

## 2014-2015, Stamford School Based Health Centers, Medical Services Report Card (Grades 6-12)

Stamford High School, Westhill High School, Rippowam Middle School/Academy of Information, Technology and Engineering High School,  
Dolan Middle School and Cloonan Middle School

*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.

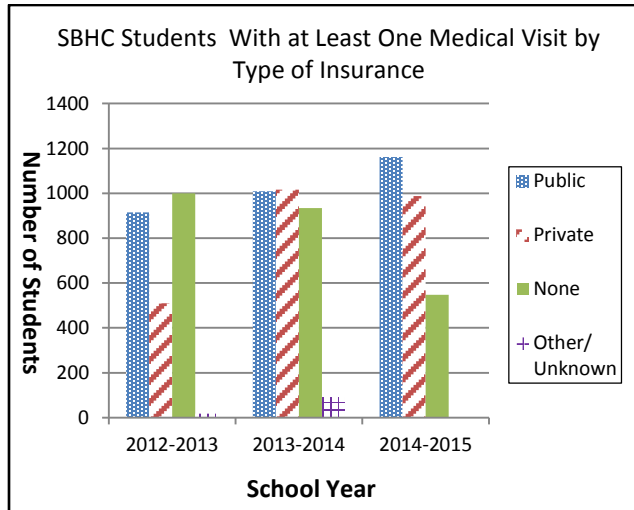
| Program Expenditures | DPH SBHC Funding | Other State Funding | Federal Funding (MCHBG, ACA) | Total Other Funding (Other federal, Local, Private) | Reimbursement Generated | Total Program Funding |
|----------------------|------------------|---------------------|------------------------------|---|-------------------------|-----------------------|
| Actual SFY 15        | \$852,795        | \$0                 | 0                            | \$415,985*  | \$129,404               | \$1,398,184**         |
| Estimated SFY 16     | \$852,795        | \$0                 | 0                            | \$395,389*  | \$150,000               | \$1,398,184**         |

*Sponsoring Agency:* Family Centers Inc.

*Partners:* Parents, Students, CASBHC, DPH, DSS, DMHAS, The CT Chapter of the AAP, School Based Health Alliance, KIDS' FAN Program, Stamford Board of Education, Child Guidance of Southern Connecticut Emergency Mobile Psychiatric Services, Family Centers SBHC Advisory Board, Young Parents Program, Nurturing Families Network, Connecticut Oral Health Initiative, School Administrators and Faculty

### How Much Did We Do?

Access and Utilization



#### Story behind the baseline:

Overall, by the end of 2015 school year, of those enrolled in the SBHC, the number of students having at least one medical visit and reporting no insurance decreased by over 41% (934 to 548). This is a result of structured and focused attempts to obtain insurance info from parents, trying to enhance revenue as grant revenue declines annually for the last three years. In addition to the positive health outcomes made as a result of adding a Health Educator in FY 2013-2014, Health Education activities always include information on the health centers in the schools where they are sited.

Since 2012, there has been an increase in the number of students with public insurance (HUSKY). In all three school years displayed, the majority of medical visits were made by students who were publicly insured in 2014-2015 1,162 (43%), followed by privately insured 988 (37%) and those with no insurance 548 (20%). A similar distribution of insurance types was observed in previous school years for those students utilizing health center services.

| Student Population, Enrollment, Number of Medical Visits and Number Served in Stamford's SBHCs, 2014-2015 |                   |              |                |                |
|---|-------------------|--------------|----------------|----------------|
| SBHC/Site   | School Population | Enrolled     | Medical Visits | Medical Served |
| Dolan MS  | 497               | 230          | 225            | 92             |
| Ripp/AITE   | 1446              | 712          | 319            | 131            |
| Stamford HS   | 1729              | 705          | 643            | 164            |
| Westhill HS   | 2090              | 701          | 629            | 229            |
| Cloonan MS  | 533               | 220          | 209            | 89             |
| <b>TOTAL</b>  | <b>6,295</b>      | <b>2,568</b> | <b>2025</b>    | <b>705</b>     |

While there was a small spike in private insurance coverage the year AccessHealthCT starting offering the Insurance Exchange (2013-2014), the number has gone down slightly in 2014-2015 year as a percentage of the overall picture of those seeking medical services who have private insurance coverage. Additionally, the SBHC program experienced a dip in productivity in 2014-2015 as a direct result of moving to an electronic record. Research

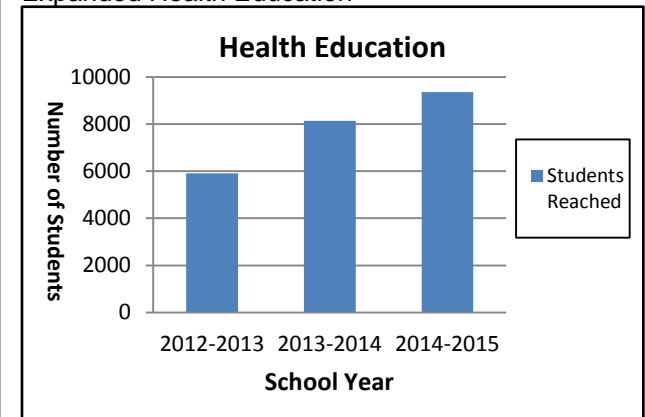
“warned” that the program would see this decline upon implementation, the situation would right itself in the succeeding years.

While overall, the insurance picture looks good and is trending up, as well as revenues for the clinics, the data from the year continues to be cleaned up and organized in a way that helps report productivity of medical services and positive outcomes.

**Trend:** [▲]

### How Well Did We Do?

Expanded Health Education



#### Story behind the baseline:

At the outset, it should be noted that the number of students is aggregated and not de-duplicated – these are

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the total number of students at each health education event – students may have attended more than one event. In 12-13 there were 5903 student, parent and faculty participants total from each of the health education events sponsored by SBHC. In 13-14 it increased to 8138 and 2014-2015 increased to 9360 participants. The parent organization (Family Centers) that operates the Stamford SBHC program received two 3-year grants from the Lowenstein Foundation and the Arcadia Foundation to support the work of a health educator (partially paid for by the DPH SBHC Grant). The Health Educator focuses on encouraging healthy Life-styles and wellness by educating students and families about behaviors that can prevent obesity, diseases, injuries and other health problems.

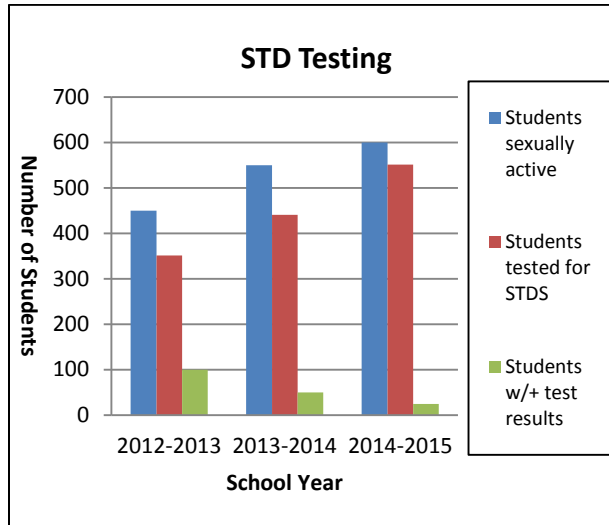
The Health Educator also works to prevent illnesses by informing and educating students and families about health-related topics, such as proper nutrition, the importance of exercise and the habits and behaviors necessary to avoid illness. Health education provides students with the opportunity to acquire the knowledge, attitude, and skills necessary for making health-promoting decisions, achieve health literacy, adopt health-enhancing behaviors, and improve the health of others.

Another benefit of having a Certified Health Educator Specialist (CHES) is that it helps keep the Clinicians in the clinic to receive the referrals being made the CHES. In 2014-2015, the Health Educator focused on providing education around sexually transmitted diseases (STD's) with age-appropriate information to all grades in which the SBHCs are located. While there may be many factors combined, in addition to the one-to-one counseling a student receives from the APRN when a student admits to being sexually active, students receive large group instruction from the Health Educator too. The decline in the percentage of positive STD's found is positively correlated to the number of students reached by health education provided by the SBHC.

**Trend:** [▲]

### **Is Anyone Better Off?**

Reduce Number of Sexually Transmitted Diseases



### **Story behind the baseline:**

Over the course of three school years, there has been an increase in reproductive and overall health education. The number of students seeking STD testing through the SBHC increased from 2013-2014 to 2014-2015 by 441 to 551 (25%). In 2014-2015, of the 551 STD tests were performed (including Chlamydia, HIV and Gonorrhea), the percent positive dropped to 4.5% (25 of 551), from 11.3% positive (50 of 441) in the previous year. Altogether, the SBHC program is turning the curve on positive STD's. Not included here are the positive pregnancy statistics, which have decreased nearly 50% from the previous year (from 9% positive pregnancy of those having pregnancy tests in 2013-2014 down to 4% positive pregnancy for those tested in 2014-2015).

**Trend:** [▲]

### **Notes:**

\*Family Centers is committed to raising funds need to keep SBHC program whole, especially when fiscal cuts threaten continued service provision. Grants were received from Stamford Public Schools, Inner City Foundation, Near and Far Aid, Hearst Foundation and proceeds from Family Centers annual fundraising event.

\*\* Reflects funding provided to the SBHCs for Medical, and Mental Health Services.

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

### **Proposed Actions to Turn the Curve: Access and Utilization:**

SBHC staff will conduct additional orientations to all students and will attend the first Parent Night meeting 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.

### **Health Education Services:**

Health Educator in conjunction will develop health education calendars with each SBHC to focus on needs of that school. Using Health Risk Assessment Data, feedback form data from educational events and school health instructor feedback, each school will develop its own agenda to implement health education series throughout the school year.

### **STD Positivity Reduction:**

The APRN in conjunction with the Certified Health Educator will expand reproductive health education in all grades in all high schools, including HIV/AIDS education large group assemblies.

### **Data Development Agenda:**

1. 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
2. Develop tools to measure health outcomes, not just outputs.