

Policy Brief: The Value of Vermont's School-Based Health Centers and Opportunities for Growth



May 2026

Summary

School-Based Health Centers (SBHCs) are an important and growing component of Vermont's healthcare and educational systems. By delivering accessible, comprehensive healthcare directly within schools, SBHCs improve student health outcomes, reduce barriers to care, and support academic success. As Vermont continues to face challenges related to rural healthcare access, youth mental health, and educational equity, sustained state-level commitment to SBHCs is essential.

The Need: Barriers to Youth Healthcare in Vermont

Vermont's children and adolescents face unique challenges in accessing timely and appropriate healthcare:

- **Rural geography:** Long travel distances limit access to providers and cause additional transportation-related stressors for Vermont youth and their families.
- **Rising mental health needs:** Anxiety, depression, and behavioral health concerns have surged among school-aged youth
- **Economic disparities:** Even with insurance coverage, costs and logistical challenges prevent consistent care.

What Are School-Based Health Centers?

SBHCs are healthcare clinics located in or near schools offering services beyond a typical school nurse's office. SBHCs improve health and educational outcomes for students by reducing missed school and work time for caregivers. Care is delivered by licensed professionals, **often in a partnership with local healthcare organizations** and supported by school nurses and school infrastructure.



Why School-Based Health Centers Matter

1. Improved Access to Care

SBHCs eliminate barriers to care by bringing healthcare directly to students.

- Students can receive care without missing significant class time
- Parents face fewer work disruptions
- Preventive care, acute and chronic care can become more
- consistent and accessible

2. Better Health Outcomes

National research consistently shows that SBHCs:

- Increase vaccination rates
- Improve management of chronic conditions such as asthma
- Reduce emergency room visits
- Identify and address health issues earlier
- Support behavioral/mental health support and service utilization

3. Enhanced Academic Performance

Healthy students are better learners. SBHCs contribute to:

- Reduced absenteeism and tardiness
- Higher graduation rates

4. Critical Mental Health Support

Youth mental health is one of Vermont's most urgent challenges. SBHCs can:

- Provide immediate access to medication management of psychiatric conditions, provide counseling, and crisis intervention
- Reduce stigma associated with seeking mental health care
- Offer a trusted, familiar environment for students

5. Cost-Effective Investment

SBHCs generate cost savings by:

- Reducing emergency department visits
- Preventing hospitalizations
- Improving chronic disease management
- Leverage existing school infrastructure, maximizing efficiency and impact.

School-Based Health Centers in Vermont

- Approximately 21 schools have SBHCs, offering services such as primary care, dental, mental health care, or physical therapy
- Most SBHCs complement students' existing primary care
- Typically, open limited hours rather than full school days



Findings from a 2025 Vermont SBHC Study

- Over two weeks, **134 students** across 16 Vermont schools accessed care at six SBHCs
- Main reasons for visits: acute illnesses and mental health concerns.
- Services also included physical therapy, eye exams, and other preventive care.
- **80%+ of students returned to class immediately and saved an average of 3.7 hours of instructional time** because of being seen in a SBHC.



Key Impacts Demonstrated from this Study:

- SBHCs address diverse student health needs efficiently, even part-time.
- They play a critical role in supporting youth mental health.
- They promote school engagement and reduce lost instructional time.
- Link to Study: <https://site.uvm.edu/ccsc/files/2026/04/Vermont-SBHC-Data.pdf>

A 2026 Exploratory Economic Feasibility Study in a Vermont SBHC:

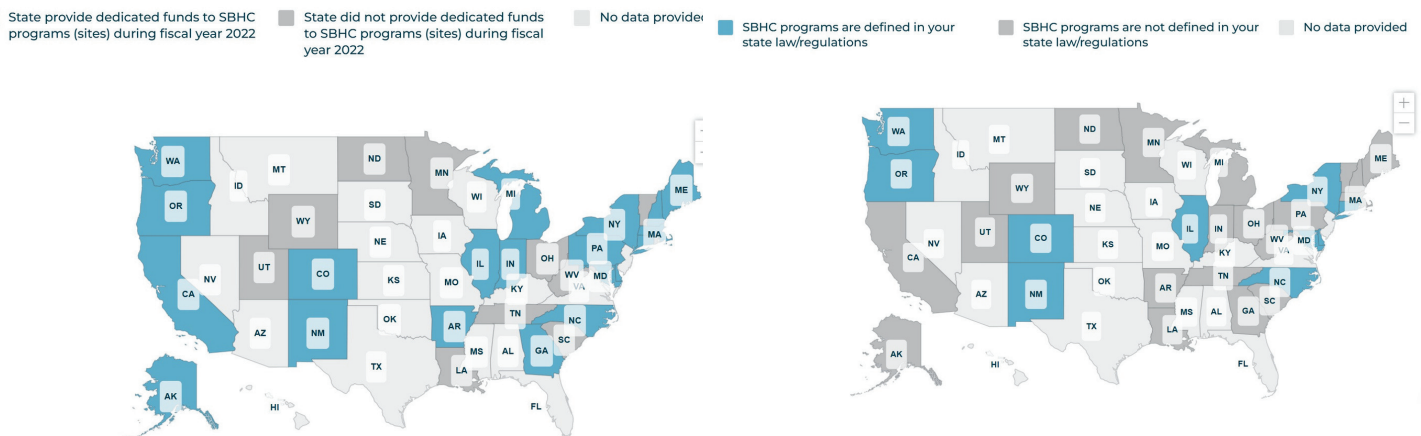
- A rural FQHC that sponsors a SBHC in their local schools recently completed a return on investment analysis. This analysis challenged the assumption that school-based health centers in rural low-density school communities are inherently unprofitable.
- Even at a modest utilization rate of one patient per hour, reimbursement revenue was sufficient to cover provider salary costs.
- While these results are promising, further analysis and replication across sites will be important to confirm and refine these findings.

Policy and Funding Challenges

Despite their proven value, Vermont SBHCs face several challenges:

- **Lower patient volumes:** SBHC providers bill insurance but sustaining operations on billing alone is difficult. They often see fewer patients due to limited staff, school schedules, care coordination needs, and complex student cases. Additionally, key services like behavioral health support and coordination with families and school staff are not fully reimbursed, limiting revenue
- **Inconsistent funding streams:** Reliance on grants and short-term funding limits sustainability
- **Limited geographic coverage:** Not all schools have access to SBHCs
- **Lack of statewide policy governance structure:** Unlike other states*, Vermont currently lacks statewide policy guidance on SBHCs. Therefore, there is no formal role for state agencies in supporting, regulating, or providing technical assistance for SBHCs. Other states have formal assistance for policy guidance, infrastructure, and funding, leveraging state and local governance structures across education and health sectors.

Without stable investment, existing centers are at risk, and expansion is constrained.



Policy Recommendations

1. Establish Sustainable Funding

- Create dedicated state funding streams for SBHC operations across
- education and health sectors
- Provide multi-year funding commitments to ensure stability

2. Expand Access

- Prioritize SBHC expansion in underserved and rural areas
- Support mobile or hybrid models for smaller schools
- Expand telehealth capabilities to supplement in-person services

3. Strengthen Mental Health Services

- Increase funding specifically for behavioral health staffing within SBHCs
- Integrate SBHCs into statewide mental health strategies Promote early
- intervention and prevention programs

4. Improve Data and Evaluation

- Standardize SBHC data collection to measure outcomes and impact leveraging existing state-wide data surveillance, including the School Health Profiles(administered by the Vermont Department of Health) and the Annual MTSS Survey (administered by the Vermont Agency of Education)
- Use data to guide policy decisions and resource allocation
- Support continuous quality improvement initiatives

School-Based Health Centers in Action



Learn more about Vermont's SBHCs in the words of clinicians, school teams and students:
https://site.uvm.edu/ccsc/?page_id=1245

Conclusion

School-Based Health Centers are a **proven, high-impact solution** to many of Vermont's most pressing challenges in youth health and education. They **improve access, enhance health and academic outcomes, and provide essential mental health support.**

At a time when health and education sectors are at inflection points in Vermont related to affordability and access, SBHCs have the potential to serve as **important, low-cost elements of the health care and educational ecosystems.** Stable funding could support the expansion of SBHCs in the state and potentially expand the operating hours and core services of existing centers, ensuring that SBHCs can more reliably meet student health needs

Kathleen Bryant, MPH, MSN, APRN, prepared this brief. She is a Nurse Practitioner with more than a decade of experience in school-based health centers (SBHCs) across Vermont and nearly 25 years in pediatric primary care. Through her work with the CCSC, she provides technical assistance to SBHCs throughout Vermont.



CCSC
CATAMOUNT COMMUNITY
SCHOOLS COLLABORATIVE

University of Vermont