

# ENSURING LINKAGES AND REFERRALS TO YOUTH-FRIENDLY HEALTH CARE SERVICES

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Bronx Teens Connection Clinic Linkage Model:  
Connecting South Bronx Youth to Care

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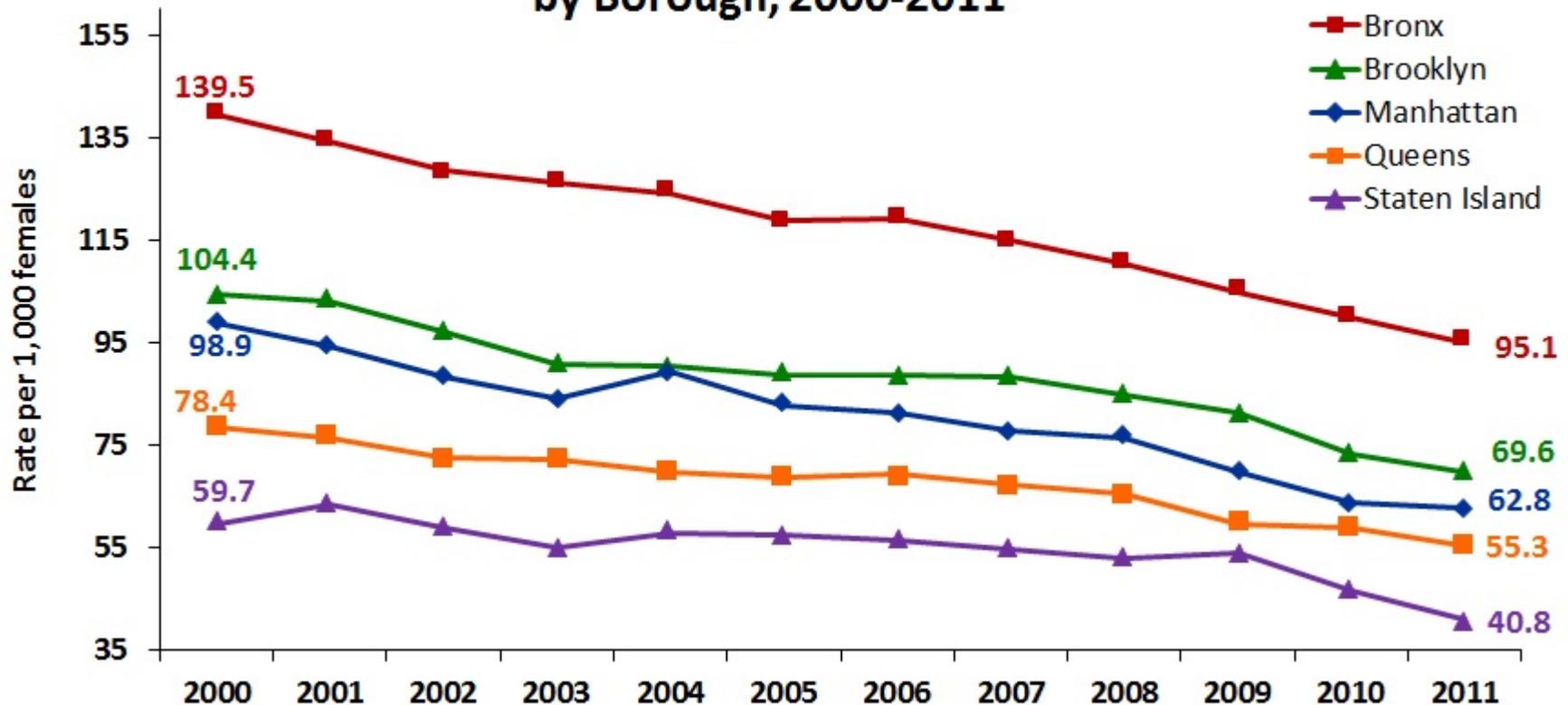
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# Teen Pregnancy in the Bronx

## Pregnancy Rates Among NYC Residents Ages 15-19, by Borough, 2000-2011



**Note:** Population estimates are updated to reflect the best information available at the time and may result in differences compared with previously published rates.

**Source:** Bureau of Vital Statistics, prepared by the Bureau of Maternal, Infant and Reproductive Health

# Bronx Teens Connection

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- Funded by CDC/OAH through September 2015
  - Builds on previous DOHMH efforts
- Goal: 10% reduction in births to 15-19 year-olds in Hunts Point and Morrisania by 2015
  - Build model replicable throughout NYC (and beyond)
- Community-wide approach
- Partnerships with various agencies

# Clinic Linkage Model

**School or  
Youth-Serving  
Organization**



**Health Educator**

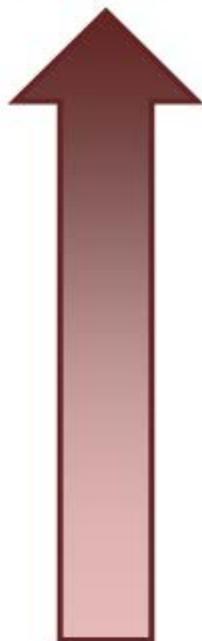


**Clinic**

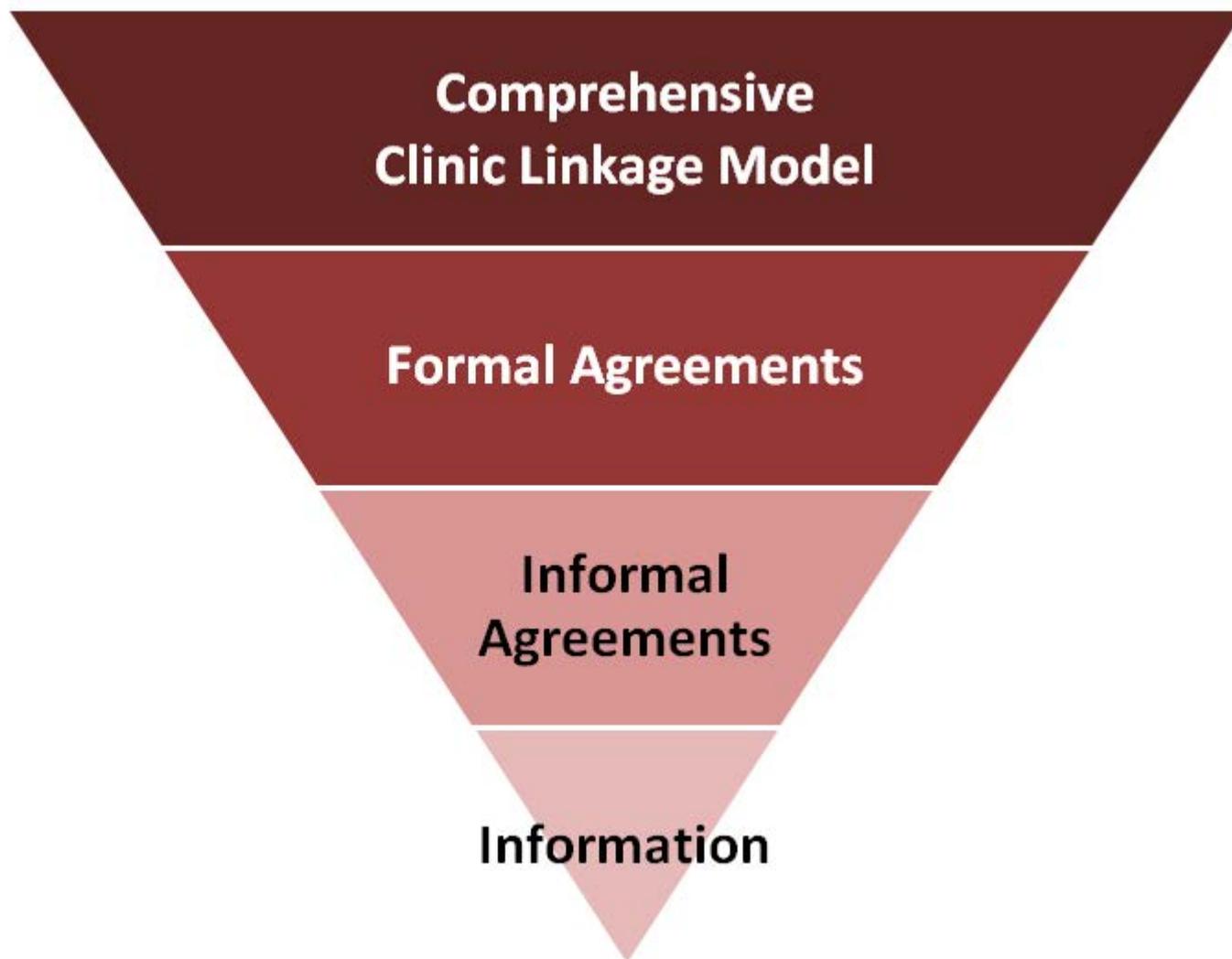


# BxTC: Levels of Linkage

Greater  
Commitment



Smaller  
Commitment



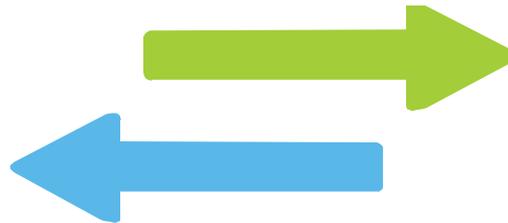
# Foundation

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- Partner recruitment
  - Capacity
  - Commitment
- Service Provision
  - Evidence-based sexual health education
  - Clinical best practices
- Training and Technical Assistance

# School/Clinic Linkage

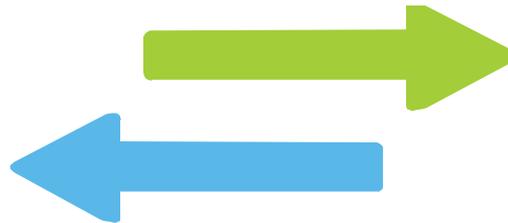
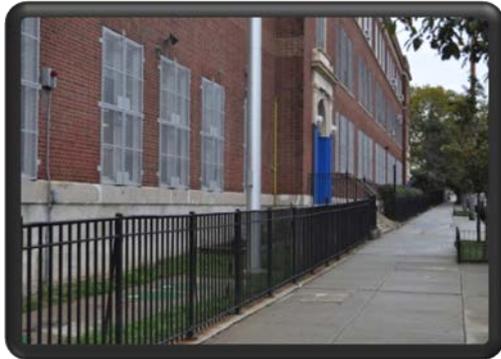
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## School

- Implement an evidence-based program
- Provide confidential space for Health Educator
- Allow Health Educator to present to youth
- Advertise and promote Health Educator's and clinic's services
- Take youth on Clinic Tour Field Trip
- Evaluate

# School/Clinic Linkage

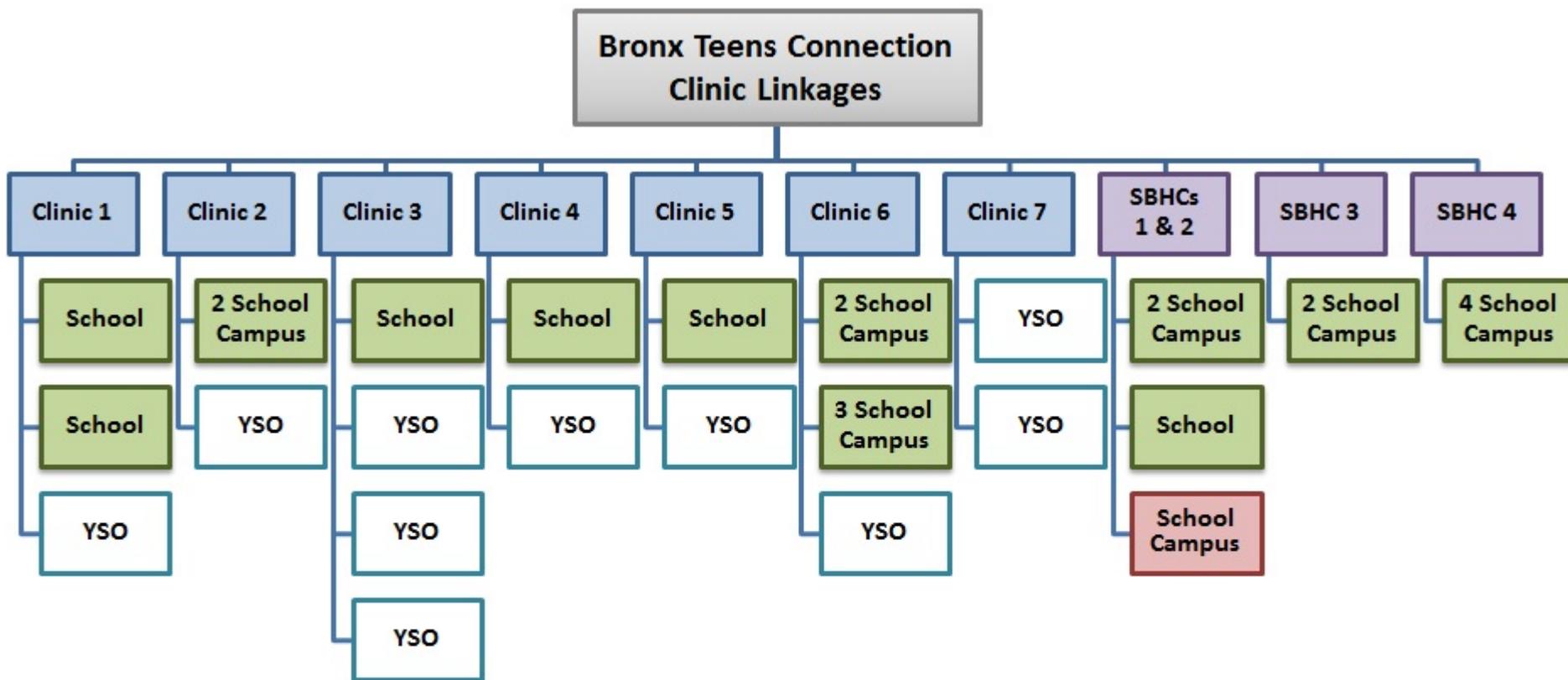


## Clinic

- Commit to work toward Best Practices
- Provide a Health Educator to:
  - Conduct presentations on clinic services
  - Meet one-on-one with students
  - Conduct condom demonstrations
  - Educate on contraceptive options
  - Schedule expedited appointments or make referrals to the clinic
  - Co-facilitate Clinic Tour Field Trip

Evaluate

# BxTC Linkages



Key

Schools

Youth-Serving Organizations

Community Based Clinics

School-Based Health Centers

Non-BxTC Partnered Schools

# Clinic Tour Field Trip

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- Integrated into evidence-based program
- Experiential learning
  - Learning is promoted when new knowledge is demonstrated to students rather than simply being described\*
- Benefit for both students and teachers

# Strategies

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- Assess needs and capacity of partners
- Formalize the linkage
- Track Linkage Activity
- Track implementation of best practices
- Gather feedback on Clinic Tours

# Clinic Tour Field Trip

## *Feedback from Students*

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*“The lady doctor seems really nice”*

*“Is everything really free?”*

*“You don’t need parental permission”*

*“She was friendly and it wasn’t awkward”*

*“Learned about dental dams, plan B and stuff like that”*

*“I enjoyed my visit, I will probably come back”*

*“There are multiple options to prevent pregnancy”*

# Clinic Tour Field Trip

## *Feedback from Clinic & School Staff*

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*“Students had so many targeted questions.”*

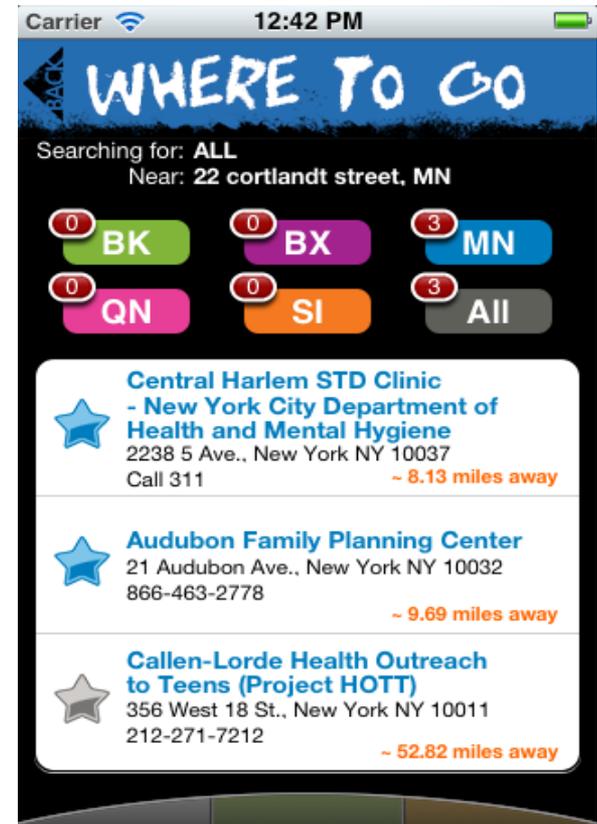
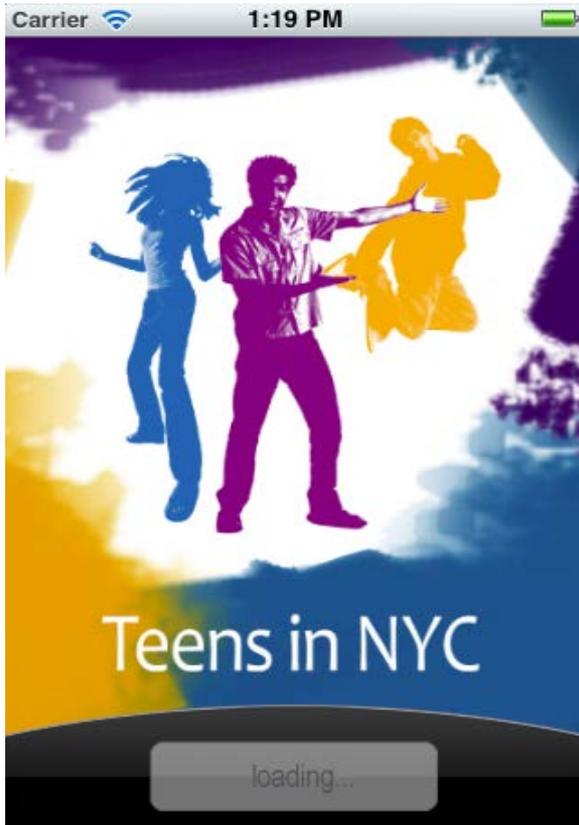
*“16 Students attended the clinic visit and 8 registered.”*

*“The kids enjoyed the visit and said they would refer their friends to the clinic and to the health educator, who visits our school on Mondays.”*

*“The visit to the clinic was an eye-opening experience.”*

*“Although I introduce the clinic and let them know what services they can receive, it is not until the tour they actually get it.”*

# Teens in NYC Protection+ Mobile App



# Progress

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- 6,713 youth reached with Evidence-Based Programs
- 11,170 Health Educator contacts with youth
- 206 clinic tour field trips were conducted
  - 71% of students receiving RTR
- 55% average increase in teen clients at clinics from 2011 to 2014
- Average of 91% of CDC best practices currently being met by clinic partners

# Challenges & Lessons Learned

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## Challenges

- Partner staff turnover
- Data collection and evaluation
- Competing programs and priorities

## Lessons Learned

- Stakeholder buy-in is key
- Necessary to adjust the model
- Collaborative learning works

# Enhancing Linkages & Partnerships

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- Formal linkage model
- Leadership buy-in on both sides
  - Goals and objectives
  - Facilitation of the linkage process
- Assess and work within capacity of both sides

# Strengthen Linkages & Partnerships

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- Promote the linkage to teens
- Presence of health educator or outreach worker at linked site
- Include linkage in new staff training
- Monitor and track the linkage
- Continuous quality improvement

# “Youth-Friendly” Healthcare Services

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- It is essential that a clinic provide the 4 Cs:
  - Confidentiality
  - Cost
  - Contraception
  - Care
- Best practices – Identify and assess
  - 31 CDC Best Practices
  - DOHMH’s Best Practices in Sexual and Reproductive Health Care for Adolescents
  - Request a tour of the facility, if possible

# Linkage Tips

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Establishing viable sustainable linkages requires work and commitment by partnering organizations.

- Ensure that the linkage is a win-win for all involved
- Be flexible and determine what is essential to the linkage arrangement
- Be honest in measuring capacity and making a commitment to the linkage
- Create benchmarks to assess the progress of the linkage

# Acknowledgements

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- Centers for Disease Control & Prevention
- BxTC Staff, Leadership, Partners, and Community Mobilization Groups
- NYC Department of Health & Mental Hygiene
  - Bureau of Maternal, Infant and Reproductive Health
  - Bronx District Public Health Office
- NYC Department of Education
  - Office of School Wellness Programs

# Thank you!

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