

School-Based Health Centers – 2018 Evaluation Report

Evaluation Aims

1. Explore students' and parents'/guardians' perceptions of health outcomes, satisfaction with services, and costs and/or potential costs savings associated with episodic care of those who use SBHCs
2. Examine the relationship between use of SBHCs and health care utilization

Introduction

- There are 31 SBHCs in Delaware and services offered vary by location
- Literature shows that students who engage in preventative services at SBHCs have lower rates of Emergency Department usage and hospitalization and thus high healthcare cost savings
- Evaluation sought to examine the intermediate, recommended, and unintended outcomes of SBHC utilization

Methods

- Conducted focus groups with students enrolled in SBHCs and parents/guardians whose children are enrolled in SBHCs
- Focus groups discussed satisfaction with care, health status and health care usage, relationship to educational outcomes, and time/cost savings
- Cross reviewed SBHC enrollment and usage data with Medicaid claims data from 2014-2016
- Specifically looked at usage of the following health services: well-child visits, annual risk assessments, BMI screening, nutritional counseling, physical activity counseling, depression screenings, STI and chlamydia screening

Results

Aim 1

- Students appreciated the confidentiality provided to them at SBHCs, particularly for reproductive health services and felt more empowered to take control over their health care
- Students and parents also valued the lack of out-of-pocket costs to increase financial accessibility of services
- Students and parents cited the convenience of having health services inside a school as a value point for SBHCs because students and parents do not have to miss valuable class or work time
- Students and parents felt that SBHC providers truly cared for the students on a personal level in addition to their health. Students felt that SBHCs provided helpful coping skills that allowed them to better focus on their schoolwork and deal with personal struggles and that SBHCs services were helping in addressing and deescalating mental health crises
- SBHCs were the sole source of medical care for many students. Outside of SBHCs, students used EDs and urgent care facilities. Few students were connected with a primary medical home
- Student cited the following barriers to engaging in medical services outside of SBHCs:
 - Lack of community settings
 - Lack of knowledge of community resources
 - Transportation issues

- Cost
- Lack of motivation/energy to seek care
- Parental barriers like perceptions of lack of access to services, concern, time, energy, inclination, or finances to obtain care

Aim 2

- Utilization of SBHC services among Medicaid-eligible students was lower than expected (~45%)
- SBHC usage was more common among female students and older students. There was small racial/ethnic variation in SBHC usage, with white students using services the most frequently and black/African American students using services the least frequently
- Medicaid-eligible students who were enrolled in SBHCs had greater health care service utilization than Medicaid-eligible students who were not enrolled in SBHCs, except for immunizations. The most common services utilized by SBHC-enrolled students were well-child visits and mental health visits
- No evidence found that SBHC-enrolled Medicaid students had lower asthma-related ED usage than non-SBHC-enrolled Medicaid students

Conclusion

- SBHCs play a crucial role in the health care of adolescents in Delaware and can bolster the continuum of care that adolescents receive
- SBHCs are particularly important for providing mental and behavioral health care to adolescents who may not otherwise have access or be connected to care
- Given the health needs of students, SBHCs most commonly provide episodic care, screenings, well visits, and tests rather than chronic health services
- SBHCs should continue to expand recruitment of Medicaid-eligible students, especially young men
- SBHCs should standardize the menu of services offered across locations, especially reproductive health services
- SBHCs must invest in better data management and reporting systems for enhanced evaluation capability
- SBHCs must be better funded through a sustainable, diverse funding model