|  |  |  |  |
| --- | --- | --- | --- |
| Data Needed (Your district’s baseline) | Number | Yes | No |
| 1. Total number of absences for students **with asthma** in pilot schools for 2016-17 | SCES-678  TES-483  SCMS-812  **Total-1973** |  |  |
| 1. Total number of students documented in IC **with asthma (pilot schools only)** | SCES-79  TES-57  SCMS-74  **Total-210** |  |  |
| 1. Total number of students **with asthma** in district pilot schools who have an inhaler | SCES-39  TES-15  SCMS-18  **Total-72** |  |  |
| 1. Number of students in district pilot schools who have an EpiPen | **EpiPens Total per school**  SCES-20  TES-2  SCMS-15  **Total-37** | **EpiPen with Asthma**  SCES-6  TES-2  SCMS-4  **Total-12** |  |
| 1. Number of students **with asthma** in pilot schools who also have an Individual Health Plan (IHP) | SCES-39  TES-15  SCMS-18  **Total-72** |  |  |
| 1. Number if students **with asthma** in pilot schools who have an Emergency Action Plan (EAP) or Asthma Action Plan | SCES-39  TES-15  SCMS-18  **Total-72** |  |  |
| 1. Number of unlicensed school personnel (UAP) trained for 2016-17 school year to administer asthma inhaler | 66 |  |  |
| 1. Number of UAP trained for 2016-17 school year to administer nebulizer treatment | 30 |  |  |
| 1. Number of UAP trainer for 2016-17 school year trained to administer an Epi-Pen | 311 |  |  |
| 1. Does your school district currently have a protocol in place to monthly review “Students with 6 or more absences and a chronic health condition” report ( yes or no) | Yes |  |  |
| 1. Does your school district currently have a “No idling” policy for buses or personal cars (yes or no) | No |  |  |
| 1. Does your school district currently have a “smoke-free campus” policy (yes or no) | No |  |  |
| 1. Does your district currently have a protocol for measuring student BMI? (yes or no) | Yes |  |  |
| 1. Does your district currently have a protocol on assessment, counseling and referrals to community-based medical providers for student on activity, diet and weight-related chronic health conditions? | Yes |  |  |
| 1. Number of students **with asthma**  with medical home | SCES-79  TES-57  SCMS-72  **Total-208** |  |  |
| 1. Does your district have a protocol to identify students with asthma who are not enrolled in private, state or federally funded? | Yes |  |  |
| 1. Total number of students **with asthma** who visited health room in 2016-17 | SCES-356  TES-288  SCMS-220  **Total-888** |  |  |
| 1. Number of students identified with chronic condition **(asthma)** that return to class after health room visit | SCES-323  TES-254  SCMS-220  **Total-797** |  |  |
| 1. Percent of students with chronic condition **(asthma)** that returned to the classroom after health room visit. | SCES-91  TES-88  SCMS-90  **Average-90%** |  |  |

CDC Definition of Individual Health Care Plan : A plan developed by school (or district) health services staff the ensures the health met. Ideally, health plan Is aligned with and complements the management plan developed by the student’s clinical provider. Describes the provisions the school will make to address the student’s need. May be used in place of or in conjunction with other health-related, education-related or condition specific plans, such as Asthma Action, Emergency Action Plan, 504 Plans, IEP and Medication authorizations.

IHP typically includes:

1. Information regarding condition specific daily and emergency management activities including:

1. Signs and symptoms of a well-controlled condition
2. Signs and symptoms of an exacerbation of the chronic condition that requires immediate action
3. Medication

2. Appropriate and necessary permissions to facilitate communication among schools, families, and providers, as well as granting the school permission to administer medication when appropriate.

a. Medication authorization forms, if appropriate

b. Parent/guardian authorization form for medication and/or treatment , as appropriate