CDC Operationalized 1305 Performance Measure

Date: 12/15/2015

Performance Measure 4.5.02: Percent of schools that identify and track students with chronic conditions that may require daily or emergency management, e.g. asthma and food allergies.

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)***:** Identifying and tracking students with chronic conditions that may require daily or emergency management, e.g. asthma and food allergies.

☐ **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	• The purpose of this performance measure is to determine the extent to which schools are identifying and tracking students that may require daily or emergency management. Tracking and case management can contribute to improved medical management of students with chronic conditions.[1-4]
Results Statements	• In the US, CDC funded grantees worked to increase the number of schools that identify and track students that may require daily or emergency management.
Definition of Terms *(Key concepts defined)*	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. **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. **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 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).

	Local education agency (LEA) is another word for school district and will be referred to as LEA throughout this document.
Unit of Analysis	• Schools within targeted local education agencies (i.e., school districts)
Intended/Targeted Population	• Schools in targeted local education agencies that do not identify and track students with chronic conditions.
Numerator/Count	• N/A
Denominator	• N/A
Rate/Percentage	• Percent of schools, among targeted LEAs, that identify and track students with chronic conditions that may require daily or emergency management, e.g. asthma and food allergies.
Disparities Focus	**Approach related/specific:** • Approach related/specific: In selecting high-need LEAs consider using the following data: academic, health, SES, free and reduced priced lunch data
	Stratification: • N/A
Data source(s)	The following data sources should be used to collect data for this measure: • 2014, 2016, 2018 School Health Profiles (2016 Principal Questionnaire, Q42) •
	Not Appropriate: • National Survey of Children's Health • YRBS
Frequency of Data Collection	• Biannually
References/Resources	• Taras H, Wright S, Brennen J, Campana J, Lofgren R. Impact of school nurse case management on students with asthma. Journal of School Health. 2004; 74(6):213-219. • Erickson CD, Splett PL, Mullett SS, Jensen C, Belseth SB. The healthy learner model for student chronic condition management-Part II: The Asthma Initiative. Journal of School Nursing. 2006; 22(6):319-329. • Levy M., Heffner B, Stewart T, Beeman G. The efficacy of asthma case management in an urban school district in reducing school absences and hospitalizations for asthma. Journal of School Health. 2006; 76(6):320-324. • Splett PL, Erickson CD, Belseth SB, Jensen C. Evaluation and sustainability of the healthy learners asthma initiative. Journal of School Health. 2006; 76(6):276-282.
Questions/Issues for CDC Grantee Collaboration	• N/A
Additional Information/Guidance	• N/A