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| **Performance Measures** | Spencer |
| **Measure 1**  Documentation of Chronic Health Conditions |  |
| **Activity 1**  Collection of student and school health data |  |
| 1. Is student health data entered correctly? | Health data is entered from our Consent to School Health Services forms that are sent home at the start of each school year at SCES, TES and SCMS.  SCPS send out an Annual Health Information Update Form at the start of each school year to all students. Information from these forms is used to obtain health information on students. The school nurses review these two forms then enter, update and flag all health conditions as noted. |
| 2. Are students who need asthma rescue medications a flagged in IC? | Yes, asthma with comment such as: inhaler in health room or permission to carry |
| 3. How many students with asthma have Individual Health Plan (IHP)? (Ex. Must use inhaler before recess or PE) | Total 66 students  SCES  20 care plan and inhaler plus  7 medication permission for inhaler only  TES  21 care plan and inhaler plus  2 medication permission for inhaler only  SCMS  15 care plan and inhaler plus  1 with medication permission for inhaler only |
| 4. How many students with asthma have an Emergency Action Plan (EAP)? (What school personnel should do in case of asthma “attack”) | **56 students** have Asthma Care Plan which has ER treatment on it.  School nurses plan is to provide a laminated poster for each teacher to hang in their classroom. (from the National Asthma Education and Prevention Program)  Poster is titled:  MANAGEMENT OF ASTHMA EXACERBATIONS: School Treatment  Steps to Follow for an Asthma Episode in the School Setting When a Nurse is Not Available  At the start of the school year and as needed throughout the school year, elementary level homeroom teachers are given a Health Alert print out or an IC conditions report from the school nurse. This report is used to alert and inform the homeroom teachers of those students who have asthma and where their rescue medication is located. |
| **Measure 2**  Protocols for identifying students who need insurance |  |
| 1. How many students in your district do not have documentation of private, state, or federal health insurance? | Unsure of this number for this school year. This info is provided to the school nurses by those parents/guardians who chose to complete it on the Consent to School Health Services Form. Some will leave insurance information blank. We will begin tracking the exact numbers of students who have what kind of insurance including those who mark uninsured for the 2015-16 school year. We will refer those who mark uninsured to FRYSC. Nurses will follow up on those who do not answer the insurance question on the Consent to School Health Services. |
| 2. Does your district have a protocol in place to identify students without health care insurance? (Y/N) | We will begin tracking the exact numbers of students who have what kind of insurance as well as those who mark uninsured for the 2015-16 school year. We will refer those who mark uninsured to FRYSC. Nurses will follow up on those who do not answer the insurance question on the Consent to School Health Services. |
| 3. If no to # 2, when will a protocol will be in place to identify students w/out documentation of private, state or federal health insurance? | 2015-2016 School Year |
| **Measure 3**  Provision of technical assistance to school personnel regarding protocols for students who may need daily or emergency care management and referral to medical home for management and treatment |  |
| 1. How many school personnel have received training on the administration of daily asthma medications? | 30 staff |
| 2. How many school personnel have received training on emergency medication treatment of asthma exacerbation (“attack”)? | Approximately. 75 staff  Review of use of inhalers as needed for field trips. Staff complete the KDE Med Training Skills Challenge. |
| 3. How many students were referred to a local medical provider for asthma management? | Nurses have added the following to discharge instructions in IC so we may begin tracking that information (via an ad hoc report) for the 2015-2016 school year.  \*Refer to Medical Provider for asthma management  \*Asthma Care Plan sent home |
| 4. How many students were sent to emergency room due to asthma exacerbation (“attack”) | 1 |
| **Measure 4**  Identification of chronic risk factors that may impact asthma such as activity, diet or weight-related chronic conditions |  |
| 1. How many school personnel received professional development or technical assistance on how to assess students with asthma that may also have related conditions such as activity, diet or weight related chronic conditions? | PE teachers (5)  School nurses (3) |
| 2. How many students with asthma have been assessed for activity, diet or weight related chronic health conditions? | All students in SCES, TES and SCMS are assessed yearly for Ht. Wt., and BMI. This data is transferred to a CDC program that will graph the school by grade level and by sex.  Elementary schools use Fitness Gram and Pacer Test. |
| 3. How many students with asthma were referred to a medical home for counseling/ management of activity, diet or weight related chronic health conditions that also impact asthma? | None  For 2015-2016 school year nurses are looking at ways to confidentially offer information related to the impact of asthma to those students with BMI that fall into overweight or obese. Nurses are looking into providing this information in a sealed envelope during parent teacher conferences. |
| **Measure 5**  Reduced number of absences for students with asthma or other chronic health conditions. |  |
| 1. Does the school district have a protocol in place to monthly monitor students with 6 or more absences who also have a chronic health condition? If no, when do you anticipate implementing such a protocol? | Nurses have started reviewing student attendance more closely for the 2014-2015 school year.  Nurses developed an Attendance Monitoring Form tool that we use to compile and analyze student absences.  Nurses meet to review attendance issues.  We are finding researching attendance is very time consuming so we are progressing slower than what we would like. |
| 2. Does the School District Health Coordinator review attendance data **each month** with school health services personnel to identify students with 6 or more absences and a chronic health condition? | We are working toward this goal. We have only had time to meet twice this school year.  Our goal is to meet monthly for the 2015-2016 school year. |
| 3. Did the School District Health Coordinator and the school nurses develop intervention plans to manage students with 6 or more absences and a chronic health condition (asthma)? | Working toward this goal.  We are reviewing at the attendance policy and researching the possibility of limiting the number of doctor’s notes.  School nurses use the Attendance Monitoring Form and if we determine that the student does have Asthma and has missed 6 or more days, we will call the parent/guardian to follow up on their asthma plan of care. |
| 4. Does the School District Health Coordinator give the school administration and school board monthly updates on attendance of students with chronic health conditions? (This includes utilization of health room, return to class, d/c to home and referral to MD or ER) | Yes  The school nurses provide a monthly report that the District Health Coordinator provides to the BOE. This report includes the total number of health office visits per school per week, the number of students that stayed at school and number of students sent home as well as totals for other health related events such as: the number of hearing or vision screening completed, the number of flu shots given, number of students whose ht/wt/BMI was measured, or other nursing events such as the teaching of health programs or classes. |
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