



redefining
health

FOR KIDS AND TEENS



**SCHOOL-BASED
HEALTH ALLIANCE**
Redefining Health for Kids and Teens

2012-2013 Annual Report | October 1, 2012 – September 30, 2013

This year, our annual report features a collection of stories from individuals in the school-based health care movement who have been affected by our work.

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*This letter is published posthumously by our President, Linda Juszczak.
Read more about Linda's life and legacy at www.sbh4all.org/lindaslegacy.*

Reflections on our new brand

In 2010, it became increasingly obvious to me that something was wrong with our brand. Whenever I met with other organizations, saying that I represented the National Assembly on School-Based Health Care didn't convey to them who we are or what we do. Our name always had to be followed by a specific description of our work before anyone would get it. When you aren't recognized, what do you do? We needed to rebrand.

The process of rebranding was exhilarating and challenging. We made the decision very early that the state associations would be brought along with us. A process of rebranding in isolation made absolutely no sense. Our goal from the beginning was to take complete advantage of our joint work and collaboration, and including the states was the only way to accomplish this. As of this writing, I'm pleased to note that eight states have joined us by cobranding. I hope to welcome several more in the coming months and years.

The power of the states cobranding with us is extraordinary. When the field sees that this is not an organization that is just in Oregon or Washington, DC, but in fact, it connects the local, state, and federal levels, there is power in that. Work in a school-based health center can feel isolating. Our hope is that the new brand and our cobranding affiliates can lessen that feeling.

At the 2013 National School-Based Health Care Convention in Washington, DC, we unveiled the new name, logo, and tagline for our organization: School-Based Health Alliance, Redefining Health for Kids and Teens. The new brand means excitement, momentum, collaboration, flexibility, and transformation. Rebranding has made us look at our work as an inventory of possibilities. It has gone across all aspects of our organization, from programs to policy to communications, and it allows us to move in directions where we have not gone in the past. My hope for the future of the brand is that these things will continue to become apparent to the school-based health care field as we grow together.



Linda Juszczak, DNSc, MPH, MS, CPNP, RN
President, School-Based Health Alliance
2009 - 2014

Dr. Neal Halfon was one of the opening plenary speakers at the 2013 National School-Based Health Care Convention in Washington, DC. He spoke about the role school-based health care can play in a changing health care system.

What is the Fit for SBHCs within the **changing context of children's health care?**

Neal Halfon, a preeminent figure in the child health policy arena, took on that question as the opening keynote speaker at the 2013 national school-based health care convention in Washington, DC. Dr. Halfon delivered searing criticism of the current child health system. “While various policies and programs have evolved, often program by program, to meet specific needs of children, this patchwork of programs lacks unifying logic and goals,” Halfon said. As a result, he said, the system is characterized by poor coordination between sectors and antiquated models of care that emphasize episodic treatment over prevention and early intervention.

“It’s a paradox,” observes Halfon, “that we’ve experienced dramatic health improvements as a nation, yet continue to face persistent and increasing disparities in morbidities and outcomes among some populations. Outmoded thinking about our system of care and an anemic policy

strategy have contributed to the inequities.”

Halfon argues it is in childhood—when social, environment, and family adversities forge early pathways to disease—that we have the power to shift the health curve, and not just bend it. “It’s the greatest leverage that we have.”

Halfon and colleagues at the UCLA Center for Healthier Children, Families, and Communities offer a visionary framework for big, bold, transformative change of the child health system. At the center of the innovative model is a goal that children not just survive but thrive, casting a pivotal role for school health. “We must shift our focus upstream to the social, emotional, and developmental determinants of health, minimize risk factors, maximize protective factors, and ultimately, close the opportunity gap between optimal development and current experience. Not until we address the ‘causes of the causes’ will we see appreciable differences in population health outcomes.”

Given their unparalleled access to the student population and ability to influence these upstream determinants, schools—and school-based health centers in particular—can play an invaluable role as centers for community wellness, advises Halfon. But continued isolation from larger community health systems will only perpetuate the ancillary status of school health. SBHCs must evolve to achieve full integration into schools and communities. School health will be part of the child health care transformation story, according to Halfon, if it attends to some transformation of its own, including:

- » Advancing well-defined school health models to minimize variability across programs and services.
- » Demonstrating school health's value by collecting better data and linking it across youth-serving systems.
- » Getting to the design table to create and advocate for new payment mechanisms that will decrease marginalization and support a life course approach to child health.
- » Leading the way in developing measurement, learning, and improvement systems necessary for catalyzing population-level health changes that focus on the upstream determinants of health.
- » Creating strategic alliances with community health partners and initiatives.
- » Linking school health with social impact financing and other funding innovations.



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Bringing Health Care to **new populations**

The School-Based Health Alliance's two-year CDC-funded Young Men Who Have Sex with Men (YMSM) Project, which focused on HIV/STI prevention for high-risk males, concluded on July 31, 2013. Through this project, the Alliance worked the Montefiore School Health Program to increase outreach to a high risk, historically difficult population to reach. Margee Rogers, Montefiore project director, tells her story below on how the School-Based Health Alliance helped her take on this monumental task:





“We were approached by the School-Based Health Alliance when they were chosen by CDC-Division of Adolescent and School Health

(DASH) to oversee the New York portion of the YMSM project. Because we are the largest SBHC program in the city, in the country, we stand out. The Bronx has the highest rate of teen pregnancy and HIV and other critical areas. We were chosen; we were willing.

“There was a list of schools that were eligible to participate, and they had to meet a certain number of criteria regarding ratios of male to female, African American, Hispanic, and impoverished students. Several schools fit into those areas. New York City public high schools are complex systems, and there are no large, single schools at one site anymore. Each site is now a campus with multiple schools in the building. Each site chosen had some schools fitting the category for the grant. We were interested in serving YMSM all along, and in increasing our outreach to young men in general.

“The first significant thing was general discussion about what we would like to achieve, then we were looking at basic things in the first year, such as developing alliances and partnerships. Next, we had Dr. Bruce Armstrong, Associate Professor at Columbia University’s Mailman School of Public Health, and Dr. Alwyn Cohall, Professor at Columbia University, do a presentation for our staff to talk about how to get more men into the practice. I heard Bruce say the only way to get more YMSM is to get more men. That became the guiding principle for the whole project. We wanted to serve YMSM, but unless we served all men we wouldn’t reach them.

“We then focused on training our staff to be more open and to create an environment where men will come in. We invited all of our high school

staff to a training on this topic. It was crowded, but outstanding. They talked through a lot of the issues that impede coming to the clinic: what is on the walls, how we reach out, who we bring in, how we talk, social marketing.

“What grew out of that was a purchase order for all of the materials that are available. We took all the things Bruce and Al told us about, and created new materials. We created a list of all supplies available that would create an adolescent and gay male-friendly environment and did an order for all our sites. We worked on the environment of our centers, worked on events that attracted men. We accomplished a lot over a short period: provider and staff awareness, creating a

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friendlier environment in our clinic language and materials, and direct outreach. We held a number of events directed at young men, including HIV testing days, young men health days, condom distribution, and other educational services.

“I am grateful that we went through this process. This initiative has improved our ratio of young men to young women in the clinic. We have one site with more men than women, but that is unusual. More men are enrolling and using our clinics, and the clinics have stayed much friendlier to men. Every time we hold an event—these events are annual—every time we see them we see mind boggling numbers of men.”

Empowering **the youth voice**



The School-Based Health Alliance convened its inaugural Youth Advisory Council (YAC) in 2013. Youth are the primary recipients of school-based health care services, and the YAC serves as a vehicle to bring the youth voice into the national organization's work, while also empowering a group of talented young people to be effective advocates for their health.



The inaugural council consists of five youth leaders from across the nation. These students provide feedback on the School-Based Health Alliance's efforts to address adolescent health policies and programs. They are integral in the planning of the Youth Track at the National School-Based Health Care Convention, and have taken up the charge of advocating for SBHCs to play a bigger role in health-related issues



young people face, such as teen suicide and relationship abuse.

Simone Bernstein, a member of the YAC and President and Co-Founder of VolunTEENation.org—a

nation-wide, youth-led, volunteer-driven nonprofit dedicated to engaging youth in service—feels the YAC provides valuable insights, particularly due to the diversity of council. Members come from different states; some have had access to an SBHC in their school, and others have spent their high-school years campaigning to bring an SBHC to their school. “We are all from different parts of the country and have had the opportunity to learn from one another,” said Bernstein. “It’s an amazing opportunity to express your views and learn about communities you aren’t a member of.”

The YAC members have contributed greatly to the organization, as well. Two members—Jhana Parikh and Tyler Lang—spoke in front of a crowd of hundreds during a rally before heading to Capitol Hill to meet with their representatives for 2013’s Advocacy Day of school-based health care advocates in Washington, DC. Due to their professionalism and enthusiasm, the YAC was invited to meet with U.S. Secretary of Education Arne Duncan, along with members of the U.S. Department of Education and the U.S. Department of Health and Human Services, during a student voices summit in September, 2013. The meeting brought great exposure to the work the School-Based Health Alliance has accomplished in youth engagement.

Membership on the council is preparing the youth for a leadership role. Jhana Parikh gave a passionate speech during the 2013 Advocacy Day rally, and the

experience has helped her grow personally and professionally. “It was terrifying to speak during advocacy day,” said Parikh, “but I’m glad I did it. I’m happy I got public speaking experience in front of a crowd that large. I’m not so nervous, now, when I have to give a presentation.”



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When the YAC met with Secretary Duncan, Parikh was charged with *the ask*—a request that the Secretary support \$50 million in funding for SBHC operations authorized by the Affordable Care Act. After speaking to the students, the Secretary was ready to leave the room. Parikh wouldn’t let him go until she asked him to support the funding. Clearly, nerves are no longer an issue.

Changing the Map **in Kansas**

One of the School-Based Health Alliance's greatest advocacy achievements to date has been the allocation of one-time only federal funds, totaling \$200M, to build and expand school-based health centers. After the disbursement of the funds was completed this year, we expected to see several cities at the top of an awards list that numbered 520 grants. New York, Los Angeles, and Chicago have a long history of support for SBHCs and run some of the nation's largest and finest programs. Joining them on this list, however, was a complete surprise: Wichita.



How did a community with a limited SBHC history find themselves the beneficiary of a \$3M investment?

GraceMed Health Clinic, a Wichita-based federally qualified health center (FQHC), helped establish some of the first SBHCs in the Wichita area in the late 1990s. A broader SBHC movement was never able to gain momentum, however. “There was just no money, no effort to create a state program, no leadership from the state health department, and a general sentiment that schools should be focused on education, and not get involved in health care,” explained David Sanford, CEO of GraceMed. There was, however, a significant unmet need in the Wichita area. “We have pockets of poverty and low-income housing scattered all throughout the city, and they are absolute health care deserts, with no medical or dental facilities nearby,” described Sanford.

When the Health Resources and Services Administration (HRSA) released guidance for the School-Based Health Center Capital Program in 2011, GraceMed seized the opportunity to expand health care access in Wichita’s most underserved areas. Through a strategic partnership with Unified School Districts 259 and 260, as well as the Sedgwick County Health Department, GraceMed submitted multiple proposals for the construction of new SBHCs, all of which were successfully funded. The Wichita area is now home to seven SBHCs, which operate in two high schools, four elementary schools and one middle school. All seven SBHCs serve low-income, medically underserved communities that are also ethnically diverse. While several clinics serve predominately African-American, Hispanic, and white populations, others serve predominately Southeast Asian and Middle Eastern immigrant communities. “We project each clinic to serve at least thirty-two hundred unduplicated patients per year, with school age children comprising seventy percent of that,” said Sanford. In addition, they project all seven clinics to be self-sustaining within six months.

The key to Wichita’s success, according to Sanford, was GraceMed’s willingness to take the lead on all seven proposals and do the

heavy lifting. “While each of the three partner organizations alternated as official applicants on the proposals, in each case GraceMed was the coordinating entity, submitting all required documents,” explained Sanford. While the influx of Capital Program funding for building and construction has provided the essential foundation for a sustainable future for these seven clinics, GraceMed has raised the necessary capital funding for clinic operations for all seven sites. They have accomplished this through support from Kansas and Wichita-based foundations, companies, and individuals, as well as the United Methodist Church, with whom GraceMed is affiliated.

Looking to the horizon, Sanford remains optimistic about the future of SBHCs in Kansas, but also recognizes the current political limitations. “It’s not likely that Kansas will join the list of state-sponsored initiatives in the immediate future, as many state legislators hold a negative view of anything Affordable Care Act related. But once they learn that half the cost of these new SBHCs is

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covered by the federal government, and the other half is self-sustaining through patient revenues, they are more receptive to the model,” explained Sanford. The School-Based Health Alliance applauds the expansion of SBHCs in Wichita and is confident that this momentum will help build a larger SBHC movement throughout the state.

Taking Action towards **sustainability**

Across the nation, school-based health centers are taking action to build their programs' long-term sustainability. California's West Oakland Middle School (WOMS) School-Based Health Center (SBHC) embraced the School-Based Health Alliance's sustainability framework — Engineering Sustainable SBHCs — to organize its work and build a more financially sound program. Lamont Snaer, School Based Services Director at LifeLong Medical Care in Berkeley, CA, explains how he's putting the Alliance's sustainability principles into practice.



“From day one of opening the doors at West Oakland Middle School SBHC, our program’s primary sustainability objective was to help the staff perform at their most optimal and efficient level. We sent staff to attend the National School-Based Health Care Convention where they learned best practices in quality improvement. Additionally, our staff took advantage of the School-Based Health Alliance’s sustainability tools. The sustainability self-assessment tool helped us identify areas of operations that we needed to target for improvement. The SBHC cost survey gave us a more comprehensive understanding of the components and costs that go into our operations.

To ensure seamless integration into the middle school, we prioritized raising awareness of the SBHC services offered to school faculty. We’ve had huge success in getting faculty to support our work. We host staff luncheons to discuss the benefits of our services. And we’re intentional about adopting the language of education when talking about our work to school faculty, as well as demonstrating that our SBHC complies with school-wide policies.

Because West Oakland Middle School is a full-service community school, the SBHC has access to the school’s multiple partner organizations, many of which offer a range of support and opportunities for improved student learning, stronger families, and healthier communities. We partner with Elev8 Oakland to help connect students seen at the clinic to local youth and family engagement activities, as well as Our Kids, Our Families, to provide behavioral health services to students with behavioral health needs.

We spent most of our first year and a half building partnerships with school faculty, students and community providers to secure buy-in from our most important stakeholders. Next year, we’re focusing on strengthening the third leg of sustainability: quality practice, and broadening our

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service offerings to include immunizations and birth control as well as broadening our population by creating partnerships with surrounding area schools to provide services to a broader population of kids and youth. We have already signed up to participate in the California School-Based Health Alliance’s quality improvement initiative.”

Hallways to health

Hallways to Health—a three-year project part of Kaiser Permanente’s larger Thriving Schools initiative—officially kicked off in 2013. The goal of this partnership is to build the skills and practices required for SBHCs to facilitate improvements in health care and behavior among students, their families, and school staff. Focus areas include obesity prevention and treatment, social and emotional health, and school employee wellness. We spoke with Bianca LaChaux Director of Student Support Services at John F. Kennedy High School in Richmond, CA, and Kathleen Malcolm, Health Educator at Lake Forest Elementary SBHC in Sandy Springs, GA, to hear how Hallways to Health is affecting their work.



Bianca LaChaux
John F. Kennedy High School
Richmond, CA

“Thanks to the Hallways to Health Grant we have been able to increase capacity for mental and physical health services. We have a multidisciplinary approach to the way in which we accomplish our goals. Currently we have several projects which include; Hallways to Health, Safe Routes to Schools, Contra Costa County Nutrition and Physical Activity Project, and the YMCA REACH. Our goal has been to find a way to leverage resources that provide support to the students and their families. Technical support and guidance received from the School-Based Health Alliance contributes to our success.

“We have implemented a number of programs. The additional resources have allowed the YMCA to hire new staff at the SBHC, including two fitness trainers, a nutrition assistant, and a culinary artist. This would not have been possible without the support from this grant.

“Our students are provided leadership opportunities as research assistants and project staff. As an example, several students have provided assistance on two projects that reach out to our community. We work in collaboration with the Safe Routes to School program staff (also a Kaiser Permanente Thriving Schools Grantee) to send six students within the community to meet with parents and collect feedback on what barriers they may face that would prevent them from walking to and from school daily. We’ve also engaged students in another research project. One goal is to learn what barriers families may face in increasing levels of physical activity. Students also survey community members on the number of meals that include fresh fruits and vegetables weekly. Another question on the survey asks participants if they are aware of services and resources in the community. There are several walking trails in Richmond. Many community members may not be aware of the resources that are available and accessible.

“In addition, students have the opportunity to participate in our “Up” program. This is a healthy lifestyles program where students self-refer or are referred by providers. Students receive a physical, which includes a baseline health assessment. They are also provided with a fitness tracking band. Our health educator or nutrition assistant meets with the students weekly and discusses their diet behavior and physical activity. The school serves as a hub for extending physical activity after-school which is a safe and supportive environment.

“One objective included in our work plan is to increase parent participation. I’m happy to say we have been able to accomplish our goal. We are in communication with the Contra Costa Food Bank to begin a farm to school program which will be coordinated by parents.

“Without Hallways to Health and support from the School-Based Health Alliance, we wouldn’t be able to leverage our resources, and provide much need services to our students and families.”

“We are also excited that our students advocate for themselves and their peers in areas of healthy lifestyles. Our Youth Advisory Board is currently working on several wellness initiatives. I am hopeful that this will be the new norm. These students are concerned about their environment

and their community and their overall wellness. Maybe they can be the next in line to impact policy that will provide a healthier environment in which they live and go to school.

“Our school-based health center has many activities. The support from the state and national level has provided our health center staff the support we need to carry out our vision. This has been an incredible journey for us! Without Hallways to Health and support from the School-Based Health Alliance, we wouldn’t be able to leverage our resources, and provide much need services to our students and families.”

Kathleen Malcolm
Lake Forest Elementary SBHC
Sandy Springs, GA

“The project is amazing, wonderful. So many exciting things are happening here in the school.

“The youth wellness program was implemented last year. We have over 900 students currently enrolled in Lake Forest. The program was overwhelming, but in a good way. At one point we had to cut it off. We started with 83 enrollees who met weekly. We checked their height, weight, pulse, and waist measurement. In January we will do a second assessment. The final weigh in will be May 7, 2014. We will use the data to determine

the impact on students involved in the program. The students are excited. They are participating in different activities in the gym and outside on nice days. We anticipate quite a few students to have lost weight or remained constant. Hopefully towards the end of next assessment we will see vast improvement.

The project is amazing, wonderful. So many exciting things are happening here in the school.

“Next year we will have enrollment again. We have other students who want to be part of the program. Eventually, we hope it will sustain itself on its own.

“The School-Based Health Alliance has been very supportive. I like the training modules and webinars they’ve presented. The webinars were all very informative and the presenters are great. That part is awesome. They are awesome to work with.”



Financial information

	2012-2013	2010-2011
ASSETS		
Current Assets	2,478,348	2,591,124
Total Fixed Assets	3,868	8,093
Other Assets	23,041	30,484
TOTAL ASSETS	2,505,257	2,629,701
LIABILITIES AND EQUITIES		
Total Liabilities	212,793	220,849
Unrestricted Net Assets	922,952	892,526
Restricted Net Assets	1,369,512	1,516,326
TOTAL LIABILITIES AND EQUITIES	2,505,257	2,629,701
FY REVENUE		
Grant/Foundation Income	2,601,370	2,839,010
Annual Conference	418,900	381,775
Membership Dues	89,125	82,375
Contributions/Interest	38,247	36,820
Professional Services	50,683	153,337
	3,198,325	3,493,317
FY EXPENSES		
Administration	562,448	507,596
Annual Conference	313,091	271,981
Professional Services	22,924	98,189
Public Affairs	351,005	677,062
Technical Assistance	2,065,245	1,312,570
	3,314,713	2,867,398

Funders and supporters

The School-Based Health Alliance is privileged to have a broad base of child health advocates and experts who support and fund our work. Thank you for working with us to achieve our vision that all children are healthy and achieving at their fullest potential.

FOUNDATIONS

Aetna Foundation
The Atlantic Philanthropies
S.D. Bechtel, Jr. Foundation
Francis Beidler Foundation
The Colorado Health Foundation
Ford Foundation
Health Foundation of Greater Cincinnati
Kaiser Permanente
The O'Neill Foundation

GOVERNMENT

Centers for Disease Control and Prevention
Department of Health and Human Services,
Bureau of Primary Health Care
Department of Health and Human Services,
Maternal and Child Health Bureau

Finally, a special thank you to all of the individuals who give their time, expertise, and donations to support School-Based Health Alliance's work. We could not succeed without you.

ORGANIZATIONAL MEMBERS

Abrazo Health Care
Adolescent School Health Program
Alameda County Health Care Services Agency
Albany Area Primary Health Care, Inc.
AMD Global Telemedicine
American Dental Hygienists' Association
American Optometric Association
AnMed Health
Appalachian District Health Department
Axis Health System

Bacon County Board of Education
Banner Health System
Barber Middle School
Beaufort Jaspert Hampton Comprehensive
Health Services, Inc.
Belington Community Medical Services Association
Borrego Community Health Foundation
Bronx Community Health Network, Inc.
Brooks County Family Connection
Building Healthy Futures
Butts County Schools
California School Health Centers Association

Campbell County School District
 Candler County Family Connection
 Center for Family Health
 Center for School, Health, and Education
 Centro De Servicios Primarios De Salud De Patillas, Inc.
 Cherry Street Health Services
 Child and Family of SE CT, Inc.
 Children's Aid Society
 Children's Home Society of Florida
 Children's Medical Center Dallas
 Christiana Care Health Services, Inc.
 City of Minneapolis School Based Clinics
 City of Portland Maine Public Health
 City of Sioux Falls Health Department
 Clark County School District
 Clayton County Public Schools
 Coastal Family Health Center
 Codman Square Health Center
 Community Care of West Virginia
 Community Clinic
 Community Clinical Services
 Community Health Administration, Department of Health
 Community Health Network
 Community Health of South Dade, Inc.
 Corner Health Center
 Delhi Community School Based Health Center
 Denver Health - School-Based Health Centers
 Administrative Office
 DHSS, Division of Public Health
 Dirne Health Centers, Inc.
 Dorchester County Health Department
 East Harlem Council for Human Services
 Education Plus Health
 Edward M. Kennedy Community Health Center
 Eisner Pediatric & Family Medical Center
 El Centro Family Health
 Emanuel County Family Connection Collaborative
 Envision New Mexico
 Evanston Township High School Health Center
 Fair Haven Community Health Center
 Falls Community Health
 Family Centers Inc., SBHC
 Family Health Centers of San Diego, Inc.
 Fayetteville Public Schools Wellness & Education Clinic
 First Choice Primary Care
 Fred Finch Youth Center
 Fresno County Office of Education
 Georgia Mountains Health Services, Inc.
 Golden Valley Health Centers
 Greene Area Medical Extenders, Inc.
 Greene County Health Care, Inc.
 Growing Well Cincinnati
 Hackley Community Care Center
 Harrison Wellness Center
 Hays CISD
 Health Foundation of Greater Cincinnati
 Health Net
 HealthLinc, Inc.
 Heartland International Health Center
 Henry Ford Health System
 Heywood Hospital - Murdock School-Based Health
 Center
 Howard University Department of Pediatrics
 Ingham County Health Department
 Innis Community Health Center, Inc.
 International Community Health Services
 Jamaica Hospital Medical Center
 Jasper School Based Health Center
 Jefferson Parish Public School System
 Jessie Trice Community Health Center, Inc.
 Kaleida Health
 KCHWC
 Kenosha Community Health Center
 La Clinica de La Raza, Inc.
 La Clinica del Valle/Kids Health Connection
 La Maestra Family Clinic, Inc.
 Lamar County School-Based Health Clinic
 Lanai Community Health Center
 Lane County School District #52
 Las Clinicas Del Norte, Inc.
 Learning Well, Inc.
 Lincoln Consolidated School District

Lincoln Primary Care Center, Inc.
 Linkages to Learning
 Long Branch High, SBYSP
 Los Angeles Trust for Children's Health
 Los Angeles Unified School District
 Louisiana School-Based Health Alliance
 Lowndes/Valdosta Commission for Children & Youth
 Loyola University of Chicago/Niehoff School of Nursing
 MA Association for School-Based Health Care
 Manchester Local School District
 Manchester Local Schools/ACRMC
 Mary Imogene Bassett Hospital
 Mary's Center for Maternal and Child Care
 McIntosh County Health Planning Board
 MedImmune
 Merck & Co., Inc.
 Mercy Clinic Roosevelt High School
 Mercy Health Partners
 Mercy Health System
 Mercy Hospital & Medical Center
 Metropolitan Community Provider Network
 MGH Community Health Associates
 Middletown Community Health Center
 Milford Regional Medical Center
 Mission City Community Network, Inc.
 Monroe County Department of Education
 Montefiore Medical Center, School Health Program
 Morehouse Community Medical Centers, Inc.
 Morris Heights Health Center
 Mount Sinai Medical Center
 Mountain Comprehensive Health Corporation
 Multnomah County SBHC Program
 National Association of Pediatric Nurse Practitioners
 Native American Health Center
 Near North Health Service Corporation
 Neighborcare Health Centers
 Neighborhood Health Care Inc.
 Nevada State College, Dr. Joel and Carol Bower
 Health Center
 Nevada State Health Division
 North Country Healthcare
 North Valley Hospital
 Northeast Valley Health Corporation
 Northern Oswego County Health Services, Inc.
 NorthShore Health Centers
 Oakland Primary Health Services
 Ocean Health Initiatives, Inc.
 Office of School and Adolescent Health
 One World Community Health Centers
 Open Door Family Medical Center, Inc.
 Oregon Public Health Division
 Outside In
 Padre Pio Clinic St. Anthony High School
 Peak Vista Community Health Centers
 Pender Alliance for Teen Health
 Phoebe Putney Memorial Hospital
 Pike County's YES Team, Inc.
 Pointe Coupee Central School Based Health Center
 Primary Health Care Center of Dade, Inc.
 Project Vida Health Center
 Public Health Seattle & King County
 Quality of Life Health Services Inc
 Refuah Health Center
 Regional Alliance for Healthy Schools
 River Valley Counseling Center
 Rochester General Health System
 Rockdale Coalition for Children & Families
 Rocking Horse Community Health Care
 Center/Keifer Center
 Ronald McDonald Care Mobile School Based Clinic
 Rural Children's Mental Health Consortium
 Rush University Department of Community Health Nursing
 San Bruno Park School District
 Santa Rosa Community Health Centers
 Shalom Health Care Center, Inc.
 SHS School-Based Health Center-Health Delivery, Inc.
 South Beloit SBHC
 South End Community Health Center
 South Georgia Prevention Coalition
 Southern Nevada Immunization and Health Coalition
 Southwest Utah Community Health Center, Inc.
 Spring Creek Health Cooperative

St. Elizabeth Medical Center
 St. Francis Medical Center
 St. John School-Based Health Centers
 St. John's Well Child & Family Center
 St. Luke's Community Health Department
 Student Health Options The Health Center
 Summit Community Care Clinic
 Sun Life Family Health Center
 Sunrise Community Health
 Texas Association of School Based Health Centers
 The Center for Rural Health Innovation
 The Community Foundation of Southern New Mexico
 The Good Samaritan Health Center
 The Health Foundation of Greater Indianapolis, Inc.
 The HealthCare Connection, Inc.
 The Public Health Foundation of Columbia County
 The Resource Center
 The Wellness Center at Jones Elementary
 The Wright Center Medical Group, PC
 Thundermist Health Center
 Total Health Care
 UIC Neighborhoods Initiative
 UIHSS Community Engagment and Neighborhood
 Health Partnerships
 University of Central Florida
 University of Colorado College of Nursing
 University of Oklahoma: OU Physicians Tulsa
 Community Health
 University of New Mexico Department
 of Pediatrics, Envision
 Urban Health Plan, Inc.
 Vermillion-Parke Community Health Center
 Vine Middle Magnet School Health Center
 Ware County Schools
 West End Medical Centers, Inc.
 West Side Community Health Services
 Whitney Young Jr. Health Center
 Winthrop University Hospital
 Womenscare, Inc.
 Yavapai Reg Medical Center
 YMCA of the Eastbay



STATE AFFILIATES

Arizona School-Based Health Care Council, Inc.
 California School Health Centers Association
 Colorado Association for School-Based Health Care
 Connecticut Association of School-Based Health
 Centers, Inc.
 Florida Coalition for School Based Health Care
 Illinois Coalition for School Health Centers
 Louisiana Assembly on School-Based Health Care
 Maine Assembly on School-Based Health Care
 Maryland Assembly on School-Based Health Care
 Massachusetts Association for School-Based Health Care
 School Community Health Alliance of Michigan
 New Mexico Alliance for School-Based Health Care
 New York State Coalition for School-Based
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Thank you to our board of directors, who served our organization so well. Our board did a tremendous amount of work in 2012-2013, and we would like to call special attention to Allan Alson and Elisabeth Erickson, who served the final year of their term during 2012-2013.

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