Telehealth: Equitable Student Access to Health Services

Position Statement

NASN POSITION

It is the position of the National Association of School Nurses (NASN) that utilization of telehealth technology is a valuable tool that can assist registered professional school nurses (herein referred to as a school nurse) to enhance access to school and community health services. A substantial number of students experience health disparities related to lack of access to primary and specialty services and to school nurse services. The school nurse is on the frontlines of student health and has the expertise to provide a critical link and oversight to implement telehealth in the school setting (National Academies of Sciences, Engineering, and Medicine [NASEM], 2021).

BACKGROUND AND RATIONALE

The U.S. Health Resources and Services Administration (HRSA, 2021) defines telehealth as “the use of electronic information and telecommunication technologies to support long-distance clinical health care, patient and professional health-related education, health administration, and public health”. A variety of technologies can be used when integrating telehealth into school health practice. Principles to consider when seeking to implement school-based telehealth services include connectivity, affordability, literacy, structural competence, inclusivity, and elimination of disparities (American Telemedicine Association, 2021).

Prior to COVID-19 school nurses forecasted the growth of technology use in practice and recognized its potential to change practice (Morse et al., 2020). Lessons learned from rapid initiation of telehealth services during the COVID-19 Pandemic have proven a valuable stimulus to expedite expansion of this service model (Thomas, 2020). School nurses adapted how they connected with students by creating virtual health offices and providing interventions such as brief physical and behavioral health assessments and health education to meet student needs (Williams et al., 2021; Marrapese et al, 2021). During the pandemic, policy changes such as the removal of reimbursement barriers facilitated telehealth access for a larger portion of the general population (National Council of State Legislatures, 2021).

Utilizing sound telehealth delivery principles and complying with current FERPA, HIPAA, and other federal, state, and local regulations, public schools can be ideal locations to implement telehealth. The Society for Developmental and Behavioral Pediatrics (SDBP) position on telehealth highlights the importance of conducting telehealth services in a familiar environment, such as the school (Keder, et al., 2022). As of 2019, 99% of America’s K-12 public schools have the necessary fiber-optic connections to meet the FCC’s internet access standard (Education Superhighway, 2019).

Recent policy statements from the American Academy of Pediatrics (AAP) (Coffman et al., 2021) and SDBP (2022) recognize the value of telehealth as a tool to reduce disparities and provide equitable access for families to primary and specialty healthcare. The AAP (2021) also recognizes the value of telehealth for students with complex needs who require intense, collaborative care. Telehealth services have been shown to decrease hospitalization, emergency care and school absenteeism; diminish the financial burden on families; and reduce healthcare costs in general (Lang Kamp et al., 2015; Reynolds &
Telehealth law, institutional policy, contracts, and funding are necessary to effectively develop telehealth school nurse services as well as visits with community-based providers (Curfman et al., 2021; Graber et al. 2021). The need for additional advocacy exists to allow for simultaneous reimbursement for the school nurse site facilitator and clinician when utilizing telehealth (Watkins & Neubrander, 2020; Curfman et al., 2021; Thomas et al., 2020).

School nurses routinely coordinate student health care services between the medical home, family, and school (Gillooly, 2020). The COVID-19 pandemic reinforced this crucial role, as school nurses conducted virtual care coordination to reduce healthcare barriers for students in low-income, medically underserved, or geographically challenged local communities. This connected students and families to needed services and improved communication between home, school, and healthcare providers. (Campbell et al., 2020; Reynolds & Maughan, 2015). School nurses have the education and experience in assessment, intervention, and outcome evaluation; understand healthcare and educational systems’ process, language, and norms; and are familiar with both FERPA and HIPAA rules to protect confidentiality. Additional training in telehealth process and delivery (Rutledge et al., 2021) in combination with the nursing skill set, makes school nurses the ideal school-based professional to facilitate telehealth services.

Utilization of school nurse telehealth visits provides guidance from a trusted health professional while limiting the burden on clinicians (Watkins & Neubrander, 2020). Via telehealth school nurses can provide care coordination and health education for students with special health needs and facilitate monitoring by primary and specialty care providers to prevent fragmented care and unnecessary medical expenses (Curfman et al., 2021).

REFERENCES


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“To optimize student health, safety and learning, it is the position of the National Association of School Nurses that a professional registered school nurse is present in every school all day, every day.”

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