School-based health care support toolkit: Vision for Ohio School-Based Health Care
Ohio School-Based Health Care seeks to create an accessible, connected community of caring adults around each student to keep them in class and learning.

Each student is supported by teachers and admin so health issues do not interfere with learning.

More students can be treated by existing school health care provider in a more efficient manner.

Families have a convenient, consistent way for their student to receive needed care and maximize their class time.

Each student can have greater access to external clinicians and therefore increased efficacy of treatment.
School-aged children in Ohio struggle with many common health issues that lead to academic issues

The Ohio Department of Education (ODE), in partnership with Ohio Department of Medicaid (ODM), released the third annual edition of the Ohio Healthy Students Profiles as a data resource for needs assessments and planning. The profiles include measures on health care interactions, health conditions and education indicators for the Medicaid-participating subgroup of students. There is a separate profile for each district and school with sufficient enrollment (30 students participating in Medicaid). The information is intended for educators and other community stakeholders who influence the policies and programs that support student wellness in Ohio. Importantly for education administrators, the profiles can inform the specific aims of Student Wellness and Success Funds (SWSF) and Base Costs, Disadvantaged Pupil Impact Aid, positive behavioral interventions and supports (PBIS) and School-Based health care partnerships. In the 2020-2021 school year over 694,000 students participated in Medicaid for at least three months, accounting for 41% of Ohio’s K-12 public school enrollment. Visit the Ohio Department of Education’s website for more information on Ohio’s Healthy Student Profiles.

Ohio Department of Education Healthy Student Profiles. https://education.ohio.gov/Topics/Student-Supports/Healthy-Students-Profiles
Ohio's 2019 Youth Risk Behavior Survey Results

The Youth Risk Behavior Survey is part of a nationwide surveying effort conducted every two years in a sample of high schools across the state. This effort is led by the U.S. Centers for Disease Control and Prevention (CDC) to monitor students' health risks and behaviors in six categories identified as most likely to result in adverse outcomes. These categories include unintentional injury and violence; tobacco use; alcohol and other drug use; sexual behaviors that contribute to unintended pregnancy and disease; dietary behaviors; and physical inactivity. The YRBS is the largest public health surveillance system in the U.S. and the only reliable source of state-level, health behavior data for the teen population in Ohio. Ohio has participated in the YRBS since 1993. For more information on the survey visit Ohio Department of Health's Youth Risk Behavior Survey website.

The Ohio Department of Health conducted an open-mouth oral health screening survey of third grade schoolchildren during the 2017-18 school years. This survey is the seventh conducted by ODH, dating back to the 1980’s. Oral health surveillance of this population has enabled ODH and other state and local partners to monitor trends in oral health status and access to dental care. Third grade students are the target population for these surveys to enable ODH to report data to the Centers for Disease Control and Prevention National Oral Health Surveillance System and to allow comparisons with the Healthy People 2020 national oral health objectives. Visit Ohio Department of Health’s website to view the full data report.

Overall Findings

<table>
<thead>
<tr>
<th>Percentage</th>
<th>National Target</th>
<th>2017-18 Survey</th>
<th>Target Met?</th>
</tr>
</thead>
<tbody>
<tr>
<td>48% of children</td>
<td>49%</td>
<td>48%</td>
<td>Yes</td>
</tr>
<tr>
<td>20% of children</td>
<td>26%</td>
<td>20%</td>
<td>Yes</td>
</tr>
<tr>
<td>48% of children</td>
<td>28%</td>
<td>48%</td>
<td>Yes</td>
</tr>
<tr>
<td>84% of children</td>
<td>49%</td>
<td>84%</td>
<td>Yes</td>
</tr>
</tbody>
</table>

Table 1: Comparison of 2017-18 Ohio Survey Results to National Targets for 2020

School-based health care initiatives have shown measurable impact on student health and consequently academic outcomes.

### Outcomes from different nationwide school-based health care initiatives

#### Health outcomes

- Improved access to care
- Improved mental health outcomes
- Improved oral health outcomes
- Improved vision outcomes
- Improved nutrition
- Reduced hospitalizations

- Adolescents are 10X more likely to utilize school-based health for mental health services than a community health center or HMO\(^1\)

- In ~25 San Diego schools, a districtwide nutrition intervention significantly reduced student BMI\(^2\)

#### Academic-related outcome

- Lower rate of absenteeism
- Fewer disciplinary referrals
- Fewer students in restrictive classroom environments
- Reduced academic stress
- Improved community perception of school quality or safety

- Students in Dallas’ School-Based Health Care program saw absences decrease by 50%; students utilizing mental health services had an 85% decline in disciplinary referrals\(^3\)

- In a sample of 400+ schools with and without school-based health care, parents and students in schools with health care rated “academic expectations” and “school engagement” significantly higher than in those without\(^4\)

#### Academic achievement

- Improved grades
- Improved test scores
- Increased classroom engagement

- The Connecticut School-Based Health Care program found a 31% decrease in course failure among the 16K+ students that received services\(^5\)

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5. Connecticut Association of School Based Health Centers (2011)
School-based health care has shown transformative results across Ohio in a diverse set of communities with diverse needs.

How has school-based health care impacted your school community?

- **Superintendent**: For all hours our doors are open, we’re here to help the whole community.

- **Hospital network**: We get students back to school and learning … and have saved parents a great sum in lost wages.

- **Parent**: My son can attend more school because there is more available care.

- **School care provider**: I can help so many more children get the treatment they need.

- **Community Health Center**: We have access to students in need we never could have had otherwise.

- **Teacher**: Our doctors show up at the football games … they’ve become a true part of our school.
School-based health care has been defined in a range of ways – any could be appropriate depending on your community

- School-based health in Ohio ranges from a large school health center that houses full-time medical staff to a smaller part-time clinic that may only have a single staff person.
- Many school-based health efforts are housed on-site within renovated rooms or an adjoining building, while others are housed off-site and linked to providers through their facilities or a mobile clinic.
- School-based health can include a range of culturally sensitive services, a list of common options schools have included is provided below:

<table>
<thead>
<tr>
<th>Oral Health</th>
<th>Primary Care</th>
<th>Mental Health</th>
<th>Other Wrap-around Services</th>
</tr>
</thead>
<tbody>
<tr>
<td>Screenings</td>
<td>Annual and sports physicals</td>
<td>Alcohol and substance abuse counseling</td>
<td>Health promotion and risk reduction</td>
</tr>
<tr>
<td>Fluoride varnish</td>
<td>TB testing</td>
<td>Mental health awareness and outreach, including suicide prevention</td>
<td>Nutrition and physical activity promotion</td>
</tr>
<tr>
<td>Sealants</td>
<td>Hearing and vision screening</td>
<td>Screening for depression</td>
<td>HIV/AIDS and STI prevention education</td>
</tr>
<tr>
<td>Dental cleanings</td>
<td>Management of chronic conditions (e.g. diabetes, asthma)</td>
<td>Individual, group, and family therapy</td>
<td>Pregnancy prevention</td>
</tr>
<tr>
<td>Oral health education</td>
<td>Immunizations and lab tests</td>
<td>Crisis intervention</td>
<td>Peer health education and youth advisory boards</td>
</tr>
<tr>
<td>Referrals to treatment and specialty services off-site</td>
<td>Reproductive health services</td>
<td>Clinical and behavioral case management</td>
<td>Parent education programs</td>
</tr>
<tr>
<td>Basic restorative services</td>
<td>Over-the-counter medications and prescriptions</td>
<td></td>
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</tr>
</tbody>
</table>

- Referrals to outside services
Ohio School-Based Health Care’s chief goal is reducing the rate of chronic absenteeism across the state.

Chronic absenteeism is tied to both health and academic outcomes:

- Students treated for recurring health issues are less likely to be chronically absent and more likely to respond to academic improvement efforts.
- Improved attendance is associated with higher math and reading achievement outcomes, educational engagement and social engagement.

School-based health care can have an impact:

School-Based Health Care initiatives have shown a significant effect on rates of absenteeism, tardiness and early dismissal, as well as level of student engagement in class.

This toolkit contains resources to help in overcoming the chief perceived barriers in launching school-based health efforts

<table>
<thead>
<tr>
<th>Perceived barriers to starting</th>
<th>Toolkit resources to help</th>
</tr>
</thead>
<tbody>
<tr>
<td>How do we get started?</td>
<td>Info from other schools on how they got started and steps to connect with necessary stakeholders</td>
</tr>
<tr>
<td>How do we find health care providers to partner with?</td>
<td>Plan for finding, engaging and reaching out to the right provider partner</td>
</tr>
<tr>
<td>How do we educate families, teachers and the community on our model and get them to buy in?</td>
<td>Engagement materials that highlight the benefits of school-based health care to that specific stakeholder</td>
</tr>
<tr>
<td>How will we be able to serve students and share data in a HIPAA/FERPA compliant way?</td>
<td>Information on data sharing and consent, including State of Ohio approved templates</td>
</tr>
<tr>
<td>What if we don’t have space for this in our building?</td>
<td>Info on utilizing current space and potential options that require little additional space</td>
</tr>
<tr>
<td>Where are we going to find the resources to make this work?</td>
<td>Resources other schools have used to make their model sustainable</td>
</tr>
<tr>
<td>How will I organize my school-based team?</td>
<td>Roles and key responsibilities needed and information on how they interact and share data</td>
</tr>
<tr>
<td>Who’s going to help us when we have an issue?</td>
<td>Additional resources beyond the toolkit including peer network of schools excited to provide guidance (FORTHCOMING)</td>
</tr>
</tbody>
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