School-Based Health Centers, Telehealth and the Intersecting Role of the School Nurse

School-Based Health Centers

According to the NC School-Based Health Alliance (2025), a school-based health center (SBHC) provides "comprehensive, integrated health care to children and adolescents in a setting that is trusted and immediately accessible to their school." Having access to a care provider on-site helps to eliminate barriers to care such as a lack of financial resources or transportation, scheduling conflicts for parents, or other parental work-related issues. The primary purpose and function of a SBHC is to increase health equity and reduce barriers experienced by students and their families (Johnson, K. & Yonkaitis, C., 2025). North Carolina's SBHCs offer services such as acute care; management of chronic illnesses; mental health counseling; and preventive services, such as health education, physical and dental exams, and nutrition services, based upon assessed needs. SBHCs may also provide comprehensive health assessments and screening; counseling and referral for identified health concerns; diagnosis, treatment and follow up for injuries or acute/chronic illness; nutrition counseling; oral health care; and mental health services (NCDHHS, n.d.). Services are considered episodic in nature and provided in a fee for service structure.

The role of the school nurse includes overseeing the health and well-being of all students within a school population. In school settings with an SBHC, the school nurse works in collaboration with the center providers to facilitate access to care. The care offered to students by SHBCs does replace nor should it duplicate the health services provided by the school nurse. The collaboration between the school nurse and SBHC may include identifying barriers, referrals and coordination of care during the school day. It is important to note that parental/guardian permission is required before students can participate in services offered by SHBCs (Johnson & Yonkaitis, 2025). Per the NASN Position Statement regarding SBHC's, "School nurses and school-based health centers working together share a critical mission: protecting and advancing the health and well-being of our nation's school-age children." (NASN, 2021)

A school-based clinic can be a referral resource for students who have a need that differs from the scope of services provided by the school nurse. SBHCs increase access to health care, strengthen prevention and population health, serve highest need students, integrate students into health care systems, improve academic achievement and increase time spent in the classroom (NCDHHS, 2020). There should be strong collaboration between the school nurse and SBHC staff around the common goal to support better health outcomes and access to education. According to NASN and the School-Based Health Alliance in 2021, this parentship contributes to "positive education outcomes, including reduced absenteeism, decreased disciplinary actions and suspensions, and improved graduation rates" as referenced in chapter two of the School Nursing A Comprehensive Text (Johnson & Yonkaitis, 2025).

While there are similarities between care provided by a school nurse and that provided by a SBHC, there are also significant differences regarding student health records. The records maintained by

school nurses are part of a student education record and are subject to the requirements of the Family Educational Rights and Privacy Act (FERPA). However, records maintained by a SBHC are considered health care records and thus are protected by Health Insurance Portability and Accountability Act (HIPAA). Both laws require parental consent related to the sharing of information in most instances. For more information about FERPA and HIPAA, see Section C, Chapter 6 on documentation.

The following table outlines variations in services provided by a district school health program and a school-based health center.

Comparison of District School Health Program and School Health Centers

District School Health Program	School Health Center
Purpose is to reduce or eliminate student health related barriers to learning	Purpose is to provide acute and episodic medical care to students to increase access to health care opportunities
Total school population focused; school nurse manages overall school health program for assigned schools	Individual student issue or need focused
Health promotion focused through student counseling on issues and fostering increased healthy habits, physical activity, healthy foods, etc.	Medical diagnosis and treatment focused as in primary care
Collaboration among school personnel on health issues in schools	Little involvement with larger school staff
Plans of care developed to meet individual student needs and direct that care through delegation, training and oversight	Extension of the medical community to provide medical diagnoses, orders for treatment and medication orders that are included in plans of care
School nursing assures core services in school: preventing communicable disease transmission, development of emergency plans, supervision of specialized health service provision, securing care for screening referrals, oversight for compliance with mandated services (health assessments, immunizations, bloodborne pathogen exposure plans, etc.)	Core service provision related to those items required or allowed under contracts, insurance or billing practices Clinic nurses often operate as triage for midlevel providers or under specific standing orders
Information sharing is allowed within the school system as needed for health issues that impact the student's education and safety Health records created in school are education records	Information sharing is allowed only with specific student/parent consent Health records created in school health centers are confidential health records

Activities and records are privacy protected under FERPA. Sharing with a health center requires parental consent	Activities and records are covered and protected under HIPAA. Sharing with school staff requires parental consent

School-Based Telehealth

Definition
"Telehealth is the use of electronic information and telecommunications technologies to support long-distance clinical health care, patient and professional health-related education, health administration, and public health" (HRSA, 2022). Since its inception, the definition of telehealth has broadened to encompass a variety of technologies and tactics to deliver virtual medical, health, and education services. Telehealth is not so much a specific service, but a collection of means to enhance care delivery (CCHP, 2020). The North Carolina Board of Nursing has defined telehealth/telenursing as "the practice of healthcare within a professionally designated scope of practice using electronic communication, information technology, or other means between a licensee in one location and a client in another location with or without an intervening healthcare provider" (NCBON, 2018).

Models of care
The most common approach in schools has been based on the model of the School-Based Health Center (SBHC) with a focus on increasing the ability of the school health program to meet the health needs of the students. As such, a telehealth program may be viewed as a virtual SBHC. Telehealth is being implemented in a variety of ways in North Carolina. Some examples of school-based telehealth programs include the incorporation of telehealth equipment by school-based health centers to complete visits when the provider may be at a different site, or when the health care provider is employed by another agency; implementation in partnership with an area hospital and/or hospital owned medical practice(s); as a partnership between the school district and local health department; or in conjunction with a nonprofit agency. To date, the focus for most of these telehealth programs is to provide assessment and care for acute health issues. Some sites provide additional services such as management of chronic conditions; mental health counseling, preventive services such as health education, physical and dental exams, and nutrition services. These sites usually have an integrated SBHC.

Benefits
The NASN position statement, *Telehealth: Equitable Student Access to Health Services* (2022), addresses how the potential benefits of a telehealth program – to include reduction of health disparities – related to a lack of access to primary services, specialty services and school nurse services.

Challenges
The following are listed as challenges to the implementation of telehealth:

- program sustainability
- cost to implement and maintain equipment
- privacy
- liability

- provider reimbursement (NASN, 2017)

According to Sanchez, et al. (2019), school-based telehealth has the potential to increase the impact of the school nurse on both health and academic outcomes of students. School nurses are well positioned to facilitate the adoption of telehealth to improve access to care for students.

The Affordable Care Act places emphasis on telehealth which offers school nurses a platform to advocate for such services in the school setting. School nurses who are willing to integrate telehealth into their practice have the opportunity to better meet the health and educational needs of their students in creative and innovative ways. Telehealth can be a tool to improve the practice and reach of school nurses. NASN supports the use of telehealth as a tool to assist the school nurse in the provision of school health services. Telehealth is not a substitute for the school nurse; but allows the nurse to provide a more complete, coordinated approach to student health services in school (NASN, 2017).

All school nurses are responsible for providing both population-based and individual student health services to their assigned K-12 schools. Care must be taken to balance time spent by the school nurse addressing the health needs of the entire school population with time spent assisting a subset of students, with parental consent, to access primary care via either SBHC or telehealth visit. Nurses in state-funded positions such as the School Nurse Funding Initiative (SNFI) must be mindful of the Scope of Work and work plan outcome requirements. Part of the purpose of this funding is to improve the nurse-to-student ratio and improve access to school nursing services. If a concern arises regarding the time dedicated by an SNFI nurse on SBHC/telehealth, conducting a time study may be in order to assess workforce needs. There are separate but complementary roles for SBHCs, telehealth or virtual SBHCs, and school nurses.

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Additional Resources

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