Illinois School Health Centers

Keeping Students Healthy and Ready to Learn

Illinois Coalition for School Health Centers

Presentation date, location and presenter
“The school health center has been a Godsend. My chronic asthmatic son was able to receive treatments in school—reducing his lost school days and my lost work time.”

--Parent, Peoria
“My school health center gives kids access to health care to help them with needs or problems they wouldn’t necessarily address otherwise.”

--Student, Evanston Township High School
Illinois Coalition for School Health Centers

MISSION

“To improve the physical and mental health status of children and adolescents in Illinois by advocating for the development, stabilization and expansion of school health centers.”

GOALS

◆ advocacy
◆ networking
◆ quality assurance
◆ evaluation
◆ funding
◆ sustainability
Desired Outcomes

- Health care access for Illinois children and adolescents
- Understand the school health center model
- How school health centers function in Illinois
- Benefits of school health centers
Health of Illinois’ Children & Teens
Illinois School Health Centers

Keeping Students Healthy & Ready to Learn
Many of the most significant and costly national health problems are caused by behaviors established during youth:

- Drug and alcohol abuse
- Tobacco use
- High-risk sexual behaviors
- Inadequate physical activity
- Poor dietary habits
253,000

- Estimated number of children in Illinois under the age of 19 who are uninsured. (2003 Census data, Governor’s office 2005)
205,511

- Children in Illinois suffer from asthma
  (IDPH 2002)
Illinois high school students and 13% of Illinois middle school students currently use tobacco products (IDPH 2002)
Illinois high school students reported having sexual intercourse (YRBS 2001)
23%

- Illinois high school students are described as overweight or at risk for becoming overweight (YRBS 2001)
Illinois high school students who have seriously considered suicide (YRBS 2001)
54%

- Illinois children with evidence of dental decay (IDPH, Division of Oral Health)
Access to Health Care
ACCESS TO HEALTHCARE
- In Illinois 253,000 of children and youth aged 0-19 are uninsured

- Over 80% of Illinois SHC enrollees are either Medicaid/All Kids patients or uninsured (IDHS, 2007)

- Youth aged 10-19 have the lowest utilization rates of any age group and are the least likely to seek care (Klein, 1994)
What do youth say about barriers to care?

- Lack of Confidentiality
- Lack of Sensitivity
- Lack of Respect
- Intimidated by Providers
“I’ve never had the benefit of having people help me with as much care and concern as I’ve had at the school health center. It’s entirely convenient; I have a medical doctor, therapist and a dentist that I am able to see without worry of cost.”

Student, Urbana High School
What do parents say about barriers to health care?

- Cost
- Language
- Loss of Job Time
- Lack of Consistent Provider
- Transportation
“Using the School Wellness Center has been a life changing experience for my family. In a community with limited providers, the school-based facility enables students and faculty to see a health care provider, receive their medicine and never leave the building.”

Parent, Gallatin County Unit District #7
School Health Center Model
THE MODEL
SCHOOL HEALTH CENTERS
History of the Model

- First centers opened in MN and TX
- Illinois in 1982 at Austin Community High School
- Illinois Department of Human Services support
- Illinois School Based and Linked Health Centers Standards (*IL Administrative Code*)
- Illinois Coalition for School Health Centers formed in 1996
What are they?

- *School-based* health centers, located on school grounds.

- *School-linked* health centers, located off school grounds close to a school.
Core Mission

- Bringing services to students where they learn and grow
- Addressing critical health issues
- Serving kids in need
- Supporting parents
- Supporting schools
- Supporting communities
Common Services

- School and Sports Physicals
- Acute Care
- Immunizations
- Mental Health Services
- Risk Assessments
- Dental Care
- Eye Exams
- Nutrition Counseling
- Referrals to Community Agencies
- Preventative & Health Education
- Diagnosis and Treatment of Illness
- Laboratory
- Reproductive Health Services
- Linkages to Support Services
- Benefits Enrollment
Top Reasons for SHC Visits

- **Top Visits:**
  - Health Maintenance/Preventative Services
  - Reproductive Health
  - Mental Health
  - Respiratory Diseases
  - Symptoms
  - Injuries

- **Mental Health Visits:**
  - Attention-Deficit/Hyperactivity Disorder
  - Depression
  - Family/Peer Conflict
  - Behavior Disorders
  - Posttraumatic Stress/Anxiety Disorders
  - Academic Issues

ICSHC Report Card FY 07
Organizational Structure

- Planned partnerships and on-going advisory from health care providers, school districts, local health departments, faith leaders, community leaders and organizations, parents and students

- Sponsoring agencies can be hospitals, health departments, universities, community health centers, schools and community agencies
Staffing

- Recommended Staffing is:
  - Medical Director
  - Nurse Practitioner or Physician Assistant
  - Clinically-trained Mental Health Practitioner
  - Health Educator
  - Medical Receptionist/Other Support Staff
A Day in the Life of a SHC

Monday, March 10, 2008: 9:00a.m.-12:00p.m.

Yolanda, 17 year-old ............................................. Sore throat
Emilio, 16 year-old .................................................. ADD/ADHD
Pheng, 19 year-old ................................................... Immunization
Keesha, 16 year-old ................................................... No show
Willie, 15 year-old ................................................... Sports Physical
Carmen, 14 year-old .................................................. Asthma
Tanya, 14 year-old ................................................... Depression
Cassandra, 17 year-old .............................................. Birth Control
Alex, 15 year-old ..................................................... Acne
Neng, 14 year-old ..................................................... Sprained ankle
Julie, 15 year-old ..................................................... Abdominal pain
Benefits of School Health Centers
THE BENEFITS
SCHOOL HEALTH CENTERS
• Accessible
• Affordable
• Child and Adolescent-Friendly Staff
• Safe Environment
• Promote Healthy Lifestyles
• One-Stop Shopping
Savings and Benefits to Illinois

- SHCs save an estimated $233,000 to $342,000 per year by reducing asthma hospitalizations.

- SHCs save an estimated $2.5 million per year by reducing emergency room visits.

- SHCs in Illinois save an estimated $2.72 million per year by providing immunizations.
A Proven Track Record
A PROVEN
TRACK RECORD
Quality Care

- State-certified model of care
- Serve students regardless of their ability to pay
- Facilitate after-hours care
- Require parental consent for students to receive most services
- Advisory board and student involvement
- Providers or referrals for specialty care or other resources in the community
- Increase preventive health care
- Decrease school absenteeism
- Lessen emergency rooms visits
- Reduce parents’ time off from work
- Improve access to mental health and substance abuse services
- Reduce unhealthy behaviors
- Reduce health care access disparities
- Strengthen community services
Illinois School Health Centers

Keeping Students Healthy and Ready to Learn
Illinois School Health Centers
Keeping Students Healthy & Ready to Learn
50 SHCs across Illinois
27 SHCs in Chicago
Illinois School Health Centers FY 2007

- 40 out of 50 school health centers report the following:
- IL SHCs serve 98 schools in 15 counties
- 78% of SHCs are in Title I schools
- 78,075 students were enrolled to receive services
- There were 103,469 total visits to SHCs

Data sources: School Health Center Report Card FY 2007
Enrollment by Age

6-11 years: 19%
12-18 years: 57%
0-5 years: 3%
19+ years: 21%

Data sources: School Health Center Report Card FY 2007
Enrollment by Insurance Status

- AllKids: 38%
- Medicaid: 36%
- Private Ins: 17%
- No ins but eligible: 10%
- No insurance status unknown: 36%

Data sources: School Health Center Report Card FY 2007
Enrollment by Ethnicity

Data sources: School Health Center Report Card FY 2007
State Expenditures on School Health Centers


- FY2008 DHS supported 39 operating SHCs
Common Challenges

- Sustainability
- Lack of evaluation data
- Coordinating health & education priorities in a school setting
- Dilution of the SHC model
How to get involved

- Collaborate
- Support ICSHC
ICSHC would like to thank the following for their contributions to the video:

- **Frazier SHC**: Amy Valukas, Sandra Rigsbee, Sheryl Fitzgerald and Marian Byrd
- Advisory Board Chair Donna Hill
- Students: Charles Kindred, Keitrion Lewis, Dajanae Watts, Travis Allison, Daminique Brown, Diamonique Scott and Zhane Hampton
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- Bond Elementary School Principal, Alfonso Carrington
- Advisory Board Member Winifred French and Student Leah Wickes
- **Maine East SHC**: Therese Hanigan and Candance Dusenberg
- Students: Tasia Plott, Gisela Gomez and Rincy Panicker
- Maine East High School Principal, David Barker
- School Nurse, Janice Karl and Teacher, Sharon Baima-Sendaydiego
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- Alderman Margaret Laurino
- Students: Nicholas Rodriguez and Matasha Cook
- School Nurse: Mary Tyrrell and Community Partner Andrea Kuebbeler
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- Urbana School District 116 Superintendent Gene Amberg
- Social Worker Grace Mitchell
- Illinois State Representative Naomi Jakobbsson
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- Parent Michelle Hamilton and Student Brook Hamilton
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- Teacher Michele Raper
- Superintendent Les Oyler
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- National Assembly on School-Based Health Care
  - www.nasbhc.org, info@nasbhc.org

- Illinois Dept. of Human Services, Office of Family Health
  - Victoria Jackson, School Health Consultant, 217-785-5368, victoria.jackson@illinois.gov
References

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- Illinois Board of Education, eReport Card FY 2007 (ISBE)
- National Center for Education Statistics (NCES), Public School Search, 2007
- Illinois Department of Public Health (IDPH), Division of Oral Health
- Illinois Department of Public Health, (IDPH) Youth Tobacco Survey, 2002
- National Assembly on School-Based Health Care (NASBHC)
- 2001 Youth Risk Behavior Survey, (YRBS), Centers for Disease Control and Prevention (CDC)