

## **MINIMUM PROGRAM REQUIREMENTS SCHOOL WELLNESS PROGRAM**

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1. The School Wellness Program (SWP) shall provide a range of health and support services based on a needs assessment of the target population/community and approved by the community advisory council. The services shall be of high quality, accessible, and acceptable to youth in the target population. Age-appropriate prevention guidelines and screening tools must be utilized.
2. The SWP shall provide clinical nursing services full time during the school year. Clinical services shall include individual health services that fall within the current, recognized scope of registered nurse (RN) practice in Michigan.

Individual health services provided by the nurse may include screening/nursing assessments, case finding, immunization assessment and administration, first aid for minor injuries, chronic care interventions, hearing and vision screening, blood pressure monitoring, blood glucose monitoring, case management and/or referral to other needed primary care and specialty medical services.

- a) The health center shall be open during hours accessible to its target population.
  - b) The school-based health center shall designate specific hours for services to be provided to adolescents only (when the center serves both children aged 5 to 10 and adolescents), and a policy shall exist to this effect. These provisions shall be posted and explained to clients.
3. Each SWP shall implement one evidence-based program with fidelity and/or clinical interventions in at least one of the approved focus areas as determined through needs assessment data (For approved focus areas, see Attachment 2: Focus Areas).
4. The SWP shall develop a plan, in conjunction with appropriate school administration and personnel, to provide training and/or professional development to teachers and school staff in areas relevant to the SWP and school-specific needs.
5. The SWP shall provide direct mental health services full time during the school year. Mental health services provided shall fall within the scope of practice of the licensed mental health provider and shall meet the current recognized standards of mental health practice for care and treatment of the population served.
6. The SWP shall not provide abortion counseling services or make referrals for abortion services.
7. The SWP shall not prescribe, dispense, or otherwise distribute family planning drugs and/or devices.
8. The SWP shall provide Medicaid outreach services to eligible youth and families and shall adhere to Child and Adolescent Health Centers and Programs outreach activities 1 and 2 as outlined in MSA 04-13.

9. The SWP shall have a licensed physician as a medical director who supervises the medical services provided and who approves clinical policies, procedures, protocols, and standing orders.
10. The SWP nursing staff shall adhere to medical orders/treatment plans written by the prescribing physician and/or standing orders/medical protocols written by other health care providers for individuals requiring health supervision while in school.
11. The SWP shall have a licensed registered nurse (preferably with a Bachelor of Science in Nursing, with experience working with child/adolescent populations), working under the general supervision of a physician during all hours of operation.
12. The mental health provider shall operate within their scope of practice as determined by certification and applicable agency policies: The mental health provider shall hold a minimum master's level degree in an appropriate discipline and shall be licensed to practice in Michigan. Clinical supervision must be available for all licensed providers. For those providers that hold a limited license working towards full licensure, supervision must be in accordance with licensure laws/mandates and be provided by a fully licensed provider of the same degree.
13. The SWP staff shall provide services in no more than two school buildings. The SWP services shall be available during hours accessible to its target population.
14. Written approval by the school administration (ex: Superintendent, Principal) and School Board exists for the following:
  - a) Location of the SWP program within the school building.
  - b) Administration of a needs assessment process for students in the school.
  - c) Administration of or access to a needs assessment for teachers/staff.
  - d) Parental and minor consent policy.
  - e) A current interagency agreement shall define the roles and responsibilities between the local school district and sponsoring agency and the school-based health center if one exists in the same school district.
  - f) Services rendered through the SWP.
15. Services provided shall not breach confidentiality of the client. Policies and procedures shall be implemented regarding proper notification of parents, school officials (when allowable and appropriate), and/or other health care providers when additional care is needed or when further evaluation is recommended. The SWP must establish a procedure that doesn't violate confidentiality for communicating with the identified Primary Care Provider (PCP), based on criteria established by the provider and the Medical Director.

Policies and procedures regarding notification and exchange of information shall comply with all applicable laws e.g., HIPAA, FERPA and Michigan statutes governing minors' rights to access consent for care.

16. The SWP shall implement a continuous quality improvement plan for nursing and mental health services. Components of the plan shall include at a minimum:

- a) A CQI Coordinator shall be identified. CQI meetings, that include all staff associated with SWP program, shall be held at least quarterly. These meetings shall include discussion of reviews, client satisfaction survey and any identified clinical issues.
- b) Practice and client record review shall be conducted at least twice annually by an appropriate peer and/or other peer-level staff of the sponsoring agency, to determine that conformity exists with current standards of care. A system shall also be in place to implement corrective actions when deficiencies are noted.
- c) Completing, updating, or having access to a needs assessment process conducted within the last three years to determine the health needs of the population served including, at a minimum, a risk behavior survey for adolescents served by the SWP.
- d) Conducting a client satisfaction survey at a minimum annually.

17. A local community advisory council shall be established and operated as follows:

- a) A minimum of two meetings per year.
- b) The council must be representative of the community and include a broad range of stakeholders such as school staff.
- c) One-third of council members must be parents of school-aged children/youth.
- d) Health care providers shall not represent more than 50% of the council.
- e) The council must approve the following policies and the SWP must develop applicable procedures:
  - 1. Parental and minor consent policy.
  - 2. Requests for medical records and release of information that include the role of the non-custodial parent and parents with joint custody.
  - 3. Confidential services as allowed by state and/or federal law.
  - 4. Disclosure by clients or evidence of child physical or sexual abuse, and/or neglect.
- f) Youth input to the council shall be maintained through either membership on the established advisory council; a youth advisory council; or through other formalized mechanisms of involvement and input.

18. The SWP shall have space and equipment adequate for private visits, reception, private counseling, secured storage for supplies and equipment, (laboratory services, if applicable) and secure paper and/or electronic client records. The physical facility must be barrier-free, clean, and safe.

19. For SWP's participating in laboratory services, the health center shall conform to the regulations determined by the Department of Health and Human Services for laboratory standards.

20. The SWP shall follow all Occupational Safety and Health Act guidelines to ensure protection of SWP personnel and the public.

21. For SWPs participating in billing: the SWP shall establish and implement a sliding fee scale, which is not a barrier to care for the population served. Users must not be denied services because of inability to pay. CAHC state funding may be used to offset any outstanding balances to avoid collection notices and/or referrals to collection agencies for payment.

22. Revenue generated from the health center must be used to support SWP health center operations and programming.

23. For SWPs participating in billing: the billing and fee collection processes do not breach the confidentiality of the client.

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**CHILD AND ADOLESCENT HEALTH CENTERS  
CLINICAL AND ALTERNATIVE CLINICAL MODELS  
and SCHOOL WELLNESS PROGRAMS  
Attachment 2: Focus Areas**

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Each year, health centers and SWPs should review their needs assessment data to determine priority health issues that are of such significance to their target population to warrant an enhanced “focus” for the upcoming year. Each center is required to implement at least one evidence-based program or clinical intervention to begin to address the needs within the selected focus area(s).

**FOCUS AREAS**

- ALCOHOL/TOBACCO/OTHER DRUG PREVENTION
- HIV/AIDS/STI PREVENTION
- NUTRITION AND PHYSICAL ACTIVITY
- PREGNANCY PREVENTION
- SUICIDE PREVENTION
- TRAUMA
- VIOLENCE PREVENTION
- DEPRESSION/ANXIETY
- ASTHMA

Focus areas are meant to provide services above and beyond what would typically be provided in comprehensive primary care. It is expected that each of these focus areas will be a part of comprehensive primary care already, but interventions selected for the focus area requirement should be significantly beyond typical care. Strategies should be intensive, evidence-based, and include appropriate evaluation methods to assess impact and progress on meeting focus areas.

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