School health programs have traditionally included health education, health services, and healthful school living. As a concept of school medicine has appeared, there has developed a specialized area of medical practice that is concerned with the identification, observation, and management of special health problems in the school setting. Increasing emphasis has been placed on identifying high-risk groups of children with potential learning problems, making proper referrals early, and developing a closer liaison between various medical, educational, and psychosocial personnel involved with the individual child's optimal performance in school.

The child's primary physician, the school physician or medical consultant, and the school nurse make up the basic school health team. In the ideal school health program, this team works collaboratively with parents, teachers, and other school and health personnel who may include dental professionals, psychologists, speech and hearing specialists, counselors, social workers, mental health specialists, health educators, and others.

The physician practicing school medicine must know the scientific basis and technique of various school health screening tests and examinations. He must know the general provisions of laws and regulations governing school health; functions and appropriate involvement of school personnel, such as the psychologist, guidance counselors, special teachers, and social workers; identification and appropriate management of school-related emotional and learning problems; and the identification and special needs of handicapped children in school. He must know standards for the school physical environment and develop effective administrative and record-keeping practices. He must understand desirable employee health practices and programs, organize emergency plans for the school, and recommend safe athletic practices and equipment. He must understand appropriate health education curriculum content.

The role of the school physician, school nurse, and other school health personnel has changed. The concept of medicine in school where mass physical examinations and immunizations are given in the school gym is becoming obsolete. Health care of the school child remains the primary responsibility of the parents. Individual assessment, early identification, observation, and coordination in management of specific health problems related to learning, rather than primary health care, should be the emphasis of school medicine within the school setting. The school health team should focus on enabling parents to establish an ongoing 24-hour comprehensive "medical home" for their child, be it a hospital-based clinic, solo or group office, neighborhood health clinic, or wherever such care is offered. With the increasing coverage of individuals by third-party payments, every child should have a "medical home" from birth.

A successful school health program utilizes the school physician, full- or part-time, as its director. He sets the "tone" or "quality" of school medicine delivered to the school child. The school nurse should become the health coordinator and child health advocate in the school setting. In her extended role, she may help in the coordination of...
The assessment of the organic, mental, and psychosocial factors that affect the child’s learning and adjustment in school. As a member of a multidisciplinary team, she consults with the school physician and/or the child’s physician in regard to problems relating to the individual child’s health and learning. In the area of health services, she sets up the health room and supervises health aides who deliver emergency first aid, participate in health assessment, and handle minor health problems. She should also serve as a health consultant to the teachers in areas of health education. This is especially true in the elementary school years. Health counseling is another responsibility that the school nurse assumes. This may be the most important area of contact with health education and care for the junior and high school student. Jointly with the school physician and other health and education personnel, the school nurse may help formulate policies, procedures, and standards for school health services and health education programs. The ideal school health program brings together the counselors, dental professionals, health aides, parents, psychologists, school administrators, school nurse, school physician, social workers, special education specialists, speech and hearing therapists, teachers, and others as a team engaged in improving the quality of individual child health care which will enhance his potential in learning in school.

Each state, county, and local school system must reevaluate its program in school health according to its financial resources and health care delivery resources. The ever-increasing cost of education and medical care should not detract from the need to fulfill the objectives and functions of school health programs. It is important, however, to distinguish between the responsibilities and functions of primary health care providers in an office or clinic setting and those of a school health program under the direction of a school physician with a multidisciplinary team in an educational setting. The school health program, although assisting in health services as emergency medical care (first aid), focuses on health education, counseling, screening, assessment, and coordination of medical and psychosocial problems relating to learning. The school nurse is part of the “specialist” team that becomes involved in the individual child’s problems and makes proper referrals to the parents and to the child’s primary medical home.

The School Health Committee of each chapter of the American Academy of Pediatrics should actively promote periodic meetings and open communications with officials of the departments of health and education within its state, county, or local areas relating to school medicine. Parent-teacher groups should equally be involved. The Committee should explore the specific needs, financial resources, and manpower in this area on the local, county, and state level; e.g., vision and hearing screening in the early-school-age child and management of the exceptional child. Priorities can then be set in a joint approach with the departments of health and education and parent-teacher groups, and programs and planning established. In addition, collaborative projects with educators and parent-teacher groups to study school health practices, services, and instruction, with the goal of improving existing practices or developing new ones should be actively sought. As medical practice changes, school medicine will reflect these changes. The School Health Committee is thus charged with educating and orienting their fellow physicians in new trends in school medicine and alerting them to improve communications with school children, school personnel, and parents. Moreover, all physicians caring for children should recognize that they are practicing school medicine as part of their total medical practice. Today’s school health program should actively support and assist the practicing physician in the total, primary, comprehensive health care of the school child.

Committee on Pediatric Manpower
Robert D. Burnett, M.D., Chairman
Leo S. Bell, M.D.
Donald J. Frank, M.D.
Paul S. Goldstein, M.D.
J. Rhodes Haverty, M.D.
Lawrence Kahn, M.D.
Henry K. Silver, M.D.

Committee on School Health
Andrew Rinker, M.D., Chairman
Daniel A. Lagozzino, M.D.
L. L. Eldredge, M.D.
John R. Poncher, M.D.
Kenneth D. Rogers, M.D.
Norman B. Schell, M.D.
E. C. Shackleford, Jr., M.D.
Calvin C. J. Sia, M.D.
Ned Smull, M.D.

This statement has been reviewed and approved by the Council on Child Health and the Council on Pediatric Practice, American Academy of Pediatrics.
Concepts of School Health Programs: Committee on Pediatric Manpower and Committee on School Health
Pediatrics 1975;55;140

Updated Information & Services
including high resolution figures, can be found at:
http://pediatrics.aappublications.org/content/55/1/140

Permissions & Licensing
Information about reproducing this article in parts (figures, tables) or in its entirety can be found online at:
https://shop.aap.org/licensing-permissions/

Reprints
Information about ordering reprints can be found online:
http://classic.pediatrics.aappublications.org/content/reprints

Pediatrics is the official journal of the American Academy of Pediatrics. A monthly publication, it has been published continuously since . Pediatrics is owned, published, and trademarked by the American Academy of Pediatrics, 141 Northwest Point Boulevard, Elk Grove Village, Illinois, 60007. Copyright © 1975 by the American Academy of Pediatrics. All rights reserved. Print ISSN: .
Concepts of School Health Programs: Committee on Pediatric Manpower and Committee on School Health


*Pediatrics* 1975;55;140

The online version of this article, along with updated information and services, is located on the World Wide Web at:

[http://pediatrics.aappublications.org/content/55/1/140](http://pediatrics.aappublications.org/content/55/1/140)