

CDC Operationalized 1305 Performance Measure

Date: 12/18/2015

Performance Measure 4.5.07: Number of students identified with chronic conditions in local education agencies with staff that received professional development and technical assistance on assessment, counseling, and referrals to community-based medical care providers for students on activity, diet, and weight-related chronic conditions.

Strategy: Implement policies, processes, and protocols in schools to meet the management and care needs of students with chronic conditions (e.g. asthma, food allergies, diabetes, and other chronic conditions related to activity, diet, and weight).

Intervention (Enhanced only): Providing assessment, counseling, and referrals to community-based medical care providers for students on activity, diet, and weight-related chronic conditions.

Basic

Enhanced

Domain 2: Environmental Approaches that Promote Health

Domain 3: Health Systems Interventions

Domain 4: Community Clinical Linkages

Short Term

Intermediate

Long Term

AREAS	EXPLANATION
Purpose of Performance Measure	<ul style="list-style-type: none"> The purpose of this performance measure is to determine the extent to which students are identified with chronic conditions. Health, mental health, and social services staff members serve as liaisons between schools staff members, students, families, community programs, and health-care providers. Community resources can address health, mental health, and social service gaps that the school might not have the resources or expertise to address adequately. School health personnel should establish systematic processes and criteria for referring students to external primary health-care providers.
Results Statements	<ul style="list-style-type: none"> In the US, CDC funded grantees worked to the number of students identified with chronic conditions in LEAs with staff that received professional development and technical assistance about assessment, counseling, and referrals to community-based medical care providers for students on activity, diet, and weight-related chronic conditions.
Definition of Terms <i>(Key concepts defined)</i>	<p>A chronic condition is a health condition that requires more than routine health services and may include, or increase the risk for, ongoing physical, developmental, behavioral, and/or emotional conditions. While states have the freedom to address any chronic condition affecting children in their jurisdiction, the intent of the FOA is to focus on at least one of the following conditions (in no particular order): asthma, diabetes, epilepsy or seizure disorder, food allergies, hypertension/high blood pressure, or obesity.</p> <p>Daily Management of Chronic Conditions in School Settings refers to a set of activities, actions, and protocols that collectively provide a safe and supportive environment in which the risk for an exacerbation of the chronic condition is reduced and/or eliminated. For example, establishing protocols for ensuring that daily, preventive, and/or quick-relief medications are available at school, when appropriate, and are taken as prescribed by a physician; educating students with a chronic condition about their condition and how to recognize and monitor symptoms; and providing appropriate modifications to the environment to reduce or eliminate exposure to substances that may initiate an exacerbation.</p> <p>Emergency Response to Chronic Conditions in School Settings refers to a set of activities, actions, and protocols that collectively provide a safe and supportive environment in which all parties are aware of the signs and symptoms of a worsening episode/exacerbation of a chronic condition that requires taking immediate action. For example, developing a system to immediately notify the appropriately training</p>

	<p>individuals in the school who will respond to emergencies that may require medical support (e.g. school nurse, or nursing assistant); providing training to school staff on recognizing the signs and symptoms of a worsening episode (increased wheezing during an asthma exacerbation or observing an external change in behavior due to an abnormal decrease in blood glucose levels); and establishing protocols within the school/school district regarding the process for when and how to engage community-based emergency response support (e.g. emergency medical technicians/ambulance).</p> <p>Community Medical Care Provider refers to school-based and/or school-linked health centers, outside health-care providers (e.g., private physicians and dentists, hospitals, psychologists, and other mental health workers, pediatric weight management clinics, community health clinics, and managed care organizations), pharmacies, local health departments, community-based nutrition and physical activity providers and services (e.g., dietitians, recreational programs, and cooking classes).</p> <p>Local education agency (LEA) is another word for school district and will be referred to as LEA throughout this document.</p> <p>Professional development (PD) refers to a set of skill-building processes and activities designed to assist targeted groups of participants in mastering specific learning objectives. Such events are delivered in an adequate time span (at least 3 hours) and may include curriculum and other training, workshops, and on-line or distance learning courses. Professional development may be delivered by the State Department of Health and/or its partners. Professional development provided by critical partners provide PD with content relevant to assessment, counseling, and referrals to community-based medical care providers for students on activity, diet, and weight-related chronic conditions can count for this performance measure. Professional development should be focused on highly effective trainings and workshops. Below is a list of professional development options, noting length and degree of effectiveness:</p> <ul style="list-style-type: none"> ○ Trainings, 3+ hours long, Highly Effective* ○ Workshops, 3+ hours long, Highly Effective* ○ Presentations, 0.5 – 3 hours long, Knowledge Transfer Only ○ Information Session, 0.5 – 1 hour long, Minimum Knowledge Transfer <p>Technical assistance (TA) refers to tailored guidance to meet the specific needs of a site or sites through collaborative communication between a specialist and the site(s). Assistance takes into account site-specific circumstances and culture and can be provided through phone, mail, e-mail, Internet, or in-person meetings. Technical assistance may be delivered by the State Department of Health and/or its partners. Technical assistance provided by critical partners that provide TA on content relevant to assessment, counseling, and referrals to community-based medical care providers for students on activity, diet, and weight-related chronic conditions can count for this performance measure. Note that the length and degree of effectiveness of technical assistance varies.</p>
Unit of Analysis	<ul style="list-style-type: none"> • Students within targeted local education agencies (i.e., school districts)
Intended/Targeted Population	<ul style="list-style-type: none"> • Students in local education agencies with no knowledge or limited knowledge about assessment, counseling, and referrals to community-based medical care providers for students on activity, diet, and weight-related chronic conditions.
Numerator/Count	<ul style="list-style-type: none"> • Actual number of students identified with chronic conditions in targeted LEAs with staff that received professional development or technical assistance on assessment, counseling, and referrals to community-based medical care providers for students on activity, diet, and weight-related chronic conditions.
Denominator	<ul style="list-style-type: none"> • N/A (States are not required to report the denominator for performance this measure; however if states choose to report a denominator it should be

	documented in the measure notes field of the reporting template.)
Rate/Percentage	<ul style="list-style-type: none"> N/A
Disparities Focus	Approach related/specific: <ul style="list-style-type: none"> Approach related/specific: In selecting high-need LEAs consider using the following data: academic, health, SES, free and reduced priced lunch data
	Stratification: <ul style="list-style-type: none"> N/A
Data source(s)	The following data sources can/should be used to collect data for this measure: <ul style="list-style-type: none"> Student tracking system School nurse or clinic records School registration records
	Not Appropriate: <ul style="list-style-type: none"> School Health Profiles
Frequency of Data Collection	<ul style="list-style-type: none"> Annually
References/Resources	<ul style="list-style-type: none"> Centers for Disease Control and Prevention. Strategies for Addressing Asthma Within a Coordinated School Health Program, With Updated Resources. Atlanta, GA: Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion, 2006. Available at: www.cdc.gov/HealthyYouth/asthma/pdf/strategies.pdf Centers for Disease Control and Prevention. School health guidelines to promote healthy eating and physical activity. MMWR 2011; 60(5):2011. www.cdc.gov/mmwr/pdf/rr/rr6005.pdf
Questions/Issues for CDC Grantee Collaboration	<ul style="list-style-type: none"> N/A
Additional Information/Guidance	<ul style="list-style-type: none"> Identified students should represent LEAs targeted for professional development or technical assistance (e.g., LEAs not previously targeted for managing chronic conditions professional development and technical assistance, high-need LEAs based on academic, health, SES, free and reduced priced lunch data). The number of targeted LEAs should not exceed 15.