Forward

School health is where education and health intersect to address the basic and complex needs of students to promote and support academic achievement for all students. There are offices of School Health Services (SHS) at the Arkansas Department of Health (ADH) and the Arkansas Department of Education (ADE). Together, they assist schools with building strong wellness committees and policies, as well as efforts to enhance health education, school nursing, physical activity, and nutrition. In addition to assisting schools with health education and health services requirements, these state offices provide funding and guidance for increasing healthy behaviors, providing quality health services on school campuses, and conducting valuable surveillance which schools participate in on a volunteer basis. This report will highlight the work of School Health Services with the goal of increasing the number of schools that use the services available. As school health initiatives expand, it is important to keep schools, partners, and stakeholders up to date.
Coordinated School Health (CSH)

The Arkansas Coordinated School Health Program is founded on the ten components of the Whole School, Whole Community, Whole Child Model (also referred to as the Whole Child Model). This nationally recognized model is recommended by the Association of Supervision and Curriculum Directors (ASCD) and the Centers for Disease Control and Prevention (CDC).

In 2018, Arkansas was one of 17 states awarded the Improving Student Health and Academic Achievement Through Nutrition, Physical Activity and the Management of Chronic Conditions in Schools (DP18-1801 Healthy Schools) five-year grant. This grant is a collaborative agreement between the ADH School Health Services and ADE School Health Services. State grantees support the implementation and evaluation of evidenced-based strategies and activities to:

• Prevent obesity and reduce the risk of children developing chronic diseases
• Manage students’ chronic health conditions including asthma, food allergies, seizure disorders, diabetes, and other diseases, disabilities or conditions.
Striving to prevent obesity and chronic disease, SHS provides enhanced training and technical assistance to six priority school districts. Priority districts were selected by highest need in the following categories: high obesity, high free and reduced lunch rates, and prevalence of chronic disease. The priority school districts were offered training and funding to support nutrition, physical activity, and chronic disease management.

The SHS team also expanded the original school health support team which was previously referred to as the “Core Team” into the Statewide School Health Coalition, with representation from over 40 agencies, organizations, departments, and coalitions. These coalition members work together to promote and support healthy school environments by providing resources, funding opportunities, and professional development to schools participating in CSH.

Arkansas has a high prevalence of obesity, with 35% of adults and 22% of children classified as obese. At least 38% of Arkansas students have one or more chronic conditions. Schools participating in CSH receive resources to improve health and combat the obesity epidemic. In Arkansas, there are over 85 school districts (including the six priority school districts) participating in the CSH program. Together, they represent over 250,000 K-12 students. Approximately 75 school district representatives attend quarterly professional development meetings and are better positioned to serve the whole child in their districts because of the information and resources offered by SHS staff and the Statewide School Health Coalition. Topics of professional development offered in the 2018-2019 school year included school wellness policies, School Health Index reporting, social-emotional climate, mental health in schools, physical activity in and out of school time, physical education, and the Comprehensive School Physical Activity Program.
Act 1220

Act 1220 of 2003 focuses on creating healthy environments for children. The Act created the Child Health Advisory Committee (CHAC) and provides funding for Community Health Promotion Specialists and SHS staff. Act 1220 of 2003 staff involve schools and communities in strategies to prevent and reduce childhood obesity. Highlights from 2018 include the following:

• Began drafting new recommendations to present to the Arkansas Board of Health and the Arkansas Board of Education
• Developed new school wellness toolkit
• Promoted mother-friendly breastfeeding policies in school districts
• Provided Body Mass Index (BMI) assessment trainings for new school nurses

The requirements of Act 1220 of 2003 have led to improvements in physical education, nutrition, BMI assessment, and BMI data reporting. Quality policies and assessment methods promote health and wellness.
Data Collection

The ADH School Health Services contracts with the Arkansas Center for Health Improvement (ACHI) to collect student Body Mass Index (BMI) information from schools and create student, school, district, and state level reports each year.

The full 2018 report, “Assessment of Childhood and Adolescent Obesity, Year 15”, (Fall 2017-Spring 2018), can be found at https://www.achi.net. Results are reported from 256 of the 263 Arkansas school districts from grades Kindergarten, 2, 4, 6, 8, and 10. Annual student BMI assessment provides trend data which can be used to support changes within public schools to encourage healthier lifestyles.

![Year 15 Student BMI Classification for Arkansas Public School Students](image)

Youth Risk Behavior Survey (YRBS) and School Health Profiles (SHP) data are used to address gaps and barriers at the local and state level. YRBS and SHP are conducted every two years: YRBS data is collected during odd numbered years and SHP during even numbered years. Having weighted, state-level data provides schools, local and state agencies, community partners, and interested stakeholders with a snapshot of what is occurring in our schools related to policy, programming, and student risk behaviors. Trend data is used to monitor progress over time. Prevention efforts and policy implementation can be addressed when looking at this data. The YRBS data provide the foundation for “why” schools need effective policy and program implementation, as well as “why” we need to continue to collect and obtain weighted YRBS and Profiles data.

Results may be found at the following websites:

Centers for Disease Control and Prevention YRBS Results
https://www.cdc.gov/healthyyouth/data/yrbs/results.htm

Centers for Disease Control and Prevention School Health Profiles
https://www.cdc.gov/healthyyouth/data/profiles/index.htm
School-Based Mental Health

School-Based Mental Health (SBMH) services provide therapeutic interventions and prevention for students and families within the school setting with the purpose of equipping children for academic and social success. According to the Mental Health America (MHA) report (2019), approximately 13% of Arkansas youth (ages 12-17) report suffering from at least one major depressive episode in the past year. Arkansas has an estimated 30,000 youth receiving mental health services. Of those students, the majority receive services at school. The MHA report continues to note that “in addition to equalizing access to education, schools are well positioned to equalize access to mental health services.” The following milestones were accomplished in 2018.

- Substance Abuse and Mental Health Services Administration (SAMHSA) provided $9 million to fund the Arkansas AWARE project to Advance Wellness and Resiliency in Education through best practice school based mental health sites. Arkansas AWARE funds a statewide infrastructure for Mental Health First Aid (MHFA) training.
- Schools are now recognized as sites of service within the Outpatient Behavioral Health System.
- Over 20 Arkansas schools participated in the National School Mental Health Census through the School Health Assessment and Performance Evaluation system (SHAPE).
- Arkansas Children’s Hospital funded two School Nurse Mental Health Forums to offer additional education for school nurses on topics related to mental health.
- Trainings and resources were offered to promote Trauma Sensitive Schools.
- High quality and effective school mental health promotion has been linked to increases in academic achievement and positive changes in school and classroom climate.

Reference:
School-Based Health Centers

School-Based Health Centers (SBHC) provide students access to health care in a location that is safe, convenient, and accessible in their school. SBHCs are staffed by licensed professionals with the experience and expertise to deliver quality care addressing the broad range of concerns affecting students' healthy development (https://www.sbhaar.org). SBHCs provide physical and mental health care when and where needed. Families and staff receive support with their healthcare needs, insurance, enrollment concerns, and a variety of health education opportunities. Although governed and administered separately from the school, SBHCs integrate into the education environment to support the school's mission of student success. The ADE funds SBHC startups via a grant application process annually.

The following milestones were accomplished in 2018:

- 32 state-funded SBHC sites provided mental health and physical health services
- 15 sites provided oral health services: Bradford, Bryant, Camden Fairview, Cedarville, Charleston, El Dorado, Gurdon, Jasper, Lamar, Lavaca, Little Rock, Magazine, Malvern, Ouachita River, and Smackover-Norphlet
- Seven sites provided vision services: Bryant, Camden Fairview, Charleston, El Dorado, Magazine, Paris, and Prairie Grove
- Five sites provided telehealth services: Jasper, Malvern, Magazine, Lamar, and Paris
- 27,535 students participate in SBHCs
Joint Use Agreements (JUA)

The ADE SHS supports Joint Use Agreement (JUA) grants. JUAs promote healthy lifestyles through community partnerships by encouraging schools and other community organizations to share indoor and outdoor spaces, such as gymnasiums, athletic fields, playgrounds, and walking tracks, to increase opportunities for children and adults to become more physically active and lead healthier lifestyles.

JUAs provide funding to schools to create safe places for students and community members to play and exercise in and out of school time. Infrastructure that promotes an active lifestyle is a necessary component in the achievement of education and health goals.
Medicaid in the Schools (MITS)

Arkansas public school districts may submit claims to Medicaid for reimbursement for eligible services. These services may be provided by school district employees, contracted employees, or agencies. Services that must be included in the Individualized Education Plan (IEP) are Physical Therapy Services, Occupational Therapy Services, Speech-Language Pathology Services, and Personal Care Assistant Services. Services and administrative duties for general education and special education students are Early Periodic Screening, Diagnosis, and Treatment (EPSDT); vision and hearing screenings; school-based mental health services; and Audiology Services. (Arkansas Medicaid Administrative Claiming http://www.armits.org/)

Last year MITS provided the following:

- 27 personal care trainings
- 22 general professional development trainings regarding Medicaid and/or health services
- Provided intense direct technical assistance to 43 districts and 6 educational cooperatives

School-based Medicaid reimbursements for 2018 are as follows:

- Physical Therapy-$5,003,056.64
- Occupational Therapy-$9,560,518.85
- Speech Therapy-$11,359,210.59
- Personal Care-$1,383,041.45
- School-based Mental Health-$35,604.99
- Vision/Hearing Screens-$1,479,322.20
- Audiology--$6,731.58
- ARMAC -$14,507,060.77

MITS staff assist district administration to ensure maximization of Medicaid reimbursement, budgeting, and use of Medicaid funds. MITS staff also monitor the efficiency of districts’ ARMAC programs and assist districts in complying with state and federal Medicaid mandates. Professional development opportunities are offered, in addition to providing certification trainings that enable nurses, paraprofessionals, and other health services’ staff to meet Medicaid billing standards. MITS staff assist the district personnel in planning for sustainability of health programs and educate districts on use of funds, including Medicaid reimbursements, National School Lunch Act (NSLA), and Title I. MITS staff also serve as liaisons between districts and Medicaid.

School Nurses

The School Health Services offices at both ADE and ADH provide guidance and development to school nursing practice. The School Nurse Roles and Responsibilities: Practice Guidelines were updated in July 2018. In collaboration with the Arkansas State Board of Nursing, the State School Nurse Consultant assists school nurses, educators, and administrators in determining the care and staff qualifications that are required for the health and welfare of the student population.

- 70% of school nurses were trained as trainers for the Stop the Bleed (STB) program and received STB Kits to place in their schools. STB increases capacity at schools for rapid response to hemorrhagic bleeding.

- In 2018, ADE, Arkansas Children’s Hospital (ACH), and ADH partnered to form a School Nurse Advisory Committee for a School Nurse Academy and School Nurse Residency Program.

  - The Arkansas School Nurse Academy (SNA), a one-day workshop, was hosted in five different locations around the state with 208 school nurses participating. The goal was to prepare school nurses to manage complex health issues of Arkansas school children. The content covered specific disorders, evidence-based practices, and quality improvement. The SNA workshop topics were diabetes, cardiomyopathy, tracheostomy care, and Stop the Bleed.

  - In 2018, 36 school nurses completed the Arkansas School Nurse Residency program, a week long experience that included lecture, simulation, and clinical experiences. The participating school nurses received PEARs (Pediatric Advanced Emergency Assessment Recognition and Stabilization Course) certification. The program assisted nurses in the development of practical application and assessment skills by networking with different staff, outreach programs, and partners. These activities were the foundation for establishing case management of acute and chronic conditions for school-age children.
School Nurse Survey Results

The ADE collects student healthcare data on an annual basis to assist in the development of health recommendations and guidelines based on identified needs. These data are used locally to provide a report to the school board of directors.

The 2018 annual School Nurse Survey included reports from 839 school nurses. According to the survey:

- 38% of Arkansas students have one or more chronic conditions, which is above the national average of 25%.
- The most prevalent diagnoses reported are obesity, attention deficit/hyperactivity disorder, and asthma.
- 14,384 students received a long-term prescription at school.
- 8,135 students received a short-term prescription at school.
- 29,438 students are currently receiving mental health services.
- 1,328,633 students were seen for minor injuries/illnesses-first aid: 18,185 of those injuries were followed-up with 911 or a health care provider, which included the following injuries:
  - Head
  - Eye
  - Fracture
  - Strain/Sprain
  - Dental
  - Psychiatric
  - Heat Related
  - Anaphylaxis
  - Sudden Cardiac Arrest
- 114,241 visits/care to school personnel provided by a school nurse.
- Of the 247,819 students receiving a vision screening (all grades) during the 2017-2018 school year, 26,768 (11%) were referred to a physician or eye doctor, yet only 35% of those referred received a comprehensive eye exam. Arkansas public school nurses have consistently shown an 83% accuracy rate when referring a student confirmed to need treatment. Given the 83% accuracy rate of referral, approximately 17,359 of the 26,768 students referred for a follow-up in the 2017-2018 school year are at potential risk for a vision deficit and need vision treatment, while only 9,409 actually received the follow-up exam.
- Impact on education by having a school nurse:
  - 2,202,421 students returned to class
  - 204,633 students sent home
  - 45,929 students sent to health care provider
  - 1,014 students required 911
Community Health Nurse Specialists/Community Health Promotion Specialists

The ADH Community Health Nurse Specialists (CHNS) and Community Health Promotion Specialists (CHPS) work collaboratively with the Department of Education to improve the health of Arkansas students. There are 16 CHNS and six CHPS housed in the educational cooperatives around the state that work directly with school staff, nurses, students, and communities.

The CHPS/CHNS provide education on programs that promote positive health behaviors, including tobacco prevention, healthy nutrition, and physical activity. Education is also provided on emergent public health issues, including injury, suicide, substance abuse, influenza prevention, and healthy adolescent relationships.

CHNS support school nurses by providing technical assistance, training for health screenings, and professional development opportunities. CHPS work directly with school wellness committees to promote activities and provide training on programs that teach healthy behaviors to students, families, and communities. This unique partnership between ADH and ADE assures that education and health are integrated to improve the health and well-being of Arkansas students.
For More Information

Find out more about school health, where you fit in, and how to engage your school by contacting School Health Services.

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  501-683-3604

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  School Health Services  
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