2015 Program Report Card: Ansonia High (Charger) School Based Health Center (9-12)

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.

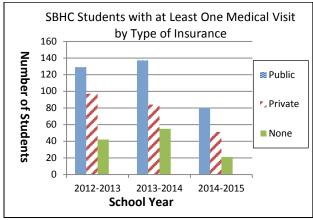
Program Expenditures	DPH SBHC Funding	Other State Funding	Federal Funding (MCHBG, ACA)	Total Other Funding (Other federal, Local, Private)	Reimbursement Generated	Total Site Funding
Actual SFY 15	\$111,556	\$0	\$0	\$59,397*	\$19,229	\$190,182
Estimated SFY 16	\$114,478	\$0	\$0	\$55,000*	\$19,000	\$188,478

Sponsoring Agency: Griffin Hospital

Partners: Parents, Students, CASBHC, DPH, DSS, DMHAS, School Based Health Alliance, Lower Naugatuck Valley Parent Child Resource Center, Naugatuck Valley Health District, Ansonia Board of Education, Local Mental Health Agency (BH Care), School Administrators and Faculty, CT Behavioral Health Partnership (BHP), Milford Rape Crisis Center.

How Much Did We Do?

Access and Utilization



Story behind the baseline: Total enrollment for 2014-2015 was 301 which was a 50% decrease from 2013-2014. Previously, there was a 3% increase from 268 in 2012-2013 to 276 in 2013-2014.

During the last two school years, the number of students with at least 1 medical visit who had no insurance initially increased by 31% from 42 to 55 and then decreased by 62% from 55 to 21. Those with public insurance increased by 6% from 129 to 137 and then decreased by 42% from 137 to 80. Those who were privately insured decreased by 13% from 97 to 84 and then decreased further by 39% from 84 to 51. There were zero students with other or unknown insurance status.

There were two changes made in 2014-2015 which would result in the dramatic decrease in medical visits. First, the

Health Center moved to an Electronic Health Record (EHR) which made it difficult to repeat the same reports utilized in 2012-2013 and 2013-2014. Secondly, it was discovered that the enrollment forms and SBHC brochures were not sent home to incoming students' families, resulting in a dramatic decrease in enrollment from the incoming freshman class.

Mental health visits increased by 52% from 228 in 2012-2013 to 346 in 2013-2014 and then decreased 41% to 204 visits in 2014-2015. This represents an overall decrease in utilization of 11% over the 3 years. The decrease in utilization is directly correlated to decreased enrollment.

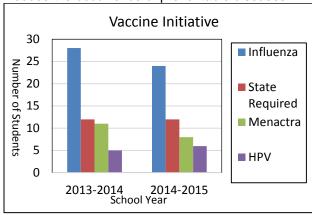
Marketing efforts were increased in the 2014-2015 school year. Letters and enrollment forms about the SBHC with a focus on health literacy and service provision were mailed to all incoming freshmen. SBHC staff also presented information about the SBHC to parents of all students at the "Back to School Night" event hosted by the high school.

SBHC staff visited every classroom during "Freshman Academy" held in late August 2014 to present information about the SBHC and resources available. Every faculty member at the high school received a letter from clinical providers about the services available at the SBHC. In February 2015 SBHC information packets including enrollment forms and brochures were mailed to parents of students not currently enrolled.

Trend: [▼]

How Well Did We Do?

Reduce the occurrence of preventable diseases



Story behind the baseline: Twenty four students enrolled in the SBHC received the influenza vaccine in 2014-2015. This is a 14% decrease from twenty eight students that were vaccinated for influenza in 2013-2014.

Students and parents were notified of the availability of the influenza vaccine in October 2014. Notification was sent by utilization of the high school "reverse 911" system which sends a telephone, text and e-mail message to all registered students and families. A link to the SBHC was created on the high school website which including information about the vaccine availability as well as educational material about the risks and benefits of vaccination and the Centers for Disease Control's (CDC) Vaccine Information Statement (VIS) for the 2014-2015 Influenza Vaccine.

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The SBHC staff identified and provided State of CT required vaccination to eligible students. In 2014-2015 12 students received state required vaccinations through the SBHC which is equal to the previous year, 2013-2014.

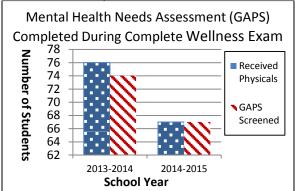
The Advisory Committee of Immunization Practices (ACIP) recommends that students over age sixteen (16) receive a second dose of Menactra, which is not required by the State of CT to remain in school. In 2014-2015, 8 students were brought up to date of this vaccine, which is a 36% decrease from 11 students that received this vaccine in 2013-2014.

The ACIP recommends that students over age eleven (11) receive a three (3) dose series of Human papillomavirus (HPV). In 2014-2015 the SBHC administered 6 HPV vaccines to eligible students, which is a 20% increase from 5 vaccines administered in 2013-2014.

Trend: [▼]

Is Anyone Better Off?

Mental Health Improvement



Story behind the baseline: Sixty Seven students enrolled in the SBHC in 2014-2015 received a complete wellness exam which is a 12% decrease from 2013-2014. The cause for this decrease in wellness exams has been discussed in "Access and Utilization" above and directly correlates to a decrease in overall enrollment. Of the students that received a wellness exam in 2014-2015, sixty seven (100%) completed a mental health needs assessment utilizing the Guidelines for Adolescent Preventive Services (*GAPS*) Questionnaire. This is a 3% increase in mental health needs assessment from 2013-

2014 in which seventy six students enrolled in the SBHC received a complete wellness exam with seventy four students (97%) completing a mental health needs assessment utilizing the GAPS Questionnaire. The two students that did not complete the GAPS in 2013-2014 had Limited English Proficiency (LEP) and were unable to complete the questionnaire. These students spoke Turkish and no translator services were available at that time. There was no need for translation services in 2014-2015 as these two students became proficient in the English language after taking an "English as a Second Language" class at the school.

Of the 67 students assessed in 2014-2015, fifteen students (22%) were identified as having a mental health concern. Of those, twelve students (80%) were referred to and assessed by the social worker. Three students (20%) refused services.

There were eleven students enrolled in the SBHC in 2014-2015 who completed at least three months of regular therapy. Of those, 7 (64%) demonstrated improved psychosocial functioning, which represents a 7% decrease from 2013-2014. Four students remained at the same level or were referred to an outside mental health agency for treatment. Six students that were enrolled in the SBHC in 2014-2015 were identified as having mental health needs that exceeded the scope of services provided through the SBHC and were referred to an outside mental health agency for treatment.

Trend: [▼]

Notes:

* Other Funding: Griffin Hospital

Proposed Actions to Turn the Curve:

Access and Utilization:

- Information about the SBHC will be included on the school website and through the school message blast system that reaches the households of students attending the school.
- Meet with school administration to collaborate on effective ways to increase enrollment and utilization.

Influenza Vaccinations:

- Information about the influenza vaccine risks, benefits and availability will be promoted on the school website and through the school message blast system that reaches the households of students attending the school.
- The APRN will promote influenza vaccination to all students by assessing each student's vaccine status at any medical visit during influenza season. Any student assessed as meeting criteria for vaccination will be given written information about the influenza vaccine risks, benefits and availability.

Mental Health Services:

- SBHC staff will provide SBHC orientation sessions to all new and existing school personnel. Orientation will include information on the mental health services offered through the Center, the referral process and the importance of linkages with community service providers and other resources.
- The SBHC social worker will work collaboratively with school staff to identify students at risk and ensure a coordinated approach to addressing student/family need.
- SBHC staff will also establish and maintain collaborative relationships with new and existing community based providers to ensure continuity of care and access to needed resources.

Data Development Agenda:

 Work with Electronic Health Record Vendor: To align EHR generated reports to meet DPH requirements and to streamline the process of exporting our data from EHR to DPH