The West Virginia Children’s Health Collaborative Survey Results: Health Care in West Virginia’s Schools

“Although we have a school based health clinic that comes in twice a week and a school nurse that works with two schools, the need is always more than they can address. We also are in dire need of mental health services in the school. We have a daily need for someone to work with our students.”
- Principal, Lewis County

INTRODUCTION
In February 2018, West Virginians for Affordable Health Care (WVAHC) initiated work on the Children’s Health Collaborative Project by launching a first-of-its-kind statewide survey project on children’s health care and services in our schools. Over the next six months, WVAHC invited over 4000 West Virginians from a variety of professional disciplines, backgrounds and perspectives to take a brief survey on the connections between health care and schools in their communities.

The surveys, with 20 versions that were tailored to solicit specific information from key stakeholders, asked respondents about health care needs for children in their schools and communities, current policies on collection of insurance enrollment information and referral to health care services, the range of services provided on site, and how schools refer and potentially assist children and families in identifying services and navigating through systems to access them.

We also asked respondents to tell us not only what gaps exist in care and services, but also to share their thoughts about the coordination of services to better care for students, the role they believe schools can and should play in this coordination, and to identify priorities in addressing the health care needs of kids in their communities.

Now, the results are in. WVAHC received 789 auditable responses, representing all 55 of WV’s counties. Here’s what they said.
ABOUT THE PROJECT

All children have the potential to learn, achieve and succeed as students, and their academic success is strongly linked to their physical and emotional well-being. This interconnectedness between health care and academic achievement puts the school setting in a unique position to address health disparities, as well as provide a critical link between students and community supports. These connections are essential to reducing access barriers to health care and promoting appropriate utilization of services — particularly for students who are medically underserved, lower income and in high-risk situations. The availability of health care and health services in school give all kids access to affordable, comprehensive and quality health care. It assures equal access to needed health services for all children, regardless of their family’s socioeconomic status.

Currently, there are 270,613 students in 680 public schools in West Virginia (WV), and 150 of these schools, or just over 20%, have a school-based health center (SBHC). SBHCs are not formally part of the school system; their sponsoring agencies have a contractual relationship with their respective county school systems to provide health care services.

While some provide comprehensive services such as mental health care, oral health care, and provide services during the summer months, others simply provide primary care a few days a week. The hours and scope of services are negotiated by the county school system and sponsoring agency. These contractual relationships are not standardized across the state.

All schools heavily rely on health service staff—particularly school nurses, counselors, and psychologists. Staff of this kind provide services as identified in a student’s Individualized Education Plan (IEP), or they help coordinate and refer students to needed health care services within their communities—if the services are available. Across the state, the staff-to-student ratios for health service staff are significantly higher than their respective national associations recommend.

When children have health insurance, they are more likely than uninsured children to be healthy and to get medical care. They are also more likely to have improved outcomes related to education and economic security that benefit society as a whole. *Child Trends, May 2017*
Some county school systems have created their own models for linking students to health services, particularly to mental and oral health care. These policies are unique and not standardized or coordinated at the state level.

The intent of this brief is to provide a few key findings from WVAHC’s six-month long survey project, as well as a “Call to Action” for advocates of school health to participate in next steps for the project. We’ll be sharing more survey results in the upcoming months. If you’d like to learn more, we encourage you to join our email list or follow the Collaborative on social media.

**KEY FINDINGS**

- **Respondents agree that there are children in WV communities who are in need of health care services but are not receiving them.** Eighty-eight percent of respondents answered affirmatively to the question: “Do you believe there are children in your community in need of health care services but are not receiving them?”

- **Respondents believe that schools are an appropriate place to access health care.** Nearly 87 percent of respondents agree that the school setting is an appropriate place to provide health services.
“We have a high poverty rate at our school so most of the children have a medical card issued by DHHR. The problem is that due to the high poverty level, the students lack transportation to and from medical appointments. We also have a large number of students being raised by grandparents or another family member, or in foster care.”

- Title I School Teacher, Kanawha County

- If and how children’s health insurance enrollment information is gathered varies greatly between counties and schools.

Not all schools collect health insurance information, and not all school staff are aware of the process or policy. Responses varied by school staff, as denoted on survey result charts completed by school principals, school nurses, and school secretaries. For example, while the majority of parents responded that they provide health insurance enrollment information to schools, the majority of principals reported that they do not.

School Nurses: Do You Collect Health Insurance Information?

- YES: 47
- NO: 24
- NO RESPONSE: 8

Principals: Do You Collect Health Insurance Information?

- YES: 67
- NO: 24
Barriers to Care

• When respondents were asked to list the most pressing challenges that children face to accessing health care in their schools and communities, respondents listed three prevailing barriers: lack of parent engagement, lack of transportation, and a lack of health care providers. A question across numerous survey tools was, “What do you believe are the most challenging barriers to children receiving health care in your community?”

• Mental health care services were identified as the most-needed health care services by respondents. Accessing these services was identified as the biggest challenge by respondents to kids receiving health care services. Together, they show that respondents believe that students need mental health care services but have little to no access to them.

Superintendent Survey

Principal Survey
West Virginia struggles to keep kids safe, happy and healthy. While we remain a national leader in reducing the rate of uninsured children, we still see our children’s overall health and well-being ranked close to the bottom in national reports. As a rural state in the heart of Appalachia, we face special challenges. Nearly one in four children live in poverty, and the majority live in medically underserved areas. Even with an insurance card in hand, it is difficult to link these children to a medical home and coordinated, continuous care. Poor children in rural communities are at greater risk for a myriad of physical, cognitive, social, emotional, and behavioral problems that too often are neglected, and over time, lead to poor health and academic outcomes. Historically, WV’s population was among the healthiest in the nation. But over the last 40-50 years, the trends have shifted. According to Trust for America’s Health data, WV ranks nationally:

- #1 in Obesity
- #1 in Type 2 diabetes
- #1 in Cancer
- #1 in Drug-Induced Deaths

Compounding these health disparities, the drug epidemic has had a devastating impact on child welfare in West Virginia. According to the West Virginia Department of Health and Human Services, WV has seen:

- Our state become #1 in child removals nationally
- 34% increase in open Child Protective Services cases over 3 years
- 22% increase in accepted abuse/neglect referrals over 3 years
- 83% of open child abuse/neglect cases involving drugs
ABOUT THE SURVEYS
The information in this brief was collected and compiled from 20 independent surveys that the Collaborative developed, asking a set of core key questions to learn more from stakeholders about the role of schools in providing health services to children. In total, the Collaborative disseminated approximately 4000 surveys and received 789 auditable responses, representing all 55 of WV’s counties.

The tailored surveys were disseminated to the following 20 key stakeholder audiences:

Parents/Guardians
Nurses
Pediatricians
Physical Education Staff
Principals
School Counselors
School Nurses
School Psychologists
School Secretaries
School-Based Health Center Staff
Social Workers in the Clinical Setting
Social Workers in Community Settings
Social Workers in the School Setting
Superintendents
Title I Staff
WV Division of Early Care and Education
WV Families Leading Change
WV Family Resource Network
WV Mental Health Matters Coalition
Year of the Child Campaign

A CALL TO ACTION
The intent of the West Virginia Children’s Health Collaborative Project is to respond to the needs of communities across the state that want to build bridges between health care, schools, and their communities to ensure that students have access to comprehensive, affordable health care. The survey project helped build a foundation to create a network of local children’s health experts and community champions who are dedicated to informing policymakers and taking action to improve children’s health and well-being at the community and state levels. Our next step is to empower new voices to speak out and bring positive change, supported by a foundation of knowledge and an understanding of what really works.

It is clear that parents and professionals agree: West Virginia’s kids need better access to comprehensive health care. The school setting has been identified as an appropriate place in which to provide health care, if supported by staff, partnering health care organizations, and the community. Model policies are needed so schools can create a uniform process for collecting student health insurance enrollment information, as well as a referral process for students who need health care.

How Can You Help?
Join the Collaborative’s Email List
Help Recruit New Members
Sign Up For a Phone Interview
Help Coordinate a Focus Group
Contact Us With Your Ideas to Advance Comprehensive Health Care for Kids
The Children’s Health Collaborative Project, a grant-funded project of West Virginians for Affordable Health Care, fosters innovative partnerships between children’s health policy experts, health providers, educators, parents, and community leaders who share the common goal to see every child enrolled in health insurance coverage, have a medical home or linked to a primary care provider, and receiving coordinated and continuous preventive, comprehensive health care and support services.

The mission West Virginians for Affordable Health Care is to bring a consumer voice to public policy so that every West Virginian has quality, affordable health care and the opportunity to lead an informed, healthy and productive life.

We achieve our mission by:

• Working with partners to identify and advocate for positive public policy change.
• Developing and coordinating innovative public education programs.
• Protecting and preserving programs that serve our mission.
• Assisting individual consumers in navigating the health care system.

To learn more or to join the Collaborative, visit www.wvahc.org or email info@wvahc.org.