

Health Department

LOB #148:

SCHOOL HEALTH

Purpose

The School Health Program works collaboratively with school partners to maximize the potential of school-age children to be healthy, safe, and ready to learn. The program achieves this through the delivery of supportive health services in the public school setting. Services include the provision of care for sick and injured students, health screenings, care coordination, disease and illness prevention, and health promotion. The interrelationship between health and academic success is recognized as necessary for students to reach their full capability, and therefore the program functions through a strong collaborative partnership between the Fairfax County Public School system and the Health Department.

Description

The School Health Services Program was established in 1956 by a collaborative agreement between the Health Department and the Fairfax County Public Schools (FCPS). Since 2011 the program has operated under a Memorandum of Agreement between the two organizations to provide supportive health services to students during the school day. Consultation, training, and collaboration with FCPS administration and staff assure that both the health and educational needs of students are met. During SY 2014-2015, the School Health Services Program supported 185,347 students in 196 school sites during the regular school year and 24,902 students in 170 sites in the summer school and community recreation programs. During this period, the number of students receiving health specific consultations by the public health nurse was 7,526 and the number of school staff that received training and education to support these students was 17,067.

The School Health Services Program contributes to all of the five core functions of the Health Department's core functions. The program provides health promotion and prevention services, education and training, emergency first aid care, referral to community resources, case management of acute and chronic health conditions, care coordination for pregnant teens, and surveillance and prevention of communicable disease. The program operates in all 196 schools and centers and serves a diverse body of students from 2-21 years of age.

The staffing of the program is mainly supported by the County and is comprised of trained paraprofessional School Health Aides (SHA), Public Health Nurses (PHN) and a School Health physician, who provides medical oversight. SHAs are assigned to health rooms in each school to manage routine health room activities; provide medication; conduct annual vision and hearing screening; and determine the health status of students during the school day. The SHAs are trained and supervised by PHNs and work during the academic school year. SHA work hours are determined by their school assignment and range from 7:30am to 4:05pm.

PHNs provide services to an average of 2,989 students at three to five schools and provide supervision to SHAs assigned to these schools. There were 793,252 student visits to the school health room in FY 2015 and 50,188 students with health care plans in place. PHN's provide a variety of services in partnership with school staff. Services include the coordination of health care needs that occur during the school day, training of school staff, illness and injury prevention activities, health education and promotion, participation on multi-disciplinary teams, consultation on medically fragile students, and outreach to the diverse school community. PHN services are provided during and after FCPS hours and extend beyond the academic year to the FCPS extended school year summer programs and to County community summer programs. In July/August 2014, there were 24,902 students who received PHN services during the FCPS summer program.

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Benefits

The academic success of youth is strongly linked with their health. Since educators must focus on academic achievement, the collaborative arrangement between the Fairfax County Public School system and the Health Department for the delivery of school health services supports this focus. Educational goals are more likely to be achieved when the health and safety of students are fostered so they are ready and available to learn. A robust school health program with a public health focus ensures access to supportive health services during the school day, illness and injury prevention interventions, a healthy school environment, and health promotion and education needed to foster a healthy lifestyle.

School-aged children and youth spend up to half of their waking hours at school for 13 formative years of their lives. Physical health and emotional health are closely linked in the development of school age children as they grow into healthy responsible adults. Health promotion fosters the establishment of healthy attitudes and behaviors at an early age that can continue through adolescence and into adulthood, thus reducing the potential for obesity and chronic disease and the high cost of health care associated with long-lasting health problems. Educators have little time in their school day to focus on student health, health promotion, and disease prevention activities; therefore the support from public health nurses to improve student health is highly valued by the school community. Keeping children healthy and in school reduces the potential for truancy and school dropout, which can have a direct impact on life-course trajectories, such as post-high school education, career development, and economic self-sufficiency. School dropout has also been linked with higher risk behaviors, such as teen pregnancy, smoking and drug and alcohol abuse.

Mandates

Certain health activities with the program are mandated in the [Code of Virginia](#), but School Health Services is not mandated in Virginia. Each school district develops its own service delivery model.

Public health nurses:

1. Conduct surveillance and investigation of reportable communicable disease in the school community which falls under the mandate of the State Board of Health and is delegated to the local authority (Virginia Code §§ 32.1-35, 32.1-39).
2. Support the provision and assurance of immunizations required for school entry (Virginia Code §§ 22.1-271.1 and 22.1-27.2 require documentary proof of immunization in order for a child to enter school).
3. Train FCPS staff in all technologies and procedures that enables students to attend school in the least restrictive environment in accordance with state and federal mandates (Virginia Code § 22.1-215 requires that each school division shall provide free and appropriate education, including special education, for the children with disabilities residing within its jurisdiction) (Section 504 of the Federal Rehabilitation Act of 1973 prohibits discrimination in access to education based on disabilities).

The Health Department Assistant Director of Patient Care Services serves on the Fairfax County Public Schools School Health Advisory Committee as a required health professional representative. School health advisory boards may assist with the development of health policy in the school division and the evaluation of the status of school health, health education, the school environment, and health services and shall annually report on the status of needs of student health in the school division to the Virginia Department of Health and the Virginia Department of Education (Virginia Code § 22.1-275.1).

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Trends and Challenges

The growth in FCPS student enrollment and increasing complexity of health conditions in the student population pose challenges for School Health Services. The demand for School Health services is expected to rise as student enrollment increases along with an increasing number of students with identified health conditions. On average, over 4,000 students visit health rooms each day across the system for reasons such as medication administration and illness and injury care. When specific support is needed during the school day, public health nurses develop care plans to meet these health needs. During school year 2014-2015, over 25 percent of students had an identified health conditions needing a care plan in order to fully access their education. Developing a care plan within the target goal of five days can be very challenging as it involves coordinating involvement from FCPS staff, family members, private health care providers, and other professional service providers. Some plans are routine and change little year to year, whereas others require intense assessment and planning for implementation.

Public health nurse resources have not kept pace with the increased demand for school health services presented by rising student enrollment, especially for students with special education and health needs. In 1995, the Virginia Code § 22.1-274 was amended to direct school boards to strive to employ or contract with local Health Departments for nursing services consistent with a ratio of at least one nurse per 1,000 students by 1999. The current student to nurse ratio in Fairfax County Public Schools (FCPS) is one nurse per 2,989 students, which may lead to a delay in student enrollment if an individualized health care plan and corresponding FCPS staff training must be in place prior to the student's entry to school.

The increasing diversity of the County's population and the student body can make communicating about student health needs difficult. Twenty-six percent of students (47,435) live in non-English speaking households and have difficulty accessing health care services. This presents challenges for staff who must communicate with parents and families regarding health needs. Cultural sensitivity and awareness are important considerations in order to avoid stigmatizing students and their families and to create a welcoming environment for the newcomers.

Resources

Category	FY 2014 Actual	FY 2015 Actual	FY 2016 Adopted
LOB #148: School Health			
FUNDING			
<u>Expenditures:</u>			
Compensation	\$10,455,680	\$10,890,482	\$11,218,974
Operating Expenses	3,356,781	3,419,538	3,688,318
Capital Equipment	14,767	0	0
Total Expenditures	\$13,827,228	\$14,310,020	\$14,907,292
General Fund Revenue	\$6,006,878	\$6,021,855	\$6,035,048
Net Cost/(Savings) to General Fund	\$7,820,350	\$8,288,165	\$8,872,244
POSITIONS			
Authorized Positions/Full-Time Equivalents (FTEs)			
<u>Positions:</u>			
Regular	275 / 195.54	275 / 203.47	279 / 206.75
Total Positions	275 / 195.54	275 / 203.47	279 / 206.75

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Metrics

Metric Indicator	FY 2013 Actual	FY 2014 Actual	FY 2015 Actual	FY 2016 Estimate	FY 2017 Estimate
Number of student visits to school health rooms	770,744	731,306	793,252	795,000	795,000
Students with health plans	48,781	48,647	50,188	50,000	51,000
Percent of students' health care plans established with 5 days	58%	57%	55%	60%	60%
Percent of parents/guardians who report their child's health condition was managed effectively in the school setting	NA	87%	85%	85%	85%
Number of students, staff and parents/guardians who participated in health promotion activities	14,580	14,127	28,446	30,000	30,000

Fairfax County Public School enrollment for FY 2015 was 185,347 students at 196 school sites. This represents a 2.8 percent increase in enrollment since FY 2013. Each Public Health Nurse (PHN) provides services to an average of 2,989 students at three to five school sites and provides supervision to several School Health Aides (SHAs) who provide direct care for sick and injured students at their assigned school. Services are routinely provided during and after FCPS hours. In FY 2015 there was an 8 percent increase in student visits to school health rooms (793,252 visits) in comparison with the previous year (731,306 visits).

Nurses provide support to students with identified health conditions such as asthma, allergies, heart disease, seizure disorder, diabetes and other significant chronic conditions. During FY 2015, 27 percent of students (50,188 students) were identified as having a health condition requiring a health care plan. The department goal is for PHNs to establish a health care plan within five days of notification of the student's condition, and train the school staff on its implementation. This allows the student to enter school with minimal delay. In FY 2015, 55 percent of these health plans were put in place within five days. The care plan metric remains essentially unchanged over the past three years and as a result, improvements to the care plan process are in development to improve efficiencies. Parent surveys conducted in the past two school years indicate that 85 percent agree that their child's health condition is managed appropriately in the school setting.

Nurses routinely provide counseling and education for teens at risk for unhealthy behaviors. In addition, they are involved in promoting health and wellness by encouraging students to make healthy choices. These health promotion messages are a component of several initiatives to address childhood obesity and develop resiliency to support emotional health in students. The number of students, staff, and parents/guardians participating in health promotion activities during FY 2015 (28,446) doubled in comparison to FY 2014 (14,127). The health promotion component of the School Health Program has received tremendous support and acceptance from the school community and therefore continued increases are projected for future years.