

## 2014 Program Report Card: Danbury High 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.

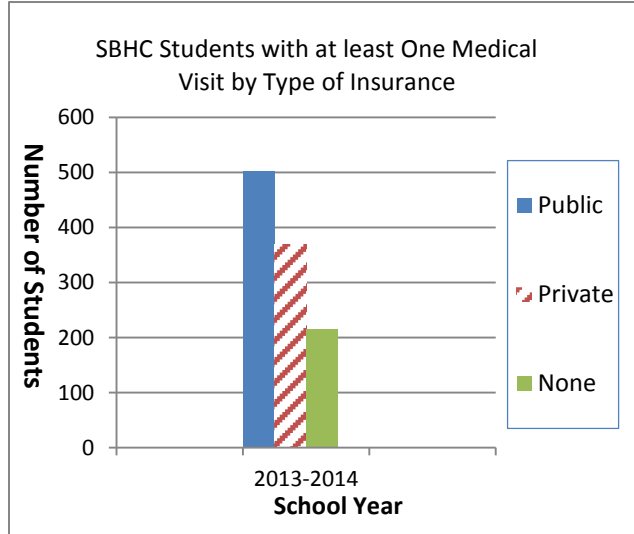
*Contribution to the Result:* School Based Health Centers provide healthcare access for school aged students, so that they are healthy and ready to learn.

Program Expenditures	DPH SBHC Funding	Other State Funding- (Preventative Health Block Grant)	Federal Funding (MCHBG, ACA)	Total Other Funding (Other federal, Local, Private)-United Church of Christ donation	Reimbursement Generated	Total Site Funding
Actual SFY 14	\$165,944	\$5,318*	\$0	\$2,387**	\$9,592.29	\$173,649
Estimated SFY 15	\$165,656	\$5,490*	\$0	\$0	\$9,592.29	\$171,146

*Partners:* City of Danbury, Western CT Health Network, Samaritan Center, Parents, Students, CASBHC, DPH, Connecticut Institute for Communities, Greater Danbury Community Health Center, Center for Pediatric Medicine, School Administrators and Faculty.

### How Much Did We Do?

Access and Utilization



**Story behind the baseline:** The total school population in 2013-2014 was 2,796. Total number of students enrolled in School Based Health Center (SBHC) was 2,742 (98%). Some of the SBHC students were previously enrolled at either the Broadview Middle School or Rogers Park Middle School SBHCs, and their SBHC enrollment status transferred with them to the Danbury High School (DHS) SBHC. Each year permission forms are dispersed to all students in English and Spanish as an effort to increase enrollment. The SBHC enrollment form was also distributed to 600 English Language Learner (ELL) students. SBHC staff presented information about the SBHC to parents of

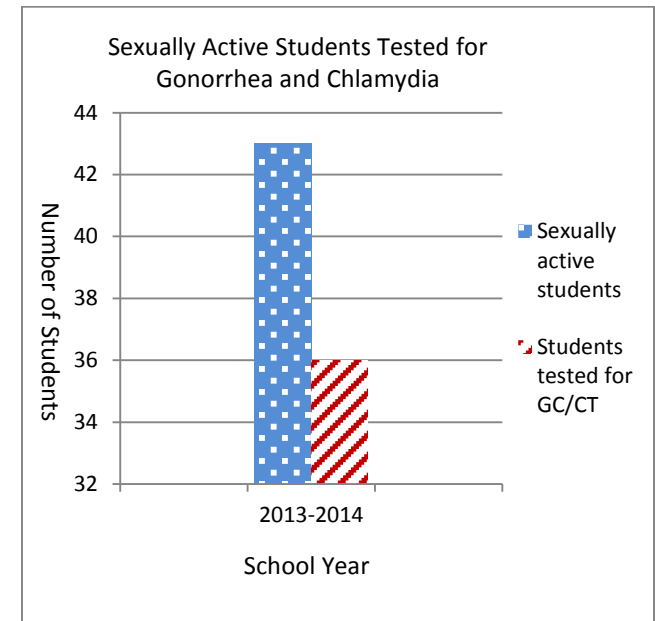
students at the parent open house, and other DHS community events, including Club Day, and Services in the Community for Adolescents Fair. Because the SBHC has been established for twenty years, staff has developed a strong rapport with both DHS students and faculty, contributing to the high SBHC enrollment.

Of the 1,087 students with at least one medical visit the insurance breakdown is Public: 503(46%), Private: 369 (34%), and not insured: 215 (20%). There were 661 (24%) unduplicated SBHC users for a total number of 1561 visits providing medical, mental health, and dental services. Of those visits 1087 (70%) were for medical services. 503 medical visits (46%) were provided to students with public insurance. 369 (34%) visits were provided to students with private insurance. All remaining 215 medical visits (20%) were provided to students with no insurance. There were no visits to students of unknown insurance status.

Trend: [ ◀▶ ]

### How Well Did We Do?

Reduce STDs among SBHC Students



**Story behind the baseline:** The Advanced Practice Registered Nurse (APRN) took a comprehensive sexual history of students during preventative health visits, or students presenting with a genitourinary related complaint. Forty three (43) students reported that they were sexually active. Of those 43 students, 36 (83%) were tested for Chlamydia and Gonorrhea. The 7 students that reported

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being sexually active, but were not screened for Chlamydia and Gonorrhea reported that they received a Sexually Transmitted Diseases (STD) screening recently by an outside provider, or refused to be screened.

The SBHC provides reproductive health education regarding abstinence and healthy choices. Sexually active students are counseled one on one about the risks of unprotected sex. Students are encouraged to use barrier methods such as condoms during sexual activity to prevent the transmission of STDs. Students are made aware of resources in the community where condoms can be accessed. Students are advised to request their partners to be tested for STDs. The SBHC works closely with the State of Connecticut STD Division as a resource and to facilitate testing for Gonorrhea and Chlamydia. The SBHC also collaborates with Planned Parenthood, the local Department of Public Health STD clinic and AIDS Project of Greater Danbury for education and risk reduction, testing and treatment of STDs.

**Trend:** [◀▶]

### Is Anyone Better Off? Student SBHC Satisfaction Survey

Measure	Response
I have changed some of my behaviors as a result of coming to the health center	<b>Yes-71% (55)</b>
I have learned some new health habits through my visits here	<b>Yes-77% (59)</b>
Have you been satisfied with the services you have received?	<b>Yes-99% (76)</b>
Did you get help for the problems/health issues that you came in for?	<b>Yes-100% (77)</b>

### Story behind the baseline:

The goal of the SBHC is to provide access to high quality comprehensive physical and behavioral health services while being accessible, confidential, culturally sensitive, and developmentally appropriate. Keeping students physically and emotionally healthy plays a significant role in their school performance. Empowering high school students to learn to understand and to change their behaviors with regards to physical and emotional health can impact them now and over the course of their lives.

A student satisfaction survey was administered to assess success of health outcomes. A sample of questions asked on the 2013-2014 survey is presented in the chart. A total of 77 surveys were completed by 56 females and 21 males. Fifty three (69%) students reported that they had been seen for medical services; 25 (32%) for behavioral health; 18 (23%) for dental services; and 5 (6%) reported receiving multiple services. Students were also asked to rate the services at the SBHC overall. 63 (82%) rated their care as excellent; 13 (17%) rated their care as good; and only 1 student (1%) described their care as poor. The satisfaction rate was 99%.

One hundred percent (77) of students reported receiving help for the problems/health issues they went in for. 77% (59) of students reported learning new health habits and 71% (55) reported changing some behaviors as a result of visiting the SBHC. These results demonstrate that the SBHC had a beneficial impact on a large majority of student's lives.

**Trend:** [◀▶]

### Notes:

\* Reflects funding provided by a DPH Preventative Health Block Grant for skin cancer prevention activities.

\*\* Reflects a one-time donation from United Church of Christ-Southbury- for youth violence prevention activities.

### Proposed Actions to Turn the Curve:

#### Access and Utilization:

- 1) SBHC staff will encourage enrollment and utilization to all students. Registration forms and information about services offered will be placed in the school mailing to all students in the summer. Staff will conduct "Intro to SBHC Services" presentations in the beginning of the school year to students and parents. Information and registration forms will be accessible on the school website for downloading. Students will be encouraged and made aware of services available.

#### Reduce STDs among SBHC students:

- 2) The APRN will increase the number of sexual health histories taken. Discussion of STDs including ways to prevent transmission and need for routine testing will not be limited to those students who present with a reproductive or genitourinary health concern. The APRN will develop a brief reproductive intake form to quickly assess student's need for reproductive education and STD testing at routine visits.

#### Data Development Agenda:

1. To transition from Clinical Fusion to eClinical Works by 2015-2016 school year.
2. Identify how to align eClinical Works generated reports to meet DPH requirements.
3. Identify how to streamline the process of exporting our data from eClinical works to DPH when we implement EHR.

\*\*\* Data presented represents 2013-2014 school year and is only to be used as a baseline.