

2014 Program Report Card: Asian Studies Academy at Bellizzi Middle School School-Based Health Center (K-8)

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

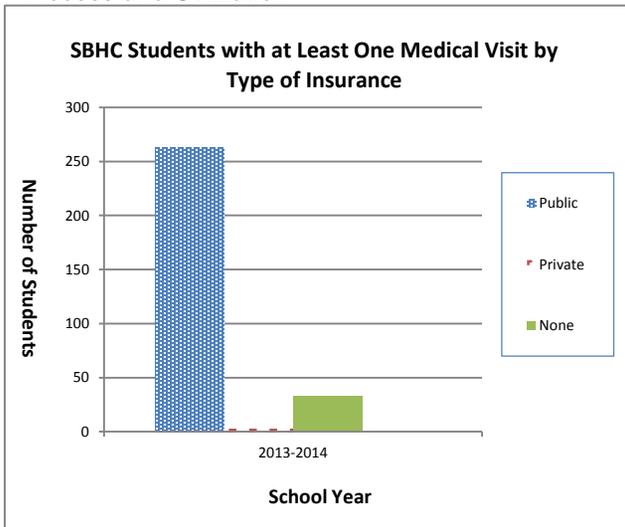
Contribution to the Result: School Based Health Centers provide healthcare access for school aged students, so that they are healthy and ready to learn.

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	\$98,305	\$0	\$0	\$84,000*	\$961	\$183,266
Estimated SFY 15	\$92,020	\$0	\$84,919**	\$84,500*	\$26,000	\$287,439

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 Healthy Eyes Alliance, Greater Hartford Lions Club.

How Much Did We Do?

Access and Utilization



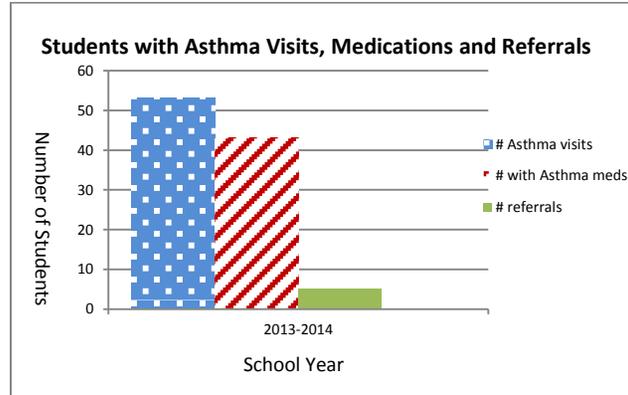
Story behind the baseline: This is a startup SBHC with no previous data for comparison. The total school population for Asian Studies at Bellizzi is 652. The number of students enrolled in the SBHC by the end of the report period was 307, or 47% of the total school population. Since the minimum expectation according to our Quality Improvement Plan for a first year facility is 40%, this outcome is above expectations. With increased awareness of the SBHC at Bellizzi, enrollment should continue increasing in the next year.

For 2013-2014 Medical insurance types among users, totaling 297, of SBHC services was approximately 88% (263 users) public insurance, 11% (33 users) no insurance or not eligible and 1% (1 user) private or not identified over the timespan. Staff refers uninsured students to CT Husky and encourages all parents to make sure that their child’s enrollment to Husky is current. Additionally, over the years we have worked with CT DSS to make the enrollment process more effective and efficient.

Trend: [◀ ▶]

How Well Did We Do?

Reduce Number of Asthma Severity and Frequency Visits to SBHC



Story behind the baseline: This data will be the baseline for asthma reportage at Bellizzi. Even though

there was incomplete data regarding asthma action plans during the report period, according to our nurse practitioner at Bellizzi about 90% (42) 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. However, there is information in the student history table of the SBHC database regarding those students who have asthma (chronic issue) and the number 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 unduplicated 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, to either their PCP, parent or the emergency room.

In 2013-2014, 47 (approximately 18%) unduplicated SBHC registered users at the Bellizzi SBHC presented for services related to asthma. This percentage approaches that expected according to recent research efforts by Connecticut Children’s Medical Center (Building Bridges Program), the expected incidence of asthma in Hartford is about 25% of children in the elementary school age group. There is need to be more aggressive in identifying and providing service for students with asthma. Bellizzi is a new site and will require increased efforts on the part of the nurse practitioner and the school nurse working in collaboration to ensure that students with asthma are appropriately treated and monitored and that the data is captured in the database.

Currently, many non SBHC schools in the district have initiated the CCMC Building Bridges program

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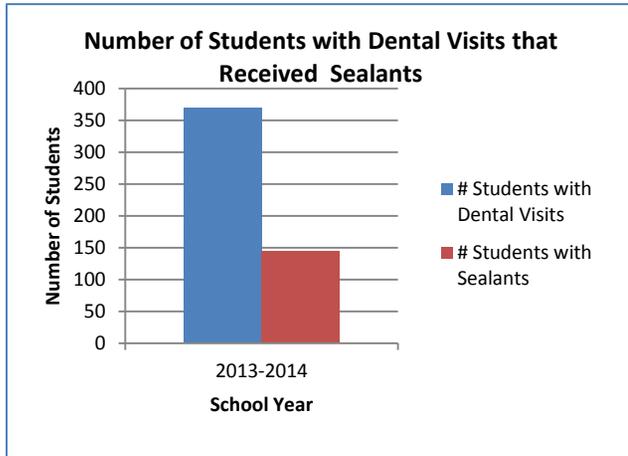
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designed to promote communications between parents, students, PCPs and school nurses with regard to students with asthma. The project includes determination of the severity of student asthma, asthma plan creation and follows up. All information is included in the student's nursing record which follows the student through his/her career in the Hartford Public School district including when/if they become students at our SBHC sites and enroll for SBHC services.

Trend: [◀▶]

Is Anyone Better Off?

Number of Students with Dental Visits that Received Sealants



Story behind the baseline: Dental services are provided by the dental assistant, hygienist and dentist at each site. Students are enrolled using a separate dental registration form. Medical and dental student registration documents will be combined to reduce the amount of paper that parents have to complete.

144 of 370 (39%) SBHC enrolled students who came in for dental treatment received sealants as a preventive measure. The figure does not reflect what percentage of the 370 had received sealants in previous years. In other words, in performing the dental assessment for the 370 students, 144 (39%) were found in need of sealants at the time of the examination and those teeth were sealed.

It is the policy of the dental program that all students presenting for dental services will be given an oral examination and dental health education as a part of an ongoing preventive effort. When other services are found necessary during the course of the oral risk assessment, then further visits will be scheduled to provide those services. Services that cannot be addressed by our practitioners are referred to outside practitioners. Referred services are usually less than 2% (5 users at this site).

This graph does not reflect the true scope of dental services provided to our SBHC users, including, oral health screenings, oral hygiene instruction, fluoride and dental caries treatments and documentation of oral health risk assessment. The numbers of students receiving these services were: 265 (72%) students received fluoride treatment; 127 (34%) students received fillings to address dental caries.

Trend: [◀▶]

Notes:

* Reflects funding provided by the local Board of Education Partnership Grant.

** Reflects funding provided by the MCHBG portion of the DPH grant.

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 a plan present, practitioner will write new asthma action plan in conjunction with the student's PCP and the school nurse.
- 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 with asthma.
- Nurse practitioners at each site will offer at least one asthma awareness class for parents along with individual parent instruction

Dental Sealants:

- Dental screenings/exams are performed twice annually. Increase student SBHC enrollments.
- Staff will schedule students for regular preventive and treatment visits. Students are scheduled for dental exams twice yearly
- Clinic users will receive appropriate sealant/preventive/ treatment from licensed hygienists and dentists.

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 SBHC data base.
- All visit/exam information will be documented on an encounter form (dental superbill) and entered to the SBHC data collection database (data will include but is not limited to the American Dental Association procedure number, tooth number and surface number where applicable).