HEALTH SERVICES: Evidence-Informed Practice Brief

WHAT DO WE MEAN?

As defined by the Whole School, Whole Community, Whole Child (WSCC) model, Health Services are supports provided to promote students' physical health in the school setting. These services are delivered by school nurses or other credentialed medical staff such as nurse practitioners, dentists, health educators, or physicians. Promoting student well-being and a healthy, safe school environment requires active collaboration between school health service providers, staff, students, families, and community-based providers. School health services facilitate equity by increasing access to preventive care and health education, assessment and planning for chronic health conditions, and first aid and emergency care for students and staff. Health services also work to inform students and families of how they can effectively advocate for their own health needs. Finally, school health services also can extend beyond the school building to help families manage, adapt to, and plan for social and economic barriers to health care through connections to community-based health care.

The School Health Services Model developed by the CDC describes four key components of school-based health services. The first component is acute and emergency care. Emergencies related to unexpected injury or illness can occur at any time throughout the school day, so schools must have staff available who are trained and prepared to handle acute and emergency care. Most often, the school nurse, in collaboration with community medical personnel, is responsible for addressing medical crises that take place at school. The second component of school health services is care coordination, which involves the organization of student care by sharing information and maintaining communication between all individuals concerned with student needs. Students can benefit from improved medical management, access to more detailed health information, and consideration of health needs for Individualized Education Programs or Individualized Health Plans when students, families, health care providers, and school staff are in communication. The third component is management of chronic health conditions. Federal and state regulations mandate that schools provide services and accommodations for students with chronic health conditions, which commonly include asthma, diabetes, food allergies, poor oral health, and epilepsy or other seizure disorders. The fourth component is family engagement in school health services, which promotes family awareness of available health services that may benefit students. Family engagement is also critical for developing relationships that foster continuing communication and coordination between the school, family, and health care providers.
WHY IS IT RELEVANT TO CHILD OUTCOMES?

Physical Health Outcomes
Effective school health services offer a variety of benefits for students’ physical health and can contribute to promoting health equity and reducing health disparities. At the universal level, screening students for conditions such as asthma, hearing, and vision problems can result in early identification and referral to appropriate services for diagnosis or changes to medication. School-based health services (e.g., community clinics, school-based health centers) that offer vaccinations for common illnesses, such as the flu, can help to reduce the spread of germs, infections, or diseases. For students who become sick or get injured during the school day, health service staff can provide first aid within the school building or referral to proper outside health care. For individual case management, such as medication administration at school, health services can help to reduce students’ physical symptoms. Specifically, for students with asthma, use of school health services is associated with fewer urgent visits to primary care physicians, visits to the emergency room, and hospitalizations. Overall, health services can support both prevention of, and response to, negative physical outcomes associated with student health needs and chronic health conditions.

Social, Emotional, and Behavioral Outcomes
Students who are affected by chronic illness or physical health complications are at increased risk for a wide range of psychosocial difficulties compared to their healthy peers. These students may be at an increased risk of suicide/self-harm and may struggle with anxiety about a sudden health emergency or peer rejection. School-based health service providers can work with teachers, peers, and families who are in close contact with students with special health needs to reduce anxiety and concerns. Research has also found that the general student population often experiences distress or symptoms of anxiety around health services, such as scoliosis screenings or vaccination that occurs in school-based health centers. Supporting student social, emotional, and behavioral well-being as part of school health services emphasizes the need for integration and collaboration of supports across components to properly care for the whole child.

Academic Outcomes
Student access to school health services is related to both health outcomes and academic achievement. If schools can meet diverse health needs, students can feel more comfortable and safe attending school, which can result in a healthy body and mind available for learning. Researchers have found an association between improved attendance and access to school health services, including screenings, direct clinical interventions (e.g., providing medications at school), and care coordination. However, students with chronic health conditions tend to have lower academic achievement if their health needs are not appropriately managed. Research indicates positive academic outcomes, including improved grades and increased standardized test scores, for students who receive proactive management of their health condition. By providing students with access to preventive and responsive care, school health services can play a vital role in ensuring that students achieve their full academic potential.
HEALTH SERVICES: EVIDENCE IN ACTION

The strategies provided here summarize a review of available evidence and best practice recommendations in this domain.* Strategies are grouped by anticipated resource demand (e.g., funding, time, space, training, materials).

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<th>Level 1 Strategies: Low resource demand</th>
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<td><strong>Use the Health Services Assessment Tool for Schools (HATS)</strong></td>
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<td>o This free evaluation tool was developed by leading school health organizations and experts in the field and has been tested by over 50 school districts. 2</td>
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<td>o Schools can use this tool to help reach the &quot;gold standard&quot; for comprehensive school health by assessing the quality of services, resources available to support those services, and strength of policies and practices.2</td>
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<td><strong>Disseminate health information resources to students and families</strong></td>
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<td>o Research suggests the importance of distributing information regarding available school health services to families and students, particularly tailored messages that address individual student health needs.25</td>
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<td>o Schools can distribute health information with pamphlets, newspapers, flyers, posters in the school building, or email26; potential topics include vaccine information, school-based screening, and allergy management.</td>
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<td>o Materials should be tailored to student interests and cultural backgrounds, along with school core values.5,19</td>
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<th>Level 2 Strategies: Moderate resource demand</th>
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<td><strong>Assess and plan for chronic health condition management</strong></td>
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<td>o Approximately 25% of children in the US have a chronic health condition such as asthma, diabetes, or epilepsy.33 In addition, 4-6% of children in the US are affected by food allergies, which have become the most common cause of serious and life-threatening allergic reactions in community health settings.5,13</td>
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<td>o Schools can educate students about their medications,16 develop management and response plans for various conditions (e.g., allergy management plan), train appropriate staff on emergency care procedures (e.g., inhalers for asthma attack, glucagon emergency kit for low blood sugar, epinephrine injector training), and specify Individualized Health Care Plans.12</td>
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<td>o Students with chronic health conditions are at greater risk for prolonged absences.13 Implementing school reentry programs can help to educate peers and teachers about unfamiliar illnesses or injuries, prepare the family, school, and health care system for a partnership, and promote successful return to school.7</td>
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<td><strong>Develop relationships with a diverse group of community stakeholders</strong></td>
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<td>o When schools, families, and communities form partnerships, schools are better able to provide health services tailored to the unique needs of the school community.23 For example, school nurses can serve as a key team member in creating partnerships with community health organizations to coordinate responding to a public health crisis (e.g., pandemic).23</td>
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<td>o Schools can collaborate with community stakeholders (e.g., community healthcare providers, local government, local nonprofit organizations, colleges/universities) to tailor health services to the needs of the school community.23</td>
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<th>Level 3 Strategies: High resource demand</th>
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<td><strong>Provide behavioral health training for school health service providers (SHSP)</strong></td>
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<td>o Because of their frequent access to students, SHSP are ideal candidates to identify student social, emotional, or behavioral concerns (e.g., unsafe sexual activity, substance use, suicidality); it is estimated that SHSP spend about a third of their time responding to mental health needs, as they are trained to treat physical complaints that co-occur with these concerns.22</td>
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<td>o SHSP can identify students exhibiting social, emotional, or behavioral concerns by using data-based decision making, such as tracking the number of visits students make to the nurse’s office for psychosomatic concerns.</td>
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<td><strong>Implement multicomponent school-based prevention programs</strong></td>
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<td>o Multicomponent school-based interventions can promote student health and reduce risk behavior (e.g., bullying, smoking, and teenage pregnancy), particularly when students are involved in planning these efforts.15,29 These interventions should include multiple strategies to promote health, including school policy changes (e.g., anti-smoking policy), family involvement (e.g., trainings/education), and relationships with the local community (e.g., student community service)29</td>
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<td>o School-based prevention programs should be culturally relevant, tailored to student needs and interests, and offer opportunities for social support (e.g., mobile phone contact, peer counselors), telehealth, and family engagement.5,27</td>
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<td><strong>Develop a school-based health center (SBHC)</strong></td>
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<td>o School-based health centers (SBHCs) are designed to meet the needs of socially and economically minoritized populations by providing increased access to healthcare in the school setting.18</td>
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<td>o SBHCs have shown to improve student educational and health outcomes, particularly when they offer a range of services and hours of operation extend beyond the school day. SBHCs can also reduce disparities in healthcare access by removing barriers such as transportation, financial constraints, and privacy, and promote equity by addressing cultural barriers.18</td>
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*For more information about the systematic review process we used to identify evidence-based practices, please refer to our overview brief which can be found here.*

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V3. WSCC Practice Brief: Health Services was created by the UConn Collaboratory on School and Child Health.
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ADDITIONAL RESOURCES

Note: The WellSAT WSCC allows users to evaluate district policy alignment with ‘best practices’ in policy associated with Health Services and other WSCC model domains.

American Academy of Pediatrics
National Center for Medical Home
Implementation: Care Coordination Resources
Updated in 2020, this webpage offers a collection of tools and resources pertaining to health services care coordination, including a framework for implementing care coordination and instructional curricula for school health care providers.

TEAMS: Enhancing School Health Services
This webpage offers many resources, including an online course, policy guides, videos, case examples, and the Health services Assessment Tool to help schools incorporate the TEAMS framework for the purposes of improving health services.

CDC
School Health Services
This website provides information for school health services staff around acute and emergency care, care coordination, chronic disease management, and family engagement.

Healthy Schools Campaign
Resource Center
This website provides access to tip sheets, model policies, and reports helpful for improving school health services, including school health care provider leadership documents and current school health care policies.

National Association of School Nurses
NASN: Home
This website provides news in school health services and up-to-date toolkits, skills training, and sample and model health services programs.

National Center for Chronic Disease Prevention and Health Promotion
Addressing the Needs of Students with Chronic Health Conditions: Strategies for Schools
This 2017 research brief summarizes recent findings and statistics regarding the prevalence of chronic health conditions of students in the United States and offers suggestions for strategies to address such conditions.

Managing Chronic Health Conditions in Schools: The Role of the School Nurse
This 2017 fact sheet briefly outlines the importance of, and roles of, a school health service provider for managing students’ chronic health conditions.

School Health Corporation
Health Services
This website can be used to order health services products and equipment, as well as to access educational aids and resources related to health services.

American Academy of Pediatrics (n.d.). TEAMS: Enhancing school health services. https://schoolhealthteams.aap.org/public/content.cfm?m=11&id=11&startRow=1&mm=0&parentMenuID=0


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