2014-2015 Program Report Card: Walsh Intermediate Middle 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.

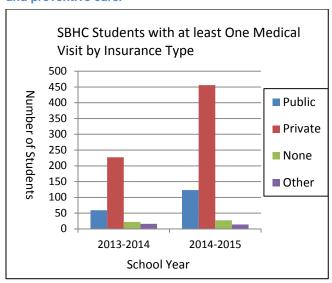
Contribution to the Result: School Based Health Centers provide healthcare access for school aged students, so that they are healthy and ready to learn.

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 15	\$100,646	\$0	\$0	\$0	\$45,679	\$146,325
Estimated SFY 16	\$100,646	\$0	\$0	\$0	\$50,000	\$150,646

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:

In 2014-2015 634 (69%) of 918 students were enrolled in the Walsh Intermediate SBHC.

SBHC enrollment included 209 new registrants. 1242 medical visits with 296 students and 1155 behavioral health visits servicing 41 students were conducted. There have been increases in the number of children who are privately insured using the SBHC for acute care. Additionally, there was an increase in the number of immigrant families who relied on the SBHC as their medical home. 94 physicals that included a mental health

assessment were conducted. This increased by almost 60 more physicals from the school year of 2013-2014. All visits are recorded in the Yale New Haven Hospital EMR.

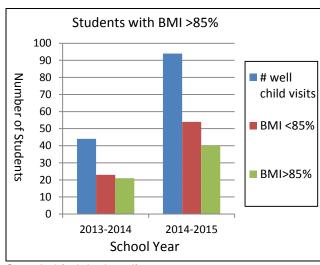
In 2014-2015, of the 918 students, 456 (74%) were privately insured, 123 (20%) were publically insured, 14 (2%) had an unknown insurance status, and 27 (4%) students who were uninsured had at least one medical visit. Due to ongoing outreach initiatives, the number of students identified as being in need of SBHC services has increased and resulted in new students being enrolled in HUSKY. Essential services included medical and mental continuum care in both acute and chronic health initiatives.

Primary and prevention services included well child exams, behavioral health assessments, and patient education distribution of age appropriate literature. The SBHC staff is actively involved in participating as part of the recruitment and outreach initiatives. SBHC marketing efforts to increase enrollment in the SBHC program include using the school systems Web page and PTA online newsletter. Enrollment forms were recreated to appear more streamlines. Utilization and access to SBHC services more than doubled this school year.

Trend: ▲

How Well Did We Do?

Measure: Reduce the proportion of SBHC users with Obesity.



Story behind the baseline:

During the 2014-2015 school year, a total of 296 unduplicated students with medical visits were recorded as part of the Access data and Epic EMR. 94 unduplicated students with BMI registered as part of a well child visit. (57%) students had a BMI under 85% and 40 (43%) students had a BMI greater than 85%. In the middle school population, weight is a very 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 "Y Be Fit" program. The SBHC medical

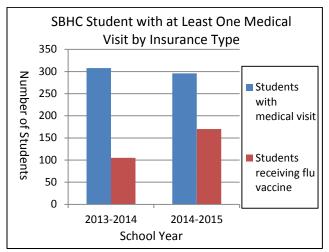
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care includes early intervention to determine a child's risk for developing obesity and the health consequences associated with being overweight. When appropriate, acute visits include height and weight calculation resulting in a BMI as part of the 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 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 57% (170

students) of the SBHC student population 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 FMR.

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. 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 continue to identify students of greatest need for care with part time psychiatric services on site monthly.
- The Walsh SBHC staff will continue to increase enrollment in the SBHC by distributing materials community wide.
- A SBHC will actively participate on the school PTA.
- Information regarding the SBHC services will be provided to families via the school newsletter, Connect Ed calls, and email blasts.
- The SBHC Myths and Facts sheet will be provided to families at each outreach event.
- 3-5min class presentations will be conducted at the start of each school year.
- The SBHC staff will attempt to collaborate with the Arts Department to develop bulletin boards throughout the school year.
- SBHC staff will participate in the 4th grade orientation night.
- The SBHC staff will work with the BOE Web designer to attempt to create an electronic version of the SBHC enrollment form.
- Students without health insurance will be identified through outreach efforts and connected with necessary external supports.
- Enrollment and utilization will be addressed in staff trainings and new strategies deployed.

Reduce the proportion of users with obesity:

- SBHC staff will use ACCESS and EPIC to effectively chart and follow –up on identified students with BMI greater than 85%.
- Patient education services with parents will promote the need for healthy eating and physical activity in youth.
- Network and collaborative efforts will continue to promote physical activity in youth identified at the SBHC as part of the 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.
- The SBHC vaccination services will be included in the East Shore Health Department newsletters and community outreach initiatives.

Data Development Agenda:

- Work with Yale New Haven Hospital to:
 - Align EPIC EMR generated reports to meet DPH requirements
 - Streamline the process of exporting our data from EMR to DPH
- Work with DPH to:
 - Develop tools to measure the success of the program goals and objectives as identified in the RBA outcomes selected.
- Future staff training will emphasize the need to improve DPH contract terms so that the RBA reporting will be accurate and reflect quality improvement.