

School-Based Health Centers: Key Concepts & Status in Georgia

The School Based Health Center (SBHC) is a model of health care delivery that has been recognized as an effective means of providing quality healthcare for children that can significantly reduce barriers to health care for those living in poor communities.¹⁻³ SBHCs offer increased access to quality care for students by eliminating barriers such as cost, transportation, and hours of operation, and the lack of knowledge around how to manage one's health and when to access care. In addition, SBHCs provide a sense of security to parents who rest assured in the knowledge that their child's health care is covered at no

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or low cost; to school leaders who recognize that prompt attention to student illness means a faster return to the classroom and thus improved academic performance; and to employers who appreciate that employee productivity is affected when

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they are unable to attend to their sick children. Although the majority of school based health centers are on school property, a small number are set up in other settings such as mobile health centers or telehealth centers. Services offered at SBHCs include routine wellness checks and sports physicals, immunizations, diagnosis and treatment of acute and chronic illnesses and injuries, mental, behavioral health, and family counseling, nutrition counseling, school-wide health education and wellness programs, and specialist/community agency referrals. Many centers also offer additional services such as dental care and laboratory testing.

The number of comprehensive school-based health centers has increased significantly over the past 15 years with the latest National Census of SBHCs in 2013-2014 reporting a total of approximately 2315 SBHCs operating throughout the country.⁴ The first School Based Health Center developed in Georgia is the Whitefoord Elementary School Health Clinic, followed by the Coan Middle School Health Clinic several years later. These SBHCs were the only two in Georgia until 2013, when the Emory University Department of Pediatrics created the Urban Health Program (later renamed PARTNERS for Equity in Child and Adolescent Health) to decrease health disparities with an emphasis on expanding School Based Health in the state. There are now 12 School Based Health Centers in Georgia with several more slated to open by the 2016-2017 school year.

The Georgia School Health Alliance (www.gasbha.org), an affiliate of the national advocacy group, School Based Health Alliance, was formed in late 2012. The Alliance's mission is to develop community partnerships to advocate for, and provide technical assistance to, those interested in opening a school based health center.

Since school is where children spend a large majority of their time daily, the SBHC offers an opportunity for pediatricians to extend themselves beyond the boundaries of their offices and transform their approach to provide care in the context of the children's developmental, psychological, social, intellectual, and physical needs. Beyond working directly in a SBHC, other methods for pediatricians to become involved in school based health include working as a consultant to the school, assisting with health education of students, providing in-service training of school staff on relevant health topics, directly communicating with schools on a specific student's medical condition, or advocating for patients through activities as members of School Advisory Councils and School Boards. Additionally, pediatricians can further promote wellness for students as well as school staff by providing guidance on school nutrition, development and implementation of emergency medical plans, and advocating for an optimal school environment.

Pediatricians can become a crucial link between the SBHC and the community. Health care providers working in SBHCs should integrate and coordinate with other pediatric medical home practices in the community to ensure that care is not frag-

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mented or competes with other providers. Likewise, community Pediatricians should also be aware of the SBHC model in order to collaborate efficiently with SBHC Providers to ensure patients have an appropriate medical home.

In 2008, a survey was conducted by the Georgia Chapter of the American Academy of Pediatrics Committee on School Health to determine pediatricians' knowledge and support of School-Based Health Centers (SBHCs) as a means to increase access to health-care for underserved children and adolescents. Of the 142 respondents, only 28% were familiar with SBHCs, but 52% were supportive of SBHCs as a model to increase access to healthcare for children. Forty percent reported having volunteered in a school or a daycare center. Our goal is to increase the number of pediatricians involved in SBHCs.

We welcome everyone interested in School Health to join our Committee. Please contact us or Shanrita McClain, Chapter staff liaison for the School Health Committee (smcclain@gaaap.org) for more information.

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