

BROCKTON PUBLIC SCHOOLS HEALTH SERVICES



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Essential School Health Services with Consultation Grant

Developing School Health Services In Massachusetts

The Massachusetts Department of Public Health designed the Essential School Health Service (ESHS) program model to promote development of high quality, community-based school health service programs in municipalities throughout the Commonwealth. School-based health centers (SBHC) provide accessible primary care, coordinated with local providers, to children and adolescents in certain school settings

Over the past twenty years, school health service programs in the Commonwealth's 351 cities and towns have faced many challenges: (a) changing family structure and support systems, (b) social morbidities, (c) an increased number of children with complex and diverse health care needs attending school, and (d) students who lack comprehensive health insurance coverage and/or primary care providers. As the health care delivery system undergoes change, the impact on child and adolescent health is often felt in the school setting, where children spend their "working days."

Over the past decade, recognition of the link between health and education has increased, with greater understanding that a child must be healthy to learn and a child must learn to be healthy. There is also a greater recognition that school health service programs are in a unique position to improve health status and well-being, provide care essential to a student's school attendance, and identify and refer students with health risks or potentially compromising health conditions. These activities ultimately support the child's ability to learn.

In 1993, pursuant to receiving funds from the Health Protection Fund, the Department incorporated into one program model (ESHS) the "best practices" identified in various school health service programs throughout the Commonwealth. Thirty-six school districts received four-year contracts to develop their school-nurse managed programs in four core areas: (a) strengthening the administrative infrastructure, (b) promoting health education activities, including tobacco prevention and cessation programs on-site in the school district, (c) linking the school health service program with health care providers and public health insurance programs and (d) developing management information systems.

In 1997, at the conclusion of the first Enhanced Program cycle, the request for applicants was revised to include two parts: the original Essential School Health Service prototype and a new model, the Essential School Health Service with Consultation (ESHSC). Eight of the original 36 Essential School Health Service Programs were selected to provide consultation to 6 or 8 school districts each, while 18 communities received the basic Enhanced program funding.

In FY 2000 and 2001, with additional funds from the tobacco settlement, the Department again issued a request for applicants for both Enhanced program models and SBHC programs. A new ESHS program requirement was that each public school applicant provide certain health services to the nonpublic and charter schools within the community, thus beginning the process of providing equal access to quality school health services for all children.

Currently 109 municipalities have received a total of \$15.5 million annually to implement the Enhanced program models. Included in this number are 11 Enhanced with Consultation school districts, which provide consultation to approximately 77 other school districts and their school health service programs. The 109 school districts also provide beginning health services to more than 320 nonpublic and charter schools within their communities. For the school year 2001-2002, the ESHS/ESHSC programs provided health services for 566,801 students in the public schools and beginning services for 63,103 students in the nonpublic schools. The recipient schools provided services to a total of 156,243 students. In addition, the numbers of school-based health centers have increased to 72 sites in the 2001/2002 school year.

Both the school-nurse managed school health service programs and the school-based health centers have become vital partners in the health care delivery system serving children.