

## School-based Health in the Time of COVID-19: What Will it Look Like?

Population Health Sciences

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Editor's Note: This post is part of our "Back to School" series in which our experts discuss the top health-related issues facing children and families as they head back to school. This year, COVID-19 is certainly one of these challenges. Some schools made the decision to reopen this fall, while others are sticking with virtual learning due to the effects of the pandemic. This remains a fluid situation, which is why we developed evidence-based guidance for schools with thresholds for test positivity rates and case counts as they consider reopening strategies into the fall. For more, follow our hashtag #PolicyLabGoesBacktoSchool on Twitter.

Due to COVID-19, there are many children and adolescents here in Missouri and across the country who will not be attending school in-person to begin the year. Many of these students rely on school-based health (SBH) programs, which provide access to critical services including:

- Preventative and urgent medical care
- Oral and vision care
- Mental health treatment
- Medication management
- Vaccinations
- Health and wellness education for students and staff.

As some children transition to virtual learning, they may miss out on this vital care they often receive at school. This gap in access will lead to months of untreated chronic illness, missed preventive care visits, and could particularly impact families' ability to obtain required vaccinations as access may be limited.

The long-term health implications linked to these missed services go beyond the individual student. When more children do not receive their required vaccinations, there is an increased risk of exposure to and spread of serious communicable diseases, which has a systemic impact. The lack of access to preventative wellness screenings can lead to more severe health issues, poor school attendance and an increase in emergency room visits at a time when we want to limit exposure to COVID-19 and avoid overwhelming our hospital systems.

We also know that COVID-19 will continue to be a threat in many communities when kids do return to the classroom, and SBH programs will have a critical role to play as frontline responders within schools to control further spread. In preparation for the fall, SBH and health care providers have been joining efforts to meet health care needs and address the critical gaps for Missouri's most vulnerable youth. Health care programs and schools/districts have developed and must maintain a collaborative effort—now more than ever—to address student and school community needs.

Here are just a few highlights of some of the great work happening in Missouri that shows true collaboration and pooling of resources to close the immunization gap across the state:

• Health care providers are creating regional immunization drive-up stations and clinics in some of our most underserved, rural areas. Hospitals, federally qualified health centers (FQHCs), and community health

agencies are sharing staff, personal protective equipment (PPE) and supplies, which further maximizes the ability of health care systems to safely reach their communities.

- Health care providers are using their mobile vans and buses as immunization clinics, parking in school lots, public lots and community centers.
- Providers and schools are coming together to create messaging and educational materials around the importance of staying on top of required immunizations, even though school may not begin in-person in the fall.
- School nurses and staff are networking with their local health departments and providers to ensure that the most high-need students are getting their immunization and health care needs met.

Our communities are getting creative! We could not be prouder of our health care providers, SBH programs, and schools in working together to ensure that Missouri youth have equitable access to health care during such a challenging time. In times of crisis, we must learn and adapt. Perhaps the silver lining of the COVID-19 pandemic will be a shift to more health care providers partnering with one another and their school districts to collectively meet the needs of communities in innovative ways, like increasing use of telehealth, expanding outreach and providing more holistic health care services.

We still have a lot of work to do, but if we continue to come together within our communities, actively reaching out to our partners and inviting them to the table, we can all help advocate for our youth and families in Missouri and beyond.

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