2015-2016 New London – School Based Health Centers, Medical Services (grades 6-8)

ISAAC: Inter-district School For Arts And Communication

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.

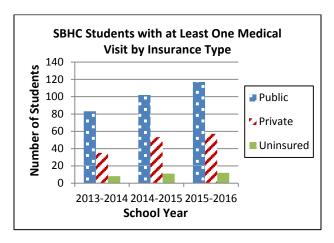
Program Expenditures	DPH SBHC Funding	Other State Funding	Federal Funding (MCHBG, ACA)	Total Other Funding (Other federal, Local, Private)	Reimbursement Generated	Total Site Funding
Actual SFY 16	\$113,424*	\$0	\$0	\$0	\$163,804	\$277,228*
Estimated SFY 17	\$113,424*	\$0	\$0	\$0	\$163,804	\$277,228*

Sponsoring Agency: CHC Inc.

Partners: Parents, Students, CASBHC, DPH, DSS, School Administrators and Faculty.

How Much Did We Do?

Access and Utilization



Story behind the baseline:

In 2015-2016, the total student population for the Inter-district School for Arts and Communication (ISAAC) was 271. The number of students with at least 1 medical visit was 186 (69% of student population). The average number of visits was 7.6 (1,416 visits for 186 served). There was a large increase of 48% in the number of students served from 2013-2014 (126) to 2015-2016 (186).

In 2015-2016, of the total number of students with a medical visit (186), 117 (63%) had public insurance,

57 (31%) had private insurance, and 12 students (6%) had no insurance. This breakdown of insurance type was consistent with the previous two school years. If a student is uninsured, the student and family are referred to the Access to Care program for assistance with insurance eligibility and enrollment.

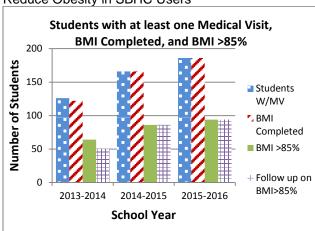
The continued increase in visits is attributed to the growing school population, largely due to school renovations/additions that have allowed for larger class sizes.

	Student Population, Enrollment, Number of Medical Visits, and Number Served in ISAAC 2015-2016							
	Schools	Population	Enrolled (undup paients)	Medical Visits	Medical Served			
ĺ	ISAAC	271	186	1416	186			

Trend: [▲]

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 186 students that had a medical visit in 2015-2016, 100% (186) had their BMI assessed. Of those, 94 (51%) were found to have a BMI >85%, and all 94 students (100%) were offered nutrition/physical activity counseling. This was an increase in BMI tracking and counseling from the 2013-2014 school year when 122 (97%) had their

2015-2016 New London – School Based Health Centers, Medical Services (grades 6-8)

ISAAC: Inter-district School For Arts And Communication

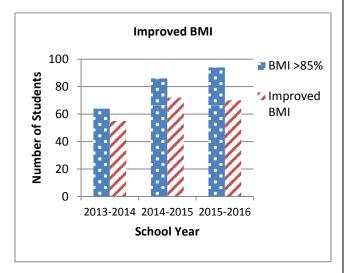
BMI assessed, 64 (52%) had a BMI >85%, and 50 (78%) received nutrition and physical activity counseling. It was the same as the previous school year, when all students with a medical visit had their BMI assessed, and those with a BMI >85% (86 students) were all provided counseling.

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 2017-2018 school year.

Trend: [▲]

Is Anyone Better Off?

Improved BMI



Story behind the baseline:

In 2015-2016, 70 of the 94 students (75%) saw improvement in their BMI during the school year.

Improvement in BMI is considered any decrease in the BMI number. In 2014-2015, 72 of 86 students (84%) saw improvement and in 2013-2014, 55 of 64 students (86%) saw improvement in their BMI during the school year.

Although the percentage of students that have improved their BMI has decreased, the total number of students receiving nutrition/physical activity counseling at the medical visit has increased overall, providing more opportunities for students to improve their BMI. At each counseling visit, a new BMI was completed and progress captured. Visits for nutrition and physical activity counseling happened routinely every 2-4 weeks. Providers have increased their outreach efforts considerably around physical activity and nutrition counseling. This has been made a SBHC goal for this school year and providers have routinely scheduled follow up visits with students at risk following each visit. Nutrition and physical activity counseling will continue to be offered to all students with a BMI >85% in an effort to reduce the number of students with at risk BMIs.

Trend: [▲]

Notes:

* Reflects funding provided to the SBHC for Medical and Mental Health.

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 track BMIs through our electronic health record.
- Staff will 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.