



JOHN R. OISHEI

Children's Hospital

**SCHOOL BASED HEALTH CENTERS**

# **PARENT HANDBOOK**



## *Administrative Offices*

Oishei Children's Outpatient Center  
Conventus Building  
1001 Main Street  
Buffalo, NY 14203  
(716) 323-6503

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<https://www.kaleidahealth.org/care/School-Based-Health-Centers/Resources>

## INTRODUCTION

Welcome to the John R. Oishei Children's Hospital School Based Health Centers. We thank you for allowing us to provide school health services for your child in one of our centers.

The purpose of this handbook is to explain the services we provide. Please refer to this handbook when you have questions, or you may call the health center.

Students and their families WILL NOT be billed for any services provided, however some services may be reimbursed by insurance agencies, for those students who have insurance. Linkage to a Facilitated Enrollment Specialist will be provided to any student or family in need of health insurance.





Kaleida Health

## Mission

To advance the health of our community

## Vision

To provide compassionate, high-value, quality care, improving health in Western New York and beyond, educating future health care leaders and discovering innovative ways to advance medicine

## Values



**C** Remain **centered** around the **patient** and family

**A** Be **accountable** to patients and each other

**R** Show **respect** and **integrity**

**E** Provide **excellence** in all we do

## PRINCIPLES OF SCHOOL BASED HEALTH CENTERS

Comprehensive school based health centers (SBHCs) provide primary, acute and preventive care, first aid, chronic care, youth development, nutrition counseling, health education and mental health services. They regard and provide services for children and adolescents within the context of their family's social, emotional, cultural, physical and educational environment.

- a. SBHC services are developed based on local assessment of needs and resources. Schools having students with the highest prevalence of unmet medical and psychosocial needs are targeted for the establishment of centers.
- b. SBHCs are organized through school, community, and health provider relationships and provide services in keeping with the state and local laws and regulations, established standards and community practice.
- c. The SBHC provides and/or collaborates with your pediatrician to provide comprehensive primary medical, social, youth development, mental health, and health education services designed to meet the psychosocial and physical needs of children and youth within the context of the family, culture, and environment, including:
  - Primary health care services at the SBHC which include: comprehensive health assessments, diagnosis and treatment of minor, acute and chronic medical conditions, and laboratory screenings.

### *PRINCIPLES (continued)*

- Mental health services which include: mental health assessment, crisis intervention, and referrals to community agencies as needed.
  - Health education and wellness programs including nutrition counseling and tobacco-use prevention.
- d. SBHC services are made available only to the students registered in the school and services are provided at no out of pocket cost to those students who enrolled in the SBHC with parental consent.
- e. SBHC services are provided by a multi-disciplinary team which includes a Nurse Practitioner, Mental Health Professional, Physicians, Medical Assistant and Registered Dietitian.
- f. The SBHC provides on-site access during the academic day when school is in session. After school hours including evenings, weekends, and school break, please contact your primary care physician.
- g. A School Health Advisory Committee comprised of teachers, principals, school staff, parents and students meet on a regular basis, to provide input to school health staff regarding the services.





## ENROLLMENT PROCESS

In order for a student to participate in the School Based Health Center, a parent or legal guardian must sign a consent form requesting services and allowing permission to care for their child.

In addition to the consent form, clinic staff will request that additional forms be completed in order to provide us with past medical history information of your child.

It is important that the SBHC be given a list of names and telephone numbers of relatives or friends that parents wish staff to call in case of an emergency, when parents cannot be reach. *PLEASE KEEP THIS INFORMATION UP TO DATE WITH ANY CHANGES.*



If you do not have access to a primary care physician for financial or some other reason, these immunizations may be provided by the School Based Health Center at no cost for enrolled students.

#### HOW YOU CAN HELP US HELP YOUR CHILD

1. Please notify our staff of any legal changes in your child's last name, address, telephone number or custody/guardianship.
2. List any names your child may be listed under for insurance purposes.
3. Notify us of any changes in your child's health insurance.
4. Notify us of any new medical problems or allergies.
5. Notify us of any recurrence of an "old" medical problem.
6. There may be instances when there are outbreaks of contagious illnesses in your child's school such as chickenpox. If an outbreak occurs, it is important for the School Based Health Center staff to identify students who are at risk of serious consequences from exposure to these contagious diseases. Please notify our staff if your child:
  - Is undergoing chemo/radiation therapy
  - Is immunosuppressed
  - Has had a transplant
  - Is receiving steroid therapy
  - Has Sickle Cell Disease
  - Is living in a household with someone who is immunosuppressed, i.e. AIDS.

## OUTLINED SERVICES FOR ENROLLED STUDENTS

### A. Physical Examinations

In accordance with New York State Department of Health Guidelines for School Health Centers, each child enrolled in the School Based Health Center shall have documented evidence of a comprehensive history and physical examination yearly.

If the parent does not provide the health center with a copy of a recent physical completed by the child's primary care provider, we can complete the physical in the health center.

Physical exams are also available when a student wants to participate in school sports, attain working papers, attend summer camps and for college entrance requirements.

We encourage parents to be present for the examination of young children. If we do not have a current health history, we will contact the parent to determine if there has been any change in your child's health, or recent illnesses.

The physical examination will include routine screening based on the child's age and standard pediatric recommendations. The screening may include vision, hearing, urine specimens for sugar and proteins, and a "finger stick" (to get a few drops of blood), to check for anemia.

A PPD skin test may also be completed to assess if your child has been exposed to tuberculosis. Tuberculosis is a communicable respiratory disease). Following these tests, the Nurse Practitioner will complete the physical examination.

If you are not present during the physical exam,



we will share with you any concerns or discuss treatment if it is indicated.

Please remember that you will not be charged for any of these services.

#### **B. Providing Services for the Sick Student**

Any time your child is sick or you have a health concern, you may call the school health center, or send a note to us with your child. Every attempt will be made to have your child seen that day. We will advise your child's primary care provider of the illness and outcome of treatment.

If your child is "well" before school, and feels sick once he/she got to school, the teacher or counselor may refer him/her to the clinic.

If you decide to write us a note about your child, please let us know:

- What you think the problem is earache, cold, etc.?
- How long has this been a problem?
- Is it getting better, worse, or the same?
- How bad do you think it is?
- Has he/she stayed home from school because of his/her sickness?
- Does anyone else in the family have the same symptoms?
- Have you given your child any type of medication? Example: Tylenol.

Please include any other information you feel is important. If there is a telephone number that you may be reached at, please include the number so that we may call you after your child is examined.

When we are unable to reach you by telephone, we will send a note home with your child.

### **Providing Services (continued)**

If your child is given a prescription, and symptoms have NOT improved after three (3) days, please let us know. If any type of rash or allergy develops, stop the medication and immediately call us or your pediatrician.

We may also request to see your child in the School Based Health Center for follow-up, or that your pediatrician follow-up on his/her condition or progress.

The School Based Health Centers are open during active school hours. After school hours, when school is closed, or during school recess/vacations, if your child is ill, you should call your pediatrician.

A physician at John R. Oishei Children's Hospital is on call at all times, and may be contacted by calling 323-2000 and asking to speak with the General Pediatrics Physician on call.

All care and treatment rendered in the School Based Health Center is communicated to the student's primary care provider, if parental consent to release information is given.

### **C. Referrals**

In some cases, your child may need to be seen by a "specialist", or may need to have treatments that are not available at the school, such as eyeglasses, dental, etc. If a referral is needed, we will call you, or send you a note explaining why we feel additional services may be needed.

Please call if you have any questions. Correspondence will also be made with your pediatrician.

#### **D. Medications**

If a student must take medication during school hours, the following guidelines below must be followed:

We require a note from the physician stating that his medication must be given during school hours. The note must state the name of the medication, dosage and duration ("from" and "to dates").

A parent or guardian must bring in the medication in its original container and return to school to pick up any medication left when the timeframe ends.

**ABSOLUTELY NO MEDICATION WILL BE SENT HOME WITH THE CHILD.**

#### **E. Counseling Services**

The School Based Health Centers provide individual and group counseling services for your child for a wide range of mental health and enhancement of life skills.

Some examples of typical concerns might include feelings of depression or anxiety, difficulties with self-esteem, relationships with peers, difficulty making friends, conflicts with authority, and adjustment to the school environment, and the general difficulties of growing up.

You may contact the counselor at the School Based Health Center to refer your child for counseling services at any time. In some instances, your child's teacher, counselor, or other faculty member may refer your child to us.

In those circumstances, you will be contacted and asked to schedule an appointment with the counselor as well so that you can provide us with your perspective and we can also obtain family background information to facilitate providing

### **Counseling Services (continued)**

the most effective counseling service possible. In some cases, we may ask that you attend several sessions with your child. The counselor at the School Based Health Center is available to answer any and all questions you may have regarding your child's counseling. If your child should require additional mental health services that are not provided at the school, e.g. psychiatric evaluation, medication, or a higher level of care, referrals will be provided to local community resources. The social worker will contact you to explain why the referral is necessary.

### **F. Screenings**

New York State Education Law requires that children are checked for vision, hearing, and scoliosis each year. These screenings are provided by the School-Based Health Center for all students registered at the school.

### **G. Immunizations**

New York State Education Law requires that a child be completely immunized in order to start or remain in school. The required immunizations include:

- OPV or IPV (Polio Vaccine)
- DTP or DTap (Diphtheria, Tetanus, Pertussis)
- MMR (Measles, Mumps, Rubella)
- Hepatitis B
- Varicella

Proof of immunizations is required at time of school registration. These immunizations may be obtained from your primary care physician. While at your physician's office, we ask that you please sign a record release to the School Based Health Center, so that we may receive copies of your child's immunizations.



## SERVICES PROVIDED FOR STUDENTS ENROLLED IN THE SCHOOL BASED HEALTH CENTER

### **Free** Services Include:

1. Primary Care coordinated with child's primary pediatrician, including physical exams.
2. Basic First Aid
3. Medications
4. Mental Health Counseling and Youth Development Services
5. Wellness and Health Education
6. Vaccines
7. Sick Care (including prescriptions) and management of chronic conditions in coordination with child's pediatrician
8. Assistance obtaining child medical insurance
9. Basic Screening (height, weight, vision, hearing, blood pressure, scoliosis) as required by the New York State Education Department
10. Nutrition Counseling
11. Basic Laboratory Screenings
12. Referrals for health and support services not available at the SBHC.

### *What does this mean for you?*

1. Your child misses less school.
2. Your day is not interrupted.
3. You miss less time at work.





### **SERVICES PROVIDED FOR STUDENTS NOT** **ENROLLED IN THE SCHOOL BASED HEALTH CENTER**

Services Include:

1. Basic First Aid:
  - Temperature check
  - Injury treatment with ice
  - Bleeding controlled (from nose or cut)
  - Band-Aids
2. Basic Screening (height, weight, vision, scoliosis, hearing, blood pressure) as required by New York State Education Department.
3. Wellness and Health Education

#### ***What does this mean for you?***

1. No medications or treatment administered without an order by a physician.
2. You will be called to come for your child.
3. Physician office visit may be required.

## *PATIENT BILL OF RIGHTS*

As a patient in a hospital in New York State, you have the right consistent with the law to:

1. Understand and use these rights. If for any reason you do not understand or you need help, the hospital MUST provide assistance, including an interpreter.
2. Receive treatment without discrimination as to race, color, religion, sex, national origin, disability, sexual orientation, gender identity or expression, physical appearance, source of payment or age.
3. Receive considerate and respectful care in a clean and safe environment free of unnecessary restraints.
4. Receive emergency care if you need it.
5. Be informed of the name and position of the doctor who will be in charge of your care in the hospital.
6. Know the names, positions and functions of any hospital staff involved in your care and refuse their treatment, examination or observation.
7. A no smoking room.
8. Receive complete information about your diagnosis, treatment and prognosis.
9. Receive all the information that you need to give informed consent for any proposed procedure or treatment. This information shall include the possible risks and benefits of the procedure or treatment.
10. Receive all the information you need to give informed consent for an order not to resuscitate. You also have the right to designate an individual to give this consent for you if you are too ill to do so. If you would like additional information, please ask for a copy of the pamphlet "Do Not Resuscitate Orders – A Guide for Patients and Families".

## *PATIENT BILL OF RIGHTS*

11. Refuse treatment and be told what effect this may have on your health.
12. Refuse to take part in research. In deciding whether or not to participate, you have the right to full explanation.
13. Privacy while in the hospital and confidentiality of all information and records regarding your care.
14. Participate in all decisions about your treatment and discharge from the hospital. The hospital must provide you with a written discharge plan and written description of how you can appeal your discharge.
15. Review your medical records without charge. Obtain a copy of your medical record for which the hospital can charge reasonable fee. You cannot be denied a copy solely because you cannot afford to pay.
16. Receive an itemized bill and explanation of all charges.
17. Complain without fear of reprisals about the care and services you are receiving and to have the hospital respond to you and if you request it, a written response.  
  
If you are not satisfied with the hospital's response, you can complain to the New York State Health Department. The hospital must provide you with the Health Department telephone number.
18. Authorize those family members and other adults who will be given priority to visit consistent with your ability to receive visitors.
19. Make known your wishes in regard to anatomical gifts. You may document your wishes in your health care proxy or on a donor card, available from the hospital.

## OPERATION OF THE SCHOOL BASED HEALTH CENTERS

### ***a. Hours of Operation***

The School Based Health Centers are open Monday through Friday, during regular school hours on all days when school is in session, unless otherwise posted.

### ***b. Staffing at the School Based Health Centers***

A Nurse Practitioner, Medical Assistant and a Social Worker provide the care within each Center. Other health professionals such as a Registered Dietitian, Certified Asthma Education Nurse Practitioner and Physicians offer services on a referral basis.

### ***c. Locations:***

#### ***Buffalo Elementary School of Technology, BPS#6***

414 S. Division Street  
Buffalo, New York 14204  
School Hours: 8:00a-2:30p  
Clinic Phone: 716-842-3002/3003  
Clinic Fax: 716-842-3006

#### ***Hillery Park Academy, BPS #27***

73 Pawnee Parkway  
Buffalo, New York 14210  
School Hours: 9:00a-3:30p  
Clinic Phone: 716-828-1034  
Clinic Fax: 716-828-1039

#### ***Westminster Community Charter School, BPS #68***

24 Westminster Avenue  
Buffalo, New York 14215  
School Hours: 8:00a-3:45p  
Clinic Phone: 716-838-7460  
Clinic Fax: 716-836-8543



## OPERATION OF THE SCHOOL BASED HEALTH CENTERS

***Herman Badillo Bilingual Academy, BPS #76***

315 Carolina Street  
Buffalo, New York 14201  
School Hours: 8:00a-2:30p  
Clinic Phone: 716-856-3478  
Clinic Fax: 716-856-3454

***Dr. Lydia T. Wright School of Excellence, BPS #89***

106 Appenheimer Street  
Buffalo, New York 14214  
School Hours: 8:00a-2:30p  
Clinic Phone: 716-897-8056  
Clinic Fax: 716-897-8036

***BUILD Academy, BPS #92***

340 Fougeron Street  
Buffalo, New York 14211  
School Hours: 8:00a-2:30p  
Clinic Phone: 716-897-0545  
Clinic Fax: 716-1497

***Stanley Makowski Early Childhood Center BPS #99***

1095 Jefferson Avenue  
Buffalo, New York 14208  
School Hours: 9:00a-3:30p  
Clinic Phone: 716-883-9480/9481  
Clinic Fax: 716-883-9483

## ***Let Us Know If You Have Any Concerns***

*If you should have any concerns, please feel free to call the  
Manager for the School Based Health Centers  
Program at (716) 323-6503.*

*You may also direct your concern in writing to:*

*John R. Oishei Children's Hospital  
School Health Program Administrative Offices  
1001 Main Street  
2<sup>nd</sup> floor  
Buffalo, NY 14203*



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