



**School-Based Health Center Program (SBHC) – Request for Application (RFA) #1972**  
**Attachment K: Revised SBHC Program Quality Standards Checklist**

The SBHC Program Quality Standards were revised to meet the changing needs and capabilities of SBHC sites in Colorado. Every SBHC site funded by Colorado Department of Public Health and Environment (CDPHE) is now required to meet all revised Standards as stated herein beginning July 1, 2016.

**Instructions:**

- Complete a **single** SBHC Quality Standards Checklist for **all SBHC sites** for which funding is requested.
- Review the revised Standards, and check either "Yes" or "No" signifying if the SBHC site(s) currently complies with the entire Standard as fully stated.
- For multi-site applicants, if any one site does not meet the Standards, then that Standard must be marked "No" (meaning it is currently unmet).
- For Standards marked "No," please describe how the site(s) plans on meeting the Standard criteria under the box labeled "No, provide an explanation ...". If site(s) is funded by CDPHE with an unmet standard, they will be limited to a 90-day compliance period. Failure to comply with Quality Standards may result in the rescinding of funds.
- Do NOT use the "Submit" button on the top right-hand corner. Instead, save this PDF form and include it with all other application materials as one RFA email submission.

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| <b>Name of Lead Sponsoring Agency:</b> |  |
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**I. CDPHE Core Requirements:**

The General Assembly's intent in supporting school-based health centers is to make primary, behavioral and oral health care as well as other health related services easily accessible so students stay in school and are more readily available for instruction [C.R.S. § 25-20.5-501(b)].

**Administration**

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| <p><b>I.A</b> Conduct a comprehensive student health needs assessment prior to opening a school-based health center and at least every three years thereafter, including a description of student demographic makeup; insurance status; perceptions of health needs by students, parents, faculty, community members and provider agencies; local resources and barriers to care; and a historical analysis of services provided for those school-based health centers already in operation.</p> | <input type="checkbox"/> Yes<br><br><input type="checkbox"/> No |
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*If you answered "No" to the statement above, (1) provide the name of the site that does not meet the Standard; and (2) provide an explanation of how the Standard will be met by July 1, 2016.*

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| <p><b>I.B (1)</b> Create a business plan, prior to opening a center, including a financial and sustainability strategy; <b>(2)</b> Align and update a strategic plan, with lead agency or medical sponsor, including short-term and long-term objectives and measures, and an annual budget defining all funding sources and uses, including in-kind support and insurance payer sources; and <b>(3)</b> Utilize an appropriate accounting system to collect financial data and report revenues and expenses by budget line items.</p> | <input type="checkbox"/> Yes<br><br><input type="checkbox"/> No |
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*If you answered "No" to the statement above, (1) provide the name of the site that does not meet the Standard; and (2) provide an explanation of how the Standard will be met by July 1, 2016.*

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| <p><b>I.C (1)</b> Provide services to low-income, students and youth through 21 years of age who are uninsured, underinsured and may qualify for USDA free or reduced-cost lunch with primary, behavioral and oral health services and to assist with public and private health plan enrollment [C.R.S. § 25-20.5-503(2)]; <b>(2)</b> Administer a standardized survey of patient service satisfaction at least every 24 months.</p> | <input type="checkbox"/> Yes<br><br><input type="checkbox"/> No |
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*If you answered "No" to the statement above, (1) provide the name of the site that does not meet the Standard; and (2) provide an explanation of how the Standard will be met by July 1, 2016.*

**I.D (1)** Provide access to services for all students attending the SBHC host school, regardless of their race, color, ethnicity, national origin, religion, immigration status, sexual orientation, disability, gender, or insurance status. **(2)** Extend eligibility to other children and youth in the community and/or students attending other schools, if appropriate and feasible.

Yes  
 No

*If you answered "No" to the statement above, (1) provide the name of the site that does not meet the Standard; and (2) provide an explanation of how the Standard will be met by July 1, 2016.*

**I.E** Provide written information to parents/guardians and youth, including but not limited to: the scope of services offered; SBHC's capacity to serve as a primary care provider or to collaborate with primary care providers; hours of operation and staff availability; 24-hour/seven-days-per-week access to services particularly when the center is closed; and procedure for grievances.

Yes  
 No

*If you answered "No" to the statement above, (1) provide the name of the site that does not meet the Standard; and (2) provide an explanation of how the Standard will be met by July 1, 2016.*

**I.F** Provide meaningful and relevant, direct involvement of youth and parents in determining the health needs, priorities, services and best methods of service provision for patients at the SBHC.

Yes  
 No

*If you answered "No" to the statement above, (1) provide the name of the site that does not meet the Standard; and (2) provide an explanation of how the Standard will be met by July 1, 2016.*

**I.G (1)** Have a written policy outlining patient enrollment, including collection of all CDPHE-required patient data elements, demographics, parent/guardian contact, third-party billing source, and primary care provider information; and **(2)** a written policy on consent for treatment within the scope of the state law.

Yes  
 No

*If you answered "No" to the statement above, (1) provide the name of the site that does not meet the Standard; and (2) provide an explanation of how the Standard will be met by July 1, 2016.*

**I.H** Have a written policy addressing the exchange of information between the school-based health center and school/school district health personnel in accordance with the Health Insurance Portability and Accountability Act (HIPAA) and the Family Education Rights and Privacy Act (FERPA).

Yes  
 No

*If you answered "No" to the statement above, (1) provide the name of the site that does not meet the Standard; and (2) provide an explanation of how the Standard will be met by July 1, 2016.*



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| <p><b>I.I</b> Have written policies that outline processes to (1) Record, charge, bill and collect for services rendered; (2) Establish a fee scale for school-based health center users, regardless of their ability to pay in compliance with Medicaid; (3) Ensure patient confidentiality for services billed; and (4) Provide for direct or referral assistance for families and students eligible for enrollment in Medicaid, the Child Health Plan Plus (CHP+) and other health insurance coverage.</p>   | <input type="checkbox"/> Yes<br><br><input type="checkbox"/> No |
| <p><i>If you answered "No" to the statement above, (1) provide the name of the site that does not meet the Standard; and (2) provide an explanation of how the Standard will be met by July 1, 2016.</i></p>  |   |
| <p><b>Personnel</b></p>   |   |
| <p><b>I.J</b> Provide an organizational chart for each school-based center in operation, including clear lines of authority and supervision for SBHC personnel, employed and contracted, including through Memorandum of Understandings (MOUs).</p>   | <input type="checkbox"/> Yes<br><br><input type="checkbox"/> No |
| <p><i>If you answered "No" to the statement above, (1) provide the name of the site that does not meet the Standard; and (2) provide an explanation of how the Standard will be met by July 1, 2016.</i></p>  |   |
| <p><b>I.K</b> (1) Ensure the required minimum personnel for each school-based health center, including on-site support staff, on-site primary care provider, on-site behavioral health provider, and a designated health care provider available to address clinical issues; and (2) Ensure providers are trained in serving youth, and are licensed and/or supervised in accordance with discipline-specific requirements published by the Colorado Department of Regulatory Agencies.</p>   | <input type="checkbox"/> Yes<br><br><input type="checkbox"/> No |
| <p><i>If you answered "No" to the statement above, (1) provide the name of the site that does not meet the Standard; and (2) provide an explanation of how the Standard will be met by July 1, 2016.</i></p>  |   |
| <p><b>I.L</b> Designate: (1) An administrator responsible for the overall budget and program management including all school-based health center personnel and contractors, quality of care, and coordination with school/school district, sponsoring agency and other partnering agencies. Management duties must be specified in the position's job description; (2) A coordinator for each school-based health center site with specified job duties in the position's job description. The designated coordinator and the designated administrator may be the same person, who may also be the on-site primary care provider.</p> | <input type="checkbox"/> Yes<br><br><input type="checkbox"/> No |
| <p><i>If you answered "No" to the statement above, (1) provide the name of the site that does not meet the Standard; and (2) provide an explanation of how the Standard will be met by July 1, 2016.</i></p>  |   |
| <p><b>I.M</b> (1) Designate a quality improvement coordinator to monitor clinical services and evaluate program goals. (2) The quality improvement coordinator must (a) develop a plan for improvement including addressing issues raised from the patient satisfaction standardized survey (see I.C); (b) create a written record of progress toward improving selected measures; and (c) monitor and report program performance measures.</p>   | <input type="checkbox"/> Yes<br><br><input type="checkbox"/> No |
| <p><i>If you answered "No" to the statement above, (1) provide the name of the site that does not meet the Standard; and (2) provide an explanation of how the Standard will be met by July 1, 2016.</i></p>  |   |



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| <p><b>I.N</b> Ensure all personnel, including contracted staff, have a (1) documented criminal background check as a condition of employment, including existing staff; (2) current written job description; (3) annual written performance evaluations; (4) documentation of completed training and continuing education/professional development by discipline-specific licensing requirements, for all clinical providers including contractors; and (5) training in mandated reporting requirements.</p>   | <input type="checkbox"/> Yes<br><input type="checkbox"/> No |
| <p><i>If you answered "No" to the statement above, (1) provide the name of the site that does not meet the Standard; and (2) provide an explanation of how the Standard will be met by July 1, 2016.</i></p>   |   |
| <p><b>I.O</b> Have a written policy specifying personnel responsibilities in the event of a school emergency or disaster.</p>  | <input type="checkbox"/> Yes<br><input type="checkbox"/> No |
| <p><i>If you answered "No" to the statement above, (1) provide the name of the site that does not meet the Standard; and (2) provide an explanation of how the Standard will be met by July 1, 2016.</i></p>   |   |
| <p><b>Operations</b></p>   |   |
| <p><b>I.P</b> For centers located within a public school building, dedicated space must be occupied and used exclusively for the purpose of providing school-based health center services. Give consideration to co-locating with school health personnel, such as the school nurse.</p>   | <input type="checkbox"/> Yes<br><input type="checkbox"/> No |
| <p><i>If you answered "No" to the statement above, (1) provide the name of the site that does not meet the Standard; and (2) provide an explanation of how the Standard will be met by July 1, 2016.</i></p>   |   |
| <p><b>I.Q</b> (1) For centers on public school property but not located in a school building, dedicated space must be occupied and used exclusively for the purpose of school-based health center services and all SBHC Standards apply. (2) There must be clear evidence that the off-site location facilitates student access to health care and student availability for classroom instruction. (3) Potential access barriers, including proximity, safety, transportation and hours of operation, must be resolved in collaboration with the school(s) served.</p> | <input type="checkbox"/> Yes<br><input type="checkbox"/> No |
| <p><i>If you answered "No" to the statement above, (1) provide the name of the site that does not meet the Standard; and (2) provide an explanation of how the Standard will be met by July 1, 2016.</i></p>   |   |
| <p><b>I.R</b> Meet facility requirements for (1) Americans with Disabilities Act for accommodation of individuals with disabilities; (2) local building codes (including lights, exit signs, ventilation, etc.); (3) Occupational Safety and Health Administration regulations.</p>  | <input type="checkbox"/> Yes<br><input type="checkbox"/> No |
| <p><i>If you answered "No" to the statement above, (1) provide the name of the site that does not meet the Standard; and (2) provide an explanation of how the Standard will be met by July 1, 2016.</i></p>   |   |



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| <p><b>I.S (1)</b> Ensure functional spaces are designed to facilitate privacy and confidentiality; safety; protected and secure storage of records, supplies and medications; <b>(2)</b> Meet the following functional aspects, although some rooms/areas may serve more than one purpose in delivering school-based health services: a designated waiting/reception room or area; one exam room; one accessible sink with hot and cold water; a private counseling room/area; a designated lab space with separate clean and dirty areas; office/clerical areas; secure storage area for supplies (e.g. medications, lab supplies); a secure storage area for confidential records; an accessible toilet facility with a sink and hot and cold water; a phone line exclusively dedicated to the center; connection to the school's central office communication system; and internet connection. <b>(3)</b> Follow best practice, although not required, for structural elements including a dedicated entrance that permits services before and after school hours; walls extend from floor to ceiling; and available parking.</p> | <input type="checkbox"/> Yes<br><br><input type="checkbox"/> No |
| <p><i>If you answered "No" to the statement above, (1)provide the name of the site that does not meet the Standard; and (2) provide an explanation of how the Standard will be met by July 1, 2016.</i></p>  |   |
| <p><b>I.T</b> Meet the following equipment and supplies requirements: <b>(1)</b> Obtain and maintain adequate, appropriate and functional equipment and supplies necessary to provide all services; <b>(2)</b> Inspect monthly and replace or replenish (as needed) equipment (including emergency medical equipment) to ensure good working order, and maintenance and calibration as recommended by the manufacturer; <b>(3)</b> Follow monthly procedures for inspecting medications and supplies to properly discard and adequately replace outdated materials; and <b>(4)</b> If vaccines are stored onsite, ensure SBHC is compliant with the Vaccines for Children Program.</p>   | <input type="checkbox"/> Yes<br><br><input type="checkbox"/> No |
| <p><i>If you answered "No" to the statement above, (1)provide the name of the site that does not meet the Standard; and (2) provide an explanation of how the Standard will be met by July 1, 2016.</i></p>  |   |
| <p><b>I.U</b> Meet the following health record(s) requirements: signed consent form; personal information; individual and family medical history; problem list; medication list; immunization record; screening and diagnostic tests, including laboratory findings; health and behavioral health progress notes or encounter forms; treatment plan; referral system.</p>  | <input type="checkbox"/> Yes<br><br><input type="checkbox"/> No |
| <p><i>If you answered "No" to the statement above, (1)provide the name of the site that does not meet the Standard; and (2) provide an explanation of how the Standard will be met by July 1, 2016.</i></p>  |   |

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**II. CDPHE Sponsorship Requirements:**

School-based health centers are operated by school districts in cooperation with hospitals, public or private health care organizations, licensed medical providers, public health nurses, community health centers, and community mental health centers. The term "school-based health center" includes clinics or facilities authorized to provide clinic services pursuant to section 26-4-513, C.R.S., or authorized to apply for and receive medical assistance payments under a contract entered into pursuant to section 26-4-531, C.R.S. [C.R.S. § 25-20.5-502].

**II.A (1)** More than one agency may sponsor a school-based health center, but only one sponsor may serve as the lead sponsor agency. **(2)** Eligible entities include school districts, charter schools, and state sanctioned GED programs; local public health agencies; community health centers; rural health centers; hospitals; private medical practices; nurse practitioner practices; university medical centers; managed care organizations; independent nonprofit medical practices.

Yes  
 No

*If you answered "No" to the statement above, (1) provide the name of the site that does not meet the Standard; and (2) provide an explanation of how the Standard will be met by July 1, 2016.*

**II.B** Lead sponsoring agency must **(1)** provide funding and staffing; **(2)** support mechanisms to coordinate school-based health center and school health services; **(3)** maintain current, written agreements with organizations providing services in the school-based health center, including the medical sponsor; **(4)** create specific written policies, responsibilities, and processes for conflict resolution within interagency agreements; and **(5)** secure superintendent and school principal support for the school-based health center.

Yes  
 No

*If you answered "No" to the statement above, (1) provide the name of the site that does not meet the Standard; and (2) provide an explanation of how the Standard will be met by July 1, 2016.*

**II.C (1)** Lead sponsoring agency must have a community advisory council that meets a minimum of two times a year, to plan, implement, review and advise on the needs of children and youth to be served, and to provide input about governance, management, services, and funding. **(2)** The advisory council must collaborate with the local school district; involve youth through membership, a youth advisory sub-committee and/or another formal method of youth involvement and input; and involve key community stakeholders, including parents/guardians, school administration, school and community health providers, specialty care providers, public health organizations, and insurers as appropriate.

Yes  
 No

*If you answered "No" to the statement above, (1) provide the name of the site that does not meet the Standard; and (2) provide an explanation of how the Standard will be met by July 1, 2016.*

**II.D (1)** More than one agency may offer health care services in the school-based health center, but only one may serve as the lead medical sponsor. **(2)** Eligible entities include local public health agencies; community or rural health centers; hospitals; private, nurse practitioner, or independent nonprofit medical practices; university medical centers; managed care organizations; and community mental health centers that include primary care practice.

Yes  
 No

*If you answered "No" to the statement above, (1) provide the name of the site that does not meet the Standard; and (2) provide an explanation of how the Standard will be met by July 1, 2016.*



**II.E** Lead medical sponsor must ensure (1) clinical oversight including a designated health care provider overseeing healthcare services; (2) written clinical policies and procedures; (3) written policy for credentialing and re-credentialing of all clinical providers, as per the medical sponsor's policies; (4) written policy requiring all clinical providers to hold current basic life support for healthcare providers certification. (5) provision of a primary care provider; (6) 24-hour, seven days a week coverage; (7) evidence of adequate medical liability and malpractice coverage; (8) maintenance of proper ownership of medical records, including the proper storage and security of electronic service data, use of a Office of the National Coordinator for Health Information Technology (ONC) certified electronic health record (EHR) or a certified electronic medical record (EMR); and (9) a Certificate of Waiver for waived laboratory tests, per the Clinical Laboratory Improvement Amendments.

Yes  
 No

*If you answered "No" to the statement above, (1) provide the name of the site that does not meet the Standard; and (2) provide an explanation of how the Standard will be met by July 1, 2016.*

**\*\* End of Attachment K \*\***