

2014 Program Report Card: Walsh Intermediate School SBHC (Grades 5-8) 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.

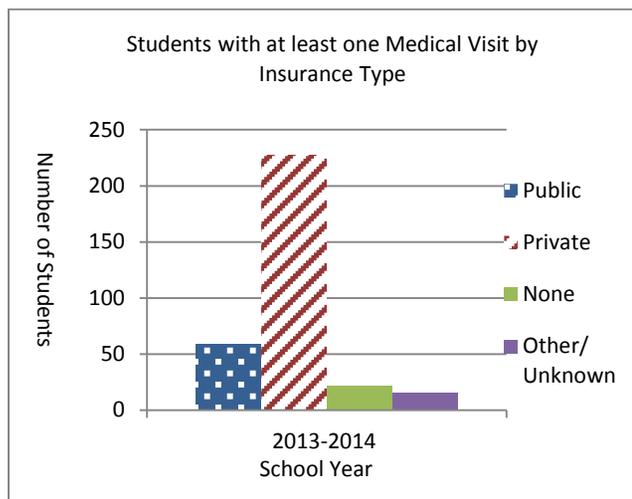
Contribution to the Result: School Based Health Centers provide healthcare access for school aged students, so that they are healthy and ready to learn.

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	\$341,794 all sites	\$0	\$0	\$0	\$90,900.00 all sites	433,286.00
Estimated SFY 15	\$331,068 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 616 students enrolled in Walsh Intermediate SBHC in 2013-2014. SBHC enrollment included 159 new registrants. However, there were 779 medical visits with 324 students and 1,141 Mental Health visits servicing 52 students. The SBHC reports indicate that there has been an increase in the number of children who are privately insured using the SBHC for acute care. Additionally, there is an increase in the number of immigrant families who rely on the SBHC as their medical home. There were 37

physicals that included mental health assessments. All visits are recorded in the Yale New Haven Hospital EMR.

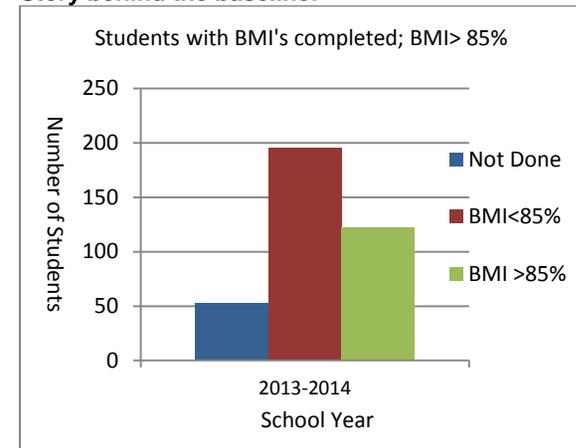
Fifty-three percent of the 1,162 students attending Walsh Intermediate School were enrolled in the SBHC. In 2013-2014, there were 227 (70%) privately insured, 59 (18%) publically insured, 16 (5%) with an unknown insurance status, and 22 (7%) students with no health insurance that had at least one medical visit. Due to ongoing outreach initiatives, the number of students identified as being in need of SBHC services has increased and resulted in new students being enrolled in HUSKY. Essential services include medical and mental continuum care in both acute and chronic health initiatives. Primary and prevention services include well child exams, mental health assessments and patient education distribution of age appropriate literature. The SBHC staff is actively involved in participating in all open house events, classroom presentations as part of the recruitment and outreach initiatives. SBHC marketing efforts to increase enrollment in the SBHC program include using the school systems district Web page and PTA online newsletter. Permission forms were recreated to appear more streamlined.

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 370 unduplicated students with medical visits that are recorded as part of Access data and Epic EMR. There were 53 students (14%) that did not have a recorded Body Mass Index (BMI). There were 195 students (53%) that had a BMI under 85% and 122 students (33%) that had a BMI greater than 85%. In the middle school population, weight is a sensitive issue. Any student with a BMI greater than 85% received individual nutritional assessments and guidance on physical activity. Those in the 5th and 6th grades received information about the Shoreline YMCA

2014 Program Report Card: Walsh Intermediate School SBHC (Grades 5-8) BRANFORD SCHOOL BASED HEALTH CENTERS

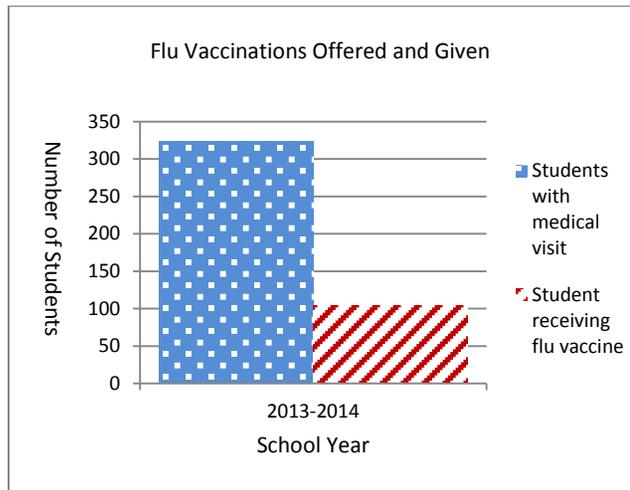
Quality of Life Result: All Connecticut children will grow up in a stable environment, safe, healthy and ready to succeed.

“Get Fit” program. The SBHC medical care includes early intervention to determine a child’s risk for developing obesity and the health consequences associated with being overweight. When appropriate, acute visits include height and weight calculation resulting in a BMI as part of the health record and EMR. Nutritional guidance and discussion on physical activity are also 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.

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. All students that receive medical care have their vaccination update reviewed. 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 the outreach efforts on cold and flu season at the start of the

school year. While many of the children in the community still use their pediatricians for flu prevention, over 32% (105 students) of SBHC students who had a medical visit chose to be immunized for the flu at the Walsh SBHC. All vaccines received at the SBHC are part of the student school record and Yale New Haven Hospitals EMR.

Every student seen at the SBHC receives 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. Cultural considerations were part of every strategy which included translation services when needed.

Trend: ◀▶

Proposed Actions to Turn the Curve:

Access and Utilization:

- 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.
- The Walsh SBHC staff will continue to increase enrollment in the SBHC by distributing materials community wide. Students without health insurance will be identified through outreach efforts.
- Enrollment and utilization will be addressed in staff trainings and new strategies employed.

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.
- The SBHC vaccination services will be included in the East Shore Health Department newsletters and community outreach initiatives.

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. Future staff trainings will emphasize the need to improve DPH contract terms so that the RBA reporting will be accurate and reflect quality improvement.
4. Data presented in the charts represents the 2013-2014 school year and will be used as a baseline for future report cards.