

2014 Program Report Card: Weaver High School/Journalism and Media Academy 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.

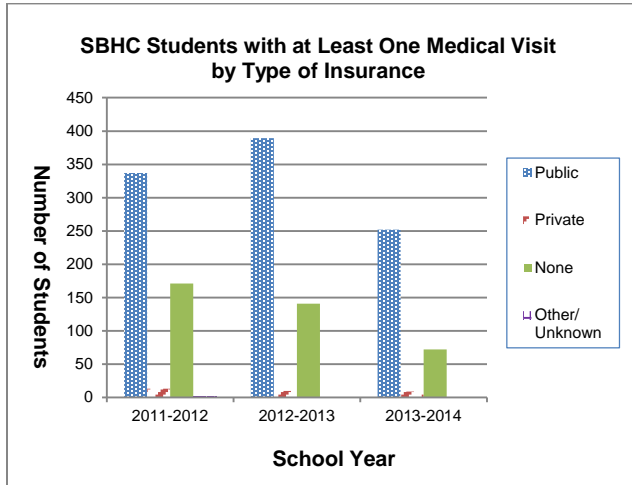
Contribution to the Result: School Based Health Centers provide healthcare access for school aged students, so that they are healthy and ready to learn.

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 14	\$97,582	\$0	\$0	\$84,000*	\$27,531	\$209,113
Estimated SFY 15	\$143,744	\$0	\$40,082 **(MCHBG)	\$84,500*	\$78,000	\$346,326

Partners: Parents, Students, CASBHC, DPH, DSS, School Based Health Alliance, Board of Education, Planned Parenthood of Southern New England, Institute of Living, Child and Family Services, Catholic Family Services, Hispanic Health Council, Charter Oak Health Center, Women’s Ambulatory Health Services, School Administrators and Faculty, University of Hartford, University of St. Joseph, University of Ct., Southern Ct. State University, American Institute, Porter and Chester, Lincoln Technical Institute, Central Ct. State University, Goodwin College, Quinnipiac University, Stone Academy, Yale, CCMC Building Bridges, Ct State Dental Association, Hartford Care Coordination Collaborative, Connecticut Interscholastic Athletic Conference, Health Interactive Program.

How Much Did We Do?

Access and Utilization



Story behind the baseline: The total school population has decreased from 638 in 2011-2012 to 439 in 2013-2014. As a result, enrollment in the health center has decreased from 549 students to 333 (a 39% decrease), reducing the demand for services. Cause for the reduction is the fact that Weaver will be closing for renovations starting in School Year 2014-2015 for a period of five years. During the past three years, students have been reassigned (or encouraged to enroll) to other district secondary schools and magnet schools.

A State facilities license has been secured for the Journalism and Media Academy (JMA), which has a separate address, but is included in the Weaver statistics. JMA will be maintained as an SBHC during the period of renovation even though the total population for JMA is low. Marketing efforts at JMA have been increased in the 2013-2014 school year and the percentage of enrolled students has steadily increased there from under 50% (86) to 70% (134) at this writing.

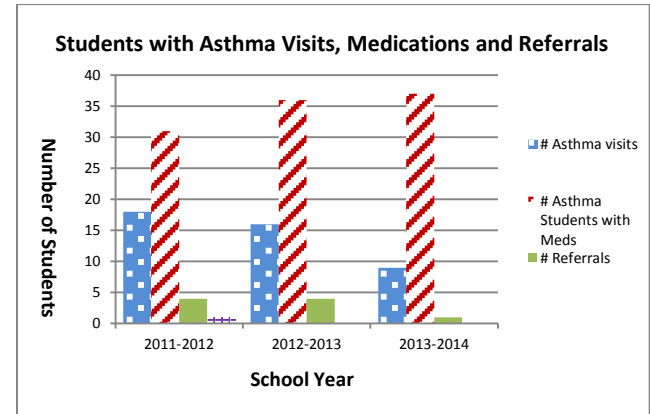
The number of students with at least 1 medical visit has decreased annually. In 2011-2012, 522 students were seen and in 2013-2014, 333 students were seen, representing a 36% decrease. Again, the gradual reduction in general student population, SBHC enrollments and students receiving services is due to the impending renovations.

In 2013-2014, the majority of medical visits were made by students who were publicly insured (74% - 252 students), followed by privately insured (3% - 9 students), and uninsured (23% - 72 students). A similar distribution of insurance types was observed in previous school years for those students utilizing health center services.

Trend: [▼]

How Well Did We Do?

Reduce Number of Asthma Severity and Frequency Visits to SBHC



Story behind the baseline: Again, the noted decline in school population has resulted in decreased numbers in all categories. Asthma is no exception. Even though during the report period, there was no data taken that indicates who has an asthma action plan on record or what date such plans may have been generated, according to our nurse practitioner at Journalism and Media Academy about 90% of users with asthma have updated asthma action plans in place. This was an issue with our data collection system and will be remedied in school year 2014-2015. Most students with asthma at the high school level are more independent with their asthma management and consequently do not present as often to the clinic.

However, there is information in the student history table of the SBHC database regarding those students who have asthma (chronic issue) and the number

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of those who have asthma medications. This information can be used as an *indicator* of the number of students having asthma action plans.

The information presented here compares the number of students with asthma related visits (as indicated by use of the 493.xx diagnosis codes), the number of students having asthma medications, and the number of students referred outside the SBHC, either to the PCP, parent or emergency room.

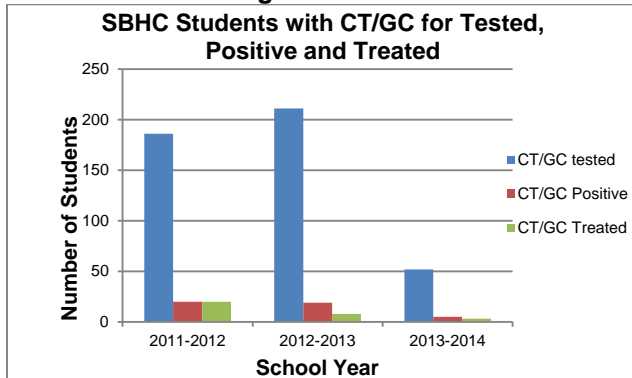
In 2013-2014, approximately 5% (16) of unduplicated SBHC registered users at the Weaver High/Journalism and Media SBHC presented for services related to asthma. This percentage is approximately level to the prior year and represents the effort to provide services to students and parents that will enable them to more appropriately and effectively manage their asthma. Additionally, students with asthma medications as indicated in our SBHC data base has increased steadily along with the number of referrals.

Currently, many non SBHC schools in the district have initiated the CCMC Building Bridges program designed to promote communications between parents, students, PCPs and school nurses with regard to students with asthma. The project includes determination of the severity of student asthma, asthma plan creation and follows up. All information is included in the student's nursing record which follows the student through his/her career in the HPS district

Trend: [▲]

Is Anyone Better Off?

Reduce STDs among SBHC Students



Rev. 5 (12 15 12)

Trend Going in Right Direction? ▲Yes; ▼ No; ◀▶ Flat/ No Trend

Story behind the baseline: Due to the impending Weaver renovations and the Culinary/Weaver split, 2013-2014 saw a great reduction (greater than 3 times fewer tests were given than in previous years, 186 in 11-12, 211 in 12-13 and 52 in 13-14) in the number of chlamydia/GC tests administered to students at Weaver High School/Journalism and Media Academy. The number of positives has remained at about 10% (5) of those tested during the period. For those found to be positive for either chlamydia or gonorrhea, treatment is administered and follow up visits are scheduled to determine the effectiveness of the treatment.

During this period the Health Interactive Program (HIP) has visited the site. HIP is a collaborative effort between the State of Connecticut STD Control Program, local school systems, school based health clinic staff and local HIV programs. HIP offers enhance education through a 45 minute interactive presentation with individual confidential counseling and optional screening for gonorrhea and chlamydia are made available to students. HIP helps students access confidential optional testing for STDs. Through HIP, treatment and education promote health habits in order to reduce occurrence of youth acquiring STDs.

Trend: [▼]

Notes:

* Reflects direct payment by Hartford Public Schools for RN salary.

Proposed Actions to Turn the Curve:

Access and Utilization:

SBHC staff will conduct additional orientations to all students and will attend Parent Night meetings to share information about the SBHC with parents/guardians. SBHC information will also be included on the school website; in the school newsletter and on school bulletin boards; and through the school message blast system that reaches the households of students attending the school.

Asthma:

- Clinic staff will identify and treat students having asthma through medical history/episodic visits using visit encounter forms. Treatment will be in concert with student's PCP. Practitioner will note if an asthma action plan is present.

- If there is not plan present, practitioner will write new asthma action plan in conjunction with the student's PCP.
- Nurse practitioners will offer individual and at least one group session for Asthma Management, based on the Open Airways program, providing health education and instruction on the proper use of medications (including inhalers) to students.
- Nurse practitioners at each site will offer at least one asthma awareness class for parents along with individual parent instruction

STD Reduction:

- Step up efforts in STD prevention education.
- All students with a positive test for Chlamydia or Gonorrhea receive appropriate treatments and rescreening

Data Development Agenda:

- Work with Electronic Health Record Vendor:
 - To align EHR generated reports to meet DPH requirements
 - To streamline the process of exporting our data from EHR to DPH
- Develop tools to measure the success of the social skills groups that are offered to students.
- Data entry staff and/or Nurse Aides will use existing data to enter all encounter visit data and date of asthma action plan to the SBHCDB.
- All visit/exam information will be documented on an encounter form and entered to the SBHC data collection database.