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Testimony in Reference to HB No. 7366 concerning School Based Health Centers and Community Health Centers

Representative Peggy Sayers, Representative Mary Ann Handley and the Members of the Public Health Committee:

My name is Jennifer Handau and I am a Nurse Practitioner at Broadview Middle School's School-Based Health Center (SBHC) in Danbury, Ct.

I first want to take a few seconds to explain how what I do has a ripple effect on the community around us, and could potentially have on more if new SBHC's are funded.

Every parent in this room at one time has put a child on the bus with a snuffle, a cough, or a sore throat and wondered when during their day the school nurse would call. If that call came, it would be a negotiation between the parents as to who would leave their job to not only get the child, but then to make the pediatricians' appointment, which most often winds up with a diagnosis of a virus - so take some Motrin and rest. And lose a days' work.

Now imagine you are a 34 year old single mother of two who has just come off welfare and has started a new job just a few months ago. Your child is coughing this morning - coughing a lot - but you can't take another day off or you will get fired and have to back on the state. The clinic is only open during work hours. You have no insurance. Most likely, you will wind up at the ED and have a \$500 bill you can't pay.

But this is not the case if your child's school has a SBHC. When the child goes to the nurse, she sends them to me. I see every child, regardless of insurance, and take care of them. I treat things as simple as colds to complex problems such as untreated asthma, diabetes, and some pregnancies. A good portion of children that I see have sore throats and coughs - problems that in most schools children are sent home for and parents must leave work. In my school, they come to me; I listen to their lungs, look in their ears, give them a strep test, and most of the time can send them back to class with a Motrin, some cough drops, a little TLC - whatever they need. It saves everyone's day involved. This has personal as well as economic impact.

I see a large proportion of uninsured children. Some are kids whose parents are too busy or working too hard to monitor their medical care closely. One such boy came to me with a cough that he told me he had had since summer. It was November. Mom gives him "a lot of something red", but it doesn't work. There's no time to go to the clinic. They can't afford a private practice. Because I can spend a lot of time with him, which is something I couldn't do when I worked in a private office, I learned that he has had this problem for a lot longer than a few months. In fact, he has probably had asthma for years. I was able to start him on treatment, follow him every day or every other day until he

understood what he was supposed to do, and then intervene with a pharmaceutical company to get him free medicine for a year.

I am also working to address larger health concerns in the school. I'm sure you are all familiar with the HPV vaccine, Gardasil - the one that prevents cervical cancer - and have read the articles on CNN or MSNBC that private practices are declining to give it because they don't make enough money per dose. Well, I have it - and I have every intention of giving it to every eligible girl in my school. In fact, we had our mass mailing to the students two weeks ago and our first immunization clinic is on February 21st. And we have begun addressing obesity with the application of a grant to fund a pilot project.

SBHC provide a vital service by providing holistic, comprehensive care to the neediest of our children and making them feel like they have a place to address their concerns. More funding would help benefit the health of the student body as a whole, and individually provide for the neediest students to receive consistent, quality care. Thank you.

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