

## 2014-2015 Norwalk - Human Services Council – Dr. Robert E. Appleby School Based Health Centers Briggs High School (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.

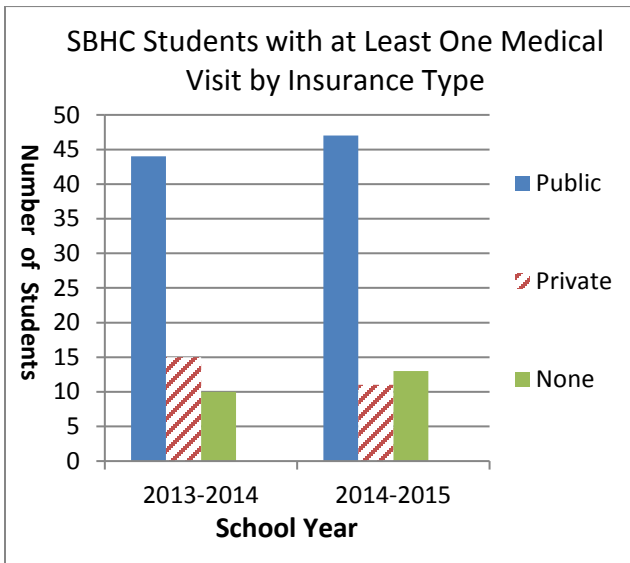
Program Expenditures	DPH SBHC Funding	Other State Funding	Federal Funding (MCHBG, ACA)	Total Other Funding (Other federal, Local, Private)	Reimbursement Generated	Total Site Funding
Actual SFY 14	\$83,841	\$0	\$0	\$0	\$14,411	\$98,252
Estimated SFY 15	\$86,572	\$0	\$0	\$0	\$17,550	\$104,122

*Sponsoring Agency:* Human Services Council of Mid-Fairfield

*Partners:* Parents, Students, Norwalk Public Schools Administrators and Faculty, Norwalk Board of Education, Norwalk Community Health Center, Family & Children's Agency, Norwalk Health Department, Children and Family Guidance, Norwalk Hospital, Connecticut Association of SBHC, DPH, DSS, DMHAS.

### How Much Did We Do?

Access and Utilization



There were 55 medical users (71% utilization) and 46 mental health users (60% utilization) in the 2014-2015 school year.

The 2014-2015 visits totaled 472, a 34% decrease from 722 visits in 2013-2014. Insurance break out for the SBHC users were in similar distribution of insurance types observed in the previous school year. There were 47 students (61%) with public insurance, 11 students (14%) with private insurance, and 13 (16%) with no insurance.

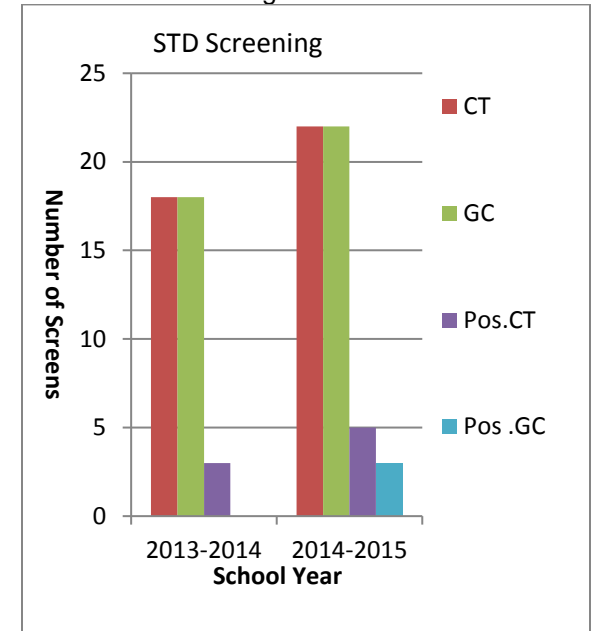
Marketing efforts were similar to past years attempts. Letters and flyers with information about the SBHC were available in English and Spanish and distributed to every student and family transferring into Briggs. Haitian language letters were developed and made available at the SBHC site. SBHC staff also presented information about the SBHC to parents of incoming students and at open houses for parents. The SBHC developed a flyer listing our services and distributed it to every school staff and faculty member. Transfer students from the other 2 High schools have SBHC chart and services transferred to NPA.

**Trend:** ◀▶

**How Well Did We Do?**

**Story behind the baseline:** Briggs High School is an alternative high school with a transient student population. The total school population for the 2014-2015 school years was 81 students with 77 of the 81 enrolled in the SBHC (95%). There was a 20% decrease in SBHC enrollment from 2013-2014 (97 students) to 2014-2015 (77) students.

### Reduce STDs among SBHC Students



**Story behind the baseline:** All SBHC users are assessed for STI risk and counseled in the methods of abstinence and safe sex practices. Initial and repeat screenings are used to evaluate efficacy of those

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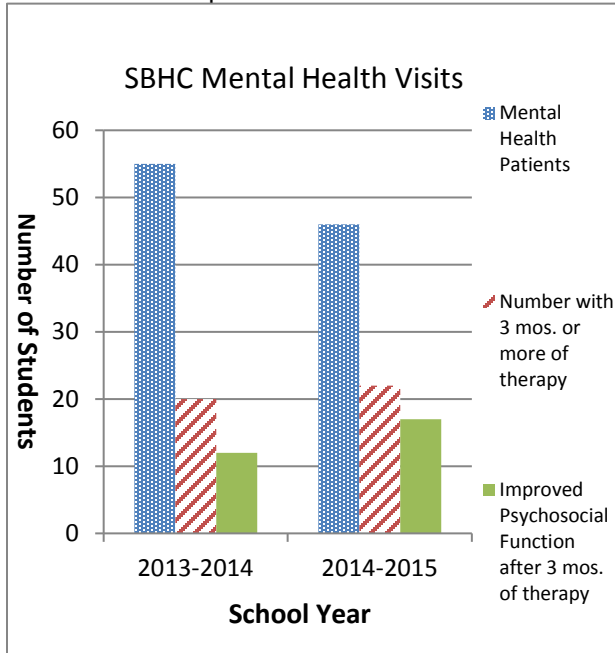
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measures and promote early treatment. In the 2014-2015 school years, the SBHC had 22 students screened for the Sexually Transmitted Diseases (STDs), chlamydia (CT) and gonorrhea (GC), based upon the student's report of being sexually active. Of those screenings, 7 (32%) resulted in a positive test which included 4 for CT, 2 for GC, and 1 for both CT and GC. The number of screenings as well as the number of positive screens increased slightly from 18 in 2013-2014 to 44 2014-2015 reporting period. The increased rate of screening is attributed medical provider providing routine screening to this sexually active population.

**Trend:** [▲]

### Is Anyone Better Off?

#### Mental Health Improvement



Forty-six students (60% of total SBHC enrollment) had one or more mental health visits totaling 252 visits. One hundred percent of mental health patients (46) received a mental health assessment utilizing the social workers

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psychosocial interviewing skills to obtain a baseline level of functioning. Of these, 4 were assessed by the SBHC psychiatrist and 2 were referred to intensive outpatient services. Ten (10) students received additional court mandated services from CT Renaissance. Four (4) were being treated by the SBHC psychiatrist.

Of the 22 students that completed three months or more of regular therapy and reassessed, 17 (77%) students were determined to have an increase in psychosocial functioning. The remaining 5 were referred to intensive outpatient services and 3 of the 5 continued in care with the SBHC provider. An increase in psychological functioning was determined by the social worker's professional judgement based on information from some or all of the following sources: patient self-reporting, parent or school staff reporting to therapist, observation of the therapist, and objective measures such as improvement in school attendance and grades.

While census and volume were shrinking, those who utilize the mental health services of the SBHC have demonstrated improved functioning as a percentile of the whole. The 2014-2015 school year statistics demonstrated an improvement of psychological functioning from 60% to 77%. The mental health provider changed during this school year.

In the 2014-2015 school year, 3 students had a physical exam and all were administered the Rapid Assessment for Adolescent Preventive Service (RAAPS) questionnaire by the medical practitioner. Based on their RAAPS survey results, all 3 students (100%) were referred by the SBHC medical practitioner to the SBHC social worker for further assessment and counseling. Of those 3 students, 2 (67%) remained patients with the SBHC social worker and 1 (33%) received mental health services with another provider.

The transient nature of this High School impacts the overall picture and dictates the nature of the utilization. Many students may have been brought up to date at one of the other School Based centers prior to transferring to Briggs High School. In that way this SBHC is prone to decreased numbers of physicals and health maintenance encounters

and cares for the high risk and episodic issues that arise in the school population.

**Trend:** [▲]

### Proposed Actions to Turn the Curve:

#### Access and Utilization:

- 1) SBHC staff will identify additional outreach activities to reach students and families including: SBHC Open House; tours; "Ask the Healthcare Provider" information table; and promoting the SBHC Facebook page.

#### STD Testing

- 1) The APRN/PA-C will offer STD testing to students identified as at-risk and as a routine screening. Patient education on safe sex practices will include both individual counselling and group presentations.

#### Mental Health Services:

- 1) SBHC staff will provide SBHC orientation information on the mental 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 on obtaining and implementing Electronic Health Records at the SBHC.
2. Identify tools and refine existing tools to measure the success of the social skills groups that are offered to students.
3. Identify or develop tools to track mental health patient's care coordination.

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