

MINIMUM PROGRAM REQUIREMENTS FOR NON-CLINICAL ADOLESCENT HEALTH CENTER PROGRAM

ELEMENT DEFINITION:

Services designed specifically for persons 10 through 21 years of age aimed at achieving the best possible physical, intellectual, and emotional status. Included in this element are Non-clinical Adolescent Health Centers designed to provide health education, peer counseling, screening/case finding services, referral for primary and/or specialty care, limited clinical services, outreach services and/or health related community awareness activities.

MINIMUM PROGRAM REQUIREMENTS FOR NON-CLINICAL ADOLESCENT HEALTH CENTERS:

1. A local advisory committee shall be established and operated as follows:
 - a) A minimum of two meetings per year.
 - b) The committee must be representative of the community and must be comprised of at least 50% members of the community; two-thirds of members must be parents of school-aged children and youth.
 - c) Health care providers shall not represent more than 50% of the committee.
 - d) The committee should recommend the implementation and types of services rendered by a non-clinical adolescent health center.
 - e) The advisory committee must approve the following policies and the non-clinical teen health center must develop applicable procedures regarding:
 1. Parental consent;
 2. Requests for medical records and release of information that include the role of the non-custodial parent and parents with joint custody; and
 3. Disclosure of clients or evidence of child physical or sexual abuse, and/or neglect.
 - f) Youth input to the advisory committee shall be maintained through either membership on the established local advisory committee; a youth advisory committee; or through other formalized mechanisms of youth involvement and input.
2. The non-clinical adolescent health center shall provide a range of services based on the needs of the target population. The non-clinical adolescent health center shall complete, update or have access to an adolescent health survey/assessment done within the last two to three years to determine the needs of the target population.
3. If clinical services are provided, they shall meet the recognized, current standards of practice for care and treatment of adolescents and their children.
4. The non-clinical health center shall not, as part of the services offered, provide abortion counseling, services, or make referrals for abortion services.
5. The non-clinical health center, when operating on school property, shall not prescribe, dispense or otherwise distribute family planning drugs or devices.

6. The non-clinical adolescent health center shall provide Medicaid outreach services to eligible youth and families and at a minimum, shall adhere to Child and Adolescent Health Centers and Programs (CAHCPs) outreach activities 1, 2 and 5 as outlined in MSA 04-13.
7. If non-clinical adolescent health center programming occurs on school property, there shall be a current interagency agreement defining roles and responsibilities between the contracting agency and the local school district.
8. The non-clinical health center shall have secured storage for supplies and equipment, and security of paper and electronic records if individual health information is collected.
9. The non-clinical health center shall establish a quality assurance mechanism (e.g. client satisfaction survey, focus group, other methodologies) that evaluates the effectiveness and appropriateness of services to teens.
10. The health center shall deliver services during hours accessible to its target population, and provisions must be in place for the same services to be delivered during times when school is not in session. Not in session refers to times of the year when schools are closed for extended periods, such as holiday, spring breaks, and summer vacation. These provisions shall be posted, given to and/or explained to clients including at a minimum an answering service/machine message.