CORE COMPETENCIES



Introduction

A school-based health center (SBHC) represents a shared commitment between a community's schools and healthcare organizations to support the health, well-being, and academic success of its students. For the schools' part, facilities, and utilities are donated and school and district policies facilitate students' enrollment and utilization.

Local health organizations apply school expertise and linkages to an array of services—medical, behavioral health services, oral health care, nutrition services, vision services, and health promotion—that enable children and adolescents to thrive in the classroom and beyond. The ultimate goal of the partnership is to create a culture of health within the school community.

The School-Based Health Alliance, in partnership with our state affiliates and experts from the school-based health care field, developed a set of seven core competencies that represent the knowledge, expertise, policies, practices, and attributes that we hope every SBHC can achieve in pursuing student wellness. SBHC staff and administrators can use these as a framework to achieve excellence in delivering care in a school setting. We recognize that each school and SBHC may be at different stages of implementation and hope that the guiding principles and core competencies help to encourage high-quality and optimal healthcare in schools.



- 1. High-quality clinical care and access are at the forefront of being able to support and achieve our goals.
- 2. Diversity, equity, and inclusion (DE&I) are at the core of our work in helping students, families, communities, and schools achieve their best.
- 3. Collaborating with partners including parents, school staff, and various systems will guide us in our work.





SBHC assures students' access to healthcare and support services to help them thrive.

- **Location:** SBHC is located in a facility—fixed within the school or in portable space—within the school building or campus.
- Modality: SBHC may have a more traditional brick-and-mortar model, or use mobile health and telehealth services to expand services and increase student access.
- Operations: SBHC makes on-site services available whenever the school is open or as needed to serve the student population's needs. Student access increases when SBHC policies accept walkins, serve all students regardless of insurance status, and offer same-day appointments when possible. The school and SBHC have a clear protocol for referrals from faculty and staff.
- Facility: SBHC operates within an appropriate physical space that complies with laws and regulations governing health facilities, is conducive to efficient healthcare practice, welcomes students, and safeguards their privacy.
- Consent: SBHC uses a HIPAA-compliant consent form to obtain consent from parents/guardians of students. If the student is 18 or older, an emancipated minor, or able to consent under state minor consent laws, SBHC uses a HIPAA-compliant consent form to obtain consent from the student. SBHC seeks consent for bidirectional information sharing with school staff to share students' health information as appropriate and necessary.
- After-hours care: SBHC puts in place a system for patients to access care when the center is not open (e.g., primary care physician on-call, nurse hotline, emergency room, urgent care center, or behavioral health crisis line).
- DE&I: SBHC serves all students regardless of race, color, sexual orientation, gender identity, religion, national origin, age, disability, gender, or sex. The SBHC serves every student regardless of their health insurance status or ability to pay. SBHC aims to address issues related to health equity by conveniently offering comprehensive services in schools to limit disruption of students' education and reduce barriers to receiving care.
- Other populations: SBHC prioritizes the care of the student body and ensures their safety and privacy, even if they serve other populations (e.g., faculty and school personnel, family of student users, community members). This may be accomplished by offering student-only hours or organizing a separate entrance and/or waiting room area for non-students.







SBHC team and services are organized around student wellbeing and academic success.

Comprehensive service scope: SBHC delivers a wide range of primary care and behavioral health services, including vision and oral health, designed to promote the optimal physical, social, and emotional health of students based on student needs, as well as to minimize the effects of poverty, chronic disease, social influencers of health, and other adverse childhood experiences on their school success. Behavioral health needs must be identified and addressed in school-based health centers, ideally through on-site services.



Evidence-based standards: Evidence-based standards of care guide how SBHCs address well-care exams, immunizations, healthy weight, school failure, asthma, ADHD, exposure to violence and trauma, sexual and reproductive health, depression, substance use, and oral and vision health. Evidence-based programming requires staff training and appropriate intervention protocols.



Strengths-based, healing-centered and trauma-responsive care: SBHCs seek to identify protective and resiliency factors through utilizing asset-based screening tools to highlight and focus on individual strengths. SBHCs are guided by trauma-informed practices, meeting students where they are and understanding the whole child and possible traumatic experiences they may carry with them. Providers recognize these traumas and understand the implications of trauma and how that impacts individuals differently.

Competence: SBHC services and materials are developmentally appropriate and respectful of cultural, linguistic, and other social and environmental needs of students.

Confidentiality: SBHC protects the confidentiality of patient information as required by state and federal law when transmitted through conversation, billing activity, telehealth or the release of medical records.

Patient engagement: SBHC encourages students (as age-appropriate) to be effective advocates and consumers of their healthcare by encouraging them to schedule their appointments, manage medications, ask questions about their care, and improve their health literacy.



DE&I: SBHC advocates for and seeks feedback from patients of various backgrounds. The health center initiates conversations to ensure DE&I are at the forefront of critical decisions.

Youth advisors: SBHCs meaningfully engage students in various functions, including community asset mapping and needs assessment, evaluation of services, youth-led outreach and promotion, peer-to-peer health education, and advocacy mobilization for their health needs.





HIGH-QUALITY CARE

SBHC delivers high-quality, comprehensive care to achieve optimal outcomes for students.

- Quality care: SBHC strives to provide high-quality care, following nationally established pediatric
 and adolescent guidelines and recommendations, including implementing evidence-based
 practices.
- Quality improvement: SBHC implements a continuous quality improvement process that monitors and evaluates the appropriateness, effectiveness, and accessibility of its services.
- Satisfaction: SBHC routinely assesses student and community satisfaction with services and assesses unmet needs.
- Performance and accountability: SBHC collects clinical, business, and academic data (when available) and reports on key performance measures, including individual and population-level outcomes, to ensure accountability to partners, payers, funders, and other stakeholders.
- DE&I: SBHC analyzes trends, reviews satisfaction surveys, and ensures that every student receives the care and services that they need and that SBHCs are equipped to meet the varying needs among different student populations. Health centers are intentional in professional development training, including topics on cultural humility, implicit bias, cultural considerations, etc.



COLLABORATIVE SCHOOL PARTNERSHIPS

SBHC is typically governed and administered separately from the school, but works collaboratively with the educational environment to support the school's mission of student success.



Shared vision for student success:

SBHC has a formalized understanding of how its staff collaborates with school administration, teachers, and support staff, including school nurses, psychologists, counselors, and social workers, to ensure the partnership meets student needs efficiently, effectively, and seamlessly.

Intentional systems planning:

When possible, SBHC staff and school personnel jointly develop policies and procedures and structures supporting student health and academic achievement.

Shared outcomes:

SBHC partners with the school to achieve improved outcomes for students struggling with attendance, behavior, or academic performance issues.

DE&I:

SBHC and school personnel work together collaboratively to address issues related to DE&I through ongoing training and professional development. Continuing support and collaboration strengthen the DE&I work and outcomes.

Crisis response and support:

SBHC partners in supporting the school's crisis prevention, intervention, and postvention plans with clear roles and expectations. Crisis prevention includes activities that reduce risk and promote healing. Intervention includes identifying students who may be at-risk for suicide. Postvention includes supporting schools after the loss of a student.



66

SBHC and services organized around relevant health issues that affect student well-being and academic success



SCHOOL WELLNESS

SBHC engages with the school to participate, support, and improve a culture of health across the school community.

School climate: SBHC actively participates in and supports building-level policies and practices that assure a safe and healthy school environment for all students and staff. SBHC staff engages with the school to assist in making a positive difference in the school climate.

Student body wellness: SBHC advances population health and preventive services through group, classroom-based, and schoolwide inclusive modalities to screen for and minimize risk factors, promote community assets, and address social influencers of health. Focus should be to highlight and promote the mental well-being of children and adolescents through screening and prevention programs.

Family wellness: SBHC engages families in health education and promotion events to promote wellness.

Staff wellness: SBHC assesses the health and wellness needs of school staff and offers services, such as support groups, stress management activities, health literacy, and health education.

Health expertise and consultation: SBHC contributes subject matter expertise on health education curriculum, school wellness policies, and health-related programs and services that support student well-being. SBHC staff members also provide consultation and expertise in school policies and procedures and address any health or mental health-related issue within the school community.

DE&I: SBHC works to advance equity for all students. SBHCs provide programs, publications, and presentations that reflect diverse groups and populations.



SYSTEMS COORDINATION

SBHC coordinates across relevant systems of care that share in the well-being of its patients.



Care coordination:

SBHC coordinates and integrates efforts (including the exchange of health information as allowable by current HIPAA/FERPA laws) with existing systems—school health staff, primary care, behavioral health, oral health, vision providers, and health plans—to improve continuity of care, reduce fragmentation, and prevent duplication of services.

Family engagement:

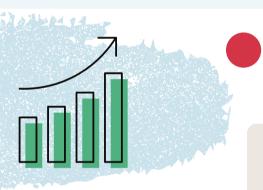
SBHC informs and educates families about a child's health issues and involves them as supportive participants in the student's healthcare whenever appropriate and possible.

Community health partnerships:

SBHC has formal partnership referral and follow-up linkage agreements and protocols with the broader healthcare community to ensure access to after-hours care (e.g., primary care physician, nurse hotline, emergency room, urgent care center, or behavioral health crisis line) and coverage beyond clinical capacity—including oral, reproductive, behavioral, and specialty healthcare. SBHC also works with school and community partners to ensure access to nutritious foods, reliable transportation, suitable housing, and other social influencers of health.

DE&I:

SBHC works to establish relationships with agencies and referral sources that embrace DE&I principles and make services available to all students regardless of their ability to pay. SBHC also works to develop relationships with care partners with similar racial/ethnic backgrounds to the student population when available.



SUSTAINABILITY

SBHC employs sound business management practices to ensure that health services are sustained long-term.

Administrative systems: A fiduciary (or sponsor) agency provides administrative and clinical procedures, including medical supervision, liability coverage, human resources, procurement of medical equipment and supplies, quality improvement, training and leadership development, health information technology, marketing, and practice/fiscal management.

Billing infrastructure: SBHC can collect patient revenue efficiently through health information management systems, dedicated administrative personnel, and policies and procedures.



Analysis of financial standing: SBHC creates a business plan with financial performance metrics that consider, among other things, the program's cost, expected patient volume by the provider, and payer source. All direct and indirect program expenses, including staffing, facilities, pharmacy, administration, billing, care coordination, and health promotion, are considered in monetizing services.

Sustainable resources: SBHC employs sound and innovative business models based on financial planning strategies that rely on a diversity of stable and predictable funding sources, maximize patient revenue, and minimize the role of grants to support operations for the long term.



DE&I: SBHC ensures that all DE&I initiatives are maintained and a regular part of discussions. SBHCs can do this through ensuring staff have access to resources and support to carry out these practices, including professional development.