

## 2014-2015 Bridgeport, Marin School Based Health Center (Grades PK-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.

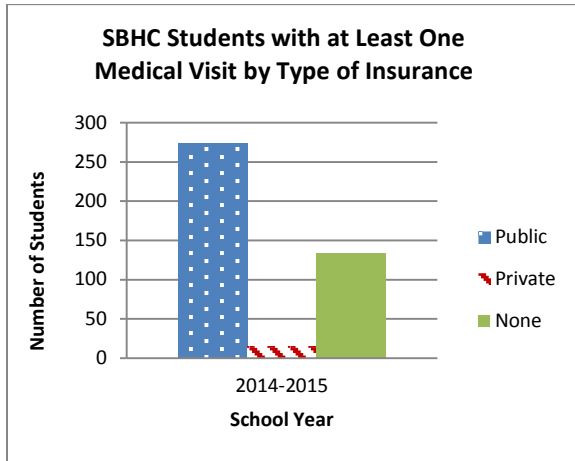
Program Expenditures	DPH SBHC Funding	Other State Funding	Federal Funding (MCHBG, ACA)	Total Other Funding (Other federal, Local, Private)	Reimbursement Generated	Total Site Funding
Actual SFY 14-15	\$151,553	\$0	\$5,596**	\$0	\$329,156	\$480,709
Estimated SFY 15-16	\$155,127	\$0	\$5,596**	\$0	\$417,469	\$572,596

*Sponsoring Agency:* Optimus Health Care, Inc.

*Partners:* Parents, Students, CASBHC, DPH, Board of Education City of Bridgeport, SBHC Advisory Board, School Administrators, Faculty.

### How Much Did We Do?

Access and Utilization



#### Story behind the baseline:

This SBHC serves a diverse inner city student population. Since 2014-2015 is the first year of reporting, the data will be baseline

In 2014-2015, the school population was 889. Of those 695 (78%) students were enrolled in the SBHC. Of those, 421(60%) students had at least one medical visit. Of those, 273 (65%) students were publically insured, 14 (3%) were privately insured and 134 (32%) had no insurance. This SBHC serves a significant number of students from other countries who don't qualify for insurance coverage.

Of those that made clinical visits, 421 made a total of 1,647 medical visits, an average of 3.9 visits per student. Forty-six (7% of enrolled) students made a total of 868 mental health visits, an average of 18.8 visits per student over the same time period. This SBHC also offers dental care. Of the 2,511 visits (all services) made in 2014-2015, 134 (5%) were for dental services.

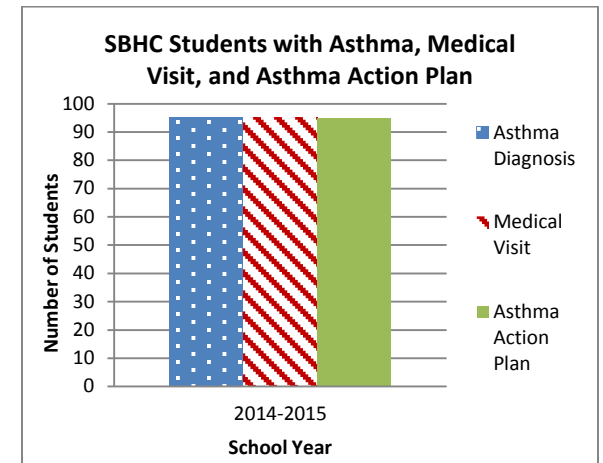
Information about SBHC services were disseminated to the school community through new faculty orientations, back to school and orientation nights, and classroom presentations reaching approximately 85% of the school population.

Outreach was provided to parents of students without insurance coverage to assist them with accessing insurance programs for which they may be eligible.

**Trend:** ◀▶

### How Well Did We Do?

Reduce the severity and frequency of asthma symptoms among students with asthma who utilize the SBHC.



#### Story behind the baseline:

In 2014-2015, 95 students enrolled in the SBHC had an asthma diagnosis. Of those, 95 (100%) had at least one medical visit. Of those, 95 (100%) had an Asthma Action Plan.

Asthma plans of care were reviewed for the year to make sure staff was prepared to carry out specific orders to ensure the overall health of the students. Asthma education/services are a vital component SBHC service delivery. Topics included but were not limited to: identifying asthma triggers, maintaining a

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good health regime to reduce student visits to the Emergency Department (ED) preventing colds and flu, and healthy eating. Healthy eating is important as obesity is associated with more severe asthma. The increase knowledge that the student obtained provided them with a sense of responsibility for their own care in terms of keeping on top of possible triggers in their home/personal environment.

In addition to education and often, reinforcement of that education is monitoring the student: seeing them anywhere from monthly to once every 2-3 months, depending upon the severity of their asthma to review their status is a part of the on-going care practice.

During this monitoring visit, the SBHC APRN: reviewed the student's asthma medications and the purpose of each, checked peak flow and oximeter readings to obtain a norm when they feel good. Peak flow meter reading will often drop off before their pulse ox readings.

**Trend:** ◀▶

### Is Anyone Better Off?

Student Satisfaction

MEASURE/QUESTION	RESPONSE (N=74/30%)
"I have learned to better manage my health"	YES-95% (N=70)
"I have missed less school since coming to SBHC."	YES-74% (N=55)
"I feel well taken care of at the SBHC."	YES-93% (N=69)
"I have changed some of my behaviors as a result of coming to the SBHC."	YES-84% (N=62)

### Story behind the baseline:

Measuring the impact of the services delivered at SBHCs must go beyond numbers. It is a given fact that providing immunizations will prevent disease. It is also an established fact that physical exams can identify potential health issues. What is harder to link to good health is for students to recognize that their behaviors affect their health status.

One method for assessing health outcomes was to administer a Student Satisfaction Survey. A sample of questions asked of students on the 2014-15 survey is presented in the above chart.

In 2014-2015, 50 nine question student satisfaction survey was distributed to each of the five SBHCs operated by Optimus Health Care, Inc. A total of 250 surveys were disseminated to SBHC users in grades 4-12. Of the 250 surveys distributed, 74 (30%) were returned.

Of the 74 students that returned the survey, 70 (95%) of them said that as the result of their involvement with the SBHC, they have learned to better manage their health. Fifty five (74%) students indicated that they missed less school since coming to the SBHC. Sixty nine (93%) students stated that they felt well taken care of at the SBHC and 84% indicated that they had changed some of their behaviors as the result of coming to the SBHC.

**Trend:** [◀▶]

**Notes:** \*\*\* Maternal and Child Health Block Grant (MCHBG) allocation spread over 10 SBHCs.

### Proposed Actions to Turn the Curve:

#### Access and Utilization:

- SBHC staff will step up marketing efforts to students, parents and school personnel by

mailing SBHC enrollment forms to first time students and kindergarteners, attending community back to school activities, and new student and freshman orientations.

### Reduce Asthma Severity:

- Provide updates/education information on asthma prevention to students on a continuous basis. Such as new trends/issues related to knowing triggers and reducing exposure to triggers, maintaining a healthy weight, maintaining healthy status overall. Information will be provided in group settings and individually.

### Student Survey:

- Increase the number of surveys distributed to students from 50 per school to 75-100 per school. Identify and implement strategies to increase the number of surveys completed and returned.

### Data Development Agenda:

- Increase capacity of SBHC staff to effectively use the electronic health record software
1. Work with Electronic Health Record Vendor:
    - To implement an EHR in the SBHC
    - To align EHR generated reports to meet DPH requirements
    - To streamline the process of exporting data from EHR to DPH