SBHC READINESS CHECKLIST

Certification Checklist

- ☐ Date of site visit confirmed with sponsoring agency/SBHC
- ☐ Update Operational Profile
- ☐ Submitted waiver, if necessary
- ☐ Reviewed Readiness Checklist (below)

General Areas of Review		
Areas of Review	**Cert. Std. Section**	**Notes**
The SBHC administrator attests that the appropriate SBHC staff read and are familiar with the Standards of Certification	A.— G.	
The SBHC administrator attests that the appropriate SBHC staff read and are familiar with the required policies and procedures in the Standards of Certification	C.3a-b	
The SBHC administrator attests that the appropriate SBHC staff will enroll and receive necessary training for Medicaid after becoming certified	G.1a –b	
The SBHC administrator attests that the appropriate SBHC staff has enrolled and /or received necessary training for the Vaccines for Children (VFC) program	C.4h	

General Areas of Review (continued)

Areas of Review	Cert. Std. Section	Notes
The SBHC administrator attests that the appropriate SBHC staff has enrolled and /or received necessary training for HIPPA compliance	C.3a	
The SBHC administrator attests that the appropriate SBHC staff has enrolled and /or received necessary training for mandatory reporting for child abuse	C.3a	
Evidence of quarterly (at a minimum) involvement by medical director (development of clinical policies/ procedures, chart reviews, and clinical oversight)	B.2.a	
SBHC meets the definition of a SBHC; permanent space located on or in a school campus	B.3.a	
SBHC verifies it meets building standards, including but not limited to wheelchair accessibility	B.3 b—c	

General Areas of Review (continued)

Areas of Review	Cert. Std. Section	Notes
No safety hazards observed	B.3b-e	
Student Rights and Responsibilities is posted in plain view	C.3.a	
Facility meets space requirements	B.3.d	
Waiting room/reception area	B.3.d	
Exam room (s) with sink	B.3.d	
Laboratory space (defined, clean/dirty areas, CLIA license posted)	B.3.d and D.1.a	
Secure storage (meds, labs, records)	B.3.d	
Facility promotes confidentiality (soundproof, area for private exams/phone calls, doors, reception/waiting area)	B.3.d-e	

Staffing/Hours		
Areas of review	**Cert. Std Section**	**Notes**
SBHC is open minimum 15 hours per week	C.1.a	
Information on how to access care outside of clinic hours posted in a clearly visible space outside of SBHC and available on telephone answering system or voicemail system accessible 24 hours a day on a direct line	C.1.c	
Staffing minimum requirements to include support staff and Primary care provider (M.D., D.O., N.P., N.D., P.A.)	C.4.a	
A qualified mental health professional is available either onsite or through referral	C.4b	
SBHC has a designated SBHC site coordinator	C.4.c	
SBHC has a designated medical director	C.4.d	
SBHC has a designated immunization coordinator	C.4.h	

Operations/Policies & Procedures		
Policies/Procedures to review	**Cert. Std. Section**	**Notes**
Consent for SBHC services (parent and/or client)	C.2	
Release of school-aged youth information and/or access to medical records to parents when requested by parents	C.3a	
Method of transmitting billing and other fiscal information to agencies, including the handling of explanation of benefits (EOB) for confidential patient visits	C.3.a	
Emergency procedures (these should be coordinated with the school – fire/school violence/lock-down, etc)	C.3.a	
Mandatory reporting of child abuse	C.3.a	

Operations/Policies & Procedures (continued)		
Policies/Procedures to review	**Cert. Std. Section**	**Notes**
Complaint and incident review	C.3.a	
Parental involvement	C.3.a	
Information sharing between school nurse and SBHC staff	C.3.a	
Written policies and procedures shall be reviewed and updated every two years at a minimum	C.3.b	
The review shall be documented in writing and include updated signatures on each individual policy/procedure. (Signatures include printed name for legibility)	C.3.b	
Policies and procedures that have been attested to (HIPAA, non-discrimination, etc.) are available for review upon request	C.3a	

Laboratory		
Areas of Review	**Cert. Std. Section**	**Notes**
Current CLIA license/waiver must be posted in lab	D.2a	
SBHC must have written protocol defining procedures ensuring timely review of lab results, documentation and follow up of abnormal labs.	D.3a	
SBHC must have a written policy in place ensuring confidential handling of lab results	D.3b	
SBHC has policies/procedures for each of the laboratory tests provided on site, and a policy/procedure for follow up of labs performed off site	D.4a-b	

Comprehensive Services		
Areas of review	**Cert. Std. Section**	**Notes**
SBHC must provide comprehensive services either on site or by referral as indicated in Standards for Certification including:		
A) Laboratory	D.5a, A	
B) Primary Care	E.1a, B	
C) Screening	E.1a, C	
D) Dental	E.1a, D	
E) Pharmacy (prescriptive services)	E.1a, E	
F) Preventive Health Services	E.1a, F	
G) Mental Health Services	E.1a, G	
H) Social Services	E.1a, H	
I) Marketing and Outreach Activities	E.1a, I	

Data		
Areas of review	**Cert. Std. Section**	**Notes**
SBHCs must meet all electronic data collection requirements and agree to collect and export required variables to the State Project Officer	F.1 – F.2	
SBHC attests to submit a report of activities to the State Health Officer. Initially due 6 and 12 months after certification. Future report deadlines to be determined	F.3	

Billing		
Areas of review	**Cert. Std. Section**	**Notes**
SBHC attests to apply for Medicaid after receiving Certificate of SBHC Certification	G.1a	
SBHC attests their medical providers are eligible for reimbursement from Medicaid	C.4g	

Most Common Deficiencies

- A lack of signage directing students and visitors to SBHC location
- Missing exit and emergency exit signage
- Missing policies and procedures
- Missing signatures on policies and procedures
- Outdated policies and procedures
- Lack of evidence of medical director involvement
- Unlocked medication cabinets