



Healthy Students, Promising Futures

State and Local Action Steps and Practices
to Improve School-Based Health

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HIGH-IMPACT OPPORTUNITY #1

Help Eligible Students and Family Members Enroll in Health Insurance.



What

Schools can help identify children and families who do not have health insurance and provide help to those who may need assistance applying for coverage. Health coverage gives children access to the care they need to stay healthy and gives families the security of knowing their children and household budgets are protected. Connecting eligible children to health coverage will help to ensure that they can more fully participate in school, and childhood activities more generally. Note: the open enrollment period for signing up for a qualified health plan via the Health Insurance Marketplace is November 1, 2015 – January 31, 2016. Individuals can apply for Medicaid and Children’s Health Insurance Program (CHIP) any time of the year.

Research Shows

A recent study found that children who gained access to Medicaid and CHIP as a result of coverage expansions in the 1980s and 1990s were more likely to complete high school and graduate from college than similar children who didn’t have access. In addition, a large body of research finds that when eligible parents get enrolled in Medicaid, their eligible children are more likely to get enrolled and receive necessary preventive care.

¹O’Brien, Rourke L. et al., (2015), “Medicaid and Intergenerational Economic Mobility,” IRP Discussion Paper, Institute for Research on Poverty.

²Cohodes, S. et al. (2014). The Effect of Child Health Insurance Access on Schooling: Evidence from Public Insurance Expansions. (No w20178). National Bureau of Economic Research.

³Ku, Leighton and Broaddus, Matthew. (2006). “Coverage of Parents Helps Children, Too,” Center on Budget and Policy Priorities.

⁴Schwartz, Karyn. (2007). “Spotlight on Uninsured Parents: How a Lack of Coverage Affects Parents and their Families,” Kaiser Commission on Medicaid and the Uninsured.

⁵Rosenbaum, S. et al. (2007). “Parental Health Insurance Coverage as Child Health Policy: Evidence from the Literature,” Department of Health Policy, George Washington University.

Consider

Local educational agencies (LEAs) can modify school registration forms and procedures to facilitate increased enrollment of eligible students and family members in Medicaid, CHIP, or subsidized and reduced cost-sharing plans in the Health Insurance Marketplace.

Example

In the Mountain View School District in El Monte, California, helping eligible students enroll in health coverage is a new part of the school registration routine. Working with the Children's Defense Fund and the American Association of School Administrators (AASA), school administrators embedded a question about health insurance status in the school registration forms that parents complete for every child. For children with no insurance, the school district requested parents' permission to link them with health care providers who could help with enrollment in Medicaid or other health coverage programs. As a result, over 1,200 uninsured children were referred. The number of students with health insurance has increased dramatically; in addition, attendance increased and has been consistently above 96 percent districtwide for the past three years. Listen here to Mountain View Superintendent, Lillian Maldonado French, describe why connecting students to health coverage is so important.

LINKS/RESOURCES

- » Visit www.insurekidsnow.gov to learn about the Connecting Kids to Coverage Campaign and to find outreach materials about Medicaid and CHIP eligibility and enrollment.
- » To request help customizing Connecting Kids to Coverage National Campaign materials with your school's logo, phone number, etc., in English and Spanish, visit <http://insurekidsnow.gov/downloads/materialscustomizationguide-english.pdf>.
- » For strategies and outreach ideas to connect young athletes and their families to Medicaid and CHIP enrollment information, visit <http://insurekidsnow.gov/downloads/gcgg-strategy-guide.pdf.pdf>.
- » To learn how communities around the country are connecting eligible children to Medicaid and CHIP through schools or other community settings, check out the Outreach Video Library at <http://insurekidsnow.gov/professionals/outreach-video-library.html>.
- » To help children and families enroll in health coverage through the Health Insurance Marketplace, including Medicaid and CHIP, visit Healthcare.gov.
- » To read about eligibility and out-of-pocket costs for health coverage through the Health Insurance Marketplace, including Medicaid and CHIP, visit: <https://www.healthcare.gov/quick-guide>.
- » To determine how your school can inform students and families about the new health insurance options provided in the Health Insurance Marketplace, visit: <https://marketplace.cms.gov/outreach-and-education/ten-ways-to-promote-new-insurance-opportunities-schools.pdf>.
- » To get general outreach and educational materials on each of the components of the Health Insurance Marketplace, visit <https://marketplace.cms.gov/outreach-and-education/tools-and-toolkits.html>.
- » For information on issues that impact uninsured Americans, and for tools to help uninsured Americans enroll during the open enrollment period, visit <https://www.enrollamerica.org/research-maps/toolkits>.

HIGH-IMPACT OPPORTUNITY #2

Provide and Expand Reimbursable Health Services in Schools.



What

Schools and LEAs may be eligible, subject to an approved state Medicaid plan, for reimbursement for Medicaid services delivered in schools to children enrolled in Medicaid. Recent guidance from the Centers for Medicare and Medicaid Services (CMS) explains changes in the federal “free care” policy, which addresses Medicaid payment for services available without charge to the community at large (“free care”). Schools and LEAs can refer to this guidance to understand the requirements that must be met in order for Medicaid reimbursement to be available.

Research Shows

Research shows that services provided by school-based health centers can significantly improve key educational outcomes among students.

Consider

State Medicaid agencies, State educational agencies (SEAs), and LEAs can work together to explore opportunities to secure reimbursement for health services delivered to students enrolled in Medicaid. They can map out a plan for making sure that schools with large numbers of eligible students are equipped to participate.

Example

Hanover County Public Schools in Virginia is able to claim Medicaid reimbursement for services delivered to children enrolled in Medicaid. The funds received by the state go back to the school district and are used for special education and health services programs. The funding supports several nursing positions as well as contracted nursing services for students who

require one-on-one care. It also supports the purchase of large equipment for occupational therapy, physical therapy and vision and hearing services, as well as school clinic supplies such as medicine cabinets, thermometers, nebulizers, suction machines, wheelchairs, cots, and other supplies.

LINKS/RESOURCES

- » To learn about the preventive, dental, mental health, and developmental/specialty services available through Medicaid's Early and Periodic Screening, Diagnostic, and Treatment (EPSDT) for children, visit <http://www.medicaid.gov/Medicaid-CHIP-Program-Information/By-Topics/Benefits/Early-and-Periodic-Screening-Diagnostic-and-Treatment.html>.
- » To get resources and information related to preventive services for individuals enrolled in Medicaid or CHIP, visit <http://www.medicaid.gov/Medicaid-CHIP-Program-Information/By-Topics/Benefits/Prevention.html>.
- » To learn about the Medicaid Free Care Policy and what it means for delivering health services to students at school, visit <http://www.medicaid.gov/federal-policy-guidance/downloads/smd-medicaid-payment-for-services-provided-without-charge-free-care.pdf>.

HIGH-IMPACT OPPORTUNITY #3

Provide or Expand Services That Support At-Risk Students, Including Through Medicaid-funded Case Management.



What

Schools and health organizations should work together to provide wraparound services (services that address the full spectrum of health, education, safety, and welfare needs) to students, in order to remove barriers to learning that may be created by health conditions, exposure to violence or trauma, or instability or stress in the community or at home.

Research Shows

Wraparound services have been shown to benefit children, including those who are low-income, chronically absent, homeless, or otherwise at risk of falling behind in school. Childhood trauma or maltreatment, such as neglect and abuse, can negatively affect brain development. Coordinated services that protect young children from the effects of trauma are likely to promote brain development and learning ability.

Consider

LEAs and schools can, in accordance with an approved state Medicaid plan and applicable federal privacy laws, use Medicaid funding to support district and school-based case managers, who can work to connect Medicaid-enrolled students in schools to necessary health care and related support services (e.g., housing, transportation). (Please refer to page XX for additional information on key federal laws protecting student data and privacy.)

⁷Suter, J.C. and E.J. Bruns. (2009). Effectiveness of the Wraparound Process for Children with Emotional and Behavioral Disorders: A Meta-Analysis. *Clinical Child and Family Psychology Review*, 12(4), 336-351.

⁸Shonkoff, J. P. (2012). The Lifelong Effects of Early Childhood Adversity and Toxic Stress. *Pediatrics*, 129: e232–e246. <http://pediatrics.aappublications.org/content/pediatrics/early/2011/12/21/peds.2011-2663.full.pdf>.

LEAs and schools should explore, in compliance with applicable privacy laws, data sharing agreements with health organizations to address the academic and physical, mental, and behavioral needs of students at risk of falling behind and/or dropping out of school.

Example

At Park Elementary, in the Hayward Promise Neighborhood in Hayward, California, intervention specialists and case managers work together to support health and wellness, parent education, academics, social services, and mental health services as part of a cradle-to-career continuum. These coordinators manage referrals for students, which enable Park staff to better support students' and families' needs. For example, one such referral resulted in a public health nurse conducting biweekly home visits to a family to help them complete an action plan and enroll in Medi-Cal health benefits.

LINKS/RESOURCES

- » To learn about the important role school counselors play in ensuring student success and the Federal Programs designed to support school counselors, visit <http://www2.ed.gov/policy/elsec/guid/secletter/140630.html>.
- » To access a one-page HHS services locator document that lists available services such as assistance programs and social services for children, adolescents and young adults, visit: http://www.hhs.gov/ash/oah/resources-and-publications/assets/health_service_locator.pdf.
- » To understand the legal requirements for supporting homeless students with disabilities under the Individuals with Disabilities Education Act, visit <http://center.serve.org/nche/downloads/briefs/idea.pdf> and <http://www2.ed.gov/about/offices/list/osers/osep/policy.html>.
- » For guidance on how to support homeless children and youth using Elementary and Secondary Education Act Title I, Part A Funds, visit <http://center.serve.org/nche/downloads/briefs/titlei.pdf>.
- » For information on the impact of teen pregnancy on student outcomes and for strategies to support pregnant and parent students, visit <http://www2.ed.gov/about/offices/list/ocr/docs/pregnancy.pdf>.
- » To learn what wellness informed care is and how to integrate it into your community/workplace, visit http://www.integration.samhsa.gov/health-wellness/wellness-strategies#wellness_informed_care.
- » For information on the prevention and early identification of mental health and substance use conditions and for further resources regarding these concerns, visit <http://www.medicaid.gov/federal-policy-guidance/downloads/CIB-03-27-2013.pdf>.
- » To ensure effective delivery of wraparound services, check out resources from the National Wraparound Initiative at <http://nwi.pdx.edu>.
- » For background information on and resources related to wraparound services and their role in Positive Behavioral Support, visit <http://www.pbis.org/school/tertiary-level/wraparound>.
- » To read about the National Education Association's information regarding wraparound services and its recommendations for actors at the local, state and federal level, visit <https://www.nea.org/assets/docs/Wraparound-Services-05142013.pdf>.

HIGH-IMPACT OPPORTUNITY #4

Promote Healthy School Practices Through Nutrition, Physical Activity, and Health Education.



What School learning environments should be designed to promote and reinforce health and well-being, including opportunities for, and access to, daily physical activity, high-quality, nutritious school food, and rigorous and effective nutrition and health education.

Research Shows Increased physical activity and access to nutritious food throughout the school day can improve student learning and academic and health outcomes. In addition, research has shown comprehensive health education decreases tobacco use, alcohol use, and other delinquent behaviors.

Consider Schools can assess their policies and practices by completing the Centers for Disease Control and Prevention’s School Health Index and implementing strategies found in the School Health Guidelines to Promote Healthy Eating and Physical Activity.

Schools can sign up to be a school champion through the Let’s Move! Active Schools initiative, and use the Let’s Move! Active Schools assessment tool to identify and address physical activity and physical education programming needs.

⁹See for example: (1) Centers for Disease Control and Prevention. (2010). The Association Between School-Based Physical Activity, Including Physical Education and Academic Performance. Atlanta, GA: U.S. Department of Health and Human Services; (2) Basch, C. E. (2011). Physical Activity and the Achievement Gap Among Urban Minority Youth. *Journal of School Health*, 81: 626–634; and (3) Basch, C. E. (2011). Breakfast and the Achievement Gap Among Urban Minority Youth. *Journal of School Health*, 81: 635–640.

¹⁰Dent, C.W. et al. (1995). Two-Year Behavior Outcomes of Project Toward No Tobacco Use. *Journal of Consulting and Clinical Psychology*, 63(4), 676-677.

LEAs can also support healthy environments for all children by developing strong Local School Wellness Policies that are deeply integrated into individual school improvement plans.

LEAs and schools can support effective health education for all students by utilizing the Centers for Disease Control and Prevention's (CDC) Health Education Curriculum Analysis Tool (HECAT) to determine how to improve the alignment of existing health education courses with the National Health Education Standards and CDC's Characteristics of an Effective Health Education Curriculum.

Example

The Jennings School District in Missouri used the Wellness School Assessment Tool (WellSAT) to assess and revise its wellness policy to include goals for increasing physical education and physical activity, as well as increasing access to fruits and vegetables. The district hired a full-time health and wellness coordinator who helped develop and implement a robust physical education curriculum. As a result, teachers reported that students were less disruptive and less likely to engage in inappropriate behavior because they were busy participating in inclusive, active, and fun activities. The wellness coordinator also chaired a cross-agency, multi-partner committee that helped create a community garden at an elementary school to provide hands-on education in healthy food practices. Learn more about the WellSAT at <http://www.wellsat.org>.

LINKS/RESOURCES

- » To develop, implement, and evaluate comprehensive school physical activity programs and create an overall more active school environment, visit http://www.cdc.gov/healthyschools/physicalactivity/pdf/13_242620-A_CSPAP_SchoolPhysActivityPrograms_Final_508_12192013.pdf.
- » To evaluate your school's current physical activity levels and to gain access to programs, initiatives, and resources to get students moving, visit http://static1.squarespace.com/static/53b1a843e4b0dcbabf4b4b85/t/554151cbe4b0a7a9583911b4/1430344139181/15-LMASFramework_4.29.15.pdf.
- » To review the CDC's School Health Guidelines and access best practices around these guidelines, visit <http://www.cdc.gov/healthyschools/npao/strategies.htm>.
- » To incorporate a healthy and active culture into classrooms and schools, visit <http://www.cdc.gov/healthyschools/npao/pdf/tips-for-teachers.pdf>.
- » To analyze your school's/district's health education curriculum, access the CDC's HECAT at http://www.cdc.gov/healthyyouth/hecat/pdf/hecat_brochure.pdf.
- » To access practical action steps and resources from Adolescent Health: Think. Act. Grow (TAG), a national call to action to promote adolescent health, visit <http://www.hhs.gov/ash/oah/tag>.
- » To develop a coordinated school health plan to address the safety and health needs of students

- with asthma, visit <http://www.cdc.gov/HealthyYouth/asthma/pdf/strategies.pdf>.
- » To view a list of evidence-based Teen Pregnancy Prevention Programs, visit http://www.hhs.gov/ash/oah/oah-initiatives/tpp_program/db/tpp-searchable.html.
 - » For training materials and resources from the Teen Pregnancy Prevention Resources Center for organizations working to reduce teen pregnancy, visit http://www.hhs.gov/ash/oah/oah-initiatives/teen_pregnancy.
 - » For training materials and resources from the Pregnancy Assistance Fund (PAF) Resource and Training Center for organizations that serve expectant and parenting teens, visit <http://www.hhs.gov/ash/oah/oah-initiatives/paf>.
 - » For practical HIV/AIDS prevention strategies from the National HIV/AIDS Resource Center for community-based providers and youth-serving professionals, visit <http://www.hhs.gov/ash/oah/oah-initiatives/national-resource-center.html>.
 - » To complete an online school health self-assessment and learn about the CDC's guidelines to improve health and safety in school, visit <http://www.cdc.gov/healthyschools/shi/index.htm>.
 - » For resources on creating a healthier school environment and engaging in the local school wellness policy process, visit <http://healthymeals.nal.usda.gov/school-wellness-resources-2>.
 - » For resources that assist schools in complying with the Healthy, Hunger-Free Kids Act and other nutrition and school meal resources, visit <http://www.fns.usda.gov/healthierschoolday/tools-schools>.
 - » To see how you can influence the school food environment to promote healthy foods, visit <http://www.fns.usda.gov/healthierschoolday/school-day-just-got-healthier-toolkit>.
 - » For access to free nutrition education and promotion materials available from USDA's Team Nutrition initiative, visit www.teamnutrition.usda.gov.
 - » To learn how you can provide meals to students during the summer with the Summer Food Service Program, visit <http://www.fns.usda.gov/sfsp/summer-meals-toolkit>.
 - » To promote youth physical activity, get strategies and resources at http://www.cdc.gov/healthyschools/physicalactivity/toolkit/userguide_pa.pdf.
 - » To improve the indoor air quality and create a healthy learning environment, visit <http://www2.epa.gov/iaq-schools>.
 - » To learn about the role health service integration in schools plays in addressing the needs of the whole child, visit <http://www.ascd.org/programs/learning-and-health/wsc-model.aspx>.
 - » To learn more about the relationship between health and academic achievement, visit http://www.cdc.gov/healthyschools/health_and_academics/pdf/health-academic-achievement.pdf.
 - » To access your state's laws and policies on a variety of school health topics, visit http://www.nasbe.org/healthy_schools/hs.
 - » For information on the role of breakfast in overall student health and for strategies on improving student access to school breakfast, visit http://www.aasa.org/uploadedFiles/Childrens_Programs/School_Breakfast/School%20Breakfast_Winter2013.pdf.
 - » For tips to make school environments safer for students with asthma, including ideas on how to improve air quality within and outside of the school, visit http://www.rampasthma.org/uploads/asthma_guide_sbhc.pdf.
 - » For information on using a school site for a vaccination clinic, visit <http://www.astho.org/Programs/Preparedness/Public-Health-Emergency-Law/Public-Health-and-Schools-Toolkit/Vaccination-Clinics-in-Schools/>.
 - » For resources on incorporating health and nutrition into the classroom setting, visit <http://www.nemours.org/service/health/growuphealthy/521almostnone.html>.

HIGH-IMPACT OPPORTUNITY #5

Build Local Partnerships and Participate in Hospital Community Health Needs Assessments.



What

Hospital community benefits include initiatives and activities undertaken by nonprofit hospitals to improve health in the communities they serve. Under the Affordable Care Act, hospitals claiming 501(c)(3) charitable, tax-exempt status must conduct a community health needs assessment (CHNA) at least every three years (beginning in 2012/2013) and adopt strategies to address prioritized needs. Hospital CHNAs can help launch productive partnerships between hospitals and schools because nonprofit hospitals are required to consult with community members and public health experts as part of the CHNA process. Schools and school districts can also partner with many other kinds of community-based organizations to enrich the health services available to students.

Research Shows

A growing body of evidence and experience suggests that multi-organizational partnerships are promising mechanisms for improving public health.

Consider

School districts can meet with community benefit staff in local tax-exempt hospitals to learn how the needs assessment is conducted and how they can become part of the process. Hospital and school administrators – as well as parents, teachers, and other members of the community – can work together with hospitals to identify investments that can improve school health and educational outcomes in the targeted service area of the hospital.

¹¹Mays, G.P., and F.D. Scutchfield. (2010). Improving Public Health System Performance through Multiorganizational Partnerships. *Prev Chronic Dis* 7(6): A116.
http://www.cdc.gov/pcd/issues/2010/nov/10_0088.htm.

Examples

The Community Health Network (CHN) in Indiana has established school health services in over 100 schools in Indianapolis. Students can access a range of mental health and health services, from immunizations and treatment for minor illnesses to primary care at some locations. Brigham and Women's Hospital (BWH) in Boston provides programs to help build science and literacy skills through Brigham Book Buddies, Pen Pal Program, and an interactive Science Club for elementary school students. As part of its mission to diversify the future health care workforce, BWH's Student Success Jobs Program employs and mentors Boston Public School high school students to introduce them to careers in health care, science, and medicine. These programs are made possible through the involvement of hundreds of committed employee volunteers.

The Missing School Matters campaign is another example of the ability of local partnerships to achieve change. At the request of 12 partnering Central Texas school district superintendents, the E3 (Education Equals Economics) Alliance in Austin, TX, launched a campaign in 2011 to improve student attendance, in order to increase student achievement and to return more revenue to schools, which are funded based on daily attendance. To provide data on which students are most frequently absent—as well as why, when and where—E3 Alliance designed and executed a ground-breaking Absence Reasons Study in 2013 funded by St. David's Foundation and Central Health. The study found that the single largest reported cause of Central Texas student absences (48 percent) is acute illness and that addressing causes of preventable illness would have the greatest potential impact on absenteeism. In 2014, with the support of partners such as St. David's Foundation, Healthy Schools LLC, and Schoolhouse Pediatrics, E3 Alliance brought flu vaccines at no cost to more than 6,500 students in 56 elementary schools—the largest in-school flu immunization campaign in the history of the state of Texas. In 2015, the campaign will be quadrupled, to 26,000 students in 136 schools. Since E3 Alliance launched Missing School Matters, over \$20 million has been returned to Central Texas schools because total student absences have dropped while overall enrollment rapidly increased for the first time in two decades.

LINKS/RESOURCES

- » To learn about community benefits and the role they play in improving community health, visit <https://www.chausa.org/communitybenefit/community-benefit> and <http://www.hilltopinstitute.org/publications/WhatAreHCBsTwoPager-February2013.pdf>.
- » To develop a community health needs assessment, determine a community's health needs and to learn about the role of Hospital Community Benefit in addressing those needs, visit <http://www.cdc.gov/stltpublichealth/Program/resources/community.html>.
- » To find the nearest school-based health center go to: <http://findahealthcenter.hrsa.gov>.
- » For information on school-based health centers and the relationship between student health and outcomes, visit the School-Based Health Alliance at <http://www.sbh4all.org>.
- » To learn more about how school administrators can promote student and school health, visit <http://www.aasa.org/content.aspx?id=206>.

- » To learn about how the Children’s Defense Fund can support efforts in your area to address the health challenges faced by children, visit <http://www.childrensdefense.org/policy/health>.
- » To access best practices in children’s health care from the American Academy of Pediatrics, visit www.aap.org.
- » To learn how the National Association of School Nurses promotes student health on a variety of topics including asthma, lice, violence, obesity, and environmental health visit www.nasn.org.
- » To view best practices for counselors, administrators, and parents from the American School Counselor Association, visit <http://schoolcounselor.org>.
- » To get resources for schools and school social workers focused on addressing the social, emotional, and academic needs of students from the School Social Work Association of America, visit <http://www.sswaa.org/?page=758P>.
- » To build stronger community partnerships using strategies compiled by the Coalition for Community Schools, visit <http://www.communityschools.org/multimedia/current.aspx#Article>.
- » For state/territory-specific public health information compiled by the Association of State and Territorial Health Officials, visit <http://www.astho.org/Public-Policy/State-Health-Policy>.
- » To learn about ways to create healthier school environments, visit the Healthy Schools Campaign website at <http://www.healthyschoolscampaign.org/>.
- » To develop skills to identify and address the health needs of your community, visit <http://www.cdc.gov/CHInav/>.
- » To find strategies to prevent youth violence and substance use and increase student access to mental health services, visit the Safe Schools/Healthy Students website at <http://www.samhsa.gov/safe-schools-healthy-students>.
- » To review collaborative strategies used by schools and community partners to connect students to mental health services, visit http://www.attendanceworks.org/wordpress/wp-content/uploads/2014/10/Connecting-Students-to-Mental-Health-Services_FINAL.pdf.
- » For strategies to integrate school-based strategies that promote students’ social-emotional, cognitive, and health needs into local and state policy, visit <http://actionguide.healthinschools.org/>.
- » To learn more about absenteeism, how schools and communities can partner together to address the issue, and access a toolkit full of helpful resources, visit <http://www2.ed.gov/about/inits/ed/chronicabsenteeism/index.html>. To understand why chronic absenteeism is an issue and how to engage all community stakeholders to address it, visit http://awareness.attendanceworks.org/wp-content/uploads/Count-Us-In-toolkit-2015_Final.pdf.
- » To connect at-risk populations to appropriate health care services in an efficient manner, read about the Pathways Community HUB at <http://chap-ohio.net/press/wp-content/uploads/2010/09/CommunityHUBManual3.pdf>.
- » To learn how Kaiser Permanente has partnered with national organizations to develop healthy “Thriving Schools,” visit <http://thrivingschools.kaiserpermanente.org>.
- » To develop strategies to build and strengthen family-school partnerships, school and district leaders can visit <http://www2.ed.gov/documents/family-community/partners-education.pdf>.
- » To read about the impact community and school partnerships can have on supporting teaching and learning, visit http://www.aft.org/sites/default/files/ae_summer2009.pdf.
- » For an example of a public school system that has formed information-sharing partnerships between school nurses and community health care providers, visit <http://www.nemours.org/health-professionals/nemourslink/student-health-collaboration.html>.

Key Federal Laws Protecting Student Data and Privacy

The Family Educational Rights and Privacy Act (FERPA) (20 U.S.C. § 1232g; 34 CFR Part 99) is a federal law that affords parents the right to have some control over the disclosure of personally identifiable information (PII) from the education records. The term “education records” means those records that are: (1) directly related to a student; and (2) maintained by an educational agency or institution or by a party acting for the agency or institution. See § 99.3 “Education records.” Please note that, at the K-12 level, “education records” includes health records. FERPA generally requires that parents or eligible students provide prior written consent before schools can share PII from a student’s education records, unless an exception to FERPA’s general consent requirement applies.

IDEA also contains confidentiality provisions that protect the privacy of student information (20 U.S.C. 1417(c) and 34 C.F.R. §§300.610-300.626). Consistent with FERPA, these provisions generally require the prior written consent of a parent for disclosure of PII from education records, unless a specific exception applies. IDEA specifically requires public agencies to obtain written consent from the parent for release of personally identifiable information to a public benefits or insurance program, e.g., Medicaid. For more information about this parental consent requirement if public agencies seek to access a child’s or parent’s public benefits or insurance (e.g., Medicaid) to provide or pay for services required under Part B of IDEA for children with disabilities and parental rights and protections, see 34 C.F.R. §300.154(d)(2)(iv) and (v). See also Suggested Model for Written Notification of Parental Rights regarding Use of Public Benefits or Insurance, available at: <https://www2.ed.gov/policy/speced/guid/idea/memosdcltrs/acccmodelwrittennotification-6-11-13.pdf>.

For more information about FERPA, please visit <http://familypolicy.ed.gov/>. General questions about FERPA may be submitted to the Department’s Family Policy Compliance Office using the Contact Us tab on that website or directly at <http://familypolicy.ed.gov/content/questionscomments>.

For information on the connection between FERPA and the Health Insurance Portability and Accountability Act (HIPAA), maintaining student health records, and the role these laws play in ensuring student safety and security, visit <http://www.hhs.gov/ocr/privacy/hipaa/understanding/coveredentities/hipaaferpajointguide.pdf>. For additional information about the HIPAA Rules, visit <http://www.hhs.gov/ocr/privacy>.