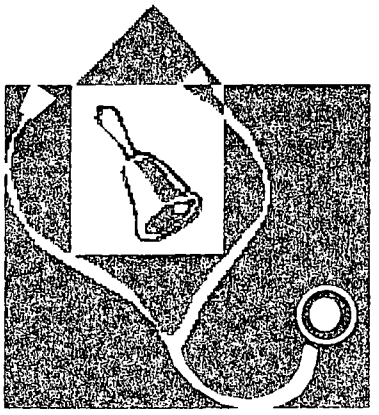

Adolescent School Health

INITIATIVE

Louisiana School Based Health Centers

Annual Services Report

1995

Office of Public Health

Department of Health and Hospitals

State of Louisiana

Adolescent School Health

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Department of Health and Hospitals

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Adolescent School Health INITIATIVE

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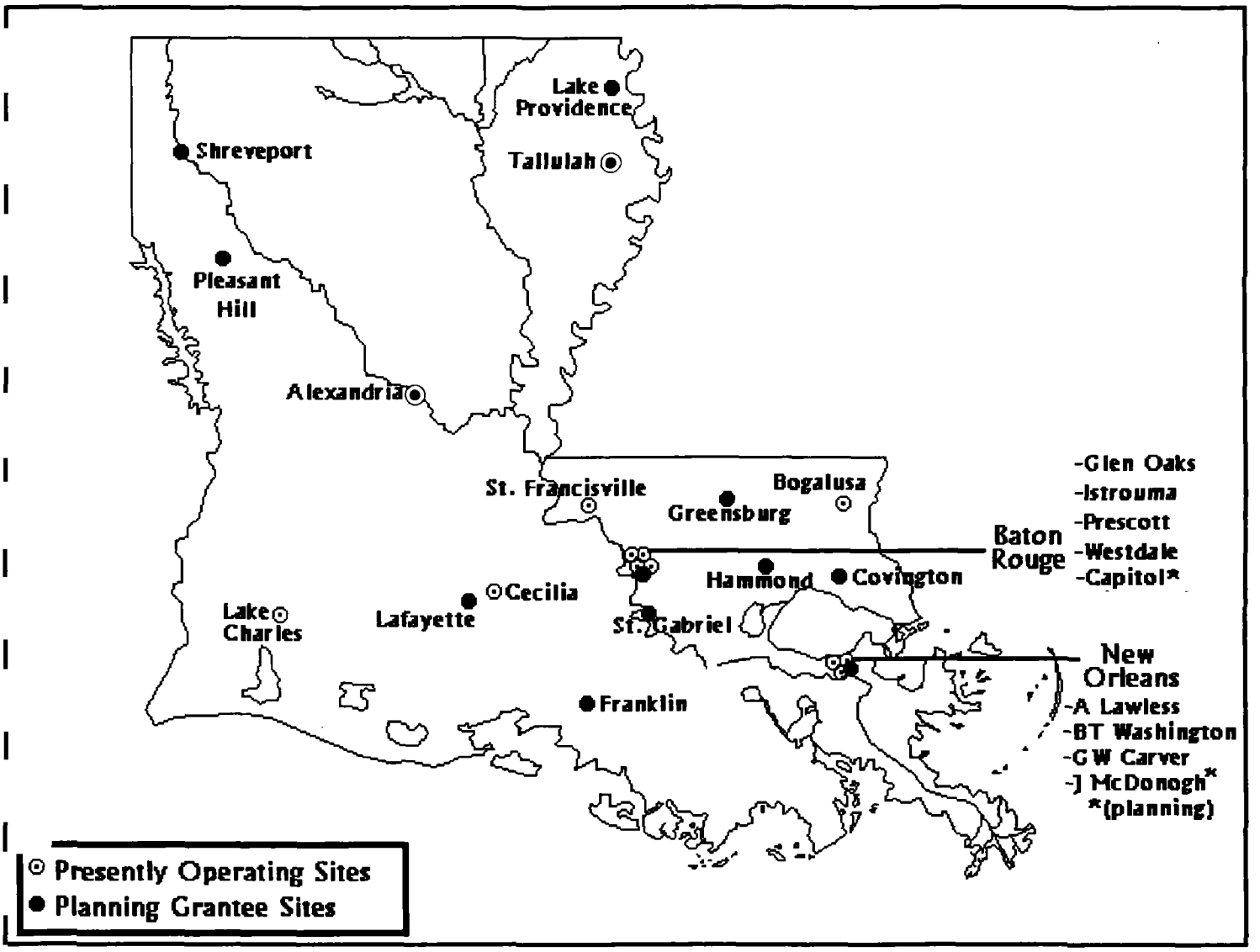


Adolescent School Health INITIATIVE

Louisiana Network of School-Based Health Centers

Operating Centers for the 1994-1995 Academic Year

REGION 1

Orleans Parish

George Washington Carver School Health Center (George Washington Carver Junior and Senior High School)

Booker T. Washington High School Health Center (Booker T. Washington High School)

Allison L. Chapital, Sr. Lawless School-Based Health Center (Alfred Lawless Junior and Senior High School)

REGION 2

East Baton Rouge Parish

Istrouma School-Based Health Center (Istrouma High School), Baton Rouge

Westdale School-Based Health Center (Westdale Middle School), Baton Rouge

Prescott School-Based Health Center (Prescott Middle School), Baton Rouge

Glen Oaks School-Based Health Center (Glen Oaks Middle School), Baton Rouge

West Feliciana Parish

Family Service Center (West Feliciana High School, Bains Upper Elementary, Bains Lower Elementary, Tunica Elementary), St. Francisville

REGION 4

St. Martin Parish

Cecilia School-Based Health Center (Cecilia Primary School, Teche Elementary School, Cecilia Junior High School, Cecilia Senior High School), Cecilia

REGION 5

Calcasieu Parish

Washington-Marion Health Center (Washington Marion Magnet School), Lake Charles

School-Based Health Centers to Become Operational in 1995 -1996

(Statistical Data not Available for 1994-1995 Academic Year and Annual Report)

REGION 2

East Baton Rouge Parish

Eden Park School-Based Health Center (Capitol High School , Northdale Magnet Academy, Park Elementary), Baton Rouge

REGION 4

Lafayette Parish

Northside High School Health Center (Northside High School), Lafayette

REGION 6

Rapides Parish

Northwood School-Based Health Center (Northwood School, K-12), Boyce

REGION 8

Madison Parish

Reuben McCall School Health Center (Wright Elementary, Tallulah Elementary, McCall Junior High School,McCall Senior High School, Tallulah High School, Thomastown School), Tallulah

REGION 9

Washington Parish

Bogalusa High School Health Center (Bogalusa High School), Bogalusa

Adolescent School Health
INITIATIVE

Why Louisiana Needs School Based Health Centers

Health and education are joined in fundamental ways, with each other and with the destinies of Louisiana's children.

The School Based Health Care Program, officially known as the Adolescent School Health Initiative, is directed by the State Office of Public Health, Louisiana Department of Health and Hospitals. School Based Health Centers are an integral part of the State's Comprehensive School Health Program, which also includes education, school environment, nutrition, physical fitness, and parent and community involvement.

Louisiana's children face many compelling educational, health and developmental challenges which will impact the quality of their lives and their future. These challenges include poor academic achievement, high drop-out rates, low literacy, violence, drug abuse, preventable injuries, physical and mental illness, developmental disabilities, inappropriate and unprotected sexual activity, and unintended pregnancy.

Education and health, when linked in partnership through School-Based Health Centers (SBHCs), help our children learn healthy, life-promoting behaviors. Since schools are the only public institutions that touch nearly every young person in this state, school campuses are important sites through which children and their families can gain convenient access to free comprehensive and professional primary health education and services.

A Profile of Louisiana Teens, Aged 10 to 19 Years

Louisiana has the least healthy population in the United States, according to the Northwestern National Life State Health Rankings, and nearly one-third of this population is under 18 years of age.

- 34.5% of Louisiana's children live at or below the poverty level
- 20 percent of all children have no health insurance

The behaviors of most teens in Louisiana clearly place them at danger of deeper poverty and increasing violence.

- 13.7% of Louisiana teens aged 16-19 years are high school dropouts, giving Louisiana the highest dropout rate in the nation
- Louisiana's violent teen death rate is 97 per 100,000, or the 3rd highest in the nation
- Louisiana's juvenile crime arrest rate is 552 per 100,000, or the 7th highest in the nation
- Unmarried teens account for one of every 7 Louisiana births, 12.3% of which will be premature and 11.9% which will be low birth weight

Everyday, Louisiana teens face problems or risks that health education and service could reduce.

- Every day, four Louisiana teens are treated for syphilis, 14 are treated for gonorrhea and four will contract HIV
- Every day in Louisiana, 41 teen couples become pregnant
- Every day in Louisiana, 34 teen girls give birth
- Nearly one in 10 teens suffers from emotional disorders in Louisiana
- The principal causes of death for Louisiana children are all preventable:

27%	death by motor vehicle
26%	death by homicide
10%	death by suicide

This is what an average teenager will say they are doing within a normal month:

82%	will have an alcoholic drink
75%	will smoke a cigarette
61%	will eat fried foods
49%	will ride with a drinking driver
45%	will get in a physical fight
38%	will not wear a seatbelt in a moving car
29%	will carry a weapon
29%	will use marijuana

Adolescent School Health
INITIATIVE

A History of the SBHC Program in Louisiana

The first School-Based Health Centers in Louisiana were funded by the Robert Wood Johnson Foundation and established at Istrouma High School and Westdale Middle School in Baton Rouge in 1987, and Carver High School in New Orleans in 1988.

As national and state studies continued to reveal Louisiana teens as the only population group whose morbidity and mortality rates were increasing, the Louisiana Legislature in 1990 asked the Office of Public Health to study the feasibility of expanding the school-based health center program to meet the medical and psychosocial needs of uninsured and low-income adolescents.

An OPH report indicated that the causes of adolescent deaths and illnesses could be reduced or prevented through greater adolescent health education and improved teen access to primary/preventive health care and professional counseling.

Therefore, in 1991, the Louisiana Legislature created the Adolescent School Health Initiative to facilitate the development of comprehensive health centers in public middle and senior high schools. The greatest source of funding for School-Based Health Centers is the Maternal and Child Health Block Grant. Local school districts which successfully organize a SBHC must provide matching operating funds.

By the end of 1995, there will be 15 operational School-Based Health Centers in Louisiana, and schools from 28 Louisiana parishes have sought to participate in the program.

A school community initiates the process to bring a SBHC to their district by making a competitive application to the Office of Public Health/Adolescent School Health Initiative for funds to begin a planning process. This planning process involves a collaborative effort of local leaders in health care, education, public health, mental health, social services, religious and business organizations to assess the need for adolescent health services in their community.

SBHC Planning Grantees also assess community support for bringing an operational center to their community. Final participation as an operating center is limited by funding availability.

History of School Based Health Care in Louisiana

Fiscal Year	Funding Source	Number of Sites
1987-88	Robert Wood Johnson Grant	2 in Baton Rouge 1 in New Orleans
1989-90	Louisiana Legislature asks Office of Public Health to study SBHC expansion	
1990-91	Adolescent School Health Initiative Act passes, authorizing OPH to develop SBHCs in junior and senior highs	
1992-93	Maternal and Child Health Block Grant;	affiliation established with 1 center in W. Feliciana; 3 RWJ sites
1993-94	MCH Grant	5 new centers open in rural and inner-city urban areas; 10 planning grants
1994-95	MCH Grant; $1.6 million in state funds; Child Care and Development Block Grant for day-care activities; Robert Wood Johnson Making the Grade Planning Grant	1 new center opens; 14 in planning stages; 10 supportive projects
1995-96	MCH; $2.5 million in state budget (unfunded)	5 new centers open; 9 continue planning stage

Adolescent School Health INITIATIVE

State Guidelines For Louisiana School Based Health Centers

Primary Goal

Meet the physical and emotional health needs of adolescents at school.

Sponsoring Agency

Non-profit public or private, tax-exempt institution locally suited and fiscally viable to administer and operate a SBHC (i.e., health center, hospital, medical school, health department, youth service agency, school or school system, community-based organization).

Selection Criteria

Socioeconomic need; lack of access to care; community support partnership between health and education agencies.

Site Specifications

Must be open five days per week allowing student access before and after school, in addition to during lunch hours. Must function as an integral component of school(s) and work cooperatively with school nurses, classroom teachers, coaches, counselors and school principals; Local grantees are subject to 20 percent financial match; Must become a Medicaid provider.

Service Definitions

Services provided should include but not be limited to: preventive health care and medical screenings, sports and employment physicals, treatment for common simple illnesses, referral and follow up for serious illnesses and emergencies, mental health counseling, immunizations, and preventive services for high-risk conditions such as pregnancy, STDs, drug and alcohol abuse, violence and injuries.

Staffing

Staff at each health center should include at a minimum: a nurse (or nurse practitioner or physician assistant), one or more part-time physicians, a master's level social worker or mental health professional at least half-time, and a medical office assistant. The school nurse should be a member of the SBHC staff, when applicable.

Community Participation

Must provide evidence of planning process involving a broadly representative community group which includes students and parents; Must form a community advisory board.

Parental Consent

Parents must execute written consent form.

Continuum Of Care

Must have plans for provision of services during non-operating hours (holidays, weekends, etc.); Must have 24 hour coverage and referral and support services for services not provided on site.

Evaluation And Quality Assurance

Required to submit and adhere to annual objectives; Required to submit plan for monitoring and evaluation; Required to participate in School HealthCare ONLINE!! data collection system. Required to submit quarterly reports of progress toward meeting objectives; Required to have internal quality assurance system; Required to have written policies and procedures.

Adolescent School Health INITIATIVE

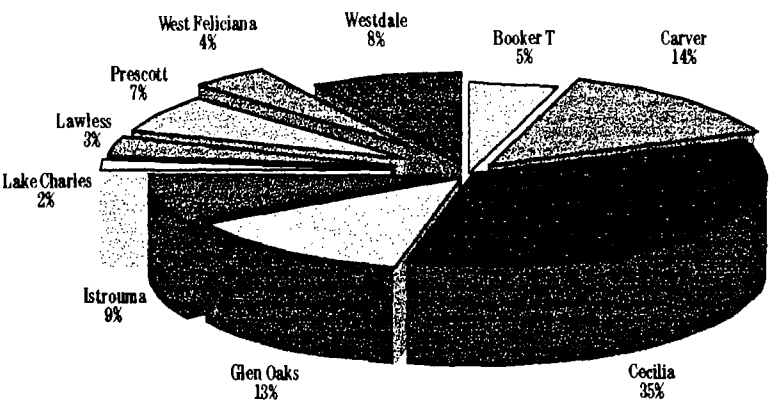
School-Based Health Centers: Providing Primary Health Care to Louisiana Ch ren

Each School-Based Health Center's staff includes a licensed physician, a nurse or nurse practitioner, a mental health counselor, a clinic administrator and support staff, in addition to the counselors, social workers, psychologists, and speech, physical and occupational therapists on school campus.

Since 1990, more than 50,000 visits to Louisiana's School-Based Health Centers have occurred.

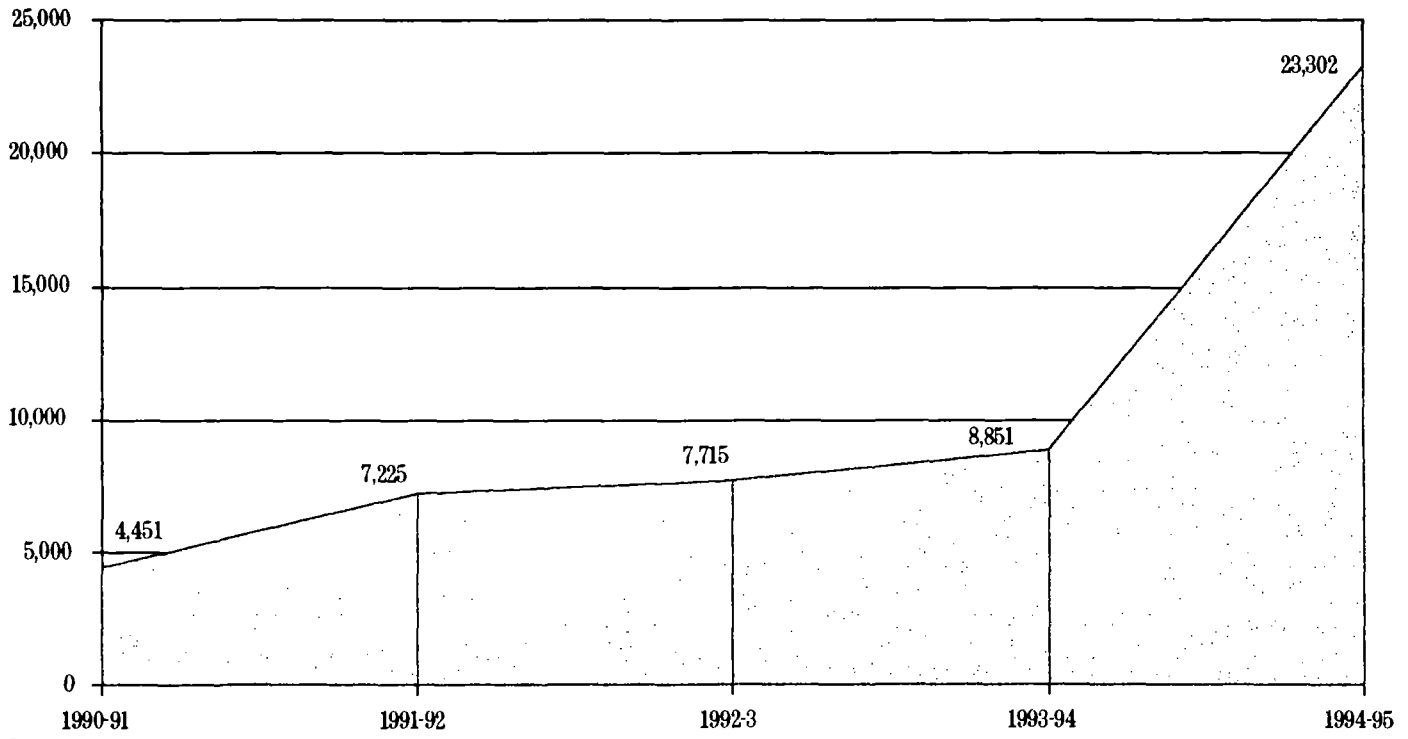
There were a total of 23,302 students visits to all ten operating school health centers in the Louisiana SBHC program during the 1994-1995 academic year. This represents tremendous growth when compared to the 8,851 total visits reported in the 1993-1994 academic year from five operational sites: Carver, Glen Oaks, Istrouma, Prescott, and Westdale.

Percent of Total Visits by Clinic

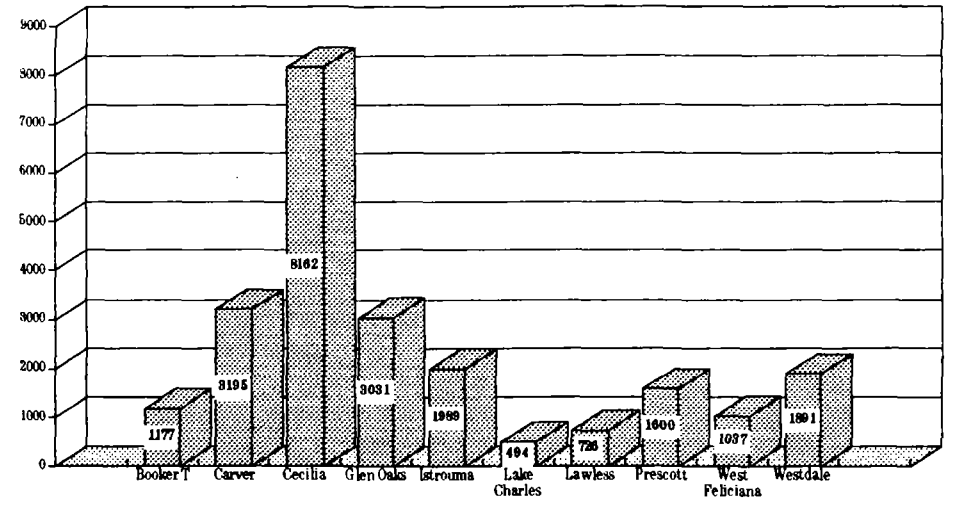


Total visits = 28,302

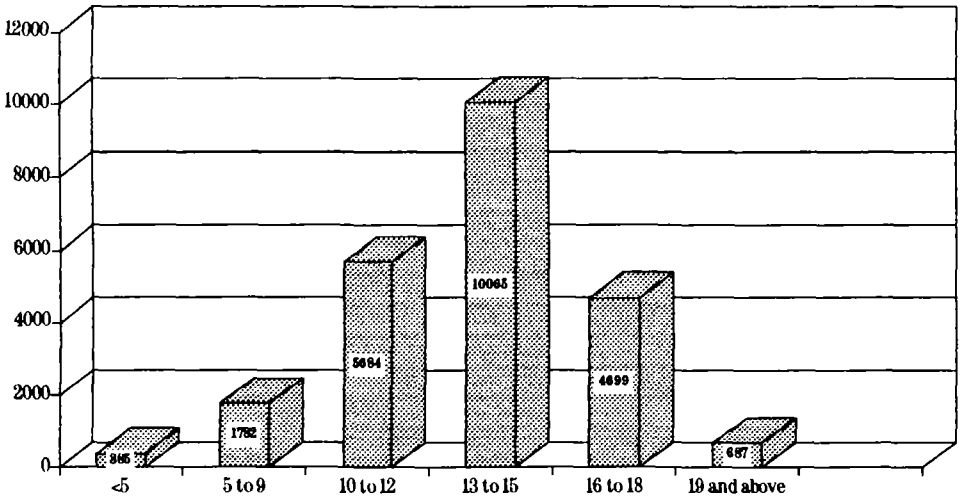
Number of Visits at School-Based Health Centers Since 1990



Count of Visits to Sites, 94-95



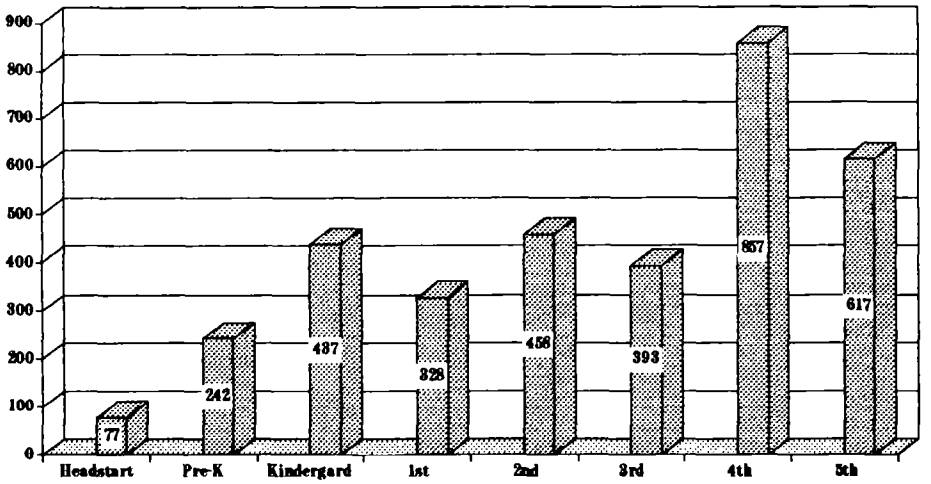
Ages of Individuals Receiving Services



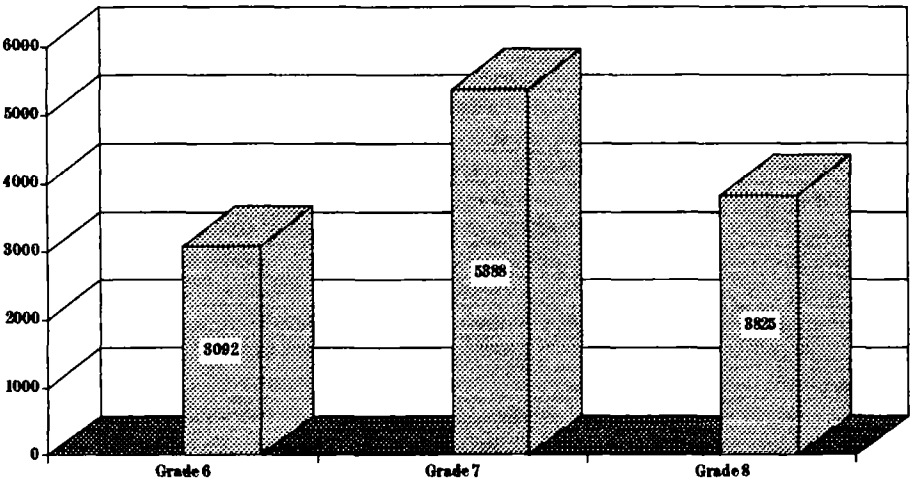
It should be noted that the Lawless and West Feliciana clinics did not fully implement the Kaplan system until April 1995, which reflects the lower number of visits at these sites. Lake Charles did not open its clinic until 6 weeks before the end of the school year. In 1993-1994, Carver and Istrouma each represented 30% of total visits, while Westdale represented 25%.

The majority of children receiving services at Louisiana's SBHCs are in the grades 6 to 12. Children under the age of five represent children at an early childhood center at George Washington Carver High School in New Orleans. Individuals over the age of 19, who are seen, represent school staff and faculty.

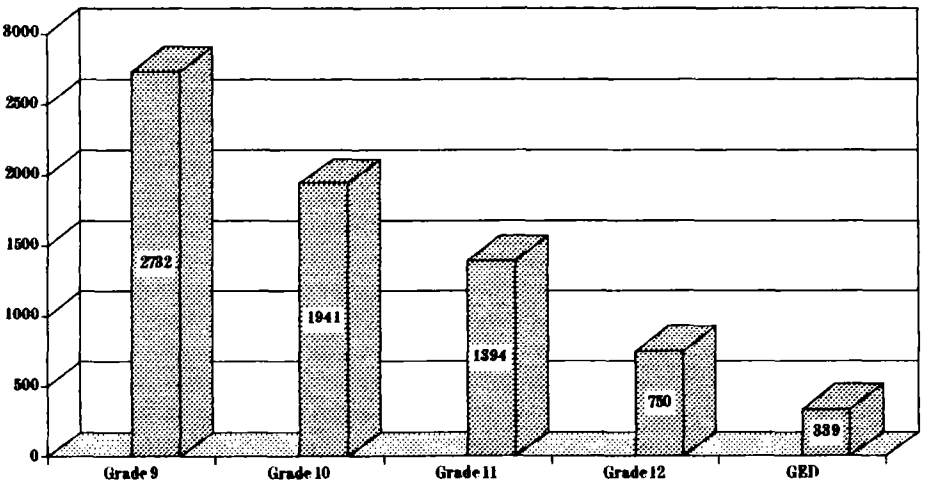
Visits by Grade for Elementary Schools



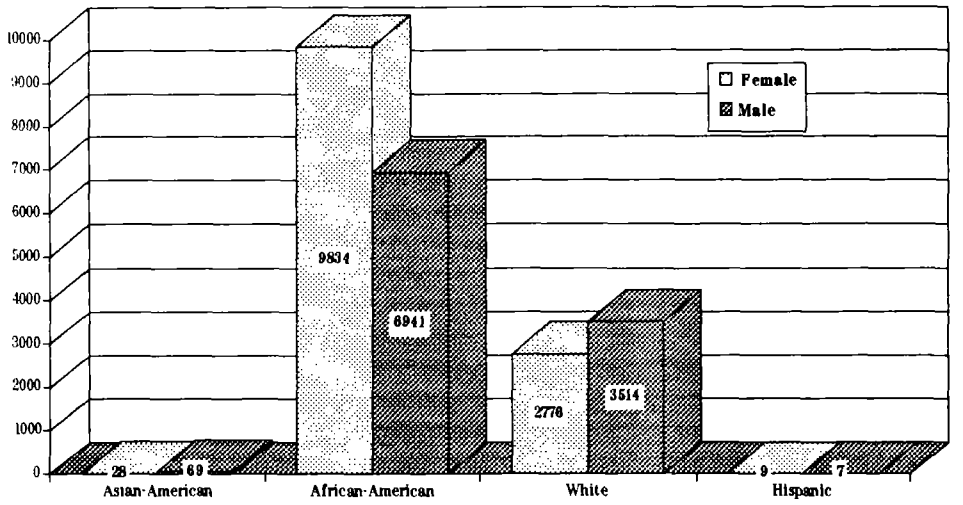
Visits by Grade for Middle Schools



Visits by Grade for High Schools



Race and Gender of Those Receiving Services

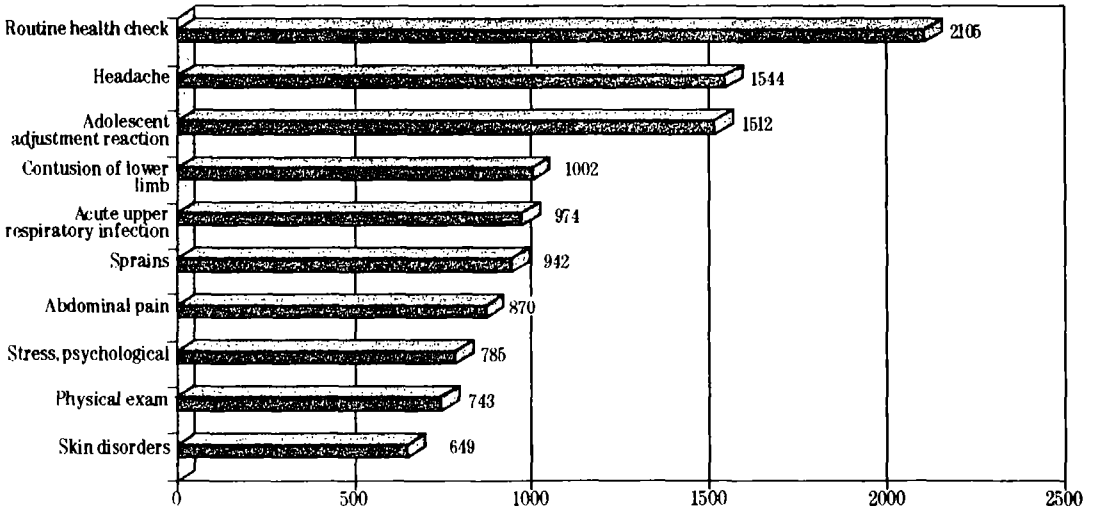


Graphs tracking student utilization by race and gender reflect the makeup of the student bodies with an operational SBHC in 1994-1995. SBHCs serve a student population which is largely Medicaid-eligible or uninsured.

In serving these children, the Louisiana SBHC program has confirmed these national study findings:

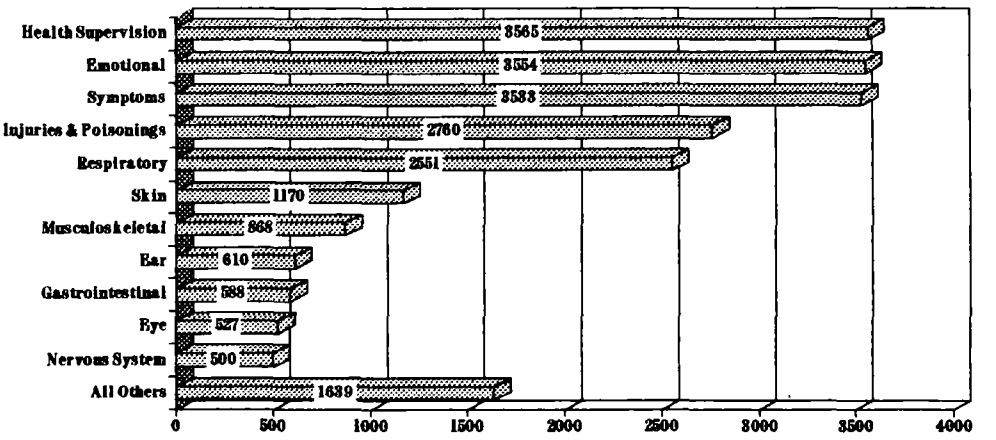
- Low income families in Louisiana have children who experience greater health problems.
- As poverty increases in a family, child health problems increase.
- Low income children have much greater percentages of conditions limiting school activity, lost school days, and severely impaired vision.
- Adolescents, or children aged 10 to 19 years, are prone to high risk, unhealthy behaviors and utilize health services less frequently than pre-adolescents.
- At least 20% of adolescents have one serious health problem, including visual, auditory and dental problems which may impede school performance.
- Mental health problems, such as attention deficit disorders, violent behaviors, eating disorders, phobias, anxiety disorders, depression, suicidal actions, and learning disabilities, increase as children age.
- Adolescents see office-based physicians less frequently than other age groups.
- As young people are often "of the moment", they are harder to schedule for routine medical appointments.
- As adolescents are more conscious of their family's economic situations, they are more reluctant to burden their struggling families with their health care needs and costs.

The 10 most Common Reasons for Visits to the Health Center



Adolescent School Health INITIATIVE

Primary Diagnoses by Category, FY 94-95



Through the Kaplan School HealthCare ONLINE!!! data collection software, each SBHC is able to capture demographic characteristics of clinic users, utilization figures, diagnoses, risk behaviors and other information in order to analyze the program's effectiveness. This data is then collected by the Office of Public Health in conjunction with Tulane University School of Public Health & Tropical Medicine. The data is exported without any identifying patient information and can be analyzed aggregately or by individual site.

The Kaplan System tracks data in terms of student visits to the health center. This gives a better picture of the overall utilization of a center, since one student may visit the SBHC more than 30 times in a year, whereas others may visit only once. Some students are registered at the center but never use its services because they are healthy.

A student visiting a clinic may receive several diagnoses, which explain why a student utilizes a SBHC: routine health check, headache or minor illness, emotional/adolescent adjustment reactions, injuries, respiratory problems, sprains, stomach aches, psychological stress, physical examination, or skin disorders.

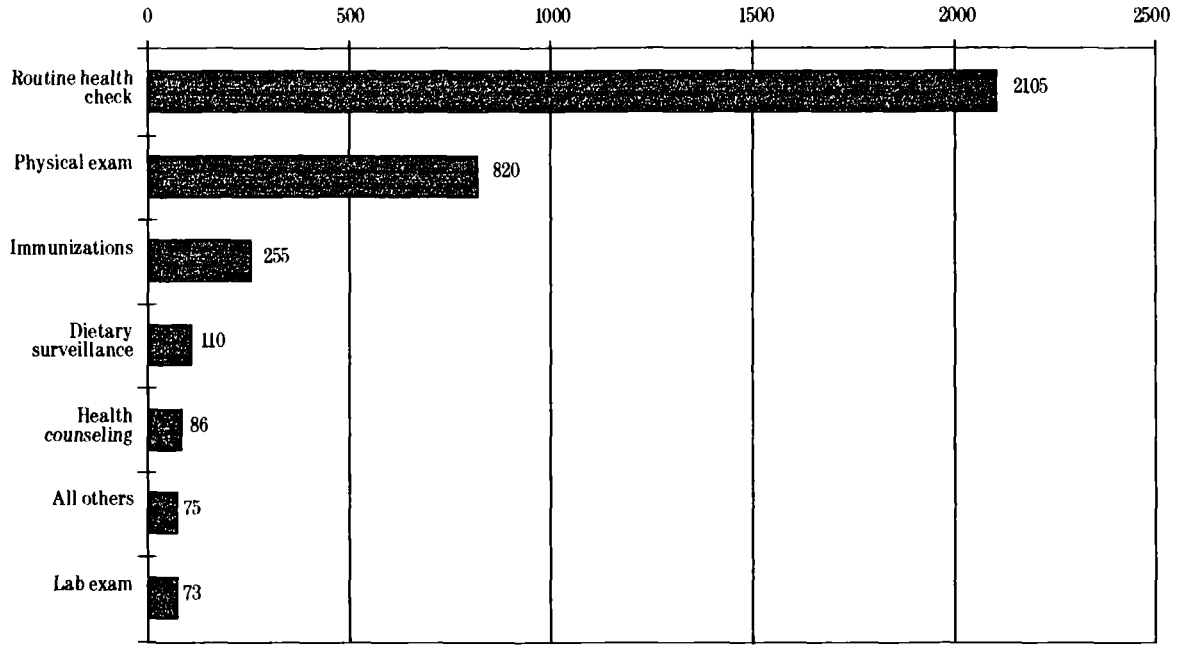
As SBHCs have become more familiar to parents and students, they are increasingly becoming a convenient point of direct access to routine, primary health care.

SBHCs use the International Classification of Diseases, Version 9 (ICD-9 codes), to categorize specific diseases or conditions treated during a student visit.

International Classification of Diseases Version 9 (ICD-9):

Health Supervision	routine health checks, physical exams, dietary surveillance, health counseling
Emotional	adolescent adjustment reaction, attention deficit disorder, family disruption, parent-child problems
General symptoms	headaches, abdominal pain, throat pain, backaches, nausea, vomiting
Injuries and Poisonings	superficial injuries or contusions, sprains, strains, allergies, burns
Respiratory problems	acute upper respiratory infections, asthma, sinusitis, other respiratory disorders

Breakdown of "Health Supervision" Category



In 1994-1995, the five most common diagnostic categories were, in descending order, health supervision, emotional, general symptoms, injuries and poisonings, and respiratory problems.

In the previous school year, the five most common categories were, in descending order, emotional, general symptoms, health supervision, injuries and poisonings, and respiratory problems.

Herein is a breakdown of specific diagnoses by these categories, as reported in the 1994-1995 academic year.

Routine health checks were the number one diagnosis for visits to all health centers for the 1994-1995 academic year. Physicals were the second largest diagnosis in the Health Supervision category and were 8th overall.

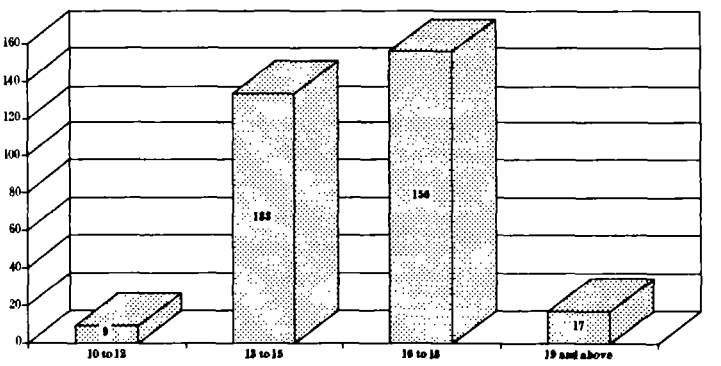
Adolescent adjustment reaction was the number one diagnosis in the Emotional category, followed by psychological stress and attention deficit disorder.

Headaches were the most common diagnosis for the Symptoms category, followed by abdominal pain and throat pain.

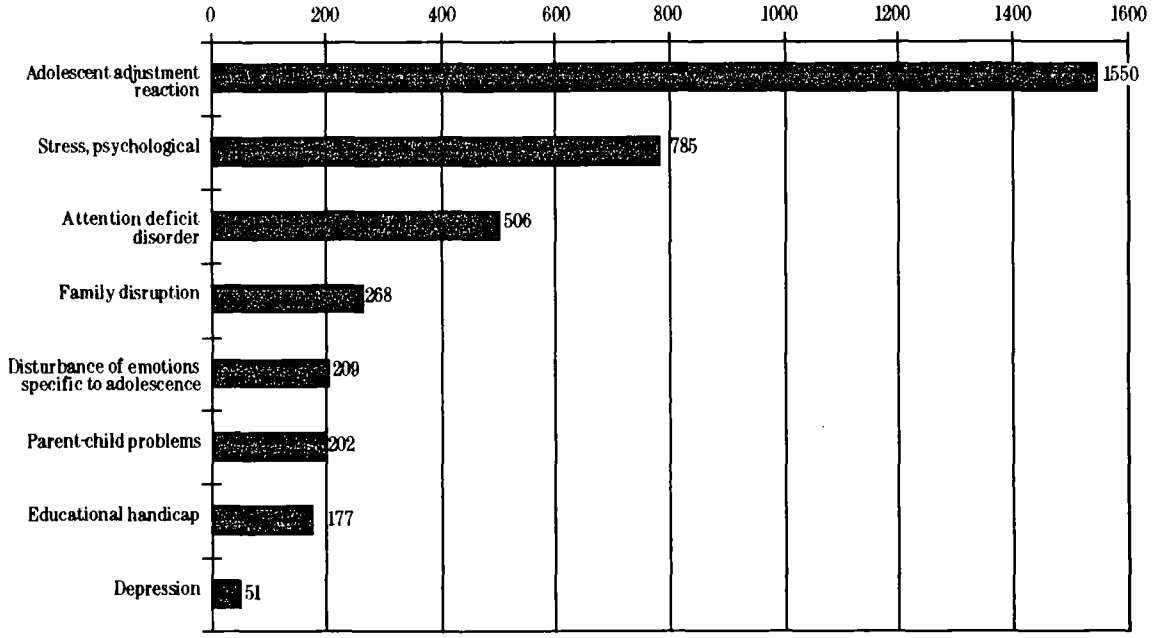
SBHC's provide mental health services and counseling to students. As can be seen by the fact that the "Emotional" diagnostic category had the second largest number of visits overall, these services are being highly utilized by students

315 pregnancies or suspected pregnancies were recorded by the Kaplan system for all 10 school-based health centers.

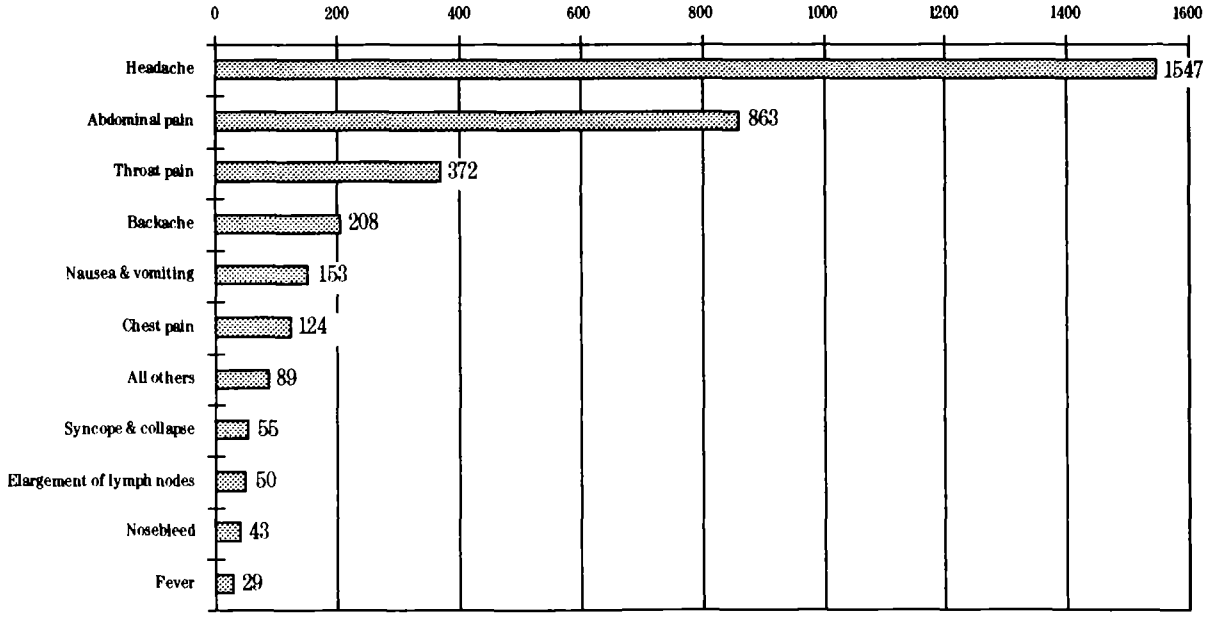
Ages of Individuals with a Primary Diagnosis of Pregnancy or Suspected Pregnancy



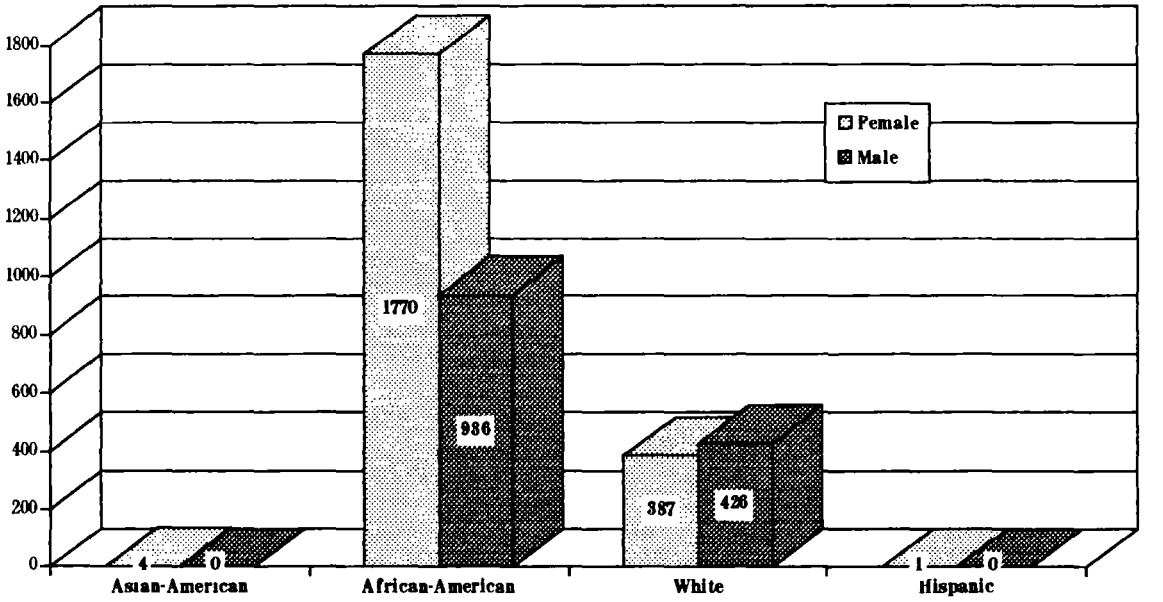
Breakdown of "Emotional" Category



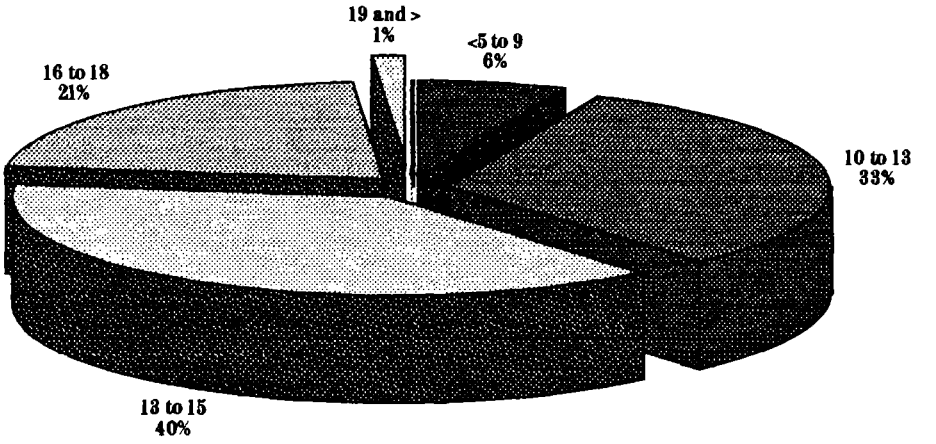
Breakdown of "Symptoms" Category



Emotional Diagonses by Race and Gender



Emotional Diagnoses by Age Category



Louisiana Supports School Based Health Centers

SBHCs are located in inner-city urban and rural school districts. Each SBHC has an advisory board of parents, educators, students, health care and community/religious leaders to insure that the center is designed and developed to meet the needs of the community's teens and their families.

The Louisiana State University Medical Center Psychiatry Research Unit, in collaboration with the Office of Public Health, held several focus groups in the 1994-1995 academic year to examine the impact of SBHCs in Louisiana. Themes such as student absenteeism, student drop-out rates, and a general need for basic medical care were common concerns in the focus groups.

Here are some of the stories told by participants in this study.

STUDENTS

One student spoke about how she is able to get treatment for her sinus problems thanks to the SBHC, which enables her to stay in school. Otherwise, she estimates she would miss about 10 days of school each year.

Students state that they feel the SBHC is a good place to get general information or talk to someone about stress. They also see the clinic staff as role models and sources of information about careers in health-related fields.

Two students talked about how they used the SBHC for counseling: one after their parent died, the other for peer relationships at school.

PARENTS

The parents focus group spoke at length about teenage sexual activity and pregnancy. Parents wish the SBHC would do more to prevent pregnancy. Parents state that they talk to their children about sexual behavior and birth control, but recognize their children want to talk to another "outside" person about this subject.

One parent states that it costs her $50 to $60 each time her daughter has a migraine headache to get treatment from her physician. Because her daughter can get immediate treatment from the clinic, including appropriate medication, her daughter misses fewer days of school, and she saved money and minimized time lost from work.

One parent said before the SBHC was opened, they had to fight the school board every year so their child, who has asthma, could carry an inhaler on him at all times. Having the SBHC meant the parent did not have to fill out a whole lot of forms or take off work to come and medicate the child.

Another parent states that he found out his daughter had scoliosis, thanks to the SBHC, and now he is taking care of her. His little boy almost broke his hand and the SBHC was able to get it examined by a doctor. His other son got stung by a wasp and the center handled it. "They take care of the kids here. They do good work."

One mother described how the health center staff recognized that her child has learning and behavioral problems, and the SBHC was working with the classroom teacher to coordinate services.

Parent reported their children receiving health education, nutrition counseling, physical examinations, and vision and dental screenings

One parent said, "If you don't fill out the consent form, the child can't have that service. I know my little boy brought the paper home and I forgot. If you don't fill it out, they can't serve the child."

Parents state that their main priority is to keep their children in school and keep them learning. Without SBHCs, parents must leave work to pick up their children and wait for medical services at another location. Parental time away from work causes loss of pay and potentially jeopardizes jobs. The high cost of outside medical services is another concern.

TEACHERS

Teachers are of the opinion that students use the SBHCs mainly for mental health counseling and sports injuries. Emergency care is also provided for students and teachers. Convenience, access and no fees are described as factors associated with students' use of the clinic.

Teachers report that the clinic's availability takes some of the burdens off of them regarding decisions about a student's health status. They feel that they save classroom time for teaching.

All of the teachers interviewed felt that the clinic reduces school absenteeism, check out rates, and drop-outs. Teachers, like students and parents, see pregnancy and sexually related issues as the most problematic health concerns for students.

One teacher said, "The kids would just sit in class and they just felt bad chronically for weeks and weeks and weeks before the SBHC opened and had someone to care for them. It affected their school work, it affected them socially, and now if they are not feeling well, they don't hesitate to say 'I need to go to the health center'. It's not only the poor kids who benefit, it's the ones who have both parents working or some single families. A mother loses out on pay if she has to take time off."

PRINCIPALS

Principals are relieved that the SBHC can take the lead in conducting an overall wellness program for the school to teach children about healthy lifestyle choices. They expect to see school drop-out rates, checkouts, suspensions and absenteeism decrease as a result of the SBHC.

Conclusion

As the three short years in which the State Office of Public Health began administering the Adolescent School Health Initiative draw to a close, Louisiana's School-Based Health Centers are reaching a critical turning point. Federal Maternal and Child Health Block Grant funding is threatened by reductions, state-appropriated funding for this fiscal year is yet unfunded, and the changes to be dictated by a Medicaid Managed Care system are still unknown.

The passion and dedication of communities in half of this state's parishes, as well as the enthusiasm of OPH staff, demonstrate the high degree of support of the Adolescent School Health Initiative's approach to providing needed health care and health education to school-age children. The drive is to help children embrace healthy lifestyles. The children's overwhelming response indicates their needs are being met successfully.

The challenge for the future of School-Based Health Centers in Louisiana is to survive within an environment where financial and political support for community-based health programs is in flux. While community-based care is the wave of the future, and while SBHCs must be respected for the unique role they serve in reaching the state's teens, it is up to this state to decide that adolescents continue to deserve specialized attention.

The capability of SBHCs to compete in a market where other essential providers will also demand attention is proven: these centers are cost-effective and serve an underserved population. Our state must have the collective will to help needy children become physically and mentally sound. While Louisiana citizens may not know what the future holds for their children, we do know that children hold the future.

And that is where SBHCs will continue to point children: towards the future, with a strong, healthy outlook and lifestyle.

Adolescent School Health INITIATIVE

Office Of Public Health Maternal And Child Health Section
Adolescent School Health Initiative

Statement of Cash Flow
Fiscal Year 1994 - 1995

REVENUE

Maternal and Child Health Block Grant	$	851,449.21
Robert Wood Johnson Making the Grade Grant		108,264.00
State Crime Package Funding		1,136,152.78
TOTAL REVENUES		**$2,095,815.99**

Maternal And Child Health Block Grant Funds

EXPENDITURES - Grants Awarded

School Based Health Centers - Operational		
City of New Orleans Health Department	$	120,008.22
LSUMC Health Care Centers in Schools		163,676.17
New Orleans Council for Young Children		55,829.88
St. Martin Parish School Board		100,000.00
West Feliciana Parish School Board		55,114.39
	$	494,628.66
School Based Health Centers - Planning		
Assumption General Hospital	$	22,178.08
Bogalusa Community Medical Center		36,961.00
Calcasieu Parish School Board		31,974.57
Evangeline Parish School Board		2,936.61
Lafayette Parish School Board		38,989.33
Lafourche Parish School Board		30,088.64
Madison Parish School Board		43,507.58
Pointe Coupee Parish School Board		12,287.13
Project Celebration		25,375.05
St. Francis Cabrini Hospital		35,237.53
	$	279,535.52
OPH Infrastructure - Administration		
Advertisement	$	130.18
Printing		119.05
Office Supplies		994.20
Operating Supplies		1,704.45
Operating Supplies - Other		85.00
		3,032.88
OPH Infrastructure - Consultants		
Consultant - Leslie Gerwin, JD, MPH	$	35,743.38
Tulane School of Public Health		38,508.77
	$	74,252.15
Subtotal Maternal and Child Health	**$**	**851,449.21**

Adolescent School Health INITIATIVE

Statement of Cash Flow

Cont.

Robert Wood Johnson Funding

EXPENDITURES-OPH Infrastructure

Office Operations		
Printing	$	895.00
Telephone		4.00
Office Supplies		6,836.00
Office Equipment		8,279.00
	$	16,014.00
Personnel		
Salaries	$	1,420.00
Fringe Benefits		226.00
Local Travel		1,109.00
Out-of-State Travel		1,955.00
	$	4,710.00
Indirect Costs	$	534.00
Consulting/Professional Services		
IHSM	$	8,488.00
Tulane School of Public Health		23,661.00
Brylski Company		33,949.00
Agenda for Children		20,858.00
	$	86,956.00
Subtotal Robert Wood Johnson Funding	**$**	**108,214.00**

Crime Package Funding

EXPENDITURES - Grants Awarded

School Based Health Centers - Operational		
Calcasieu Parish School Board	$	56,981.88
LSUMC - Health Care Centers in Schools		62,331.23
New Orleans Council for Young Children		49,834.64
St. Martin Parish School Board		100,000.00
West Feliciana Family Service Center		11,026.90
	$	280,173.65

Adolescent School Health INITIATIVE

Statement of Cash Flow

Cont.

School Based Health Centers - Planning/Renovation		
Acadia Parish School Board	$	11,608.36
Bogalusa Community Medical Center		54,708.00
East Carroll Parish School Board		40,000.00
Eden Park Community Health Center		121,971.87
Lafayette Parish School Board		53,860.22
LSUMC-N.O. Department of Pediatrics		21,547.00
Madison Parish School Board		35,240.00
St. Charles Parish School Board		4,651.02
St. Gabriel Health Clinic		5,924.76
St. Helena Rural Health Clinic		21,821.22
St. Tammany Parish School Board		9,598.13
St. Martin Parish School Board		128,175.00
Schumpert Medical Center		14,004.07
Southeast Louisiana AHEC		29,897.88
Teche Action Clinic		13,377.11
		566,384.64
Special Demonstration Projects		
Academic Distinction Fund	$	17,211.33
Agenda for Children		17,898.45
Boys/Girls Clubs of Greater Baton Rouge		39,035.61
Children's Bureau of New Orleans		12,671.43
Comprehensive School Health Curriculum		12,242.50
LSU Agricultural & Mechanical College		3,627.18
New Orleans Public Schools		5,325.05
Planned Parenthood of Louisiana		37,058.81
Tulane Center for Cardiovascular Health		50,000.00
Twomey Center for Peace and Justice		22,743.95
		217,814.31
Oph Infrastructure - Administration		
Printing		145.80
Office Supplies		44.79
Miscellaneous		2,427.93
		2,681.52
Oph Infrastructure - Consultants		
EDA Consultants - Training	$	32,642.66
LSUMC-N.O. Dept. of Psychiatry - Evaluation		36,456.00
		69,098.66
Subtotal Crime Package Funding	**$**	**1,136,152.78**
Total Expenditures	**$**	**2,095,815.99**

Appendix A

Each school-based health center serves a unique population. Some SBHC's have been in operation longer than others, while others are located in inner-city urban areas or rural communities. An additional difference is that some SBHC's serve only one school while others serve up to six schools. In order to show the accomplishments and uniqueness of each, please see the following pages.

Adolescent School Health INITIATIVE

Allison L. Chapital, Sr. Lawless School-Based Health Center

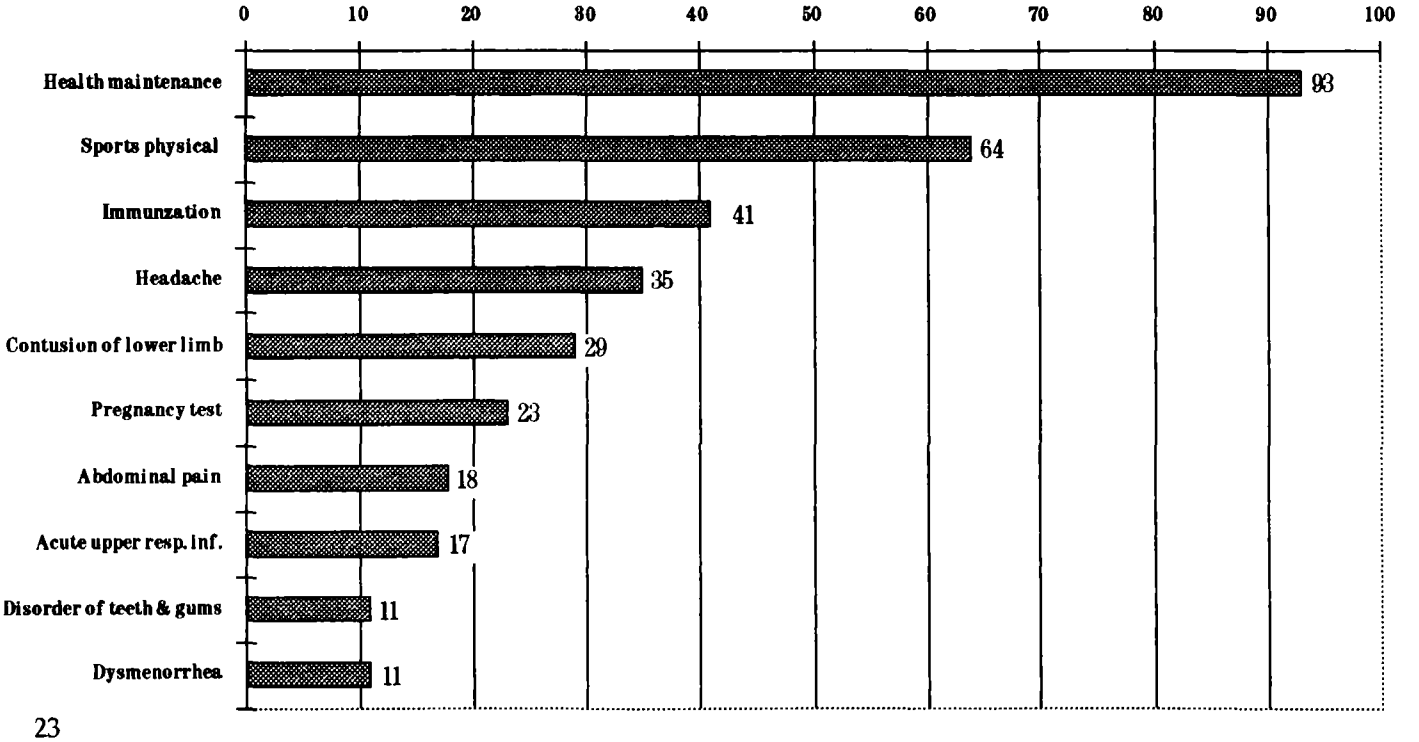
5300 Law Street
New Orleans, LA 70117

Dawn Williams, Director
Tel: (504) 944-8864

Schools served: Alfred Lawless Junior and Senior High Schools
Total enrollment in schools: 1,228
Total enrollment in health center: 737
60% of students were registered with the health center
Total visits to health center: 737 (The Kaplan system was not fully implemented in 1994-1995)
Grades served: 7-12

Sponsoring Agency: New Orleans Council for Young Children
Mary land Chenier, Executive Director

10 Most Common Reasons for Visits
Lawless School-Based Health Center



Adolescent School Health INITIATIVE

Booker T. Washington School-Based Health Center

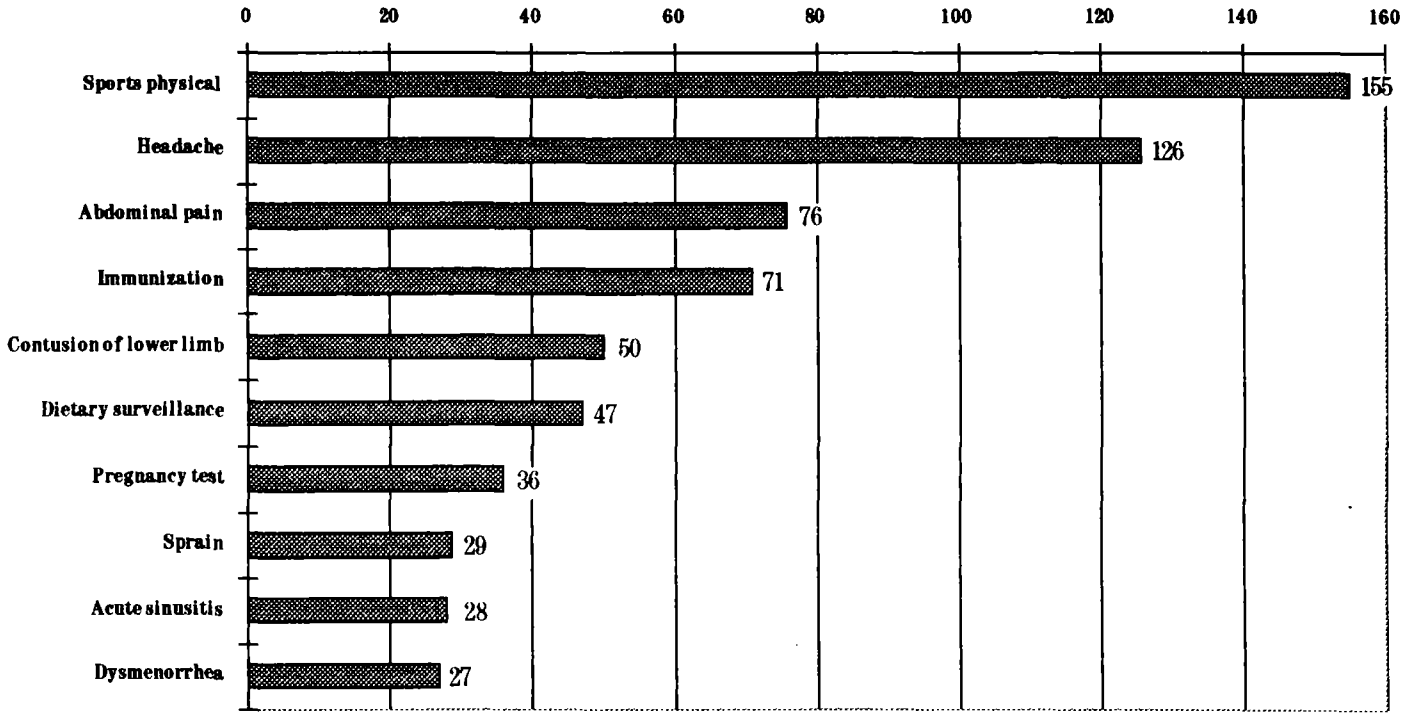
1201 S. Roman Street
New Orleans, LA 70125

Charles Harris, Director
Tel: (504) 592-8370

School served: Booker T. Washington High School
Total enrollment in school: 911
Total enrollment in health center: 545
60% of students were registered with the health center
Total visits to health center: 1,177
Grades served: 9-12

Sponsoring Agency: City of New Orleans Health Department
Shelia Webb, Director

10 Most Common Reasons for Visits
Booker T. Washington Health Center



Adolescent School Health INITIATIVE

Cecilia School-Based Health Center

P.O. Box 24
Cecilia, LA 70521

Tina Bulliard, Administrator
Tel: (318) 667-7227

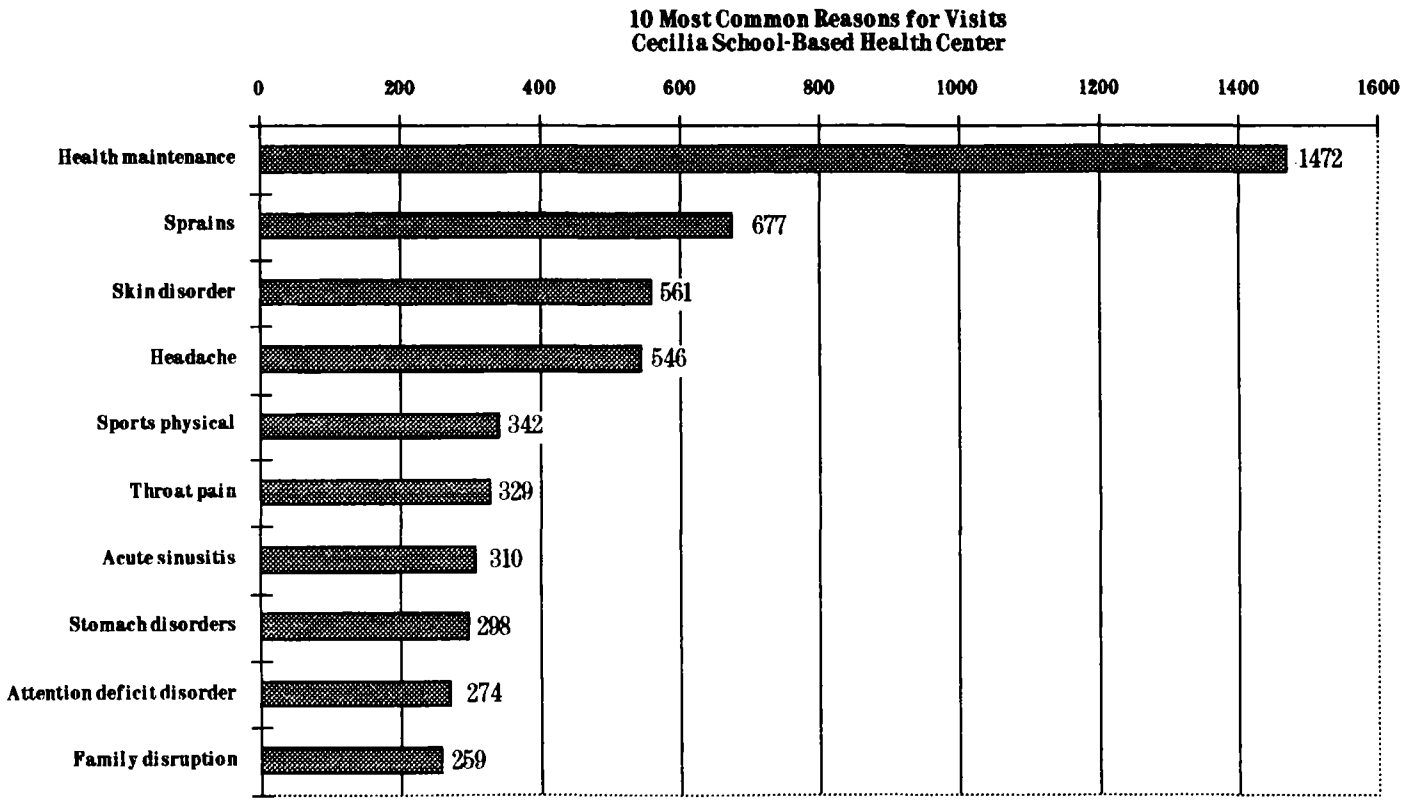
Schools served: Cecilia Primary School, Teche Elementary School, Cecilia Junior High School, Cecilia Senior High School

Total enrollment in schools: 2,366
Total enrollment in health center: 2,104
Overall, 90% of students were registered with the health center
Total visits to health center: 8,143
Grades served: Pre K - 12

Sponsoring Agency: St. Martin Parish School Board
Roland Chevalier, Superintendent

Enrollment and Registration by School

Cecilia Primary School: 745 children enrolled, 674 registered with the health center - 90% registration
Teche Elementary School: 593 children enrolled, 543 registered with the health center - 91% registration
Cecilia Jr. High School: 387 children enrolled, 367 registered with the health center - 94% registration
Cecilia Sr. High School: 608 children enrolled, 520 registered with the health center - 85% registration



Adolescent School Health INITIATIVE

Family Service Center

West Feliciana Parish Schools
P.O. Box 2130
Saint Francisville, LA 70775

Eileen Sonnier, Director
Tel: (504) 635-5299

Schools served: West Feliciana High School, Bains Upper Elementary, Bains Lower Elementary, and Tunica Elementary
Total enrollment in schools: 2,176
Total enrollment in health center: 654
30% of students were registered with the health center
Total visits to health center: 1,037 recorded by the Kaplan System, which was put in place April 1994
10,008 total visits for the academic year when counted by hand

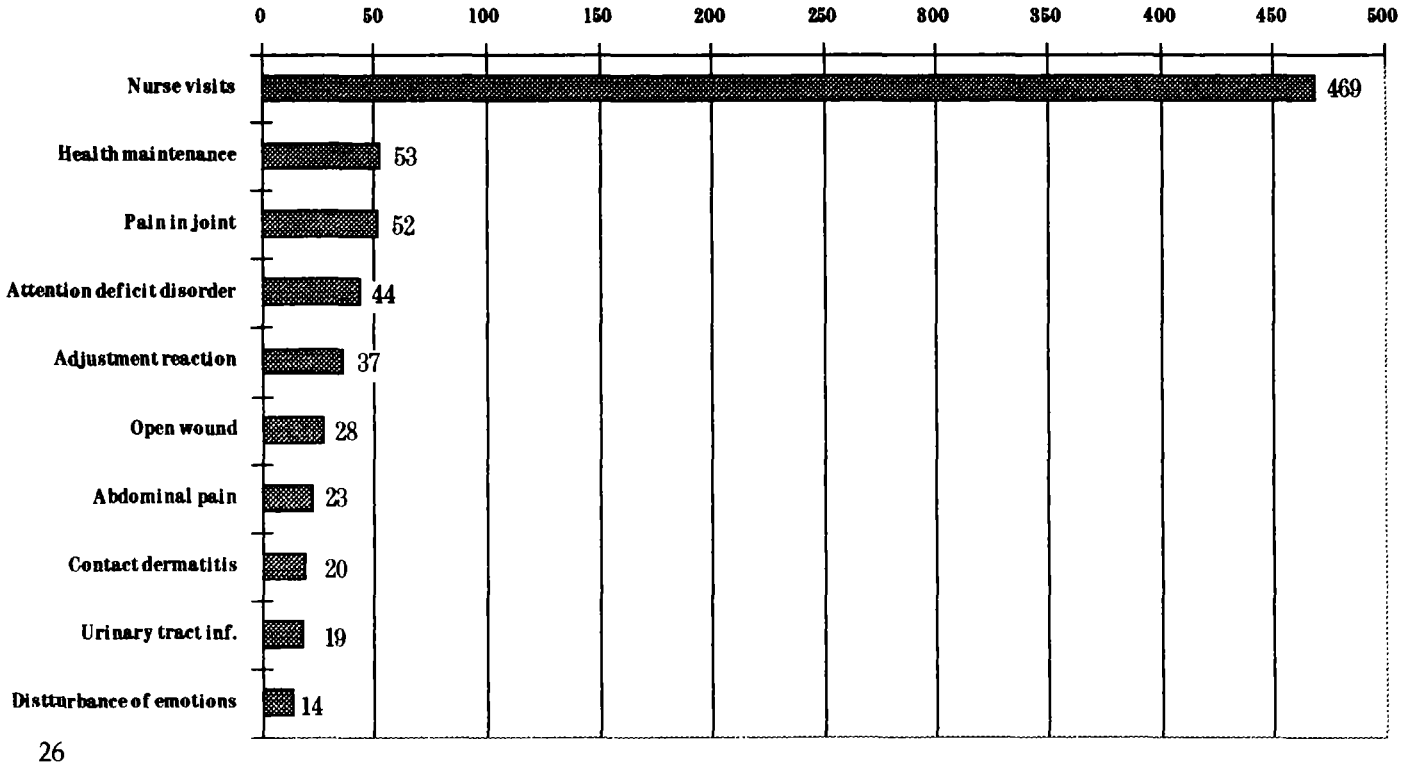
Grades served: PreK-12

Sponsoring Agency: West Feliciana School Board
Lloyd Lindsey, Superintendent

The West Feliciana Family Service Center operates out of Bains Elementary School and provides services for the community of St. Francisville. In addition to providing the standard school-based health center services for grades PreK-12, they conduct programs in parent education, literacy training for adults, and early childhood education. The Family Service Center also has a toy lending library on its premises.

The following information was obtained from the data in the Kaplan System:

10 Most Common Reasons for Visits - Family Service Center



Adolescent School Health INITIATIVE

George Washington Carver School-Based Health Center

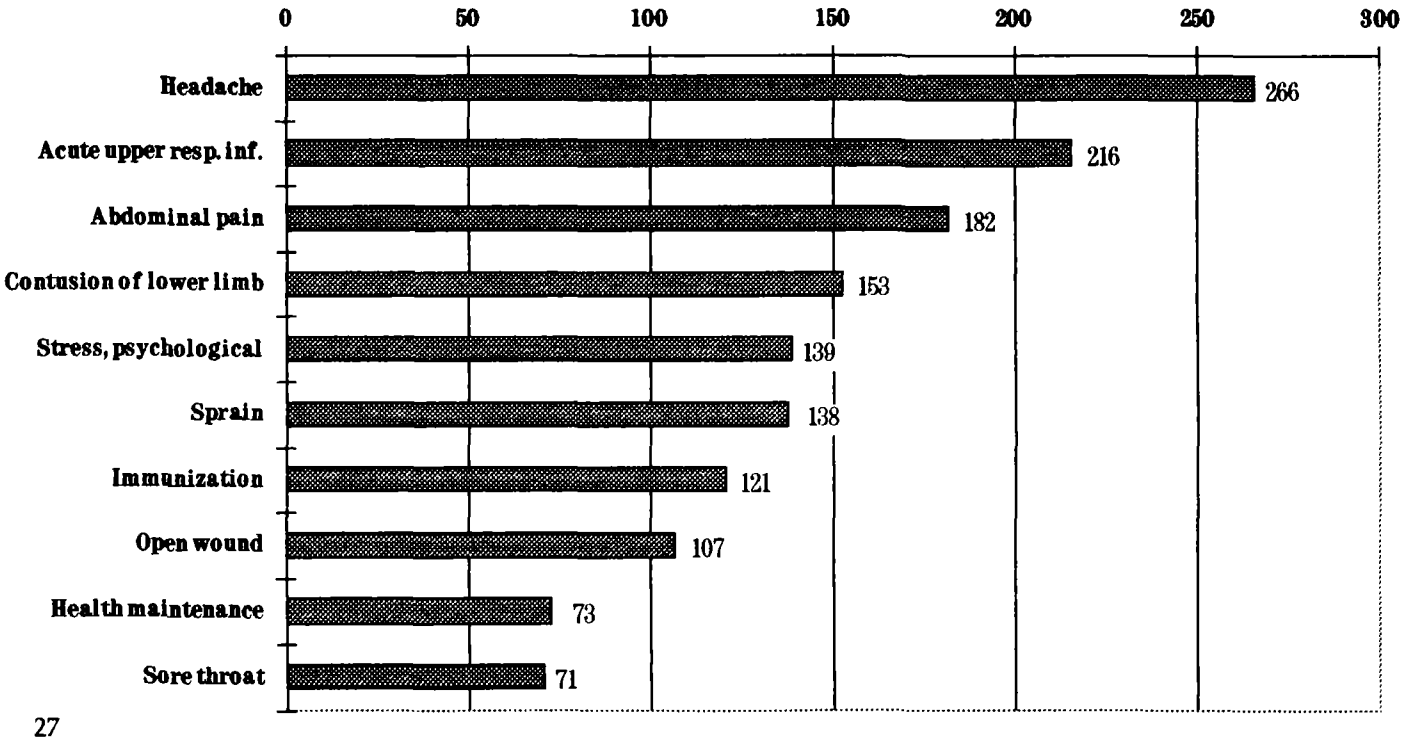
3059 Higgins Blvd.
New Orleans, LA 70126

Joan Thomas, Administrator
Tel: (504) 942-3691

School served: George Washington Carver Junior and Senior High
Total enrollment in school: 1300
Total enrollment in health center: 780
60% of students were registered with the health center
Carver also has a Day Care Center, whose children are registered with the health center. This accounts for about 25-30 registrations.
Total visits to health center: 3,195
Grades served: 7-12

Sponsoring Agency: City of New Orleans Health Department
Shelia Webb, Director

10 Most Common Reasons for Visits
Carver School-Based Health Center



Adolescent School Health INITIATIVE

Glen Oaks School-Based Health Center

5300 Monarch Ave.
Baton Rouge, LA 70811

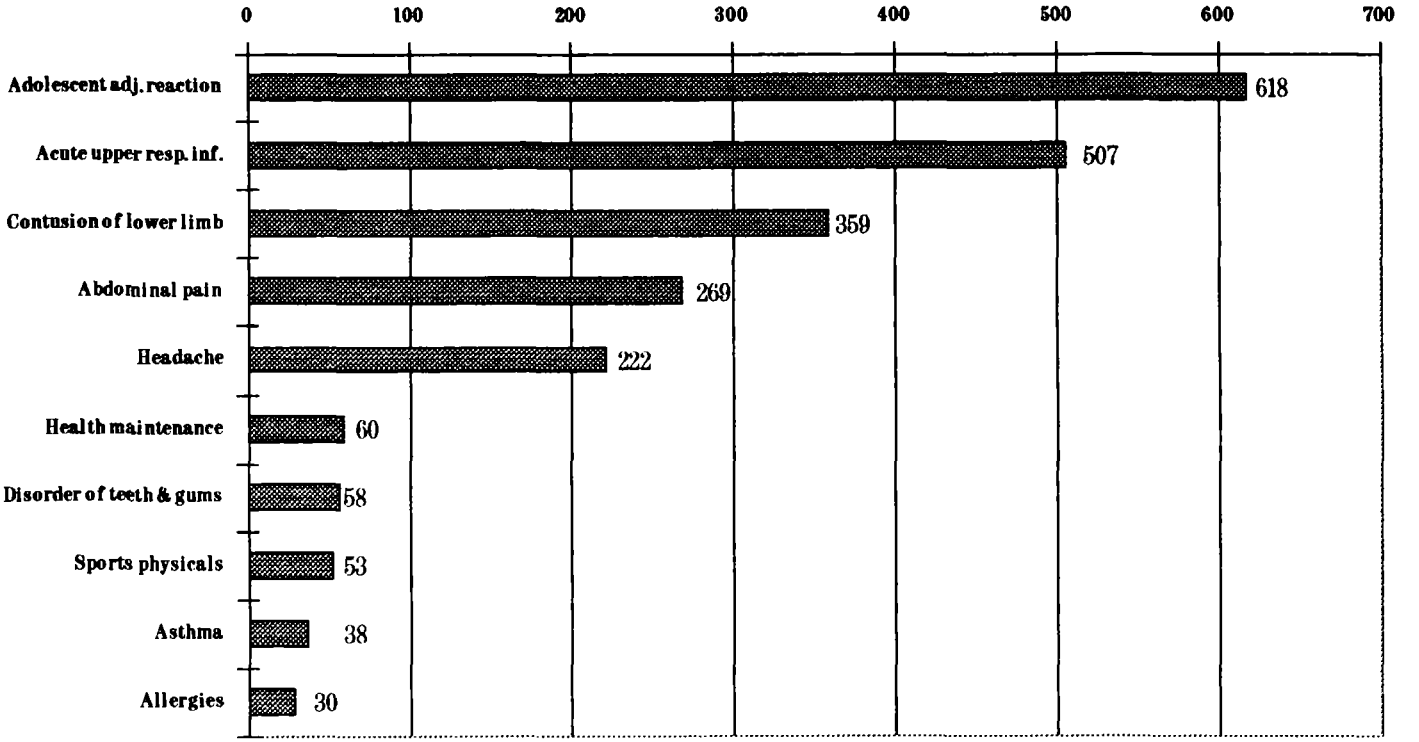
Melinda Brown, Clinic Coordinator
Tel: (504) 357-6119

Sue Catchings, Executive Director
Health Care Centers in Schools
Tel: (504) 922-2842

School served: Glen Oaks Middle School
Total enrollment in school: 940
Total enrollment in health center: 850
90% of students were registered with the health center
Total visits to health center: 3,031
Grades served: 6-8

Sponsoring Agency: LSU School of Medicine, Department of Family Medicine
Holley Galland, M.D.

10 Most Common Reasons for Visits Glen Oaks Middle School-Based Health Center



Adolescent School Health INITIATIVE

Istrouma School-Based Health Center

3730 Winbourne Ave.
Baton Rouge, LA 70805

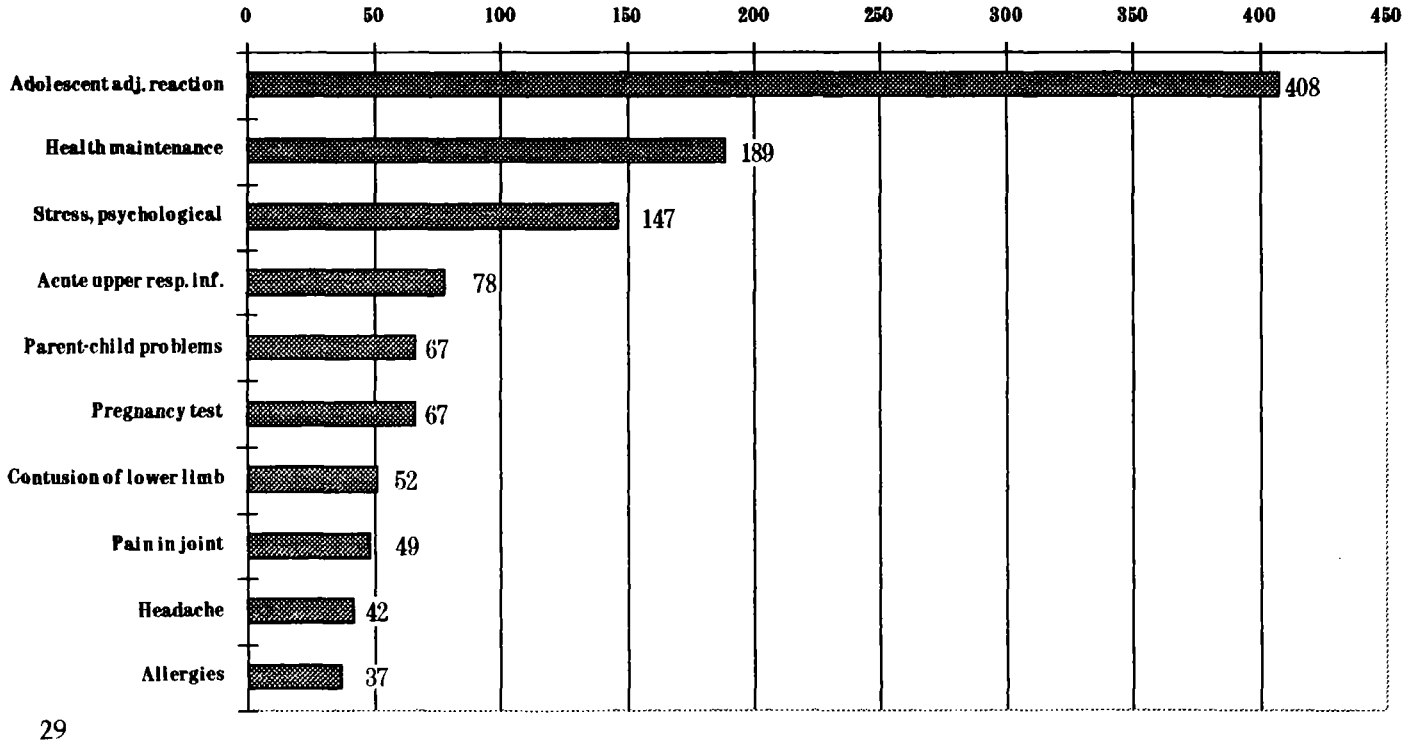
Gerri Brewer, Clinic Coordinator
Tel: (504) 355-6084

Sue Catchings, Executive Director
Health Care Centers in Schools
Tel: (504) 922-2842

School served: Istrouma High School
Total enrollment in school: 1,292
Total enrollment in health center: 1,098
85% of students were registered with the health center
Total visits to health center: 1,989
Grades served: 9-12

Sponsoring Agency: LSU School of Medicine, Department of Family Medicine
Holley Galland, M.D.

10 Most Common Reasons for Visits
Istrouma School-Based Health Center



Adolescent School Health INITIATIVE

Prescott School-Based Health Center

4055 Prescott Road
Baton Rouge, LA 70805

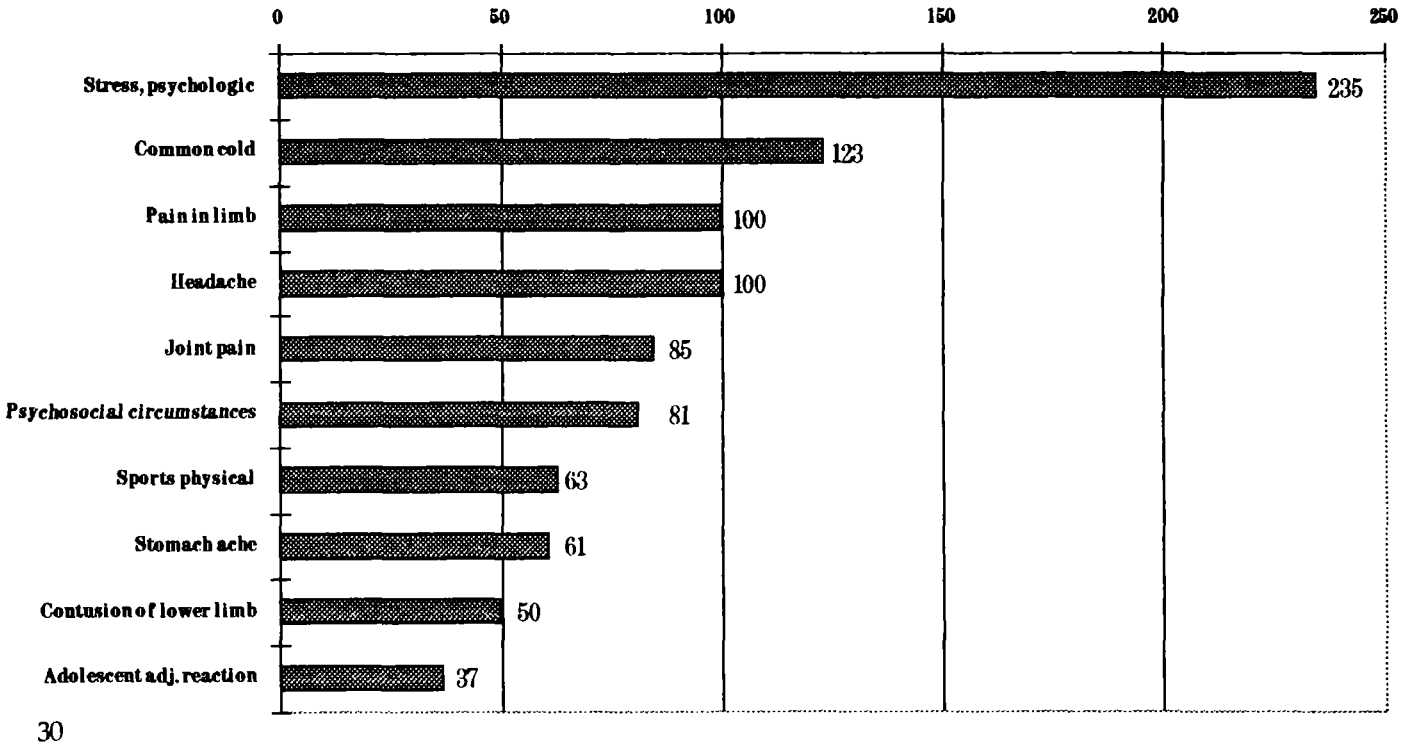
Renetta Welch, Clinic Coordinator
Tel: (504) 357-6085

Sue Catchings, Executive Director
Health Care Centers in Schools
Tel: (504) 922-2842

School served: Prescott Middle School
Total enrollment in school: 945
Total enrollment in health center: 850
90% of students were registered with the health center
Total visits to health center: 1,600
Grades served: 6-8

Sponsoring Agency: LSU School of Medicine, Department of Family Medicine
Holley Galland, M.D.

10 Most Common Reasons for Visits
Prescott School-Based Health Center



Adolescent School Health
INITIATIVE

Washington Marion Health Center

2802 Pineview Street
Lake Charles, LA 70601

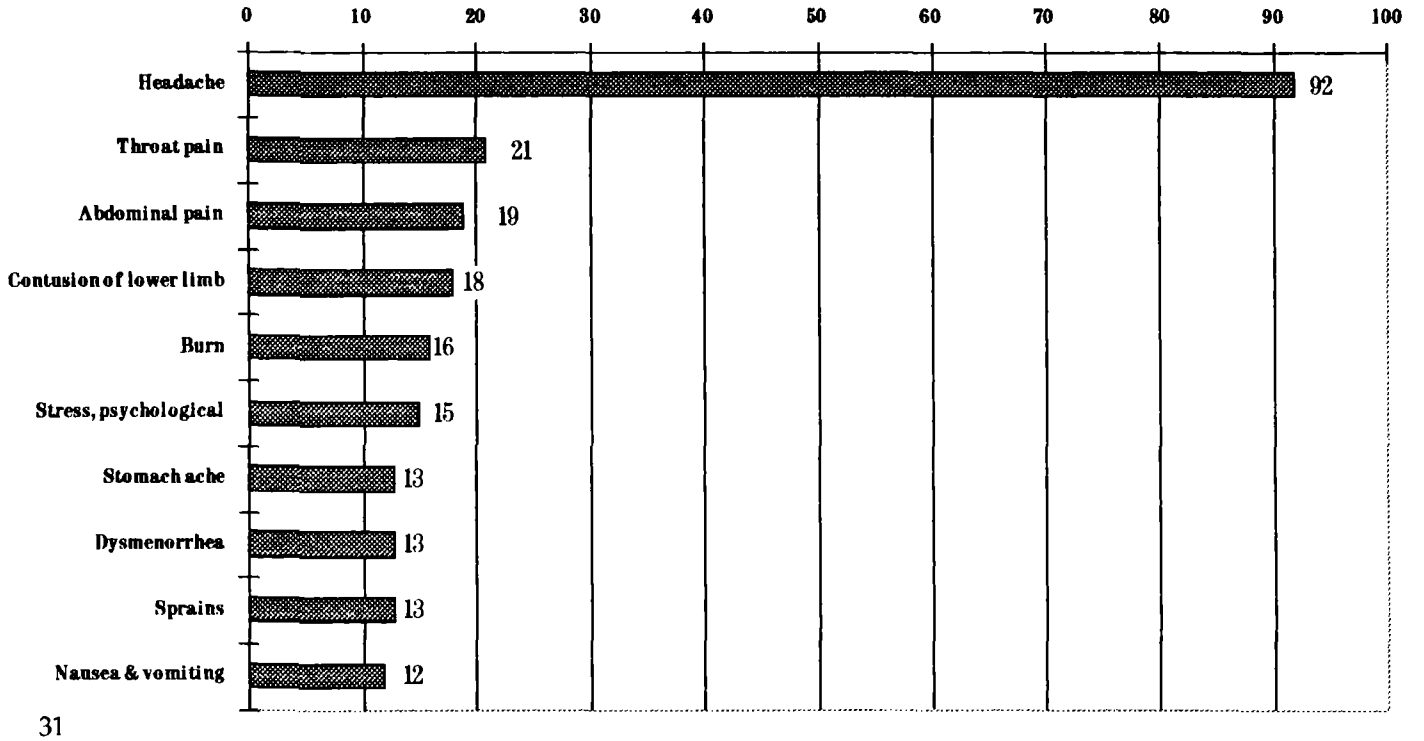
Pam Jackson Beal, Administrator
Tel: (318) 497-0233

School served: Washington-Marion Magnet School
Total enrollment in school: 756
Total enrollment in health center: 363
48% of students were registered with the health center
Total visits to health center: 494
Grades served: 9-12

Sponsoring Agency: Calcasieu Parish School Board
Jude Theriot, Superintendent

It should be noted that the Washington Marion Health Center did not open until April 1994, six weeks before the end of school.

10 Most Common Reasons for Visits
Washington Marion Health Center



Adolescent School Health INITIATIVE

Westdale School-Based Health Center

5650 Claycut Road
Baton Rouge, LA 70806

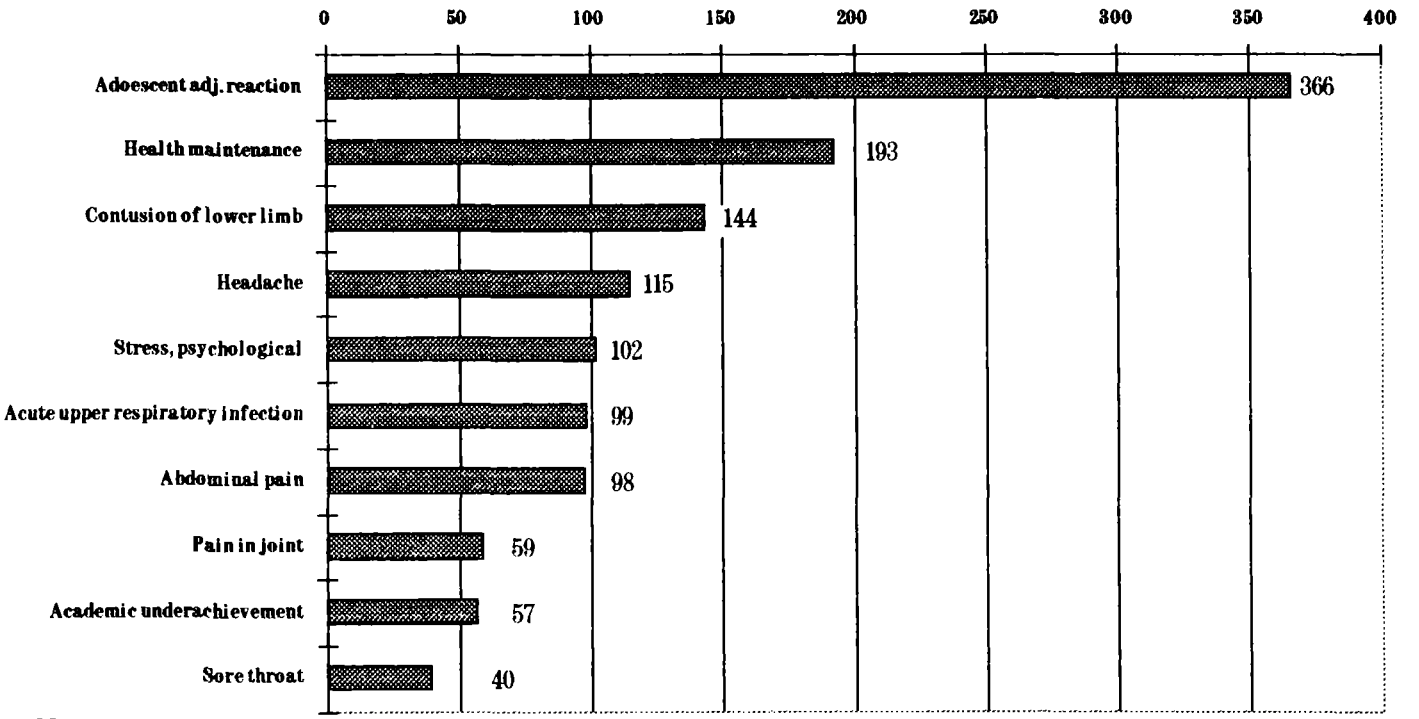
Andria Solete, Clinic Coordinator
Tel: (504) 922-2842

Sue Catchings, Executive Director
Health Care Centers in Schools
Tel: (504) 922-2842

School served: Westdale Middle School
Total enrollment in school: 602
Total enrollment in health center: 541
90% of students were registered with the health center
Total visits to health center: 1,891
Grades served: 6-8

Sponsoring Agency: LSU School of Medicine, Department of Family Medicine
Holley Galland, M.D.

10 Most Common Reasons for Visits
Westdale School-Based Health Center



Appendix B

Special Demonstration Grants

During the 1994-1995 fiscal year, increased funding resulted in increased school based health center activities and special projects. Funding provided through the Governor's crime package allowed fourteen school based health center planning and/or renovation projects to begin. Six of the fourteen projects received funding for site renovation. Of the fourteen planning projects begun during this period, four projects were terminated as a result of community opposition or inability to obtain local support.

Ten school based health center planning projects were funded through Maternal and Child Health Block Grant funds. Of the ten, five projects were terminated as a result of community opposition or inability to obtain local support. Below is a listing of those projects funded, those currently operating and those who are on hold because the crime package funding has not been renewed as of this date.

Planning Projects now Operational (by High School)	**Planning Projects on Hold** (by Parish)	**Planning Projects Terminated** (by Parish)
Bogalusa High	Avoyelles	Acadia
Capitol High,Baton Rouge,	Caddo	Assumption
Northside High, Lafayette	East Carroll	Evangeline
Reuben McCall High, Tallulah	Grant	Lafourche
Northwood High, Boyce	Iberville	Pointe Coupee
	Orleans	Sabine
	St. Helena	St. Charles
	St. Mary	Tangipahoa
	St. Tammany	

During the 1994-1995 fiscal year, funding through the Governor's crime package allowed implementation of nine special demonstration projects. Each project was implemented to promote adolescent physical, mental and/or emotional health. Recipients of grant funding follows.

Academic Distinction Fund, Baton Rouge

Purpose: 1) To strengthen and expand comprehensive school health in Baton Rouge, including student health services, as a part of local reform efforts by convening public schools, health agencies, citizens, and community based providers for strategic planning. 2) To work toward National Education Goals and Healthy People 2000 Goals by institutionalizing comprehensive school health for all school-aged children in Baton Rouge public schools by the year 2000.

Outcome(s): Formed eight committees to correspond to the eight areas of comprehensive school health; conducted a day-long kick-off retreat with planners and trainers; developed a document which identifies three-year strategic plan with detailed tasks for implementation in year one. State-wide conference held October 17, 1995 in Baton Rouge.

Agenda For Children, New Orleans

Purpose: To design a series of public education materials related to violence prevention for distribution through school based health centers. The materials were developed by a Youth Team with support from local graphic designers, artists, and staff from the Alliance for Human Services and Agenda for Children.

Outcome(s): Developed a theme and campaign to prevent youth violence. Developed a poster and brochure to be distributed to students through the school based health centers. Youth team of 15 members received training for six weeks on topics such as:

role of the spokesperson, public speaking, decision-making and the personal impact of violence. Developed a six minute video in which members of the team talk about their neighborhoods and the impact of violence on their lives. The campaign will be introduced to adolescents through the New Orleans Public School System.

Boys And Girls Clubs Of Greater Baton Rouge

Purpose: To provide an afterschool, holiday, and summer program for students at Prescott Middle School. To complete an operations manual for other communities to offer similar teen programs. Middle School. Developed operations manual for distribution to other communities.

Outcome(s): Developed program for students at Prescott Middle School. Developed operations manual for distribution to other communities.

Children's Bureau Of New Orleans

Purpose: To provide clinical services to children exposed to violence and to train mental health and school based personnel, in addition to parents, in ways of helping children to cope with violence exposure. To reduce, in children exposed to violence, symptoms of grief and/or trauma is order that they may continue to meet their developmental tasks.

Outcome(s): Provide clinical services to 20 youth at Booker T. Washington and Carver Senior High Schools. Because services are provided to siblings and parents/guardians, 42 children and 28 adults also received services. Students were trained to recruit other students and provide presentations to various school and agencies: Jefferson Parish Human Services Authority, New Orleans Police Department, YWCA-sponsored summer camp, New Orleans Substance Abuse Clinic, Dryades Street YMCA, Sophie B. Wright Middle School and Valena C. Jones and Thomy Lafon Elementary Schools. Began development of a training video which will highlight the effects of violence.

Comprehensive School Health Curriculum, Statewide

Purpose: To contribute to the purchase of comprehensive health education curricula for parish school systems.

Outcome(s): Various school systems within the state received funding which assisted each school system in evaluating and purchasing comprehensive health education curricula.

LSU Agricultural And Mechanical College, Baton Rouge

Purpose: To gather information on the child's phenomenological experience of violence. To recruit 100 voluntary subjects from various communities within East Baton Rouge Parish in addition to children and adolescents from the East Baton Rouge Parish public school system.

Outcome(s): Recruited subjects for study. Developed written report on outcome of study.

New Orleans Public Schools

Purpose: To develop a needs assessment tool to be distributed through staff and community members at schools with school based health centers which will assess the safety needs of the school environment.

Outcome(s): Developed a needs assessment tool which was distributed to schools with school based health centers.

Planned Parenthood Of Louisiana, New Orleans

Purpose: To develop a pilot peer education program at Lawless High School, which will operate as an outreach component of the school based health centers to promote health lifestyles and postponing sexual activity.

Outcome(s): Held peer education conference in Baton Rouge, La. for students and personnel of Louisiana school based health centers. Trained students at Lawless High School to become peer educators. Training included communication and theatrical skills. Produced video of the training program.

Tulane Center For Cardiovascular Health, New Orleans

Purpose: To augment services of Orleans Parish School Based Health Centers by producing health promotion/education training modules.

Outcome(s): Developed health education modules for the three school based health centers in New Orleans. Modules included videos and print material targeted to the adolescent patient on physical fitness and healthy eating and informational "tip sheets" for teachers.

Twomey Center For Peach Through Justice, Loyola University, New Orleans

Purpose: To provide introductory training in Resolving Conflict Creatively program to teachers and parents of students attending Booker T. Washington and Alfred Lawless High Schools.

Outcome(s): Conducted two-day parent training workshops and three-day teacher workshops at Booker T. Washington and Lawless Senior High Schools.