USD 261
HAYSVILLE SCHOOLS

TO: Haysville Board of Education

FR: Dr. Clint Schutte, Associate Superintendent of Finance

DA: May 17, 2021

RE: School-Based Health Clinic

History / Relevance: A team was formed to conduct a survey with district parents to determine need and interest regarding a School-Based Health Clinic.The survey found that 61% of respondents would either definitely or probably use the school-based clinic services. Additionally, 31% report difficulty accessing medical care, and 49% report difficulty accessing mental health services for their children. This data is particularly relevant as we navigate the pandemic and the social/emotional challenges it brings to the forefront for both our students and staff. We also noted that 26% of our survey respondents state health insurance/cost as a barrier to receiving these services and 31.5% stated taking time off work as another barrier. Our partnership will address both of these by eliminating cost concerns and being onsite in our school building at the center of the community, with shorter drive and wait times for basic services.

What: We would like to establish a school-based clinic in connection with KU Pediatrics and KU Psychiatry and Behavioral Sciences teams to provide mental health and medical care to students and staff.

Why: Haysville is a medically underserved area. Data supports that a school-based clinic would be welcomed and utilized by families in the Haysville School District.

Where: The clinic would be established at Haysville Middle School. This location is centralized and also has controlled access.

When: We anticipate opening the clinic in August 2021.

How: We will collaborate with the school-based health clinic team that is already established at KU, led by Kari Harris M.D. This team is well versed in the community health model and already has experience with one school-based clinic which they recently began operating. They can tailor the scope of the project to our specific community/district needs and are excited to partner with us to provide services and enhance existing services.

Who: This project is in conjunction with KU Pediatrics and KU Psychiatry and Behavioral Sciences teams, who will provide the medical staff for the clinic. Health staff from USD 261 will be utilized to facilitate student/staff visits. USD 261 staff who are helping to plan this include Dr. Clint Schutte Assistant Superintendent for Business & Finance, Linda Long Homeless Services Coordinator and Foster Care Liason, Beth Schutte District Nurse, and Lesley Thomas Assistant District Nurse.

How Much: $106,500 to come out of ESSER II and III funds.

Expanding Access to Health Care for Children and Adolescents: School-based Health Clinics

Dr. Kari Harris

KU Wichita Pediatrics

Why SBHC?

In a typical year, kids spend

1000

hours in school.



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Missing ≥2 days a month of school is linked to

- ✓School failure
- ✓poor reading
- ✓school suspensions
- ✓dropping out
- ✓substance use
- ✓poor health as adults



Healthychildren.org

Healthcare utilization

Visits for common pediatric health issues:

- Obesity – every 3-4 months
- Uncomplicated Asthma – every 3 months
- Depression/anxiety – weekly to biweekly
- ADHD – weekly to every 3 months

Routine health visits:

- 1 well check per year
- 1 sports physical per year
- 4-6 illnesses per year
- 2 dental visits
- 1 optometry appointment
- Orthodontist?
- Dental work?
- Glasses appointments?

My drive time

To Valley

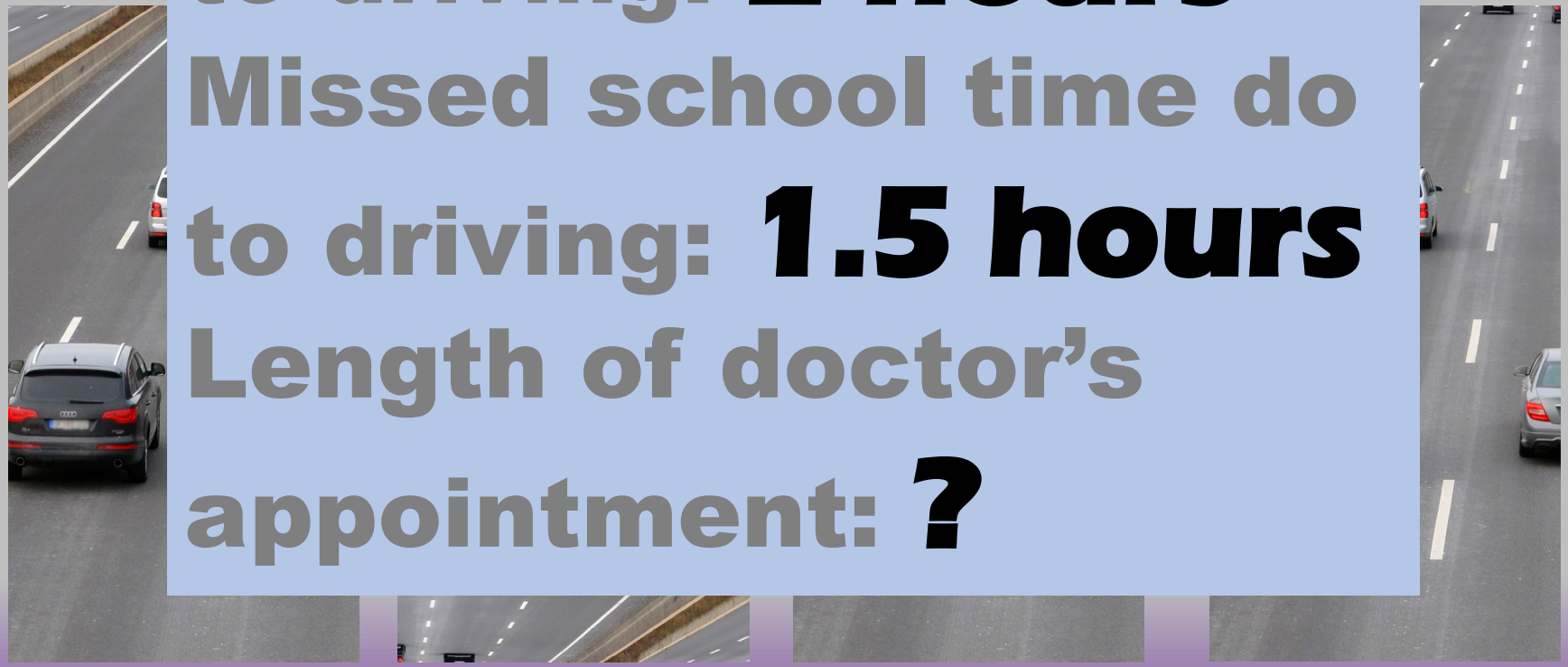
30 min

chita–

Missed work time due to driving: 2 hours

Missed school time do to driving: 1.5 hours

Length of doctor's appointment: ?



School based health

- Brings care to the student – rather than the student going to the care
- Minimizes absences
- Allows for less drive time for parents → less missed work
- Care coordinated within the school system – if the doctor is behind, the student stays in class until ready for appointment

Whole School, Whole Community, Whole Child (WSCC)



CDC
CENTERS FOR DISEASE CONTROL AND PREVENTION

SBHCs are attractive to . . . Schools, Parents, Youth

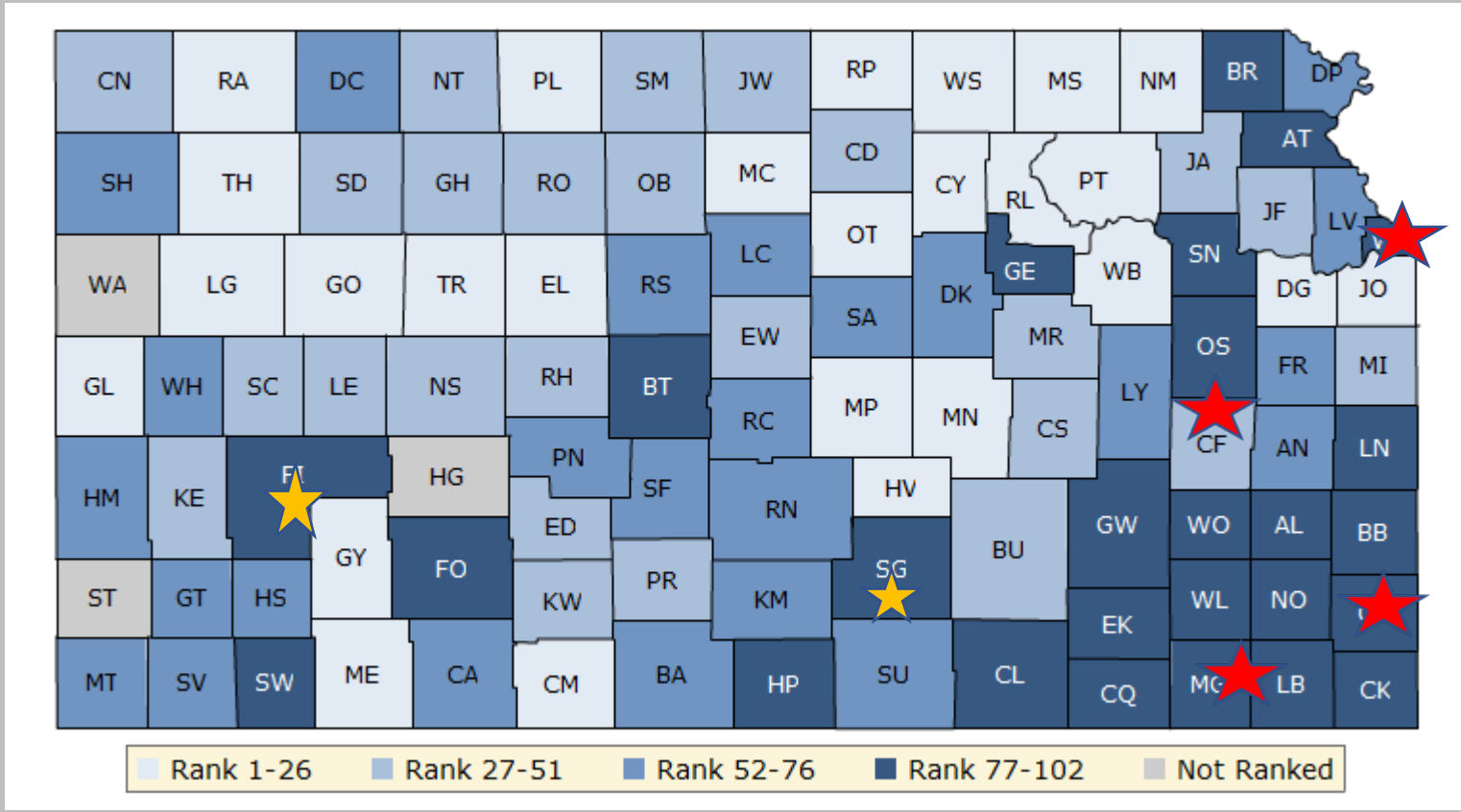

Absences; fewer sick days


Unplanned Pregnancies

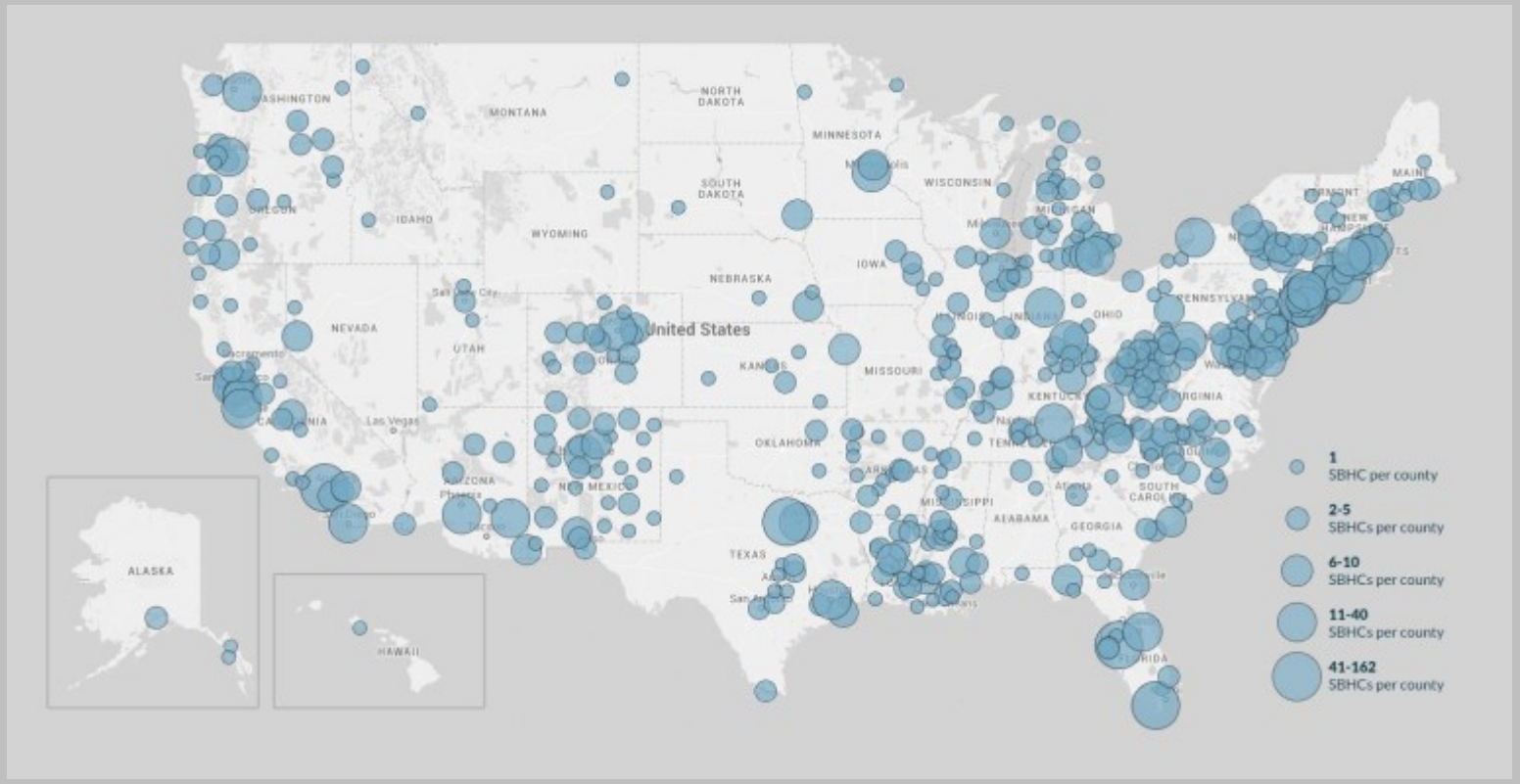

Oral, Vision, Hearing health


Access to behavioral health

Kansas SBHC sites



2013-14 School-Based Health Centers



2,315 SBCHs in 49 of 50 states and the District of Columbia serve students and communities. This is a 20% growth since 2010-11

http://www.sbh4all.org/school-health-care/national-census-of-school-based-health-centers/

The Kansas Experience







Kansas SBHC expansion















SBHC Guide



Kansas School-Based Health Center Guide

2019

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Models of SBHCs

- Federally Qualified Health Clinic (FQHC) -- community health centers
- Provider Satellite Clinic
- Network (hospital system)
- Stand alone

SBHC today

- "COVID Clearance"
  - Potential testing capability
  - Identify who needs to be quarantined/isolated to decrease spread
  - Quicken return to school by having same day appointments available
- Screen, identify, treat those with mental health needs
- Manage other acute health issues
  - Asthma
  - Diabetes
  - Cold symptoms
  - Athletic injuries
- Provide follow up for common injuries/illnesses/issues:
  - ADHD
  - Depression/anxiety
  - Asthma
  - Concussions
  - Others

Summary

- SBHCs are supported locally, state-wide and nationally
- Decrease the barriers of time/travel when seeking health care
- Minimize unnecessary absences
- Provide acute care and ongoing management of health conditions
- Benefit students, parents, society

School-Based Health Clinic (SBHC)

History / Relevance

- A survey was sent to parents to determine interest and need in USD261's SBHC.
  - Of 1,116 responses, 61% of people would either definitely or probably use the clinic's services.
  - Of 214 responses, 31% have experienced problems accessing medical care and 49% have experienced problems accessing mental health care.
- Parents have reported various barriers to accessing medical services. This includes insurance and taking time off work.
- A school-based health clinic could help eliminate some of the barriers.

What

- We would like to establish a school-based clinic in partnership with KU Pediatrics and KU Psychiatry and Behavioral Sciences teams.

- This clinic would provide mental health and medical care to students and staff.

Why

- Haysville is a medically underserved community
- Data supports the use of a school-based health clinic by the community
- This added resource will benefit the community as a whole and will positively impact school attendance for students and reduce workplace absences for parents and USD 261 staff.

Where and When

- The clinic would be based at HMS
  - It would have controlled access and be centrally located.

- The plan is to open the clinic in August 2021

How and Who

- We are collaborating with providers from KU Pediatrics and KU Psychiatry and Behavioral Sciences
  - They are experienced in community health models and are currently operating another school-based health clinic.
  - They are able to tailor the scope of the clinic to the needs of our community and district.

- Employees from KU Pediatrics, KU Psychiatry and Behavioral Sciences, and USD 261 will serve as staff for the clinic.
  - USD 261 staff who are helping to plan this include Dr. Clint Schutte Assistant Superintendent for Business & Finance, Linda Long Homeless Services Coordinator and Foster Care Liason, Beth Schutte District Nurse, and Lesley Thomas Assistant District Nurse.

How Much?

The cost of starting and operating the clinic for one year will not exceed $100,000.