Guidance for Oregon’s School-Based Health Centers for 2020-2021 School Reopening

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by the Oregon School-Based Health Alliance
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**Introduction**

With school closures due to COVID-19, Oregon children and adolescents missed over three months of in-person school in the spring of 2020. For many who rely on school-based health centers (SBHCs), and with limited access to health care in the community during the pandemic, that meant months of untreated chronic illness, missed preventive care visits and required vaccinations, and compounded unmet mental health needs.

Many schools will reopen this fall with the added stress of illness and loss of loved ones due to COVID-19, anxiety due to isolation and navigating distance learning, the impacts of economic instability within their families, and heightened racial trauma. We know that COVID-19 will continue to be a threat in many communities, and the Oregon Department of Education (ODE) and Oregon Health Authority (OHA) will be releasing a set of guideposts, protocols, and public health indicators that will help determine the best instruction model for a given zip code or county. School-based health centers and services will play a critical, frontline role in addressing the concerns and needs of school communities as we all do our part to control further spread of the virus.

When schools reopen, SBHCs can provide preventive and routine health care that was deferred due to COVID-19, along with other critical physical, behavioral health care, and other healthcare services (e.g. dental care) for Oregon’s most vulnerable youth. Because of the tremendous responsibility placed in the hands of local school and health officials for returning to in-person instruction, healthcare providers and schools/districts must develop and maintain a collaborative effort—now more than ever—to address student and school community needs.

This guidance document was created to:

1. Support and foster additional collaboration between existing SBHCs and the school communities they serve, and
2. Encourage school districts and healthcare providers to consider new collaborations to address student needs.

In addition to planning for the safe re-entry of students, we urge you to prioritize racial equity and the social-emotional well-being of students through your SBHCs and in the support you provide to school district partners. A heightened awareness of and attention to racism, trauma and mental health will be critical, as well as diligence to measures to prevent discrimination and stigmatization surrounding COVID-19. Additional emphasis should be given to crisis response and maintaining fair discipline practices as students return to school after months of disruption in their daily routines.
About this SBHC Guidance

This resource was developed to support coordination between Oregon school-based health centers (SBHCs) and their school district partners as schools reopen during the COVID-19 pandemic. The goals of this guidance are to:

- encourage a unified statewide approach for coordination between SBHCs and school districts for reopening;
- help SBHCs and schools leverage resources to address the needs of students;
- help to clarify boundaries/responsibilities between schools and SBHCs for student care as schools reopen.

This document is intended to be used as a template for guiding local discussions and will be updated periodically to remain current. Local discussions will be informed by guidance from the Oregon Department of Education (ODE), the Oregon Health Authority (OHA), and local public health authorities, school districts and school boards. Given variation in the impact of the COVID-19 pandemic across Oregon, as well as the unique local response, all decisions should be made in close collaboration with local school districts and school boards, as well as local and state public health authorities. (Boards have generally delegated to the Superintendent of the school district the ability to make these decisions).

Please do not hesitate to reach out with additional questions or needs as you collaborate in reopening your school-based health centers. Thank you for all you do to support our students in Oregon.

Maureen Hinman, Interim Executive Director
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About the Oregon School-Based Health Alliance:

Oregon School-Based Health Alliance (OSBHA) is a statewide 501(c)(3) nonprofit organization serving as the collective voice to build a stable, effective, and accessible school-based health care system through the development of school-based health centers (SBHCs).

Vision: Our vision is that all children and youth are healthy, learning, and thriving.

Mission: Our mission is to strengthen school based health services and systems that promote the health and academic success of young people.

Equity Goal: OSBHA will actively engage in practices that redistribute, share and build power to change systems of inequity.

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OSBHA is a state affiliate of the national School-Based Health Alliance.
Acknowledgements

The OSBHA would like to thank all those who provided considerations for and review of this document: members of our Oregon SBHC community broadly, including SBHC staff, administrators and medical directors; school nurses; staff at OHA and [others here]; and members of the OSBHA board of directors. Importantly, OSBHA would like to thank the Show-Me School-Based Health Alliance of Missouri and Washington School-Based Health Alliance for allowing us to borrow from their exemplary SBHC guidance documents.
Context of School Reopening in Oregon

The Oregon Department of Education (ODE), in coordination with the Oregon Health Authority (OHA), has released Ready Schools, Safe Learners: Guidance for the 2020-21 School Year in accordance with Governor Brown’s Executive Order 20-29. This guidance is effective July 1, 2020 and will remain in effect through June 30, 2021 unless replaced by updated guidance. Please check back regularly for the latest version.

The Ready Schools, Safe Schools guidance provides a broad framework within which local school districts and schools can plan for reopening with additional guidance from their Local Public Health Authorities (LPHAs). Each public school will work under the direction of the school district to develop an Operational Blueprint for Reentry that is tailored to their local context and informed by local needs by August 17 or prior to the start of the 2020-21 school year. These Blueprints for Reentry must include a Communicable Disease Management Plan.

ODE and OHA will release a set of guideposts, protocols, and public health indicators that will help determine the best instructional model for a given zip code or county in the coming weeks. Data about readiness of local healthcare systems and the state of local COVID-19 rates will help inform school decisions about when to move to On-Site or Hybrid models of instruction.

SBHCs, community based health centers, and their medical providers may serve as a valuable resource to the schools in understanding and implementing updated health practices that can inform the Decision Tree.

Ready Schools, Safe Learners guidance provides important context for SBHC guidance included in this document:

- The priority is to serve students with as much in-person learning as possible, consistent with health and safety needs. There is a presumption of a fall opening for:
  - Students in kindergarten through third grade;
  - Specific groups of students based on needed educational, relational, curricular, instructional, and/or assessment supports (including provisions for supporting students experiencing disability, English language learners, and programs such as career technical education (CTE) that may require hands-on demonstration of skills);
  - Students in remote or rural schools in larger population counties with a population of >30,000 and population density >6 people per square mile (Benton, Clackamas, Clatsop, Columbia, Coos, Deschutes, Douglas, Jackson, Josephine, Klamath, Lane, Lincoln, Linn, Malheur, Marion, Multnomah, Washington, Polk, Umatilla, and Yamhill);
  - Students from counties with a population of ≤30,000 (Baker, Crook, Curry, Gilliam, Grant, Harney, Hood River, Jefferson, Lake, Morrow, Sherman, Tillamook, Union, Wallowa, Wasco and Wheeler); and
Students from low population density counties with a population density of <6 people per square mile (Baker, Gilliam, Grant, Harney, Lake, Malheur, Morrow, Sherman, Wallowa, Wheeler).

- Alternative models include:
  - Hybrid Instructional model
  - Comprehensive distance learning models

School districts will need to plan for:
- Rapid transitions between models
- A flexible school calendar in case of lost instructional time

To successfully reopen schools in Oregon, there are three levels of metrics:

1. The first set of metrics represents the level of disease circulation that would be required for return to in-person instruction, with limited exceptions. Schools would need to begin transition planning as case rates and test positivity declines in counties in order to prepare the school community for the potential upcoming change.

2. The second set of metrics refers to indicators of increased COVID-19 spread in the community that would indicate the need to plan for transition back to comprehensive distance learning.

3. The third set of metrics indicate disease spread in the community that would prompt initiation of Comprehensive Distance Learning with limited exceptions.

Additionally, spread within smaller communities will be examined to see if subsets of schools may return safely to in-person instruction prior to county and state metrics being met.

Ready Schools, Safe Learners guidance lays out commitments and principles for our education system in the 2020-2021 school year, some worth highlighting here as they are also key to our work in school-based health care:

- **Ensure safety and wellness.** The decision to return to school settings must be driven by health and safety considerations. In planning, prioritize basic needs such as food, shelter, and wellness and support the mental, social, and emotional health of students and staff.

- **Cultivate connection and relationship.** Quality learning experiences require deep interpersonal relationships and a learning environment where people feel safe, seen, and valued. Especially in the midst of returning to school settings from an extended school closure, supporting students and families should begin with connection and relationship.
• **Center equity.** Recognize the disproportionate impact of COVID-19 on Black, American Indian/Alaska Native, and Latino/a/x, Pacific Islander communities; students experiencing disabilities; and students and families navigating poverty. Apply an equity-informed, anti-racist, and anti-oppressive lens to promote culturally sustaining and revitalizing educational systems that support every child.

• **Innovate.** The complex circumstances in which learning is currently situated requires ongoing reflection and iteration to assure deep learning for every student.

Oregon schools must heighten attention to groups of students who bear the burden of an inequitable health and educational system. Through all of this work, educators must recognize the strengths and meet the needs:

  o students of color, including students who are African-American/Black, Alaska Native and American Indian, Asian Pacific Islander, Refugee, Latino/a/x, Compact of Free Association (COFA) citizens
  o students who are emergent bilinguals (English Learners)
  o students of migrant and farmworker families
  o students experiencing disability
  o students who are LGBTQ2SIA+
  o students in foster care
  o students who have an incarcerated loved one
  o students experiencing houselessness, and
  o students navigating poverty

• Seek and utilize student and family voice when planning for fall, as much has changed.
• Seize the opportunity to make long-desired changes or to make permanent best practices learned during the COVID-19 pandemic.
• *schools have an increased opportunity and responsibility to prioritize and target investments for students historically underserved by the system and those impacted by the closures this spring*
• Culturally-responsive, trauma-informed, and anti-racist practices are foundational. Plan for staff training and support in these practices.
• Support staff in attending to self-care.
Considerations for SBHCs in Reopening Planning

Communicable Disease Management Plan Communications

□ Identify contacts and open lines of communication with your LPHA. Know whom to contact with questions about local school reopening guidance, phase of county reopening, and/or roles in contact tracing.

□ Identify school nurses, and other medical experts (mental and behavioral health providers, dental providers, physical, occupational, speech, and respiratory therapists) who provided support and resources to the district and may provide evidence to inform decision tree.

SBHC Services During Reopening

□ With the SBHC’s school district, determine:

• Which in-person and telehealth services the SBHC will provide during school reopening (e.g., somatic health care, mental health/behavioral health services, urgent care services, dental and vision services, immunizations), and.

• The role the SBHC will play in COVID-19 screening, testing and referrals.

To help clarify COVID-19 screening and testing in the context of the school:

▪ **Screening:** Visual observations for primary symptoms of COVID-19 for any person entering the bus, the school, or the SBHC, and screening of symptomatic students or staff while they are on campus.

▪ **Testing:** Symptomatic persons may be tested for COVID-19. Testing may happen at school, at an SBHC, at a testing site in the community, or at home if a take-home test kit becomes available.

▪ All COVID-19 screening and testing protocols should be laid out in the school’s Communicable Disease Management Plan. Schools should work with their Local Public Health Authority (LPHA). Any COVID-19 screening and testing by SBHC staff will be determined by the SBHC in coordination with the school district.

<table>
<thead>
<tr>
<th>ROLES</th>
<th>School</th>
<th>SBHC</th>
</tr>
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</table>
| **Screening** | • Screening for all entering buses or school buildings and cohort assignment  
• Screening of symptomatic students and staff on campus | • Screening upon arrival at SBHC for non-sick visits  
• Optional: Screening of symptomatic students and staff on campus |
| **Testing** | *Optional:* Testing symptomatic students and staff on campus, referring to community testing site, or sending home take-home test kits | *Optional:* Testing symptomatic students and staff on campus, referring to community testing site, or sending home take-home test kits |
Be clear and consistent in all communications with the district, school and families about the availability of SBHC services and SBHC roles in COVID-19 screening, testing and referral.

Coordination and Collaboration with School District and School

Ask the district to include the SBHC in the district’s:
- Asset mapping to identify resources to serve student/family needs
- Reopening stakeholder group

With the district and school, clarify the health and safety roles of the district, school and SBHC in light of COVID-19 impacts and school reopening guidelines:
- Clarify schoolwide protocols for COVID-19 screening upon arrival, as well as screening protocols and physical facilities to be used for symptomatic students and staff during the school day.
- Clarify the roles in COVID-19 screening and testing between the school nurse, health aides, other school staff, SBHC, and healthcare providers in the community. Consider with the school a decision tree about screening and testing symptomatic students or staff during the school day. Even if the SBHC does not screen or test symptomatic students or staff, it will be important that SBHC staff know where to direct them.
- Consider any new population-based role for SBHC staff, for example:
  - Orientation and ongoing training of students, families, staff on COVID-19 health and safety protocols
  - Student education around social-emotional health
  - School staff training:
    - Staff self-care & resiliency
    - Trauma-informed practices
    - Implicit-bias
- Review the timeframe for the school year and SBHC operations given the possibility of COVID-19-related school closures and extended school year. An attitude of flexibility will be key, as schools may need to quickly change instructional models or close the school short- or long-term due to COVID-19 concerns.
- Talk with school administration and staff about students’ class schedules and scheduling SBHC appointments so there is minimal impact to instructional time. Students have experienced significant disruption to their learning in 2020 as well as having increased health needs, so consider with the school how best to balance these needs during the school day.
Review expected SBHC services, staffing and operational hours, especially to address increased or different needs this year. For example:

- Will the SBHC provide services outside of the typical school year or school day, e.g. before school opens (summer 2020), or before or after school? If so, what needs to be considered regarding SBHC staff’s access to the building and services provided by the school (custodial, power, security, etc.)?
- Given SBHC facilities, funding and district policy, will the SBHC broaden the population they serve (e.g. students’ family members, school staff, or others) to meet community need?

Consider the impacts of all of the above and any needed changes to the lease, memorandum of understanding (MOU), and/or other agreements between the district and SBHC.

Communicate early and often with school administrators and the school nurse.

If the SBHC is co-located with the school nurse, coordinate:

- clear separation of spaces for screening/testing of symptomatic students and for students visiting the nurse or SBHC for other care
- traffic flow to comply with physical distancing requirements
- cleaning and disinfecting protocols and responsibilities for shared spaces

Clarify whether additional school health services will be provided by the school during school reopening, and the schedules of health services staff, especially in schools without a full-time school nurse.

Coordinate closely with the school nurse to support vaccine compliance and other back-to-school care, and to coordinate student referrals and care throughout the year.

In alignment with all relevant guidance, coordinate consistent messaging for staff, students and families around:

- Enhanced infection control measures and the safety of returning to school and accessing SBHC services.
- The school’s response and communication plan if a student or staff develops signs or tests positive for COVID-19.

Student and Family Outreach, Enrollment and Communication

Communicate proactively with district and school staff about what the SBHC can offer, how SBHC staff can help in school reopening planning and coordination, and how SBHC materials can be included in district and school communication to families.

Layer outreach for families, using all possible in-person and electronic means of communication:
Learn how the school is handling back-to-school packets this year and how you can include SBHC enrollment information.

Know the school’s calendar, student schedules and modalities for school reopening orientations and events.

Consider outreach options if school reopens with limited face-to-face orientations and instruction, including outreach through school and SBHC social media, school newsletters, PTSA communications, food distribution sites, community-based organizations, etc.

Ensure SBHC enrollment forms and communications are available in the languages spoken by students and families at the school, to the greatest extent possible. Connect with school staff and community-based organizations about reaching students’ families with SBHC materials in the language they understand best.

*Ready Schools, Safe Learners* guidance indicates that schools are to prioritize supports for students most impacted by the loss of in-person services. Find out how your school will be doing this and consider how the SBHC might leverage school efforts to reach these same students and their families.

Strengthen relationships and communication with:

- School nurses, counselors, social workers, psychologists, family support workers, instructional assistants for English learners and special education students, liaisons for students experiencing homelessness, and athletic coaches
- Community-based organizations serving students inside and outside of the school to ensure coordination and leverage of resources
- Student groups such as student health councils, culturally-specific student unions, and GSAs

Ensure your SBHC has a means of receiving consents electronically, for example:

- Full enrollment consent
- Student consent for confidential services
- Vaccination consent

For new and established clients, ensure current contact information for SBHC-enrolled students, including students’ direct contact information if they are receiving confidential services, to facilitate outreach and continuity of care in the event of hybrid instructional models or school closures.

**Addressing Student Needs**

Learn what your district and school are doing to advance racial equity and consider how the SBHC might contribute and improve its own practices:
Are there existing or new racial equity efforts in which SBHC staff can participate to listen, learn, outreach, and contribute?

Can the SBHC support school staff around culturally-responsive and trauma-informed practices?

Is the SBHC collecting and disaggregating client data based on race? Consider trends in SBHC use in relation to the population of the school. Consider how the SBHC might improve outreach, trust and meaningful access to SBHC services among students of color, recognizing the individual and cultural diversity among them.

Understand school discipline policies and any changes being implemented. Discuss with the district and school how the SBHC can support students and school staff around behavioral health, especially as schools reopen this year. Ready Schools, Safe Learners guidance highlights for our educators that:

“Inappropriate behavior is not always defiance—it is important communication. Following safety requirements will be challenging for many students. Adverse childhood experiences (ACEs), trauma, mental health, and fear can all drive behavioral concerns.”

Identify how the SBHC will stay informed of student needs as school re-opens and throughout the year.

Ready Schools, Safe Learners guidance indicates universal screening for social-emotional, academic, and family needs. Coordinate with the school how students will be referred for SBHC services if needs are flagged in universal screening.

Leverage an existing student health council or SBHC advisory committee if one exists, or consider creating one, to identify student health needs. Consider how to elevate caregivers’ voices, especially for younger students.

Enhance outreach to and surveys of students, caregivers, and school staff to keep current on changing needs throughout the year.

Consider enhanced screenings within the SBHC for:

- Anxiety and depression
- Substance use
- Social determinants of health (e.g. economic, food, and housing insecurity)
- Racial trauma

Share with the school how screenings are integrated into SBHC visits and consider how SBHC trend data might help the school plan for population-level interventions.

Consider how the SBHC will address areas of new, deferred, and increased student needs:

- COVID-19 concerns
- Well-child care, sports physicals & vaccinations
• Sexual and reproductive health care
• Oral health screenings and care
• Behavioral health care:
  □ Connect with the district or school’s team for multi-tiered systems of support (MTSS) to ensure the SBHC is understood as a resource for students’ behavioral health needs:
    • Enhanced population-based support of all students at Level 1
    • Referrals to SBHC for brief or more intensive interventions at Levels 2 & 3
  □ Review plans for students in crisis or who are suicidal.
  □ Identify SBHC staff needs and resources available for professional development around increased behavioral health needs, culturally-responsive and trauma-informed care, and racial trauma.
  □ If you are in a district or county where multiple healthcare sponsors are operating SBHCs, work to coordinate for consistency in SBHC services and operations.

Operations and Physical Space

□ Consider district and school planning around, for example:
  □ COVID-19 mitigation strategies for school staff, students and others in the building. Prepare SBHC staff to abide by, at a minimum, these schoolwide strategies.
  □ Access to the school building by families and visitors. Determine how this will affect access to the SBHC and pick-up of students by caregivers.
  □ The response and communication plan in the event of a positive case of COVID-19 in the school. Determine how this might affect the SBHC’s ability to stay open in its physical space.
  □ Within the school context and SBHC facility, consider how the OHA’s policies and protocols will be adapted in the following areas:
    □ Physical distancing and traffic flow:
      • How many students can access and wait in the SBHC at a time and still comply with physical distancing requirements? How might this affect scheduling and waiting for appointments?
      • Is there a way to direct entry and exit traffic to minimize contact between students in the SBHC?
    □ Signage at entry about access, screening upon arrival, physical distancing, hygiene
    □ Ventilation
- Infection control and cleaning, especially in shared spaces

- Personal protective equipment (PPE):
  - Appropriate medical-grade personal protective equipment should be made available to nurses, other health providers and SBHC staff
  - PPE requirements for students while in the clinic
  - Procurement of adequate PPE supplies
  - Staff education about use and conservation of PPE
  - Equipment cleaning, re-use or disposal

- Consider how to enroll/consent, schedule appointments, and use hybrid in-person and telehealth care models if schools are limited in face-to-face instruction and/or in the event of students’ quarantine or isolation due to COVID-19.

- Telehealth:
  - Evaluate the role of telehealth in your program. Explore maximal use of telehealth, for all types of visits when feasible.
  - Consider how the digital divide contributes to health and educational inequities through disparities in connectivity, access to devices, and digital literacy. Consider how the SBHC can minimize disparities in students’ access to health services this year through outreach, enrollment and scheduling strategies.
  - Capitalize on telehealth to engage families in student appointments.

- Anticipate absences among SBHC staff due to COVID-19 illness or concerns and the possibility of needing to quarantine the SBHC team. Consider staff leave policies and coverage in the event of absences.

- Ensure students and families know how to reach SBHC staff in the event of sudden school and/or SBHC closures. Ensure SBHC contact information is current wherever it is posted and that phone lines and emails are forwarded as needed to reach SBHC staff.

- Have ready to send home with students/families:
  - Fact sheet re: SBHC services and operations during reopening (Appendix B)
  - COVID-19 fact sheet
  - In-home COVID-19 test kits (if SBHC performing a testing role and kits available)

- If the SBHC is screening or testing symptomatic students or staff, clarify the protocols and dedicated space to be used for this and what mitigation strategies will be used to keep the SBHC safe and available for other health services.

- Identify space and isolation protocols for sick students and staff identified at the time of arrival or during the school day.
## Appendix A
### Summary Checklist of Considerations in SBHC-School District Coordination for 2020-2021 School Year

<table>
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<tr>
<th>Task</th>
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<tbody>
<tr>
<td><strong>Communication with Local Health Jurisdiction</strong></td>
</tr>
<tr>
<td>Identify contacts and establish communication with local public health authority and school nurses, and other medical experts (mental and behavioral health providers, dental providers, physical, occupational, speech, and respiratory therapists) who provided support and resources to the district re school reopening.</td>
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<tr>
<td><strong>SBHC Services during Reopening</strong></td>
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<tr>
<td>Identify SBHC services during reopening, including whether SBHC will screen / test those with symptoms for COVID-19. Ensure consistent communication about SBHC services during reopening.</td>
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<tr>
<td><strong>Coordination and Collaboration with School District and School</strong></td>
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<tr>
<td>Ask district to be included in district’s asset mapping and reopening stakeholder group.</td>
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<tr>
<td>Clarify health and safety protocols, physical facilities, and roles vis-à-vis COVID-19 within the school.</td>
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<td>Consider with the school a decision tree about screening and testing of symptomatic persons on campus.</td>
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<tr>
<td>Consider any new population-based role for SBHC, e.g. schoolwide education/training of students or staff.</td>
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<tr>
<td>Review timeframe for the school year and SBHC operations given possibility of school closures and extended school year.</td>
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<tr>
<td>Consider how to minimize disruptions to instructional time for SBHC appointments.</td>
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<tr>
<td>Review expected SBHC services, staffing and operational hours to address new and increased needs this year. Consider SBHC operations outside of typical school year or hours, any new populations served, and impacts on SBHC staff’s access to school building and services.</td>
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<tr>
<td>Consider any needed changes to lease, MOU or other agreements between district and SBHC.</td>
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<tr>
<td>Communicate early and often with school administrators and school nurse, e.g. re:</td>
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<tr>
<td>• coordination in physical space if SBHC and school nurse are co-located</td>
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<tr>
<td>• school health services staffing and schedules this year</td>
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<td>• vaccine compliance, student referrals, and care coordination</td>
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<td>Coordinate messaging around safety of returning to school and of accessing SBHC services.</td>
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<tr>
<td>Clarify school’s response and communication plan in the event of a COVID-19 case in the school.</td>
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<tr>
<td><strong>Student and Family Outreach, Enrollment, Communication</strong></td>
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</tbody>
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**Communicate proactively with district and school staff re what SBHC can offer during school reopening and how SBHC can be included in communication to families.**

Layer outreach for families. Learn school calendar and modalities for back-to-school orientations, events, and back-to-school packets this year. Consider outreach options if school limited in face-to-face orientations or instruction.

Ensure translation of SBHC materials into languages spoken by students’ families to extent possible and outreach to families in the languages they understand best.

Leverage school efforts to reach students and families most impacted by loss of in-person services.

Strengthen communication with:
- school nurse, counselors, social worker, psychologist, family support workers, etc.
- community-based organizations serving students in and outside of school
- students groups including student health councils, student unions, GSAs

Ensure SBHC ability to receive electronic consents for care.

Ensure current contact information for new and established SBHC clients to ensure continuity of care in the case of hybrid instructional models or if school needs to close.

### Addressing Student Needs

Leverage and contribute to district and school efforts to advance racial justice. Disaggregate SBHC data based on race and work to improve meaningful access to SBHC services among students of color.

Understand school discipline practices and consider with school how SBHC can support students & school staff in behavioral health especially this year.

Identify how SBHC will learn and stay informed of student health needs, e.g. through universal screening, student health council, SBHC advisory committee, enhanced outreach and/or surveys.

Enhance SBHC screenings for anxiety and depression, substance use, social determinants of health and racial trauma. Consider how trend data might inform school’s population-based strategies.

Assess SBHC readiness to address new, deferred or increased student health needs. Re behavioral health:
- Connect with district/school MTSS team
- Review plans for students in crisis or who are suicidal
- Provide SBHC professional development and staff support re culturally-responsive and trauma-informed practices and racial trauma

If in a district or county with multiple SBHCs, coordinate for consistency

### Operations and Physical Space

Consider impacts on SBHC access and operations of district/school planning around:
- COVID-19 mitigation strategies
- Access to building by families and visitors
- School’s response and communication plan

Consider how LPHA policies / protocols will be adapted to the school context and SBHC:
- Physical distancing and traffic flow
- Signage at entry
| • Ventilation  
| • Infection control and cleaning  
| • PPE  
| • Equipment cleaning, re-use or disposal |

Consider how to enroll/consent, schedule appts and use hybrid models of care if school limited in face-to-face instruction.

**Telehealth:**
• Evaluate role of telehealth esp. in the event of hybrid models of instruction or school closure.
• Consider how to enroll and serve students to minimize inequities in access to telehealth.
• Capitalize on telehealth to engage families in student appointments.

Anticipate staff absences due to COVID-19. Review staff leave policies & substitute staffing.

Ensure students and families know how to reach SBHC in event of sudden school or SBHC closure. Keep posted contact info current, and ensure phone and email forwarding as needed.

Have ready to send home with students/families:
1) fact sheet re SBHC services and operations during reopening,
2) fact sheet re COVID-19,
3) in-home COVID-19 test kit if available and within SBHC role

If screening and/or testing symptomatic students or staff for COVID-19, clarify physical space and protocols for this as well as mitigation strategies to keep SBHC open and safe for other services.
Appendix B
SBHC Fact Sheet EXAMPLE

The School-Based Health Center is OPEN
During School Reopening 2020-2021

The School-Based Health Center welcomes students, their families and school staff back to school!
Here are some frequently-asked questions about SBHC services this year in light of the impacts of the COVID-19 pandemic:

What services will the SBHC be providing in 2020-2021, and how?
The school-based health center will be providing the following services to the fullest extent possible in person. We are also able to provide many services to students through telehealth if the school is operating with a rotating schedule or online only. Please contact us directly with specific questions about our services.

- preventive well-child care & sports physicals
- immunizations
- chronic care
- acute care
- sexual and reproductive health services
- mental and behavioral health counseling
- substance abuse counseling
- nutritional counseling
- oral health screening and dental care

When are you open?
We will be open starting on [XX] and our days and hours of operation are generally [XX]. Note that SBHC hours this year may depend on the school’s model of instruction and any necessary changes throughout the year due to COVID-19. Again, we are able to provide many services to students through telehealth if the school is operating with a rotating schedule or online only. We are staying flexible to serve students and the school community to the fullest extent possible, and we will keep posted hours and contact information current as any changes occur.

Is it safe to visit the SBHC? What can my student expect when they come to the SBHC this year?
The SBHC is following all school district, public health and LPHA health and safety requirements and best practices to keep the SBHC as safe as possible for all visits. This includes COVID-19 symptom and exposure screening for everyone who enters the SBHC, physical distancing, face coverings, hygiene practices, and cleaning and disinfecting. Students arriving at the SBHC will follow practices that will largely mirror those of the school. We will guide your student through the SBHC’s specific and youth-friendly practices when they arrive for a SBHC visit.

Is the SBHC able to provide services to school staff, students’ family members, and/or others this year?
[Yes / No / who can be served / during what hours]

Is the SBHC doing COVID-19 screening and testing of students or others who become ill while at school?
[The SBHC is / is not screening / testing symptomatic students / others at school. Clarify school and SBHC roles in screening and testing of symptomatic persons on campus.]

How do I enroll?
To enroll in the SBHC or for more information, please contact:
[Name]
[Phone] / [Email]

For online enrollment, you can find our enrollment packet and consent forms here: [link]
Resources / References

OREGON STATE

Oregon Department of Education
Ready Schools, Safe Learners Guidance for School Year 2020-21

Multi-Tiered Systems of Support

Oregon Health Authority

Statewide Reopening Guidance – K-12 School Sports, Limited Return to Play

Oregon Health Authority | COVID-19 Updates

COVID-19 and Oregon OSHA / COVID-19 y Oregon OSHA

NATIONAL

Centers For Disease Control & Prevention (CDC)

Considerations for Schools

Symptoms of COVID-19

OTHER

Kaiser Permanente Thriving Schools Playbook for School Reopening

Please note that clarifications, links, tools and resources may be added to this guidance in the coming months. Please check back for the latest version.