

2014 - 2015 Program Report Card: Hartford - MD Fox 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.

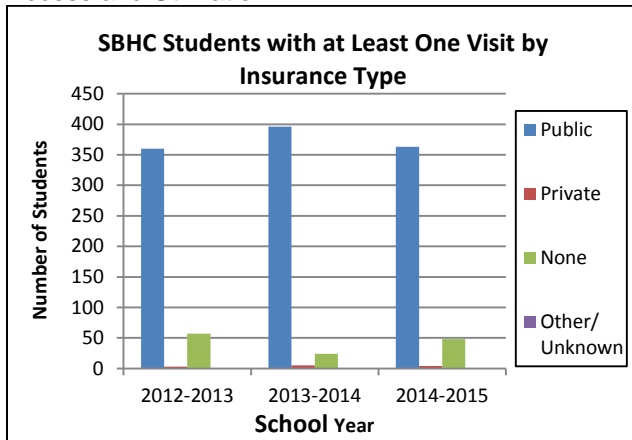
Program Expenditures	DPH SBHC Funding	Other State Funding	Federal Funding (MCHBG, ACA)	Total Other Funding (Other federal, Local, Private)	Reimbursement Generated	Total Site Funding
Actual SFY 15	\$234,752	\$0	\$0	\$84,500 *	\$205,818**	\$525,070
Estimated SFY 16	\$240,173	\$0	\$0	\$105,000*	\$252,684**	\$597,857

Sponsoring Agency: Hartford Board of Education

Partners: Parents, Students, CASBHC, DPH, DSS, School Based Health Alliance, Board of Education, Hartford Health Department, 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 Easy Breathing for Schools, CCMC CASE, Ct State Dental Association, Hartford Care Coordination Collaborative, Connecticut Interscholastic Athletic Conference, Healthy Eyes Alliance, Greater Hartford Lions Club, Brain Injury Alliance of CT, AMR CPR Training, Community Health Centers, Inc.

How Much Did We Do?

Access and Utilization



Story behind the baseline:

MD Fox is in its second year at its current address. Previously the site was split between two temporarily licensed facilities while the building underwent extensive renovations. The site is, therefore, in a process of rebuilding its SBHC enrollment. The total school population for MD Fox is 674. The number of students enrolled in the SBHC was 416, or 62% of school total.

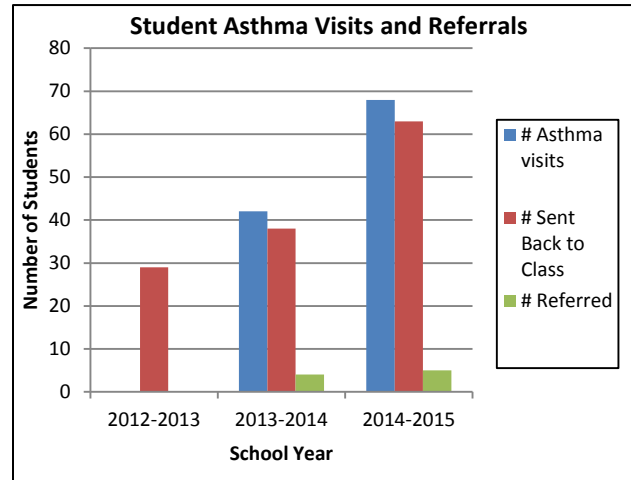
For 2014-2015 Medical insurance types among users of SBHC services was approximately 87% (363 users) public insurance, 11% (49 users) no insurance or not eligible, >1% (4 users) private insurance and one student with no identified health insurance over the

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 Hartford Public Schools has worked with CT DSS to make the enrollment process more effective and efficient.

Trend: [▲ Yes]

How Well Did We Do?

Reduce Number of Asthma Severity and Frequency Visits to SBHC



Story behind the baseline:

The nurse practitioner at MD Fox is responsible for assuring that students presenting with asthma have asthma action plans and understand how and when to use the students' asthma medication. If students do not have an action plan, the nurse practitioner will create one and provide the appropriate education. Work continues with CCMC Easy Breathing for Schools program on improving collaboration between SBHC practitioners and PCPs to ensure better asthma control among our students.

Out of 68 asthma visits at MD Fox during 2014-2015 63 (93%) students were sent back to class. Five students (7%) were sent home and of these 2 were sent to the ER. This illustrates the importance and the effectiveness of the SBHC in getting students back to the classroom as quickly as possible, creating better long term academic outcomes.

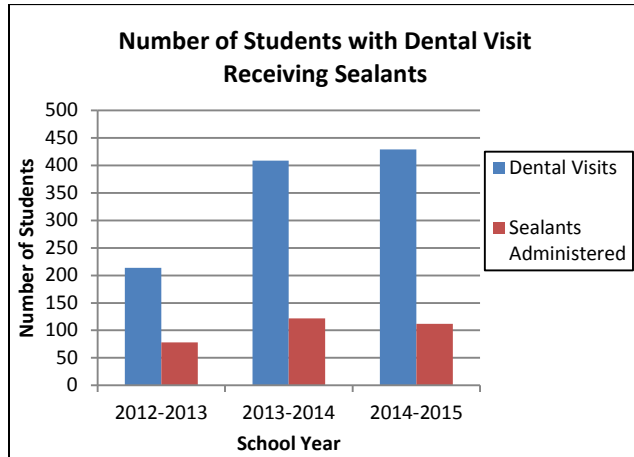
The expected incidence of asthma in Hartford is about 25% of children in the elementary school age group. As the data reflects (68 asthma visits in 14-15 versus 41 visits in 13-14), Hartford Public Schools has been more aggressive in identifying and providing service for students with asthma. MD Fox has seen increased efforts on the part of the SBHC nurse practitioner and the school nurse working in collaboration to ensure that students with asthma are appropriately treated and monitored.

Trend: [▲]

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Is Anyone Better Off?

Number of Students with Dental Visits that got Sealants



Story behind the baseline:

Dental services are provided by the dental assistant, hygienist and dentist. Students are enrolled using a separate dental registration form. The medical and dental student registration documents have been combined to reduce the amount of paper that parents have to complete.

In 2014-2015 112 of 429 (26%) SBHC enrolled students who came in for dental treatment received sealants as a preventive measure compared to 122 of 409 (30%) in 2013-2014. The figure does not reflect what percentage of the 429 had received sealants in previous years. In other words, in performing the dental assessment for the 429 students, 112 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 twice yearly 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).

A dental sealant quickly bonds into the depressions and grooves of the teeth, forming a protective shield over the enamel of each tooth. Children should get

sealants on their permanent molars and premolars as soon as these teeth come in. In this way, the sealants can protect the teeth through the cavity-prone years of ages 6 to 14. Sealants can protect teeth from decay for up to 10 years and need to be applied only once, but they should be checked for chipping or wearing at regular dental check-ups and reapplied if needed.

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 in 2014-2015 were: 238 (55%) students received fluoride treatment; 85 (20%) students received services to address dental caries.

Trend: [▲]

Notes:

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

** Includes medical and dental reimbursements

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, the nurse 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.

Dental Sealants:

- Staff will schedule students for regular preventive and treatment visits. The goal is to schedule students for dental exams twice yearly.
- Clinic users will receive appropriate sealant/preventive/ treatment from licensed hygienists and dentists.

Data Development Agenda:

- The first attempt at instituting an Electronic Health Record for Hartford SBHCs was not successful. Practitioners found the EHR cumbersome and not user friendly. Hartford will continue to explore other options to streamline the process of exporting our data from an EHR to DPH
- Data entry staff and/or Medical Assistants will use existing data to enter all encounter visit data and date of asthma action plan to the SBHC data base.
- All dental 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).