School-Based Telehealth: Advancing Whole Child Health and Well-being

A PROJECT OF The Children’s Partnership
Introduction

School-based telehealth is health care that is delivered virtually through technology like a phone, laptop or tablet to a child in a trusted, convenient, and familiar setting: their school. Many children still don’t receive consistent—or any—health care due to parents’ inability to take time off from their work day, economic hardships, transportation challenges, and lack of health care providers in their neighborhoods. With school-based telehealth, children who otherwise wouldn’t have access to behavioral, dental or health care can access care, setting them up for success in school and in life.

Telehealth is becoming a critical tool to close the health care gap for children, especially for low-income children and those from Black, Indigenous, and People of Color (BIPOC) communities who have historically lacked access to high-quality care that addresses their health needs.

Telehealth addresses systemic barriers to health care access for many families in low-income communities, including:

- a lack of affordable transportation,
- an inability to take time off work and school,
- finding a provider that treats patients enrolled in Medi-Cal (California’s Medicaid program which provides health care to people with low-incomes), and
- language and cultural barriers.

The COVID-19 pandemic has demonstrated telehealth to be a life-saving resource by keeping both patients and providers safe during health care visits, making the use of telehealth more widespread than ever. We now have an opportunity to build on telehealth’s momentum to bring care to where children and youth are daily—schools—by advancing school-based telehealth.

The Case for Telehealth in Schools

Educators know that keeping students healthy is vital to improving their academic achievement and life prospects. Unfortunately, most of California’s more than 10,000 schools do not have the resources to meet their students’ physical and mental health care needs. Only 43 percent of public-school districts in California have a nurse, and only two percent of schools have a school-based health center.

Across the nation and state, telehealth has proven to be a valuable and cost-effective tool to help meet the health care needs of children by bringing timely, high-quality care to them at school. Through video conferencing, phone calls, electronic health monitoring tools, specialized cameras and other technology, telehealth in schools is increasing access to preventive services, acute and specialty care, mental health and behavioral services, as well as care coordination, health education, and other vital health services. School-based telehealth allows doctors and other health care providers to provide a range of virtual services without students needing to leave their school campus.
School-Based Telehealth is Making a Difference

Telehealth has proven to meet a range of health care needs while keeping students healthy and in school, such as:

**PRIMARY CARE:**
Well-child visits are health visits that check up on a child’s health to make sure they’re growing and developing well. During COVID-19, most providers are conducting parts of the well-child visits using telehealth, and then scheduling brief in-person visits for vaccines and other components that need to be done in-person.

**MENTAL HEALTH:**
Telehealth is being used across the county to help diagnose and treat mental and behavioral health conditions among children and adolescents. Not only does telehealth help address shortages in mental health care providers for children and youth, but school-based telehealth also provides students with the flexibility to have a mental health visit when and where it is convenient for them at school, making them more likely to both seek and follow through on their mental health care appointments.

**ACUTE CARE:**
By connecting schools to health care providers, telehealth enables the distant health care provider to assess and diagnose a child’s acute condition—such as a common cold, a flu or an ear infection. The provider can provide recommendations for treatment as well as write a prescription for the parent to pick up at the pharmacy of their choice. The child can stay in school for the rest of the day, if appropriate, and the parents can stay at work.

**ORAL HEALTH:**
Telehealth can be used to diagnose and develop recommendations to prevent and treat dental disease. For example, a dental hygienist can go to a school and collect dental information from patients and use telehealth to send that information to a dentist. The dentist then can create a dental treatment plan for the hygienist carry out or to make a referral for procedures that require the skills of a dentist.

**CHRONIC DISEASE MANAGEMENT:**
Connecting children to health providers on a regular basis has proven to help children and families manage children’s chronic conditions, such as asthma and diabetes. Using video conferencing, cell phone apps, patient portals and other tools, children and youth can work with their provider to manage and improve their conditions and reduce disease-related emergencies.

**SPECIALTY CARE:**
Telehealth is a critical tool in bringing specialty care—such as pediatric cardiology, neurology and other subspecialty care—to children in their communities. It is also an important tool in connecting children to other special services, including physical therapy, speech therapy, hearing screenings, nutrition counseling and others.
Getting Started: Tips for Developing a School-Based Telehealth Program

Building on lessons from school-based telehealth programs from across the country, including California, listed below are select elements for building a successful program.

► Engage all stakeholders.
Successful school-based telehealth programs engage the right stakeholders at the right time, ranging from school administrators, to parents and teachers, to a broad array of providers and payers.

► Assess health care needs.
When establishing a program, it is important to first gather data and determine areas of greatest need for children’s health in the school community.

► Develop project scope and workflow.
Once needs are identified, the next phase is to develop a scope that outlines how telehealth can address the needs. From there, one can identify how the program will run on a day-to-day basis.

► Assess technology and internet needs.
Central to the success of any school-based telehealth program is the quality and efficacy of equipment that enables a high-quality telehealth visit. Further, broadband access continues to challenge widespread adoption of telehealth; it is important to explore broadband needs and solutions up front.

► Develop a funding and sustainability plan.
From purchasing equipment, to paying for salaries, to billing for reimbursable services and funding non-reimbursable services, a thorough funding and sustainability plan is key to success. Most school-based health centers bill Medi-Cal and commercial health insurance carriers for providing services and also rely on outside funding from foundations and local, state and federal agency grants.

► Measure and document success.
Data collection and storytelling are vital to ensuring children’s health care needs are being met, sharing best practices to the community, policy makers and funders.

School-based telehealth programs provide an opportunity to leverage technology to improve health outcomes for children, while addressing barriers that many families from low-income, BIPOC, and medically underserved communities face in ensuring their children get the health care they need. In short, school-based telehealth helps communities achieve health equity.


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