# 2015-2016 Middletown - School Based Health Center, Medical Services (grades K-8)

Macdonough Elementary School, Keigwin Middle School, and Woodrow Wilson Middle School

Quality of Life Result: All Connecticut children will grow up in a stable environment, safe, healthy and ready to succeed.

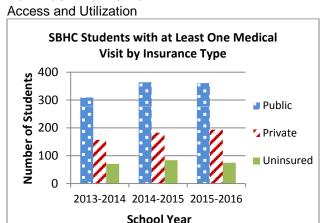
Contribution to the Result: School Based Health Centers provide healthcare for school age students, so that they are healthy and ready to learn.

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 16	\$369,727*	\$0	\$0	\$0	\$ 316,970*	\$686,697*
Estimated SFY 17	\$369,727*	\$0	\$0	\$0	\$ 316,970*	\$686,697*

Sponsoring Agency: Community Health Center, Inc.

Partners: Parents, Students, CASBHC, DPH, DSS, The CT Chapter of the AAP, School Based Health Alliance, DCF, Board of Education, School Administrators and Faculty, ESSA, Opportunity Knocks. Middletown Health Department, Middlesex Hospital

#### How Much Did We Do?



**Story behind the baseline**: In 2015-2016, the total student population for all 3 schools was 1,190. The number of students with at least 1 medical visit was 630 (53% of population). The average number of visits was 4.6 (2,896 visits for 630 served). There was an increase of 17% in the number of students served from 2013-2014 (537) to 2015-2016 (630).

In 2015-2016, of the total number of students with a medical visit (630), 361 (57%) had public insurance, 194 (31%) had private insurance, and 75 (12%) were uninsured. The breakdown of insurance types compared to the previous 2 school years showed a slight increase (2%) of those students who had private insurance and a slight decrease (1%) of

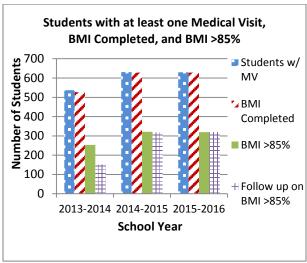
students who were uninsured. The decrease in uninsured is likely due to the Affordable Care Act and our efforts to assist students in obtaining insurance coverage. If a student is uninsured, the student and family are referred to the Access to Care program for assistance with insurance eligibility and enrollment.

### Trend: [▲]

Student Population, Enrollment, Number of Medical Visits, and									
Number Served in 3 schools in Middletown 2015-2016									
Schools	Population	Enrolled (undup patients)	Medical Visits	Medical Served					
Macdonough	208	173	436	173					
Keigwin	312	134	638	134					
Wilson	670	323	1,822	323					
TOTAL	1,190	630	2,896	630					

### How Well Did We Do?

Reduce Obesity in SBHC Users



### Story behind the baseline:

Body Mass Index (BMI) at the SBHCs is calculated by tracking height and weight on a student at every medical visit. A BMI >85% indicates that a student is overweight.

Of the 630 students that had a medical visit in 2015-2016, 628 (99.7%) had their BMI measured. Of those,320 (51%) had a BMI >85% and all 320 received nutritional and physical activity counseling. This was an increase from the 2013-2014 school year of when 527 (98%) students had BMI measured,

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253 (48%) had a BMI >85%, and only 152 (60%) received follow up nutritional/physical activity counseling.

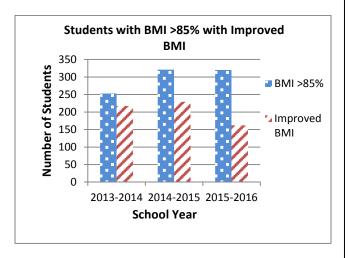
During the school year 2014-2015, 631 students received a medical visit. A total of 628 (99%) BMI measures were conducted at these visits. Overall, 51% (321) of these students measured a BMI >85%. Of those students with BMI >85%, 99% (318) received follow up nutritional/physical activity counseling.

All students with elevated BMIs are counseled on weight and are offered nutrition follow up either through one-on-one visits or participation in nutrition groups. The number of students who participated in the nutrition groups and one-on-one visits was not tracked for the 2015-2016 school year. The numbers will now be tracked starting in the 2018-2019 school year.

Trend: [▲]

Is Anyone Better Off?

Improved BMI



Story behind the baseline: During the 2015-2016 school year, the number of students with an improved BMI was 162 (51%). Improvement in BMI is considered any decrease in the BMI number. In 2013-2014, 217 (86%) students and in 2014-2015, 229 (72%) students who had a BMI >85% had improved their BMI during the school year. At each counseling visit, a new BMI was completed and progress captured.

Although the number of students receiving follow up nutritional/physical activity counseling on BMI has steadily increased from the 2013-2014 school year to the 2015-2016 school year, the number of students with BMI improvement has decreased. One major reason for the decrease in improved BMIs during the 2015-2016 school year was due to an APRN being on maternity leave at Keigwin and Macdonough schools. While coverage was provided for the leave and nutritional counseling was offered, the regular nutrition group did not meet that school year. It is likely that the decrease in improved BMIs is due to the termination of this group. The nutrition group will be offered in the upcoming school year, and will continue to be offered going forward in order to increase the number of improved BMIs again.

# Trend: [▼]

\* Reflects funding provided to all of the SBHC for Medical and Mental Health services.

# **Proposed Actions to Turn the Curve:**

#### How Much Did We Do:

- The SBHC staff will attend school functions, including parent nights, conferences, and other school functions where families are present.
- Staff will provide presentations to health classes, and enhance the publicity of school based services in a variety of mediums including websites and newsletters.

 Enrollment forms will be available on an electronic platform and posted on district wide websites.

#### How Well Did We Do:

- Staff will continue to track BMIs through our electronic health record.
- Staff will continue to provide one-on-one nutrition counseling to students with elevated BMIs.

## Is Anyone Better Off:

- Presentations on healthy eating will be offered in health classes.
- The nurse practitioner will encourage students with elevated BMIs to increase physical activity.

## **Data Development Agenda:**

- To align EHR (eClinical Works) generated reports to meet DPH requirements.
- The follow up work conducted by staff in gathering insurance information and referring clients to www.insurekids.gov and CHC's Access to Care is currently not in a reportable format within the EHR. School based staff will continue work with Business Intelligence (BI) team members to develop a tracking system that will allow accurate reporting that clearly demonstrates the work being conducted in this area.
- Tracking methods for current and historical enrollment, as well as a planned care dashboard, are being developed. The dashboard will allow staff to monitor clients who are due for assessments and vaccines and tests.