OHIO School-Based Health Alliance
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School-Based Health Center Quality Improvement Project

Request for Proposals

Issue date: July 30, 2026
Application due date: August 21, 2026 at 5pm
Eligible entities: Ohio school-based health center (SBHC) operators*
Project period: September 2026 – May 2027
Award amount: $22,500 per operator, up to 6 operators
*Applicants must be SBHC operators verified through the Ohio School-Based Health Alliance SBHC census.

Background and purpose
Consent rates and patient visit volume are critical indicators of SBHC utilization and are closely tied to financial sustainability. The number of students with active parent/guardian consents on file directly affects the student population that can access services, while visit volume influences the number of billable encounters generated by an SBHC. Together, these factors play a significant role in an SBHC's ability to sustain and expand services over time.

Many of the strategies used to increase consent rates and visit volume, including family outreach, school engagement, workflow development, marketing, and follow-up activities, require dedicated staff time and resources that are generally not billable/reimbursable. As a result, SBHC operators often seek practical approaches that can improve these outcomes while making efficient use of limited resources.

The Ohio School-Based Health Alliance (Ohio Alliance), in partnership with the Ohio Department of Health (ODH), is launching an SBHC quality improvement (QI) learning collaborative to support participating SBHC sites in developing, implementing, and evaluating interventions designed to increase SBHC consent rates and patient visit volume.

Funding opportunity
The Ohio Alliance will select up to six (6) Ohio SBHC operators to participate. Each selected operator will receive $22,500 and participate in a structured learning collaborative to test strategies within its local context, establish and track measurable goals, learn from peers, and contribute to identifying promising approaches that may inform SBHC practice across Ohio.

Applicants must identify at least one participating SBHC site but may propose to implement the project across multiple verified SBHC sites operated by their organization. The maximum award is $22,500 per selected operator, regardless of the number of participating sites.

Project goals
This QI learning collaborative has three primary aims:

1. Identify and test effective strategies for improving SBHC consent and utilization rates that can be adapted and replicated by other SBHCs across Ohio.
2. Strengthen SBHC sustainability by increasing the number of students with active parental/guardian consents on file and increasing patient visit volume at an SBHC.
3. Evaluate implementation and outcomes by establishing measurable goals, tracking progress, assessing the effectiveness of interventions, and documenting lessons learned and promising practices.

Eligibility and application criteria

Eligible applicants must:

- Be an Ohio SBHC operator verified through the **Ohio Alliance Statewide SBHC Census**.
- Identify at least one verified SBHC site to participate in the project.
- Commit to implementing one or more approved interventions designed to increase SBHC student consent and patient visit volume during the project period.
- Commit to participating in all QI learning collaborative meetings and required check-ins.
- Submit required quantitative and qualitative data for project evaluation throughout the duration of the project.
- Designate a primary project contact responsible for coordinating participation in the initiative.

For questions on this RFP, please contact Rachael Schilling at rachael@osbha.com.

Please review the full RFP **here** before applying.

Point of contact for this application

* First name

* Last name

* Title

* Email address

* Phone number

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Section 1. Overview

Applicants must identify at least one participating SBHC site but may propose to implement the project across multiple SBHC sites operated by their organization.

The maximum award is $22,500 per selected operator, regardless of the number of participating sites.

Applicant organization

Organization name	
Address	
City	
County	

Primary contact for award administration

First name	
Last name	
Title	
Email address	
Phone number	

Primary contact for project implementation, if different from above

First name

Last name

Title

Email address

Phone number

Primary SBHC site where the interventions and strategies will be implemented.

SBHC site name

Address

County

School building name

School district name

Select all the populations served by this SBHC site (check all that apply).

- [ ] Students
- [ ] School personnel (i.e., administrators, faculty, staff)
- [ ] Students' child family members
- [ ] Other (please specify)
- [ ] Students' adult family members
- [ ] Child community members
- [ ] Adult community members

Select all the services provided by this SBHC site (check all that apply).

- [ ] Primary care
- [ ] Behavioral health
- [ ] Other (please specify)
- [ ] Dental
- [ ] Vision

Number of hours per week this SBHC site typically provides services during the school year

Number of exam rooms

Is there any other information about SBHC operations you think is relevant?

Do you plan to implement project strategies in other SBHC sites? If yes, list them here. Include SBHC site name, school building, school district.

Example: Apple SBHC, Apple Elementary School, Appleseed School District

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Section 2. Baseline and current challenges

Provide baseline data for the primary SBHC site.

Total number of SBHC consents for **students in the school building** in which the primary SBHC site is located at the end of the 2025-2026 school year

Total number of **students enrolled in the school building** in 2025-2026 school year

Average weekly visit volume

If desired, provide any additional data that may help describe current utilization or capacity.

If desired, provide baseline data for additional SBHC sites at which you plan to implement project strategies. Include:

- School building enrollment
- Number of students with current SBHC consent on file
- Current consent rate
- Average weekly SBHC visit volume
- Any additional data that may help describe current utilization or capacity.

Describe the primary SBHC site's current consent process. Include:

- How and when consent forms are distributed
- Whether consent forms are paper, electronic, or both
- How completed consents are returned, processed, and tracked
- Whether and how consent status is documented in the EHR
- The roles of SBHC and school staff
- Current follow-up strategies

Describe the current approach to generating and managing SBHC visits, including:

- How students are identified or referred to services
- How appointments are scheduled
- The role of school staff
- Current outreach or marketing strategies
- How the SBHC uses available staffing and clinical capacity.

Describe the primary challenges or barriers affecting SBHC consent rates and patient visit volume at the participating site(s) (examples may include family awareness, consent workflows, school engagement, referral processes, scheduling, EHR limitations, staffing, community awareness, or other operational barriers).

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Section 3. Proposed strategy

Select the intervention or strategy your organization is interested in implementing to increase SBHC consent rates and patient visit volume.

A fully developed intervention is not required; selected operators will have an opportunity to refine their approach with support from the Ohio Alliance.

Describe what success would look like by the end of the project period, including a specific target or anticipated improvement in consent rates and patient visit volume.

Identify the key staff and school, district, or community partners needed to implement the project and briefly describe their anticipated roles.

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Section 4. Challenges and support needs

Identify any anticipated challenges related to implementing the intervention, completing project requirements, or measuring progress.

Describe the technical assistance, training, tools, or peer learning opportunities that would be most helpful to your organization.

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Section 5. Participation commitment

Upload a letter of support (LOS) from an authorized representative of the school district in which the SBHC is located. The letter must be specific to this proposal and demonstrate the district's commitment to supporting the applicant's participation and implementation of a proposed intervention.

Please upload as a PDF.

Choose File | Choose File | No file chosen

I, as an authorized individual of the applicant organization, confirm the applicant organization's ability to meet project requirements, including implementing and documenting an intervention during the project period, participating in all virtual QI learning collaborative meetings, submitting required baseline and monthly data, completing midpoint and final process surveys and reports, and sharing lessons learned with the collaborative.

First name

Last name

Title

Date