

2014 Program Report Card: New Britain High School Based Health Center (9-12)

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

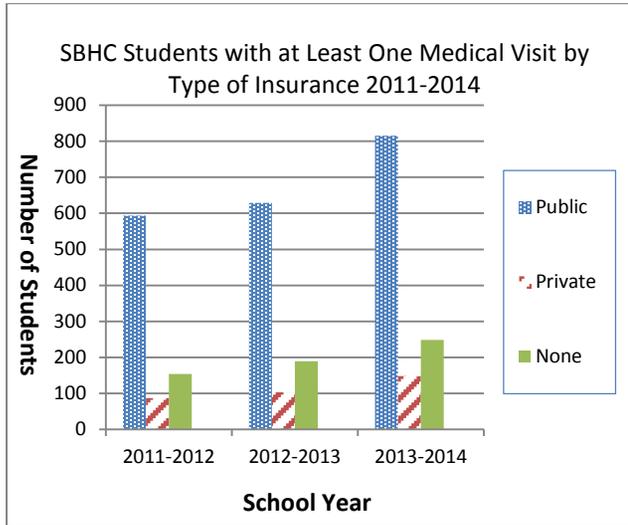
Contribution to the Result: School Based Health Centers provide healthcare access for school aged students, so that they are healthy and ready to learn.

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	\$141,871	\$0	\$0	\$0	\$0	\$141,871
Estimated SFY 15	\$141,871	\$0	\$0	\$0	\$0	\$141,871

Partners: Parents, Students, CASBHC, DPH, DSS, DMHAS, The CT Chapter of the AAP, School Based Health Alliance, Healthy tomorrows, Board of Education, Local Behavioral Health Agency, School Administrators and Faculty.

How Much Did We Do?

Access and Utilization



Story behind the baseline: The total school population for 2011- 2012 was tracked by staff using spreadsheets. These spreadsheet contained information specifically for Public and privately insured. The accuracy of number of uninsured enrolled is not verified. This method showed 834 students enrolled in the health center in the 2011-2012 school year. Enrollment in the health center has increased

from 834 students in 2011-2012 to 921 in 2013-2014, increasing the demand for services. Marketing efforts were increased in the 2013-2014 school year. Letters and flyers with information about the SBHC were developed in English, Spanish and Polish along with promotional give aways, such as water bottles, pencils, erasers and sharpeners. SBHC staff also presented information about the SBHC to parents of all incoming students and at open houses for parents. SBHC staff visited every classroom in school to present information about the clinic and resources available. The SBHC staff has a great reputation for quality care, which helped to make the program very successful with the highest enrollment to date.

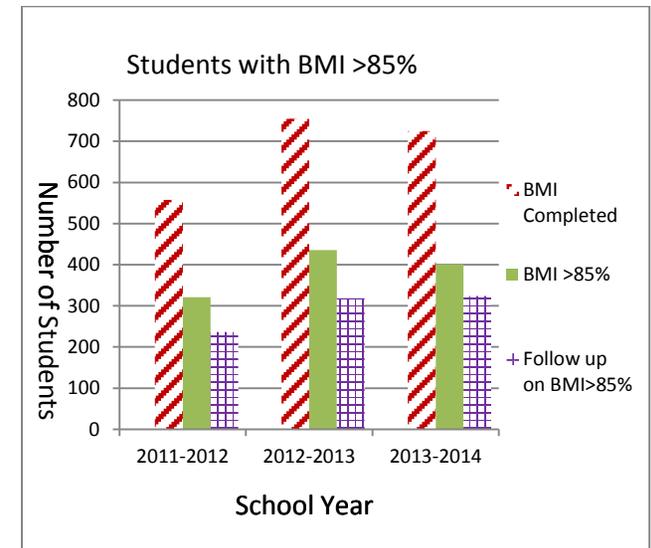
The number of students with at least 1 medical visit has increased annually. In 2012- 2013, 921 students were seen and in 2013-2014, 1212 students were seen, representing a 31.6% increase. For the school year, the majority of medical visits were made by 815 students who were publicly insured (67%), followed by 249 uninsured students (20.5%) and 148 privately insured students (12%). A similar distribution of insurance types was observed in previous school years for those students utilizing health center services.

The number of students who utilized the center for behavioral health visits has increased over the past two years. Fifty-two students of the students enrolled (6.2%) had at least 1 mental health visit in 2012-2013. That number increased to 68 students (7.4%) in 2013-2014.

Trend:[▲]

How Well Did We Do?

Reduce Obesity in SBHC Users.



Story behind the baseline: Body Mass Index (BMI) is now documented for every student at the school based health center (SBHC) for every medical visit. The Community Health Center (CHC) data team developed a

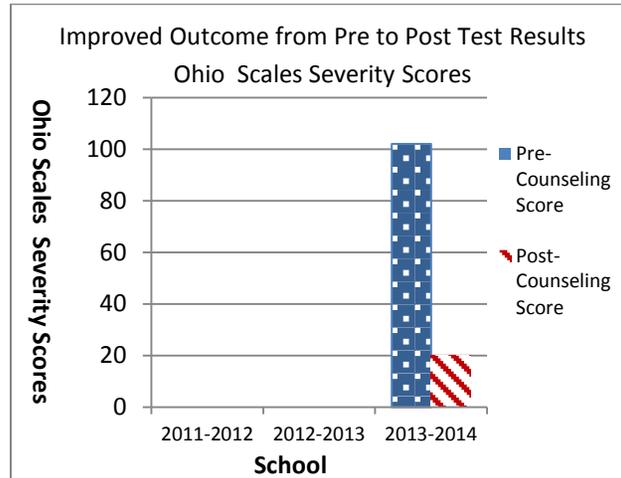
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tracking system within our Electronic Health Record (EHR) to collect BMI results. In 2011-12, approximately 558 (86.2%) of students had their BMI calculated. Of the 558 students, 321 (57%) resulted in a BMI >85% and 237 (42%) had a follow up visit. In 2012-13 school years, 755 students were seen at the SBHC and had their BMI calculated. 436 (58%) of these students had a BMI of >85% and 319 students (73%) had a follow up visit. In 2013-2014, 1451 students were seen at the SBHC. 725 students (50%) had a BMI completed. Of these students, 401 (55%) had a BMI >85% and 324 (81%) had a follow up visit. New Britain High's SBHC was a grant recipient which provided funds to support a program that initially targeted Latino high school women with a high BMI, "Healthy Tomorrows." In addition to nutritional counseling from the SBHC Medical Provider, each patient that met this program's criteria was offered to join. Healthy Tomorrows' consisted of a one year membership to the local YWCA as well weekly incentives to members who referred others to join. In addition, every student with a BMI>85% did receive an opportunity for individual nutritional counseling with the SBHC Medical Provider and referrals to the CHC dietician.

SBHC users with a written plan to improve nutrition and increase physical activity and who received follow-up reported a positive lifestyle change (e.g. increased physical activity, improved nutrition, reduced "screen" time, and elimination of sugary snacks in their diet).

Trend: [▲]

Is Anyone Better Off? Mental Health Improvement



Story behind the baseline:

Sixty eight (68) students in 2013-2014 enrolled in the SBHC had at least one behavioral health visit during the school year. Of those that had at least one behavioral health visit, 68 students (100%) received a behavioral health assessment and were administered the Ohio Scales for Youth (OSY) at intake to obtain a baseline level of functioning. Of the 68 that received a behavioral health assessment and problem severity score, 55 students (82%) completed three months of regular therapy and were re-administered the OSY to see if any changes in overall problem severity occurred.

Of the 55 students who completed three months of regular therapy and were re-administered the OSY, 19 (35%) reported a decrease in problem severity and met/partially met their treatment goals. The remaining 36 (65%) that did not show improvement were identified as having behavioral health needs that exceeded the scope of services provided through the SBHC and were referred to an outside behavioral health agency for treatment. Quarterly check-in with the referring source was made.

Trend: [▲]

Proposed Actions to Turn the Curve:

Access and Utilization:

- 1) 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.

Obesity Reduction:

- 2) The APRN will offer individual weight management to students identified as at-risk for obesity and overweight. The APRN will discuss healthy eating, exercise, and community programs for weight loss and healthy living.

Mental Health Services:

- 3) SBHC staff will provide SBHC orientation sessions to all new and existing school personnel. Orientation will include information on the behavioral health services offered through the Center, the referral process and the importance of linkages with community service providers and other resources. SBHC will work collaboratively with school staff to identify students at risk and ensure a coordinated approach to addressing student/family need. SBHC staff will also establish and maintain collaborative relationships with new and existing community based providers to ensure continuity of care and access to needed resources.

Data Development Agenda:

1. Work with Electronic Health Record Vendor:
 - To align EHR generated reports to meet DPH requirements
 - The CHC date team to streamline the process of exporting our data from EHR to DPH