

2014-2015 New Haven Program Report Card: James Hillhouse School Based Health Center (High School) Grades?

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.

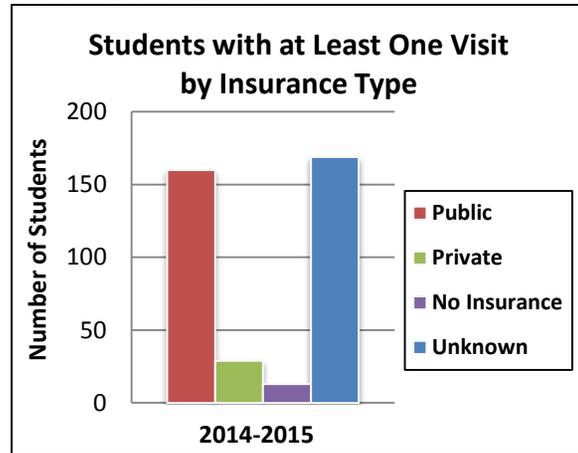
Program Expenditures	DPH SBHC Funding	Other State Funding	Federal Funding (MCHBG, ACA)	Total Other Funding (Other federal, Local, Private)	Reimbursement Generated	Total Site Funding
Actual SFY 15	\$99,278	\$0	\$0	\$0	\$35,778	\$135,056
Estimated SFY 16	\$99,278	\$0	\$0	\$0	\$36,000	\$135,278

Sponsoring Agency: New Haven Board of Education

Partners: Parents, Students, School Administrators and Faculty, Yale New Haven Hospital (YNHH), Board of Education, CASBHC, DPH, DSS, School Based Health Alliance.

How Much Did We Do?

Access and Utilization



Story behind the baseline:

Out of 1,003 students in the school 900 (90%) were enrolled in James Hillhouse SBHC in 2014-2015. Of these 94 (10%) students were newly enrolled. 371 (41%) of the enrolled students had at least one visit to the SBHC, with a user breakdown by insurance as follows: 160-Public; 29-Private; 13-No Insurance; 169-Unknown.

The total number of visits to the SBHC totaled 1,206. 899 visits (75%) were for medical services and 307 (25%) visits were for mental health services.

Among medical visits there were 319 (36%) male and 580 (64%) female. Among mental health visits there were 81 (26%) male and 226 (74%) female.

Six hundred and two (67%) medical visits were for black, 266 (29.6%) for Hispanic, 25 (2.8%) for white, 5 (0.6%) for Asian and 1 (0.1%) for Indian students.

Two hundred and twenty seven (74%) mental health visits were for black, 71 (23%) for Hispanic, 5 (1.6%) for white and 4 (1.3%) for Indian students.

Mental Health Screener was utilized at 449 (37%) clinical visits. A physical exam was conducted at 207 (17%) clinical visits in 2014-2015. BMI was measured at 274 (23%) clinical visits.

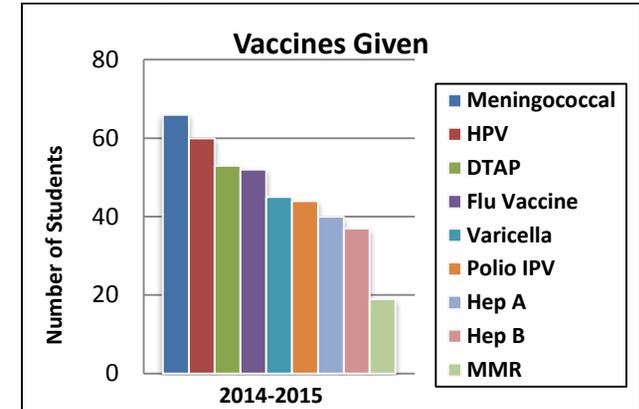
In 2013-2014 school year, in order to increase access and utilization, the SBHC staff:

- conducted tours for freshmen;
- distributed pamphlets to staff and in parent room;
- held meetings with Parent Liaison, who is a school staff member who's primary role is to strengthen the partnership between school and parents and to provide outreach to parents about school programs, services and expectations of school, students and families.
- set up a table with information for parents, students and teachers at report card/meet the teacher night;
- prepared and updated health topic bulletin boards.

Trend: [◀▶] – baseline

How Well Did We Do?

Reduce the Occurrence of Preventable Disease



Story behind the baseline:

The SBHC APRN works closely with the school nurse in identifying students who are non-compliant with physicals and vaccination requirements. According to the school nurse's evaluation, there were 98 new students who needed updates on their vaccines/physicals. This number reflects a 35% increase in new students needing physicals/vaccines.

A total of 416 vaccines were administered this year with a breakdown by type: 66-meningococcal; 60-HPV; 53-DTAP; 52-Flu; 45-Varicella; 44-Polio; 40-HepA; 37-Hep B; 19-MMR.

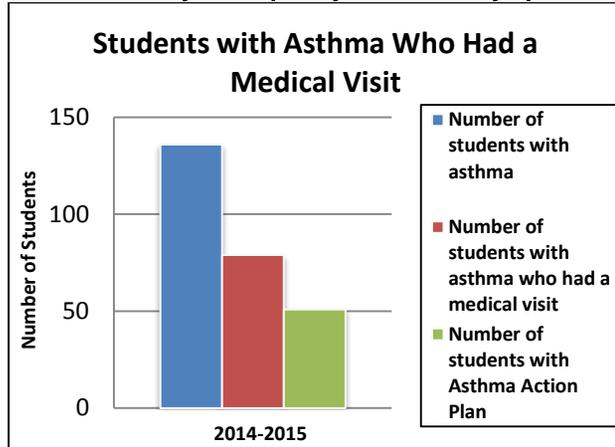
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100% of SBHC users were given information about flu prevention such as handwashing, covering cough, limit sharing, and were encouraged to receive the annual flu vaccine. The SBHC outreach efforts in this area included: creating a clinic poster on flu prevention; morning announcements during October encouraging students to get their annual flu vaccine; 25 other students agreed to receiving flu vaccine.

Trend: [◀▶] - baseline

Is Anyone Better Off?

Reduce Severity & Frequency of Asthma Symptoms



Story behind the baseline:

A total of 135 students with a diagnosis of asthma were identified through EHR and school nurse records.

52% (70) of them came for their scheduled appointment, as all students with a diagnosis of Asthma are scheduled for a visit to assess status of Asthma and management.

53% (37) of those who came for their appointment agreed to and received a flu vaccine.

Only one student who was seen for Asthma in the SBHC reported an ED visit for asthma during the school year. 38% (51) students diagnosed with asthma had an asthma action plan in place. All students with asthma were identified as priority for flu vaccine.

Trend: [◀▶] – baseline

Notes:

* This site is staffed by YNHH, and they did not bill for Mental Health services in 2014-2015, but plan to begin billing in the 2015-2016 school year.

Proposed Actions to Turn the Curve

Access and Utilization

- To increase enrollment the SBHC staff will participate in parent-family school events to promote enrollment and utilization of SBHC services; provide permission forms and SBHC materials at orientation, school events, distribute registration forms to classrooms, and target enrollment follow up to students not enrolled. Conduct outreach efforts to increase awareness of School 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.
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 - 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 office, main office, etc.
- 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 & 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 trends 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 who present with frequent asthma symptoms (more than once a month) and poor medication compliance and/or inadequate recognition of triggers/ symptoms.

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 NHPS's needs and ensure that all visit encounter data is accurately captured and reported.

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