

## 2015-2016, Norwalk – School Based Health Centers, Medical Services (grades 9-12)

Norwalk High School, Brien McMahon High School & Norwalk Pathways Academy

*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.

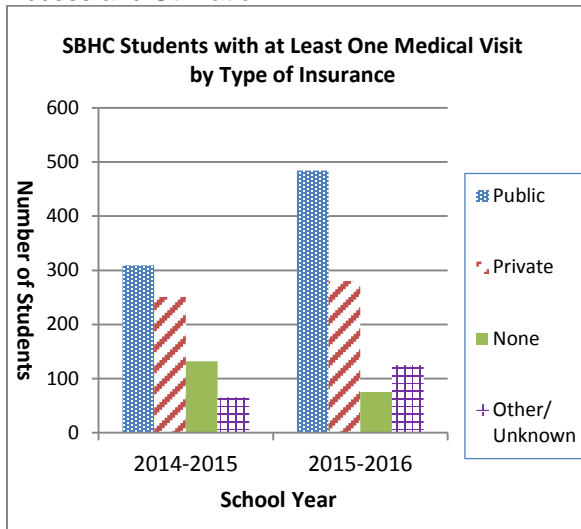
Program Expenditures	DPH SBHC Funding	Other State Funding	Federal Funding (MCHBG, ACA)	Total Other Funding (Other federal, Local, Private)	Reimbursement Generated	Total Site Funding
Actual SFY 16	\$315,444*	\$0	\$0	\$0	\$113,191*	\$428,635
Estimated SFY 17	\$296,865*	\$0	\$0	\$0	\$115,000*	\$411,865

*Sponsoring Agency:* Human Services Council of Mid Fairfield

*Partners:* CASBHC, DPH, DSS, DMHAS, DCF, School Based Health Alliance, School Administrators and Faculty, Norwalk Community Health Center, Family & Children's Agency, Norwalk Health Department, Child& Family Guidance, Norwalk Hospital, Norwalk Board of Education, Students, Parents Faculty, school nurses

### How Much Did We Do?

Access and Utilization



### Story behind the baseline:

In 2014-2015 the total student population for all 3 high schools was 3,307, and the total enrolled in the School Based Health Centers (SBHCs) was 1,572 (48% of population). The number of students with at least one medical visit was 757 or 23% of the total population. The 2015-2016 school population was 3,409 of which 1,547 (45%) were enrolled in SBHC services and 964 students had at least one medical visit (62% of students enrolled in the SBHC). While

SBHC enrollment was static, there was an increase in numbers served. There was an increase of 27% in the number of students served from 2014-2015 (757) to 2015-2016 (964). The average number of visits was 2.9 (2,810 visits for 964 served).

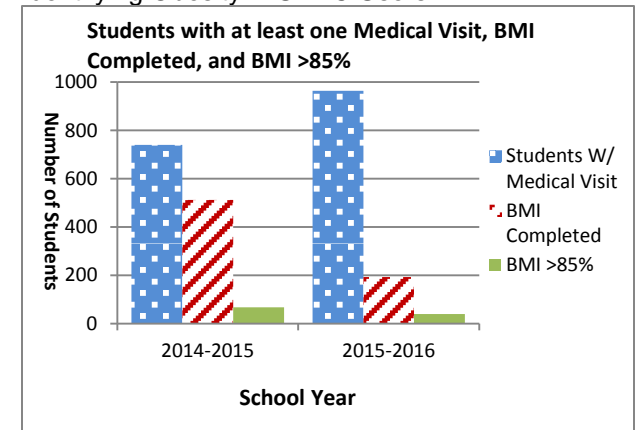
In 2015-2016, there were 484 (50%) students with public insurance, 280 (29%) with private insurance, 75 (8%) with no insurance, and 125 (13%) with other or unknown insurance status. This is a large increase in the number of students with public insurance from 41% (309 students) from the previous year. Those who had had a status of none or unknown increased by 17% from 2014-2015 (197) to 2015-2016 (230) despite outreach and inclusion supported through the Affordable Care Act. This result may be indicative of the population mix and the number of immigrant/undocumented students in the 3 Norwalk High Schools. The percent of students with private insurance increased by 10% in 2015-2016.

**Trend:** [▲]

Student Population, Enrollment, Number of Medical Visits and Number Served in Norwalk's 3 High schools 2015-2016				
Schools	Population	Enrolled	Medical Visits	Medical Served
Norwalk HS	1,611	654	926	463
Brien McMahon HS	1,683	784	1,510	431
Norwalk Pathways Academy	115	109	374	70
<b>Total</b>	<b>3,409</b>	<b>1,547</b>	<b>2,810</b>	<b>964</b>

### How Well Did We Do?

Identifying Obesity in SBHC Users



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

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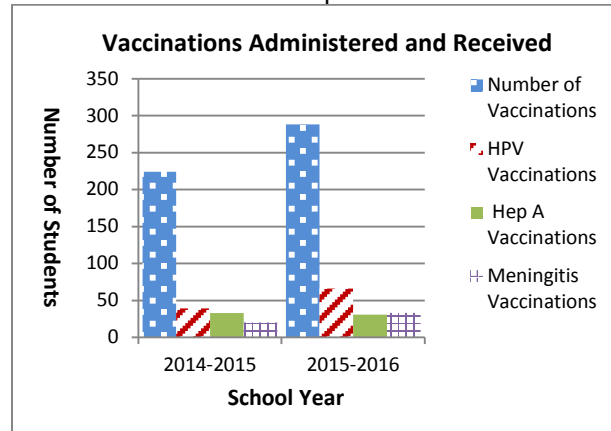
### Story behind the baseline:

During the 2015-2016 school year, 964 students had a medical visit. Of those students, 193 had their BMI calculated (20%) and of those reports 40 (21%) had a BMI  $\geq$  85%. While the number of students with a medical visit increased from 740 in the previous school year to 964, the number of those who had a BMI completed decreased from 512 (68%) to 193. The decrease in those with BMI completed resulted from reduction in physical exams ratio to total medical visits. All students with a physical during the school year had their BMI calculated. When a student's BMI is  $\geq$  85%, the student is offered nutrition and physical activity counseling.

Trend: [▼]

### Is Anyone Better Off?

Reduce the occurrence of preventable diseases



**Story behind the baseline:** As primary health providers, SBHC practitioners always include routine recommended vaccines as part of the care they deliver. Each patient's vaccination status is assessed and they are offered recommended vaccines or are referred to their primary care provider (PCP) for recommended vaccinations. During 2014-

2015 total vaccines numbered 224, that number increased to 288 in 2015-2016 a 29% increase. In 2015-2016, there were 66 HPV vaccinations administered, 31 Hepatitis A vaccinations administered, and 33 meningitis vaccinations administered. This was an increase from 39 HPV vaccinations and 20 meningitis vaccinations and slight decrease from 33 hepatitis A vaccinations the previous school year.

There has been steady increase in vaccination rates across the mandatory vaccines. Influenza vaccine continues to lag and a cohort such as a school environment is ideal for herd immunity to have an effect. Flu vaccine drives can also assist in bringing new enrollees to the school based clinic.

Trend: [▲]

Notes:

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

### Proposed Actions to Turn the Curve:

#### How Much Did We Do:

- Participate at school orientations and PTA open house to increase parent knowledge of the SBHC programs.
- Clinical staff will provide in class presentations to increase student awareness of the SBHC programs.
- Each sites' administrator will follow up on all enrollment packets for completion of insurance and demographic information.
- Enrollment statistics will be addressed at monthly staff meetings and all staff will be introduced to their role of marketer and outreach worker for the program.

### How Well Did We Do:

- Calculate BMI on every student that comes to the SBHC for a medical visit and provide nutrition and physical activity counseling to those with BMI  $\geq$  85%.
- Follow up with students with a BMI  $\geq$  85%.

### Is Anyone Better Off:

- APRN will review vaccine status of all students making a medical visit to the SBHC to identify students not current with their required immunizations.
- APRN will work with community providers and the school nurse to track and vaccinate those students who are non-compliant.
- All students will receive education on preventing acute illness such as colds and flu.

### Data Development Agenda:

1. Document in Advanced MD EHR pre and post-test results for counseling on nutrition and physical health. BMI will be required at all visits so that tracking of this can be facilitated
2. Document on EHR actual weight loss.
3. Work to ensure EHR data can be extracted and sent to DPH.

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