

2011

## **MAINE SCHOOL-BASED HEALTH CENTER FOUR YEAR TREND REPORT**

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*School-Based Health Center Activity Covering  
2007/08 through 2010/11  
School Years*

**MAINE SCHOOL-BASED HEALTH CENTER FOUR-YEAR TREND REPORT**

**Issued by the Maine Centers for Disease Control and Prevention**

**Teen and Young Adult Health Program**

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**Muskie School of Public Service**

**DECEMBER, 2011**

### **FORWARD**

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The Muskie School of Public Service educates leaders, informs public policy, and strengthens civic life through its graduate degree programs, research institutes and public outreach activities. By making the essential connection between research, practice, and informed public policy, the School is dedicated to improving the lives of people of all ages, in every county in Maine and every state in the nation.

#### ***Acknowledgements***

The author gratefully acknowledges the leadership provided by George Shaler at the Muskie School of Public Service and Shannon King at the Teen and Young Adult Health Program, Maine Center for Disease Control and Prevention, Maine Department of Health and Human Services.

The author is also grateful to the school-based health centers for their dedication to quality health services for school children and adolescents.

Thank you Sheri Moulton, Muskie School of Public Service, for the report cover design and formatting.

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### EXECUTIVE SUMMARY

The Maine Centers for Disease Control and Prevention's, Teen and Young Adult Health Program (TYAH) contracts with the Muskie School of Public Service in a state-university partnership, to analyze a network of state-funded school-based health centers (SBHC).

This report highlights and compares data from Maine SBHCs receiving funds during a four year period from 2007/08 through 2010/11 school years. Data are shown in aggregate and by health center when appropriate.

*TYAH's goals include 1) increasing the health knowledge, positive attitudes and skills for adolescents, (2) decrease risky health behaviors, including smoking, and risky sexual behavior, (3) increase healthy habits, including appropriate use of health care, good nutrition, physical activity, use of seat belt and helmets, and (4) help-seeking for behavioral health issues, particularly depression and suicidal ideation.*

*The indicators are intended to measure both process and health outcomes of the expected services. They are not intended to measure all possible activities and outcomes in the SBHC, but instead are focused on those indicators most strongly connected to the purposes of the funding sources and related sentinel measures that provide a broad measure of the SBHCs accomplishments.*<sup>1</sup>

TYAH strives to meet these goals [in part] by contracting with an array of local agencies that provide school-based health center services. In order to receive state-funding, the local agencies operating the SBHC must gather data on a range of performance indicators.

### ***Key findings***

- 53,976 SBHC encounters from the 2007/08 school year through the 2010/11 school year. On average, 3,501 students were serviced per year.
- The percentage of enrolled students with at least one SBHC visit increased 12% over four years.
- Over the four year period, behavioral health encounters increased 6%, while medical encounters decreased 9%.

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<sup>1</sup> Excerpt from "Maine Department of Health and Human Services, Maine Center for Disease Control and Prevention, RFP # 201012851, School-Based Health Center."

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- The percentage of SBHC *enrollees*<sup>2</sup> using a health center has increased 12% since the 2007/08 school year.
- Health supervision and prevention encounters made up 55% of all medical encounters in the 2010/11 school year.
- The percentage of SBHC enrollees reporting a biennial physical exam averaged 67% in the 2010-11 school year, an increase of 17% since the 2007-08 school year.
- The percentage of SBHC enrollees receiving an annual risk assessment averaged 57% in the 2010-11 school year up from 48% in 2007/08 school year.
- Students with an at-risk behavior, who received an intervention, and showed improvement by the end of the school year has steadily increased over four years:
  - Tobacco use: 13% to 29%
  - Alcohol use: 28% to 63%
  - Other drug use: 4% to 71%
  - Nutrition: 8% to 9%

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<sup>2</sup> Enrollees are students with a signed parental consent to use a school-based health center.

### INTRODUCTION

The Maine Teen and Young Adult Health program and the Muskie School of Public Service have had a partnership to evaluate and analyze granted SBHC data since 2003. This partnership has also included Muskie School staff training SBHCs on data collection and quality improvement techniques.

This report documents trends from data collected over the last four school years. It is intended to help the Maine TYAH program as well as individual school-based health centers monitor service delivery and track improvements where quality improvement initiatives have been enacted.

### ***Data Analysis***

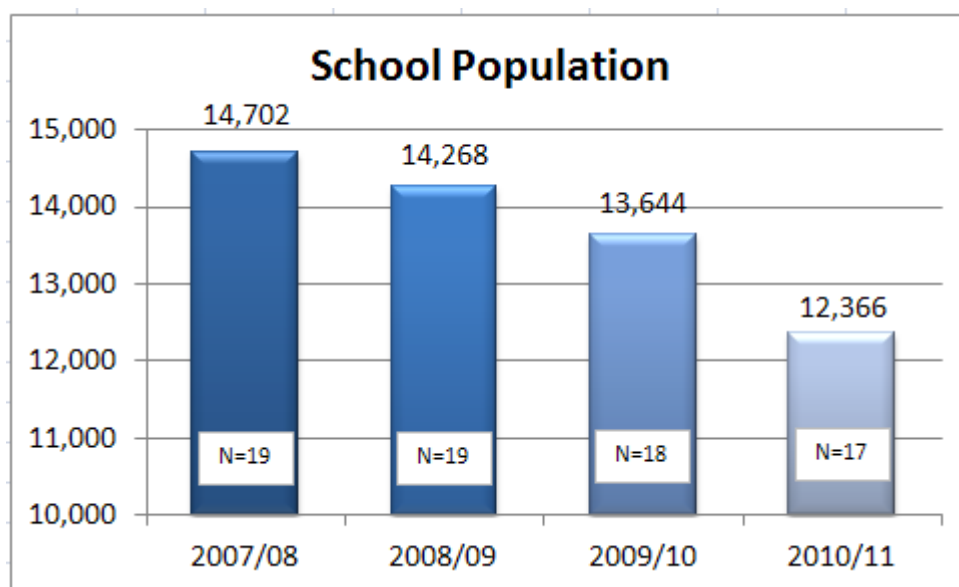
Each school-based health center submits de-identified data twice a year in a predetermined format. Muskie School staff analyze these data and provide TYAH and the individual SBHCs with semi-annual feedback on their performance indicators.

### SECTION 1: DEMOGRAPHICS

#### *Population Served*

Over the past four years, the student population at schools served by a SBHC with TYAH funding **decreased by 2,336 students or 8.4%**. It is important to note that during this time period the Lubec Consolidated SBHC closed and two SBHCs (Cony and Noble ) were not able to provide complete data sets all four years. What data are available are included in the report.

**Chart 1. Student population at schools with a school-based health center**



### **Consent Rate**

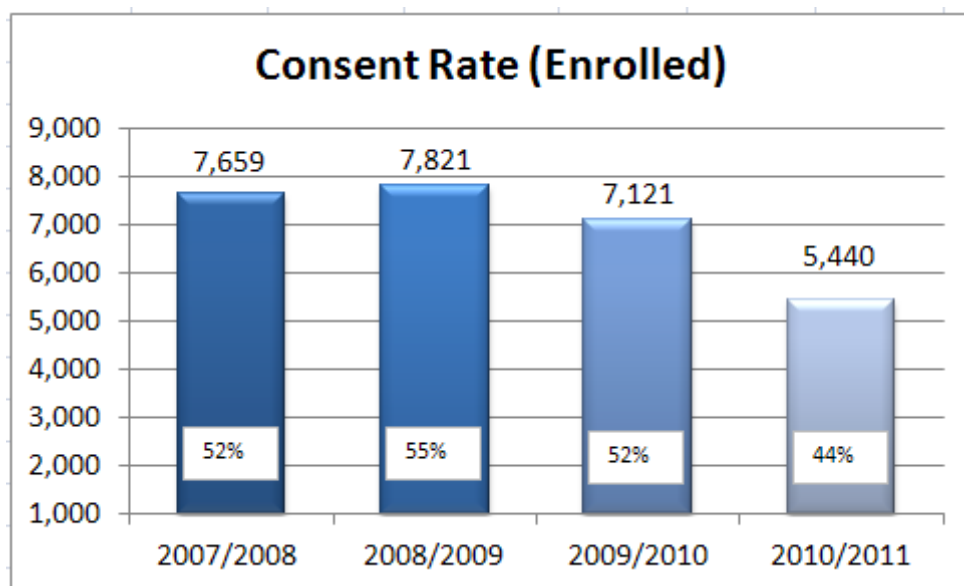
In order to receive services at a SBHC, a student must return a consent form signed by a parent or guardian, unless otherwise exempt by law. *Written informed consent to care of client and/or parent as appropriate is obtained for all enrollees and renewed on an established schedule.*<sup>3</sup>

An established schedule for enrollment can vary among SBHCs. It is a standard to enroll students each school year asking parents to provide current information. However, some health centers enroll students with a consent agreement that covers the student for the entire time they attend the school. Information is updated annually or as the student uses the health center.

The percentage of the school population enrolled in SBHCs remained steady for the first three years of the study period; however, there was a slight decline in percentage in the 2010-11 school year.

The number of students enrolled decreased by 2,219 students or 7.1% between 2007/08 and 2010/11. This decline can be attributed to fewer SBHCs.

**Chart 2. Number of students enrolled and percentage of school population enrolled**



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<sup>3</sup> Excerpt from "Maine Department of Health and Human Services, Maine Center for Disease Control and Prevention, RFP # 201012851, School-Based Health Center."

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### *Consent Rates by Health Center*

- Five sites had a consent rate consistently above 50% all four years: Calais Schools, King Middle School, Oxford Hills High School, Maranacook Schools, and Mattanawcook Academy.
- Edward Little (75%) and Calais School (72%) had the highest four-year consent rate average.

**Table 1: Percentage of school population enrolled by health center**

	2007/08	2008/09	2009/10	2010/11	Average
Average	52%	55%	52%	44%	52%
Auburn Middle School	79%	68%	52%	39%	60%
Brewer High School	21%	27%	31%	34%	28%
Brewer Middle School	21%	27%	25%	22%	24%
Calais Schools	70%	70%	77%	70%	72%
Casco Bay High School	62%	61%	48%	48%	55%
Cony Middle & High School	26%	52%	42%	--	40%
Deering High School	38%	37%	45%	34%	38%
Edward Little High School	84%	91%	87%	40%	76%
King Middle School	66%	66%	70%	70%	68%
Lewiston High School	57%	56%	59%	26%	50%
Lewiston Middle School	53%	48%	44%	31%	44%
Lubec Consolidated School	87%	83%	--	--	85%
Maranacook Schools	64%	62%	59%	61%	61%
Mattanawcook Academy	59%	51%	56%	60%	56%
Mt. Ararat High School	27%	29%	39%	36%	32%
Noble District School	73%	66%	22%	28%	48%
Oxford Hills High School	59%	62%	67%	69%	64%
Oxford Hills Middle School	42%	51%	53%	52%	50%
Portland High School	48%	49%	56%	57%	52%

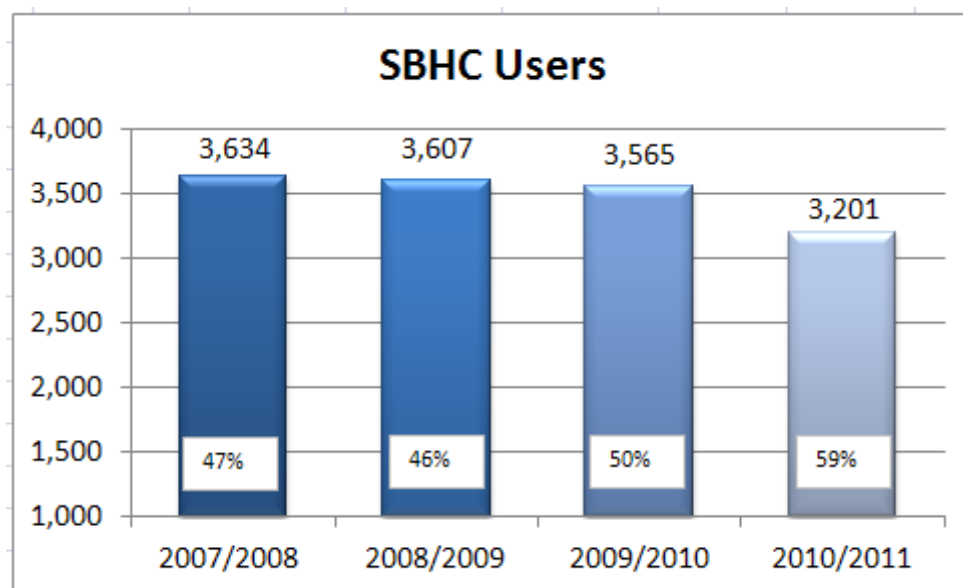
### ***School-Based Health Center Users***

SBHC users are enrolled students who have a signed consent on file and have had at least one encounter at a school-based health center during the school year.

The percentage of enrolled students using school-based health centers remained steady the first three years, but jumped to nearly 60% in the 2010-11 school year.

A reduction in the number TYAH funded SBHCs caused a decrease in the number students using health centers by 433 students or 11.9% between 2007/08 and 2010/11.

**Chart 3. Number of SBHC users and the percentage of students enrolled using a school-based health center**





## Maine School-based Health Center Four Year Trend Report

### SBHC Users by health center

- Four sites had user rates consistently above 60% all four years: Brewer Middle School, Calais Schools, King Middle School, and Mt. Ararat High School.
- Seven sites had user rates above 80% at some point in the four years: Auburn Middle School, Brewer High School, Brewer Middle School, Calais Schools, Lewiston Middle School, Lubec Consolidated, and Mattanawcook Academy.

**Table 2: Percentage of enrolled students using a school-based health center by health center**

	2007/08	2008/09	2009/10	2010/11	Average
<b>Average</b>	<b>50%</b>	<b>46%</b>	<b>45%</b>	<b>59%</b>	<b>50%</b>
Auburn Middle School	55%	62%	82%	80%	70%
Brewer High School	69%	51%	92%	91%	77%
Brewer Middle School	92%	90%	94%	97%	93%
Calais Schools	67%	68%	83%	70%	72%
Casco Bay High School	57%	54%	56%	36%	50%
Cony Middle & High School	--	28%	23%	--	20%
Deering High School	41%	46%	43%	63%	47%
Edward Little High School	51%	52%	36%	58%	48%
King Middle School	62%	67%	69%	71%	68%
Lewiston High School	39%	42%	33%	69%	42%
Lewiston Middle School	42%	39%	71%	89%	56%
Lubec Consolidated School	95%	85%	--	--	90%
Maranacook Schools	41%	40%	34%	35%	38%
Mattanawcook Academy	55%	55%	94%	96%	73%
Mt. Ararat High School	63%	71%	62%	65%	65%
Noble District School	47%	11%	75%	47%	37%
Oxford Hills High School	35%	39%	33%	39%	36%
Oxford Hills Middle School	65%	73%	48%	45%	57%
Portland High School	48%	44%	45%	47%	46%

## Maine School-based Health Center Four Year Trend Report

### ***Race, Ethnicity, Gender***

The percent of Maine's population that is non-white is 4.2%. In the 2010-11 school year, 19% of all SBHC users were non-white, slightly higher than the previous school years. (See Appendix A for a breakdown at of Maine's population by race).

The percentage of Maine's population that is Hispanic is 1.3%. In the 2010-11 school year, 2% of SBHC users were Hispanic, similar to the three previous school years. (See Appendix A for a breakdown at of Maine's population by ethnicity).

**Table 3. Percentage of school-base health center users by race, ethnicity, and gender**

	2007/08	2008/09	2009/10	2010/11
	Users by Race			
American Indian/Alaska Native	1%	1%	1%	1%
Asian	2%	2%	3%	3%
Black/African-American	10%	10%	10%	12%
Native Hawaiian and Other Pacific Islander	0%	0%	0%	0%
White	83%	84%	82%	80%
Other	1%	1%	1%	1%
Multi-racial	2%	1%	2%	3%
Unknown	1%	1%	1%	1%
	Users by Ethnicity			
Hispanic	2%	2%	2%	2%
Non-Hispanic	95%	94%	95%	97%
Other	0%	0%	2%	0%
Unknown	3%	4%	1%	1%
	Users by Gender			
Female	57%	56%	54%	55%
Male	43%	44%	46%	45%

### **Health Insurance**

*Private and public insurance reimbursement can be additional sources of income for the SBHC. Tracking insurance status helps SBHC staff to identify students who may be eligible for MaineCare and maximize reimbursement.*<sup>4</sup>

- The percentage of SBHC enrollees, users, and encounters in a school-based health center covered by Maine Care has steadily increased.
- Students covered by Maine Care account for more than half of the all encounters.

**Table 4. Percentage of health insurance coverage, by enrollees, users, and encounters**

	2007/08	2008/09	2009/10	2010/11
	Coverage by Enrollees			
Maine Care	37%	38%	41%	42%
Anthem	16%	15%	21%	17%
Other Private	37%	37%	28%	30%
No Insurance or Self-Pay	5%	3%	9%	4%
Unknown	5%	7%	1%	7%
	Coverage by Users			
Maine Care	43%	47%	47%	48%
Anthem	15%	14%	17%	15%
Other Private	33%	32%	27%	27%
No Insurance or Self-Pay	4%	4%	9%	4%
Unknown	4%	4%	1%	5%
	Coverage by Encounters			
Maine Care	47%	50%	51%	55%
Anthem	13%	12%	14%	12%
Other Private	32%	32%	27%	25%
No Insurance or Self-Pay	4%	3%	8%	4%
Unknown	4%	3%	0%	5%

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<sup>4</sup> Excerpt from “Maine Department of Health and Human Services, Maine Center for Disease Control and Prevention, RFP # 201012851, School-Based Health Center.”

## Maine School-based Health Center Four Year Trend Report

### Encounters

- Overall, the number of encounters **decreased 9%** between 2007/08 school year and 2010/11 school year.
- Lewiston Middle School (180%), Brewer High School (73%), and King Middle School (71%) had the largest percentage increases in number of encounters over the four years.

**Table 5. Number of encounters by health center**

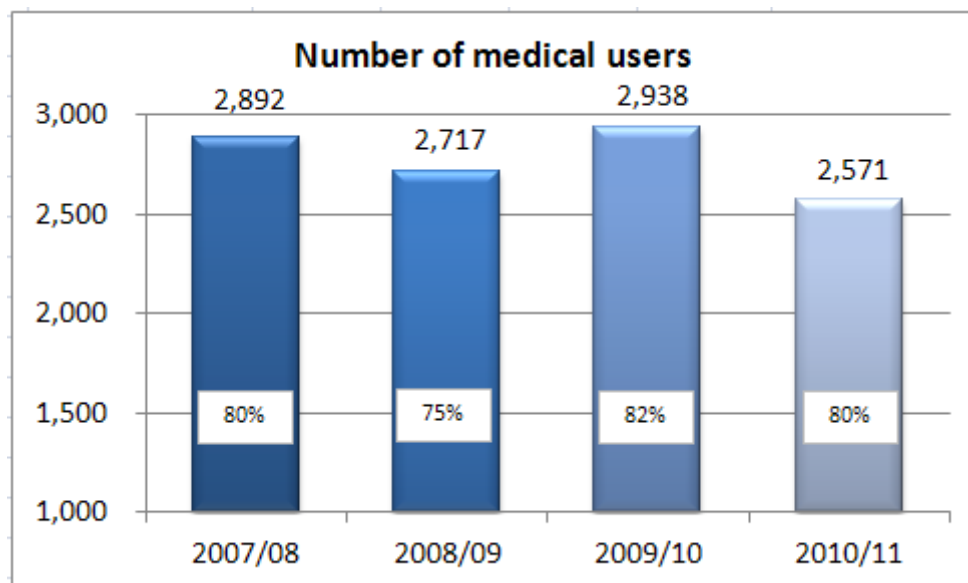
	2007/08	2008/09	2009/10	2010/11	Average	% Change 2007/08 to 2010/11
<b>Totals</b>	13,703	14,757	13,108	12,408	13,494	-9%
Auburn Middle School	1,272	1,098	458	335	791	-74%
Brewer High School	453	377	778	785	598	73%
Brewer Middle School	325	296	219	215	264	-34%
Calais Schools	857	909	1,191	1,040	999	21%
Casco Bay High School	175	252	217	142	197	-19%
Cony Middle & High School	--	807	310	--	559	--
Deering High School	619	697	794	819	732	32%
Edward Little High School	2,039	3,145	1,292	981	1,864	-52%
King Middle School	370	461	609	631	518	71%
Lewiston High School	1,481	1,684	1,386	1,195	1,437	-19%
Lewiston Middle School	402	486	1,231	1,126	811	180%
Lubec Consolidated School	566	414	--	--	490	--
Maranacook Schools	1,188	981	768	897	959	-24%
Mattawcook Academy	519	321	608	759	552	46%
Mt. Ararat High School	1,511	1,093	1,114	1,072	1,198	-29%
Noble District School	494	73	413	418	350	-15%
Oxford Hills High School	546	596	555	732	607	34%
Oxford Hills Middle School	211	403	296	317	307	50%
Portland High School	675	664	869	944	788	40%

### *Medical Users*

Medical Users are those students seen by a medical doctor (MD), doctor of osteopathic medicine (DO), nurse practitioner (NP), or physician's assistant (PA) at least once during the school year.

- The percentage of medical users to all school-based health center users has remained steady, averaging 79% of all SBHC users.
- The number of students using the SBHC for medical encounters **decreased by 321 students or 4.8%** between 2007/08 and 2010/11. The decrease is due in part to the decrease in the number of SBHCs.
- The number of medical encounters to medical users was 2.4 in 2007/08 and 2008/09, 2.2 in 2009/10, and 2.3 in 2010/11.

**Chart 4. Number of medical users and percentage of medical users to all school-based health center users**



## Maine School-based Health Center Four Year Trend Report

### Medical users by health center

- The number of medical users **decreased 11%** between 2007/08 school year and the 2010/11 school year.
- Brewer High School (106%) and King Middle School (80%) had the largest percentage increases in the number of medical users over the four years.

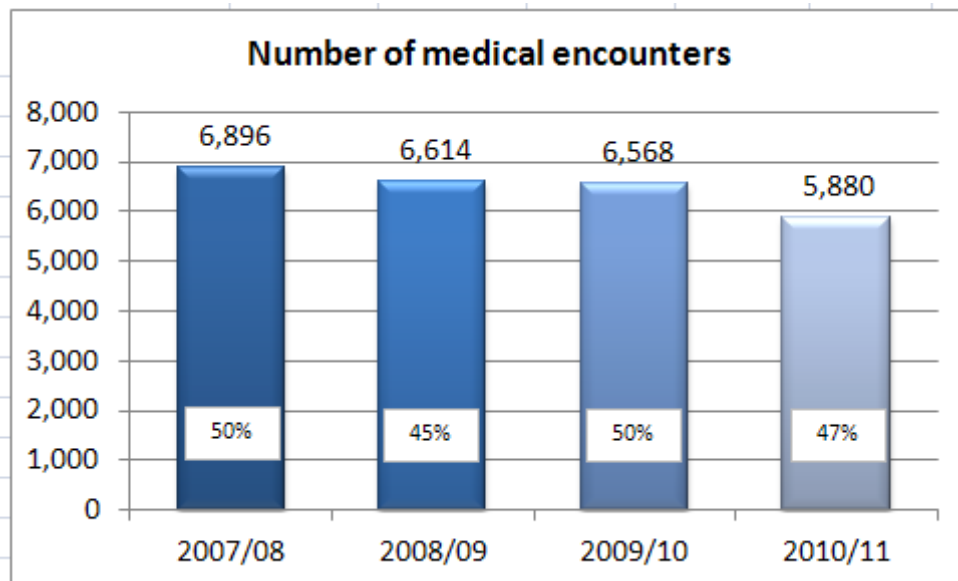
**Table 6. Number of students using a SBHC for medical services by health center**

	2007/08	2008/09	2009/10	2010/11	Average	% Change 2007/08 to 2010/11
<b>Totals</b>	<b>2,892</b>	<b>2,717</b>	<b>2,938</b>	<b>2,571</b>	<b>2,780</b>	<b>-11%</b>
Auburn Middle School	133	115	190	118	139	-11%
Brewer High School	110	99	214	227	163	106%
Brewer Middle School	51	67	63	60	60	18%
Calais Schools	137	147	222	166	168	21%
Casco Bay High School	56	60	60	43	55	-23%
Cony Middle & High School	--	170	154	--	162	--
Deering High School	168	171	170	182	173	8%
Edward Little High School	330	215	244	168	239	-49%
King Middle School	88	100	127	158	118	80%
Lewiston High School	198	178	154	148	170	-25%
Lewiston Middle School	94	116	129	107	112	14%
Lubec Consolidated School	101	86	--	--	94	--
Maranacook Schools	191	173	141	135	160	-29%
Mattanawcook Academy	116	102	117	95	108	-18%
Mt. Ararat High School	165	190	207	202	191	22%
Noble District School	368	73	162	126	182	-66%
Oxford Hills High School	243	272	237	272	256	12%
Oxford Hills Middle School	138	202	137	132	152	-4%
Portland High School	205	171	210	232	205	13%

### *Medical Encounters*

- The number of SBHC medical encounters **decreased by 1,016 encounters or 15%** between 2007/08 and 2010/11.

**Chart 5. Number of medical encounters and percentage of medical encounters to all school-based health center encounters**



## Maine School-based Health Center Four Year Trend Report

### Medical Encounters by health center

- The number of medical encounters **decreased by 15%** between 2007/08 school year and 2010/11 school year.
- Brewer High School (157%), King Middle School (91%), and Oxford Hills Middle School (50%) had the largest percentage increases in the number of medical encounters over the four years.

**Table 7. Number of medical encounters by health center**

	2007/08	2008/09	2009/10	2010/11	Average	% Change 2007/08 to 2010/11
<b>Totals</b>	<b>6,896</b>	<b>6,614</b>	<b>6,568</b>	<b>5,880</b>	<b>6,490</b>	<b>-15%</b>
Auburn Middle School	447	244	254	141	272	-68%
Brewer High School	202	194	463	519	345	157%
Brewer Middle School	100	134	125	121	120	21%
Calais Schools	386	411	660	473	483	23%
Casco Bay High School	150	207	178	126	165	-16%
Cony Middle & High School	--	485	249	--	--	--
Deering High School	454	455	414	433	439	-5%
Edward Little High School	689	396	404	355	461	-48%
King Middle School	159	187	225	304	219	91%
Lewiston High School	494	413	344	258	377	-48%
Lewiston Middle School	158	183	235	165	185	4%
Lubec Consolidated School	372	247	--	--	--	--
Maranacook Schools	498	481	360	389	432	-22%
Mattawcook Academy	230	145	182	160	179	-30%
Mt. Ararat High School	781	915	679	594	742	-24%
Noble District School	494	73	371	339	319	-31%
Oxford Hills High School	546	596	555	572	567	5%
Oxford Hills Middle School	211	403	296	317	307	50%
Portland High School	525	445	574	615	540	17%



### ***Common Medical Diagnoses by Category***

- The top five diagnostic categories encompassed 82% of all medical diagnosis in the 2010/11 school year.
- The type of medical diagnoses (by category) differed by school year as evidenced by the table below with more preventive (e.g. Health Supervision) diagnoses/services being delivered in the 2010/11 school year.

**Table 8. Percentage of common medical diagnoses by category**

	2007/08	2008/09	2009/10	2010/11
Health Supervision	31%	31%	45%	55%
Respiratory	12%	13%	6%	10%
Emotional	9%	10%	26%	7%
Symptoms	8%	8%	10%	5%
Injuries & Poisonings	4%	5%	3%	4%

### **Top five diagnostic categories with common diagnoses for the 2010/11 school year:**

Health Supervision: Dietary surveillance and counseling, Exercise counseling, Need for unspecified prophylactic measure, Screening for unspecified condition, Counseling on other sexually transmitted diseases

Respiratory: Acute Pharyngitis, Acute Upper Respiratory Infection, Asthma unspecified, Allergic rhinitis cause unspecified, Acute sinusitis unspecified

Emotional: Depression Non-specific, Anxiety state unspecified, Adjustment disorder with mixed anxiety and depressed mood, Adjustment reaction with adjustment disorder with depressed mood, Generalized Anxiety Disorder

Symptoms: Other unknown and unspecified cause of morbidity or mortality, Headache, Abdominal pain unspecified site, Cough, Rash and other nonspecific skin eruption

Injuries and Poisonings: Concussion unspecified, unspecified site of ankle sprain, Contusion of unspecified site, Sprain of interphalangeal (joint) of hand

### SECTION 2: BEHAVIORAL HEALTH SERVICES

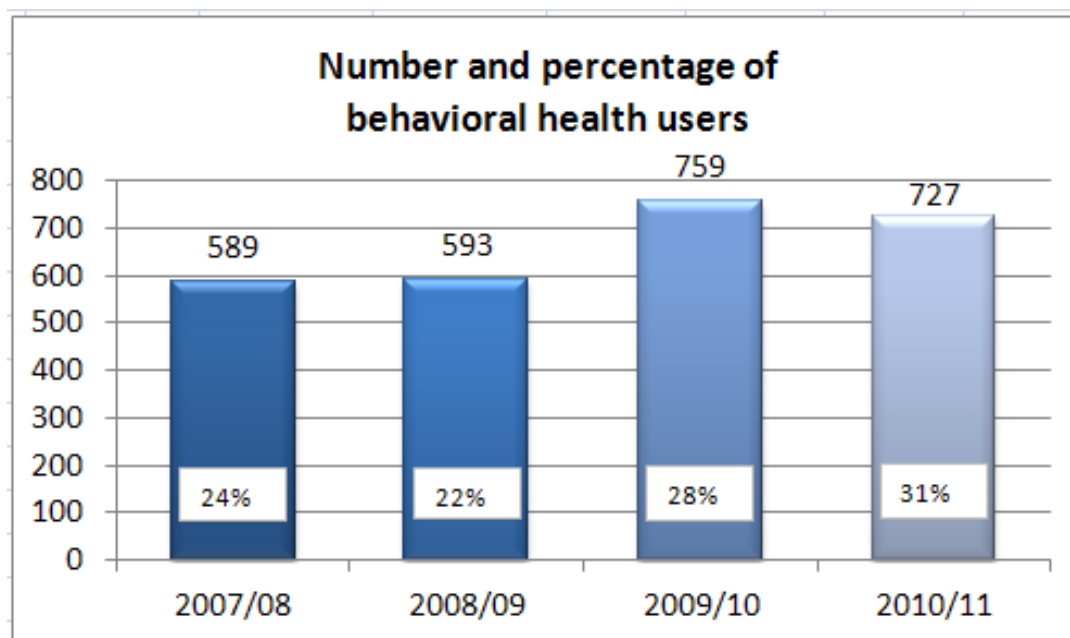
#### *Behavioral Health Users*

Behavioral health users are those students seen by a behavioral health provider at least once during the school year. A behavioral health provider could be a: Licensed Clinical Professional Counselor (LCPC), Licensed Clinical Social Worker (LCSW), Licensed Master's in Social Work (LMSW), or Master's in Social Work Intern (MSW Intern).

Thirteen out of nineteen (68%) SBHCs offered enhanced behavioral health services at their health center over the four year study period.

- The percentage of students using behavioral health services has increased over the four year study period, **averaging 26%** of SBHC users from health centers offering extended behavioral health services.

**Chart 6. Number of behavioral health service users and percentage to school-based health center users\***



\*School-based health center users from the thirteen SBHCs providing enhanced behavioral health services.

### *Behavioral Health Users by Health Center*

- The number of behavioral health users **increased 29%** between 2007/08 school year and 2010/11 school year.
- Lewiston Middle School (600%), Auburn Middle School (363%), Mattanawcook Academy (205%), and Portland High School (136%) had the largest percentage increases in the number of behavioral health users over the four years.

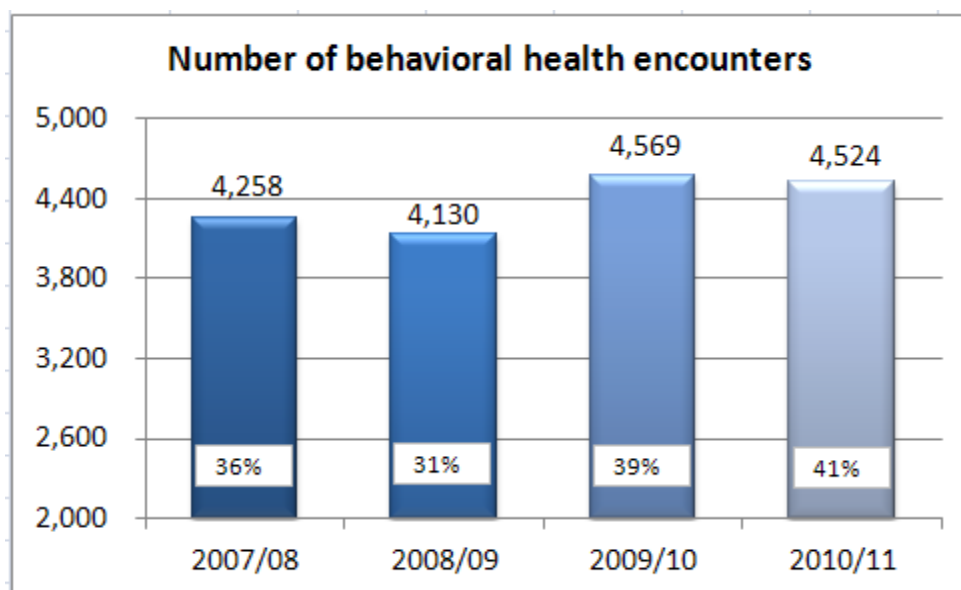
**Table 9. Number of students using SBHCs for behavioral health services by health center**

	2007/08	2008/09	2009/10	2010/11	Average	% Change 2007/08 to 2010/11
<b>Totals</b>	<b>589</b>	<b>594</b>	<b>780</b>	<b>761</b>	<b>676</b>	<b>29%</b>
Auburn Middle School	19	23	78	88	52	363%
Brewer High School	35	24	22	22	26	-37%
Brewer Middle School	21	15	9	10	14	-52%
Calais Schools	34	32	34	28	32	-18%
Cony Middle & High School	--	38	15	--	27	--
Deering High School	19	18	25	27	22	42%
Edward Little High School	163	169	162	103	149	-37%
Lewiston High School	133	130	89	88	110	-34%
Lewiston Middle School	12	30	103	84	57	600%
Maranacook Schools	57	37	29	48	43	-16%
Mattanawcook Academy	58	34	151	177	105	205%
Mt. Ararat High School	27	21	23	26	24	-4%
Portland High School	11	22	19	26	20	136%

### ***Behavioral Health Encounters***

- The number of behavioral health encounters (those to a SBHC behavioral health counselor) **increased by 266 encounters or 6%** between 2007/08 and 2010/11.
- At the SBHCs with behavioral health services, behavioral health encounters accounted for 41% of all encounters in the 2010/11 school year.

**Chart 7. Number of behavioral health encounters and percentage of behavioral health encounters to school-based health center encounters**



\*School-based health center encounters from the thirteen SBHCs offering enhanced behavioral health services.

***Behavioral Health Encounters by Health Center***

- Lewiston Middle School (336%), Portland High School (181%), Deering High School (152%), and Mattanawcook Academy (117%) had the largest percentage increases in the number of behavioral health encounters over the four years.

**Table 10. Number of behavioral health encounters by health center**

	2007/08	2008/09	2009/10	2010/11	Average	% Change 2007/08 to 2010/11
<b>Totals</b>	<b>4,258</b>	<b>4,132</b>	<b>4,612</b>	<b>4,524</b>	<b>4,370</b>	<b>6%</b>
Auburn Middle School	199	265	168	162	199	-19%
Brewer High School	237	161	246	191	209	-19%
Brewer Middle School	212	133	90	73	127	-66%
Calais Schools	328	410	419	434	398	32%
Cony Middle & High School	--	322	61	--	192	--
Deering High School	118	182	302	297	225	152%
Edward Little High School	737	749	833	571	723	-23%
Lewiston High School	524	669	527	494	554	-6%
Lewiston Middle School	146	238	499	636	380	336%
Maranacook Schools	690	500	408	508	527	-26%
Mattanawcook Academy	253	162	386	548	337	117%
Mt. Ararat High School	730	178	405	374	422	-49%
Portland High School	84	161	225	236	177	181%

### SECTION 3: OBJECTIVES AND PERFORMANCE INDICATORS

*Objective 1:* Increase the proportion of adolescents with a medical home that includes regular preventive care according to HRSA Bright Futures or GAPS guidelines and addresses safety, health and self-sufficiency.

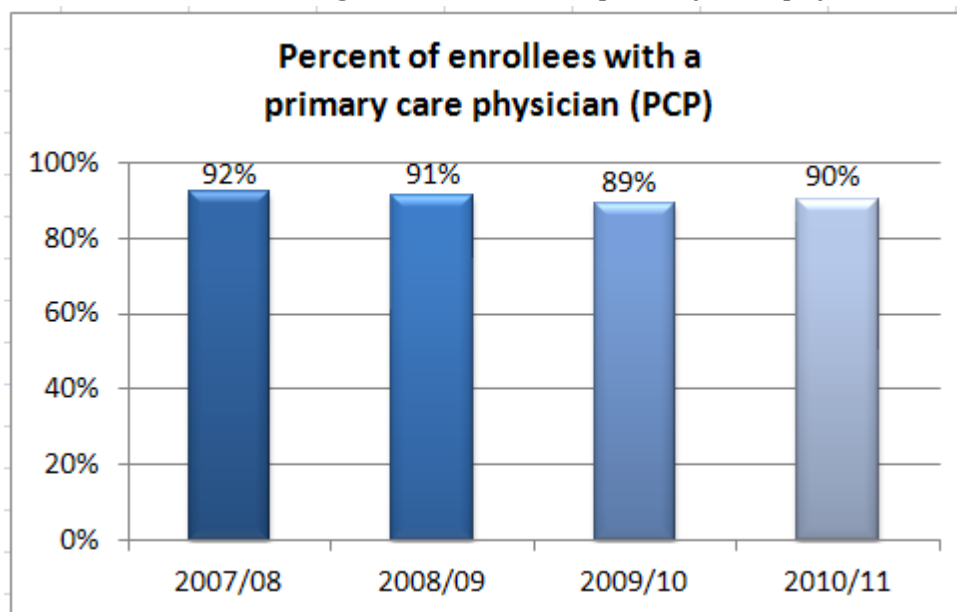
#### ***Primary Care Provider***

##### **Performance Indicator 1.1: Percentage of students enrolled in a school-based health center with an identified Primary Care Provider (PCP)**

*A connection to a Primary Care Provider (PCP) in the community is a key to a medical home for students, providing continuity of care, especially when the SBHC is closed. In order to provide for continuity of care, the SBHC should identify PCPs of enrolled students.*<sup>5</sup>

- The percentage of students with a PCP has averaged 91%.

**Chart 8.** Percentage enrollees with a primary care physician



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<sup>5</sup> Excerpt from "Maine Department of Health and Human Services, Maine Center for Disease Control and Prevention, RFP # 201012851, School-Based Health Center."

## Maine School-based Health Center Four Year Trend Report

### Percentage of students enrolled in the SBHC with an identified PCP by health center

- The percentage of enrollees with a primary care provider **decreased by 2%** between 2007/08 school year and 2010/11 school year.
- Mt. Ararat High School (98%), Brewer High School (95%), Brewer Middle School (94%), Mattanawcook Academy (94%), and Noble District School (93%) have the highest averages over the four years.

**Table 11.** Percentage enrollees with a primary care physician (PCP) by health center

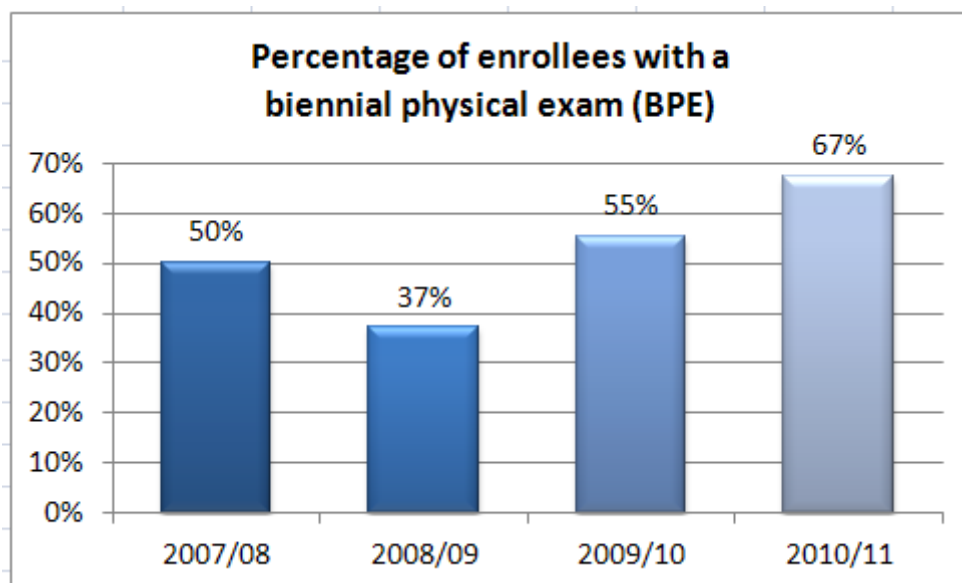
	2007/08	2008/09	2009/10	2010/11	Average
<b>Average</b>	<b>92%</b>	<b>91%</b>	<b>89%</b>	<b>90%</b>	<b>91%</b>
Auburn Middle School	87%	93%	93%	92%	91%
Brewer High School	87%	92%	98%	100%	95%
Brewer Middle School	92%	90%	96%	98%	94%
Calais Schools	92%	95%	89%	91%	92%
Casco Bay High School	95%	96%	81%	80%	88%
Cony Middle & High School	92%	88%	84%	--	88%
Deering High School	91%	89%	75%	70%	82%
Edward Little High School	91%	90%	90%	95%	91%
King Middle School	94%	90%	86%	86%	89%
Lewiston High School	76%	85%	83%	87%	82%
Lewiston Middle School	76%	78%	89%	82%	81%
Lubec Consolidated School	97%	90%	--	--	93%
Maranacook Schools	88%	91%	96%	96%	93%
Mattanawcook Academy	87%	92%	97%	100%	94%
Mt. Ararat High School	99%	97%	98%	98%	98%
Noble District School	90%	93%	100%	93%	93%
Oxford Hills High School	86%	86%	89%	91%	88%
Oxford Hills Middle School	86%	92%	95%	95%	92%
Portland High School	96%	90%	89%	87%	90%

### Performance Indicator 1.2: Percentage of enrollees with charts that record a biennial physical exam (BPE) (within the previous two years)

*Preventive care in the form of regular annual or biennial preventative physical exams that include assessment of risk and protective factors is a key opportunity to provide guidance and interventions to help adolescents establish healthy behaviors, to assess healthy developmental growth and to identify and intervene early in emerging problems.<sup>6</sup>*

- The percentage of enrollees with a biennial physical exam **increased 17% from 50% to 67%** between 2007/08 and 2010/11.

**Chart 9. Percentage of enrollees with a biennial physical exam (BPE)**



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<sup>6</sup> Excerpt from "Maine Department of Health and Human Services, Maine Center for Disease Control and Prevention, RFP # 201012851, School-Based Health Center."



## Maine School-based Health Center Four Year Trend Report

### Performance Indicator 1.2: Percentage of enrollees with charts that record a biennial physical exam

- Mattanawcook Academy (75%), Mt. Ararat (71%), and Calais Schools (70%) have the highest four year averages.
- Deering High School, Casco Bay High School, Portland High School, and King Middle School had the largest increases in percentage of enrollees with a biennial physical exam over four years.

**Table 12. Percentage of enrollees with a biennial physical exam by health center**

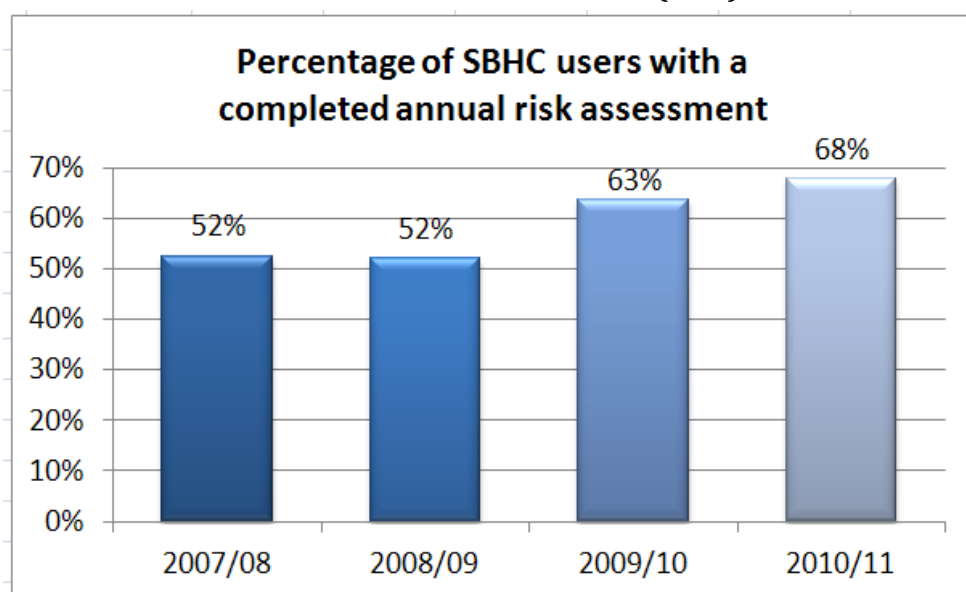
	2007/08	2008/09	2009/10	2010/11	Average
<b>Average</b>	<b>50%</b>	<b>37%</b>	<b>55%</b>	<b>67%</b>	<b>52%</b>
Auburn Middle School	83%	41%	58%	77%	65%
Brewer High School	54%	55%	65%	66%	60%
Brewer Middle School	45%	63%	74%	71%	63%
Calais Schools	68%	71%	72%	72%	71%
Casco Bay High School	11%	7%	82%	93%	48%
Cony Middle & High School	--	27%	52%	--	38%
Deering High School	9%	12%	83%	92%	47%
Edward Little High School	78%	57%	56%	71%	65%
King Middle School	25%	21%	93%	98%	62%
Lewiston High School	56%	28%	18%	55%	37%
Lewiston Middle School	21%	29%	40%	43%	31%
Lubec Consolidated School	46%	9%	--	--	28%
Maranacook Schools	45%	67%	70%	64%	61%
Mattanawcook Academy	94%	72%	68%	62%	75%
Mt. Ararat High School	76%	73%	70%	64%	70%
Noble District School	68%	20%	0%	26%	39%
Oxford Hills High School	39%	19%	23%	45%	32%
Oxford Hills Middle School	71%	67%	50%	76%	66%
Portland High School	14%	10%	94%	96%	56%

### Performance Indicator 1.3: Percentage of SBHC users with charts that record an annual risk assessment within the past school year

*Adolescent behaviors are one of the major influences on current and future health and well-being. Accessing both the risky behaviors of a student and their assets that can help protect them from unhealthy choices and outcomes is, therefore, a key part of health care for this age group. A systematic assessment helps to ensure that all areas are included. Risk and asset assessments can also help the provider get to know students and better address their health needs.<sup>7</sup>*

- The percentage of SBHC users with a health risk assessment **increased 16% from 52% to 68%** between 2007/08 and 2010/11. This means that two in every three SBHC users received a health risk assessment during the 2010-11 school year.

**Chart 10. Percentage of SBHC users with a completed health risk assessment (HRA)**



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<sup>7</sup> Excerpt from "Maine Department of Health and Human Services, Maine Center for Disease Control and Prevention, RFP # 201012851, School-Based Health Center."

## Maine School-based Health Center Four Year Trend Report

### Performance Indicator 1.3: Percentage of SBHC users with charts that record an annual health risk assessment within the current school year

- Oxford Hills Middle School (92%), Mt. Ararat High School (85%), Brewer Middle School (84%), Brewer High School (83%), and Mattanawcook Academy (81%) have the highest four year averages.
- Comparing the 2007/08 and 2010/11 school years, Oxford Hills High School and Noble District School had the largest percentage increases of SBHC users with an annual health risk assessment.

**Table 13. Percentage of SBHC users with health risk assessment (HRA) by health center**

	2007/08	2008/09	2009/10	2010/11	Average
<b>Average</b>	<b>48%</b>	<b>52%</b>	<b>63%</b>	<b>67%</b>	<b>57%</b>
Auburn Middle School	49%	30%	87%	67%	57%
Brewer High School	79%	64%	95%	83%	83%
Brewer Middle School	79%	86%	88%	83%	84%
Calais Schools	40%	36%	38%	33%	37%
Casco Bay High School	85%	53%	40%	73%	61%
Cony Middle & High School	--	40%	79%	--	29%
Deering High School	85%	57%	39%	59%	60%
Edward Little High School	59%	29%	60%	58%	49%
King Middle School	59%	43%	56%	64%	56%
Lewiston High School	27%	31%	13%	26%	25%
Lewiston Middle School	49%	73%	58%	61%	59%
Lubec Consolidated School	28%	10%	--	--	19%
Maranacook Schools	50%	51%	54%	46%	50%
Mattanawcook Academy	67%	67%	97%	86%	82%
Mt. Ararat High School	62%	96%	91%	86%	85%
Noble District School	22%	3%	0%	61%	22%
Oxford Hills High School	23%	83%	93%	97%	75%
Oxford Hills Middle School	79%	96%	96%	98%	92%
Portland High School	90%	73%	75%	71%	77%

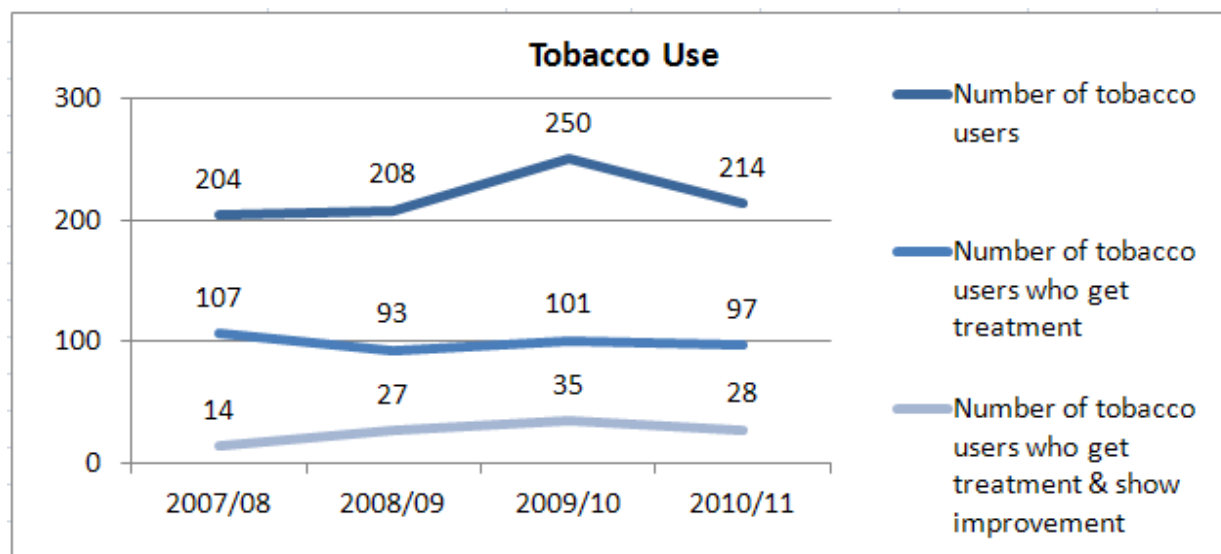
**Objective 2:** Reduce student risk taking behaviors that affect student's health, safety and self-sufficiency and provide appropriate follow-up services or referrals.

### **Tobacco Use**

*Almost one fifth of Maine high school students use tobacco, eventually leading to tobacco-related disease and death and higher health care costs. Identifying youth smokers and assisting them with quitting is a key strategy to reduce this problem. Public Health Service Tobacco Treatment guidelines state that patients should routinely assess tobacco use and intervene with this population. Note: Since objective 1.3 includes assessment of tobacco user, it is not listed as a separate objective.<sup>8</sup>*

- The number of SBHC users screened and identified as tobacco user **increased 50%** from 2007/08 to 2010/11.

**Chart 11. Number of tobacco users, number who receive an intervention, and number who show improvement**



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<sup>8</sup> Excerpt from "Maine Department of Health and Human Services, Maine Center for Disease Control and Prevention, RFP # 201012851, School-Based Health Center."

## Maine School-based Health Center Four Year Trend Report

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**Table 14. Number and percentage of SBHC users screened for tobacco use; number of tobacco users, who receive an intervention, and show some improvement**

	2007/08	2008/09	2009/10	2010/11
Number screened for tobacco use (% to SBHC users)	1,909 (53%)	2,142 (59%)	2,556 (72%)	2,314 (72%)
Number of tobacco users (% to those screened for tobacco use)	204 (10%)	208 (11%)	250 (9%)	214 (9%)
Number of tobacco users who get treatment or referral (% to those identified tobacco users)	107 (53%)	93 (45%)	101 (40%)	97 (45%)
Number of tobacco users who get treatment and show improvement (% to those identified as tobacco users who receive treatment)	14 (13%)	27 (29%)	35 (35%)	28 (29%)
Percentage of tobacco users at-risk who show some improvement	7%	13%	14%	13%

## Maine School-based Health Center Four Year Trend Report

### Percentage of SBHC users who are screened for tobacco use

- Comparing the 2007/08 and 2010/11 school years, Oxford Hills High School and Noble District School had the largest percentage increases of SBHC users screened for tobacco use.

**Table 15. Percentage of SBHC users who are screened for tobacco use by health center**

	2007/08	2008/09	2009/10	2010/11	Average
<b>Average</b>	<b>53%</b>	<b>59%</b>	<b>72%</b>	<b>72%</b>	<b>64%</b>
Auburn Middle School	50%	32%	88%	66%	58%
Brewer High School	85%	68%	94%	83%	85%
Brewer Middle School	79%	86%	86%	82%	83%
Calais Schools	25%	41%	40%	45%	38%
Casco Bay High School	85%	84%	93%	90%	88%
Cony Middle & High School	--	76%	89%	--	82%
Deering High School	86%	94%	91%	88%	90%
Edward Little High School	60%	30%	61%	59%	50%
King Middle School	60%	71%	72%	65%	67%
Lewiston High School	27%	34%	14%	26%	26%
Lewiston Middle School	49%	70%	57%	61%	59%
Lubec Consolidated School	3%	2%	--	--	2%
Maranacook Schools	54%	43%	58%	57%	52%
Mattanawcook Academy	74%	66%	95%	90%	84%
Mt. Ararat High School	63%	96%	91%	85%	85%
Noble District School	28%	3%	25%	60%	30%
Oxford Hills High School	23%	85%	92%	97%	75%
Oxford Hills Middle School	80%	96%	96%	99%	93%
Portland High School	90%	97%	95%	89%	92%

## Maine School-based Health Center Four Year Trend Report

### Performance Indicator 2.1: Percentage of enrolled tobacco users who receive counseling or referral

- Brewer High School (89%) and Mattanawcook Academy (89%) have the highest averages of SBHC users at-risk for tobacco use who received counseling over the four years.

**Table 16. Percentage of tobacco users who receive an intervention by health center**

	2007/08	2008/09	2009/10	2010/11	Average
<b>Average</b>	<b>51%</b>	<b>45%</b>	<b>40%</b>	<b>45%</b>	<b>43%</b>
Auburn Middle School	0%	0%	0%	No Risk	0%
Brewer High School	25%	100%	100%	100%	89%
Brewer Middle School	100%	No Risk	No Risk	0%	50%
Calais Schools	100%	0%	33%	50%	39%
Casco Bay High School	53%	86%	41%	36%	50%
Cony Middle & High School	--	38%	75%	--	66%
Deering High School	24%	43%	26%	11%	27%
Edward Little High School	48%	20%	13%	0%	25%
King Middle School	0%	0%	0%	0%	0%
Lewiston High School	43%	100%	67%	33%	63%
Lewiston Middle School	0%	No Risk	100%	0%	33%
Lubec Consolidated School	67%	100%	--	--	75%
Maranacook Schools	65%	64%	86%	71%	71%
Mattanawcook Academy	100%	100%	77%	95%	89%
Mt. Ararat High School	54%	41%	46%	61%	50%
Noble District School	73%	No Risk	0%	81%	62%
Oxford Hills High School	57%	13%	0%	33%	18%
Oxford Hills Middle School	0%	20%	0%	100%	33%
Portland High School	61%	61%	21%	11%	42%

No Risk: Where a SBHC reported not having students at-risk, "No Risk" represents the percentage rather than 0%.

## Maine School-based Health Center Four Year Trend Report

### Performance Indicator 2.2: Percentage of enrolled tobacco users who report smoking reduction or cessation by end of the school year

- Deering High School (42%), Brewer High School (40%), and Maranacook High School (40%) have the highest averages of SBHC users at-risk for tobacco use who received counseling and showed some improvement over the four years.

**Table 17. Percentage of tobacco users who receive an intervention and show some improvement by health center**

	2007/08	2008/09	2009/10	2010/11	Average
<b>Average</b>	<b>13%</b>	<b>29%</b>	<b>35%</b>	<b>29%</b>	<b>26%</b>
Auburn Middle School	0%	0%	0%	No Risk	0%
Brewer High School	0%	17%	56%	44%	40%
Brewer Middle School	0%	No Risk	No Risk	0%	0%
Calais Schools	0%	0%	50%	17%	22%
Casco Bay High School	38%	0%	29%	25%	24%
Cony Middle & High School	--	0%	28%	--	24%
Deering High School	10%	60%	36%	50%	42%
Edward Little High School	18%	0%	0%	0%	13%
King Middle School	0%	0%	0%	0%	0%
Lewiston High School	0%	0%	0%	0%	0%
Lewiston Middle School	0%	No Risk	0%	0%	0%
Lubec Consolidated School	100%	100%	--	--	100%
Maranacook Schools	45%	43%	25%	60%	40%
Mattanawcook Academy	0%	20%	40%	56%	34%
Mt. Ararat High School	21%	9%	58%	29%	29%
Noble District School	0%	No Risk	0%	0%	0%
Oxford Hills High School	0%	25%	0%	11%	12%
Oxford Hills Middle School	0%	0%	0%	0%	0%
Portland High School	0%	35%	0%	100%	20%

No Risk: Where a SBHC reported not having students at-risk, "No Risk" represents the percentage rather than %.

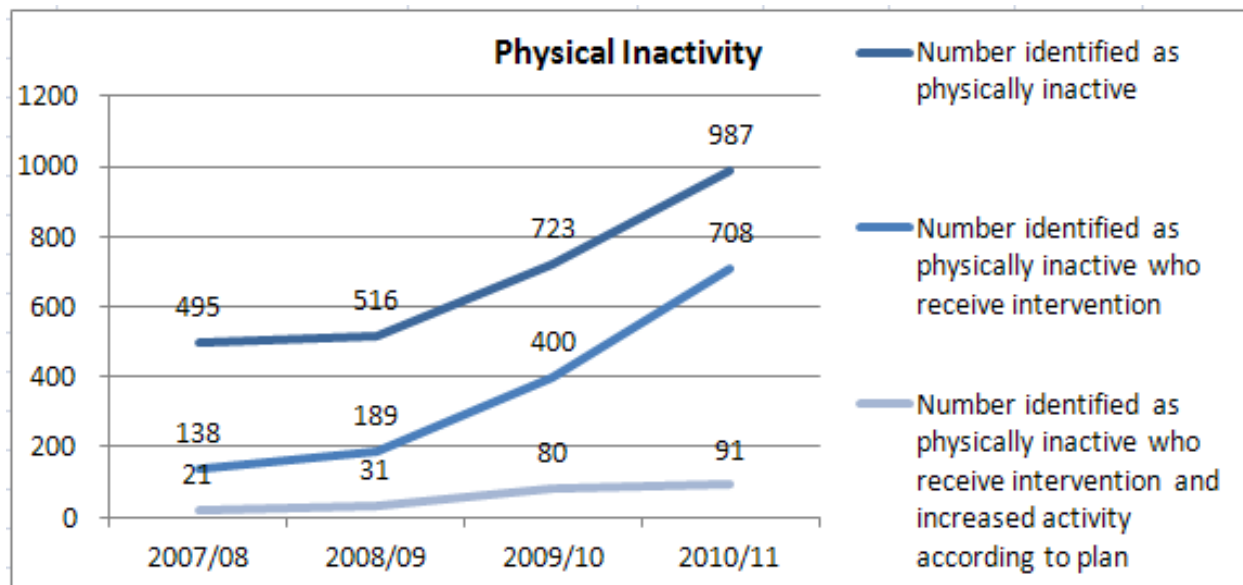


### **Physical Activity**

*Physical inactivity can lead to overweight and related chronic diseases. Adolescents are disproportionately affected by the latter and as a population are increasingly at-risk for overweight or obesity. Health care providers should take opportunities to reinforce education on physical activity and to help students choose enjoyable and sustainable physical activities.<sup>9</sup>*

- The number of SBHC users screened and identified as physically inactive, **increased 99%** from 2007/08 to 2010/11.

**Chart 12. Number of physically inactive who receive an intervention and show some improvement**



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<sup>9</sup> Excerpt from "Maine Department of Health and Human Services, Maine Center for Disease Control and Prevention, RFP # 201012851, School-Based Health Center."

**Table 18. Number and percentage of SBHC users screened for physical inactivity, who receive an intervention, and show some improvement**

	2007/08	2008/09	2009/10	2010/11
Number screened for physical activity (moderate <sup>10</sup> and vigorous <sup>11</sup> ) (% to SBHC users)	1,892 (52%)	2,150 (60%)	2,554 (72%)	2,317 (72%)
Number of students identified as physically inactive (% to those screened for physical activity)	495 (26%)	516 (24%)	723 (28%)	987 (43%)
Number of students identified as physically inactive who receive intervention (% to those identified as physically inactive)	138 (26%)	189 (37%)	400 (55%)	708 (72%)
Number of students identified as physically inactive who receive intervention and increase activity according to plan (% to those identified as physically inactive who receive intervention)	21 (15%)	31 (16%)	80 (20%)	91 (13%)
Percentage of physically inactive who show some improvement	4%	6%	11%	4%

<sup>10</sup> Moderate-intensity physical activity increases breathing or heart rate, however you should be able to carry on a normal conversation. Moderate-intensity activities use large muscle groups and include brisk walking, swimming, bicycling, dancing, gardening, yard work, and housework, such as vacuuming.

[http://www.doh.wa.gov/cfh/nutritionpa/publications/moderate\\_intensity\\_definition.htm](http://www.doh.wa.gov/cfh/nutritionpa/publications/moderate_intensity_definition.htm)

<sup>11</sup> Vigorous-intensity physical activity is more challenging and involves rhythmic, repetitive physical activities that use large muscle groups at 70% or more of maximum heart rate (rate varies by age). Examples of vigorous physical activities include jogging/running, lap swimming, bicycling, aerobic dancing, skating, rowing, jumping rope, cross-country skiing, hiking/backpacking, racquet sports, and competitive group sports (soccer, basketball, etc.).

[http://www.doh.wa.gov/cfh/nutritionpa/publications/vigorous\\_intensity\\_definition.htm](http://www.doh.wa.gov/cfh/nutritionpa/publications/vigorous_intensity_definition.htm)

## Maine School-based Health Center Four Year Trend Report

### Percentage of SBHC users who are screened for physical activity (moderate and vigorous)

- Oxford Hills Middle School (93%), Portland High School (92%), and Deering High School (90%) have the highest four-year averages of SBHC users screened for physical activity.
- Oxford Hills High School, Noble District School, and Calais School had the largest percentage increases of SBHC users screened for physical activity over the four years.

**Table 19. Percentage of SBHC users who are screened for physical inactivity by health center**

	2007/08	2008/09	2009/10	2010/11	Average
<b>Average</b>	<b>52%</b>	<b>60%</b>	<b>72%</b>	<b>72%</b>	<b>64%</b>
Auburn Middle School	49%	34%	88%	66%	58%
Brewer High School	84%	63%	94%	83%	84%
Brewer Middle School	81%	86%	88%	83%	84%
Calais Schools	23%	40%	39%	40%	36%
Casco Bay High School	85%	84%	96%	94%	89%
Cony Middle & High School	--	77%	88%	--	82%
Deering High School	87%	94%	90%	88%	90%
Edward Little High School	60%	30%	61%	59%	50%
King Middle School	60%	71%	72%	67%	68%
Lewiston High School	27%	33%	14%	26%	26%
Lewiston Middle School	49%	70%	57%	61%	59%
Lubec Consolidated School	2%	2%	--	--	2%
Maranacook Schools	54%	43%	58%	57%	53%
Mattawancook Academy	69%	67%	97%	93%	84%
Mt. Ararat High School	62%	97%	90%	86%	85%
Noble District School	27%	3%	25%	61%	30%
Oxford Hills High School	23%	85%	91%	97%	75%
Oxford Hills Middle School	80%	96%	96%	99%	93%
Portland High School	90%	97%	95%	88%	92%

## Maine School-based Health Center Four Year Trend Report

### Performance Indicator 2.3: Percentage of those identified as physically inactive who receive intervention

- Lewiston Middle School (90%), Lewiston High School (88%), Oxford Hills Middle School (85%), and Oxford Hills High School (82%) have the highest four-year averages of SBHC users at-risk for physical inactivity who received counseling.
- Deering High School, Mt. Ararat High School, and Lewiston Middle School have the largest percentage increases of SBHC users at-risk for physical inactivity who received counseling.

**Table 20. Percentage of physically inactive SBHC users who receive an intervention by health center**

	2007/08	2008/09	2009/10	2010/11	Average
<b>Average</b>	<b>28%</b>	<b>37%</b>	<b>55%</b>	<b>72%</b>	<b>48%</b>
Auburn Middle School	73%	41%	30%	65%	51%
Brewer High School	0%	81%	100%	98%	76%
Brewer Middle School	0%	83%	100%	78%	68%
Calais Schools	57%	0%	0%	33%	28%
Casco Bay High School	9%	5%	8%	25%	12%
Cony Middle & High School	--	0%	57%	--	35%
Deering High School	5%	16%	25%	22%	17%
Edward Little High School	65%	37%	44%	23%	47%
King Middle School	0%	0%	5%	6%	3%
Lewiston High School	42%	95%	97%	98%	88%
Lewiston Middle School	27%	24%	100%	99%	90%
Lubec Consolidated School	2%	No Risk	--	--	33%
Maranacook Schools	57%	29%	70%	67%	58%
Mattawcook Academy	41%	50%	96%	78%	77%
Mt. Ararat High School	14%	9%	43%	49%	32%
Noble District School	0%	0%	0%	10%	5%
Oxford Hills High School	33%	63%	31%	94%	82%
Oxford Hills Middle School	0%	81%	61%	99%	85%
Portland High School	11%	24%	15%	16%	16%

No Risk: Where a SBHC reported not having students at-risk, "No Risk" represents the percentage rather than 0%.

### Performance Indicator 2.4: Percentage of students receiving interventions for physical inactivity and who have increased activity according to plan

- Calais Schools (64%), Deering High School (57%), and King Middle School (50%) have the highest four-year averages of SBHC users at-risk for physical inactivity that received counseling and showed some improvement over the four years.
- Portland High School, Mattanawcook Academy, and Edward Little High School had the largest percentage increases of SBHC users at-risk for physical inactivity that received counseling and showed some improvement over the four years.

**Table 21. Percentage of physically inactive SBHC users who receive an intervention and show some improvement by health center**

	2007/08	2008/09	2009/10	200/11	Average
<b>Average</b>	<b>15%</b>	<b>16%</b>	<b>20%</b>	<b>13%</b>	<b>16%</b>
Auburn Middle School	26%	36%	0%	6%	18%
Brewer High School	0%	0%	53%	48%	43%
Brewer Middle School	0%	0%	40%	57%	35%
Calais Schools	0%	0%	0%	100%	64%
Casco Bay High School	0%	0%	50%	33%	25%
Cony Middle & High School	--	0%	17%	--	17%
Deering High School	0%	78%	63%	50%	57%
Edward Little High School	20%	25%	9%	43%	17%
King Middle School	0%	0%	100%	0%	50%
Lewiston High School	0%	3%	6%	0%	2%
Lewiston Middle School	0%	0%	2%	8%	5%
Lubec Consolidated School	0%	No Risk	--	--	--
Maranacook Schools	13%	38%	23%	18%	21%
Mattanawcook Academy	22%	20%	41%	55%	42%
Mt. Ararat High School	0%	0%	14%	38%	13%
Noble District School	0%	0%	0%	0%	0%
Oxford Hills High School	0%	6%	0%	1%	1%
Oxford Hills Middle School	0%	0%	0%	2%	2%
Portland High School	11%	62%	40%	40%	40%

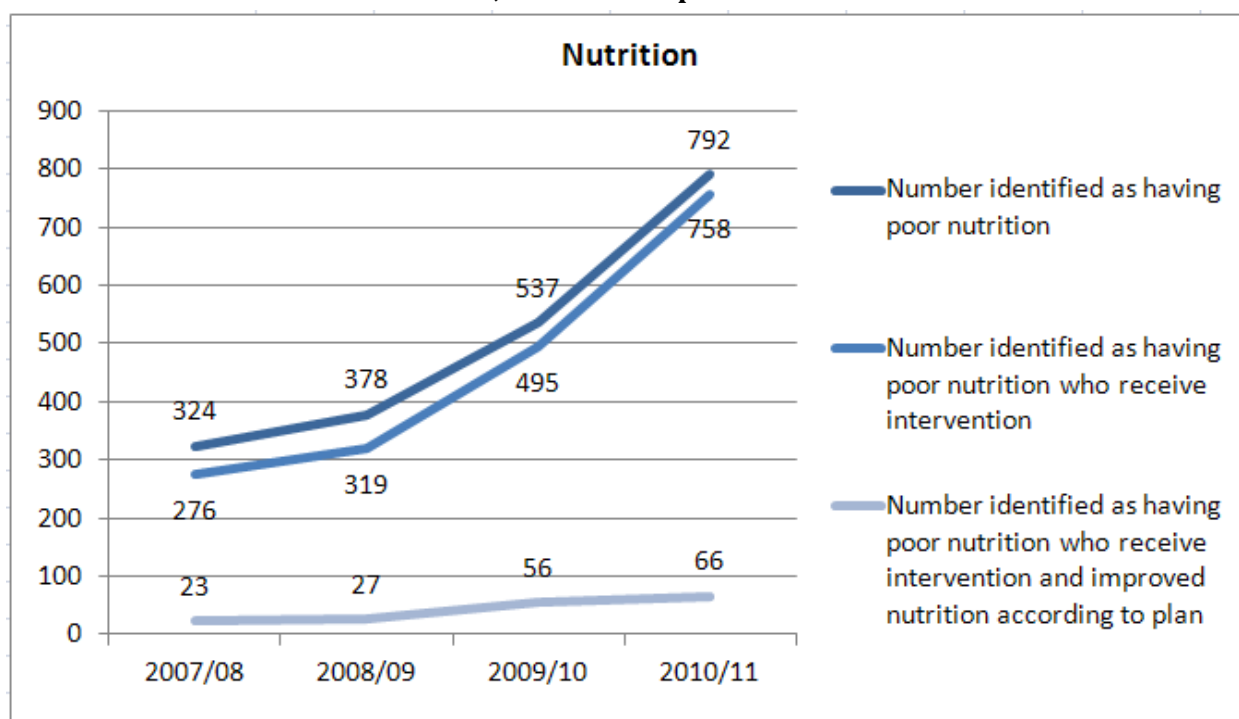
No Risk: Where a SBHC reported not having students at-risk, "No Risk" represents the percentage rather than 0%.

### Nutrition

*Unhealthy eating habits can lead to overweight and related chronic diseases as well as being a sign of eating disorders. Adolescents are disproportionately affected by the latter and as a population are increasingly at-risk for overweight or obesity. As adolescents become more independent in their nutritional choices, health care providers should take opportunities to reinforce education on healthy eating habits and to help students improve their food choices.<sup>12</sup>*

- The number of SBHC users screened and identified with poor nutrition **increased 144%** from 2007/08 to 2010/11.

**Chart 13. Number of SBHC users at-risk for poor nutrition, who receive an intervention, and show improvement**



<sup>12</sup> Excerpt from "Maine Department of Health and Human Services, Maine Center for Disease Control and Prevention, RFP # 201012851, School-Based Health Center."

## Maine School-based Health Center Four Year Trend Report

**Table 22. Number and percentage of SBHC users screened for nutrition who receive an intervention and show improvement**

	2007/08	2008/09	2009/10	2010/11
Number screened for nutrition (% to SBHC users)	1,896 (52%)	2,142 (59%)	2,564 (72%)	2,321 (73%)
Number of students identified as having poor nutrition (% to those screened for nutrition)	324 (17%)	378 (18%)	537 (21%)	792 (34%)
Number of students identified as having poor nutrition who receive intervention (% to those with poor nutrition)	276 (85%)	319 (84%)	495 (92%)	758 (96%)
Number of students identified as having poor nutrition who receive intervention & show improvement (% to those with poor nutrition who receive intervention)	23 (8%)	27 (9%)	56 (11%)	66 (9%)
Percentage of students at-risk for poor nutrition who show some improvement	7%	6%	10%	8%

## Maine School-based Health Center Four Year Trend Report

### Percentage of SBHC users who are screened for good nutrition (breakfast, fruit/veggies, soda consumption)

- Oxford Hills Middle School (93%), Portland High School (91%), and Deering High School (90%) have the highest four-year averages of SBHC users screened for nutrition.
- Oxford Hills High School and Calais School had the largest percentage increases of SBHC users screened for nutrition over the four years.

**Table 23. Percentage of SBHC users screened for nutrition by health center**

	2007/08	2008/09	2009/10	2010/11	Average
<b>Average</b>	<b>52%</b>	<b>59%</b>	<b>72%</b>	<b>73%</b>	<b>64%</b>
Auburn Middle School	49%	33%	88%	66%	58%
Brewer High School	85%	64%	94%	83%	84%
Brewer Middle School	77%	83%	88%	83%	83%
Calais Schools	23%	40%	40%	39%	36%
Casco Bay High School	83%	84%	96%	94%	89%
Cony Middle & High School	--	76%	88%	--	2%
Deering High School	86%	94%	91%	88%	90%
Edward Little High School	60%	30%	61%	59%	50%
King Middle School	58%	71%	72%	67%	67%
Lewiston High School	27%	33%	14%	26%	26%
Lewiston Middle School	48%	70%	57%	61%	59%
Lubec Consolidated School	22%	4%	--	--	13%
Maranacook Schools	54%	43%	58%	57%	52%
Mattawcook Academy	69%	66%	97%	93%	84%
Mt. Ararat High School	63%	96%	91%	86%	85%
Noble District School	27%	3%	25%	61%	30%
Oxford Hills High School	23%	85%	92%	97%	75%
Oxford Hills Middle School	80%	96%	96%	99%	93%
Portland High School	86%	97%	96%	89%	91%



## Maine School-based Health Center Four Year Trend Report

### Performance Indicator 2.5: Percentage of those identified with poor nutrition who receive intervention

- Brewer Middle School (100%), Oxford Hills High School (97%), and Maranacook Schools (96%) have the highest four-year averages of SBHC users at-risk for poor nutrition who received counseling.
- Deering High School and Brewer High School have the largest percentage increases of SBHC users at-risk for poor nutrition who received counseling over the four years.

**Table 24. Percentage of SBHC users at-risk for poor nutrition who receive an intervention by health center**

	2007/08	2008/09	2009/10	2010/11	Average
<b>Average</b>	<b>83%</b>	<b>84%</b>	<b>92%</b>	<b>96%</b>	<b>89%</b>
Auburn Middle School	100%	94%	61%	86%	85%
Brewer High School	55%	100%	100%	100%	89%
Brewer Middle School	100%	100%	100%	100%	100%
Calais Schools	100%	0%	38%	67%	51%
Casco Bay High School	33%	78%	67%	50%	57%
Cony Middle & High School	--	No Risk	81%	--	81%
Deering High School	22%	43%	76%	71%	53%
Edward Little High School	95%	91%	92%	75%	88%
King Middle School	64%	25%	33%	33%	39%
Lewiston High School	63%	100%	97%	100%	90%
Lewiston Middle School	100%	52%	100%	100%	88%
Lubec Consolidated School	90%	50%	--	--	85%
Maranacook Schools	96%	95%	100%	94%	96%
Mattanawcook Academy	67%	80%	86%	100%	83%
Mt. Ararat High School	57%	85%	92%	94%	82%
Noble District School	0%	0%	0%	75%	19%
Oxford Hills High School	100%	97%	93%	98%	97%
Oxford Hills Middle School	67%	100%	100%	100%	92%
Portland High School	75%	62%	72%	79%	72%

No Risk: Where a SBHC reported not having students at-risk, "No Risk" represents the percentage rather than 0%.

## Maine School-based Health Center Four Year Trend Report

### Performance Indicator 2.6: Percentage of students receiving interventions for poor nutrition and who have improved nutrition according to plan

- Calais Schools (50%) and Deering High School (42%) have the highest four-year averages of SBHC users at-risk for poor nutrition that received counseling and showed some improvement.
- Portland High School and Maranacook had the largest percentage increases of SBHC users at-risk for poor nutrition that received counseling and showed some improvement over the four years.

**Table 25. Percentage of SBHC users at-risk for poor nutrition, who receive an intervention, and show improvement by health center**

	2007/08	2008/09	2009/10	2010/11	Average
<b>Average</b>	<b>8%</b>	<b>9%</b>	<b>11%</b>	<b>9%</b>	<b>9%</b>
Auburn Middle School	18%	35%	0%	8%	18%
Brewer High School	0%	4%	2%	28%	10%
Brewer Middle School	0%	0%	0%	25%	5%
Calais Schools	0%	0%	33%	63%	50%
Casco Bay High School	0%	0%	0%	50%	7%
Cony Middle & High School	--	No Risk	12%	--	12%
Deering High School	0%	33%	46%	50%	42%
Edward Little High School	15%	26%	39%	11%	21%
King Middle School	0%	0%	0%	0%	0%
Lewiston High School	10%	4%	3%	0%	3%
Lewiston Middle School	3%	0%	5%	5%	5%
Lubec Consolidated School	0%	0%	--	--	0%
Maranacook Schools	8%	0%	33%	40%	19%
Mattanawcook Academy	0%	0%	33%	25%	17%
Mt. Ararat High School	0%	0%	36%	20%	22%
Noble District School	0%	0%	0%	0%	0%
Oxford Hills High School	0%	0%	0%	0%	0%
Oxford Hills Middle School	0%	0%	0%	2%	1%
Portland High School	4%	22%	38%	33%	22%

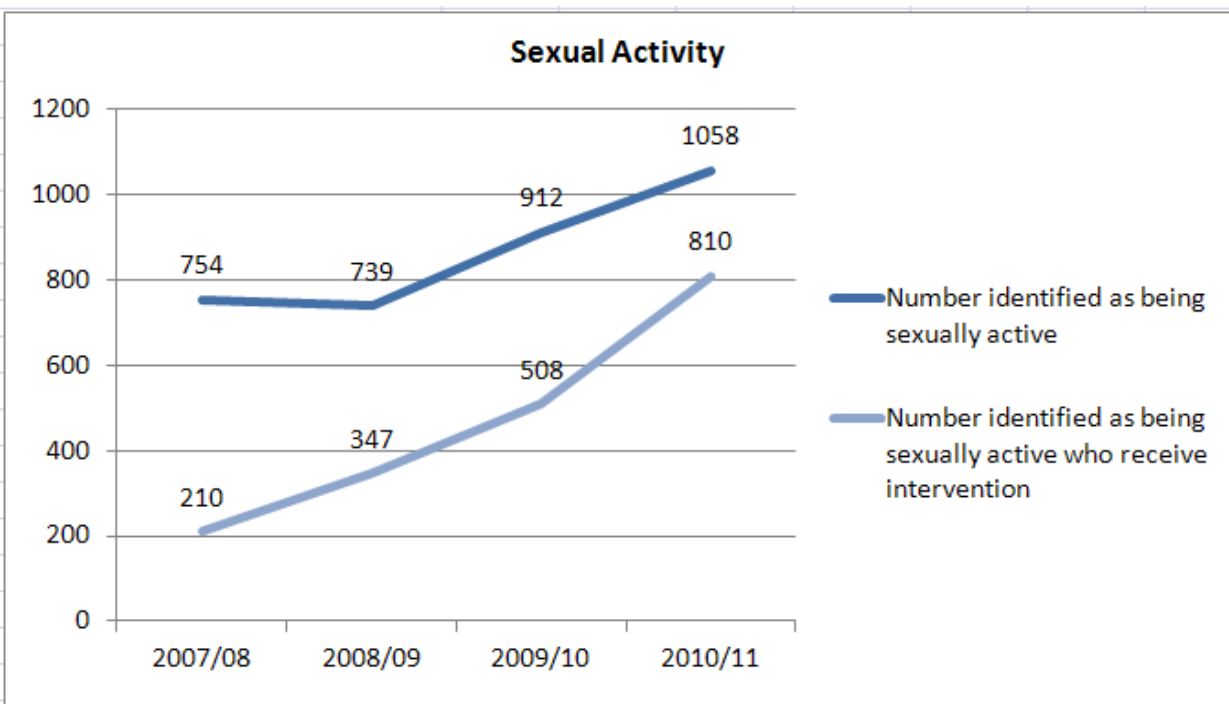
No Risk: Where a SBHC reported not having students at-risk, "No Risk" represents the percentage rather than 0%.

### ***Sexual Activity***

*Risky sexual behavior in teens can lead to sexually transmitted diseases and teen pregnancy. [Sixteen hundred] Maine teens become pregnant each year, and teen women disproportionately test positive for Chlamydia. Teens need accurate information on risk reduction strategies, including abstinence and use of condoms and other birth control methods.*<sup>13</sup>

- The number of SBHC users screened and identified as being sexually active **increased 40%** from 2007/08 to 2010/11.

**Chart 14. Number of SBHC users at-risk for sexual activity, who receive an intervention**



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<sup>13</sup> Excerpt from "Maine Department of Health and Human Services, Maine Center for Disease Control and Prevention, RFP # 201012851, School-Based Health Center."

**Table 26. Number and percentage of SBHC users screened for sexual activity that receive an intervention**

	<b>2007/08</b>	<b>2008/09</b>	<b>2009/10</b>	<b>2010/11</b>
Number screened for sexual activity (% to SBHC users)	1,842 (51%)	2,013 (56%)	2,424 (68%)	2,194 (69%)
Number of students identified as being sexually active (% to those screened for sexual activity)	754 (41%)	739 (37%)	912 (38%)	1,058 (48%)
Number of students identified as being sexually active who receive intervention (% to those who are sexually active)	210 (28%)	347 (47%)	508 (56%)	810 (77%)

## Maine School-based Health Center Four Year Trend Report

### Percentage of students who are screened for sexual activity

- Oxford Hills Middle School (93%), Portland High School (92%), and Deering High School (90%) have the highest four-year averages of SBHC users screened for sexual activity.
- Oxford Hills High School, Noble District School, and Calais School had the largest percentage increases of SBHC users screened for sexual activity over the four years.

**Table 27. Percentage of SBHC users who are screened for sexual activity by health center**

	2007/08	2008/09	2009/10	2010/11	Average
<b>Average</b>	<b>51%</b>	<b>56%</b>	<b>68%</b>	<b>69%</b>	<b>61%</b>
Auburn Middle School	50%	32%	87%	66%	58%
Brewer High School	84%	64%	94%	83%	84%
Brewer Middle School	79%	86%	86%	83%	84%
Calais Schools	26%	43%	42%	44%	39%
Casco Bay High School	85%	84%	94%	94%	89%
Cony Middle & High School	--	2%	88%	--	41%
Deering High School	86%	94%	91%	89%	90%
Edward Little High School	60%	30%	60%	59%	50%
King Middle School	30%	71%	21%	19%	34%
Lewiston High School	29%	33%	14%	26%	26%
Lewiston Middle School	49%	69%	57%	61%	59%
Lubec Consolidated School	3%	2%	--	--	2%
Maranacook Schools	54%	43%	58%	57%	53%
Mattawcook Academy	69%	67%	96%	91%	84%
Mt. Ararat High School	63%	96%	89%	85%	84%
Noble District School	28%	3%	25%	61%	31%
Oxford Hills High School	23%	85%	92%	97%	75%
Oxford Hills Middle School	80%	96%	96%	99%	93%
Portland High School	90%	97%	96%	88%	92%

No Risk: Where a SBHC reported not having students at-risk, "No Risk" represents the percentage rather than 0%.

### Performance Indicator 2.7: Percentage of those identified for sexual activity who receive intervention

- Oxford Hills Middle School (93%) and Mattanawcook Academy (92%) have the highest four-year averages of SBHC users engaged in sexual activity that received counseling and showed some improvement.
- Brewer High School, King Middle School, and Portland High School had the largest percentage increases of SBHC users at-risk for sexual activity that received counseling and showed some improvement over the four years.

**Table 28. Percentage of SBHC users engaged in sexual activity, who receive an intervention by health center**

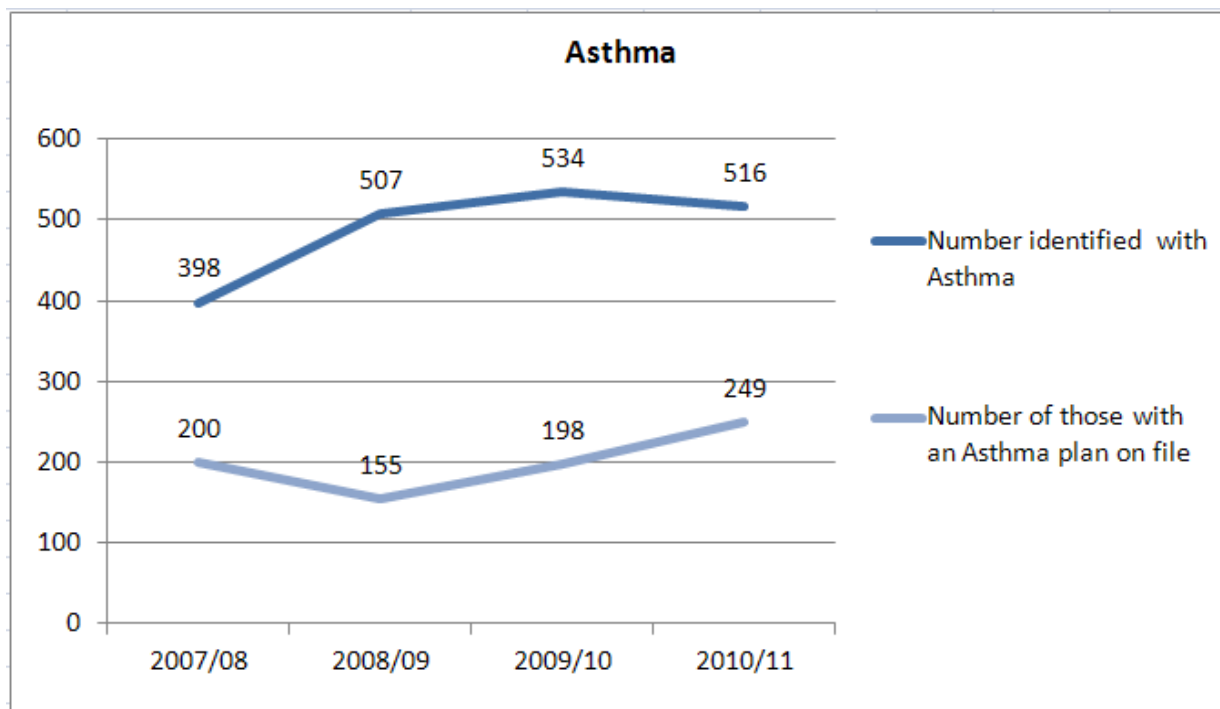
	2007/08	2008/09	2009/10	2010/11	Average
<b>Average</b>	<b>28%</b>	<b>47%</b>	<b>56%</b>	<b>77%</b>	<b>44%</b>
Auburn Middle School	14%	67%	0%	No Risk	19%
Brewer High School	7%	80%	99%	93%	75%
Brewer Middle School	0%	100%	0%	20%	18%
Calais Schools	50%	55%	61%	51%	54%
Casco Bay High School	21%	24%	47%	70%	37%
Cony Middle & High School	--	0%	11%		11%
Deering High School	29%	28%	32%	33%	30%
Edward Little High School	22%	46%	23%	60%	35%
King Middle School	14%	33%	60%	100%	38%
Lewiston High School	38%	87%	32%	43%	53%
Lewiston Middle School	0%	33%	0%	50%	23%
Lubec Consolidated School	50%	0%	--		33%
Maranacook Schools	35%	44%	39%	48%	42%
Mattanawcook Academy	80%	94%	100%	88%	92%
Mt. Ararat High School	26%	64%	65%	82%	62%
Noble District School	0%	0%	50%	79%	50%
Oxford Hills High School	27%	48%	69%	95%	75%
Oxford Hills Middle School	50%	45%	89%	100%	93%
Portland High School	18%	14%	49%	64%	35%

## Asthma and Asthma Plan on file

State recommendations for students with asthma include developing a student asthma plan, signed by the student's PCP and filed with the school nurse.<sup>14</sup>

- The number of students with asthma with an asthma plan on file has **increased 25% between 2007/08 and 2010/11**.

**Chart 15. Number of SBHC users identified with asthma, who have an asthma plan on file**



**Table 29. Number and percentage of SBHC users identified with asthma that have an asthma plan on file**

	2007/08	2008/09	2009/10	2010/11
Number of students identified with Asthma (% to SBHC users)	398 (11%)	507 (14%)	534 (15%)	516 (16%)
Number of students with Asthma who have an Asthma plan on file (% to those identified with Asthma and have a plan)	200 (50%)	155 (31%)	298 (56%)	249 (48%)

<sup>14</sup> Excerpt from "Maine Department of Health and Human Services, Maine Center for Disease Control and Prevention, RFP # 201012851, School-Based Health Center."

## Maine School-based Health Center Four Year Trend Report

### Performance Indicator 2.8: Percentage of students with asthma, who have a copy of an up-to-date school asthma plan on file at the SBHC

- Lewiston High School (92%) and Lewiston Middle School (88%) had the highest four-year averages of asthma plans on file.
- Mattanawcook Academy and Auburn Middle School had the largest percentage increases of asthma plans on file over the four years.

**Table 30. Percentage of SBHC users with asthma who have an asthma plan on file by health center**

	2007/08	2008/09	2009/10	2010/11	Average
<b>Average</b>	<b>50%</b>	<b>31%</b>	<b>56%</b>	<b>48%</b>	<b>46%</b>
Auburn Middle School	13%	48%	92%	38%	48%
Brewer High School	0%	5%	86%	76%	54%
Brewer Middle School	0%	10%	100%	78%	50%
Calais Schools	38%	57%	64%	42%	50%
Casco Bay High School	100%	13%	69%	33%	54%
Cony Middle & High School	--	100%	97%	--	97%
Deering High School	100%	51%	73%	53%	73%
Edward Little High School	17%	18%	16%	13%	16%
King Middle School	100%	17%	43%	57%	56%
Lewiston High School	0%	100%	95%	89%	92%
Lewiston Middle School	0%	0%	100%	100%	88%
Lubec Consolidated School	0%	0%	--	--	0%
Maranacook Schools	61%	71%	25%	81%	65%
Mattanawcook Academy	21%	63%	88%	80%	53%
Mt. Ararat High School	50%	52%	98%	98%	79%
Noble District School	13%	12%	0%	0%	12%
Oxford Hills High School	0%	0%	0%	13%	5%
Oxford Hills Middle School	0%	0%	0%	16%	7%
Portland High School	100%	12%	39%	51%	52%

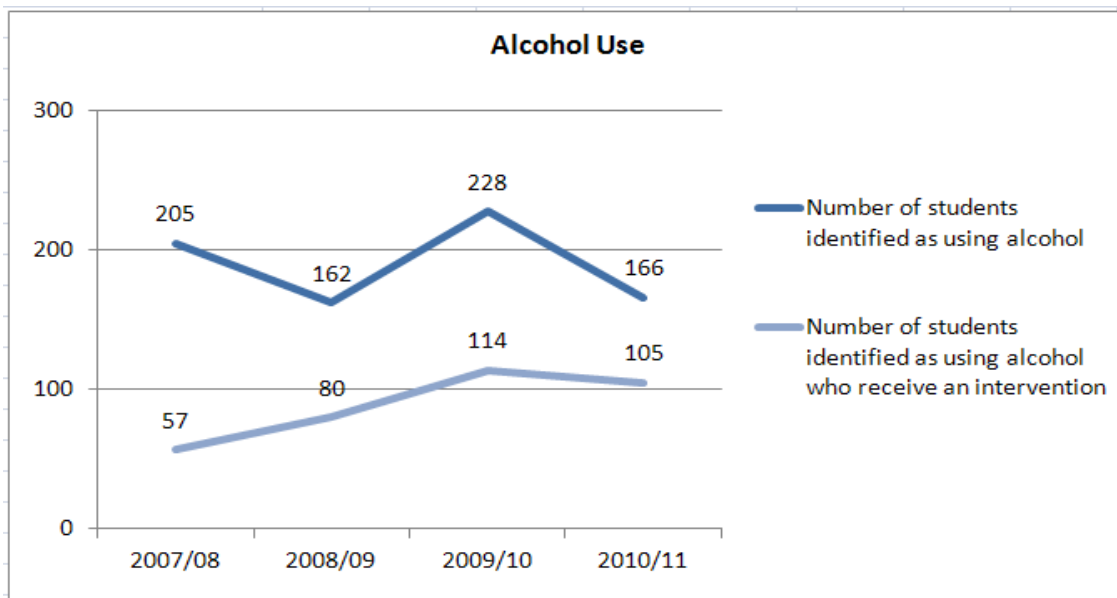


### Alcohol Use

SBHC providers can provide guidance and assistance for students who may not be willing to receive services from a substance abuse counselor.<sup>15</sup>

- The number of SBHC users screened and identified as using alcohol **decreased 4%** from 2007/08 to 2010/11

**Chart 16. Number of SBHC users at-risk for alcohol use, who receive an intervention**



**Table 31: Number and percentage of SBHC users screened for alcohol use, who receive an intervention**

	2007/08	2008/09	2009/10	2010/11
Number of students screened for alcohol use (% to SBHC users)	1,895 (52%)	2,138 (59%)	2,513 (71%)	2,319 (72%)
Number of students identified as using alcohol (% to those screened for alcohol use)	205 (11%)	162 (8%)	228 (9%)	166 (7%)
Number of students identified as using alcohol who receive intervention (% to those identified as using alcohol)	57 (28%)	80 (49%)	114 (50%)	105 (63%)

<sup>15</sup> Excerpt from "Maine Department of Health and Human Services, Maine Center for Disease Control and Prevention, RFP # 201012851, School-Based Health Center."

## Maine School-based Health Center Four Year Trend Report

### Percentage of students who are screened for alcohol use

- Oxford Hills Middle School (93%) and Portland High School (92%) had the highest four-year averages of SBHC users screened for alcohol use.
- Oxford Hills High School, Noble District School, and Calais School had the largest percentage increases of SBHC users screened for alcohol use over the four years.

**Table 32. Percentage of SBHC users who are screened for alcohol use by health center**

	2007/08	2008/09	2009/10	2010/11	Average
<b>Average</b>	<b>52%</b>	<b>59%</b>	<b>70%</b>	<b>72%</b>	<b>64%</b>
Auburn Middle School	50%	32%	87%	66%	58%
Brewer High School	85%	64%	94%	83%	84%
Brewer Middle School	81%	86%	86%	83%	84%
Calais Schools	24%	40%	40%	43%	37%
Casco Bay High School	85%	84%	93%	92%	88%
Cony Middle & High School	--	20%	88%	--	51%
Deering High School	85%	94%	91%	87%	89%
Edward Little High School	60%	30%	61%	59%	53%
King Middle School	60%	71%	72%	65%	67%
Lewiston High School	27%	34%	14%	26%	26%
Lewiston Middle School	49%	70%	57%	61%	59%
Lubec Consolidated School	1%	2%	--	--	2%
Maranacook Schools	54%	42%	58%	57%	52%
Mattawcook Academy	70%	65%	95%	93%	84%
Mt. Ararat High School	63%	96%	91%	86%	85%
Noble District School	28%	3%	2%	61%	25%
Oxford Hills High School	23%	85%	91%	97%	75%
Oxford Hills Middle School	80%	96%	96%	99%	93%
Portland High School	90%	97%	95%	89%	92%

### Performance Indicator 2.9: Percentage of those identified as using alcohol who receive brief counseling or another evidence based intervention by an SBHC provider

- Mattanawcook Academy (83%) and Lewiston High School (71%) showed the highest four-year averages of SBHC users at-risk for alcohol use who received counseling.
- Deering High School, Oxford Hills High School, and Lewiston High School had the largest percentage increases of SBHC users at-risk for alcohol use who received counseling over the four years.

**Table 33. Percentage of SBHC users at-risk for alcohol use who receive an intervention by health center**

	2007/08	2008/09	2009/10	2010/11	Average
<b>Average</b>	<b>28%</b>	<b>49%</b>	<b>50%</b>	<b>63%</b>	<b>48%</b>
Auburn Middle School	50%	0%	0%	0%	13%
Brewer High School	0%	33%	93%	100%	57%
Brewer Middle School	0%	100%	No Risk	0%	33%
Calais Schools	0%	0%	0%	17%	4%
Casco Bay High School	17%	40%	50%	50%	39%
Cony Middle & High School	--	No Risk	87%	--	--
Deering High School	6%	55%	19%	48%	32%
Edward Little High School	64%	8%	31%	38%	35%
King Middle School	No Risk	0%	No Risk	No Risk	0%
Lewiston High School	14%	100%	71%	100%	71%
Lewiston Middle School	0%	No Risk	100%	No Risk	50%
Lubec Consolidated School	No Risk	No Risk	--	--	--
Maranacook Schools	38%	35%	67%	46%	47%
Mattanawcook Academy	69%	100%	77%	86%	83%
Mt. Ararat High School	12%	35%	18%	78%	36%
Noble District School	0%	No Risk	0%	93%	31%
Oxford Hills High School	11%	65%	81%	90%	23%
Oxford Hills Middle School	No Risk	50%	50%	No Risk	50%
Portland High School	38%	68%	46%	40%	47%

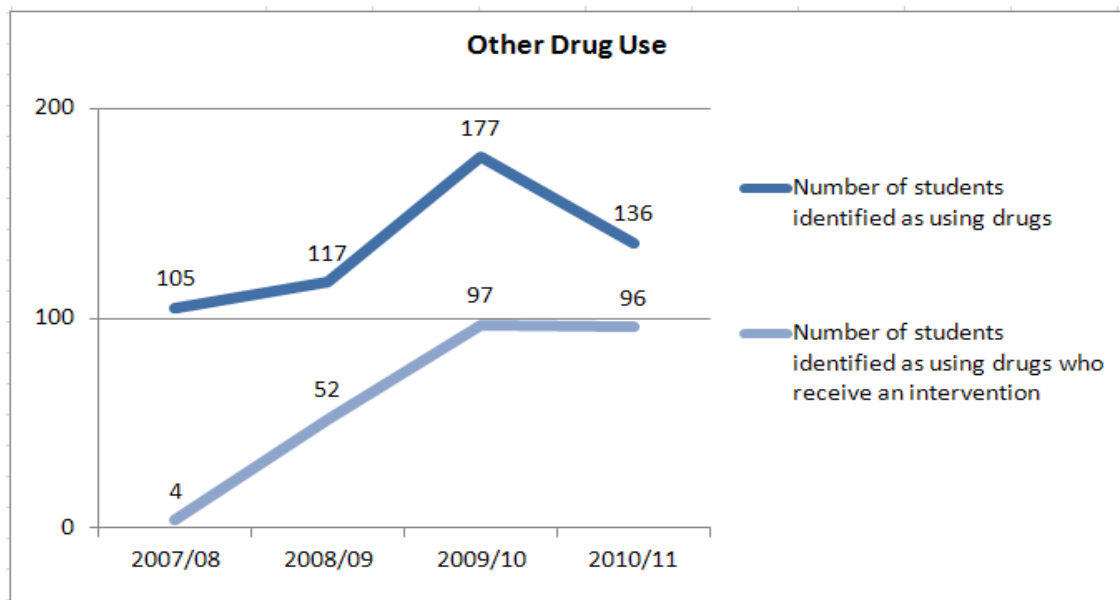
No Risk: Where a SBHC reported not having students at-risk "No Risk" represents the percentage rather than 0%.

### ***Other Drug Use***

*SBHC providers can provide guidance and assistance for students who may not be willing to receive services from a substance abuse counselor.*<sup>16</sup>

- The number of SBHC users screened and identified as using other drugs **increased 30%** from 2007/08 to 2010/11.

**Chart 17. Number of SBHC users at-risk for other drug use, who receive an intervention**



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<sup>16</sup> Excerpt from "Maine Department of Health and Human Services, Maine Center for Disease Control and Prevention, RFP # 201012851, School-Based Health Center."

**Table 34. Number and percentage of SBHC users screened for other drug use  
who receive an intervention**

	<b>2007/08</b>	<b>2008/09</b>	<b>2009/10</b>	<b>2010/11</b>
Number screened for drug use (% to all SBHC users)	1,761 (49%)	2,138 (59%)	2,515 (71%)	2,319 (72%)
Number of those identified as using drugs (% to those screened for drug use)	105 (6%)	117 (6%)	177 (7%)	136 (6%)
Number of those identified as using drugs who receive intervention (% to those identified as using other drugs who receive treatment)	4 (4%)	52 (44%)	97 (55%)	96 (71%)

## Maine School-based Health Center Four Year Trend Report

### Percentage of students who are screened for other drugs

- Oxford Hills Middle School (93%), Portland High School (93%), and Deering High School (90%) had the highest four-year averages of SBHC users screened for other drug use.
- Oxford Hills High School and Mt. Ararat had the largest percentage increases of SBHC users screened for other drug use over the four years.

**Table 35. Percentage of SBHC users who are screened for other drug use by health center**

	2007/08	2008/09	2009/10	2010/11	Average
<b>Average</b>	<b>48%</b>	<b>59%</b>	<b>71%</b>	<b>72%</b>	<b>63%</b>
Auburn Middle School	50%	32%	88%	66%	58%
Brewer High School	84%	64%	94%	83%	84%
Brewer Middle School	79%	86%	86%	83%	84%
Calais Schools	24%	41%	40%	43%	37%
Casco Bay High School	85%	84%	94%	92%	88%
Cony Middle & High School	--	20%	87%		51%
Deering High School	86%	94%	91%	89%	90%
Edward Little High School	60%	30%	61%	59%	50%
King Middle School	25%	71%	72%	65%	60%
Lewiston High School	27%	33%	14%	26%	25%
Lewiston Middle School	49%	70%	57%	61%	59%
Lubec Consolidated School	1%	2%	--	--	2%
Maranacook Schools	54%	42%	58%	57%	52%
Mattawcook Academy	68%	64%	95%	92%	83%
Mt. Ararat High School	27%	97%	91%	85%	77%
Noble District School	27%	3%	2%	61%	25%
Oxford Hills High School	23%	85%	92%	97%	75%
Oxford Hills Middle School	80%	96%	96%	99%	93%
Portland High School	90%	97%	96%	89%	93%

## Maine School-based Health Center Four Year Trend Report

### Performance Indicator 2.10: Percentage of those identified as using other drugs who receive brief counseling and/or other evidence-based intervention by a SBHC provider

- Lewiston Middle School (100%), Brewer High School (78%), and Lewiston High School (75%) showed the highest four-year averages of SBHC users at-risk for other drug use who received counseling.
- Mt. Ararat High School, Edward Little High School, and Lewiston High School had the largest percentage increases of SBHC users at-risk for other drug use who received counseling over the four years.

**Table 36. Percentage of SBHC users at-risk for other drug use, who receive an intervention by health center**

	2007/08	2008/09	2009/10	2010/11	Average
<b>Average</b>	<b>4%</b>	<b>44%</b>	<b>55%</b>	<b>71%</b>	<b>43%</b>
Auburn Middle School	No Risk	No Risk	No Risk	0%	0%
Brewer High School	0%	50%	100%	92%	78%
Brewer Middle School	No Risk	100%	No Risk	0%	50%
Calais Schools	No Risk	67%	0%	40%	40%
Casco Bay High School	0%	0%	45%	40%	33%
Cony Middle & High School	--	0%	73%	--	65%
Deering High School	0%	35%	29%	56%	28%
Edward Little High School	15%	14%	38%	50%	26%
King Middle School	No Risk	0%	No Risk	No Risk	0%
Lewiston High School	50%	75%	75%	100%	75%
Lewiston Middle School	No Risk	No Risk	100%	No Risk	100%
Lubec Consolidated School	No Risk	No Risk	--	--	--
Maranacook Schools	0%	38%	63%	57%	33%
Mattawcook Academy	0%	100%	75%	82%	71%
Mt. Ararat High School	8%	73%	25%	80%	46%
Noble District School	0%	No Risk	0%	100%	71%
Oxford Hills High School	0%	61%	81%	92%	71%
Oxford Hills Middle School	0%	100%	50%	100%	71%
Portland High School	0%	27%	56%	42%	32%

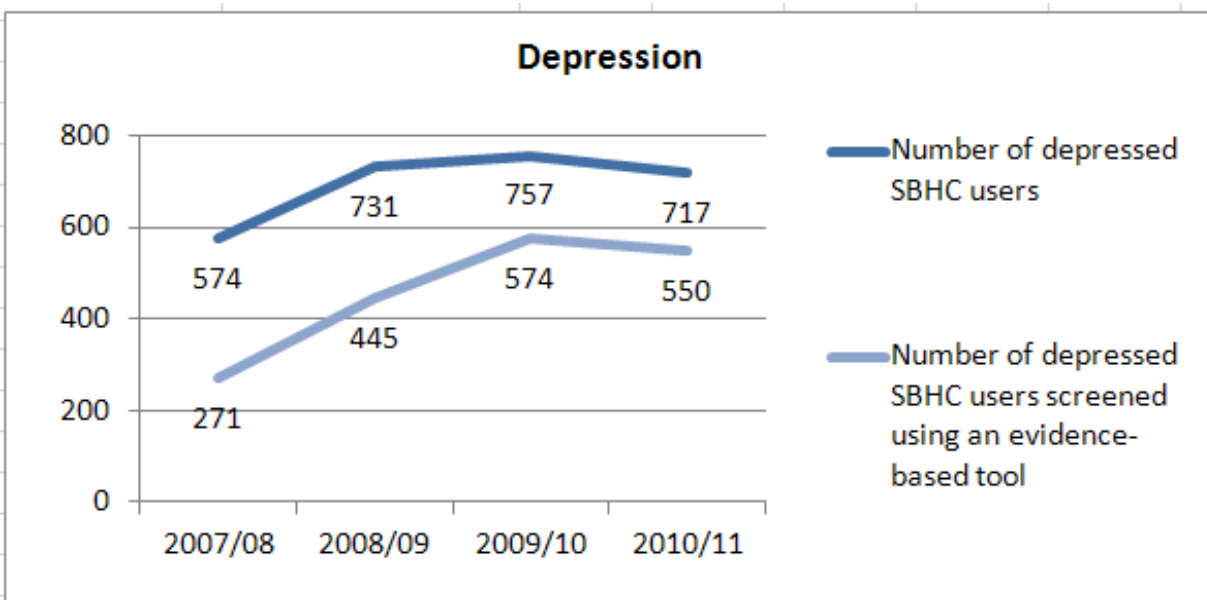
No Risk: Where a SBHC reported not having students at-risk, "No Risk" represents the percentage rather than 0%.

## Depression

*Depression is one of the most common behavioral health issues for adolescents, and is a prevalent risk factor for suicide. Those adolescents who self-identify as depressed should get further screening in order to determine the need for referrals for additional services, including assessment of suicidality when indicated. Evidence-based tools increase the accuracy of clinical assessments and are helpful in communicating with referral agencies.*<sup>17</sup>

- The number of SBHC users identified as depressed and screened using an evidence-based tool for depression increased 30% from 2007/08 to 2010/11.

**Chart 18. Number of depressed SBHC users who receive further screening for depression**



**Table 37. Number and percentage of depressed SBHC users, who receive further screening for depression**

	2007/08	2008/09	2009/10	2010/11
Number of depressed users (% to SBHC users)	574 (16%)	731 (20%)	757 (21%)	717 (22%)
Number of depressed users screened using an evidence-based tool (% to number of depressed users)	271 (47%)	445 (61%)	574 (76%)	550 (77%)

<sup>17</sup> Excerpt from "Maine Department of Health and Human Services, Maine Center for Disease Control and Prevention, RFP # 201012851, School-Based Health Center."



## Maine School-based Health Center Four Year Trend Report

### Performance Indicator 2.11: Percentage of depressed users who are screened for depression using an evidence-based tool

- Oxford Hills Middle School (100%), Oxford Hills High School (94%), and Mt. Ararat High School (95%) had the highest four-year averages of depressed SBHC users further screened for depression.
- Lewiston High School, Oxford Hills High School, and Deering High School had the largest percentage increases of depressed SBHC users further screened for depression over the four years.

**Table 38. Percentage of depressed SBHC users who receive further screening for depression by health center**

	2007/08	2008/09	2009/10	2010/11	Average
<b>Average</b>	<b>47%</b>	<b>61%</b>	<b>76%</b>	<b>77%</b>	<b>65%</b>
Auburn Middle School	60%	65%	84%	87%	74%
Brewer High School	51%	81%	90%	92%	79%
Brewer Middle School	32%	90%	80%	95%	72%
Calais Schools	80%	94%	78%	69%	80%
Casco Bay High School	0%	76%	85%	76%	69%
Cony Middle & High School	--	7%	63%	--	46%
Deering High School	20%	87%	86%	74%	70%
Edward Little High School	53%	60%	59%	64%	58%
King Middle School	0%	80%	91%	82%	77%
Lewiston High School	14%	27%	71%	56%	42%
Lewiston Middle School	30%	6%	78%	81%	56%
Lubec Consolidated School	80%	0%	--	--	44%
Maranacook Schools	50%	27%	62%	39%	44%
Mattawcook Academy	41%	78%	96%	93%	82%
Mt. Ararat High School	64%	96%	100%	95%	90%
Noble District School	67%	0%	0%	33%	25%
Oxford Hills High School	25%	98%	93%	94%	94%
Oxford Hills Middle School	No Risk	100%	89%	100%	96%
Portland High School	31%	98%	98%	75%	78%

No Risk: Where a SBHC reported not having students at-risk "No Risk" represents the percentage rather than 0%.

**Performance Indicator 2.12: Number of students who are identified as suicidal and receive immediate help.**

*Suicide can often be prevented when providers provide immediate support for students who express suicidal thoughts. Health Care providers can provide an opportunity for students to share suicidal thoughts, and intervene with students who do so.<sup>18</sup>*

**Table 39. Number and percentage of students who are identified as suicidal and receive immediate help**

	2007/08	2008/09	2009/10	2010/11
Number of students with a suicidal ideation or suicide attempt diagnosis	10	13	9	5
2.12 Percentage of students who are identified as suicidal and receive immediate help	90% (9)	38% (5)	44% (4)	40% (2)

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<sup>18</sup> Excerpt from “Maine Department of Health and Human Services, Maine Center for Disease Control and Prevention, RFP # 201012851, School-Based Health Center.”

*Objective 3:* Establish sustainable SBHC services through stable enrollment and utilization, through other funding sources, partnerships and supports of the SBHC and through sound medical practice.

*SBHCs that are under-utilized will not demonstrate outcomes for the student population and may therefore not maintain community and school support. Higher utilization rates make more efficient use of provider resources. Lower utilization rates may indicate un-resolved barriers to care in the SBHC.* <sup>19</sup>

- The percentage of eligible students enrolled four-year **average is 52%**.
- The percentage of enrolled students with at least one SBHC visit **increased 9%** from 2007/08 to 2010/11.
- The percentage of enrolled students with health insurance (public or private) four-year **average is 86%**.
- The percentage of uninsured or unknown insurance four-year **average is 11%**.

**Table 40. Number and percentage of enrollees, who have visited a SBHC, and have insurance**

Performance Indicator:	2007/08	2008/09	2009/10	2010/11
3.2 Percentage of eligible students enrolled in the SBHC <sup>20</sup>	7,659 (52%)	7,821 (55%)	7,121 (52%)	5,440 (44%)
3.3 Percentage of students enrolled in the SBHC who are seen for at least one visit during the year <sup>21</sup>	3,634 (50%)	3,607 (46%)	3,565 (45%)	3,199 (59%)
3.4 Percentage of students enrolled in SBHC who have insurance <sup>22</sup>	6,895 (90%)	6,957 (89%)	6,399 (90%)	4,863 (89%)

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<sup>19</sup> Excerpt from “Maine Department of Health and Human Services, Maine Center for Disease Control and Prevention, RFP # 201012851, School-Based Health Center.”

<sup>20</sup> **Chart 2. Number of students enrolled and percentage of school population enrolled, page 5**

<sup>21</sup> **Chart 3. Number of SBHC users and the percentage of students enrolled using a school-based health center, page 7**

<sup>22</sup> **Table 4. Percentage of health insurance coverage, by enrollees, users, and encounters, page 10**

## SECTION 4: OPTIONAL EXTENDED SERVICES OBJECTIVES AND PERFORMANCE INDICATORS

### Objective 4: *Reproductive Health – Optional Enhanced Services*

Reduce enrolled students' risky sexual behavior and unmet reproductive health care needs (for those SBHCs offering enhanced reproductive services). The core elements for full reproductive health services include birth control prescriptions, follow-up and emergency contraception. Reproductive health services should be available to both young men and young women.<sup>23</sup>

#### Performance Indicator 4.1: Percentage of sexually active users who receive a sexually transmitted disease (STD) screening

*Young women have a disproportionate number of positive Chlamydia tests. Less young men are tested for Chlamydia, are also likely to have higher rates of this and other STDs. Testing of sexually active teens is essential to getting treatment, reducing the spread of STDs and preventing health problems due to STDs.*<sup>24</sup>

**Table 41. Percentage of sexually active SBHC users who receive a sexually transmitted disease (STD) screening by health center\***

	2007/08	2008/09	2009/10	2010/11	Average
<b>Average</b>	<b>45%</b>	<b>31%</b>	<b>21%</b>	<b>23%</b>	<b>30%</b>
Calais Schools	53%	24%	22%	2%	25%
Casco Bay High School	31%	32%	47%	52%	39%
Deering High School	43%	37%	23%	24%	32%
King Middle School	29%	33%	20%	100%	31%
Lubec Consolidated School	0%	--	--	--	0%
Maranacook Schools	11%	12%	20%	8%	13%
Mattanawcook Academy	69%	33%	0%	0%	15%
Portland High School	61%	44%	33%	60%	50%

\*SBHC users from the thirteen health centers offering enhanced reproductive health services.

<sup>23</sup> Excerpt from "Maine Department of Health and Human Services, Maine Center for Disease Control and Prevention, RFP # 201012851, School-Based Health Center."

<sup>24</sup> Excerpt from "Maine Department of Health and Human Services, Maine Center for Disease Control and Prevention, RFP # 201012851, School-Based Health Center."

### Performance Indicator 4.2: Percentage of sexually active users who receive condoms and counseling

*Condoms are an important STD reduction strategy for sexually active teens. Inconsistent and ineffective use is common for this age group, and counseling can improve consistency and skills.* <sup>25</sup>

**Table 42. Percentage of sexually active SBHC users  
who received condoms and counseling by health center\***

	2007/08	2008/09	2009/10	2010/11	Average
<b>Average</b>	<b>11%</b>	<b>13%</b>	<b>13%</b>	<b>16%</b>	<b>13%</b>
Calais Schools	21%	34%	34%	49%	35%
Casco Bay High School	10%	9%	9%	9%	9%
Deering High School	10%	12%	9%	6%	9%
King Middle School	14%	0%	0%	0%	6%
Lubec Consolidated School	50%	--	--	--	0%
Maranacook Schools	8%	21%	33%	39%	25%
Mattawcook Academy	16%	12%	4%	6%	8%
Portland High School	7%	2%	5%	7%	5%

\*SBHC users from the thirteen health centers offering enhanced reproductive health services.

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<sup>25</sup> Excerpt from “Maine Department of Health and Human Services, Maine Center for Disease Control and Prevention, RFP # 201012851, School-Based Health Center.”

### Performance Indicator 4.3: Percentage of sexually active users who receive birth control from the SBHC

*Teen pregnancy has long-term social, health and economic consequences. Consistent and continued use of birth control is necessary for effective teen pregnancy prevention. Adolescents are typically less effective birth control users than older users.* <sup>26</sup>

**Table 43. Percentage of sexually active SBHC users who received birth control from the SBHC by health center**

	2007/08	2008/09	2009/10	2010/11	Average
Average	43%	40%	64%	34%	45%
Calais Schools	47%	50%	61%	54%	53%
Casco Bay High School	44%	44%	69%	48%	51%
Deering High School	38%	38%	38%	26%	36%
King Middle School	29%	67%	40%	0%	38%
Lubec Consolidated School	50%	--	--	--	0%
Maranacook Schools	56%	54%	82%	64%	64%
Mattanawcook Academy	69%	18%	91%	8%	49%
Portland High School	30%	30%	51%	36%	36%

\*SBHC users from the thirteen health centers offering enhanced reproductive health services.

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<sup>26</sup> Excerpt from “Maine Department of Health and Human Services, Maine Center for Disease Control and Prevention, RFP # 201012851, School-Based Health Center.”

**Objective 5: Behavioral Health - Optional Enhanced Services**

Reduce enrolled student's unmet behavioral health care needs.<sup>27</sup>

In addition to basic services, some school-based health centers offer additional enhanced behavioral health. School-based health centers with enhanced services provide a minimum of 16 – 24 hours of behavioral health services by licensed professionals. (Appendix B)

Thirteen out of nineteen schools offered enhanced behavioral health services at the SBHC.

**Table 44. Number and percentage of students who are screened for depression, are identified as needing behavioral health services, and receive an intervention and show improvement**

Performance Indicator	2007/08	2008/09	2009/10	2010/11	Average
5.1 Percentage of all users* who are screened for depression using an evidence-based tool	417 (17%)	1,102 (42%)	1,728 (64%)	1,592 (68%)	48%
5.2 Percentage of students identified as needing behavioral health care who receive it at the SBHC	264 (73%)	454 (88%)	759 (85%)	727 (91%)	86%
5.3 Percentage of behavioral health service users who progress in treatment over the school year, based on an evidence-based measure	132 (22%)	136 (30%)	166 (22%)	130 (18%)	22%

\*SBHC users from the thirteen health centers offering enhanced behavioral health services.

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<sup>27</sup> Excerpt from “Maine Department of Health and Human Services, Maine Center for Disease Control and Prevention, RFP # 201012851, School-Based Health Center.”

### Performance Indicator 5.1: Percentage of all SBHC users who are screened for depression using an evidence-based tool

*Depression is one of the most common behavioral health issues for adolescents, and is a risk factor for suicide. Universal screening for adolescents can provide for early intervention when behavioral health services are available. Evidence-based tools increase the accuracy of clinical assessments and are helpful in communicating with referral agencies.* <sup>28</sup>

**Table 45. Percentage of SBHC users\* who are screened for depression using an evidence-based tool by health center**

	2007/08	2008/09	2009/10	2010/11	Average
Average	17%	42%	64%	68%	48%
Auburn Middle School	35%	30%	92%	89%	59%
Brewer High School	19%	65%	95%	83%	73%
Brewer Middle School	12%	86%	86%	83%	69%
Calais Schools	21%	18%	14%	14%	16%
Cony Middle & High School	--	3%	47%	--	24%
Deering High School	4%	71%	50%	64%	48%
Edward Little High School	14%	33%	56%	75%	38%
Lewiston High School	2%	26%	35%	45%	26%
Lewiston Middle School	2%	2%	75%	79%	44%
Maranacook Schools	24%	10%	22%	16%	18%
Mattanawcook Academy	68%	67%	96%	94%	84%
Mt. Ararat High School	17%	97%	93%	90%	77%
Portland High School	4%	90%	85%	83%	65%

\*SBHC users from the thirteen health centers offering enhanced behavioral health services.

<sup>28</sup> Excerpt from “Maine Department of Health and Human Services, Maine Center for Disease Control and Prevention, RFP # 201012851, School-Based Health Center.”



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### Performance Indicator 5.2: Percentage of students identified as needing behavioral health care who receive it at the SBHC

*The need for behavioral health services for children exceeds their availability. Untreated behavioral health issues can affect the student's physical health, academic performance, family life and other outcomes.* <sup>29</sup>

**Table 46. Percentage of SBHC users identified as needing behavioral health services who receive an intervention at the SBHC by health center**

	2007/08	2008/09	2009/10	2010/11	Average
Average	73%	88%	85%	91%	86%
Auburn Middle School	50%	56%	94%	99%	88%
Brewer High School	74%	100%	61%	88%	78%
Brewer Middle School	100%	79%	100%	100%	93%
Calais Schools	92%	100%	74%	62%	80%
Cony Middle & High School	--	97%	100%	--	98%
Deering High School	15%	100%	100%	93%	65%
Edward Little High School	80%	74%	77%	82%	79%
Lewiston High School	93%	92%	86%	96%	91%
Lewiston Middle School	0%	100%	96%	100%	98%
Maranacook Schools	93%	95%	62%	92%	86%
Mattawcook Academy	96%	100%	97%	99%	98%
Mt. Ararat High School	93%	64%	55%	65%	67%
Portland High School	15%	100%	100%	81%	72%

\*SBHC users from the thirteen health centers offering enhanced behavioral health services.

<sup>29</sup> Excerpt from "Maine Department of Health and Human Services, Maine Center for Disease Control and Prevention, RFP # 201012851, School-Based Health Center."

### Performance Indicator 5.3: Percentage of behavioral health service users who progress in treatment over the school year, based on an evidence-based measure

*Periodic assessment of patient progress is important for measuring the effectiveness of treatment and assuring that there are long-term positive results for students. Although tools exist for measuring client progress, there is not one common tool used in school-based behavioral health programs. Adoption of an evidence-based tool increases the accuracy of clinical assessments.* <sup>30</sup>

**Table 47. Percentage of behavioral health service users who progress in treatment over the school year by health center**

	2007/08	2008/09	2009/10	2010/11	Average
Average	22%	30%	22%	18%	22%
Auburn Middle School	0%	4%	0%	0%	1%
Brewer High School	51%	25%	27%	18%	33%
Brewer Middle School	43%	27%	11%	30%	31%
Calais Schools	50%	72%	62%	46%	58%
Cony Middle & High School	--	45%	28%	--	39%
Deering High School	0%	50%	40%	0%	21%
Edward Little High School	13%	0%	12%	16%	12%
Lewiston High School	13%	18%	28%	24%	20%
Lewiston Middle School	0%	18%	27%	27%	25%
Maranacook Schools	39%	86%	59%	48%	55%
Mattanawcook Academy	24%	6%	16%	10%	14%
Mt. Ararat High School	48%	24%	35%	35%	36%
Portland High School	0%	50%	32%	0%	22%

\*SBHC users from the thirteen health centers offering enhanced behavioral health services.

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<sup>30</sup> Excerpt from “Maine Department of Health and Human Services, Maine Center for Disease Control and Prevention, RFP # 201012851, School-Based Health Center.”

## **Objective 6: Oral Health - Optional Extended Services**

*Reduce enrolled students' unmet oral health care needs.<sup>31</sup>*

In the 2010-11 school year, twelve out of nineteen school-based health centers offered enhanced oral health services.

**Table 48. Number and percentage of SBHC users\* who are screened for oral health services, who receive restorative oral health services.**

Performance Indicator	2007/08	2008/09	2009/10	2010/11	Average	% Change 2007/08 to 2010/11
6.1 Percentage of SBHC users* who receive an oral health cleaning and are screened for dental caries and oral disease	596 (24%)	645 (26%)	592 (24%)	634 (28%)	25%	17%
6.2 Percentage of students identified as needing restorative oral health care who receive it during the school year	1 (1%)	23 (14%)	14 (5%)	33 (16%)	9%	1,031%

\* SBHC users from the twelve health centers offering extended oral health services.

<sup>31</sup> Excerpt from "Maine Department of Health and Human Services, Maine Center for Disease Control and Prevention, RFP # 201012851, School-Based Health Center."

## Maine School-based Health Center Four Year Trend Report

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### Performance Indicator 6.1: Percentage of SBHC users\* who receive an oral health cleaning and are screened for dental caries and oral disease

*There are a significant number of Maine children without a regular source of dental care. SBHC oral health services can fill this gap with screening and cleaning services that will prevent oral disease and identify additional oral health needs.<sup>32</sup>*

**Table 49. Percentage SBHC users who received a cleaning and screening for oral health services by health center**

	2007/08	2008/09	2009/10	2010/11	Average
Average	24%	26%	24%	28%	23%
Auburn Middle School	15%	30%	16%	20%	20%
Brewer High School	12%	15%	21%	24%	19%
Brewer Middle School	23%	7%	6%	27%	15%
Calais Schools	36%	22%	24%	22%	26%
Casco Bay High School	38%	46%	33%	29%	37%
Deering High School	25%	21%	31%	40%	29%
Edward Little High School	7%	12%	16%	21%	12%
King Middle School	31%	40%	48%	44%	42%
Lewiston High School	18%	30%	18%	29%	24%
Lewiston Middle School	39%	47%	30%	21%	33%
Lubec Consolidated School	78%	71%	--	--	75%
Mattanawcook Academy	20%	7%	14%	17%	15%
Portland High School	24%	23%	21%	32%	25%

\* SBHC users from the twelve health centers offering extended oral health services.

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<sup>32</sup> Excerpt from “Maine Department of Health and Human Services, Maine Center for Disease Control and Prevention, RFP January 2006.”

**Performance Indicator 6.2: Percentage of students identified as needing restorative oral health care who receive it**

*Restorative oral health care is a significant unmet need for students. Timely care can prevent further tooth decay and short and long-term health consequences.<sup>33</sup>*

**Table 50. Percentage of students identified as needing external oral health services, who receive services outside the SBHC by health center**

	2007/08	2008/09	2009/10	2010/11	Average
<b>Average</b>	<b>1%</b>	<b>14%</b>	<b>4%</b>	<b>16%</b>	<b>9%</b>
Auburn Middle School	0%	4%	18%	0%	6%
Brewer High School	0%	NN	NN	NN	0%
Brewer Middle School	0%	NN	NN	NN	0%
Calais Schools	0%	4%	17%	0%	6%
Casco Bay High School	NN	NN	0%	0%	0%
Deering High School	NN	NN	0%	0%	0%
Edward Little High School	7%	0%	11%	26%	11%
King Middle School	NN	NN	0%	48%	14%
Lewiston High School	NN	NN	NN	0%	18%
Lewiston Middle School	0%	0%	0%	18%	4%
Lubec Consolidated School	NN	NN	--	--	--
Mattanawcook Academy	0%	86%	NN	NN	75%
Portland High School	NN	NN	0%	12%	5%

NN-No restorative oral health need reported

<sup>33</sup> Excerpt from “Maine Department of Health and Human Services, Maine Center for Disease Control and Prevention, RFP January 2006.”

## **APPENDIX A: RACE, ETHNICITY, GENDER, AND AGE**

**Table 51: Maine and United States Race and Ethnicity <sup>34</sup>**

	<b>Maine</b>	<b>US</b>
White persons, percent, 2010	95.2%	72.4%
Black persons	1.2%	12.6%
American Indian and Alaska Native persons	0.6%	0.9%
Asian persons	1.0%	4.8%
Native Hawaiian and Other Pacific Islander	Z <sup>35</sup>	0.2%
Persons reporting two or more races	1.6%	2.9%
Persons of Hispanic or Latino origin	1.3%	16.3%
White persons not Hispanic	94.4%	63.7%

**Table 52: Maine and United States Gender and Age**

	<b>Maine</b>	<b>US</b>
Female persons	51.2%	50.7%
Persons under 18 years old, percent, 2009	20.6%	24.3%

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<sup>34</sup> United States Census Bureau <http://quickfacts.census.gov/qfd/states/23000.html>

<sup>35</sup> Z: Value greater than zero but less than half unit of measure shown

## **APPENDIX B: ENHANCED HEALTH SERVICES<sup>36</sup>**

Reproductive Health

Behavioral Health

Oral Health

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<sup>36</sup> Excerpt from “Maine Department of Health and Human Services, Maine Center for Disease Control and Prevention, RFP January 2006.”



### **Required Elements for Enhanced Funding**

The following elements are requirements for proposals that include funding for the optional enhanced services. The core elements **must** be included for a proposal to be funded. If these elements are not clearly present in the section of the proposal indicated after each element below, the additional funding will not be awarded, regardless of the proposal's score. Inclusion of the additional elements will strengthen the proposal, and if missing in awarded proposals, will be need to be addressed by the bidder during contract negotiations.

### **Reproductive Health Services**

#### *Core elements:*

- Full reproductive health services must be provided including birth control prescriptions, follow-up and emergency contraception. Reproductive health services should be available to both young men and young women. See *Site Information*, **Appendix D-3**.

#### *Additional requirements:*

- Reproductive health services must be provided confidentially according to Maine law on minor consent to care. See **Appendix I**. Parental consent can be required for initial enrollment.
- The ability to obtain third party reimbursement should not be factored into decisions on informing parents of reproductive health services.
- All services and patients should be considered part of the SBHC, and data on these students and visits, including diagnostic data, should be submitted on a de-identified basis to the TYAHP or its evaluation contractors, as specified in the requirements for basic services. Agreements with subcontractors should allow for necessary information exchange.

### **Behavioral Health Services**

#### *Core elements:*

- A minimum of 16, 20, or 24 hours of behavioral health services by licensed professionals should be provided at the SBHC, depending on the Tier of funding, as indicated in the *Site Information*, **Appendix D-3**. See **RFP Section 1.3**. At least half of these hours must be staffed by professionals whose services are reimbursable by MaineCare.

#### *Additional requirements:*

- The SBHC must have space that provides for confidentiality and is appropriate for behavioral health counseling.
- Depression screening using an evidence-based tool shall be provided to all regular SBHC users, with parental permission.

- Substance abuse counseling must be available at the SBHC or at the school by referral. The use of evidence-based screening tools by the health care providers is encouraged.
- Behavioral health services should be designed using evidence-based models and practices.
- Behavioral health services should be integrated into the SBHC health care services, with communication and coordination of care across disciplines.
- Students who receive behavioral health care through the SBHC shall have a plan for continuity and coordination of care over vacations and in the event of crisis or emergency needs. SBHC policies on coordination of care must specifically address behavioral health as well as physical health.
- Psychiatric consultation must be available both to the behavioral health provider and the primary care providers.
- Behavioral health providers must have the ability to bill MaineCare, but services must be available to ALL enrolled students regardless of the ability to bill. Fees for services should be adjusted to the family's ability to pay.
- SBHCs must have agreements with their local crisis service provider for emergency services. More information about these services and a sample contract can be found in the Maine Youth Suicide Program's Youth Suicide Prevention, Intervention, and Post-intervention Guidelines, at <http://www.state.me.us/suicide/guidelines02.doc>. Note: this is strongly recommended for all SBHCs, regardless of whether enhanced services are included in the proposal.
- All services and patients shall be considered part of the SBHC, and data on these students and visits, including diagnostic data, should be submitted on a de-identified basis to the TYAHP or its evaluation contractors, as specified in the requirements for basic services. Agreements with subcontractors should allow for necessary information exchange.
- The behavioral health service provider shall provide technical support to the SBHC and the SAU staff to increase awareness of the signs and symptoms of behavioral health issues.

### **Oral Health Services**

#### *Core elements:*

- The SBHC must have at least one written MOU with a dentist, dental clinic, or dental center within 60 miles of the school, who will accept patient referrals for restorative care from the SBHC, as evidenced by documentation in proposal's attachments. The MOU should specify that at the minimum, such referrals will be accepted in order to resolve the identified oral health problem; the provision of an ongoing source of dental care (a dental home) by accepting the student as a patient of record would be the best outcome. If the restorative care is located beyond 60 miles, clear justification must be included, with a description of how transportation barriers will be reduced.
- The SBHC must have a pending employment or contractual agreement with a dental hygienist for the services to be provided, as evidenced by documentation in the proposal's attachments. See **Appendix K** for guidelines for evaluating proposed

dental hygienist services in schools. *Note: the guidelines in the appendix are not requirements.*

- Dental hygienist services must be available at least 1 day per month and of a frequency appropriate to the SBHC population's needs, as documented on *Services Information, Appendix D-4*.

*Additional requirements:*

- MaineCare shall be billed as appropriate and allowable for MaineCare members receiving oral health services, but services must be available to ALL enrolled students regardless of the ability to bill for offered services. Fees for services should be adjusted to the family's ability to pay.
- All services and patients should be considered part of the SBHC, and data on these students and visits, including diagnostic data, should be submitted on a de-identified basis to the TYAHP or its evaluation contractors, as specified in the requirements for basic services. Agreements with subcontractors should allow for necessary information exchange.