

Using Telehealth to Expand the Patient Reach
of School-Based Health Centers

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Who's in the room?



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Learning Objectives

- Akron Children's program structure
- School Based Health Center model
- Impact of telehealth on School Based Health Center
- Outcomes and lessons learned
- Sustainability strategies

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Akron Children's

PROGRAM OVERVIEW



Akron Children's (Ohio)

**Independent, nonprofit pediatric health care system
that has been caring for children since 1890.**

- 2 hospital campuses
- 7 regional health centers
- >50 primary and specialty care locations throughout Ohio
- Only pediatric hospital with School Nursing Services

**We are the only health care system in our region fully
dedicated to pediatric care**



School Health Funding

- Business contracts to provide school nursing services
- Potential exclusivity agreement
- Loss profile based on organizational needs/goals
- Separate memorandum of understanding (MOU) for School based health services

Nursing Contract Goal: break even or provide

School Health Services

School Nursing

School Based Health (SBH)



School Health Services

School Nursing

Integrated school partner providing the daily nursing needs of students including injuries, illnesses, medication management, chronic disease management, screenings, student health education and immunization compliance.

44 School Districts in 11 Counties
service over 97,000 students
92% back to class rate

Dedicated Immunization Team
Traveling nurse led team that administers recommended childhood immunizations and yearly seasonal flu vaccines in school during the school day.



School Nursing



- Staffing structure
- Algorithms
- Accountability
- Training processes
- Data Collection



School Health Services



School Based Health (SBH)

In school Nurse Practitioner led team providing comprehensive primary care services including: well care, immunizations, acute illness treatment, and chronic disease management. A whole child framework.

22 School Districts in 12 counties

9 Medical Providers (2 FT, 4 PT and 3 PRN)

85 Telehealth Devices

Daily in person care at designated schools

Telehealth services to all other SBHC schools

- Point of Care Labs • Wap Around Services
- Care Coordination • School Based Asthma Treatment Program (SBAT) • Youth Advisory Council

Collaboration with Akron Children's Pediatrics, Specialists and other local Physicians.





Growth of School-Based Health (SBH) Services

- 2005** School Health program launched in **5 school districts with school nursing**
- 2019** SBH implemented in **2 districts** thanks to with **donor funding**
- 2022** Awarded **Ohio Department of Health** grant to expand SBH services into **13 school districts**
- 2025** SBH expanded to **22 school districts**. Marketing initiated beyond the school nursing network to reach new partners



What Makes Akron Children's Unique

- Our school nursing contracts
- Our Different Models of Care
- Our use of telehealth

Improved access to care – Reducing barriers



Traveling Provider



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School Linked Care



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Telehealth Only



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SBH Staffing Plan

- Provider + Support person
 - Provider cross trained in every aspect of visit
- In school Supports
- In office Supports
 - Care coordinators
 - Registration experts



School Based Health Center Challenges



Financial stewardship



Staffing shortages



Geographic spread



Maintaining provider continuity



Sustainability



Who uses telehealth in their School Based Health Centers currently?





What are your wins with Telehealth?



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What are your challenges to telehealth?



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If not using telehealth....



- What are your concerns?
- What are your barriers?



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Why telehealth



Access
Efficiency
Reach
Continuity of Care
Staffing
Specialties



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Impact of Telehealth Services

- Low cost with minimal staffing
- Quality vs operational efficiency
- Supporting underserved communities
- Reduction in lost seat time



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Telehealth options

- Mychart telehealth
- E-visits
- Tele-specialist site to site
- Telehealth with Tytocare



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tytocare



Adoption of Tytocare Technology

- Equipment needs
- Digital exam capabilities
- Benefits of using peripheral devices to aid in assessment over traditional camera only tele
- Real time providers



Operational Implementation



School Clinic Staff Training



- Multiple scopes of practice
- Orientation pathway
- Standard Work Instructions
- Back to school training
- Year-round telehealth touch points



Patient

- Student identified
- Consent process
- Staff/ student get ready for visit
- Visit takes place
- Documentation and phone calls



Symptom List

- Allergy symptoms (Red/itchy swollen eyes, clear runny nose, dry cough, itchy skin)
- Cough/ congestion
- Dental Pain
- Diarrhea
- Ear Pain
- Eye Concern (Red, itchy, irritated eye with current or prior yellow drainage/crusting on eyelashes or object in eye)
- Fever (>100.4F)
- Headache (pattern of three or more in 1 month)
- Rash
- Sore throat
- Stuffy nose
- Vomiting
- Pain with urination
- Need for Asthma Treatment Plan or Asthma Inhaler



Symptoms to Avoid

- Acute abdominal pain
- Pregnancy concern
- Neurological symptoms
- Head injuries
- Orthopedic injuries
- Abuse concerns
- Respiratory distress



Consent

- Paper/ pre-registration consents
- Electronic consents
- Mychart consents
- Telephone consents



Communication and Coordination

- School education staff
- School nursing staff
- SBHC provider and support person
- In office support team (nurses, PSRs)



Marketing and Engagement

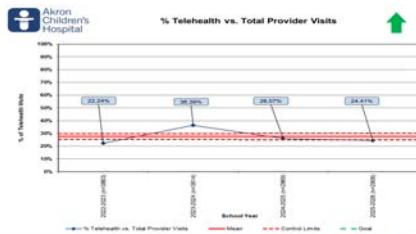
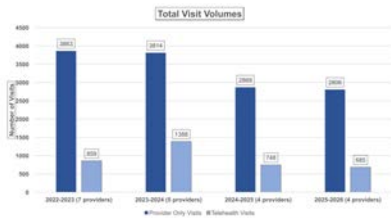
- School
- Community
- Local primary care provider offices
- Hospital System



Program Data

- 92% back to class rate
- Average telehealth appointment length 21 minutes
- 2hr 40 minutes of seat time saved per visit
- 92% provider satisfaction rating
- 96.9% recommend telehealth services with SBHC





Impacting Events

✓ Major department structure rebuild in Summer 2024

📁 Grant funding diminished

👥 Staffing cuts and shortages

⊕ Hospitals support of program solidified

🏠 Strategic growth geographically, competitively and politically



Success stories

- Improved seat time
- Improved patient outcomes (Asthma)
- Integration of behavioral health (improved access)
- Improved school satisfaction with school health services



Telehealth Challenges

- Using the school Wi-Fi network
- Consent
- EMR access
- Video client issues
- Clinic staff comfort level gap to be tele-presenters



Operational

- School Network discussion prior to go live
- Marketing matters
- Describe the why
- Empower all staff
- Be adaptable
- Using non hired staff as tele presenter



Telehealth Wins

- Akron Children's employs the school nurses
- Telehealth training for back to school
- Improved access
- Increased student seat time
- Bringing in additional subspecialties
- Amazing institutional telehealth support



Performance Improvement

- High no show rates
- Routine follow ups
- Medication checks
- Communicable diseases
- Staff minimums
- Staff incentives
- Rural health



What's made our program a success?



Telehealth

SUSTAINABILITY



Equipment costs

- Ipad/ tablet
- Tytocare device equipment
- Subscription costs
- Vitals equipment



Funding Model

- Diversified funding is best
 - Revenue about 1/3rd of operational costs
 - High volume clinics can break even with lean staffing model
 - Grant funding
 - Aids in program growth
 - Hospital community benefit
 - Donor funding
- GOAL: Break Even



Billing/ Coding

- Department build in EMR for student locations
- School as place of service – legislation change
- Telehealth phrase in provider notes
- Use of AI generated note writing
- Billing insurance as usual



A Model for

EXPANSION**School Expansion**

- For SBHC there is no additional cost to the school
- Private space
- Great secure Wi-Fi connection
- Marketing
- Decreased use of outside agencies for healthcare

**How to Grow**

- Forming partnerships
- Setting clear expectations
- Knowing the community well
- Identifying providers
- Allowing ramp up time
- Explore incentives



Subspecialty use of Telehealth

- PCP
- Behavioral health
- Pulmonology
- Endocrinology



Key Take Aways

- Telehealth is a sustainable way to expand SBHC reach
- Flexible care models can improve access
- School partnerships are essential
- We can be creative with workforce limitations
- Sustainability and equity can co exist



HEALTHY STUDENTS LEARN BETTER.



Questions?



 Akron Children's

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Contact me

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