



SCHOOL HEALTH ANNUAL REPORT 2021



DIVISION OF ELEMENTARY
& SECONDARY EDUCATION

TABLE OF CONTENTS

Forward	1
Coordinated School Health (CSH)	2
Health & Wellness Assessment and Planning (Originally Act 1220 of 2003)	3
Student Wellness Advocacy Group	3
Data Collection	5
School-Based Mental Health	6
School-Based Health Centers	7
Joint Use Agreements (JUA)	8
Medicaid in the Schools (MITS)	9
School Nurses & Survey Results	10
Community Health Nurse Specialists & Community & Health Promotion Specialists	11
For More Information	12

Forward

The Arkansas School Health Services Initiative is an interagency collaboration between the Arkansas Department of Health (ADH) and the Division of Elementary and Secondary Education (DESE). The state-level infrastructure provides support to Arkansas schools in the implementation of health and wellness activities that create a safe and healthy school environment that supports learning.

The mission of the School Health Services (SHS) is to improve the health and academic success of children by advancing school health services through leadership and collaboration. The vision is to ensure all Arkansas children are safe, healthy, and ready to learn.

The areas of focus include: health and physical education, school-based health care services, mental health services, school health index assessment, development and implementation of district wellness policies and committees, and development of a school improvement wellness strategies. Through these areas, SHS assists in aiding schools in meeting school health legislative mandates and implementation of healthy school practices.

Under the guidance of Governor Asa Hutchinson and Secretary of Education Johnny Key, schools re-opened for the school year 2020-2021 in August 2020. School districts developed multiple ways of providing learning through non-traditional options, which included virtual learning – 5 days a week or a blended learning option – virtual and in-school learning. Tablets became essential for schoolwork. Administration and staff checked in with students on-line, by phone, and in person while practicing social distancing guidelines.

School nutrition professionals across Arkansas continued to provide nutritious meals throughout the coronavirus pandemic. Pursuant to the Families First Coronavirus Response Act, the United States Department of Agriculture issued waivers to school food authorities through the Seamless Summer Option to provide one breakfast and one lunch meal to all students within their school districts free of charge.

Most School-Based Health Centers re-opened, some on a conditional basis as they have been turned into drive-thru clinics for the COVID-19 test or vaccine center. School health coordinators have continued to take on various responsibilities in districts, doing whatever is needed, which is the sentinel characteristic of school health coordinators. The school health services team continued to meet via Zoom to address the challenges of completing data entry for Body Mass Index (BMI), eSchool, completed a funding opportunity cycle for School-Based Health Centers, transferred all trainings to on-line, and maintained communication with our partners and stakeholders.

With a vaccine now available for students twelve and older, work-life is adjusting to a new normal. School health budgets were re-evaluated to address the current situations. COVID-19 grant funding continues to assist schools. The SHS team continues to work diligently to ensure schools have the information needed to find and apply for available school health funding. Life has changed, but school health services remain dedicated to providing technical assistance and professional development. Health and wellness are a priority for all schools in Arkansas and SHS is committed to providing the best possible resources to Arkansas schools.

Thank you for reading the 2021 Arkansas School Health Services Annual Report.

~Ashley Williams
School Health Services Director

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 or WSCC) which is a nationally recognized model 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 16 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 Arkansas Department of Health (ADH) School Health Services (SHS) and the Division of Elementary and Secondary Education (DESE) School Health Services (SHS). 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 receive funding to support nutrition, physical activity, and chronic disease management.

The Statewide School Health Coalition, with representation from over 40 agencies, organizations, departments, and coalitions, work together to promote and support healthy school environments by providing resources, funding opportunities, and professional development to schools participating in CSH.

At least 34% of Arkansas students have one or more chronic conditions. Schools participating in CSH receive resources to improve health and combat the obesity epidemic. There are 110 school districts participating in the CSH program: representing over 250,000 K-12 students.

Prior to the COVID-19 pandemic, CSH quarterly professional development meetings were held in person. However, due to the pandemic, changes to the format of the meetings were necessary. A switch to digital meetings allowed for school personnel attendance to increase by over 50%. More than 170 school district representatives attended 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 2020-2021 school year included school wellness policies, School Health Index reporting, health literacy and health numeracy, family and community engagement, and human trafficking.

To continue providing quality resources for schools in Arkansas, the CSH team (ADH/DESE), applied for and received supplemental COVID-19 grant funding to purchase social-emotional curriculum for 32 schools. Also, fifteen (15) education service cooperatives were provided funding to purchase physical activity stencils to enhance space and opportunity for socially distanced play, breaks, and learning.

Health & Wellness Assessment and Planning (Originally Act 1220 of 2003)

Act 1220 of 2003 focuses on creating healthy environments for children. The Act created the Child Health Advisory Committee (CHAC) which serves to address childhood obesity and develop statewide nutrition and physical activity standards. Community Health Promotion Specialists (CHPS) and SHS staff provide schools and communities with strategies to prevent and reduce childhood obesity. Highlights from 2020 include the following:

- CHAC issued a statement regarding electronic cigarette usage legislation that impacts child health
- School wellness toolkit updates
- Virtual professional development trainings regarding school districts' health and wellness plans, school health index, and wellness policy and committees taught by Act 1220 Coordinators for all school administrators and wellness committees
- School District Health and Wellness Improvement reporting in Indistar increased from 75% to 90%

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.

Student Wellness Advocacy Group

Student Wellness Advocacy Groups (SWAGs) participate in youth-led action-oriented activities that address youth social norms about health. These initiatives are done with the vision of improving local and statewide health policies and requirements that are of particular interest and importance to Arkansas youth. Continued partnership between the ADH's School Health Service office and Tobacco Prevention and Cessation Program (TCP) offers schools serving grades 7-12 funding opportunities to develop SWAGs. Funding allowed for up to 12 schools to participate. A list of schools that participated is below.

2018 Schools:

Ashdown Jr. High School
Concord High School
Conway High School
Dollarway High School
Heber Springs Middle School
J.A. Fair High School
Ouachita High School
Pottsville High School
South Side Bee Branch High School

2019 Schools:

Ashdown Jr. High School
Concord High School
Conway High School
Heber Springs Middle School
J.A. Fair High School
North Little Rock High School
Osceola High School
Ouachita High School
Pocahontas Jr. High School
South Side Bee Branch High School
Southside Jr. High School

2020 Schools:

Ouachita High School
Yellville- Summit High School
Bryant Middle School
Concord High School
Conway High School
Little Rock Central High School
Osceola High School
Pocahontas Jr. High School

These groups participate in web-based monthly health education trainings. For 2020, the trainings were provided on: Advocacy; Brain Development; Emotional Intelligence; Inclusive Campus and Communities; LGBTQ+; Mindfulness; Motivational Interviewing; Dangers of Tobacco; and Zoom! Through the Grocery Store.

SWAGs hosted and advocated for various health education activities throughout the year ranging from YouTube outreach channels, “screens down, move around” campaign, Ready. Set. Record., COVID-19 vaccination outreach, outdoor classrooms, and virtual mentoring projects for lower-grade level district campuses.

A total of 115 students were members of SWAG. Activities conducted by the SWAGs included an additional 350 students and social media outreach success. The usage of digital platforms allowed for creativity and success throughout the 2020-2021 school year while the students and SWAG advisors battled COVID-19 and its impacts on life.



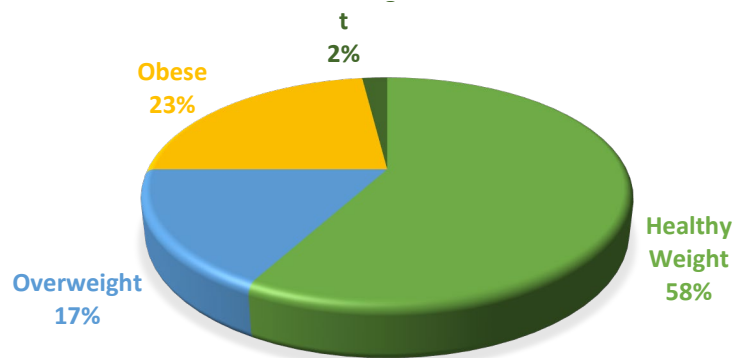
School Health Data

The ADH SHS contracts with the Arkansas Center for Health Improvement (ACHI), University of Arkansas Medical Sciences (UAMS) to collect student Body Mass Index (BMI) information from schools and create student, school, district, and state level reports each year. Data and information from the BMI report may assist in developing new policies and practices that aim to improve health and academic outcomes for Arkansan students. Per a recent study (Zare et al. / Am J Prev Med, 2021), data from the Arkansas BMI screening program has greatly improved the ability to identify children at greatest risk for future obesity.

The full 2020 report, "Assessment of Childhood and Adolescent Obesity, Year 17", (Fall 2019-Spring 2020), can be found at <https://www.achi.net>. Results are reported from 258 of the 262 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 and decrease health disparities as they become adults. In Year 17 (2019–20), 40.0% of Arkansas students were classified as overweight (BMI for age is greater than or equal to the 85th percentile and less than the 95th percentile) or obese (BMI for age is greater than or equal to 95th percentile).

YEAR 17 STUDENT BMI CLASSIFICATION FOR ARKANSAS PUBLIC SCHOOL STUDENTS



The Youth Risk Behavior Surveillance System (YRBSS) and School Health Profiles (SHP) monitors the prevalence of obesity, asthma, and other health-related behaviors. They are conducted every two years: YRBS during odd numbered years and SHP during even numbered years. These surveys provide schools, local and state agencies, community partners, and stakeholders with a snapshot of what is occurring in our schools related to policy, programming, and student risk behaviors.

Detailed results are available at the following websites:

- Centers for Disease Control and Prevention YRBS Results. <https://www.cdc.gov/healthyouth/data/yrbs/results.htm>
- Centers for Disease Control and Prevention School Health Profiles. <https://www.cdc.gov/healthyouth/data/profiles/index.htm>
- ACHI - Year 17 Student BMI Classification for Arkansas Public School Students [210217A FINAL DRAFT Year 17 \(2019-20\) Arkansas BMI Report.pdf \(achi.net\)](https://www.achi.net/210217A_FINAL_DRAFT_Year_17_(2019-20)_Arkansas_BMI_Report.pdf)

School-Based Mental Health

The Arkansas School-Based Mental Health Program works with schools to provide and promote access to mental health services. In Arkansas, 28.5% of children, ages 3-17, have reported one or more mental, emotional, developmental, or behavioral problems. (Child and Adolescent Health Measurement Initiative. 2018-2019 National Survey of Children's Health (NSCH) data query. www.childhealthdata.org) School-based mental health allows for prevention and early intervention while maintaining clear communication with all involved in student success. By making mental health a part of everyday student life, a school-based mental health program can have a positive impact on student life and school climate.

Per the 2019-2020 School Nurse Survey, 27,058 students received mental health services on campus, while 5,793 students receive services off campus.

Arkansas AWARE

Arkansas AWARE is a project to support districts in efforts to provide mental health care awareness and trauma informed practices.



Arkansas AWARE has three goals:

- Increase coordinated referrals, mental health services and programs, and follow-up for children;
- Increase outreach and contact among students, families, schools, and community to increase awareness, mental health identification and implementation of services and programs; and
- Develop the infrastructure that will sustain mental health among youth and maintain mental and behavioral health services when federal funding ends.

Program activities have focused on:

- Developing school mental health best practice programs in the designated pilot locations: Texarkana, Marvell-Elaine, and OUR Cooperative (Ozark Mountain, Valley Springs, Eureka Springs);
- Developing a statewide infrastructure of support and training for school personnel in Mental Health First Aid, Trauma Informed Schools, and Adverse Childhood Experiences programs and initiatives; and
- Promoting a safe, supportive, and positive school environment for students, staff, educators and the community.

Arkansas AWARE staff utilized time during the COVID-19 pandemic to develop and host virtual trainings on suicide prevention, adverse childhood experiences, mindfulness, youth mental health first aid, and student goal setting. Goals for Infrastructure Development, Prevention, and Mental Health Promotion (IPP) indicators were exceeded.

For more information about AWARE: <https://dese.ade.arkansas.gov/Offices/learning-services/school-health-services/arkansas-aware>

School-Based Health Centers

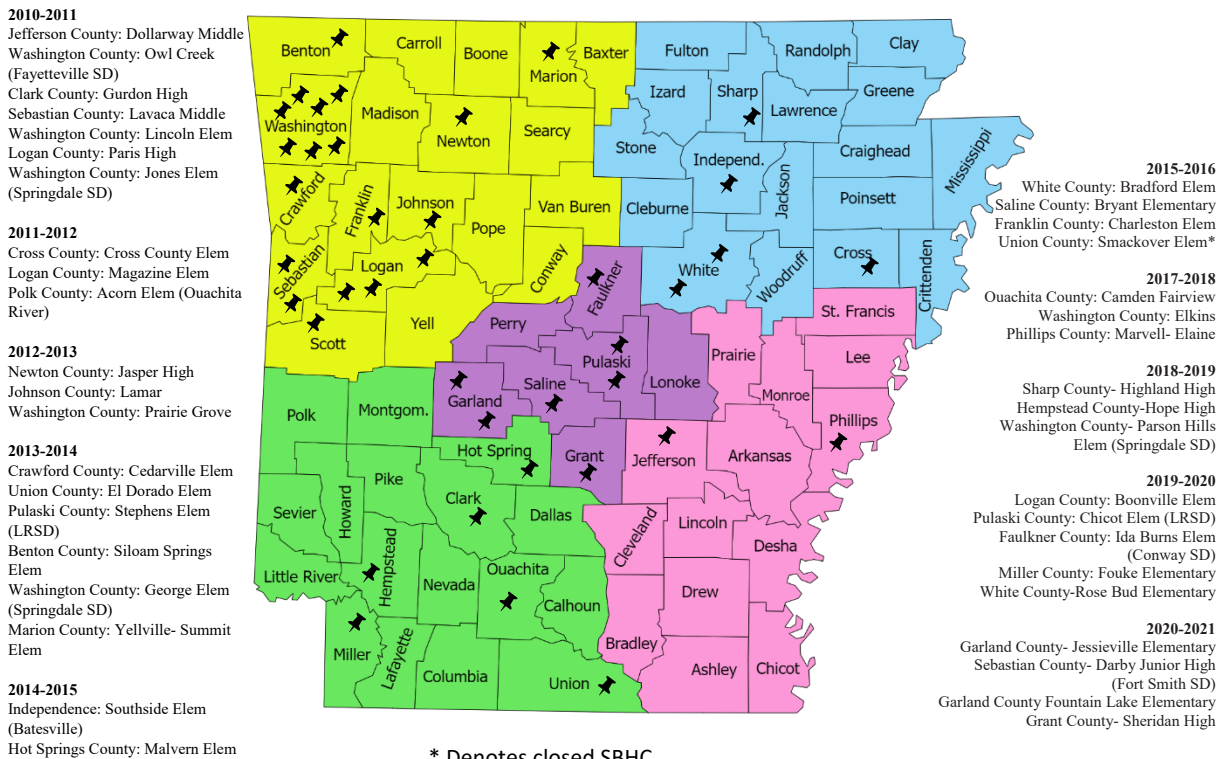
School-Based Health Centers (SBHC) provide students access to health care in a location that is safe, convenient, and accessible in their school. SBHCs are staffed by licensed professionals with the experience and expertise to deliver quality care addressing the broad range of concerns affecting students' healthy development (<https://www.sbhaar.org>). A requirement of the school-based health center is that it maintains a working relationship with the physician of a child's medical home, to ensure that individual patient health plans are executed effectively and efficiently.

Arkansas Act 180 of 2009 makes the Arkansas School-Base Health Center Grant possible through the usage of the Arkansas Tobacco Excise Tax. The funds are used to promote health, wellness, and academic achievement in Arkansas' public schools.

The following milestones were accomplished in 2020:

- 4 new school districts were funded bringing the total number of SBHCs to 39 state-funded sites providing mental and physical health services
- 17 sites provided oral health services: Bradford, Bryant, Camden-Fairview, Cedarville, Charleston, El Dorado, Fayetteville, Gurdon, Lamar, Lavaca, Little Rock – Chicot, Little Rock – Stephens, Magazine, Malvern, Paris, Prairie Grove, and Southside
- 6 sites provide vision services: Bryant, Camden-Fairview, Cedarville, Charleston, Magazine, and Prairie Grove
- 7 sites provide telehealth services: Conway, Elkins, Jasper, Lamar, Magazine, Malvern, and Paris

School-Based Health Centers 2010-2020



Joint Use Agreements (JUA)

The DESE 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.

Currently, with the usage of JUA grants, 40 counties have been able to provide either indoor or outdoor spaces that allow opportunities for increased physical activity for both children and adults within their community. This infrastructure promotes an active lifestyle that is a necessary component in the achievement of education and health goals.

Partnering for Healthy Communities Partnering for Healthy Communities



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:

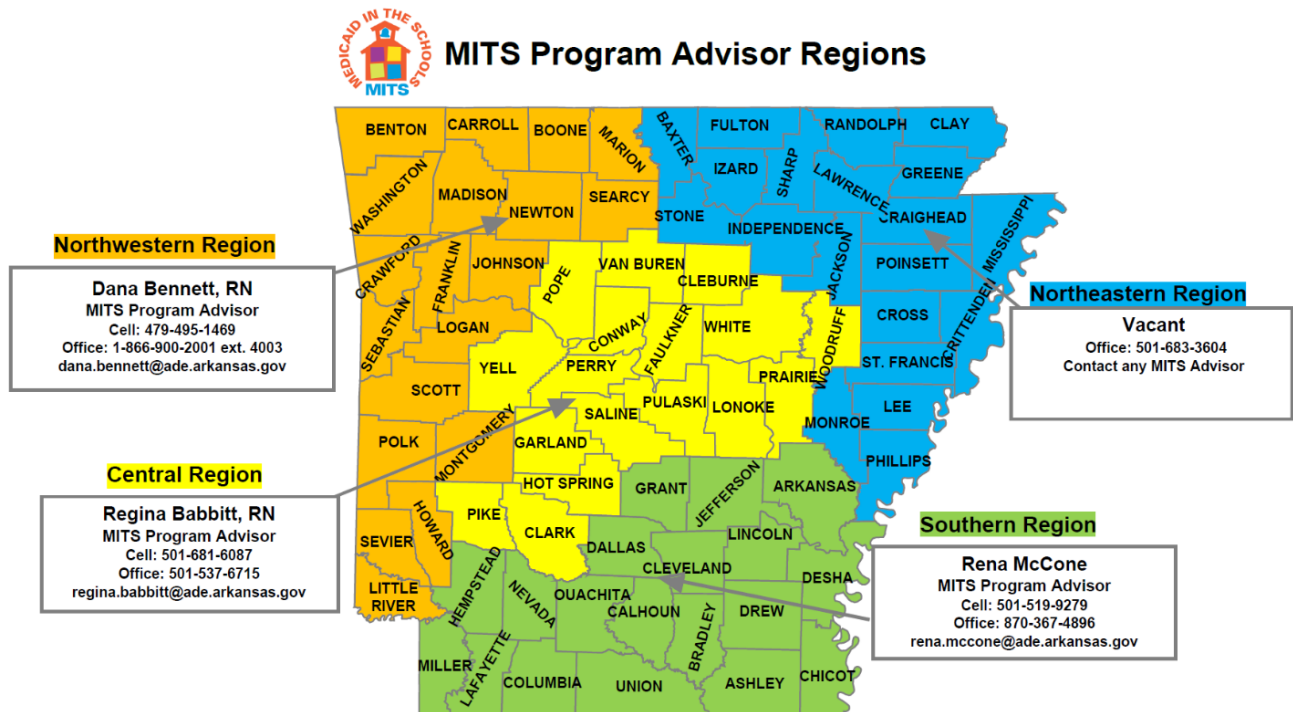
- Early Periodic Screening, Diagnosis, and Treatment (EPSDT)
- Vision and hearing screenings
- School-based mental health services; and
- Audiology services.

In 2020, MITS provided the following:

- 21 personal care trainings
- 16 general professional development trainings regarding Medicaid and/or health services
- Provided intense direct technical assistance to 30 districts and 5 educational cooperatives

School-based Medicaid Reimbursements for 2020 are as follows:

- Physical Therapy - \$4,351,221.10
- Occupational Therapy - \$8,483,729.68
- Speech Therapy - \$11,607,733.29
- Personal Care - \$1,125,113.21
- School-based Mental Health - \$123,577.64
- Vision/Hearing Screens - \$1,816,592.16
- Audiology - \$9,012.78
- ARMAC - \$30,176,278.01



For more information on Medicaid in the Schools: <https://dese.ade.arkansas.gov/Offices/learning-services/school-health-services/arkansas-medicaid-in-the-schools>

School Nurses

School nursing is a specialized practice of nursing. It protects and promotes student health, facilitates optimal development, and advances academic success. School nurses, grounded in ethical and evidence-based practice, are the leaders who bridge health care and education, provide care coordination, advocate for quality student-centered care, and collaborate to design systems that allow individuals and communities to develop their full potential (Adopted by the National Association of School Nurses (NASN), February 2017). The School Health Services staff and partners provide guidance and professional development for school nurses.

In 2020-2021, school nurses provided Stop the Bleed (STB) training to 490 school personnel and students. STB increases capacity at schools for rapid response to hemorrhage bleeding.



School Nurse Survey Results

The Department of Elementary and Secondary Education (DESE) collects student healthcare data on an annual basis, to assist in the development of health recommendations and guidelines based on identified needs. It also stands as a report to the school board of directors on the district's health concerns and necessities. The 2020 annual School Nurse Survey included reports from 808 school nurses representing public and private schools. According to the survey 34% of students have one or more of the below chronic conditions:

- 43,824 ADHD/ADD
- 35,470 Asthma
- 1,706 Diabetes (Type I and II)
- 4,082 Seizures
- 12,301 Life-Threatening Allergies

Survey Highlights:

- Pregnancy: 732
 - 181 pregnant adolescents received homebound services
 - 63 dropped out of school permanently
 - 83 diagnosed as high risk (gestational diabetes, preeclampsia, etc)
- Emergency Medications:
 - 79 students had an overdose
 - 709 students were given either Naloxone or Narcan (opioid antagonists that fight against opioid overdose)
- Students Sent for Medical Attention: 81,982
- Students Sent Home: 164,920
- Students Sent to ER: 2,356
- Students Sent to the School-Based Health Center (SBHC): 7,338

School nurses continue to assist the school in providing healthy school environments. They are vital to all schools. For additional information regarding the school nursing: <https://dese.ade.arkansas.gov/Offices/learning-services/school-health-services/%20School%20Nursing>

Community Health Nurse Specialists/Community Health Promotion Specialists

The ADH Community Health Nurse Specialists (CHNS) and Community Health Promotion Specialists (CHPS) work collaboratively with schools, community groups, and other state agencies to improve the health of Arkansas students. There are 16 CHNS and 6 CHPS housed in the 15 educational cooperatives, with one CHP being housed in the ADH Central Region, since there is no educational cooperative for the Central Arkansas counties.

CHNS support school nurses by providing technical assistance, training for health screenings, and professional development opportunities. CHPS work with schools and communities to support the implementation of physical activity and nutrition standards and policies approved by the State Boards of Health and Education.

Educational programming that promotes positive health behavior, including tobacco prevention, healthy nutrition, and physical activity is provided by the CHPS and CHNS in addition to acting as a liaison between schools, community coalitions, Hometown Health Improvement, and health care providers. Education is also provided on emergent public health issues, including injury, suicide, substance abuse, influenza prevention, chronic disease, and healthy adolescent relationships. Due to the COVID-19 pandemic, all CHPS and CHNS were re-assigned to COVID-19 duties which caused a disruption to the educational programming provided to schools. Duties included being contact tracers for their regions and serving as a pivotal partner to the school district's point-of-contact (POC), assisting schools with COVID-19 data collection and school guidance. Fortunately, because of the resiliency of the Nurse and Health Promotion Specialists, even with the disruption of programs, the CHPS and CHNS were still able to provide educational opportunities on bullying, cyberbullying, and suicide prevention within various school and community settings. With social media and other digital forums becoming prevalent during the pandemic, these presentations are vital.



For More Information

To find out more about school health and how to engage your school by contacting School Health Services at the information listed below:

Arkansas Department of Health

School Health Services
4815 W Markham, Mail Slot #63
Little Rock AR 72205
501-280-4061

Division of Elementary and Secondary Education

School Health Services
Four Capitol Mall, Mail Slot #14
Little Rock, AR 72201
501-683-3604



2021 SCHOOL HEALTH ANNUAL REPORT



DIVISION OF ELEMENTARY & SECONDARY EDUCATION