



School Based Health Centers. Keeping Kids Safe and in School.

A school-based health center brings primary care, prevention, and mental health services to the place where teens spend most of their time – in school.

The Student Health Center at Chelsea High School, a DPH licensed satellite clinic of MGH Chelsea HealthCare Center, is one of the oldest in the state. Begun in 1990, the center has been run by Jordan Hampton, MEd, MSN, RN, CPNP, for the past 17 years. Over the years, the program has greatly expanded its capacity and services. Today, the team includes a certified nurse practitioner, two social workers, and a program administrator/community outreach worker.

When asked about the difference between a school-based health center and the traditional school nurse's office, Hampton explains, "As a nurse practitioner, I can provide primary care. I can order a lab test, write a prescription, perform a physical exam." Chelsea High does have high two full time school nurses on staff, and they are often referral sources to the SHC, as are the school support staff and providers from MGH Chelsea.

The beauty of the model, says Hampton, is that "increased access leads to closer relationships and increased compliance, which leads to better outcomes."

For example, a positive strep test taken onsite can result in a student's getting a prescription for antibiotics without having to make the additional trip to the health center, nearly two blocks away. And, while two blocks may not sound very far, for many teens it can be the difference between getting the healthcare and, just as importantly, the follow-up they need.

Social worker Ada Aroneanu says, "It can be the difference between having therapy and having no therapy." Teenagers often can't get to appointments outside of school. Many don't have a parent to take them, or they have competing priorities.

The Student Health Center's multi-lingual, multi-cultural staff helps support many immigrant and refugee students. These students present with unique challenges, not the least of which can be reunification with their families after a long separation. Contact may have been limited to phone calls and money sent home over a number of years, and the

transition to a new home, new school, and new family can lead to depression, anxiety, and increased high risk behaviors.

Hodan Mohamed, also a social worker, says that the number one rule is to “keep kids safe.” She adds, “It takes a village to raise these kids – the school, parents, primary care providers, and social workers – all part of a team working together to turn these kids around.” Because of the center’s unique setup and the students’ immediate access to services, the Student Health Center has often helped to de-escalate crises and avoid hospitalizations or other negative outcomes.

Education and prevention are also key functions of the program. Informational tables on anything from HIV/AIDS and STIs, pregnancy prevention, adolescent relationship abuse, and substance use disorder are often set up in the cafeteria, adjacent to the health center, and staff are available to answer any and all questions. Hampton is invited to teach health classes, most often on reproductive health. And over the years the Student Health Center has offered adjunct services such as mindfulness and art therapy groups and acupuncture for stress and anxiety relief.

It is the immersion of the health center staff into the fabric of the high school that helps to build trusting relationships with the students and the school staff. These relationships are key to keeping kids safe and making sure they stay in school. This past year, there were 368 participants in the program with 2,097 visits logged.

Under the MGH umbrella, there is also a SBHC in Revere offering similar services. This past year, the Revere team, led by Administrative Director, Debra Jacobson, MEd, saw 551 students and logged 1,181 visits.

When asked to describe an average day, Jordan Hampton laughs and says, “There is no average day. They are all different. Back to backs with patients—some scheduled, some walk-ins. Tuberculosis tests, flu shots for interns at the health center. Conversations with school social workers and parents. Co-leading a support group for expectant teen moms. Back and forth to MGH Chelsea for different meetings. And, I serve on a number of committees in the community.”

Sounds hectic, but she is quick to add, “I love my job. There is time and space to do the three things I am most passionate about—clinical care, counseling, and health education. I love that this model allows me to take care of, and be a safety net for, adolescents in a way that I feel is appropriate and successful.”