

Dear MN Legislators,

In my role as a Superintendent of Richfield Public Schools I am writing to support school-based health initiative language in for SF2995, specifically Article 4, Section 49. School-based clinics have been strongholds of accessible, equitable and comprehensive preventative care for students in Minnesota for 50 years. If passed, this legislation would be the first state policy and dedicated funding to support school-based health centers in that time. As the only part of the health care safety net dedicated entirely to children, your vote for this bill at this pivotal time will be historic.

The gold-standard model for school-based clinics had its genesis here in St Paul, Minnesota, and is now codified in federal statute. Today, over 2,200 school-based clinics operate across the United States. Until 2022, our local School Based Health Alliance was a voluntarily coalition of the leaders who operate school-based clinics in Minnesota. There are now 27 in existence and at least 10 in development in our state. The Alliance represents and supports each of the health care providers and districts partnering in school-based health care. I see the impact of their efforts daily in my work managing partnerships with four school districts operating our school based health centers in Brooklyn Park, St Louis park, Richfield and Burnsville.

Richfield Public Schools opened our Health Resource Center in partnership with the Park Nicollet Foundation and have been serving children in the City of Richfield from birth through age 21 for a number of years now. Since that time we have seen improvements in attendance and student achievement. Our Richfield Health Resource Center is a vital part of our district serving children and our community and has been directly supportive of greatly improved student outcomes. Passage of this bill would support providing more opportunities to a wider range of children.

Growth in school basic health supports has been slow in Minnesota compared to most other states. This is a critical time to change that, particularly in rural areas where one school-based clinic can offset care shortages for an entire community. This language allows school-based clinics to be here for kids as they recover from the pandemic, a time when their needs are critically underserved and increasingly acute.

The ROI on school-based care is irrefutable. The care is not a replacement for the allied health professionals in schools such as school counselors and social workers, or licensed school nurses. Simply said, their co-existence creates ease for families and optimizes learning. Expanding this to more children is a key lever for reducing disparities in education and health outcomes for children in Minnesota.

Thank you,

Steve Unowsky, Superintendent