# FY 2024 NC School Health Center Annual Report

The NC School Health Center (SHC) Program Annual Report displays data collected from state-funded sponsor agencies that operate school health centers each Fiscal Year (FY). Through a competitive Request for Application (RFA) process, sponsored agencies (public or private nonprofit institutions) from underserved and high-risk communities are awarded funding support for SHCs that provide health care services (preventive, medical, nutrition, behavioral health) for older children and adolescents, ages 10 to 19 years old. Services are provided in collaboration with individual schools, school districts, health care providers, medical homes, local health departments, and other community-based agencies. This multi-year report represents aggregate/cumulative data for/per fiscal years 2020 to 2024 from each state-funded school health center. The report is posted on the School Health Center Consultation and Support webpage of the NCDHHS Division of Child and Family Well-Being website. It provides the following information:

- The names and number of counties and types of schools (middle, high school, middle and high school) that have school health centers in NC.
- The unduplicated number of students that are served at the SHCs.
- The percent of students with a medical and dental home that are served at the SHCs.
- The number of and types of referrals made by SHC staff for students to receive services outside of the SHCs.
- The number and type of visits by students at the SHCs (medical, preventive, behavioral health, nutrition).
- The percent of students served by their type of insurance.



- The number of students served at the SHCs with public insurance or no insurance.
- The number of visits by students to SHCs addressing five national standardized performance measures.
- The SHC's that offer telehealth services.
- The top ten reasons that students were seen at the SHCs.
- The names of the sponsor agencies and the RFA number and fiscal years they received state funding support for their SHCs.
- A map of the North Carolina State-Funded School Health Centers (FY2024 - FY2025).

The program funds multiple models of school health centers: traditional school-based (located on a school campus), school-linked (located off school campus, working collaboratively with multiple schools and other agencies), mobile unit (mobile van parked on or near school campus), and telehealth (staff physically on site and also at remote locations).

## NUMBER OF STATE-FUNDED SCHOOL HEALTH CENTERS (SHC) FY 24 BY COUNTY (30 TOTAL SHCs):



NOTE: There are 30 state-funded SHCs.

#### HEALTH SERVICES PROVIDED BY SCHOOL HEALTH CENTERS:



### Preventive Health Services

Immunizations, risk assessments, physical exams, nursing services



#### **Nutrition Services**

Assessments, referral, counseling & treatment



#### **Medical Services**

Chronic disease and acute disease diagnosis & treatment



### Behavioral Health Services

Referral, counseling & treatment

### STATE-FUNDED SPONSOR AGENCIES WITH SHCS

	Total Agencies	Total SHCs		
FY 2020	14	31		
FY 2021	14	31		
FY 2022	14	31		
FY 2023	14	31		
FY 2024	13	30		

NOTE: Funded agencies consist of Hospitals, Nonprofit Organizations, Local Health Departments, and Federally Qualified Health Centers. See Appendix A for a full list of funded agencies per reporting period.

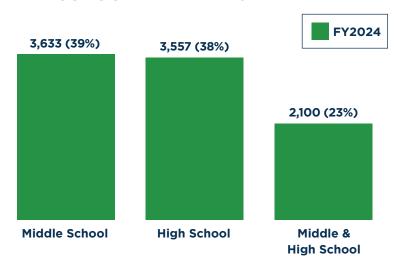




#### UNDUPLICATED STUDENTS SERVED • FY2020 - FY2024



### NUMBER OF UNDUPLICATED STUDENTS AGES 10-19 SERVED BY SCHOOL TYPE • FY2024



NOTE\*: Some schools serve both middle and high school students. These schools are categorized as Middle & High School in the two graphs above. In FY2022 & FY2023, there were 12 middle schools, 14 high schools and 4 schools serving both middle and high school students.

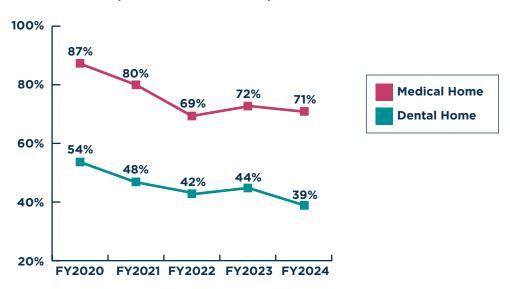
"Schools and community health care organizations form partnerships and their staffs collaborate to open and sustain SBHCs. The care provided in SBHCs complements but does not replace or duplicate existing school health services. It results in improved health outcomes and health literacy for students, school staff, and the community, and contributes to positive education outcomes, including reduced absenteeism, decreased disciplinary actions and suspensions, and improved graduation rates." 1



#### **Medical/Dental Home**

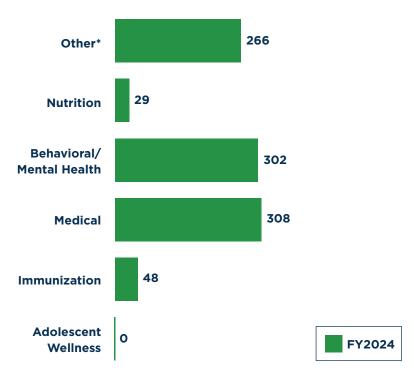
Students enrolled in SHCs are encouraged and assisted in establishing medical and/ or dental homes. This translates into improved coordinated and comprehensive care, as well as better outcomes in terms of addressing medical, preventive, behavioral, nutrition, and oral health issues.

## PERCENT OF SHC STUDENTS WITH A MEDICAL & DENTAL HOME BY FISCAL YEAR (FY2020 - FY2024)

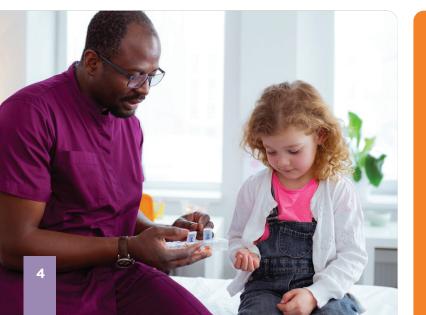


#### NUMBER OF REFERRALS IN FY2024

NOTE: Type of referrals made by SHC's.



NOTE: Other referrals included Dental, Vision, Dermatology, Orthopedics, ER, etc...



"School-Based Health Centers provide comprehensive, integrated health care to children and adolescents in a setting that is trusted and immediately accessible: their school. This model of care eliminates barriers to accessing primary health care, mental health care, oral health care, and nutrition counseling. Evidence shows that SBHCs increase adolescent access to health care, reduce health and educational disparities, increase graduation rates, boost academic success, and reduce health care costs." <sup>2</sup>

#### NUMBER OF VISITS BY FISCAL YEAR AND TYPE

	FY2020		FY2021		FY2022		FY2023		FY2024	
SERVICE	N	%	N	%	N	%	N	%	N	%
Medical	19,032	42%	19,032	42%	7,761	29%	17,288	40%	23,269	46%
Preventative	9,899	22%	4,928	19%	9,047	21%	8,220	16%	9,673	18%
<b>Behavioral Health</b>	15,078	33%	13,175	50%	14,820	35%	17,006	34%	17,291	33%
Nutrition	1,822	4%	604	2%	1,778	4%	1,968	4%	1,996	4%
Total	45,831		26,468		42,933		50,463		53,013	

The table above shows the number and percentage of medical, preventative, behavioral health and nutritional services for each fiscal year. Across five fiscal years, the average number of Medical services was 18,281; the average number of Preventative services was 8,353; the average number of Behavioral Health services was 15,474; the average number of Nutrition services was 1,634.

The table to the right, as well as the pie charts below, outline the number and percentage of students ages 10-19 that were served at SHCs from FY 2020 to FY 2024 by insurance type.

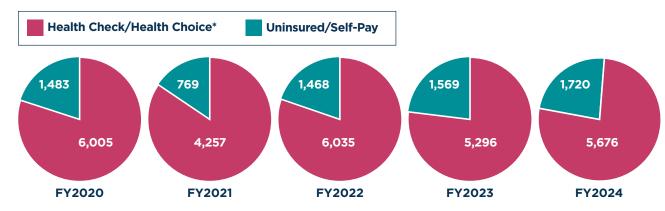
#### NUMBER OF STUDENTS SERVED BY TYPE OF INSURANCE

	FY2020	FY2021	FY2022	FY2023	FY2024
Health Check/Medicaid	5,099	3,627	4,060	4,360	4,130
Medicaid/Other	376	26	1,373	851	1,527
Healthchoice/CHIP	530	366	602	85	19
Private Insurance	2,194	1,715	2,844	1,598	2,338
Medicare	2	25	23	3	2
TriCare	62	46	58	36	53
Uninsured/Self Pay	1,483	769	1,468	1,569	1,720
Totals	9,746	6,574	10,428	8,502	9,789

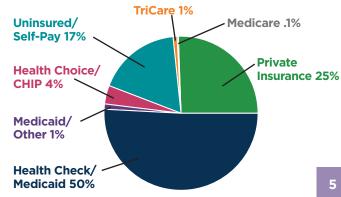
NOTE\*: FY2024 total represents duplicated students

### NUMBER OF STUDENTS SERVED BY PUBLIC INSURANCE OR NO INSURANCE BY FISCAL YEAR

NOTE\*: Health Check/Health Choice includes 3 categories: Health Check (Medicaid for Children), Medicaid/Other and Health Choice/CHIP



PERCENTAGE OF UNDUPLICATED STUDENTS AGES 10-19 SERVED IN SHC'S FROM FY2020 - FY2024 BY INSURANCE TYPE



"Youth living in impoverished communities have higher rates of asthma, substance use, anxiety, depression, and obesity and are at elevated risk of not having regular health maintenance visits."



**Students enrolled in School Health Centers:** 

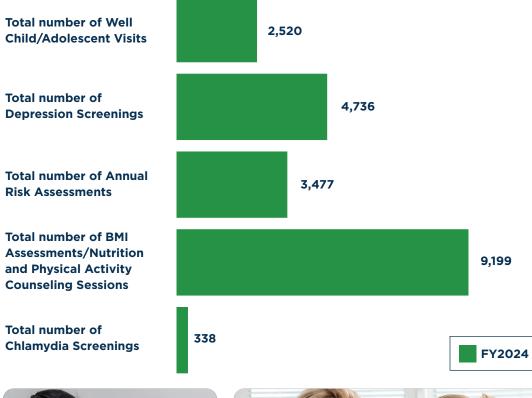
- Are less likely to report an emergency room visit
- Are more likely to have visited a doctor or dentist in the last year
- Are more likely to receive required and recommended immunizations
- Are more likely to increase "seat time" (miss fewer classes)

#### **School Health Centers:**

- Increase access to high-quality health care
- Strengthen prevention and population health
- Serve highest need students
- Integrate students into health care systems
- Improve academic achievement
- Increase time spent in the classroom <sup>4</sup>

The graph below displays visits reported for <u>Five National Standardized Performance Measures</u>. These include: chlamydia screenings; Body Mass Index (BMI) screenings, and nutrition/physical activity counseling; annual risk assessments, depression screenings and follow-up, and annual well-child/adolescent visits. These visits are reported separately from the number of visits displayed on page 5 for the chart, Number of Visits by Fiscal Year & Type (FY2020-FY2024). The total number of visits addressing the Five National Standardized Performance Measures for FY2024 was 20,270.

## NATIONAL STANDARDIZED PERFORMANCE MEASURES FOR SBHCS FY2024



#### APPENDIX A. AGENCIES FUNDED BY RFA

State Funded Agency Name		RFA A-346		RFA A-376			
	FY2018-19	FY2019-20	FY2020-21	FY2021-22	FY2022-23	FY2023-24	
Appalachian District Health Department	×	×	×	×	×	Х	
Blue Ridge Community Health	×	×	×	×	×	×	
Cherokee County Health Department	X	X	X	X	X	×	
Duke University Health Systems, Inc	×	×	×	×	×	×	
First Health of the Carolinas Inc.	×	×	×	×	×	×	
Greene County Healthcare, Inc.	×	×	×	×	×		
UNC Rockingham Health Care Inc.	×	×	×	×	×	×	
Pender Alliance for Total Health				×	×	×	
Pender County Health Department	×	×	×				
Toe River Health District	×	×	×	×			
Wake Forest University Health Sciences	X	X	×	×	X	X	
Wayne Initiative for School Health Inc. (WISH)	Х	X	X	X	Х	X	
Wilkes County Health Department	X	X	X	X	X	X	
Wilson County Health Department	X	X	X	X	X	×	
Wilmington Health Access for Teens, (WHAT) of Coastal Horizons	X	Х	X	X	X	X	
Yancey County Health Department					×	Х	
Total Agencies	14	14	14	14	14	13	

### Top 10 Reasons Students Were Seen in FY2024

- 1. Mental Health/Behavioral Health
- 2. Medication
- 3. Health Exam (Routine, Special, Sports)
- 4. Nutrition, Physical Activity
- 5. Headache
- 6. Throat Pain
- 7 Immunizations
- 8. Health Counseling
- 9. Dysmenorrhea
- 10. Respiratory Infection

## NCDHHS Division of Child & Family Well-Being Contacts:

#### **Michael Taylor**

NC School Health Center Manager Division of Child and Family Well-Being, Whole Child Health Section, NCDHHS Michael.Taylor@dhhs.nc.gov

#### Jennifer Griffin

Data Manager

Division of Child and Family Well-Being, Whole Child Health Section, NCDHHS Jennifer.A.Griffin@dhhs.nc.gov

#### **Rachel Johnson**

School Adolescent and Child Health Unit Manager

Division of Child and Family Well-Being, Whole Child Health Section, NCDHHS Rachel.Johnson@dhhs.nc.gov

#### References:

1. National School-Based Health Alliance

2. NC School Based Health Alliance

### North Carolina State-Funded School Health Centers (FY 2024-2025)

