

## 2014-2015 Norwalk - Human Services Council – Dr. Robert E. Appleby School Based Health Center Brien McMahon High School (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.

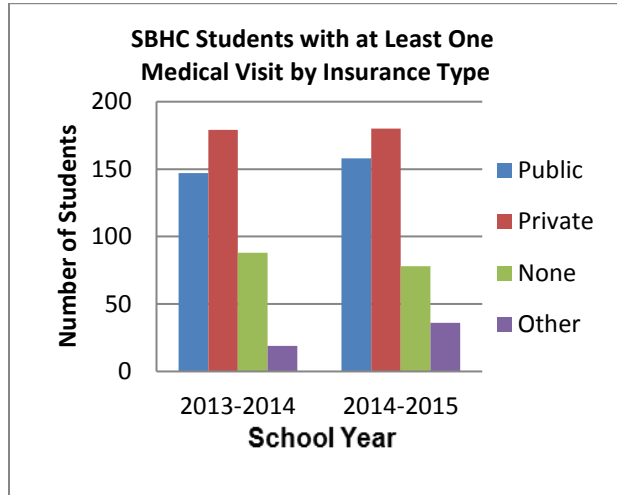
Program Expenditures	DPH SBHC Funding	Other State Funding	Federal Funding (MCHBG, ACA)	Total Other Funding (Other federal, Local, Private)	Reimbursement Generated	Total Site Funding
Actual SFY 14	\$112,829	\$0	\$0		\$25,706	\$138,535
Estimated SFY 15	\$112,829	\$0	\$0		\$35,000	\$147,829

*Sponsoring Agency:* Human Services Council of Mid-Fairfield

*Partners:* Parents, Students, Norwalk Public Schools Administrators and Faculty, Norwalk Community Health Center, Family & Children’s Agency, Norwalk Health Department, Child and Family Guidance, Norwalk Hospital, Norwalk Board of Education, CASBHC, DPH, DSS, DMHAS

### How Much Did We Do?

Access and Utilization



**Story behind the baseline:** SBHC enrollment remained steady from the 2013-2014 and 2014-2015 school years with 857 and 859 students respectively. The number of all student visits increased slightly from 2,432 visits in 2013-2014 to 2,446 in 2014-2015.

The number of students with at least 1 medical visit increased slightly (4%) from 433 in 2013-2014 to 452 in 2014-2015. There were a total of 1,495 (63%) medical visits in 2013-2014 and 1,559 (64%) medical visits in 2014-2015. The number of students with at least 1 mental health visit over the past two years has also remained relatively

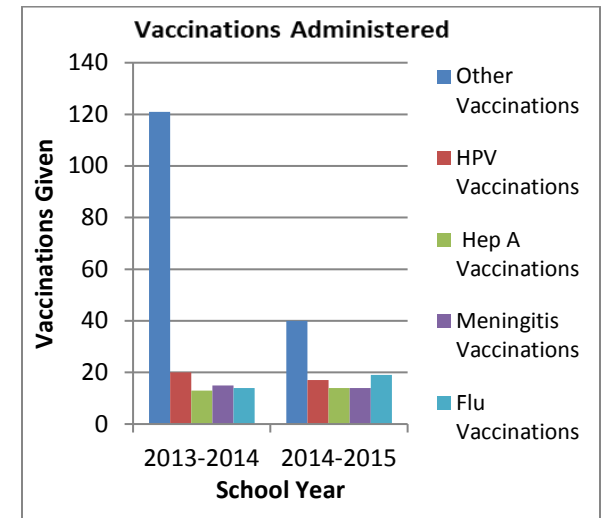
steady with 60 in 2013-2014 and 56 in 2014-2015. There were 760 mental health visits in the 2014-2015 school year, is a 13% decrease from 873 mental health visits in the 2013-2014 school year. This reduction was in part due to a reduction in group programming, school changes in bell schedule, and curtailed lunch periods.

Marketing efforts remained consistent for the 2014-2015 school year. Letters and flyers with information about the SBHC were available in English and Spanish and were distributed to every incoming 9<sup>th</sup> grade student. Haitian language letters were developed and made available at the SBHC site. SBHC staff also presented information about the SBHC to parents of incoming students and at open houses for parents. SBHC information and enrollment forms are included on the school website. The SBHC developed a flyer listing our services and distributed it to every school staff and faculty member.

**Trend:** [ ◀ ▶ ]

### How Well Did We Do?

Vaccinations Offered and Received



**Story behind the baseline:** As primary health providers, SBHC practitioners always include routine recommended vaccines as part of the care they deliver. Each patient’s vaccination status is assessed and they are offered recommended vaccines or are referred to their primary care provider (PCP) for recommended vaccinations. The number of total vaccinations decreased 43% from 183 in 2013-2014 to 104 vaccines in 2014-2015. The number of Meningitis vaccines (15 in 2013-1014 and 14 in 2014-2015)

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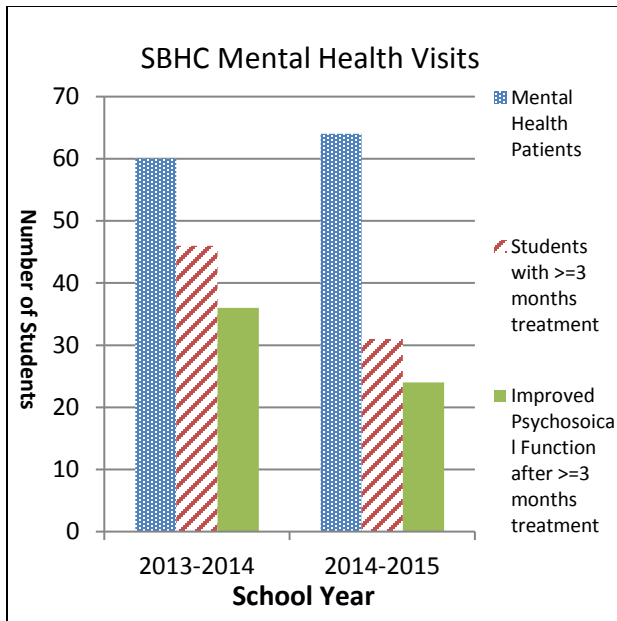
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and Hepatitis A vaccines (13 in 2013-2014 and 14 in 2014-2015) administered at the SBHC remained stable. Human Papillomavirus (HPV) vaccinations decreased from 20 in 2013-2014 to 17 in 2014-2015. There was an increase in the number of influenza (flu) vaccinations given from 14 in the 2013-2014 school year to 19 in the 2014-2015 school year. The medical practitioners continue to educate, counsel and recommend the vaccines to patients and their parents. As student enrollment is static there tends to be fewer students that need vaccinations. The decrease in HPV may be due with that vaccine's refusal rate. These vaccines were offered, but were declined.

**Trend:** [◀▶]

### Is Anyone Better Off?

Mental Health Improvement



### Story behind the baseline:

In the 2014-2015 school year, 859 students were enrolled at the SBHC and 64 students (8% of total SBHC enrollment) had one or more mental health visits totaling

760 visits. This statistic is similar to the previous year where 60 students with at least 1 mental health visit. Mental health visits decreased 12% from 873 in 2013-2014 to 760 in 2014-2015 school year. One hundred percent of mental health patients (64) received a mental health assessment utilizing the social workers psychosocial interviewing skills to obtain a baseline level of functioning. 5 were referred out for services to meet needs greater than the SBHC scope.

An increase in psychological functioning was determined by the social worker's professional judgement based on information from some or all of the following sources: patient self-reporting; parent or school staff reporting to therapist; observation of the therapist and objective measures such as improvement in school attendance and grades.

Of the 31 SBHC mental health patients that completed three months or more of regular therapy and were reassessed, 24 (77%) students were determined to have an increase in psychosocial functioning. Improved psychosocial functioning was assessed by the percentage of student that after 3 months or more of care was stable, went from 78 to 77 percent improved from one year to the next.

Of those 24 students who improved, 12 (50%) continued therapy with the SBHC social worker and 12 (50%) completed their therapy. The remaining 7 patients (22%) who completed three months or more of therapy didn't show improvement 2 transferred to different schools, one withdrew from school; one graduated and 3 were referred out.

In the 2014-2015 school year, 244 students had a physical exam and all were administered the Rapid Assessment for Adolescent Preventive Service (RAAPS) questionnaire by the medical practitioner.

**Trend:** [◀▶]

### Proposed Actions to Turn the Curve:

Access and Utilization:

- 1) SBHC staff will identify additional outreach activities to reach students and families including: SBHC Open House; tours; "Ask the Healthcare Provider" information table; advertising in the school's program during the annual school play and promoting the SBHC Facebook page,

Vaccinations

- 1) The APRN will offer recommended vaccinations to students identified as at-risk. Parent education on the need for recommended vaccines will be a priority. Working with the school nurse, the medical practitioner will request a list of students enrolled in the SBHC who are missing recommended vaccines. Vaccine permission forms will be sent home in order for those vaccines to be administered at the SBHC.

Mental Health Services:

- 1) SBHC staff will provide SBHC orientation 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. SBHC 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:

1. Work on obtaining and implementing Electronic Health Records at the SBHC;
2. Identify tools and refine existing tools to measure the success of the social skills groups that are offered to students.
3. Identify or develop tools to track mental health patient's care coordination