

**SBHC Summary**  
**April 2, 2007**

This document summarizes the goals and projections of the SBHC, based upon the original *Sayre School-Based School and Community Health Promotion and Disease Prevention Center Project Description (2004)*.

**Mission of the SBHC**

The Sayre SBHC is a School-Based Federally Qualified Health Center located in the William L. Sayre School in West Philadelphia. The goal of the Sayre Health Center is to provide health promotion, disease prevention, and primary care services to Sayre School students and residents of the community, which are sensitive to patients' needs and designed to inspire trust and engagement and are accessible to the most vulnerable and underserved members of the service area. The Sayre SBHC will address the important local barriers to health care, barriers that are shared by many inner-city urban environments: **1)** a lack of culturally and linguistically sensitive services that give targeted populations reason to trust the service provider, **2)** a lack of access to services and knowledge of how to access services, and **3)** a lack of health literacy and health education.

The Sayre SBHC attempts to change the relationship between academic health centers and the surrounding communities. A recent Rand study (May 2004) found no connection between communities being near academic health centers or major hospitals and improved health status of community members. Historically, Penn, like other universities, academic health centers and hospitals, has not reached out to the poor communities surrounding it. At Penn, this has changed dramatically over the last ten years. Penn's partners in the Sayre SBHC are national leaders of that changing culture.

The SBHC mission statement, which has been approved by the Board of Directors, is: *To provide high quality, culturally-sensitive, accessible school-based primary and preventive health care services to the under-served community surrounding the William L. Sayre School of the School District of Philadelphia; and Provide health services education for both Sayre students and University of Pennsylvania students, through participation in the provision of health care services.*

**Targeted Community and Projected Services**

The Sayre SBHC will serve a population that lives in a socio-economically distressed inner-city area of Philadelphia surrounding the William L. Sayre High School. The area to be served is adjacent to the University of Pennsylvania (Penn), however, despite the proximity of Penn's Health System, the area is designated both as Medically Underserved Areas (# 02921-23 PC, 04060 PC) and as a Primary Care Health Professions Shortage Area (#142999423101). The target population to be served by the Sayre SBHC consists of ***low-income school children/adolescents and their families***. We will focus not only on the students attending the Sayre School and its feeder elementary and middle schools,

but also their families and other residents of the school's catchment area in the West/Southwest areas of Philadelphia.

The Sayre SBHC will be open for 40 hours per week, including at least 30 hours of clinic time, held both during the school day and into the evening, with the non-clinical time being dedicated to health education activities in the school and the community. The SBHC expects to serve 2100 patients per year and have 5250 encounters once it is at full capacity in two years.

Comprehensive services will be provided and/or arranged for all patients of the Sayre SBHC, for all ages. In addition to all required primary and preventive services, the SBHC will provide emergency medical services; diagnostic testing and screening internally and by referral; immunization services; gynecological, pre-natal, and obstetric services; family planning; well-child services; hearing, vision, and dental screening; preventive and other dental services; cancer and other disease and risk screening; and pharmacy services; as well as nutrition education and translation services. In addition, outreach services; eligibility assistance; case management, including referral and follow up for medical and social services and tracking of hospitalized patients, will be provided, as will transportation assistance for patients who have such needs. Agreements will be in place to facilitate referrals for dental services and behavioral health and substance abuse services.

### **Health Care Plan**

The provision of services according to the Health Care Plan will be monitored on a regular basis through the Continuous Quality Improvement process and the results will be shared with the Board of Directors. The goals of the Health Care Plan are as follows:

- Increase student and community access to quality, culturally sensitive health care focused on health education.
- Increase the number of adolescents receiving primary health care.
- Provide early and intensive prenatal care and case management to improve pregnancy outcomes and infant health.
- Provide health maintenance, prevention/risk assessment care to men and women.
- Provide quality care and case management services to older adults.
- Reduce health disparities and improve outcomes for people with chronic illness, including diabetes, cardiovascular disease, and asthma.

### **Facilities and Staff**

The Sayre SBHC will have an Executive Director, a Medical Assistant, and after the first year a half time receptionist and half time Accountant. A contract will provide 1.2 FTE physicians and dental time. For additional information regarding the role of the Executive Director and the administrative structure of the SBHC, please see attached documents titled *Organizational Chart* and *FQHC Executive Director*.

The facility will be located in space allotted and supported by the Sayre School. In the first year, there will be four exam rooms, one procedure room/lab space, office space, and a reception/waiting area, expanding to five exam rooms and additional office and session space in the 2<sup>nd</sup> year.

### **Presenting a New Model for Healthcare**

The SBHC proposes a new model for health services and education. The model includes the following principal elements.

Cultural Sensitivity – The services provided by the SBHC will be sensitive to the cultures and needs of the community. The staff of the Health Center will comprise (or “mirror”) as closely as possible the ethnic make-up of the community. All staff, regardless of ethnicity, will receive cultural diversity training that focuses on the ways that different cultures view and use medical services. When people with limited English-speaking ability come to the SBHC, if the provider is not skilled in their language, translation services will be retained to assure that they receive the best services possible. Patients’ opinions of services will be sought regularly and the results of these surveys will be brought to the Board of Directors to use in ongoing planning. Finally, the youth of the Penn students involved in the services will help to make the Sayre SBHC attractive to Sayre students and the involvement of these Sayre students will be attractive to their peers, their families, their extended families, and community members. The Sayre SBHC will not be a cold place with unfamiliar, unwelcoming providers.

Accessibility – An important aspect of the Sayre SBHC will be its accessibility, including its location within the school. The school will provide as in-kind support, the equivalent of two large classrooms of space, accessible from both the school and after hours from a separate street entrance. For adolescents, the fact that the Health Center is located within their everyday familiar environment is felt by school administrators, as well as the administrators at the other area FQHCs, to be crucial to the ability to serve them adequately, as they generally will not travel outside of their familiar surroundings for care. For families, services near their homes will also be important to their ability and willingness to use the services. The hours of care will be carefully planned, after discussion with the school and a survey of area residents. The current plan is that the center will be open for clinic services at least 30 hours per week, with hours during the school day and at least two days a week in the evening until 8pm. Finally, services will be provided to students, families, and community residents without regard to their ability to pay. SBHC staff will assist patients to register for all health insurance coverage to which they are entitled, but they will not be turned away if they are not covered. An important aspect of accessibility is providing a comprehensive scope of services, which are detailed below.

Health Education – The Sayre SBHC will focus on health education and health literacy. SBHC services will build on and complement the current health promotion and disease prevention services being offered. Workshops will be held in the School and in other community venues on nutrition, childbirth, infant and child health, self-empowerment and care, immunizations, sexually transmitted diseases, oral health, environmental health

issues such as lead and tobacco smoke, and treatment of chronic illnesses such as diabetes and asthma. There will also be programming on topics such as parenting, child abuse, raising children with ADHD and other conditions, and adolescent decision-making and peer relations.

A key to the model being proposed is service-based learning. The students from Sayre and the various Penn Schools who will be working in the SBHC and in associated school day and after school programs bring passion and excitement to their work. They are learning their professions by doing and teaching and learning to address real-world local needs in appropriate and engaging cultural contexts. They are also doing one of the most important things to improve community health status: they are working to improve the community's health environment. Their ongoing distribution of information about services and information about healthy decision-making strategies is helping to raise awareness and change social norms around major health issues, which in turn helps improve individual health behaviors. This must happen because resources are not clinically available to treat all individuals in succession to avoid disease.

Finally, Sayre and Penn students will learn by helping to evaluate and prioritize SBHC programming. They are most likely to get accurate information from peers and neighborhood residents, and to come up with creative solutions to complex problems. Sayre will create a Student Advisory Council specifically for the SBHC.