

## 2014-2015 New Haven Program Report Card: Clemente School Based Health Center (K-8)

*Quality of Life Result:* All Connecticut children will grow up in a stable environment, safe, healthy and ready to succeed.

*Contribution to the Result:* School Based Health Centers provide healthcare access for school aged students, so that they are healthy and ready to learn.

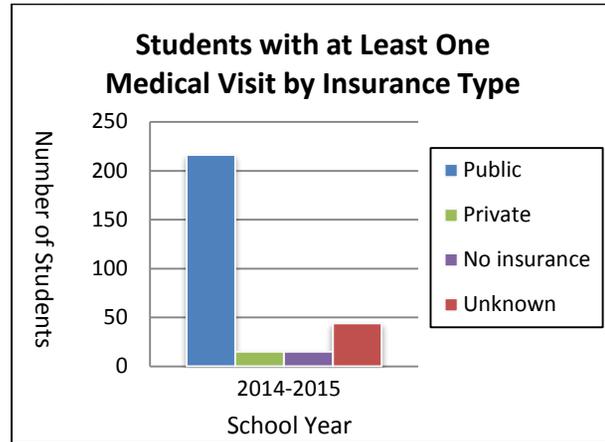
Program Expenditures	DPH SBHC Funding	Other State Funding	Federal Funding (MCHBG, ACA)	Total Other Funding (Other federal, Local, Private)	Reimbursement Generated	Total Site Funding
Actual SFY 15	\$103,255	\$0	\$0	\$0	\$210,514	\$313,769
Estimated SFY 16	\$100,408	\$0	\$0	\$0	\$210,514	\$310,922

*Sponsoring Agency:* New Haven Board of Education

*Partners:* Parents, Students, School Administrators and Faculty, Cornell Scott Hill Health Center (CS-HHC), Board of Education, CASBHC, DPH, DSS, School Based Health Alliance.

### How Much Did We Do?

#### Access and Utilization



#### Story behind the baseline:

Out of 535 students in the school, 493 (92%) were enrolled in Clemente SBHC in 2014-2015. Of these 92 (19%) students were newly enrolled.

Two hundred and ninety (59%) of the enrolled students had at least one visit to the SBHC, with an insurance breakdown as follows: 216-Public; 15-Private; 15-No Insurance; 44-Unknown.

Total clinical visits equaled 1,591, 822 visits (51.7%) were for medical services and 769 (48.3%) visits were for mental health services.

Among medical visits there were 383 (46.6%) male and 439 (53.4%) female. Among mental health visits there were 604 (78.5%) male and 165 (21.5%) female.

Five hundred and twenty six (526) (64%) medical visits were for Hispanic, 274 (33.3%) for black, 21 (2.6%) for white and 1 (0.1%) for Asian students.

Four hundred and fifty one (451) (58.6%) mental health visits were for black and 318 (41.4%) for Hispanic students.

Mental Health Screening was conducted at 491 (99%) medical visits.

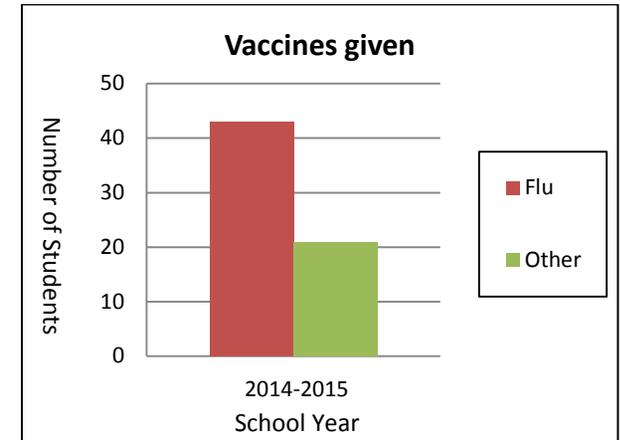
A total of 25 physical exam was performed. BMI was measured at 373 (23.4%) clinical visits.

In 2014-2015 school year, in order to increase access and utilization, the SBHC staff tabled school/community events such as family fitness nights and citywide health fairs, addressed parents at Back to School and Report Card nights, worked with staff to present to classes or other school wide health promotion, attended teachers' staff meetings to inform staff of all SBHC services and answer questions, distributed SBHC promotional materials in waiting rooms, main office, bulletin boards, etc., worked with Master teachers from BOE Wellness program to combine efforts, worked with BOE Boost Coordinator to create an After-school Wellness program, sent a letter out along with School Nurse's for grade level required PEs, Flu vaccine, etc.

### Trend: [◀▶] – baseline

#### How Well Did We Do?

#### Reduce the Occurrence of Preventable Disease



#### Story behind the baseline:

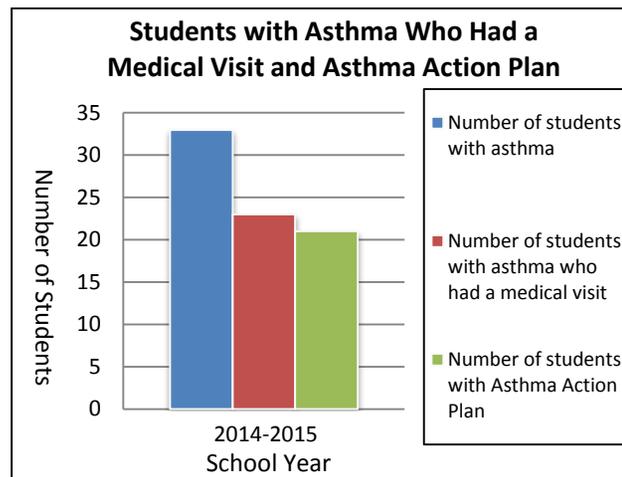
In 2014-2015 the students received 43 flu and 21 other vaccines. A letter with attached flu permission slip was sent out to all children with chronic health problems, including Asthma, Diabetes, allergies, seizure disorders, cardiac or congenital conditions. Flyers with flu vaccine information were posted on the clinic door, in the main office and at tabled school events, such as report card night and family fun and fitness nights.

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Trend: [◀▶] - baseline

### Is Anyone Better Off?

#### Reduce Severity & Frequency of Asthma Symptoms



#### Story behind the baseline:

There was no tracking data about Asthma for this period from the EHR. They will be documenting and tracking this information for 2015-2016 school year. SBHC users who were seen for asthma symptoms were documented, but not all students having a diagnosis of asthma or asthma action plan were entered into the data system. Between the school nurse and SBHC files, a total of 33 students had a diagnosis of Asthma and 21 (63%) of these students had an asthma action plan in place.

Trend: [◀▶] – baseline

#### Proposed Actions to Turn the Curve

##### Access and Utilization

- To maintain 92% enrollment at Clemente the SBHC staff will promote enrollment and utilization of SBHC services by participating in parent orientations, report card nights, PTO meetings, involve teachers in encouraging parents to enroll their children. They will distribute permission forms and SBHC materials to all parents; give teachers SBHC permission forms and

encourage parents to enroll, and target enrollment follow up to students not enrolled. Conduct outreach efforts to increase awareness of School Based Health Center services including:

- Regular updates in school newsletter to parents.
- Work with staff to present to classes and offer SBHC open house to students/families
- Present to school staff at least twice yearly to introduce staff, clarify roles and services, explain referral process, and the benefits to students/families and staff of having students utilize the SBHC
- Place SBHC permission forms and promotional materials in waiting rooms, guidance and nurses offices, main office, and in teacher's mailboxes.
- Contact all enrolled or newly enrolled students to have annual health screenings.

#### Reduce the Occurrence of Preventable Disease

- Review charts and collaborate with the school nurse to identify enrolled students with chronic illnesses, especially students with a diagnosis of Asthma, and confirm status of flu vaccination.
- Schedule appointments for those needing the Flu vaccine.
  - Conduct outreach to students, staff and parents about the importance of preventive vaccinations and encourage the use of SBHCs for getting vaccines, with an emphasis on flu vaccines via: newsletters, flyers, events, materials and announcements.
  - Promote and conduct a Flu clinic in October for students needing the Flu vaccine

#### Reduce Severity and Frequency of Asthma Symptoms

- Identify SBHC users with asthma who don't have an Asthma Action Plan in place through chart review, school nurse and/or parents or EHRs, and provide one if needed.
- Identify patterns or issues with of asthma medication compliance, frequency of visits for asthma symptoms, and hospitalizations through chart notes or EHRs.
- Identify asthma users with documented flu vaccines (chart notes, school nurse and/or EHR).
- Identify/document asthma symptoms and triggers through student/parent inquiry or EHRs.

- Offer targeted health education group such as "Open Airways" to students in poor control.

#### Data Development Agenda:

In the fall of 2014, a new SBHC Data management system, HealthX, was being developed with a company called Lumen, to enable the New Haven Public Schools (NHPS) to capture, analyze and report visit and other SBHC data accurately.

Though NHPS are still developing and improving the program, it is expected that this will allow New Haven Public Schools, for the first time, to standardize data entry, data collection, run reports, and to track progress and measure impact across all 17 sites, 11 which are funded through DPH. Having one universal data system for SBHC visits will also eliminate discrepancies of data reporting from agencies having different EHR systems, and collecting different data.

NHPS will be conducting data entry/management training again for all SBHC office managers and as needed throughout the year to ensure they are entering data accurately as improvements are made. Lumen will be improving the program this school year to better meet NHPSs needs and ensure that all visit encounter data is accurately captured and reported.

Trend Going in Right Direction? ▲ Yes; ▼ No; ▶ Flat/ No Trend