

# Whole School Whole Community, Whole Child *EXPERIENCE THE DIFFERENCE!*

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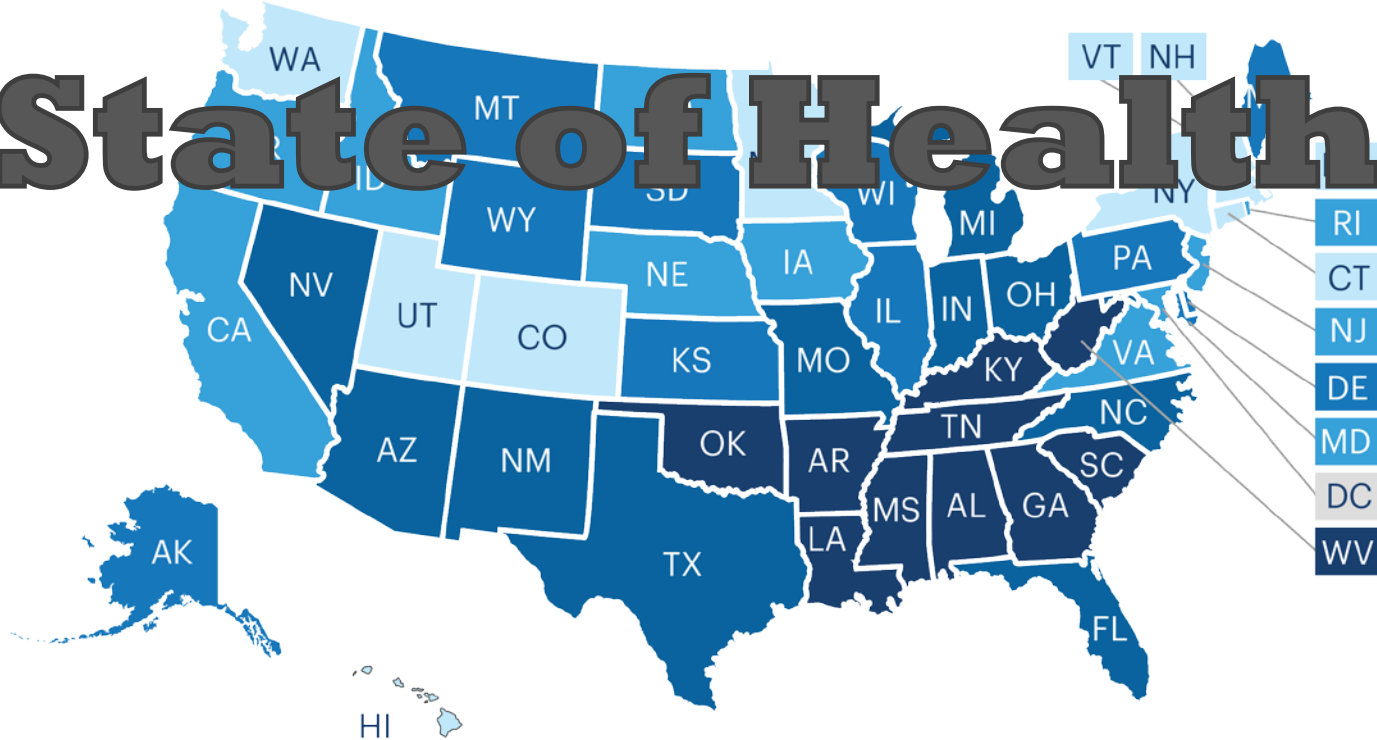
## **SCHOOL HEALTH SERVICES**

Creating and Sustaining a Healthy School Culture

A coordinated *WHOLE CHILD* approach  
setting the standard for comprehensive,  
sustainable school improvement health  
strategies for long-term student success.

# 2017 Annual Report State Rankings

## ARKANSAS State of Health



**RANK:** 1 to 10 11 to 20 21 to 30 31 to 40 41 to 50 Not Ranked

# States With the Biggest Challenges



**MISSISSIPPI**



**LOUISIANA**



**ARKANSAS**



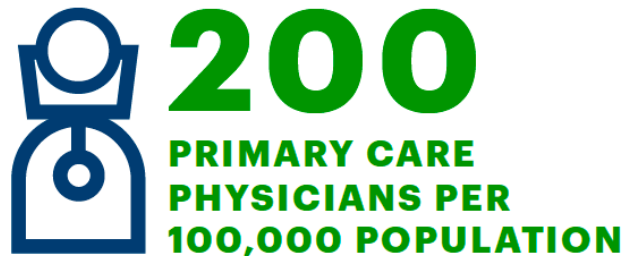
**ALABAMA**



**WEST VIRGINIA**

# Variation Among States in Distribution of Primary Care Physicians and Dentists

Massachusetts, Connecticut,  
New York and Rhode Island  
have more than



Utah and Idaho  
have fewer than



Similarly, Massachusetts and  
New Jersey have more than

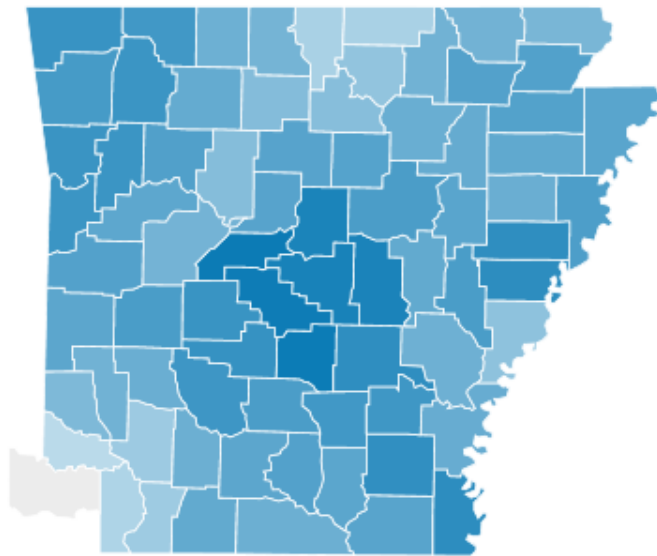


Arkansas, Mississippi, Alabama  
and Delaware have fewer than



# HEALTH

## Oral Health



Source: Arkansas Department of Health

Show Data Table | ▼

### NATIONAL RANKING

48

OUT OF 51

2016

### STATE TREND



Increasing

58%

2016





## Arkansas

OVERALL RANK: **48**

NO CHANGE

DETERMINANTS RANK: **48**

OUTCOMES RANK: **47**

### Obesity



**35.7%**



SINCE 2016, OBESITY\* **INCREASED**  
**3.5% FROM 34.5% TO 35.7%**

\* Percentage of adults

### Drug Deaths



**12.3**



SINCE 2016, DRUG DEATHS\*  
**INCREASED 1.7% FROM 12.1 TO 12.3**

\* Deaths per 100,000 population



## Arkansas

OVERALL RANK: **48**

NO CHANGE

DETERMINANTS RANK: 48

OUTCOMES RANK: 47

### Suicide

14th

18.18



In 2016, SUICIDE DEATHS\*

*\*Deaths per 100,000 population*

2<sup>nd</sup> leading cause of death for ages 15-34

### Births to Teens

50th

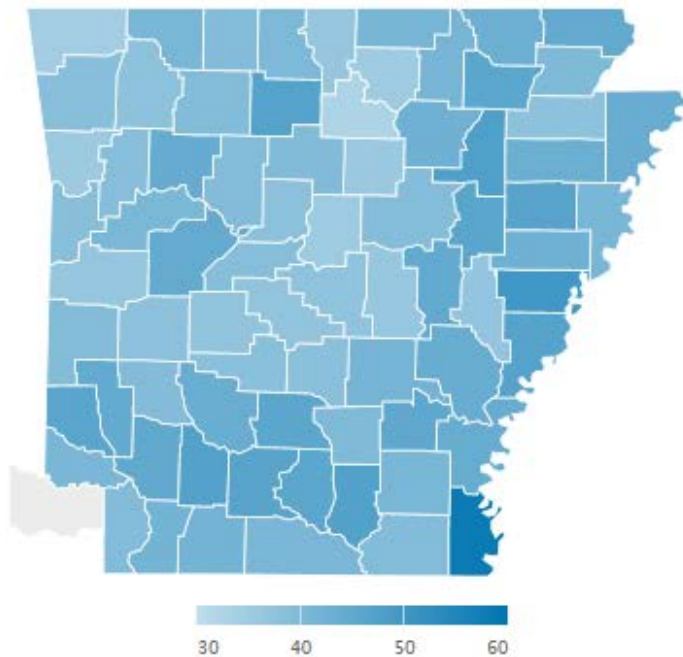
33

Since 2016, TEEN BIRTHS

*\*Births per 1,000 females ages 15-19*

# HEALTH

## Overweight or Obese Students



Source: Arkansas Center for Health Improvement

Show Data Table | ▼

### STATE TREND



Increasing

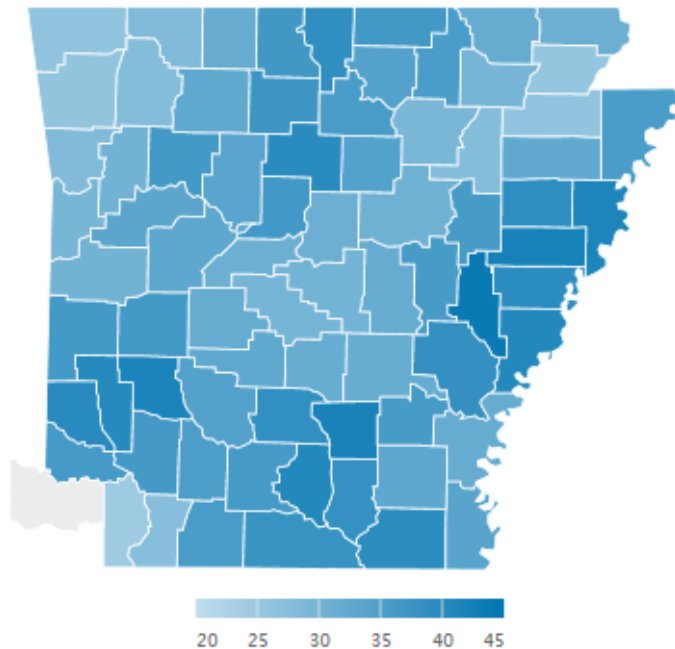
39%

2016



# HEALTH

## Physically Inactive Adults



Source: Arkansas Department of Health

Show Data Table | ▼

### NATIONAL RANKING

51

OUT OF 51

2016

### STATE TREND



Increasing

33%

2016





## Arkansas

OVERALL RANK: **48**

NO CHANGE

DETERMINANTS RANK: 48

OUTCOMES RANK: 47

### Smoking



**23.6%**



SINCE 2016, SMOKING\* **DECREASED**  
**5.2% FROM 24.9% TO 23.6%**

\* Percentage of adults

### Cardiovascular Deaths



**323.0**



SINCE 2016, CARDIOVASCULAR  
DEATHS\* **INCREASED 1.8% FROM**  
**317.3 TO 323.0**

\* Deaths per 100,000 population

### Premature Death



**9,972**



SINCE 2016, PREMATURE DEATH\*  
**INCREASED 2% FROM 9,762 TO**  
**9,972**

\* Years lost before age 75 per 100,000  
population

### Uninsured



**8.7%**



SINCE 2016, UNINSURED\*  
**DECREASED 18.7% FROM 10.7% TO**  
**8.7%**

\* Percentage of population



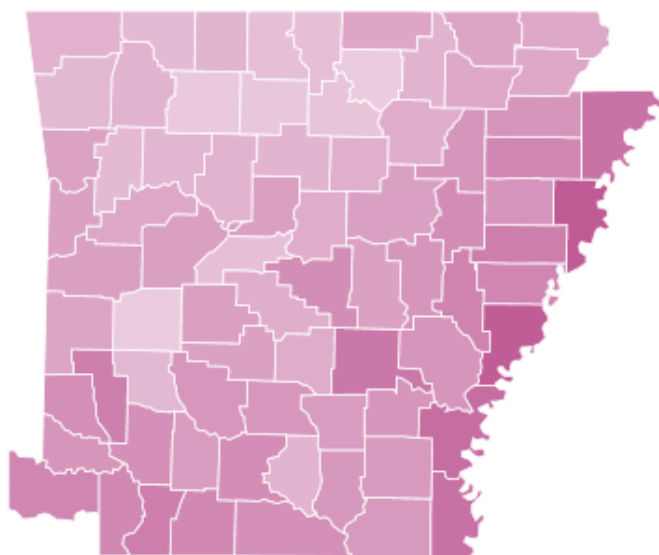
# FAMILY Economics



A PROJECT OF **ARKANSAS COMMUNITY FOUNDATION**

# FAMILIES

## Female-headed Households



Show Data Table | ▼

### NATIONAL RANKING

34

OUT OF 51

2012-16

### STATE TREND



Increasing

13%

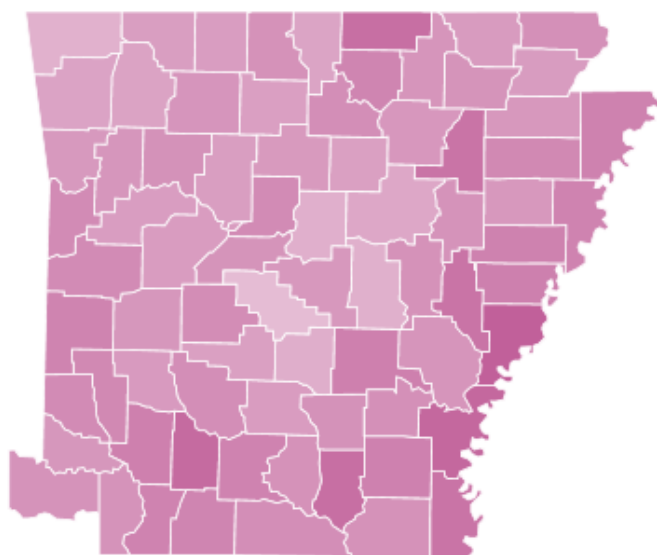
2012-16

1% = 11,415



# FAMILIES

## Children Living in Poverty



Source: U.S. Census Bureau

[Show Data Table](#) | ▼

### NATIONAL RANKING

48

OUT OF 51

2012-16

### STATE TREND



Increasing

27%

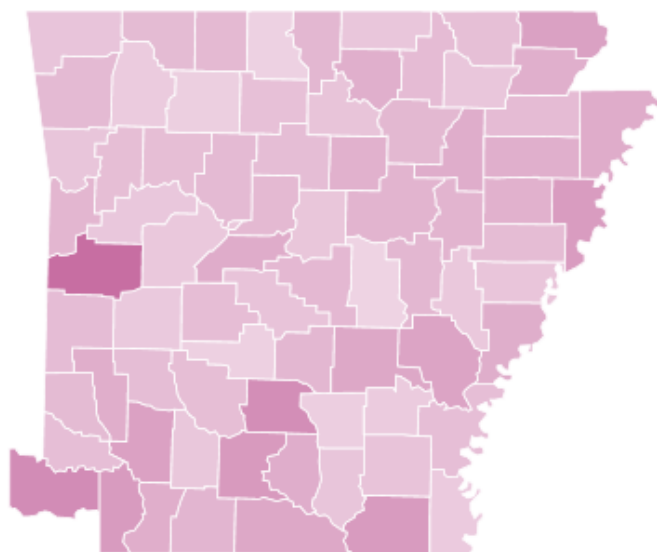
2012-16

1% = 6,941  
Children Under 18



# FAMILIES

## Incarceration Rate



Show Data Table | ▼

### NATIONAL RANKING

40

OUT OF 45

2015

### STATE TREND



Increasing

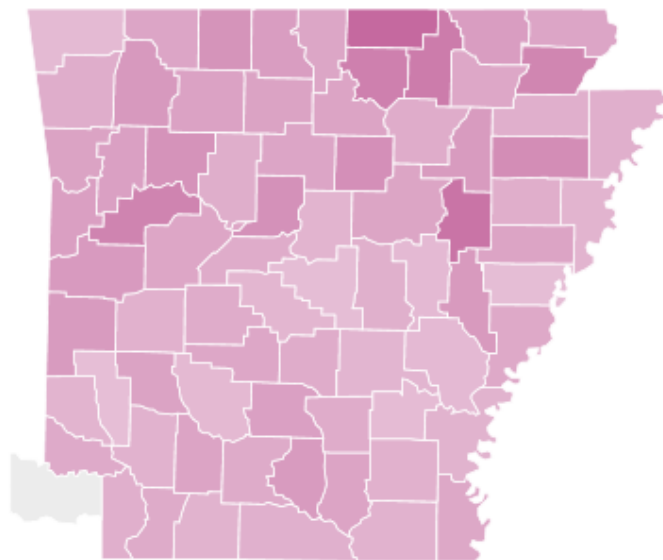
122

2015



# FAMILIES

## Child Abuse and Neglect



Source: Arkansas Department of Human Services

Show Data Table | ▼

### NATIONAL RANKING

40

OUT OF 51

2015

### STATE TREND



Decreasing

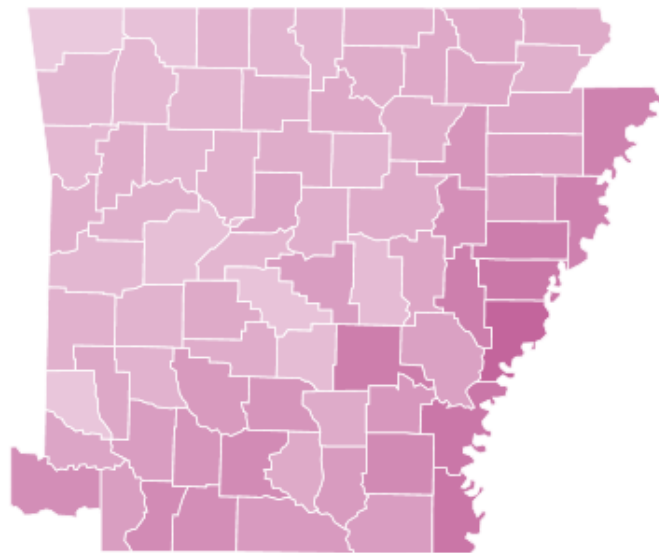
12.6

2017



# FAMILIES

## Food Insecurity



10 15 20 25 30 35

Source: Feeding America

Show Data Table | ▼

### NATIONAL RANKING

50

OUT OF 51

2015

### STATE TREND



Decreasing

18%

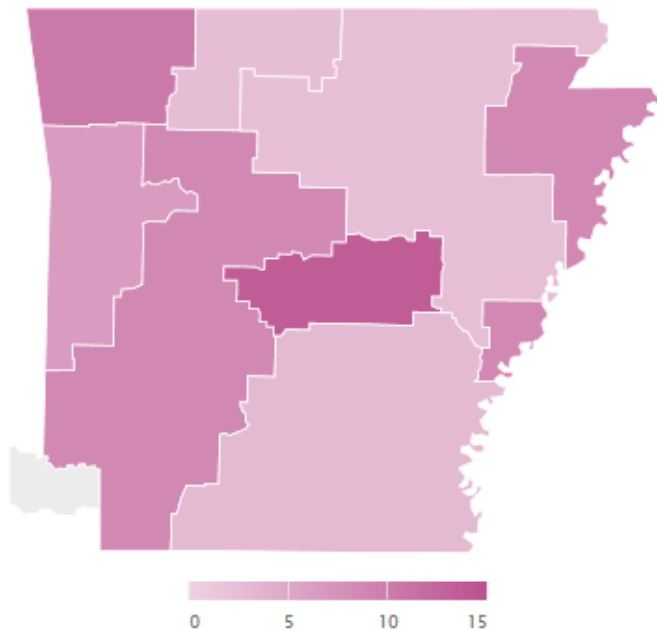
2015

1% = 29,841  
People



# FAMILIES

## Homelessness



Source: U.S. Department of Housing and Urban Development, U.S. Census

Show Data Table | ▼

### NATIONAL RANKING

5

OUT OF 51

2016

### STATE TREND



Decreasing

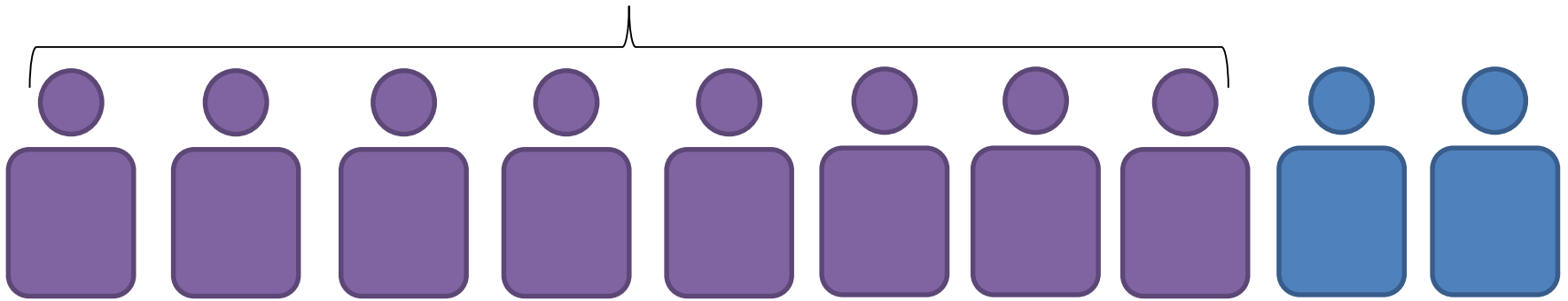
8.2

2016

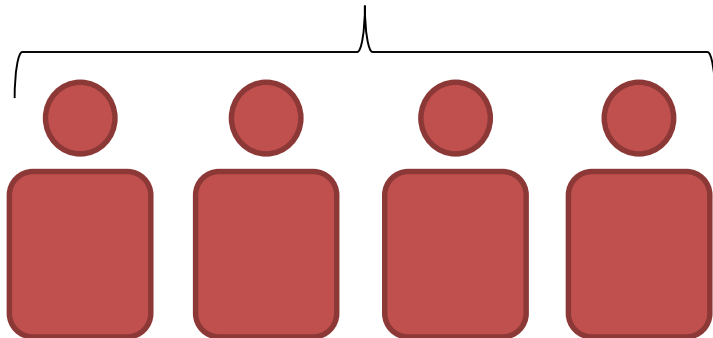


# Adverse Childhood Experiences (ACE)

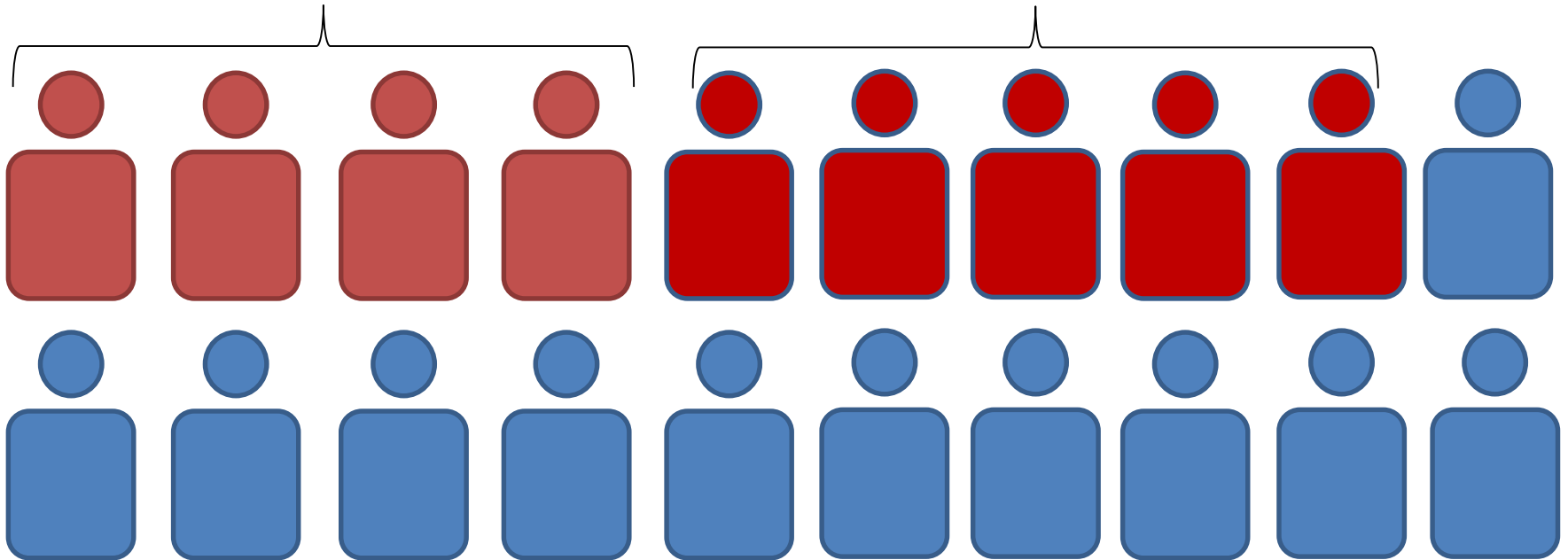
**1 ACE**



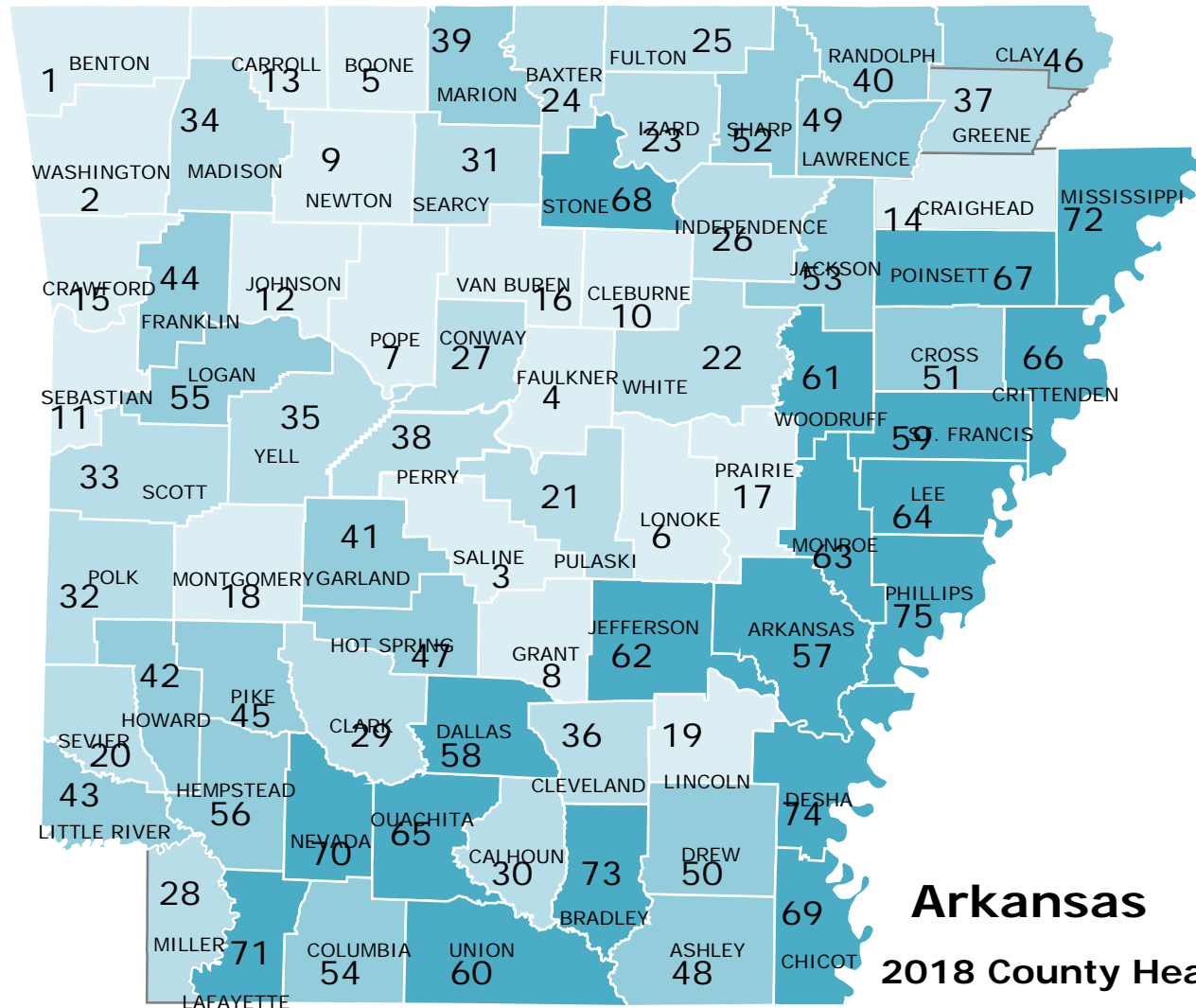
**2 ACEs**



**3-8 ACEs**



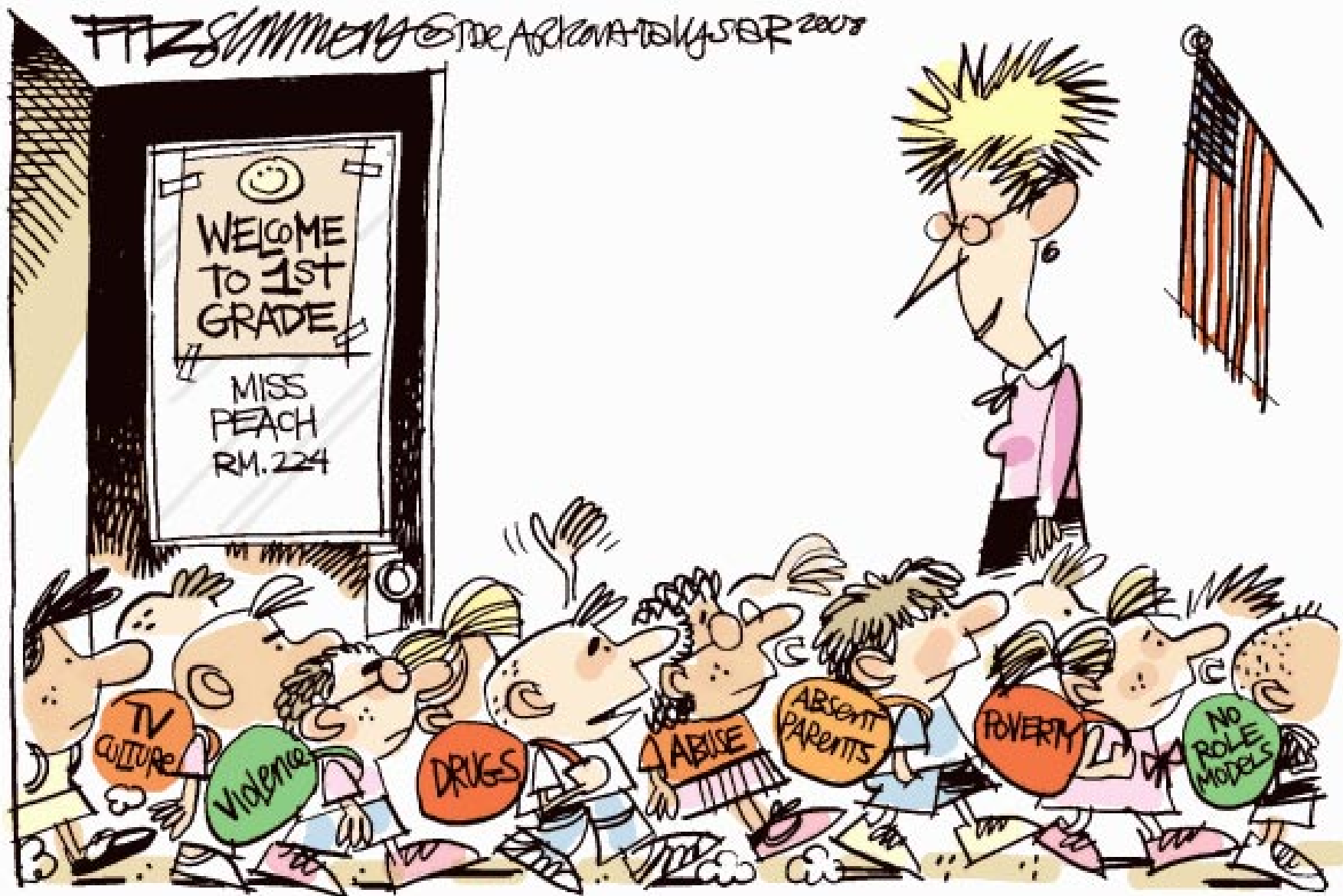
# County Rankings



**Arkansas**  
**2018 County Health Rankings**



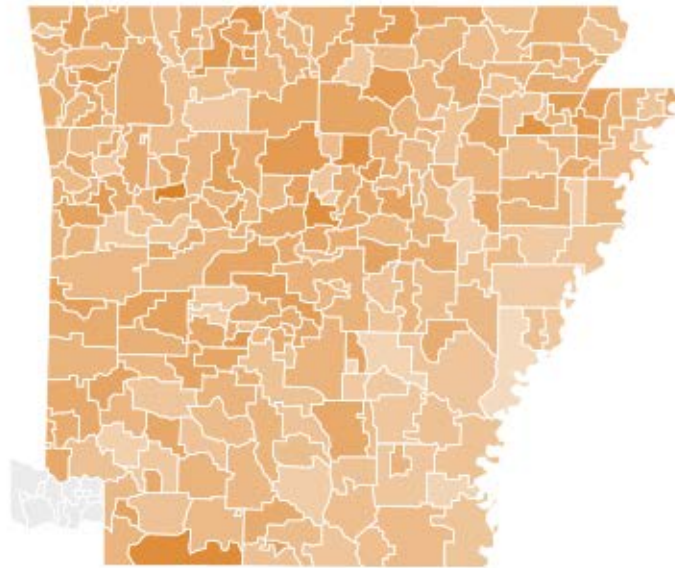
FTZ SUMMER © STEVE ACKERMAN 2007



HI! WE'RE EVERY SOCIAL PROBLEM IN AMERICA THAT YOU CAN NAME ROLLED INTO A HERD OF TOO MANY HUMANS FOR ONE MERE MORTAL TO MANAGE... LET ALONE TEACH. WHERE DO YOU WANT US TO SIT?

# EDUCATION

## Grade 3 Reading



Source: Arkansas Department of Education

Show Data Table | ▼

### STATE TREND



Increasing

**37%**

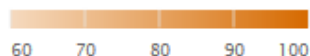
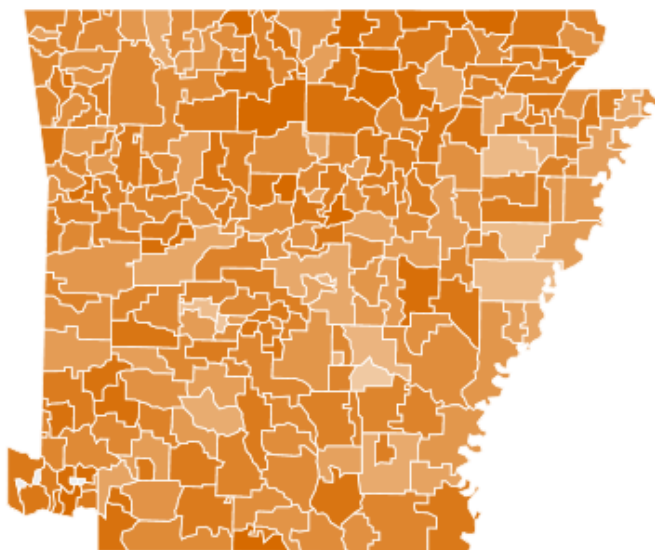
2017

**1% = 378**  
Students



# EDUCATION

## Graduation Rate



Source: University of Arkansas - Office for Education Policy

Show Data Table | ▼

### NATIONAL RANKING

25

OUT OF 51

2015

### STATE TREND



Increasing

87%

2016

1% = 356  
Students



Falling through the crack  
Closing the Achievement Gap  
No Child Left Behind  
Every Student Succeeds Act



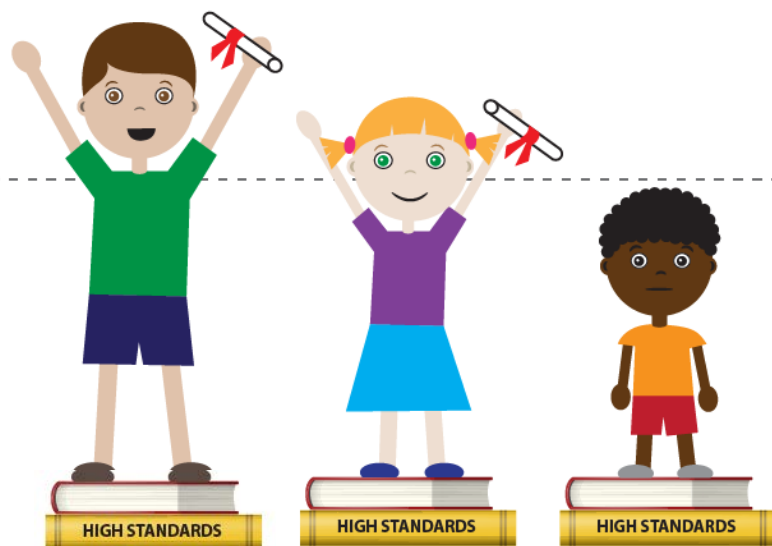
*“No matter how well teachers are prepared to teach, no matter what governing structures are established for schools, educational progress will be profoundly limited if students are not motivated and able to learn.”*

***Dr. Charles Basch, Columbia University***

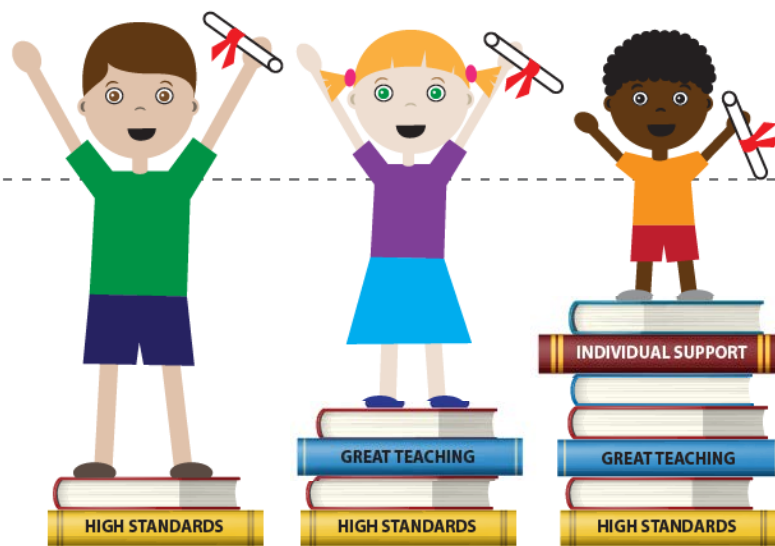


# Key Element of Arkansas' ESSA Plan

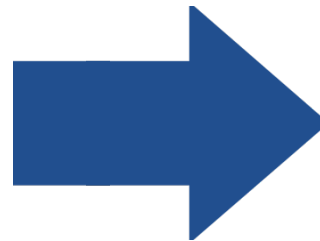
## EQUALITY



## EQUITY



# ESSA vs NCLB



No Child Left Behind (NCLB)	Every Student Succeeds Act (ESSA)
One-size fits all plan developed by U.S. Department of Education for all states	Individualized plans developed by each state
Mandated labels for the lowest performing schools (Priority and Focus)	No labels for lowest performing schools
School performance primarily measured by math and English language arts test scores	School performance measured by test scores, achievement, growth, English learner progress, graduation rate, and school quality and student success
State provided support directly to schools	State provides support to districts, which provide support to schools
Stakeholder engagement not required	Requires meaningful stakeholder engagement
4-year graduation rate used to determine school success	4-year graduation rate AND 5-year graduation rate used to determine school success
Focused on achieving proficiency	Focuses on achievement and growth for all students



# ESSA Index

Component	Weight of Indicator within Index Grades K – 5 & 6 - 8		Weight of Indicator within Index High Schools
Weighted Achievement Indicator	35%	Weighted Achievement and Academic Growth	70% total with Weighted Achievement accounting for half (35%) and School Growth Score accounting for half (35%)
Growth Indicator Academic Growth English Language Progress	50%		
Progress to English Language Proficiency*	Weight of indicator in School Value-Added Growth Score is proportionate to number of English Learners	Progress to English Language Proficiency*	Weight of indicator in School Value-Added Growth Score is proportionate to number of English Learners
Graduation Rate Indicator 4-Year Adjusted Cohort Rate 5-Year Adjusted Cohort Rate	NA		15% total 4-Yr = 10% 5-Yr = 5%
School Quality and Student Success Indicator	15%		15%

# ESSA: Points of Interest for health

- **State Accountability-** Measure of Climate
- **Reports-** Chronic Absenteeism
- **Title I –** Schools with 40% or more low-income families- can use funding to support health programming to benefit ALL students (ie nursing, social emotional learnings).
- **Title II-** Professional Development- Train school staff to address behavior and mental health needs
- **Title IV Part A-** Student Support and Academic Enrichment – excess of \$30,000 must be used for safe and health school activities.



## Food and Nutrition

Including healthy eating and sustainability.



## Health & Safety

Injury prevention, drug education and more



## Health Conditions

Such as continence, asthma and others.



THE WSCC MODEL RESPONDS TO  
THE CALL FOR GREATER ALIGNMENT,  
INTEGRATION, AND COLLABORATION  
BETWEEN HEALTH AND EDUCATION  
TO IMPROVE EACH CHILD'S COGNITIVE,  
PHYSICAL, SOCIAL, AND EMOTIONAL  
DEVELOPMENT.



## Mental Health Wellbeing

Promoting good mental health in childhood.



## Physical Activity

Programs for keeping kids active.



## Professional Support

Training and information to assist school staff.



# 10 Targeted Areas

- Health Education
- Community Involvement
- Family Engagement
- Employee Wellness
- Physical Environment
- Social & Emotional Climate
- Healthcare Services
- Nutrition Environment & Services
- Physical Education & Physical Activity
- Counseling & Psychological and Social Services



# 2017 Arkansas Public Schools Report

- 157,694 Students with at least one chronic health condition, 33% of total student pop.
- Top three Chronic Conditions among Arkansas Students:
  - Obesity, ADHD, Asthma
- 35,041 Students with a known ADHD/ADD diagnosis
- 1216 Students with known substance abuse diagnosis
- 16688 Students receive a long-term prescription at school
- 7,890 Students receive a short-term prescription at school
- 19% of Arkansas students responding in the 2017 YRBS
- 30,000 student currently receiving mental health services

# Innovation Spotlight

## Coordinated School Health (WSCC)

- Coordinated School Health (WSCC)
  - Quarterly Staff Development and Technical Assistance
  - Renewed CDC funding for 5 years



# Innovation Spotlight

## School Nursing

- **School Nurse Residency Program (PILOT)**
  - Partnership with Arkansas Children's Hospital and the Arkansas Department of Health
  - 36 school nurses, representing 36 school districts



# Innovation Spotlight

## Joint Use Agreement (JUA)

### Shared use of recreational spaces

- 40 of 75 Counties have at least 1 School District with a formal Joint Use Agreement
- 75 School Districts have a joint use agreement policy and formal agreement with a community partner
- 205 JUA Awards have been funded since 2010
- <https://www.youtube.com/watch?v=Qi8a66fadSI>
- **Next Release: Fall 2018**



# Innovation Spotlight

## School-Based Health Center

- School-Based Health Centers –Lavaca Wellness Center  
<https://www.youtube.com/watch?v=wj4zwhxYYFY>

Medical Encounters: 41,649

Mental Health Encounters: 4,180

Oral Health Encounters: 2,141

Other Encounters: 79

Combined Total: 48,049

- **Congratulations!**
  - Hope
  - Springdale – Parson Hills
  - East End
  - Highland



# Innovation Spotlight

## School-Based Mental Health

- Behavioral Health Transformation
  - School-based billing **Increase Rate from \$9.82/ min units**
  - Provider Referrals for Services

Proc Code	Description	Unit of Service	Rate	Daily Benefit Limit (#units)	Annual Benefit Limit (#units)
90832	Individual Behavioral Health Counseling	30 Minutes	\$46.38	1 across these 3 codes	12 across these 3 codes
90834	Individual Behavioral Health Counseling	45 Minutes	\$69.57		
90837	Individual Behavioral Health Counseling	60 Minutes	\$92.76		
90791	Mental Health Diagnosis	Encounter (Est.60 min)	\$114.43	1	1
96101	Psychological Evaluation	60 Minutes	\$81.49	4	8
90887	Interpretation of Diagnosis	Encounter (Est.30min)	\$53.65	1	1
90847	Marital/Family Behavioral Health Counseling w/ Beneficiary Present	Encounter (Est.45 Min)	\$77.28	1	12
H2011	Crisis Intervention	15 Minutes	\$27.30	12	72



• As of July 1, 2018 School-based Certification **REQUIRED!**

# Initiatives on the Horizon

- Extended Recess Pilot
- Mental Health First Aid
- ACE/Trauma Informed Care Staff Development
- Mobile Vision Unit
- Whole Child Micro-credentialing
- CMS – Medicaid LEA Pullout Manual
- WebIZ- Immunization data center
- ARMAC System Upgrade – Rosters from eFinance



# BEST PRACTICES from the field

- Clearly designated staff
- Building level buy-in
- Consistent wellness meetings and collaboration
- Collaboration with community resources
- A plan for intervention- based on DATA!
- A plan for funding health strategies



# Planning for School Health



# Planning for School Health

## Section II: Needs Assessment

### School Health Index Assessment

Hint

- ☐ Check box if completing the SHI Assessment online
- ☐ Check box if the school completed the pdf version of the SHI Assessment, upload the Completed Overall Score Card and the School Health Improvement Plan to the Health & Wellness Folder.

If completing the SHI Assessment online you must provide a Reference Number.

Reference Number:

### Body Mass Index (BMI)

Hint

- ☐ The school can verify the analysis of the School Level Body Mass Index screening data conclusions.

Description/Conclusion

### Other health and wellness related data (Optional)

Description/Conclusion

# Planning for School Health

## Section III: Health and Wellness Goals

(Provide a detailed description of each required activity)

**Goal 1:** How will the LEA provide coordination and support to create a healthy nutrition environment for students? {HINT: see 3 required activities.}

Hint

Activity	Person Responsible	Timeline

Description

**Goal 2:** How will the LEA provide coordination and support to create an environment that promotes physical activity and provides quality physical education for students? {HINT: see 3 required activities.}

Hint

Activity	Person Responsible	Timeline

Description

--

# Planning for School Health

**Goal 3:** How will the LEA promote a healthy school environment that promotes learning throughout the school culture? {HINT: see 1 required activity.}

Hint

Activity	Person Responsible	Timeline

Description

--

**Goal 4:** (Optional) How does the school address other health disparities trending among students identified from the Needs Assessment?

Activity	Person Responsible	Timeline

Description

--

# Medicaid Revenue

The revenue generated by the ARMAC program is dedicated to the provision of health services and may be used to facilitate, improve and/or expand the level and quality of health/medical services provided to all students within the district.



# Funding School Health Strategies

Medicaid **Source of Funds** Codes [www.arimits.org](http://www.arimits.org)

## ✓ RESTRICTED Medicaid Codes

- ✓ Special Education ONLY (speech, occupational, physical therapy)
  - 6750 - MEDICAID

## ✓ NON RESTRICTED to Special Education Medicaid Codes

- ✓ Funds can be used to support health related efforts for the general student population
  - 6751 – School-based Mental Health Medicaid (Employed by district)
  - 6752 – Medicaid General Health Services – Medicaid Administrative Claiming (ARMAC)
  - 6752 – Medicaid General Health Services – Personal Care
  - 6752 – Medicaid General Health Services – Vision & Hearing
  - 6752 – Audiology

**WARNING!** Don't pay salaries for district employed School Nurse and/or counselor from 6751. Random Moments assess time spent addressing health in school.



- Some examples include, but are not limited to:
  - Nursing salaries
  - Therapy salaries
  - Nursing supplies
  - Other health related supplies
  - Computers for nurses, therapists, other medical staff
  - Coordinated School Health
  - Staff wellness
  - Health related trainings/conferences
  - Health and physical education materials
  - SBMH
  - AEDs

# Medicaid Codes: 6751 & 6752

## EXAMPLES of Expenses can support:

✓ <u>District Healthcare Staff</u>	✓ <u>Health Outreach/Environ</u>	✓ <u>Individual Students</u>
PD for Nurse / MH	Salad Bar for Cafeteria	Student Eye Glasses
Health Related District PD	Staff Fitness Center	*Student Co-pay for Doc
HSW Salary	Classroom Resources – Health/PE	
CSH Coordinator Salary		

Ask yourself:

1. What is it for?
2. Can I relate this to health?

**WARNING!** Schools that bill any area of Medicaid must have an RN serving the district.



# Promising Partnerships

- UAMS Center for Distance Health – Telemedicine
- Centers for Youth and Families – Trauma Informed Training
- Arkansas Children's Hospital - GoNoodle Physical Activity
- University of Arkansas Extension Svc. -SNAP Ed Nutrition Education
- Department of Health/Children's – School Nurse Residency Program
- Arkansas State University – Active Recess



# Meet the School Health TEAM

## School-Based Mental Health

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**School-Based Mental Health Specialist**

## School Nursing

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## Coordinated School Health

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**ADH Coordinated School Health Advisor**

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**ADE 1220 Coordinator**

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**ADH 1220 Coordinator**

## Joint Use Agreement

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## Safe and Healthy Schools

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**Health Educator/Teen Pregnancy Prevention**

## School-Based Health Centers

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**ADE Grant Manager**

Danna Schaffer [Danna.Schaffer@arkansas.gov](mailto:Danna.Schaffer@arkansas.gov) Medical Advisor

**ADE/ADH School-Based Health Center Advisor**

## Medicaid in the Schools

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**ADE MITS Trainer**

Dana Bennett [Dana.Bennett@arkansas.gov](mailto:Dana.Bennett@arkansas.gov) Personal Care Certification

**ADE MITS Trainer**

Veronica Milton [Veronica.Milton@arkansas.gov](mailto:Veronica.Milton@arkansas.gov) Medicaid Claiming

**ADE MITS Trainer**

Richard Harper [Richard.Harper@arkansas.gov](mailto:Richard.Harper@arkansas.gov) ARMAC

**ADE ARMAC Specialist**



# thank you

## **School Health Services**

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**501-683-3604**



**SCHOOL HEALTH SERVICES**

Creating and Sustaining a Healthy School Culture