

Module 3 Setting up an SBHC



What's inside Module 3

This module will guide you through SBHC business planning including:

- [Vision, mission, and goals](#)
- [Patient population and services](#)
- [Staffing structure](#)
- [Facilities planning](#)
- [Sustainability and funding](#)
- [Marketing and outreach](#)



This Toolkit also includes:

- [Module 1: Understanding SBHCs](#)
- [Module 2: Planning for an SBHC](#)

What is an SBHC business plan?

A business plan is a working document that provides details on SBHC operations and logistics. Typically, development of a business plan is led by the SBHC operator with input and feedback from the school partner and planning team. The goal of a business plan is to provide a road map to SBHC operations and sustainability.



Tools: Business plan

- **Sample business plan** *Growing Well*. An example of a business plan for a new SBHC.
- **Creating a Business Plan** *Capital Link*. A manual detailing the steps to creating a business plan for a Community Health Center capital project.
- **Year 1 Business Plan Checklist** *Ohio School-Based Health Alliance*. A chart detailing categories and steps for partners to work through together when developing a business plan.

What are your SBHC vision, mission, and goals?

A business plan begins with documentation of the vision, mission, and goals of your SBHC. Together, these outline the strategic components of your SBHC business plan. The planning team and other collaborating partners should be engaged in developing these strategic components to support collective ownership and buy-in for the SBHC. These strategic components should also mirror the priorities reflected in the needs assessment.

A logic model can be used as a tool to support development of an SBHC's vision, mission, and goals. Think of a logic model as a graphic or road map that shows the relationship between SBHC day-to-day operations and the desired outcomes of those activities. A logic model can also summarize the purpose and impact your SBHC will have on students and/or the community.

SBHC vision, mission, and goals

Strategic components	Purpose	Characteristics
Vision	Answers the question: <i>What is desired to be achieved?</i>	<ul style="list-style-type: none"> • Concise and easy to understand • Can be communicated by diverse audiences • Inspirational
Mission	Answers the question: <i>How will the vision be achieved?</i>	<ul style="list-style-type: none"> • Concise • Action specific • Outcome oriented
Goals	Identifies specific programmatic outcomes that can be set at short-term, mid-term, and long-term intervals	<ul style="list-style-type: none"> • Process and outcome oriented • Accompanied by SMART objectives (Specific, Measurable, Achievable, Realistic, Time-bound)

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Tools: Strategic components

Mission and vision statement

- **Proclaiming your dream: Developing mission and vision statements** *The Community Toolkit at the University of Kansas.* This tool provides an explanation of definitions and suggested steps to develop a vision and mission statement.
- **A Step-by-Step Exercise for Creating a Mission Statement** *Non-Profit Hub.* This document guides a group through creating a mission statement for non-profit organizations.

Logic model examples

- **School-based health center logic model** *Ohio School-Based Health Alliance.* This is an example of a logic model for a new SBHC in an elementary school.
- **Community Health Center logic model** *Metrics for Healthy Communities.* This interactive logic model outlines inputs, activities, outputs, and outcomes of a community-embedded health center.

How do you plan for patient population and services offered?

The development of your business plan hinges on identifying the population that will be served by your SBHC and the services it will offer.

Patient population

SBHCs prioritize serving students in the school or district in which the SBHC is located. However, depending on the needs and resources available to the SBHC operator and school partner, SBHCs may also serve the following populations: school personnel and faculty, families of students, and/or community members. Broadening the population that an SBHC serves can increase utilization of the SBHC and support program sustainability. The SBHC operator and school partner should make joint decisions regarding the SBHC patient population, prioritizing school safety and balancing the SBHC operator's operational needs and capacity.



Patient population considerations

For students, consider:

- Will the SBHC only serve students in the school building where the SBHC is located or can the SBHC serve students in other school buildings in the district?

*If serving students in other school buildings, consider developing a hub and spoke model of SBHC services (see **Module 1**)*

- If serving other students in the school district, what additional supports must be put in place to transport students (i.e., bus/van services and/or telehealth)? Who will be responsible for providing these services?

There will need to be a parent/guardian consent form allowing the transport of students to the SBHC. If telehealth is offered, additional equipment and staffing (i.e., adult telepresenter) will be needed to connect the SBHC to students in other school buildings.

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Patient population considerations (cont.)

When exploring expansion of SBHC services to more than students, consider:

- Can the SBHC close gaps in access to healthcare services for students' families, school personnel, and/or community members?

In some areas of Ohio, SBHCs may be the only accessible healthcare site for the community. Additionally, providing access to non-student populations can ensure that an SBHC operator is seeing a sufficient volume of patients to support sustainability.

- Does the SBHC staffing model include providers credentialed to care for adults or other children in the community?

For example, an FQHC-sponsored SBHC is uniquely positioned to serve both children and adults. Alternatively, a children's hospital may be able to extend services to other children within the community.

- Is it possible to build an exterior entrance to the SBHC and a separate corridor or waiting area to accommodate community members visiting the SBHC?

An exterior entrance and separate waiting area or corridor mitigates security concerns with non-student populations entering a school building and being seen at the SBHC.

- What types of services will be made available to non-student populations?

For example, does the SBHC have the capacity to serve as a primary care provider for non-student populations? Or, will non-student populations only be seen for acute/urgent issues?

- How will non-student populations access information about the SBHC and schedule visits?

Will this site be advertised to the public, or will patients be scheduled there upon calling a main health center number? Will the SBHC restrict hours for community members?

Services offered

The scope of services an SBHC provides will be informed by:

- Population served by the SBHC
- Health issues and gaps identified as priorities in the needs assessment
- Capacity of the SBHC operator to provide services
- Existing assets and resources within the community
- Feedback and input from the planning team, community members, and other key stakeholders

A key component of an SBHC is the provision of comprehensive primary care. This generally includes:



- Preventative care, including comprehensive well child exams
- Immunizations, including school-required and optional vaccinations
- Acute care for illness and injury
- Chronic condition management
- Medication administration and management
- Health and nutrition counseling



The following table outlines considerations and key steps to take when planning for primary care services.



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Planning for primary care services

Category	Considerations and tools 	Key steps 
Care coordination and case management	<p>SBHCs often provide wraparound case management services to students and families. This can include: collaboration on patient care with primary care providers or Medicaid managed care organization (MCO) care coordinators; closed loop coordination with new or established specialist providers; partnership with school health services team to support students; connection to community-based organizations who can address social driver of health (SDOH) needs.</p> <p>Many SDOH case management activities can be the responsibility of a community health worker. This CHW Model Best Practice Toolkit outlines considerations and planning for this role.</p>	<ul style="list-style-type: none"> • Design care coordination pathways leveraging existing community resources • Develop robust communication practices between SBHC staff, school staff, and community-based organizations • Allot designated time in SBHC staff schedules to allow for case management work
Chronic condition management	<p>SBHC staff are important partners to families in the management of pediatric chronic conditions. An SBHC can serve as a link between specialists and the school health services team to support positive student health and academic outcomes.</p> <p>Toolkit for BREATHE: Equity in asthma treatment in healthcare and education provides an example of a directly observed medication program that can be implemented in an SBHC to improve outcomes for students with poorly controlled asthma.</p>	<ul style="list-style-type: none"> • Educate local specialists like pulmonologists and endocrinologists about the presence of the SBHC and how SBHC providers can act as resources and care extenders • Work in partnership with school health services staff in the building when designing care plans for students with chronic conditions • Ensure that families understand how to communicate their child's health condition changes and concerns to SBHC staff
Emergency and infectious disease planning	<p>SBHCs can provide important guidance and support to schools in their emergency and infectious disease planning.</p> <p>The CDC's School Preparedness resource gives a helpful overview both of emergency planning and infectious disease exclusion guidelines. Ohio specific exclusion criteria can be found in the Ohio Department of Health's Infectious Disease Control Manual. Partners can also consult with their local health department for additional information.</p>	<ul style="list-style-type: none"> • Put in place protocols for responding to a medical emergency • Outline how SBHC staff will utilize and inform school district policies to help determine school exclusion periods for infectious disease • Identify how the SBHC will support the school in crisis planning and management • Ensure SBHC staff are aware of school district policies when providing education to families on when students can return to school



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Planning for primary care services (cont.)

Category	Considerations and tools 	Key steps 
Pharmacy	<p>The SBHC operator will have regulations about what types of medication can be kept on site at a care location.</p> <p>Some SBHCs may qualify for 340B pharmacy pricing which can help reduce medication costs to families.</p>	<ul style="list-style-type: none"> • Determine which medications will be kept on site at the SBHC and design inventory protocols • Establish relationships with affiliated or community pharmacies to enable delivery of prescribed medications to school and home • Train staff on resources available to support families who cannot afford prescribed medication
Point-of-Care Testing (POCT)	<p>POCT is a term that describes when clinical laboratory testing is provided close to or within the site that patient care is provided. The ability to provide POCT enables an SBHC to provide comprehensive acute care services.</p> <p>Clinical Laboratory Improvement Amendments (CLIA) is a federal regulatory agency that oversees clinical laboratories and ensures quality laboratory testing. CLIA informs what POCT options will be available in an SBHC. Many SBHCs apply for a CLIA waiver to eliminate the need for SBHC laboratory inspections. This How to obtain a CLIA certificate of waiver packet guides a healthcare provider through obtaining CLIA waivers.</p>	<ul style="list-style-type: none"> • Identify the types of POCT that will be available at the SBHC, and labs that need to be sent out to a laboratory outside of the SBHC setting • Put in place a system to store and transport lab samples, possibly contracting with a courier company • Assess any additional need for SBHC staff training to administer POCT • Identify which types of acute issues will be seen in the SBHC and which will be referred to an external urgent care center or emergency department
Screening	<p>SBHCs are an important setting for the screening of health issues in children. The American Academy of Pediatrics (AAP) provides a resource to setup and improve interventions that increase screening rates, counseling, referral and follow-up for developmental milestones. AAP's Bright Futures toolkit aggregates commonly used screening tools.</p>	<ul style="list-style-type: none"> • Determine which screeners align with community need and SBHC resources • Develop screening policies and workflows, including integration with electronic medical record when possible and outlining staff follow-up expectations • Integrate SBHC and school health services team responses to identified SDOH needs

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Planning for primary care services (cont.)

Category	Considerations and tools 	Key steps 
Screening (cont.)	<p>The American Academy of Family Physicians has a helpful toolkit to support SBHCs in implementing SDOH screenings. The School-Based Health Alliance provides a food insecurity screening toolkit for SBHCs.</p> <p>The Centers for Medicare and Medicaid have compiled a list of health equity screening tools, many of which can be implemented in an SBHC setting.</p>	
Vaccines	<p>SBHCs can support schools in ensuring that students are up to date on school-required immunizations. Vaccines for Children (VFC) is a federally funded program regulated by the Centers for Disease Control and Prevention and administered by the Ohio Department of Health. The program supplies vaccines at no cost to healthcare providers who enroll and agree to immunize program eligible children in their practice. The VFC operations guide has vaccine storage, administration, and handling requirements.</p>	<ul style="list-style-type: none"> • Identify the steps needed for the SBHC to become a VFC approved site • Outline how and where vaccine inventory will be stored in the SBHC and how the SBHC will comply with VFC requirements • Assess any additional need for SBHC staff training to administer vaccines
Well-child care	<p>Conducting comprehensive well-child visits is a cornerstone of SBHC service delivery. Recommendations for Preventive Pediatric Health Care from the American Academy of Pediatrics is a periodicity schedule detailing which recommended interventions should take place at each well-child check by age.</p>	<ul style="list-style-type: none"> • Create a therapeutic environment designed for patients who will often be seen without parents • Systematize pre-visit parent/guardian outreach and documentation to ensure SBHC has all needed background information and risk assessments completed before a well-child visit



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Based on the health issues arising in the needs assessment, SBHCs may also opt to integrate the following services into their SBHC site:

- Behavioral
- Oral
- Vision


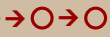
If it is determined that your SBHC will be providing behavioral, oral, and/or vision health services, additional business planning will be needed. The table below outlines important considerations and resources to review to ensure that these services are effectively integrated into your SBHC.

Planning for service integration

Service	Considerations and tools 	Key steps 
<p>Behavioral health services can include:</p> <ul style="list-style-type: none"> • Screening • Group therapy • Individual counseling • Diagnosis and medication management 	<p>The national School-Based Health Alliance (SBHA) has collected a variety of resources on behavioral health care in SBHCs. Particularly powerful is the SBHC role in adolescent depression screening.</p> <p>This Kaiser Family Foundation policy brief on Medicaid resources can help SBHC operators and school district partners explore ways to expand access to behavioral health services for students.</p> <p>OhioRISE, a specialized managed care program for youth with complex behavioral health and multi-system needs, uses the Ohio Children’s Initiative Child and Adolescent Needs and Strengths (CANS) tool to establish eligibility.</p>	<ul style="list-style-type: none"> • Identify and develop a partnership with any existing behavioral health providers in the school • Design patient referral pathways in collaboration with the school health services team • Educate families on services offered and how to access behavioral health care at the SBHC
<p>Oral health services can include:</p> <ul style="list-style-type: none"> • Screening • Prophylaxis (dental cleaning) • Comprehensive exams • Silver diamine fluoride and fluoride varnish • Dental sealants • Extractions • Dental education 	<p>This SBHA Oral Health Toolkit includes a variety of resources that inform the why behind including oral health in an SBHC.</p> <p>Rural Health Info offers another Oral Health Toolkit with a section focused on the school-based model.</p> <p>This webinar hosted by SBHA talks through start-up and planning considerations for oral health programs.</p>	<ul style="list-style-type: none"> • Design SBHC space to accommodate dental equipment, focusing on plumbing and electrical needs • Decide upon scope of practice in school setting and referral pathways for additional care • Develop staffing structure balancing hygienist and dentist time to meet patient needs

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Planning for service integration (cont.)

Service	Considerations and tools 	Key steps 
Vision services can include: <ul style="list-style-type: none"> • Screening • Comprehensive exams • Fitting and dispensing corrective lenses 	The SBHA Vision Toolkit contains many helpful resources to plan SBHC vision care, including this Eyes on Access webinar .	<ul style="list-style-type: none"> • Develop a vision program workflow that builds upon existing screening work in the school district • Assess cost and feasibility of fixed versus portable vision equipment • Provide corrective lens options that are covered by Medicaid and private health plans

Serving as a medical home

SBHCs can serve as a patient’s primary care provider or medical home in circumstances where a patient does not have an established relationship with a community healthcare provider. As a best practice, for patients who already have an established relationship with a community pediatrician or provider, an SBHC should provide healthcare services as needed and communicate with a patient’s existing provider to ensure continuity of care. When unable to serve as a medical home, SBHCs should develop mechanisms to connect patients back to community primary care providers.

What is a patient-centered medical home?

A **patient-centered medical home** (PCMH) describes a medical practice designed to prioritize comprehensive primary care and prevention.

As defined by the **Ohio Department of Health**, the key components of a PCMH are:

- **Patient-centered:** Supports patients in learning to manage and organize their own care at the level they choose, and ensures that patients and families are fully informed partners in developing care plans.
- **Comprehensive:** A team of care providers is wholly accountable for a patient’s physical and mental health care needs, including prevention and wellness, acute care, and chronic care.
- **Coordinated:** Ensures that care is organized across all elements of the broader health care system, including specialty care, hospitals, home health care, and community services and supports.
- **Accessible:** Delivers accessible services with shorter waiting times, enhanced in-person hours, 24/7 electronic or telephone access, and alternative methods of communication through health IT innovations.
- **Committed to quality and safety:** Demonstrates commitment to quality improvement through the use of health technology and other tools to guide patients and families to make informed decisions about their health.”

Many SBHCs hold similar priorities for patient care and have the resources of their operating organization to bring these defining characteristics to fruition.

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Telehealth

SBHCs can utilize telehealth technology to supplement the services that are provided in person. When assessing the feasibility of implementing telehealth as a part of your SBHC model, consider:

Utilization

- ▶ What will telehealth be used for?

Telehealth can be used in a variety of ways, including connecting patients to urgent care when there is no provider on site at the SBHC and connecting students to specialty care. It is important to identify the specific “use-cases” for telehealth.

Space and equipment

- ▶ What type of space will be available in the SBHC and at the remote site to conduct a telehealth visit?

What type of equipment will be used? The physical space where the visit is conducted and equipment/technology that is used must be HIPAA secure and compliant.

Staffing

- ▶ What will staffing look like for a telehealth visit?

A telehealth visit often requires a telepresenter, accompanying and supporting the patient during the visit. Depending on the school and SBHC operator partnership, SBHC staff or an individual on the school health services team (i.e., school nurse) can serve as the telepresenter.

Reimbursement

- ▶ What types of services are reimbursable through telehealth?

Not all services are reimbursable via telehealth and there may be specific reimbursement requirements regarding the provider type and scope of services that are delivered via telehealth.



Tools: Telehealth

- **School-Based Telehealth Playbook** *School-Based Health Alliance*. This playbook guides SBHCs through the design, implementation, and operation of a school-based telehealth program.
- **Telehealth Reimbursement Guide** *Upper Midwest Telehealth Resource Center*. This guide provides an overview of reimbursement for Ohio Medicaid and other common insurers.
- **Ohio Licensure** *Upper Midwest Telehealth Resource Center*. This resource provides a summary of various Ohio telehealth licensure requirements.
- **Telehealth for school-based services** *Department of Health and Human Services*. This best practice guide highlights strategies for creating a school-based telehealth program.

How do you design an SBHC staffing structure?

SBHCs can be supported by a variety of staffing models. However, SBHC staffing is contingent on the SBHC population served and the services the SBHC will provide. At a minimum, an SBHC will need a (1) physician medical director to oversee SBHC policies and practices and (2) a medical provider to conduct visits (i.e., physician, nurse practitioner, or physician assistant).

While it is feasible to operate with this lean staffing model, adding support staff (i.e., medical assistant, nurse, community health worker, social worker) can improve the provider’s ability to meet clinical and case management obligations and increase SBHC patient volume to promote program sustainability.

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In designing a staffing model, an SBHC operator should think about:

- ▶ Enabling staff to work to the top of their license

Example: In addition to a nurse supporting the provider, she may also see her own patients, and spearhead integration and communication with school staff.

- ▶ Cross-training staff to ensure flexibility, to withstand staffing changes, and meet SBHC demands

Example: A medical assistant may be cross trained to complete patient registration and scheduling tasks in between clinical responsibilities.

- ▶ Meeting budgetary and physical space constraints

Example: An SBHC may focus on primary care delivery in year one and expand to dental or vision care in subsequent years as funding and space allow.

Recruiting your SBHC team

An SBHC is a fast-paced, collaborative environment that requires a unique set of professional and personal skills and traits. When recruiting and hiring an SBHC team, it is important to thoroughly explain the setting and broad requirements of the role to potential applicants. The ideal SBHC team member is patient and nurturing to patients unaccompanied by parents or guardians. They are team players and not afraid to jump in where needed. Emphasizing the range of “other duties as assigned” can help SBHC operators assess a candidates’ fit in this unique clinical setting.

The table below describes potential staff roles, responsibilities, and considerations for building an SBHC staffing model. Depending on the qualifications and training of your staff, they may be able to take on more responsibilities than what is designated in the table.

SBHC staff roles and considerations

Staff	Potential responsibilities	Considerations
Medical director	<ul style="list-style-type: none"> • Conduct patient visits and prescribe • Oversee the creation of SBHC policies and workflows • Oversee nurse practitioners and clinical staff • Provide staff training and updates on evidence-based interventions 	The medical director develops policies about the type and acuity of care to be delivered, how follow-up will be handled, and the special considerations when children are being seen without their guardians. Medical directors usually spend only a portion of their time with the SBHC.

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SBHC staff roles and considerations (cont.)

Staff	Potential responsibilities	Considerations
Provider (Nurse practitioner, physician assistant, or physician)	<ul style="list-style-type: none"> • Conduct patient visits and prescribe • Communicate with school staff, families, and primary care providers as needed • Make referrals as appropriate 	The majority of SBHC visits are conducted by an advanced practice registered nurse.
Nurse	<ul style="list-style-type: none"> • Provide case management by communicating with family members, specialists, community-based organizations (CBOs) • Conduct nurse visits for immunizations and medication administration • Deliver individual or group counseling and health education • Serve as point of contact and spearhead collaboration with school health services team 	Depending on reimbursement structure, nurses may be able to bill insurance payors for their own visits, improving SBHC sustainability.
SBHC Coordinator	<ul style="list-style-type: none"> • Serve as point of contact and spearhead collaboration with school services team • Increase awareness of SBHC services within the community 	The salary for this role could be shared with the school district if clear job responsibilities, time requirements, and reporting structure are established.
Counselor	<ul style="list-style-type: none"> • Provide direct counseling services • Conduct treatment groups on common issues such as stress management or healthy relationships 	This role can be filled by many different licensures. It is important to design deliberate integration with existing behavioral health providers employed or contracted by the school.
Community health worker	<ul style="list-style-type: none"> • Create systems to address social driver of health referrals • Increase awareness of SBHC services within the community • Conduct home visits and represent the SBHC at community events as needed 	Ohio has a statewide network of certified Pathways Community Hubs that provide reimbursement for community health workers that participate in the Hub model. The Pathways Community Hub Institute provides information on where these Hubs are located in Ohio.
Medical assistant	<ul style="list-style-type: none"> • Triage patients, measure vital signs • Conduct necessary screenings • Administer medications and immunizations • Clean and prepare patient rooms • Track and reorder supplies, medications and vaccinations as needed 	The medical assistant often acts in an administrative role in the SBHC, checking patients in and scheduling follow-up appointments.

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Tools: Staffing structure

- **Staffing brainstorming worksheet** *Ohio School Based Health Alliance*. This worksheet outlines staffing considerations that are unique to the SBHC setting.
- **SBHC staffing model examples** *Ohio School-Based Health Alliance*. This document provides examples of various staffing model structures that can be implemented in an SBHC.
- **Medical assistant job description** *University of Colorado*
- **SBHC Project Coordinator job description** *Kids First Health Care*
- **SBHC Program Manager job description** *Community Health of Central Washington*
- **SBHC Nurse practitioner job description** *Kids First Health Care*

What are the considerations for SBHC workflows?

The next step in the business plan is to develop SBHC workflows. The workflow outlines the process that will be implemented by the SBHC operator to deliver care to patients. Understanding school policies that can impact the SBHC workflow are important, such as:

- School daily schedule and school year calendar
- Communicating with students in class
- Excusing students from class to visit the SBHC
- Documenting student attendance



Workflow Considerations

- What hours will the SBHC be open?

Most sustainable SBHCs are open 31 or more hours per week.

- How will SBHC schedules work in conjunction with the school schedule?

Consider lunch, holidays or days when school is not in session, testing periods or exam days and field trips in your scheduling.

- How will young patients be escorted to and from the SBHC?

The school nurse or aide may be able to escort young children to the SBHC.

- How can supervision of young patients be ensured when unaccompanied in the SBHC?

If community members are also being seen at the SBHC, providing separate waiting areas is important to ensure student safety.

- What systems will be put in place to optimize staff communication and patient flow?

Establishing a huddle time can support increased staff communication and planning.

- What systems will be put in place to ensure closed loop communication with families, school staff, and other care providers? How are follow-up visits and referrals scheduled?

It's important to have a clear delegation of responsibilities among the SBHC team regarding closed loop communications.

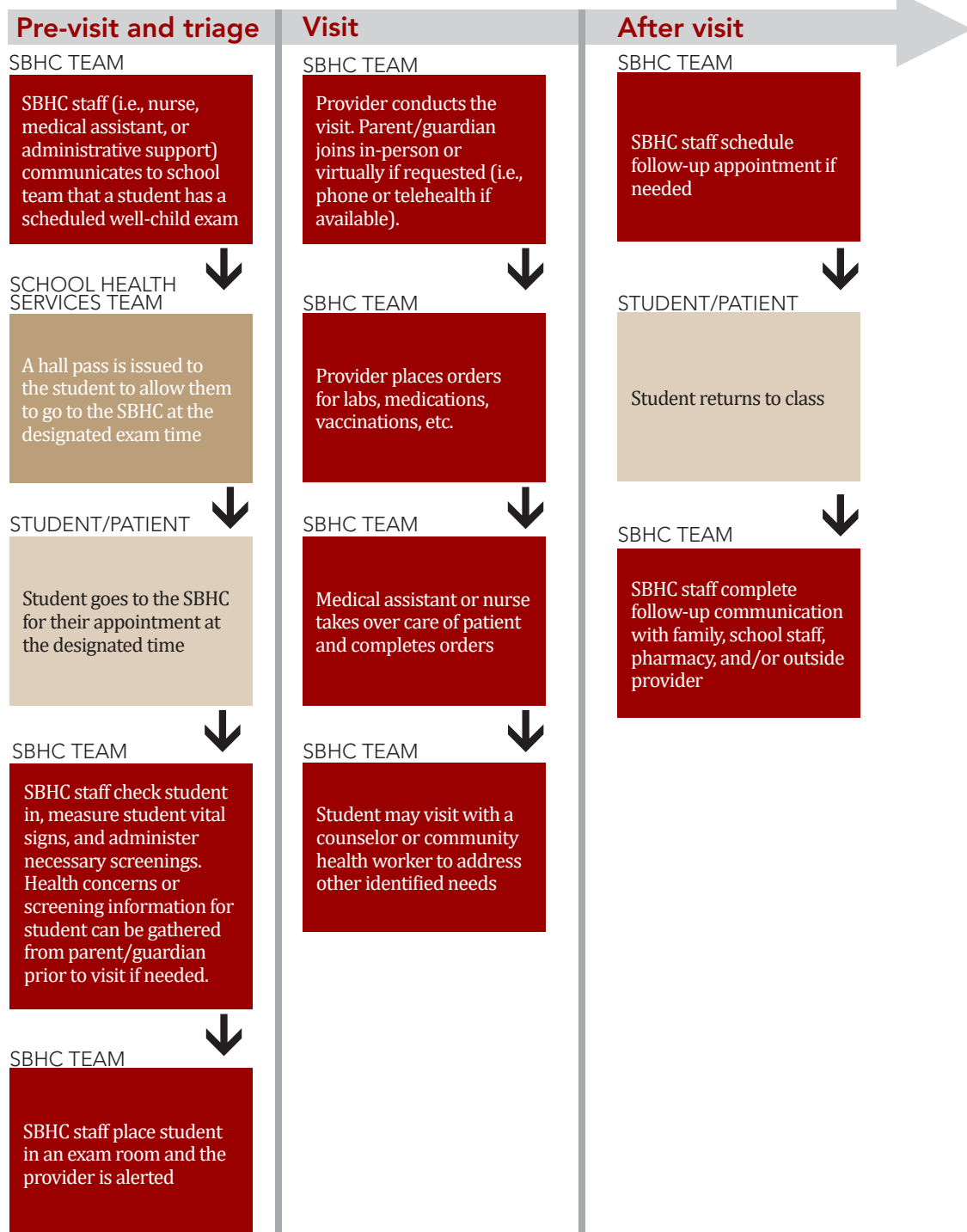
- How do scheduling templates allow for acute visit referrals from school staff or families?

Consider allocating blocks of time for acute visits from other populations in between times allocated for students.

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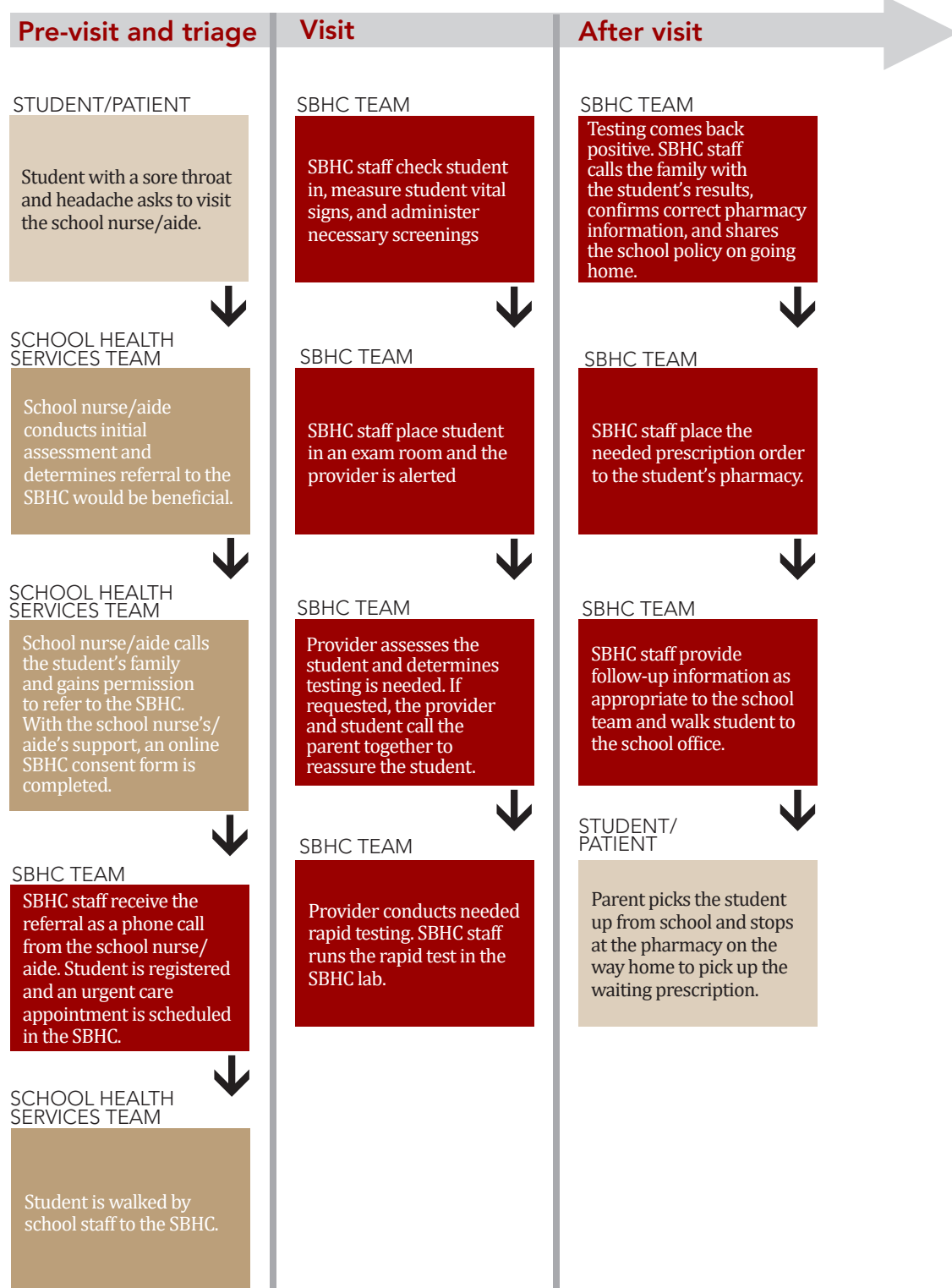
The diagrams below illustrate workflow examples for a pre-scheduled and urgent (i.e., unscheduled) SBHC visit. While these diagrams focus on SBHC workflows for students, similar workflows can be created for each population the SBHC serves.

Workflow for a pre-scheduled SBHC visit (middle or high school student)



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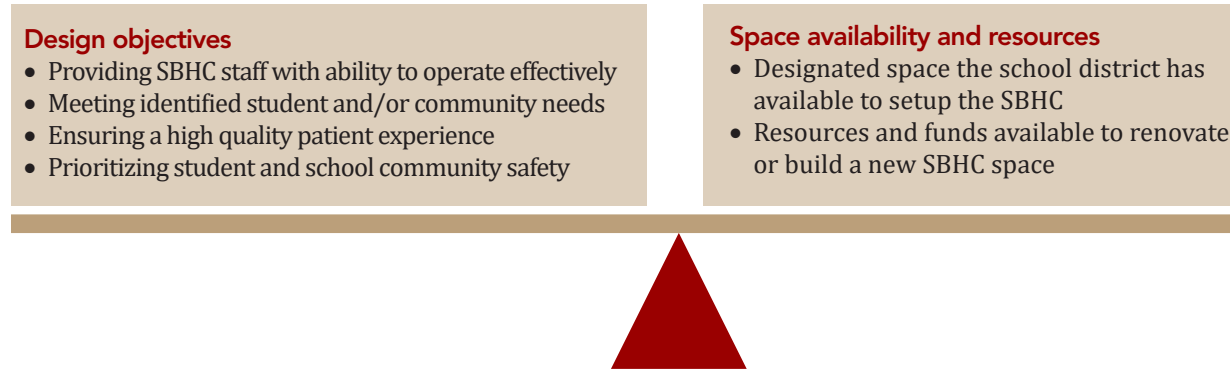
Workflow for an urgent care SBHC visit (elementary student)



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What are the considerations for facilities planning?

The graphic below describes two factors that must be balanced in SBHC facilities planning. Who the entity is (i.e., the SBHC operator or school) that manages and oversees SBHC construction is often dictated by the funding source for the build out of the SBHC. In either scenario, facilities planning and construction of the SBHC requires the school and SBHC operator to work very closely together.



Other factors that should be taken into account when designing a high-functioning SBHC space, include:

- Compliance with HIPAA and patient privacy laws
- Location adjacent to or near the school nurse office
- Maximizing staff productivity and effective workflows
- Exterior entrance and entryway for SBHCs that serve community members

The table below outlines space allocations, considerations, and furniture/equipment that are often included in SBHC construction and design plans.

SBHC space planning

Space	Considerations	Furniture/equipment examples
Minimum one waiting area	<ul style="list-style-type: none"> • Staff sightline into waiting area should be clear • If community members are served, plan for a second waiting area with an exterior entrance and locked door separating the patient care area 	<ul style="list-style-type: none"> • Waiting room chairs • Wall mounted literature displays with information on community resources and health education • Books and other entertainment materials, such as coloring supplies • Check-in desk and chairs • Computer for check-in
Triage area	<ul style="list-style-type: none"> • Space can be used for intake screenings, vital signs, blood draws, and vaccinations as needed • Area is private and separated from waiting patients 	<ul style="list-style-type: none"> • Automated vital sign monitor on wheels • Patient chair with phlebotomy attachment • Locked or movable supply storage • Wall mounted computer or workstation on wheels • Staff seating

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SBHC space planning (cont.)

Space	Considerations	Furniture/equipment examples
Exam rooms	A minimum of two exam rooms per provider maximizes patient flow and efficiency	<ul style="list-style-type: none"> Exam bed Patient/family chairs Provider stool Wall mounted computer or workstation on wheels Locked supply storage Sink
Counseling space	<ul style="list-style-type: none"> Provides area for private counseling and therapy sessions Design space to feel less clinical, more comfortable than a traditional exam room 	<ul style="list-style-type: none"> Provider chair Chair or sofa for patient Desk Computer or workstation on wheels
Bathroom	<ul style="list-style-type: none"> Memorandum of understanding (MOU) discussions with school should include responsibility allocation for supplying toiletries and custodial services A lab passthrough for urine samples maximizes patient privacy 	<ul style="list-style-type: none"> Toilet Sink Storage for sanitary supplies and urine sample cups
Laboratory area	SBHC healthcare provider operators will have guidelines they must adhere to for any designated laboratory area which are important to reference in the design of the SBHC	<ul style="list-style-type: none"> Vaccines for Children compliant refrigerator and freezer Locked storage space Any required point-of-care testing equipment
Storage space	SBHCs may choose to keep supplies on site that meet social driver of health needs like clothes, shoes, and grab and go shelf stable food items	<ul style="list-style-type: none"> Shelving system
Staff work space	Staff members engaged in family communication or care coordination efforts will need a private space to make phone calls, complete patient charting, and participate in meetings	<ul style="list-style-type: none"> Desk Phone Computer
Staff break area	A separate break area can boost SBHC staff morale and contribute to higher productivity	<ul style="list-style-type: none"> Table Refrigerator Chairs



Tools: Facilities planning

- **Sample floor plan, including vision services** *Growing Well.*
- **Sample floor plan, Aurora Public Schools.**
- **Sample furniture and equipment list with prices, Youth Health Care Alliance.**

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How can you plan for SBHC sustainability?

Sustainability planning is necessary to ensure that a community is able to maintain the critical services and impacts provided by an SBHC over time. Working towards SBHC sustainability requires thoughtful and strategic long-term planning. For school partners, it is important to understand that SBHC operators can take three to five years to establish SBHC sustainability. While SBHCs excel at improving access to care and closing care gaps for students, they do not recoup their operating costs as efficiently as a primary care practice in a community setting. This is because SBHCs spend a large amount of non-reimbursable time supporting students in navigating health needs, engaging with the school community, and integrating care within the school setting.

Consider the following action steps to move towards greater SBHC sustainability:

- ▶ Select a school site for your SBHC with a larger student body and demonstrated need.

It is recommended that SBHCs are located in a school building or on a school campus with, at minimum, 750 students. If this is not possible, implementing a hub and spoke model of care (via coordinated transportation or telehealth) that enables students from other buildings in the district to receive care at the SBHC can be helpful.

- ▶ Set student consent and visit benchmarks.

A strong goal is that at least 70% of students have consents on file for the SBHC in year 2 of operation, and that 50% of consented students visit the SBHC by the end of year 3.

- ▶ Increase patient volume by expanding the population served.

SBHCs must prioritize serving students. However, expanding to other populations, such as school personnel, students' families, and community members, can increase the likelihood of achieving sustainability.

- ▶ Develop proactive scheduling.

SBHCs that conduct outreach to ensure students are scheduled for well-child visits, immunizations, sports physicals, and follow-up appointments are better positioned to see a stable volume of patients regularly.

- ▶ Evaluate your SBHC data.

As with any successful program, data and evaluation is key. Sustainable SBHCs regularly measure clinical and business indicators to monitor and improve performance and communicate impact.

- ▶ Nurture partnership.

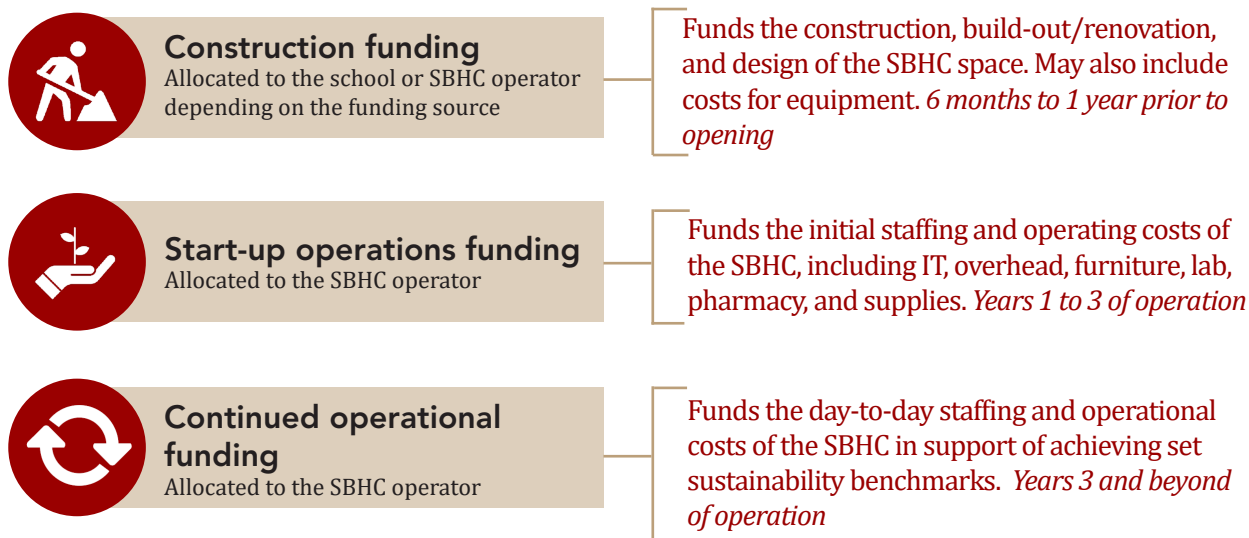
Partnership is a key component of an SBHC and is at the heart of all SBHC operations. The partnerships leveraged through an SBHC between the SBHC operator, school, students and families, and broader community provide tangible and intangible benefits towards achieving sustainability.

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SBHC funding

It can be difficult for SBHCs to sustain their operating costs with third-party billing revenue alone. Even with high student consent rates and visit volume, securing braided funding is important to achieving SBHC sustainability. The following graphic and table provide information on SBHC funding categories and sources.

SBHC funding categories



SBHC funding source examples

Type	Source	Examples and resources
Philanthropy	<ul style="list-style-type: none"> Foundations Corporate sponsors Private individual donors 	<p>Directory of Ohio philanthropic organizations</p>
Health and healthcare	<ul style="list-style-type: none"> Third party billing of health insurers (i.e., Medicaid, Medicare, state plans, private health plans) Hospital community benefit ADAMH boards (local mental health agencies) 	
Education	<ul style="list-style-type: none"> Student Wellness and Success Funds and Disadvantaged Pupil Impact Aid School modernization or construction grants Every Student Succeeds Act, Title I and IV U.S. Department of Education grants 	<ul style="list-style-type: none"> Ohio Student Wellness and Success Funds resources U.S. Department of education funding opportunities

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SBHC funding source examples (cont.)

Type	Source	Examples and resources
State and local funding	<ul style="list-style-type: none"> State agency funding through programmatic grants or budget allocations (i.e., Ohio Department of Health, Ohio Department of Mental Health and Addiction Services, Ohio Department of Education and Workforce, Ohio Facilities Construction Commission, Department of Development, Governor’s Office of Appalachia, etc.) Local bond measures with school construction project allocations City grants or funding opportunities Community fundraisers 	<ul style="list-style-type: none"> State agencies grant funding opportunities Example of past Ohio Department of Health SBHC RFP Example of SBHC funding through the Appalachian Community Grant Program
Federal	<ul style="list-style-type: none"> Health Resources and Services Administration (HRSA) School-Based Health Center funding Centers for Disease Control and Prevention (CDC) funding for specific health initiatives that can support SBHCs. Substance Abuse and Mental Health Services Administration (SAMHSA) grants for mental health and substance abuse programs, which can be applied to SBHCs. 	<ul style="list-style-type: none"> Example of HRSA Health Center funding CDC funding opportunities SAMHSA funding opportunities

Developing a Pro forma

A pro forma is a critical component of any business plan. For an SBHC operator, it is used as a budgeting tool that projects estimated expenditures as compared to projected revenues for the SBHC over a set time. Typically, an SBHC pro forma will cover a three-to-five-year time period to demonstrate “breaking even,” or when revenue covers operating expenditures. What is important to note is that an SBHC pro forma will vary from a healthcare provider’s traditional operations. Specifically, when developing a pro forma SBHC operators should take into account that SBHCs typically:



- ⚠ See fewer visits per day than other community-based settings
- ⚠ Do not receive reimbursement from payors for their full scope of activities, such as:
 - Additional time spent with students when parents or guardians are not present
 - Coordinating with school partners
 - Conducting outreach and engagement with students’ families to secure consent
 - Taking part in school-wide health promotion and prevention activities
- ⚠ Have notable productivity variations resulting from staff time spent on outreach and engagement and working around school community needs, such as ensuring minimal interruption to student classroom time, working around academic testing, and taking into consideration school events or days off.
- ⚠ Account for space as an in-kind contribution from the school

The total start-up costs for an SBHC will vary greatly depending on the construction or renovation required, the scope of services offered, and the SBHC operational costs. Developing several versions of a pro forma may be needed to inform the specific SBHC business model and operational costs. For example, several

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pro forma templates can be developed to compare SBHC operations with different staffing models or populations served. The graphic below outlines key revenue and expenditure categories to include in building an SBHC operations budget and pro forma.

Building the SBHC operations budget

	<p>Estimating revenue</p> <ul style="list-style-type: none"> • Student utilization (i.e., visits per year) • Other patient population utilization • Case mix (types of visits/services) • Payor mix (types of insurance coverage) • Average billable amount per visit (will vary by service line) • Reimbursement rate by payor • Percent of claims denied • Other sources of revenue (i.e., grants and contributions) 		<p>Estimating expenditures</p> <ul style="list-style-type: none"> • Staff positions and salaries/benefits • Program costs (i.e., consultants, medical supplies, lab services, pharmacy/medications, educational materials) • Administrative costs (i.e., office supplies, equipment/furniture, phone/internet, utilities, licenses, health information technology, training) • Indirect costs (i.e., accounting, legal, or other costs not accounted for elsewhere)
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Tools: Funding and Financing

- **Quality Counts: Sustainable Business Practices QI Toolkit** *School-Based Health Alliance*. A toolkit that outlines various factors impacting SBHC sustainability.
- **Sample budget template** *Colorado Health Foundation*. A template containing revenue and expenditure tabs for developing an SBHC budget.
- **Engineering sustainable school-based health centers** *School-Based Health Alliance*. A graphic highlighting key practices that promote sustainability in SBHCs.

How can you plan for SBHC marketing and outreach?

As the SBHC approaches an opening date, the planning team should be engaged in designing and implementing a marketing and outreach plan. The goals of the marketing plan are to:

- Educate the community on the services, staffing, and hours of the SBHC
- Explain logistics, such as how to schedule appointments and how SBHC staff will engage families in care
- Clarify if the SBHC can serve as a student's medical home and the communication that will take place with community primary care providers
- Share images or tours of the SBHC space
- Answer frequently asked questions
- Secure completed consent forms

Marketing methods can include traditional materials like pamphlets and posters but should also focus heavily on community events and empowering already trusted partners within the school and community to promote the SBHC. Deputizing school partners to be trusted ambassadors for the SBHC is critical. It is incumbent on the SBHC staff to ensure that the school health services team, principals, vice-principals, athletic directors, coaches, counselors, deans, and other school personnel in regular contact with families know (1) what services the SBHC offers and (2) how families can consent and schedule visits.

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Marketing methods to promote SBHCs

Method	Description
Meet the teacher or sneak-a-peak evenings	Staff available in SBHC to give tours and answer questions
School registration paperwork	<ul style="list-style-type: none"> • SBHC consent form included in required beginning of the school year registration forms – either on paper or in online portal • Provide parents/guardians with an opportunity to consent or opt out of SBHC services
Back to school night or open house	<ul style="list-style-type: none"> • SBHC staff included in an all-family presentation • SBHC space open and time designated for families to tour
Pre-season parent athletic meeting	<ul style="list-style-type: none"> • SBHC staff invited to present to families about sports physicals and well child visits • Parents/guardians can schedule visits and complete needed forms
Athletic events, school plays, concerts	SBHC staff are stationed to advertise SBHC, disseminate consent forms, and answer questions
Student announcements	SBHC staff provide information on accessing the SBHC to be included in student read aloud announcements or morning/afternoon news
Social media channels	Instagram reel or TikTok video with tour of SBHC space and FAQ interview with SBHC provider and/or parent/guardian of an SBHC patient
Local radio, TV news programs, or newspaper	SBHC staff participate in an interview to publicize the power of the model and the details of the new SBHC
PTO/PTA meetings	<ul style="list-style-type: none"> • SBHC staff work with leadership of parent-teacher organizations to design and deliver relevant content on common childhood health concerns • Forum is used to publicize SBHC services
Professional development days or faculty meetings	SBHC staff engage in school faculty and personnel meetings to raise awareness of SBHC services and how to connect students/families to the SBHC
Ribbon cutting	<ul style="list-style-type: none"> • Community members, families, and media should be invited to this event • Staff available in SBHC to give tours and answer questions



Tools: Marketing and outreach

- **SBHC Marketing and Outreach Plan** *New Mexico Alliance for School-Based Health Care*. This is a fillable example of an SBHC marketing and outreach plan for the school year.
- **PrimaryPlus Ripley School-Based Health Center Marketing Campaign** *Interact for Health*. This document provides an example marketing plan for an SBHC in Ohio.
- **Ruth and Norman Rales Health Center Dedication example video** *Johns Hopkins University*. This is a short dedication video of an SBHC that can be used as a marketing tool.

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Power of Youth Advisory Councils (YACs)

Youth Advisory Councils (YACs) are a powerful way to promote youth development, engagement, and empowerment through SBHCs. SBHCs can support the setup and sponsorship of YACs, which are made up of student representatives who meet regularly to provide input and take action on issues that affect them and their communities. YACs can:

- Advise SBHC staff on needs and concerns of the student body
- Provide feedback on clinical workflows and patient experience
- Promote SBHC consent and services to students and families
- Develop projects to address community needs

If an SBHC does not have the capacity to set up a YAC, collaborating with other student-led organizations in the school building can be equally valuable.



Tools: Youth Advisory Councils

- **Creating & Sustaining a Thriving Youth Advisory Council** *Adolescent Health Initiative at Michigan Medicine*. A comprehensive guidebook on developing and maintaining a youth advisory council within an SBHC.
- **Youth Health Hub** *School-Based Health Alliance*. A resource-rich website dedicated to guiding youth engagement in SBHCs.

You are ready!

You have walked through all the steps of developing an SBHC business plan and the **SBHC 101 Toolkit**. From understanding the model, planning, and setup you are ready to make an SBHC impact on Ohio's children, families, and community.

For additional support and technical assistance, you can contact the Ohio Alliance team at info@osbha.com. Be sure to stay connected to the statewide network of SBHC partners by joining the Ohio School-Based Health Alliance mailing list:

