical and behavioral health needs of children are met to help them attend, participate and remain in school. Health care for children, a basic need, is provided in the most readily accessible locations. Services provided are culturally and developmentally appropriate, to address needs and risk behaviors that often result in learning and socialization difficulties. Health care services in the school allow children to miss less school, and their parents/guardians to miss less work. Early interventions and health promotion are essential to establishing lifelong healthy lifestyle choices and preventing risk behaviors before they arise. SBHCs foster academic success and readiness to learn by preventing teen pregnancy, alcohol and drug use, and other health-related barriers that may occur. The services are delivered in adherence with all the over-arching values described by the Education Outcome team.

Performance Measures

Measure Type	Primary Measure	Previous Year Actual (FY04-05)	Current Year Purchased (FY05-06)	Current Year Estimate (FY05-06)	Next Year Offer (FY06-07)
Output	Number of well-child exams*	263	230	230	230
Outcome	Clients with asthma have a documented asthma action treatment plan**	88%	88%	88%	88%
Quality	Percentage of clients with asthma that are symptom-free at annual asthma visit	77%	77%	77%	77%
Outcome	Percentage of clients who have annual Body Mass Index (BMI) recorded in chart***	81%	95%	95%	95%

Performance Measure - Description

*The number of well-child exams will be reduced this year & next year due to the closing of Whitaker Middle School, one of our clinic sites. **Asthma is one of the few chronic health conditions diagnosed in a school-aged population. Asthma disproportionately affects the medically underserved & if untreated or out of control severely impacts a child's school attendance & educational performance. The educational & health impacts of asthma can be minimized when successfully managed. *** Screening for overweight & obesity: SBHC Program goal for annual Body Mass Index (BMI) completed & recorded in chart is 95%. This is a new program measure; interventions began during 04-05 including a Fitness & Nutrition group intervention in each middle school.

State SBHC revenue is allocated to programs by numbers of clinics. Programs that operate 10 or more clinics receive $200,000 in state dollars. Programs that offer 6-9 clinics receive $150,000. If the Multnomah County Health Department's program dropped below 10 clinics, there would be a loss of $50,000 in state revenue. Complies with the Bureaus of Primary Health Care (BPHC) grant, State Family Planning Agency grant, CLIA (lab accreditation) requirements and Care Oregon contractual obligations.

Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2006	2006	2007	2007
Personnel	$366,025	$487,705	$405,886	$380,645
Contracts	$7,475	$55,855	$4,011	$55,880
Materials & Supplies	$20,664	$30,564	$43,268	$40,064
Internal Services	$84,412	$155,666	$75,921	$115,799
Subtotal: Direct Exps:	**$478,576**	**$729,790**	**$529,086**	**$592,388**
Administration	$0	$0	$17,914	$0
Program Support	$0	$0	$203,549	$138,765
Subtotal: Other Exps:	**$0**	**$0**	**$221,463**	**$138,765**
Total GF/non-GF:	**$478,576**	**$729,790**	**$750,549**	**$731,153**
Program Total:	**$1,208,366**		**$1,481,702**	
Program FTE	0.00	0.00	4.31	4.22
Program Revenues				
Indirect for dep't Admin	$38,874	$0	$26,035	$0
Fees, Permits & Charges	$0	$7,425	$0	$8,464
Intergovernmental	$0	$722,368	$0	$583,894
Program Revenue for Admin	$0	$0	$18,460	$138,765
Total Revenue:	**$38,874**	**$729,793**	**$44,495**	**$731,123**

Explanation of Revenues

1. Assumption of 324 billable lost visits due to electronic medical record implementation (50% of normal 2 weeks after EMR go-live; 75% of normal for weeks 3 through 4; 90% of normal from week 5 for following two months).
2. The SBHC Program may show Family Planning Expansion Program (FPEP) revenue reductions in FY 06-07. At this time it is unclear about the specifics regarding possible FPEP revenue reduction and we will be seeking guidance from the state in the near future.

Significant Program Changes

Last year this program was:
Last year, the SBHC Program wrote one program offer. Since the program's budget will be so close to the $3,000,000 CGF limit per program offer, one offer has been written for high school clinics and one for middle school/elementary school clinics.