

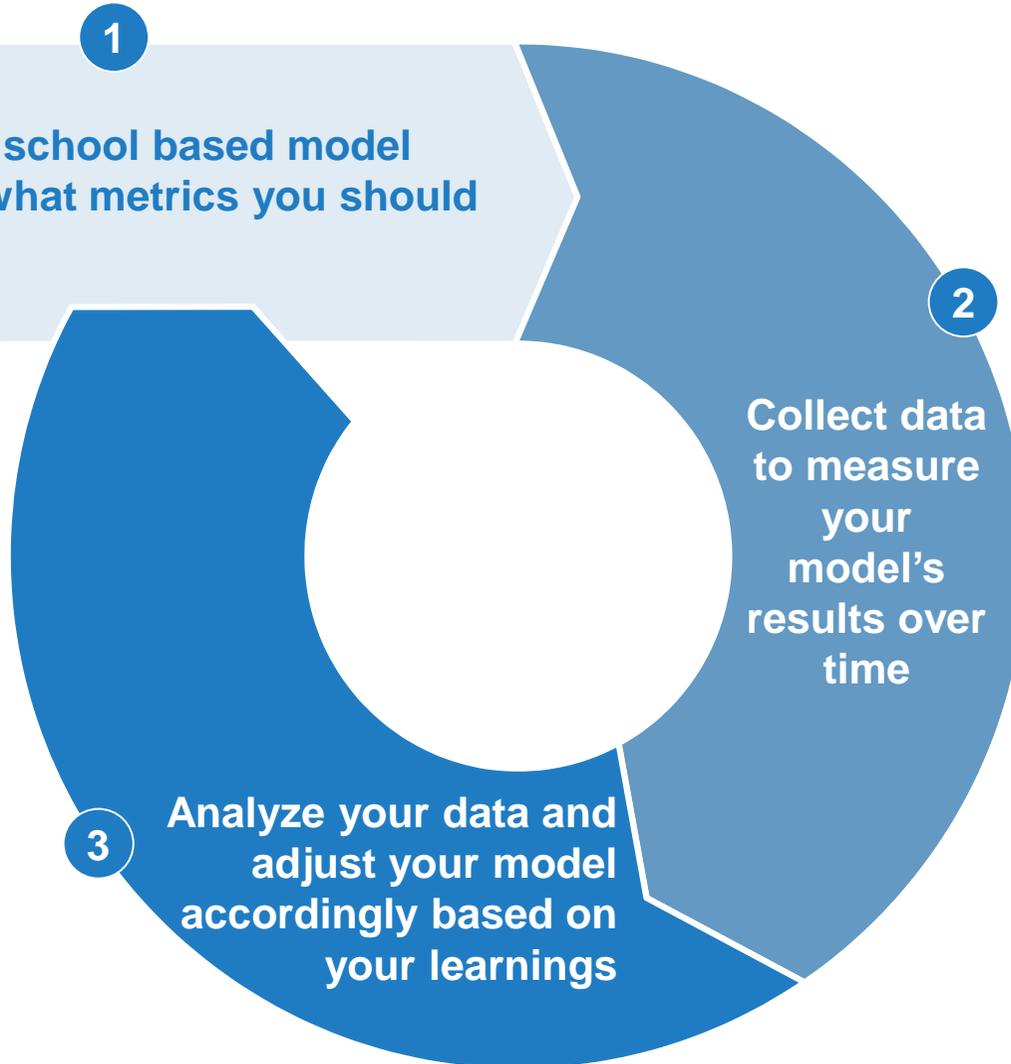


School-based health care support toolkit:
Putting in place a performance
measurement and continuous
improvement plan



Ohio | Governor's Office of
Health Transformation

Creating an evaluation process based on continuous improvement



Resources in this section

Ideas for possible metrics to prioritize as focuses for your model

Recommendations of student attribute measures to track and methods for tracking

Why is data collection and evaluation important?

- **Assessing outcomes** - Providing evidence on outcomes to both reinforce that this is important for your school and prove to external stakeholders (e.g. community, funders) that school-based health has been effective
- **Assessing processes** - Helping you learn from and improve your service delivery model, which can in turn improve the health and academic outcomes of your model
- Strong data collection helps a partnership:
 - Demonstrate to local officials that services are effective
 - Make staffing and budgetary projections
 - Raise funds
 - Verify client satisfaction

Schools should focus on a few outcome-based academic and health metrics for recurring data collection that become priorities

Focus on only a few metrics to measure – the fewer metrics you choose the greater focus your partnership can have on what exactly you care to optimize

Ideas of possible outcome metrics to focus on:

Academic-related outcomes

- Improved academic performance
- **Reduced chronic absenteeism¹**
- Lower dropout rates
- Improved student behavior
- Improved school climate
- Increased parent participation in school activities
- Increased parent and student satisfaction in school
- Increased teacher satisfaction and reduced turnover

Health-related outcomes

- Increased number of children served, especially uninsured
- Increased number of immunizations or physicals given
- Reduced hospitalizations
- Improved BMI
- Increased number of uninsured children enrolled in health insurance

¹ The State of Ohio recommends choosing rate of chronic absenteeism as one of your focus metrics as part of a statewide movement to affect that outcome

The National School-Based Health Alliance recommends all providers track the following metrics

Patient information

- Date of birth
- Gender
- Race-ethnicity
- Language spoken at home
- Insurance status at visit
- Identification of primary care provider
- Client is:
 - Faculty/school personnel
 - Family of student
 - Community member
- School status (enrolled in this school, another school, or not enrolled)
- Risk factors (not ICD-10 or CPT codes)

Service delivery information

- Provider type
- CPT codes
- ICD-10 codes
- Referrals (internal and external)
- Communication with parent
- Student disposition (sent back to class, home, ER, other)
- Communication occurred between school health center and primary care provider

Schools should also measure process-based metrics based on patient satisfaction

Partnerships should utilize client satisfaction surveys that measure user opinions on some or all of the following topics

- Ease of accessing clinic services
- Types of services provided
- Hours of operation
- Wait time for an appointment
- Friendliness of clinic staff
- Environment of clinic
- Confidentiality
- Stigma (or lack thereof) among peers

In this section there are example surveys you can utilize to collect data on the operations of your school-based health model and how others perceive your model – these surveys include

- Student satisfaction
- Parent satisfaction
- Staff satisfaction
- Self-assessment of practices

Other methods to collect community data include conducting in-person interviews, focus groups and public forums