

# 2020-21 NATIONAL SURVEY OF SCHOOL-BASED HEALTH CENTERS: The Impact of the COVID-19 Pandemic

School-based health centers provide access to critical health services for the nation's most vulnerable youth. In Spring 2021, the **School-Based Health Alliance**, a nonprofit corporation dedicated to supporting and advocating for high-quality healthcare in schools, launched a *National Survey of School-Based Health Centers* to gather information on their operations during the COVID-19 pandemic. Representatives from approximately one-third of school-based health centers nationally responded to the survey (n=1,122), representing school-based health centers in 33 states and the District of Columbia; most were located in the South and West regions of the U.S. While survey findings may not be generalizable to school-based health centers nationally, particularly since non-responders were likely health centers that were temporarily or permanently closed, they provide insights into how school-based health centers nationwide were impacted by and responded to the pandemic.

## KEY FINDINGS

School-based health centers continued serving students and their school communities despite challenges, innovating and adapting as necessary.

- Nearly all survey respondents (92%) were fully or partially open by Spring 2021, despite facing many challenges to service delivery. These challenges included reaching or engaging students (59%), having to close when the school facility closed (39%), and having to furlough, lay off or redeploy staff (38%).
- School-based health centers continued to serve populations that traditionally experience health care disparities. Most schools with access to the school-based health centers in the survey sample (79%) were designated as Title I, meaning they receive federal financial assistance because of the high percentage of students from low-income families. Moreover, half (51%) of survey respondents reported that they served populations other than the students attending their schools, such as students' family members, school staff, and other community members.
- Telehealth,<sup>1</sup> delivered by phone or virtually, was a critical strategy for delivering continued care. Over 80% of survey respondents delivered some services via telehealth—a significant increase compared to the 2016-17 school year when 20% of school-based health centers nationwide reported offering services via telehealth.<sup>2</sup>
- School-based health centers provided direct services to combat the COVID-19 pandemic. Nearly half (45%) of the survey respondents offered COVID-19 testing or follow-up on testing results and one quarter (25%) administered COVID-19 vaccines. These numbers have likely increased as vaccine approval was expanded to children five years and older in Fall 2021.
- One-quarter (27%) of the respondents reported that their staff delivered professional development or consulting to school staff to support student mental health and 22% expanded their mental health referral networks.
- As in prior years,<sup>3</sup> half of survey respondents (50%) reported that their lead sponsor agencies, which generally oversee clinical, staffing, and fiscal operations, were Health Centers.<sup>4</sup> Other common sponsor types included school systems (16%), hospitals/medical centers (15%), and mental health agencies (11%). Common sources of

funding reported by survey respondents were third-party billing (55%); state (47%), federal (33%) and local (22%) government funding; and in-kind (29%) and school system (22%) support. Future examination into how these sponsor and funding models impacted school-based health centers' ability to stay open and adapt services is critical.

## WHAT'S NEXT

As we advocate for national policy and legislative action, we will use the findings from the *2021 National Survey* to tell the story of how the COVID-19 pandemic impacted school-based health centers across the country and how they responded to meet the needs of their communities. The details on implementing telehealth, vaccination and testing of students and their families, and the challenges related to clinical operations and service delivery during the pandemic illustrate the true strength of our field.

The *National Survey* was designed to obtain timely information from the field and does not capture all school-based health centers nationally. **We hope that every school-based health center will participate in the 2021-22 National Census to be launched this upcoming spring.**

## HOW YOU CAN HELP

- 1 Share this report with your colleagues to launch dialogue and inform decision-making.
- 2 Connect with [research@sbh4all.org](mailto:research@sbh4all.org) to confirm your School-Based Health Centers contact information.
- 3 Complete the *2021-22 National Census of school-based health centers* in Spring 2022.

## ACKNOWLEDGEMENT

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## GET INVOLVED

**The School-Based Health Alliance** is committed to strengthening and expanding school-based health centers nationwide. Learn about how you can contribute at [www.sbh4all.org](http://www.sbh4all.org). Be sure to also follow us on Twitter (@sbh4all) and Facebook (SchoolBasedHealthAlliance) for our latest updates.

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"All services were impacted. Any child who was sick in any way either did not come to school or was sent home immediately after coming to school. Students were not allowed to walk around the school building and could not come directly to the health center for services on their own."

- SCHOOL-BASED HEALTH CENTER ADMINISTRATOR



<sup>1</sup> Health Resources & Services Administration: <https://telehealth.hhs.gov/patients/understanding-telehealth/>

<sup>2</sup> Love H, Panchal N, Schlitt J, Behr C, Soleimanpour S. The Use of Telehealth in School-Based Health Centers. *Glob Pediatr Health*. 2019;6.

<sup>3</sup> Love HE, Schlitt J, Soleimanpour S, Panchal N, Behr C. Twenty Years of School-Based Health Care Growth and Expansion. *Health Aff (Millwood)*. 2019;38(5):755-764.

<sup>4</sup> Bureau of Primary Health Care: <https://bphc.hrsa.gov/about/what-is-a-health-center/index.html>