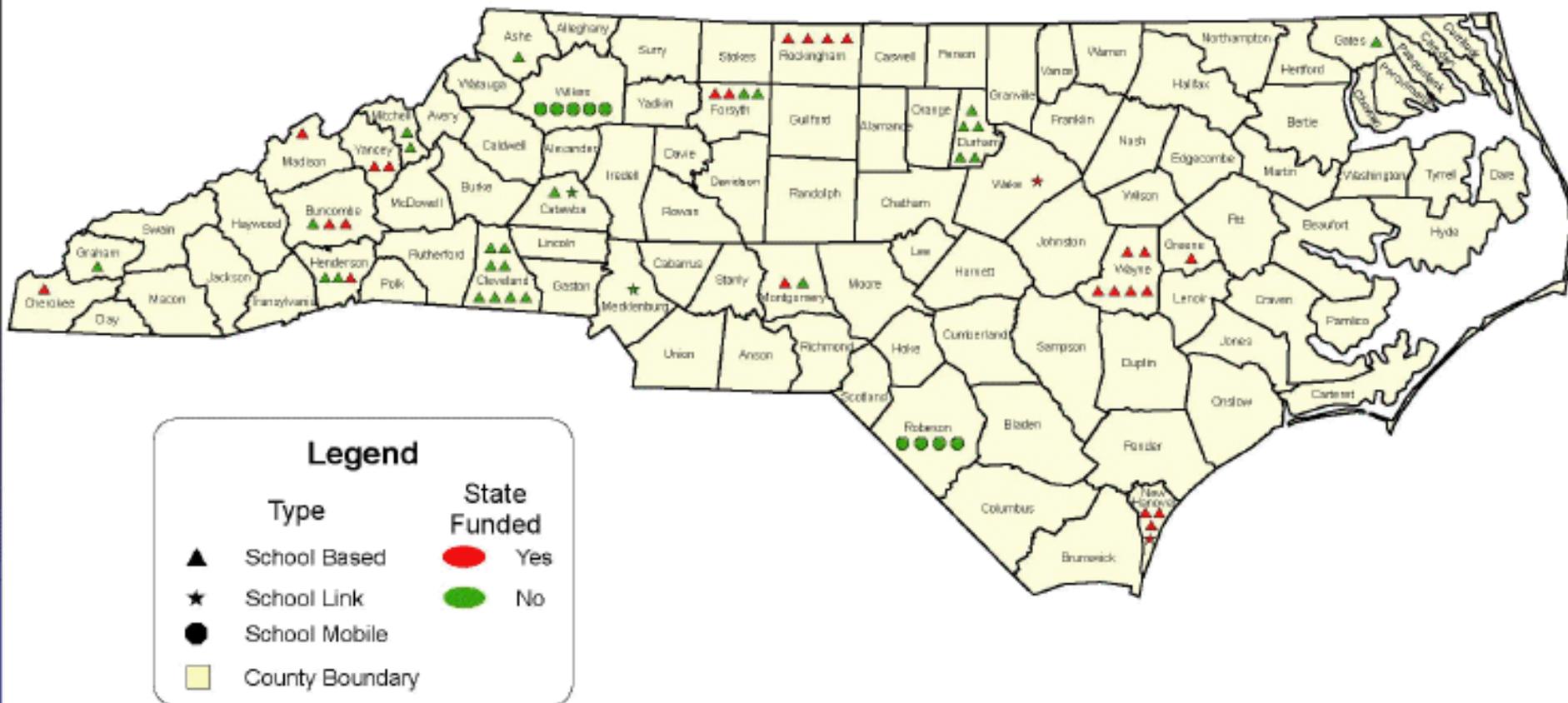


NC School-Based, School-Linked & Mobile Health Centers, May 2010



SHS Wellness Center

- Well child exams—
complete, Sports, women
- Acute Illness and Injury
- Mental health concerns
- Nutritional concerns
- Referral service for
medical homes, vision,
dental, chronic care
- Health education for
students and
professionals
- Use of Duke EMR, NCIR



How is this accomplished?

- One APN, one C.N.A., one administrator
- Team-building with University Health System and community partners
- Team-building with School administrators and health professionals.
- State Credentialed



Barriers

- No On-site dental provisions
- Mental health providers are not available every day.
- Pediatric limitations prevent entire community to be cared for on site.
- SHS logistics in the community
- C.N.A. is limited in scope of practice, unable to use standing orders if APN is unavailable.
- Closed during the summer, holidays.
- No day-care, prenatal care provisions.
- Unable to provide contraception

Strategies for the future

- Advocacy work to grow SBHC's in N.C.
- Training to allow R.N.'s to receive certification to perform WCC, immunizations, urgent care at SBHC's with supervision.
- Include RN's, PA's, PNP's, FNP's, medical residents in SBHC training. Provide information to all providers on this resource.
- Focus on "at risk" communities to build SBHC's with state support.
- Improve and build the State School Health office to provide support to research and show the evidence of effectiveness.
- Provide funding (Fed and State) for RN training, technical assistance to SBHC's and support the NCSCHA.

Contact information

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