Oregon School-Based Health Centers
Operational Profile User's Guide 2016-17

Oregon Health Authority
PUBLIC HEALTH DIVISION
School-Based Health Center Program

Oregon SBHC
School-Based Health Centers

www.healthoregon.org/sbhc

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Operational Profile – Why, Who & When

Why have an Operational Profile?

To start, **FILLING OUT THE SBHC OPERATIONAL PROFILE IS A REQUIREMENT FOR CERTIFICATION**. In addition to being a requirement, the profiles provide vital information that serves many purposes including:

- Demonstrate that sites are in compliance with the Standards for Certification such as:
    - Staffing roles and shifts
    - Hours of Operation
    - Key Performance Measures (KPM)
    - Financial - Annual Revenue
- Enable the State Program Office (SPO) to answer questions from legislators or partners regarding information such as:
    - Patient Centered Primary Care Home (PCPCH) status
    - The number of centers with Youth Advisory Councils/Committees
    - The number of centers with Dental Providers, etc.

Who is responsible for filling out the Operational Profile?

Each **SBHC Site Coordinator is responsible for the content of their Operational Profile(s)** as a requirement for SBHC Certification.

When to fill out the Operational Profile?

- Before initial certification: Prior to initial certification verification site visit.
- After initial certification – October 1st Deadline: Concurrent with the start of each school year, sites are required to have their Operational Profiles up-to-date by October 1st each year.
- As changes occur throughout the year: Changes in staffing, hours, or other information occur throughout the year; sites are required to keep their Operational Profile up to date. *Key Performance Measure and Financial information is only submitted once a year by the October 1st deadline.*
- Prior to the verification site visit

State Program Office – Operational Profile Audit Process

After the October 1st deadline the SPO will audit the Operational Profiles to ensure sites are in compliance with the current Standards for Certification. Sites that are out of compliance will be notified and may be required to submit waivers for compliance issues. Waivers are not issued for incomplete operational profiles.

Helpful Hints Before You Begin

Areas that need to be updated by the October 1st deadline AND throughout the year for the CURRENT fiscal year:

(Fiscal year = July 1st through June 30th)

- Details tab
- Operations tab
- Staff tab
- Shift Hours tab

Areas that are updated once a year by the October 1st deadline for the PREVIOUS fiscal year:

(Fiscal year = July 1st through June 30th)

- KPM tab
- Financial tab

NOTE: If a new or recently reopened/recertified site was NOT open and certified by January 1st of the previous fiscal year it is NOT required to submit KPM and/or Financial data for that fiscal year.

Accuracy Confirmation Areas MUST be Completed

Once you have logged in, you will see an accuracy confirmation area at the bottom of the Details, Operations, Staff and Shift Hours tab. You *must* verify the information on those pages/tabs is fully complete and accurate by filling out the accuracy confirmation area (shown below). This area indicates you have reviewed and updated the information shown on that tab and are confirming that it is accurate. If you don't fill this area out the Operational Profile is not complete.

Fill out the accuracy confirmation areas prior to the October 1st deadline and throughout the year if changes are made that reflect on the Details, Operations, Staff or Shift Hours tabs.

Accuracy Confirmation Area ➡️

This information is accurate ☐
Confirmed by [_____]

Navigation Tip

Do not use the 'Back button' on your internet browser as it will take you out of the system. Use the buttons provided on the website.

Saving Your Work

Any change you make is automatically saved, even if you navigate away from the page before you are finished entering the information.

If you require any assistance or have questions, please contact the Oregon SBHC Program Office at: 971-673-0249 or SBHC.PROGRAM@STATE.OR.US

Where to start: Logging In

Before you can log in to the SBHC data system, you must obtain your Account ID and Password from the Oregon SBHC State Program Office at SBHC.PROGRAM@STATE.OR.US. Login information does not change from year to year.
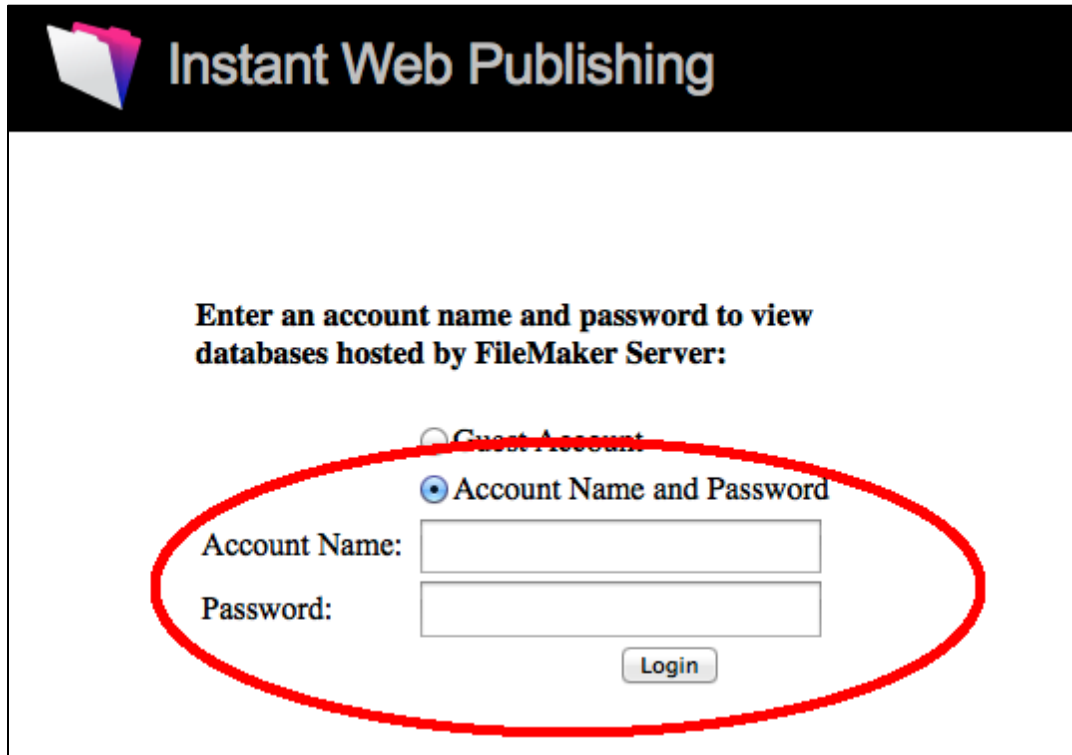
1. **Click the link to log in:**

    ## http://west-26.fmsdb.com/fmi/iwp/res/iwp_auth.html

    FileMaker Instant Web Publishing Login Screen will appear.

    This link is also on the Certification Standards page of the SPO website!

2. **Enter your account name and password and click the "Login" button.**

    ### Instant Web Publishing

    Enter an account name and password to view databases hosted by FileMaker Server:

    ○ Guest Account
    ● Account Name and Password
    Account Name: [   ]
    Password: [   ]
    [Login]

3. **The Select Database Screen will appear, click on the top link named "SBHC".**

    ### Instant Web Publishing   🏠 Database Homepage

    ☐.FileMaker®

    📁 **SBHC**
    📁 SBHC Data
    Logout of FileMaker Server

Updating SBHC Information

4. **From the "SBHC Menu", select your desired center by clicking the "To SBHC" button.**

5. **The "SBHC Detail" screen will appear with the "Details" Tab selected by default.**

6. The "SBHC" section is where you edit physical address/mailing address, host school name, phone numbers and data/billing system information for the center. Please be sure to fill out all applicable areas.

7. The "County Info" section contains information on the county the SBHC resides in. To edit the County contact information, click the "To County" button on the right.

8. The "System Info" and "Medical Sponsor" sections contain contact information for their respective contacts. To edit this information, click the "To System" button on the right.

9. Lastly, when all of the above information is updated and verified to be correct, click the checkbox and type your name in the bottom right corner of the tab. This is **IMPORTANT**. If you do not fill out this area, we do not know the information on this page is up to date. If it is not filled out, the profile is considered incomplete and out of compliance.

Updating SBHC Operation Information

10. To edit SBHC Hours of Operation and services, select the "Operations" tab.

11. The "Hours of Operation" section contains 3 key pieces of information: (1)"regular" hours of operation for the school year, (2)whether or not the center is open during the summer, and, if so, (3)what the summer hours of operation are.

When typing in hours of operation, do NOT use military time or expect anything to auto-populate. It will save exactly what you type so be sure to include AM or PM.

12. The "Population Served" section contains information defining the populations the center serves.

13. The "FQHC" section asks if the SBHC is a Federally Qualified Health Center site.

14. **The "PCPCH" section contains information on the Patient Centered Primary Care Home status of the center and the date it was last recognized as being a PCPCH.**

15. **The "Youth Advisory Council" section asks if the center has a youth advisory council.**

16. **Lastly, when all of the above information is updated and verified to be correct, click the checkbox and type your name in the bottom right corner of the tab. This is <u>IMPORTANT</u>. If you do not fill out this area, we do not know the information on this page is up to date. If it is not filled out, the profile is considered incomplete and out of compliance.**

Staff of an SBHC

17. **To view a list of all the staff who work for an SBHC, navigate to the "Staff" tab from the SBHC Detail page.**

18. **The "Staff" tab contains a list of all staff associated with the selected SBHC and their roles. Roles are assigned by editing the individual staff records. To edit staff roles see #32 of the "Editing Existing Staff Records" section for more information.**

    a. **SBHCs are required to assign the following roles (some staff may hold multiple roles):**

        i. Health Department Administrator

        ii. Health Department Primary SBHC Contact

        iii. Immunization Coordinator

        iv. Laboratory Coordinator

        v. Medical Director

        vi. Primary Care (MD, DO, ND, NP, PA)

        vii. Privacy Official

        viii. Quality Assurance Coordinator

        ix. SBHC Administrator

        x. SBHC Site Coordinator

        xi. Support Staff

    b. Additional roles are available and should be assigned to appropriately reflect the SBHCs staffing model (ie: QMHP, Dental Provider, Nurse, etc.)

    c. SBHC role descriptions can be found on the Certification Standards page of the SPO website (www.healthoregon.org/sbhc).

HOME	SBHC Detail – Web	LIST

Fake SBHC SBHC ID 9999

| Details | Operations | Staff | Shift Hours | Cert Waiver | KPM | Financial |

Staff

To see all existing staff in system, ADD an existing staff member to this SBHC or CREATE a new staff member click here: [Staff List]

	Staff Name	Roles
To Staff	Gary Test	SBHC Administrator; SBHC Site Coordinator; Health Dept Administrator
To Staff	Test First Test Last	Health Dept SBHC Primary Contact; Primary Care (MD, DO, ND, NP, PA); SBHC Site Coordinator
To Staff	Larry Test	Laboratory Coordinator; Primary Care (MD, DO, ND, NP, PA)
To Staff	Crystal Test	Health Dept Administrator; Immunization Coordinator
To Staff	Star Lord	Health Dept Administrator; Health Dept Nursing Supervisor; Laboratory Coordinator; Medical (RN/LPN); Qualified Mental Health Provider (QMHP)
To Staff	Blahmaster Salomon	Primary Care (MD, DO, ND, NP, PA); Dental Provider (DMD, EFDA, RDH)

Missing Medical Director
Missing Privacy Official
Missing Quality Assurance Coordinator
Missing Support Staff

This is a list of required roles that you have not yet assigned. If you don't see a list on your screen, you have assigned all the required roles!

Created: 3/16/2012 10:14:49 AM
Last Viewed: 9/1/2015 2:28:01 PM
View Count: 2746

This information is accurate ☐
Confirmed by [   ]

19. To <u>create</u> a new staff member record, see #24-26 of the "Creating New Staff Records" section for more information.

20. To <u>add</u> an existing staff member to the SBHC staff list, see #33-35 of the "Editing Existing Staff Records" section for more information.

21. To <u>edit</u> an existing staff member record, see #27-40 of the "Editing Existing Staff Records" section for more information.

22. To <u>remove</u> a staff member from an SBHC staff list, see #36 of the "Editing Existing Staff Records" section for more information.

23. After all staff are listed and individual information is up to date and verified to be correct, click the checkbox and type your name in the bottom right corner of the tab. This is <u>IMPORTANT</u>. **If you do not fill out this area, we do not know the information on this page is up to date. If it is not filled out, the profile is considered incomplete and out of compliance.**

Creating New Staff Records

24. To **create** a new staff member record, start by navigating to the "Staff List" page. There are two ways to get there (shown below):

    a. Via the "SBHC Menu" page by selecting the "Staff List" button.

    b. Via the "SBHC Detail" page – "Staff" tab by selecting the "Staff List" button.

25. Once you have navigated to the "Staff List" you can create a NEW staff record by clicking the "+ Staff" button in the upper right hand corner of the page. This will take you to a blank individual staff record.

26. Once you are in the blank individual staff record ("Staff Detail" page), to fill out the required information in the staff record, see the Editing Existing Staff Records section below for more information.

Editing Existing Staff Records

27. To <u>edit</u> a staff member record, you can navigate to the staff record in one of two ways. The first way is via the "SBHC Menu" page by selecting the "Staff List" button.

28. Once you have navigated to the "Staff List" page you can navigate to an existing staff record by clicking the "To Staff" button on the left side of the desired staff member row. The "Staff Detail" page will appear with the "Staff" tab showing.

29. The second way to navigate to an existing staff record is via the "SBHC Detail" page – "Staff" tab by selecting the "To Staff" button on the left side of the desired staff member row. The "Staff Detail" page will appear with the "Staff" tab showing.

30. The first area of the individual staff record "Staff" tab is basic contact information for the staff member.

NOTE: Please be careful to fill out <u>all</u> the information requested, spell names correctly, use proper capitalization, etc. We rely heavily on this information being accurate. Depending on the role(s) of the staff member, we may use the information typed here for mailing lists and other correspondence.

31. The second area of the "Staff" tab contains the mailing address for the staff member if they receive mail at a different address than the SBHC. If the staff member works at multiple SBHCs please list their preferred mailing address in this area.

NOTE: Please be careful to fill out <u>all</u> the information requested, spell names correctly, use proper capitalization, etc. We rely heavily on this information being accurate. Depending on the role(s) of the staff member, we may use the information typed here for mailing lists and other correspondence.

32. The third area on the "Staff" tab contains roles and credential information for the staff member. Please refer to #18 in the "Staff of an SBHC" section for more information about SBHC role requirements.

33. **The fourth area of the "Staff" tab lists the SBHC(s) where the staff member works. To <u>add</u> a staff member to the staff list of an SBHC, click the "+ SBHC" button on the upper right side of that area and choose an SBHC from your system SBHC list.**

   Note: This step is critical. Staff will only show up on SBHC Staff lists ("SBHC Detail" page – "Staff" tab) of SBHCs added in this area. EVERY staff member must have at least one SBHC listed here.

34. **A menu bar will appear below, click the black triangle on the right side of bar to show SBHCs in your System.**

35. **Choose the appropriate SBHC from the drop down menu by clicking the desired SBHC name.**

36. **To remove a staff member from the staff list of an SBHC:**
    a. **First, delete any shifts the staff member has at the SBHC you are removing them from.** See #41 in the "Editing Existing Staff Record" section for more information about deleting shift hours.
    b. **Second, click the "X" in the grey box to the right of the desired SBHC.**

    Note: This does NOT remove the staff member from other SBHCs listed in this area or the overall system staff list. To remove a staff member from the system staff list, see #46-49 in the "Removing Staff from the System Staff List" section for more information.
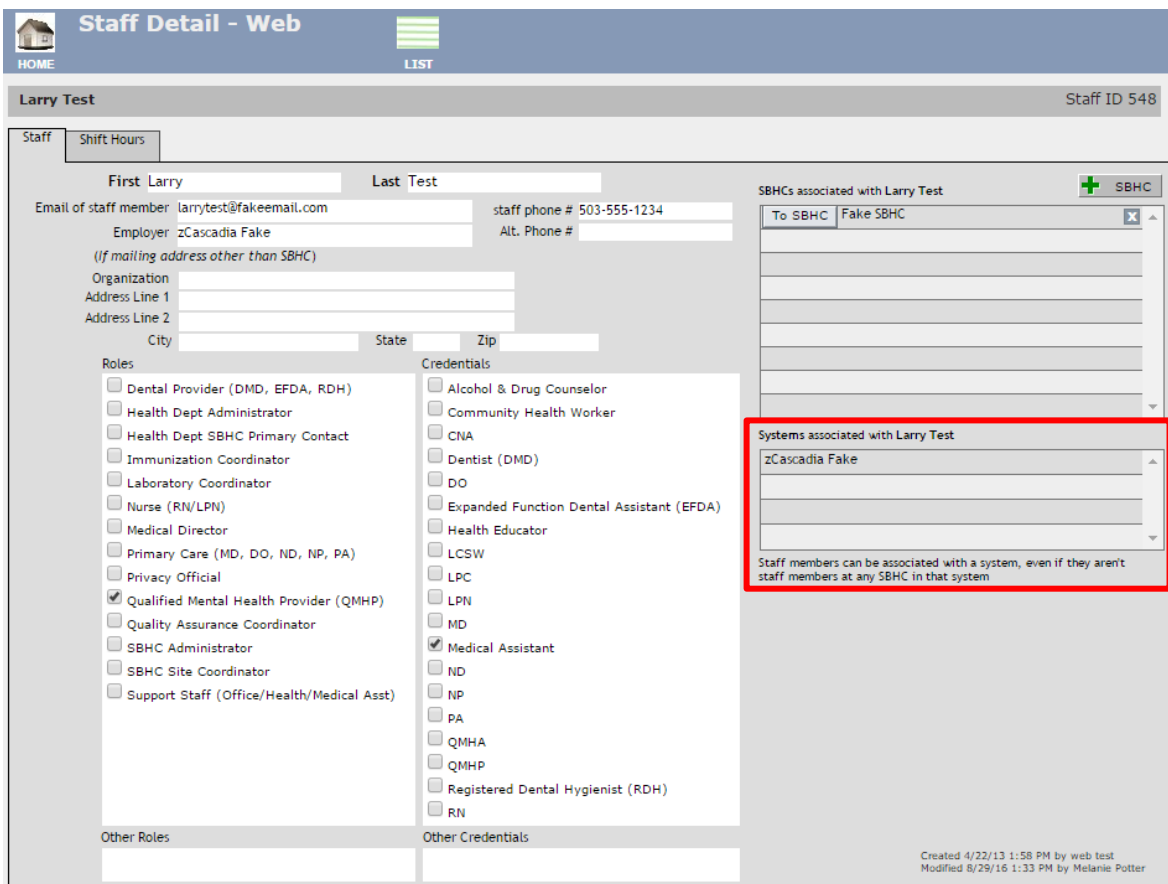
37. **Lastly, the Staff tab also contains an area that shows the system of SBHCs in which the staff member works. Staff cannot be associated with multiple systems and this area is updated by the SPO.**

38. **After the "Staff" tab is complete, you'll move on to the "Shift Hours" tab of the individual staff record. It contains the area where** <u>on-site</u> **clinical SBHC shift hours of the staff member are listed. All of their on-site shifts should be on this tab even if they work at multiple SBHCs.**

NOTE: All staff with an SBHC role(s) should have their shifts listed on this page. If the staff member does <u>not</u> have a regular on-site clinical shift at the SBHC (i.e. Health Department Administrator) please list where they physically work and their typical weekly shift days and hours in the "Comments" box at the bottom of the page.

Use this area to note staff who do <u>not</u> have on-site clinical shifts but have other role(s) associated with the SBHC. You may also provide any other information you find relevant.

39. **To <u>add</u> a shift, click the "+ Shift" button in the upper right corner of the tab to create a new shift record. A blank shift row will appear with drop down menus to select the shift details like the shift day, start time, end time and SBHC where shift is worked.**

40. **To <u>add</u> or <u>edit</u> shift details click the black triangle on the right side of each drop down menu to select the shift day, start time, end time and SBHC where shift is worked.**

Note: If the red "*Shift Hours entry is missing information" warning is present you haven't filled out all of the required shift information.

41. To <u>delete</u> an existing shift, click the "X" in the grey box on the right side of each shift row.

Shift Hours of an SBHC

42. To view a list of all the staff shift hours for an SBHC, click the "Shift Hours" tab from the "SBHC Detail" page.

43. The "Shift Hours" tab contains all the shift information for every staff member associated with the selected SBHC broken out by day of the week.

44. Shift hours are _created_, _edited_ and/or _deleted_ in the individual staff record. To navigate to an existing individual staff record click the "To Staff" button to the left of their shift row. You can also click the "Staff List" button in upper right corner to navigate to the system staff list to access or create individual staff records. See #38-41 of the "Editing Existing Staff Records" section for more information on shift hours.

45. After all staff shift hours are listed, up to date and verified to be correct, click the checkbox and type your name in the bottom right corner of the tab. This is _IMPORTANT_. If you do not fill out this area, we do not know the information on this page is up to date. If it is not filled out, the profile is considered incomplete and out of compliance.

This must be filled out for this tab to be considered complete

Removing Staff from the System Staff List

46. **If a staff member no longer works for all the SBHCs in their SBHC system, steps need to be taken to properly remove them from all of your SBHC and system staff lists.**
    Note: If the staff member still works at an SBHC in the system but needs to be removed from one SBHC staff list, see #36 of the "Editing Existing Staff Record" section for more information.
    Note: Do NOT 'write over' or delete the name or other identifying information in the staff record as an attempt to delete it. This causes 'ghost records' and other issues that will have to be fixed by the SPO.

47. **First, delete all shift hours the staff member had in their individual staff record. This is done by clicking the "X" in the grey box on the right side of the shift row on the "Shift Hours" tab of the "Staff Detail" page for that staff member. See #41 of the "Editing Existing Staff Records" section for more information.**
    Note: Be sure to delete ALL shifts before moving to the next step.

48. **Second, remove the staff member from all SBHC staff lists. To remove a staff member from the staff list of an SBHC, click the "X" in the grey box to the right of the desired SBHC on the "Staff" tab of the "Staff Detail" page for that staff member. See #36 in the "Editing Existing Staff Records" section for more information.**
    Note: It is very important that you remove all shift hours before this step.
    Note: Make sure there are no SBHCs listed in this area before moving to the next step.

49. **Third, the staff member should only show up on the system staff list at this point. To remove the staff member from the system staff list, send an email request to sbhc.program@state.or.us. Include the name of the staff member, as it is listed in their staff record, and the SPO will remove them from your system staff list.**
    Note: It is helpful if you send deletion requests to the SPO in batches. For example, if you are cleaning up your site profiles and have several staff that need to be removed, follow the first two steps for those staff and send one list of the names to be deleted to the SPO at one time instead of individual emails.
    Note: Please do not use any other method to attempt to remove staff members from your staff list. It will result in 'ghost records' and other issues that will cause problems in the Operational Profile system. Please help us keep the system clean and reduce the time required to clean it up by following our instructions above.

Certification Waivers

50. **To create or edit Certification Waiver entries, navigate to the "Cert Waiver" tab on the "SBHC Detail" page.**
   Note: For more information about Certification Waivers, see the SBHC Standards for Certification on the Certification Standards page of the SPO website (www.healthoregon.org/sbhc).

51. **The "Cert Waiver" tab contains a list of all certification waivers submitted for the site. You can view an individual waiver by clicking the "Select" button on the left side of its row. A pane will show up on the right side of the window with all the waiver information.**
   Note: Waivers are 'locked' 30 days after they are submitted to the SPO. You will be able to view them but not edit them after they have been locked. If you need to make changes, email sbhc.program@state.or.us.

52. To view a printable version of a certification waiver, click the "View Report" button on the bottom of the Certification Waiver Info area.

53. To <u>create a new certification waiver</u> entry, click the "+ Waiver" button on the top right side of the waiver list. This will show a panel on the right where you can fill out the details of the waiver you want to submit.

54. **To fill out a new certification waiver, fill out each section of the waiver as outlined below:**

- Submitter Contact: Enter your name, title and contact info
- County Contact: Enter name, title and contact info of the county public health employee who you have informed that the SBHC is requesting a waiver for non-compliance
- Certification Section: Choose certification section not being met from the drop-down menu
- Which standard is not being met? Explain **WHAT** is not in compliance with the Oregon School-Based Health Centers Standards for Certification
- Explanation of why standard is not met? Explain **WHY** the SBHC is not in compliance
- Action plan to meet standard. Explain **HOW** the SBHC will come into compliance. Be specific.
- Expected date of compliance: Enter date to complete action plan. Be realistic.

55. **After you have the certification waiver information completely filled out, click the orange "WAIVER INFORMATION COMPLETE: Submit to SPO" button to send the waiver to the State Program Office for review.**
Note: You only need to click the "WAIVER INFORMATION COMPLETE: Submit to SPO" button <u>once</u>. If you click it more than once, multiple notifications will be sent to the SPO.

Click here ONCE to submit the waiver to the State Program Office for review

Key Performance Measures (KPM)

56. **The "KPM" tab contains lists of all Key Performance Measures and Optional KPM - Biennial Selections submitted for the site. To create or edit recent KPM entries, navigate to the "KPM" tab on the "SBHC Detail" page.**

    Note: Annual KPM entries are 'locked' on January 1st each year. Optional KPM – Biennial Selections are generally 'locked' 30 days after they are created. You will be able to view entries but not edit them after they have been locked. If you need to make changes, email sbhc.program@state.or.us.

57. **You can <u>view</u> an individual KPM entry by clicking the "Select" button on the left side of its row. This opens a pane that will show all the information in the Key Performance Measure submission.**

    Note: This is the first year of the new KPM pilot project and entries from previous years will not be visible.

58. **To create a new KPM entry, click the "+ KPM" button on the top right side of the KPM list. This will open a blank KPM entry for you to fill out.**

    Note: KPM entries should be entered for the *previous* fiscal year.

    Note: Sites who chose the Adolescent Immunization Optional KPM measure for the 2015-17 biennium should NOT enter any optional measure information. The SPO will enter the audit results but sites are responsible for securely emailing a list of all 13 year old clients seen during the last fiscal year (7/1/15 – 6/30/16) to the SPO. Contact Loretta Jenkins (Loretta.L.Jenkins@state.or.us) when you need to submit the list of clients via secure email.

    Note: Please review the KPM guidance documents in Appendix A or on the Data Requirements page of our website (www.healthoregon.org/sbhc) for form more information about KPM requirements and detailed instructions for submitting required documents to the SPO.

Entries should be for the *previous* fiscal year.

Report the Optional KPM – Biennial Selection results in the Optional Measure section of the KPM entry.

59. **The Required Documents area has two checkboxes for you to indicate you have sent the Chart Audit Process Summary & Chart Audit Tracking Sheet via secure email to the SPO.**

    Note: Contact Loretta Jenkins (Loretta.L.Jenkins@state.or.us) when you are ready to submit the required documents via secure email.

60. After you have the KPM information completely filled out and verified to be correct, click the orange "KPM INFORMATION COMPLETE: Submit to SPO" button to submit the entry to the SPO and populate a date in the "Date Submitted" column of the KPM list. This is IMPORTANT. If you do not click this button, we do not know the information on this page is complete. If a date is not populated in the "Date Submitted" column, the profile is considered incomplete and out of compliance.

61. You can view an Optional KPM – Biennial Selection entry by clicking the "Select" button on the left side of its row. This opens a pane that will show all the information in the Optional KPM – Biennial Selection submission.

62. **To <u>create</u> a new Optional KPM – Biennial Selection entry, click the "+ Optional KPM" button on the top right side of the Optional KPM list. This will open a blank Optional KPM entry for you to fill out.**

Note: For more information about Optional KPM requirements visit the SBHC Data Requirements page of the SPO website (www.healthoregon.org/sbhc).

Note: Optional KPM – Biennial Selections are only filled out ONCE a biennium. If your SBHC already has one for the current biennium you should not make another selection until we near the next biennium. **THIS IS NOT DONE ANNUALLY.**

63. **After you have the Optional KPM – Biennial Selection filled out and verified to be correct, click the checkbox and type your name in the white box below it. This is <u>IMPORTANT</u>. If you do not fill out this area, we do not know the information on this page is accurate and complete. If it is not filled out, the entry is considered incomplete and out of compliance.**

This area must be filled out for the Optional KPM entry to be complete

Annual Revenue Information

64. The "Financial tab" contains a list of all annual revenue entries submitted for the site. To <u>create</u>, <u>view</u> or <u>edit</u> a center's yearly financial information, click the "Financials" tab on the "SBHC Detail" page.
    Note: Financial entries are 'locked' on January 1st each year. You will be able to view entries but not edit them after they have been locked. If you need to make changes, email sbhc.program@state.or.us.

65. You can <u>view</u> an existing or <u>edit</u> a recent individual financial entry by clicking the "Select" button on the left side of its row. This will show an overview of the information in a pane to the right. To open the financial entry further, click the "View/Edit Entry" button in the bottom right corner of the tab.
    Note: Financial entries are 'locked' on January 1st each year. You will be able to view entries but not edit them after they have been locked. If you need to make changes, email sbhc.program@state.or.us.

66. To **create** a new annual revenue entry, click the "+ Annual Revenue" button at the top. This will take you to a new screen, showing a blank "Annual Revenue Detail" page.

67. The "Annual Revenue Detail" page contains information for a single annual revenue entry. The top of the page contains information about the fiscal year for the information being entered and contact information for the person filling out the form. Be sure to fill out all of these fields.

Note: Annual Revenue entries should be entered for the *previous* fiscal year.

68. The <u>second piece contains the revenue breakdown</u> areas for you to fill out (public/medical sponsor funds, grants, fundraising and in-kind donations, patient fees, third party billing, and other funding sources) <u>split between three pages/tabs.</u>

69. You can <u>navigate through all three pages/tabs of information</u> - "Public Funds/Grants/Donations," "Fees/Billing," and "Other and Total" - by either clicking their respective tab or by clicking the "Next Page" button at the bottom.

70. Similar to the Certification Waiver and KPM entries, you can __create__ entries for specific grants, fundraising events, and other sources by clicking their respective "+ Add…" button and filling out the fields that are created on the row below.

After you hit the "+ Add…" button, an entry row will be created below it for you to fill out. Just click in the blank field and start typing.

Click this button to delete an entry.

Type numbers only, do not type $ dollar signs.

Totals will not fully calculate until you click to a different page/tab and come

Revenue Source Breakdown: Grants

Grantor Name	Grant Name	Amount

One time grants or awards TOTAL

Revenue Source Breakdown: Fundraising and in-kind donations

Event Name	Revenue

Donations TOTAL

71. The __"Fees/Billing" page/tab__ is where you can enter any revenue gained from patient fees or third party billing.

Annual Revenue Detail – Web

The purpose of this report is to identify all sources of operating revenue Oregon State-Funded SBHCs receive every year.

SBHC Name: Fake SBHC
Fiscal Year: 7/1/2014 to 6/30/2015

First Name: Jane
Last Name: Smith
Phone: 541-555-5555

Title: SBHC Site Coordinator
Email: jsmith@county.or.us

Public Funds/Grants/Donations	Fees/Billing	Other and Total

Please enter total revenue received for each category below for the entire fiscal year (July 1 - June 30).

Revenue Source Breakdown: Patient Fees

Registration fees	200
Co-pays/deductibles	2000
Sliding scale fees from uninsured	1000
Other patient fees	0
Description of other patient fees	
Patient fees TOTAL	$3,200.00

Revenue Source Breakdown: Third Party Billing

Type numbers only, do not type $ dollar signs.

Payor Type	Total Revenue	Does revenue include PMPM or Incentive Payments?
OHP (DMAP - FFS)	20000	○ Yes ● No
OHP (CCOs)	10500	● Yes ○ No
C-Care (Family Planning)	1500	○ Yes ● No
Private Insurance	0	○ Yes ● No
Other third party payor(s)	0	○ Yes ● No
Third party billing TOTAL	$32,000.00	

Totals will not fully calculate until you click to a different page/tab and come back.

72. The "Other and Total" page/tab is where you can add any additional sources of funding not covered by the previous sources as well as view the total amounts entered on other pages/tabs.

Annual Revenue Detail – Web

The purpose of this report is to identify all sources of operating revenue Oregon State-Funded SBHCs receive every year.

HOME

SBHC Name Fake SBHC

Fiscal Year 7/1/2014 to 6/30/2015 ▼

First Name Jane
Last Name Smith
Phone 541-555-5555

Title SBHC Site Coordinator
Email jsmith@county.or.us

Back to SBHC Detail

Public Funds/Grants/Donations	Fees/Billing	Other and Total

Revenue Source Breakdown: Other funding source

➕ Add Other

Source Description	Amount

Other funding sources TOTAL

Revenue Breakdown by Source

Public funds (federal, state, county, city)	$90,000.00
Medical Sponsor Funds	$2,500.00
One time grants or awards (public of private)	$15.00
Fundraising and in-kind donations	
Patient fees	$3,200.00
Third party billing	$32,000.00
Other	

Grand Total Operating Revenue for 7/1/2014 to 6/30/2015

$127,715.00

Totals will not fully calculate until you click to a different page/tab and come back.

Please provide any explanations/feedback

FINANCIAL INFORMATION COMPLETE: Submit to SPO

<<Previous

73. **Last but not least, after you have all three pages/tabs filled out and verified to be correct,** <u>submit your information to the SPO by clicking the "FINANCIAL INFORMATION COMPLETE: Submit to SPO" button</u> in the lower right corner of the "Other and Total" page/tab of the "Annual Revenue Detail" pages. Clicking this button will populate a date in the "Date Submitted" column of the "Financial – Annual Revenue" entry list on the "Financial" tab of the "SBHC Detail" page (see below). This is <u>IMPORTANT</u>. **If you do not click this button, we do not know the information entered is complete. If a date is not populated in the "Date Submitted" column, the profile is considered incomplete and out of compliance.**

Note: Dates for old Financial – Annual Revenue entries will not exist because they were created before this feature was made in 2015.

This must be clicked for the Financial/Annual Revenue entry to be complete

The date you click the submission button should populate here on the "Financial" tab.

Nice work!

If you require any assistance or have questions, please don't hesitate to contact the Oregon SBHC State Program Office at: 971-673-0249 or SBHC.Program@STATE.OR.US

Appendix A: KPM Guidance Documents

Oregon SBHC Key Performance Measures Guidance Document
Core Measure 1: Well-care visit

Measure Description
The percentage of SBHC clients ages 5-21 with evidence of a completed comprehensive well-care visit during the measurement school year

This measure is one of two <u>required</u> Core Key Performance Measures (KPMs). All certified SBHCs in Oregon must report on this measure.

Eligible Population
All SBHC clients seen for any reason (including physical, mental, dental health visits) during the measurement school year (July 1 – June 30) ages 5-21 at the time of their visit

Exclusions
SBHC clients may be excluded from Well-Care Visit denominator if:

- Client 15 years of age or older refuses comprehensive well-care visit;
- Parent consent for comprehensive well-care visit is unable to be obtained after 1 attempt for client under 15 years of age; OR
- Client/parent claims comprehensive well-care visit has been provided elsewhere AND clinic makes 1 documented unsuccessful attempt to obtain clinical records; OR
- Client makes documented request for confidential visit and there is concern that obtaining information from a non-SBHC provider may compromise the client's confidentiality.

Measure Specifications

Denominator:	Eligible population
Numerator:	Unique counts of SBHC clients ages 5-21 during the measurement school year (July 1 – June 30) who received a well-care visit
Required Codes:	ICD-9-CM Diagnosis: V20.2, V70.0, V70.3, V70.5,V70.6, V70.8, V70.9 <u>OR</u> ICD-10-CM Diagnosis: Z00.00, Z00.01, Z00.121, Z00.129, Z00.5, Z00.8, Z02.0, Z02.1, Z02.2, Z02.3, Z02.4, Z02.5, Z02.6, Z02.71, Z02.79, Z02.81, Z02.82, Z02.83, Z02.89, Z02.9 CPT: 99383-99385, 99393-99395 HCPCS: G0438, G0439
State Benchmark:	50% of charts sampled with documented comprehensive well-care visit during the measurement school year
Chart Audit Requirements:	SBHCs should audit 20% of their charts of the eligible population, with a floor of 30 charts and a ceiling of 50. If the SBHC has fewer than 30 eligible charts, they should review all eligible charts.

What "counts" as a well-care visit?

This measure is based on administrative (billing) data. The well-care visit should be documented using one of the required codes (ICD or CPT) listed in the Measure Specifications. To use the billing codes listed above, the following components must be present for a visit to count as a well-care visit:

- A health and developmental history, e.g. social and emotional well-being, health behavior, academic history, physical development and mental health
- A physical exam, e.g., weight, height, vision, hear, lungs, skin, genitals etc
- Health education/anticipatory guidance provided based on results of health assessment

OR

- Documentation of well-care visit conducted at non-SBHC provider

FAQ

Does a Sports Physical count as a well visit?

Sports physicals are excellent opportunities for well-care visits, but sports physicals by themselves do not meet the components of a comprehensive adolescent well-care visit.

Does the Health Assessment need to be completed at the same time as the comprehensive well-care visit and physical exam?

No. We understand that the health assessment may be conducted over multiple visits, rather than within the context of a single well visit.

Resources

Bright Futures Guidelines for Health Supervision of Infants, Children, and Adolescents. American Academy of Pediatrics. http://brightfutures.aap.org/

Anoshiravani, A. et al. (2012). Special requirements for electronic medical records in adolescent medicine. Journal of Adolescent Health, 51, 409-414.

Reuland, C, Gillespie, RJ, Case, K. 2014. Enhancing Adolescent Well-Visits: Getting Them In, Setting the Stage, and Implementing Strength & Risk Screening Tools. Portland, OR: Patient Centered Primary Care Institute. Available at: http://www.pcpci.org/resources/webinars/enhancing-adolescent-well-visits

Oregon SBHC Key Performance Measures Guidance Document
Core Measure 2: Comprehensive Health Assessment

Measure Description
The percentage of SBHC clients ages 5-21 with evidence of a completed comprehensive health assessment during the measurement school year

This measure is one of two <u>required</u> Core Key Performance Measures (KPMs). All certified SBHCs in Oregon must report on this measure.

Eligible Population
All SBHC clients seen for any reason (including physical, mental, dental health visits) during the measurement school year (July 1 – June 30) ages 5-21 at the time of their visit

Exclusions
SBHC clients may be excluded from Comprehensive Health Assessment denominator if:

- Client 15 years of age or older refuses comprehensive health assessment; OR
- Parent consent for health assessment is unable to be obtained after one attempt for client under 15 years of age

Measure Specifications

Denominator:	Eligible population
Numerator:	Unique counts of members age 5-21 during the measurement school year (July 1 – June 30) who received a comprehensive health assessment
Codes:	ICD-9-CM Diagnosis: V82.9, V79.8 <u>OR</u> ICD-10-CM Diagnosis: Z13.9, Z13.4 CPT: 99420, 96150-96155 HCPCS: T1001, TX095 OR Evidence of documented health assessment in chart
State Benchmark:	50% of charts sampled with a documented comprehensive health assessment during the measurement school year
Chart Audit Requirements:	SBHCs should audit 20% of their charts of the eligible population, with a floor of 30 charts and a ceiling of 50. If the SBHC has fewer than 30 eligible charts, they should review all eligible charts

What "counts" as a health assessment?

The comprehensive health assessment KPM may be based on administrative (billing) data. To use the billing codes listed above, at least one of the following components must be present to count as a comprehensive health assessment:

- Completion of a health assessment tool (may be embedded in other clinic forms)
- Documented assessment of health risks and strengths, including:
    - Physical growth and development
    - Oral health
    - Social and academic competence
    - Emotional well-being
    - Risk reduction
    - Violence and injury prevention

FAQ

Does the Health Assessment need to be completed at the same time as the comprehensive well care visit and physical exam?

No. We understand that the health assessment may be conducted over multiple visits, rather than within the context of a single well visit.

Resources

Fernald FH, et al. 2013. Health Assessments in Primary Care: A How-to Guide for Clinicians and Staff. Rockville, MD: Agency for Healthcare Research and Quality. Available at: http://www.ahrq.gov/professionals/prevention-chronic-care/improve/system/health-assessments/index.html

Guidelines for Adolescent Preventive Services (GAPS). 1998 Chicago, IL: American Medical Association.

Hagan JF, Shaw JS, Duncan PM, eds. 2008. "Adolescence." Bright Futures: Guidelines for Health Supervision of Infants, Children, and Adolescents, Third Edition. Elk Grove Village, IL: American Academy of Pediatrics. Available at: http://brightfutures.aap.org/pdfs/Guidelines_PDF/18-Adolescence.pdf

Rapid Assessment for Adolescent Preventive Services (RAAPS). 2014. Available at: https://www.raaps.org/

Reuland, C, Gillespie, RJ, Case, K. 2014. Enhancing Adolescent Well-Visits: Getting Them In, Setting the Stage, and Implementing Strength & Risk Screening Tools. Portland, OR: Patient Centered Primary Care Institute. Available at: http://www.pcpci.org/resources/webinars/enhancing-adolescent-well-visits

Oregon SBHC Key Performance Measures Guidance Document
Optional Measure: Adolescent Immunizations

Measure Description
The percentage of SBHC clients 13 years of age who had:

- One dose of meningococcal vaccine; AND
- One tetanus, diphtheria toxoids and acellular pertussis vaccine (Tdap)

This is one of five <u>optional</u> Key Performance Measures (KPMs). All certified SBHCs in Oregon must select and report on one of these optional measures.

Eligible Population
All SBHC clients seen for any reason (including physical, mental, dental health visits) during the measurement school year (July 1 – June 30) who turned 13 years of age during the measurement year.

Method of Data Collection
SBHCs who choose this measure will submit a patient demographic file to ALERT IIS of all 13 year-old patients seen at the SBHC in the past year to the Oregon Immunization Program. The Immunization Program will run these patients through ALERT IIS to pull their records for each of the measure vaccines. Results of the ALERT registry will be calculated by the Oregon Immunization Program and provided to the SBHC State Program Office (SPO) and back to the participating SBHCs. Rates will be calculated for each immunization individually, as well as a combined rate overall.

Submission of patient demographic file to the Immunization Program will be through a HIPAA-compliant SFTP site.

Measure Specifications

Denominator:	Eligible population
Numerator:	Unique counts of SBHC clients who were 13 years old during the measurement school year (July 1 – June 30) and were up to date on their meningococcal and Tdap vaccines.
State Benchmark:	65% of youth up to date on both vaccines

FAQ
Why do I need to submit patient names in order to participate in this measure?
Because the immunization may have happened outside of the SBHC, we need to access the full immunization history of the patient. The only way to do this in ALERT is to match patient records based on demographic information, particularly if the SBHC is not linked to that patient in ALERT. Data submission is secure and HIPAA-compliant, and ALERT results will not be shared outside of the SBHC, SPO and Immunization program.

What if a parent/client refuses consent for the immunization? Will that show up in ALERT?
ALERT does not reflect vaccine refusal or school exemption records (Tdap is school-required but meningococcal is not). The State Benchmark is set with the intention of accommodating vaccine refusals.

Oregon SBHC Key Performance Measures Guidance Document
Optional Measure: Chlamydia Screening

Measure Description

The percentage of SBHC female clients ages 12-21 who were sexually active and had a documented chlamydia screen during the measurement school year.

This is one of five optional Key Performance Measures (KPMs). All certified SBHCs in Oregon must select and report on one of these optional measures.

Eligible Population

All female SBHC clients seen for any reason (including physical, mental, dental health visits) during the measurement school year (July 1 – June 30) ages 12-21 at the time of their visit who were identified as being sexually active.

Exclusions

SBHC clients may be excluded from the denominator if:

- Client refuses screening; OR
- Client claims chlamydia screening has been provided elsewhere AND clinic makes 1 documented unsuccessful attempt to obtain clinical records; OR
- Client makes documented request for confidential visit and there is concern that obtaining information from a non-SBHC provider may compromise the client's confidentiality.

Measure Specifications

Denominator:	Eligible population
Numerator:	Unique counts of female SBHC clients ages 12 -21 during the measurement school year (July 1 – June 30) who were screened for chlamydia
Required Code:	87491
State Benchmark:	20% of charts sampled with a documented chlamydia screen during the measurement school year
Chart Audit Requirements	SBHCs should audit 20% of their charts of the eligible population, with a floor of 30 charts and a ceiling of 50. If the SBHC has fewer than 30 eligible charts, they should review all eligible charts.

How is the eligible population defined?

Sites can identify the eligible population (sexually active females ages 12-21) either through (1) ICD/CPT codes, or (2) by extracting charts from a relevant field in the medical record that shows sexual activity (e.g., health assessment, problem list, etc.). Sites should choose the method that will most accurately and completely capture eligible charts. If sites are using billing codes, the following list should be used:

Codes to Identify Sexual Activity		
CPT	ICD-9	ICD-10
58300-01	054.10	A60.9
81025	078.11	A63.0
84702-03	079.4	B97.7
86592-93	614.3	N73.0

87491	614.9	N73.9
87591	659.8	075.89
87660	V01.6	Z20.2
87801	V22	Z34.0, Z34.80, Z34.90
	V22.2	Z33.1
	V25.01 – V25.03	Z30.011, Z30.018, Z30.019, Z30.012
	V25.09	Z30.09
	V25.11	Z30.430
	V25.40 – V25.43	Z30.40, Z30.41, Z30.431
	V25.49	Z30.49
	V25.5	Z30.49
	V25.8 – V25.9	Z30.8, Z30.013, Z30.019
	V69.2	Z72.51, Z72.52, Z72.53
	V72.40 – V72.42	Z32.00, Z32.01, Z32.02
	V73.98	Z11.8
	V74.5	Z11.3
	V76.2	Z12.4
		Z30.014

What "counts" as a chlamydia screen?

- Youth has been identified as sexually active either through health assessment or by one of denominator codes
- Chlamydia screen should be documented via the numerator CPT code listed in the Measure Specifications; OR
- Documentation of screening conducted at non-SBHC provider

Resources
Changes in the 2010 STD Treatment Guidelines: What Adolescent Health Care Providers Should Know
https://www2.aap.org/sections/adolescenthealth/pdfs/STD%20Article%20Feb%202011.pdf

CDC STD Treatment Guidelines for Special Populations (Adolescents at bottom of page):
http://www.cdc.gov/std/treatment/2010/specialpops.htm

US Preventive Services Task Force Recommendations on STI Screening
http://www.uspreventiveservicestaskforce.org/Page/Name/uspstf-recommendations-for-sti-screening

Oregon SBHC Key Performance Measures Guidance Document
Optional Measure: Depression Screening

Measure Description
The percentage of SBHC clients ages 12 -21 who were screened for depression during the measurement school year.

This is one of five <u>optional</u> Key Performance Measures (KPMs). All certified SBHCs in Oregon must select and report on one of these optional measures.

Eligible Population
All SBHC clients seen for any reason (including physical, mental, dental health visits) during the measurement school year (July 1 – June 30) ages 12 -21 at the time of their visit

Exclusions
SBHC clients may be excluded from the denominator if:

- Client 14 years of age or older refuses screening; OR
- Parent consent for depression screen is unable to be obtained after one attempt for client under 14 years of age; OR
- Client has an active diagnosis of depression or bipolar disorder, as documented by one of the ICD-9 codes listed below, or as documented in the chart notes

Measure Specifications

Denominator:	Eligible population
Numerator:	Unique counts of SBHC clients ages 12 -21 during the measurement school year (July 1 – June 30) who were screened for depression (either a brief screen or full assessment)
Eligible Depression Screening Tools:	The screening tool should be normalized and validated for the adolescent population. Examples include: PHQ-2 (brief screen), SBIRT Questionnaire (brief screen), PHQ-A, Beck Youth Depression Inventory, Center for Epidemiologic Studies Depression Scale (CES-D), Weinberg Depression Scale
State Benchmark:	20% of charts sampled with documented depression screen/assessment during the measurement school year
Chart Audit Requirements	SBHCs should audit 20% of their charts of the eligible population, with a floor of 30 charts and a ceiling of 50. If the SBHC has fewer than 30 eligible charts, they should review all eligible charts

ICD-9-CM Codes to Identify Active Diagnosis of Depression or Bipolar Disorder

Depression	Bipolar
296.2 – 296.36 (Major depressive disorder + variations)	296.40 – 296.46, 296.50 – 296.56 (Bipolar I disorder + variations)
296.82 (Atypical depressive disorder)	296.80 (Bipolar disorder, unspecified)
298.0 (Depressive type psychosis)	296.89 (Bipolar II disorder)
300.4 (Dysthymic disorder)	
301.12 (Chronic depressive personality disorder)	
309.0 (Adjustment disorder w/depressed mood)	
309.1 (Prolonged depressive reaction)	
309.28 (Adjustment disorder w/mixed anxiety and depressed mood)	
311 (Depressive disorder not otherwise classified)	

<u>OR</u>

ICD-10-CM Codes to Identify Active Diagnosis of Depression or Bipolar Disorder

Depression	Bipolar
F32.9 – F33.42 (Major depressive disorder + variations)	F31.0 – F31.78
F32.8 (Other depressive disorder)	F31.9 (Bipolar disorder, unspecified)
F23.3 or F33.3 (Major depressive disorder w/psychosis)	F31.8 – F31.89 (Other bipolar disorders)
F34.1 (Dysthymic disorder)	

What "counts" as a depression screen?

- Chart should contain documentation that depression screen (or assessment) was completed, scored, and results were communicated with the client;
- Documentation of screen/assessment does not have to be billing or code-based (verification should be chart notes/text-based)
- Documentation of active depression or bipolar diagnosis also does not have to be code-based but must be documented in chart

Resources

The Oregon Pediatric Society's START project trains primary care providers to implement depression screening and management in their practices for maternal depression and also adolescent depression.
http://oregonstart.org/modules/adolescent-depression/

Oregon SBHC Key Performance Measures Guidance Document
Optional Measure: Nutrition Counseling

Measure Description
The percentage of SBHC clients ages 5-21 with evidence of counseling for nutrition during the measurement school year

This measure is one of five <u>optional</u> Key Performance Measures (KPMs). All certified SBHCs in Oregon must select and report on one of these optional measures.

Eligible Population
All SBHC clients seen for any reason (including physical, mental, dental health visits) during the measurement school year (July 1 – June 30) ages 5-21 at the time of their visit

Exclusions
SBHC clients may be excluded from denominator if:

- Client 15 years of age or older refuses nutritional counseling; OR
- Parent consent for nutrition counseling is unable to be obtained after one attempt for client under 15 years of age

Measure Specifications

Denominator:	Eligible population
Numerator:	Unique counts of SBHC clients ages 5 -21 during the measurement school year (July 1 – June 30) who received nutrition counseling
Codes:	ICD-9-CM Diagnosis: V65.3; ICD-10-CM Diagnosis Z71.3 CPT: 97802-97804 HCPCS: G0270, G0271, G0447, S9449, S9452, S9470 OR Evidence of documented nutrition counseling in chart
State Benchmark:	20% of charts sampled with documented nutrition counseling during the measurement school year
Chart Audit Requirements:	SBHCs should audit 20% of their charts of the eligible population, with a floor of 30 charts and a ceiling of 50. If the SBHC has fewer than 30 eligible charts, they should review all eligible charts.

What "counts" as nutrition counseling?
The nutrition counseling KPM may be based on administrative (billing) data. To use the billing codes listed above, at least one of the following components must be present to count as nutrition counseling:

- Discussion of current nutrition behaviors (e.g., eating habits, dieting behaviors)
- Checklist indicating nutrition was addressed
- Counseling or referral for nutrition education
- Member received educational materials on nutrition during a face-to-face visit
- Anticipatory guidance for nutrition
- Weight or obesity counseling

Resources

Bellanca, Helen, 2006. Healthy Weight Management is for Everyone! La Clinica del Cariño Family Health Care Center, Inc. Available at: http://www.onecommunityhealth.org/wp-content/uploads/2013/04/Healthy-Weight-Management-Guideenglish.pdf

Hagan JF, Shaw JS, Duncan PM, eds. 2008. "Promoting Healthy Nutrition." Bright Futures: Guidelines for Health Supervision of Infants, Children, and Adolescents, Third Edition. Elk Grove Village, IL: American Academy of Pediatrics. Available at: https://brightfutures.aap.org/pdfs/Guidelines_PDF/6-Promoting_Healthy_Nutrition.pdf

Oregon SBHC Key Performance Measures Guidance Document
Optional Measure: Alcohol/substance abuse screening and brief intervention

Measure Description
The percentage of SBHC clients ages 12-21 who have a documented screen and brief intervention for alcohol/ substance use during the measurement school year. **Note: this measure differs from the CCO incentive measure in that it captures only screening and brief intervention for alcohol use, not referral to treatment.

This measure is one of five optional Key Performance Measures (KPMs). All certified SBHCs in Oregon must select and report on one of these optional measures.

Eligible Population
All SBHC clients seen for any reason (including physical, mental, dental health visits) during the measurement school year (July 1 – June 30) ages 12-21 at the time of their visit

Exclusions
SBHC clients may be excluded from alcohol and substance abuse screening denominator if:

- Client 14 years of age or older refuses screening; OR
- Parent consent is unable to be obtained after one attempt for client under 14 years of age

Measure Specifications

Denominator:	Eligible population
Numerator:	Unique counts of SBHC clients ages 12 -21 during the measurement school year (July 1 – June 30) who received a standardized screening tool for alcohol use or substance abuse
Codes:	99420, with ICD-9 codes V79.1 or V82.9 OR ICD-10 codes Z13.89 or Z13.9 – used for patients who received a full screen based on responses to the annual brief screening. There are no time limitations or requirements for this code. This coding combination is also used when a brief intervention lasting less than 15 minutes is performed. 99408 – used for patients who were screened and received a brief intervention (15-30 mins). 99409 – used for patients who were screened and received a brief intervention (> 30 mins). G0396 – used for patients who received alcohol and/or substance abuse (other than tobacco) structured assessment and brief intervention (15-30 minutes). G0397 – used for patients who received alcohol and/or substance abuse (other than tobacco) structured assessment and brief intervention (>30 minutes). G0442 – Annual alcohol misuse screening OR Evidence of documented alcohol/substance abuse screen in chart
State Benchmark:	20% of charts with documented alcohol/substance abuse screening and brief intervention during the measurement school year
Chart Audit Requirements:	SBHCs should audit 20% of their charts of the eligible population, with a floor of 30 charts and a ceiling of 50. If the SBHC has fewer than 30 eligible charts, they should review all eligible charts.

What "counts" as a substance abuse screen and brief intervention?

- Completion of a standardized alcohol/substance use screen such as CRAFFT (at least Part A), NIAAA screening questions, Michigan Alcohol Screening Test (MAST)
- If a youth screens positive on brief screen, documentation of assessment given.
- Documentation of score from screening tool and level of risk identified.
- Documentation of brief intervention/anticipatory guidance delivered based on clinical judgment and risk assessment. Note, some brief intervention codes listed above are time-based, so it is important to note start and stop time. Administration of the assessment is included in that time.

FAQ

Do I get credit for this measure if I only give the brief annual screen (i.e. Part A of CRAFFT) and the youth screens negative?

Yes, if the youth screens negative on the brief annual screen and there is documentation of anticipatory guidance/brief intervention in support of their healthy choices in their medical chart.

Resources

Provider Guide: Adolescent Screening, Brief Intervention and Referral to Treatment for Alcohol and Other Drug Use Using the CRAFFT Screening Tool. (March 2009).
http://www.ncaddnj.org/file.axd?file=2014%2F7%2FProvider+Guide+-+CRAFFT+Screening+Tool.pdf

Michigan Alcohol Screening Test
http://www.oregon.gov/oha/amh/SBIRT/Michigan%20Alcohol%20Screening%20Test%20%28MAST%29.pdf

NIAAA Alcohol Screening and Brief Intervention for Youth: A Practitioner's Guide.
http://pubs.niaaa.nih.gov/publications/Practitioner/YouthGuide/YouthGuide.pdf

Addictions and Mental Health Division, SBIRT Resource Page.
http://www.oregon.gov/oha/amh/Pages/sbirt.aspx