

## 2014 Program Report Card: Murphy School SBHC (Grades Pre K-4) BRANFORD SCHOOL BASED HEALTH CENTERS

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

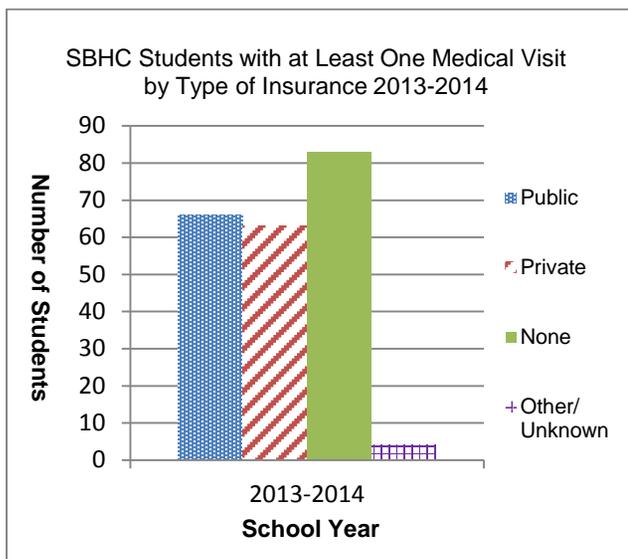
*Contribution to the Result:* School Based Health Centers provide healthcare access for school aged students, so that they are healthy and ready to learn.

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 14	\$342,386.00 all sites	\$0	\$0	\$0	\$90,900.00 all sites	433,286.00
Estimated SFY 15	\$342,386.00 all sites	\$0	\$0	\$0	\$95,000.00	437,386.00

*Partners:* Parents, Students, CASBHC, DPH, Yale New Haven Hospital, Yale Child Study Center, School Based Health Alliance, Board of Education, Branford Counseling Center, Fairhaven Health Clinic, East Shore Health Center, School Administrators and Faculty.

### How Much Did We Do?

**Measure: Improve access to and utilization of primary and preventive care.**



### Story behind the baseline:

There were 372 students enrolled in Murphy SBHC in 2013-2014. SBHC enrollment included 100 new registrants. Due to the APRN vacancy, we were only able to offer part time services for medical care throughout the year. The LCSW resigned in April resulting in limited services for the remainder of the year. However, there were 550 medical visits with 216 students and 515 Mental

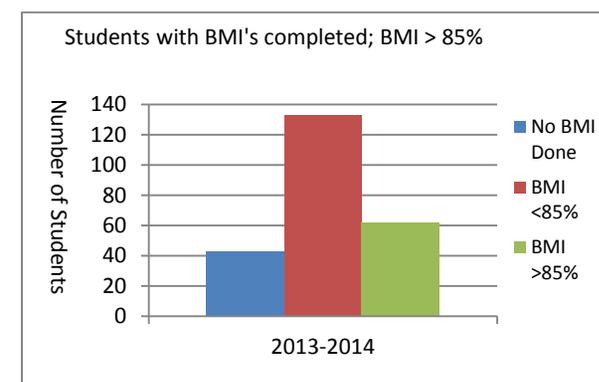
Health visits servicing 21 students. There were 45 students receiving psychiatric assessments as part of the SBHC services. In addition, there were 28 physicals that included mental health screeners. All visits are recorded in the Yale New Haven Hospital EMR.

Eighty six percent of all registered Murphy School students (433) are enrolled in the SBHC program. In 2013-2014, there were 63 (29%) privately insured and 66 (31%) publically insured students who had a medical visit. There were 4 (2%) students with an unknown insurance status and 83 (38%) students with no health insurance recorded. Due to on-going outreach initiatives, the number of students identified as being in need of SBHC services has increased. New SBHC enrollees have resulted in students who are publically insured. The number of Murphy students on the free and reduced lunch list in 2013-2014 was 38% of all the students attending Murphy School. SBHC marketing efforts to increase enrollment in the SBHC program included using the school systems Web page to showcase services and educational community and school outreach efforts. Permission forms were recreated to appear more streamlined for parent understanding of services.

**Trend:** ◀▶

### How Well Did We Do?

**Measure: Reduce the proportion of SBHC users with Obesity.**



### Story behind the baseline:

During the 2013-2014 school year, there were a total of 238 unduplicated students with a medical visit recorded as part of Access data and Epic EMR. There were 43 students (18%) that did not have a recorded BMI, 133 students (56%) that had a BMI under 85%, and 62 students (26%) that had a BMI greater than 85%. These overweight students received individual nutritional assessments and guidance on physical activity as part of anticipatory guidance with the Nurse Practitioner. The SBHC medical care included early intervention to determine a child's risk for developing obesity and the health consequences associated with being overweight. When appropriate, acute visits included a height and weight calculation resulting in a

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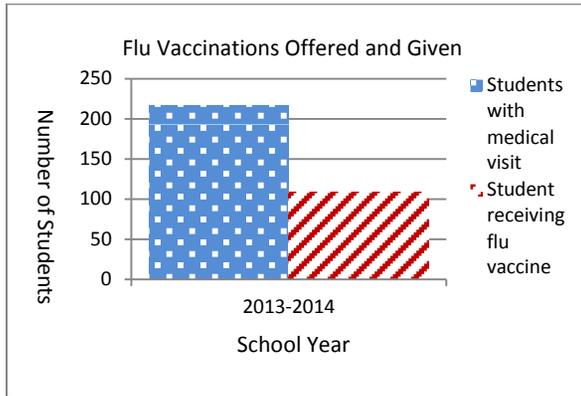
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BMI as part of the health record and EMR. Nutritional guidance and a discussion on physical activity was part of every well child visit and SBHC medical visit. Parents or guardians were consulted when the SBHC Nurse Practitioner had concerns about the individual child's well-being. While staffing was inconsistent this year, the SBHC will have a full time Nurse Practitioner and Social Worker in 2014-2015 which will enable an improved system for working with students and families around primary and preventive care.

**Trend:** ◀▶

### Is Anyone Better Off?

**Measure:** Reduce the Occurrence of Preventable disease.



### Story behind the baseline:

Immunization services are a vital component of prevention services delivered at the SBHC. Murphy School provides mandated vaccines as part of well child care and infectious disease control. All students that receive medical care have their vaccination update reviewed by the APRN. Immunizations are offered as appropriate. Many students from out of the state and country require in-depth investigation to ascertain what immunizations they need. Influenza education and disease control is an integral part of our services. The SBHC Nurse Practitioners begin outreach efforts during cold and flu season. While many of the children in the community still use their pediatricians for

flu prevention, over 50% (109 students) of students with a medical visit received their flu shot at the SBHC. All vaccines received at the SBHC are documented as part of the student school health record and Yale New Haven Hospitals EMR.

Every student seen at the SBHC received health promotion instruction in an attempt to reduce the spread and nature of acute illness. Education to families on the availability of the flu vaccine was successful and a significant number of children were immunized at the SBHC. Outreach efforts included mailings informing families of the availability of influenza vaccine on site at the SBHC. Board of Education and PTA Web pages showcased the availability of the vaccine. The SBHC provided the flu vaccine to 109 children and promoted prevention strategies through bulletin board displays and principal newsletters. Cultural considerations were part of every strategy which included translation services when needed. Parents of the younger children were invited to come to the SBHC office during office visits that included vaccinations.

**Trend:** ◀▶

### Proposed Actions to Turn the Curve:

#### Access and Utilization:

- Murphy SBHC staff will conduct additional efforts to increase enrollment in the SBHC program. With new staff coming to Murphy there will be a greater need for introduction, outreach and open house events.
- Increase in APRN hours to increase access.
- Although there was a mental health clinician vacancy in 2014 a newly hired LCSW will be starting in the fall. Access and utilization will be increased based on availability of behavioral health services. Additional groups will be offered with students and families in such topics as divorce and chronic health concerns.
- SBHC staff will work with support staff to identify students of greatest need for care. The relationship with the Yale Child Study will result in a part time Psychiatrist on site monthly.

### Reduce the proportion of users with obesity:

- SBHC staff will use ACCESS and EPIC to effectively chart and follow-up identified students with BMI greater than 85%.
- All student visits will include BMI calculations and services will be offered that address students of concern.
- Patient education services with parents will promote the need for healthy eating and physical activity in youth.
- Network and collaborate with community based interventions such as the Soundview YMCA to promote physical activity in youth identified at the SBHC as part of health assessments and care management.

### Reduce the Occurrence of Preventable Disease:

- The SBHC Nurse Practitioner will identify all students that are behind in recommended intervals for immunizations by conducting chart audits as part of quality assurance.
- All students new to the school system will be referred to the SBHC for thorough evaluation of their health records.
- Developmentally appropriate classroom presentations will be offered in each school to address flu prevention. These efforts will be on-going at the start of the school year and bulletin boards will be updated to include influenza awareness and SBHC Flu Clinic schedules.

### Data Development Agenda:

1. Work with Yale New Haven Hospital to :
  - To align EPIC EHR generated reports to meet DPH requirements
  - To streamline the process of exporting our data from EHR to DPH
2. Work with DPH to:
  - Develop tools to measure the success of the program goals and objectives as identified in the RBA outcomes selected.
3. Data presented in the charts represents the 2013-2014 school year and will be used as a baseline for future report cards.