

Community Health Needs Assessment: Implementation Strategies

Tax Year 2015

Posted on February 15, 2017 for public comment

Public comment on this report is encouraged and should be sent via email to: CHNAFeedback@cookchildrens.org

This report is provided in fulfillment of the requirement of IRS Notice 2011-52 addressing the Community Health Needs assessment [CHNA] for charitable hospitals in section 501(r).

Introduction

This document is a companion to the September 30, 2016 "Community Health Needs Assessment Report" by Cook Children's Medical Center and Cook Children Northeast Hospital. It describes the implementation strategies undertaken by Cook Children's as approved by the Boards of Trustees.

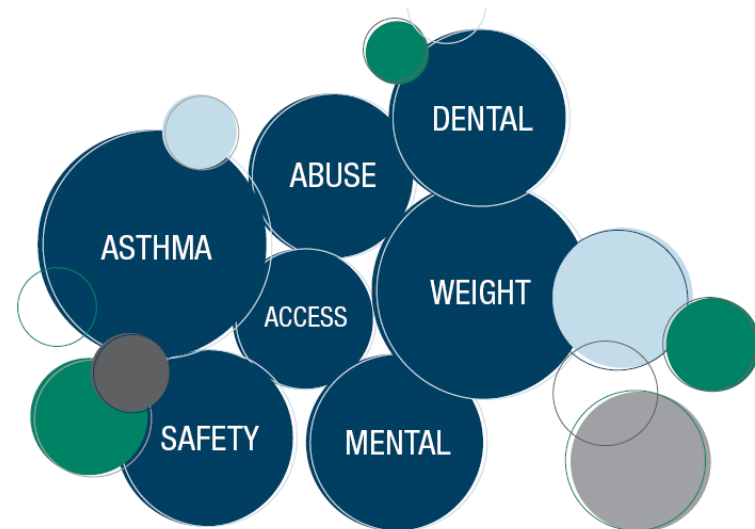
Those documents are prominently displayed with requests for public comments on the main landing page for Cook Children's at <http://www.cookchildrens.org>:



All of the public comments received during the year where sales promotions and business solicitations that were unrelated to Cook Children's CHNA.

Background

The initial CHNA was based upon a parent perception survey of their child's health and their concerns about child health issues. The effort known as the Community-wide Children's Health Assessment and Planning Survey [CCHAPS] was first conducted in 2008-2009 across a six-county wide service area with more than 7,300 parent responses and is completely documented at www.centerforchildrenshealth.org/en-us/About/Pages/default.aspx.



Upon completion of the various analyses the CCHAPS / CHNA Report was presented to the Cook Children's System Board of Trustees on April 28, 2009. Using group process techniques followed by a nominal voting exercise, seven children's health issues were identified as having the greatest likelihood of being improved through the efforts of Cook Children's.

Board of Trustees direction . . .

In addition to selecting the priority issues from the CHNA, the board of trustees further directed that;

1. The survey, data and related results are made accessible to the public.
2. Community Health Outreach efforts already underway, are aligned with and expanded to encompass the seven child health issues identified
3. The data are used for additional research to understand and communicate greater detail about each issue and, where appropriate, geographically granular so the data is more relevant to specific communities within the PSA and awareness about children's health issues maintained.
4. These efforts are sustained by creating an entity within Cook Children's to assure the issues and the interventions continue to receive appropriate attention to their resolution.
5. These implementation strategies are a part of the organization's annual strategic plan and become a part of the executive leadership's regular performance review and compensation.

Collectively these strategies are known as “Healthy Children 2020”

Base implementation strategy for “Healthy Children 2020 . . .

Following the direction of the Board of Trustees, a three-pronged approach is used to address each of the identified child health needs as identified by the Community Health Needs Assessment [CCHAPS 2015]:

1. Develop and sustain demonstrably effective hospital-based programs and services that seek to improve children's health.
2. Develop and sustain effective community-based coalitions and programs in the 6-County area that comprise the organization's primary service area – Denton, Hood, Johnson, Parker, Tarrant and Wise Counties.
3. Sustain the Center for Children's Health as the infrastructure to understand and communicate relevant child health issues and foster implementation strategies.

Specific strategies for each of these approaches and the community child health issues identified by CCHAPS 2015 are contained in the following pages.

Foster an increasing awareness about child health issues

Strategy		Time Line	Unit(s) of Measure	10/1/2014 to 9/30/2015	10/1/2015 to 9/30/2016
1	Host a regional child health summit for the 6-county primary service area to share the region-wide results of CCHAPS 2015 with participants.	October, 2015	Date of Regional Summits		10/21/2015
2	Host a county level child health summit in each of the 5 outlying Counties to share the county-level results of CCHAPS 2015 for each county.	June, 2016	Dates of County Summits		2/11 Wise 3/24 Parker 4/14 Hood 5/12 Denton 5/21 Johnson
3	Improve awareness about child health issues via social and digital media, e.g., Website, Twitter, etc.	On-going	# of C4CH Website visitors	6,084	6,150
			# C4CH Twitter Impressions		80,643
4	Seek opportunities and accept invitations to present the survey findings and child health issues in national, regional, state and local venues.	On-going	# of presentations	30	31
			# of participants	1,609	6,288
5	Publish and distribute a quarterly magazine (in both English and Spanish at a generally acceptable reading level) which informs parents around the region about the identified child health issues, provides helpful parenting tips to foster their child's health and provides parent-child interaction opportunities.	On-going	Circulation		35,025
6	Publish and maintain a "centralized" repository of informational videos - on YouTube" - which address identified children's health issues	On-going	# of videos on YouTube	50	60
			# of views (cumulative)		31,937
7	Using the survey data from CCHAPS mentor select masters and doctoral candidates data-mining efforts to improve our understanding of the survey results. Additionally, prepare and submit two (2) relevant articles for publication in professional journals per year.	On-going	# of candidate presentations	10	10
		On-going	# of published articles		
8	Sustain the Community-wide Children's Health Assessment and Planning Survey as our means of a community health needs assessment of the health of children in the 6-County primary service area for Cook Children's.	On-going	Complete survey process every 3-years	CCHAPS 2015	next survey CCHAPS 2018

Engage communities to act upon child health issues¹

Strategy		Time Line	Unit(s) of Measure	10/1/2014 to 9/30/2015	10/1/2015 to 9/30/2016
1	Continue to support and sustain community coalitions' membership and issue specific program(s) as led by Cook Children's through the community coordinators.	On-going	# of community partners	225	237
2	Look for appropriate ways to increase the capacity of communities to expand the reach of their respective programs or to adopt other issues of interest to the specific community.	On-going	t.b.d.		
3	Develop and implement a regional training opportunity on behalf of the Center for Children's Health to increase the capacity of Center for Children's Health coalition members and other community partners to improve children's health.	Before October 2018	Dates of Skill-building Workshops	Jun-Jul Health Literacy	no workshops in a regional summit year

Notes:

¹Current Community Coalition's led by Cook Children's include the following:

- Child Activity, Nutrition and Weight Management – Healthy Children Coalition for Parker County, Johnson County Alliance for Healthy Kids
- Child Oral Health – Children's Oral Health Coalition, Save A Smile
- Child Mental Health and Well-being – Wellness Alliance for Total Children's Health of Denton County
- Prevention of Child Accidental Injury – Safe Kids of Tarrant County
- Prevention of Child Maltreatment – Wise Coalition for Healthy Children, Hood County for Healthy Children

Improve control of childhood asthma

Strategy		Time Line	Unit(s) of Measure	10/1/2014 to 9/30/2015	10/1/2015 to 9/30/2016
1	Continue to offer shared medical appointments for families with children with asthma in the neighborhood clinic / primary care setting.	On-going			
2	Assess the impact of the ISD asthma awareness campaign and related videos to determine if that is an effective tool.	Dec-16	Decision		Move support to Asthma 4-1-1 and 2-1-1
3	Develop and upon Board funding, pilot a Healthy Homes Program that uses trained community health workers to assess homes for asthma triggers and offers remediation of those triggers to reduce asthma episodes requiring ER visits. Pilot based on children seen in Cook Children's Medical Center ER 3 or more times in a 12-month period with asthma. Expand the Healthy Homes asthma program to include all members of CCHP seen 2 or more times in the past 12 months in the ER with a diagnosis of asthma.	On-going, if 2016 pilot successful	% Eligible Patients enrolled		48.7%
			ER visits Pre-		114
			ER visits Post-		19
4	Improve the controller medication compliance rate for Cook Children's Physician Network patients with asthma	On-going	% Asthma patients with Controller Rx	33.9%	37.5%
5	Improve the rate of children who are Cook Children's Physician Network asthma patients having an individual asthma action plan	On-going	% Asthma patients with Asthma Action Plan	6.4%	19.5%
6	Explore and find ways to support Asthma 2-1-1 and Asthma 4-1-1 community initiatives in partnership with UNT Health Sciences Center and FWISD to reduce the number of school-based asthma episodes and related EMS support / transport.	Begin school year 2016-2017	t.b.d.		
7	Locate an applications developer and explore developing a novel "app" for improving asthma control using social media and digital technology.	Begin 2017	t.b.d.		

Improve child lifestyle [activity, nutrition and weight]

Strategy		Time Line	Unit(s) of Measure	10/1/2014 to 9/30/2015	10/1/2015 to 9/30/2016
1	Sustain and grow the use of GoNoodle® (deskside movement and kinesthetic learning) by all elementary schools in the 56 ISDs in the 6-County target areas.	On-going	% active use by eligible schools	72.0%	85.0%
			% active use by eligible student	38.0%	51.0%
			total number of active student	124,859	165,745
			Annual aggregate minutes of use	35,831,123	61,096,853
2	[Johnson and Parker Counties] Sustain 5-2-1-0 education programming by increasing the number of "ambassadors" effectively trained to teach 5-2-1-0 to 3rd and 4th graders	On-going	# of net new ambassadors	12	35
3	[Johnson and Parker Counties] Continue to support existing school-based community gardens and adding new ones as opportunity and school support permits.	On-going	# of children at a garden planting	531	1,424
4	[Johnson and Parker Counties] Sustain the school-based 5-2-1-0 school program (and related videos) as opportunity and school support permits while continuing to expand the number of train-the-trainer participants.	On-going	# of children at a 5-2-1-0 session	817	1,501
5	[Johnson and Parker Counties] Publish and distribute awareness materials and prevention tools (brochures, fact sheets, hand outs, posters, other collateral materials) on child nutrition and physical activity.	On-going	# of printed or other resources distributed	14,140	13,601
6	Improve the number of children seen by Cook Children's Physician Network with a BMI >95% who are referred to resources for weight management, nutrition and physical activity	On-going	% patients BMI >95% with Dietary / Nutrition referral	89.9%	78.8%
7	Improve the number of children seen by Cook Children's Physician Network with a BMI >95% who are evaluated for obesity and associated cardiovascular risk factors	On-going	% patients BMI >95% with related lab orders	39.8%	40.6%
8	Charter a multi-disciplinary "Health and Wellness Council" to explore building a comprehensive, community-centered virtual health-focused network designed to improve the health and well-being of children in our 6 county region.	Through 2017	t.b.d.		

Improve child mental health and well-being

Strategy		Time Line	Unit(s) of Measure	10/1/2014 to 9/30/2015	10/1/2015 to 9/30/2016
1	[Denton County] Establish and sustain a Website that provides parents with awareness and access to resources that foster their child's mental well-being.	On-going	# of unique visitors to the Website	1,109	991
2	[Denton County] Publish and distribute awareness materials (brochures, fact sheets, hand outs, posters, other collateral materials) on child mental health issues.	On-going	# of printed or other resources distributed	4,029	16,356
3	[Denton County] Host a sustainable series of "Wellness Workshops" intended to foster improved community-wide knowledge about mental health resources for families	On-going	# of Wellness Workshops	3	3
			# of annual participants	175	131
4	Cook Children's patients with a mental health diagnosis is cared for by a provider trained in Trauma Informed Care [TIC].	On-going	% care for by TIC trained providers	100.0%	100.0%
5	Children admitted to CCMC's high-risk psychiatric unit will be assigned a Psychiatric RN Case Manager to coordinate care	On-going	% assigned a case manager	100.0%	100.0%
6	Every Cook Children's Neighborhood Clinic will have access to co-located mental health assessment services.	On-going	% NHCs with mental health on-site	16.7%	16.7%
7	Every child will has timely access to mental health services through their medical home	On-going	days to 3rd next available psych appointment	58	29

Improve child oral health

Strategy		Time Line	Unit(s) of Measure	10/1/2014 to 9/30/2015	10/1/2015 to 9/30/2016
1	Sustain oral health education programming increasing the number of "ambassadors" effectively trained to teach oral health information	On-going	# of net new ambassadors	38	46
2	Publish and distribute awareness/educational materials (brochures, fact sheets, hand outs, posters, other collateral materials) on child oral health issues.	On-going	# of printed or other resources distributed	41,124	44,322
3	Assemble and distribute age-appropriate children's oral health kits to children residing in zip codes with a lower than average household income.	On-going	# via CHOC	23,861	22,230
			# via SaS	6,650	7,435
			# via NHC	<u>26,853</u>	<u>23,886</u>
			Total	57,364	53,551
4	Sustain and grow the "Save A Smile" dental treatment program connecting volunteer dentists to underserved children requiring dental treatment.	On-going	# of limited oral evaluations	4,846	5,746
			# needing treatment	838	892
			# treated	330	289
5	Reduce the number of children receiving outpatient dental surgery who do not have non-dental co-morbidities that require the use of general anesthesia.	On-going	# without medical complexity	259	219

Prevent accidental injury to children [drowning, poisoning, child passenger safety]

Strategy		Time Line	Unit(s) of Measure	10/1/2014 to 9/30/2015	10/1/2015 to 9/30/2016
1	[Drowning] Build and sustain a multi-city coalition that works to reduce the absolute number of child drowning occurrences.	On-going	# of partnering cities	2	15
2	[Drowning] Publish and distribute awareness/educational materials and prevention tools (brochures, fact sheets, hand outs, posters, other collateral materials) on child drowning prevention	On-going	# of printed or other resources distributed	14,115	44,353
3	[Drowning] Evaluate and stratify the key reasons / issues surrounding child drowning in Tarrant County. Develop a pilot intervention to reduce child drownings and recommend Board approval for implementation Summer 2017	May, 2017	t.b.d.		
4	[Poisoning] Sustain poison prevention education programming by increasing the number of "ambassadors" effectively trained to teach poison prevention.	On-going	# of net new ambassadors	18	73
			# of parents trained	129	173
5	[Poisoning] Publish and distribute awareness/educational materials and prevention tools (brochures, fact sheets, hand outs, posters, other collateral materials) on child poisoning prevention	On-going	# of printed or other resources distributed	10,938	7,237
6	[Child passenger safety] Provide car seat installation checks and replacement car seats when needed.	On-going	# of car seats checked	1,001	1,210
			# of car seats distributed	587	722
7	[Child passenger safety] Publish and distribute awareness/educational materials (brochures, fact sheets, hand outs, posters, other collateral materials) on child passenger car safety.	On-going	# of printed or other resources distributed	34,868	37,106
8	[Child passenger safety] Sustain child passenger safety education programming by increasing the number of people completing National Child Passenger Safety Certification.	On-going	# of net new certified technicians	47	30

Prevent child maltreatment [abuse and neglect]

Strategy		Time Line	Unit(s) of Measure	10/1/2014 to 9/30/2015	10/1/2015 to 9/30/2016
1	[Hood and Wise Counties] Sustain and grow the use of "Parent Cafés" to increase parenting skills using the community components of "The Nurturing Parent" program.	On-going	# of annual participants	180	177
2	[Hood and Wise Counties] Sustain child maltreatment education programming by increasing the number of "ambassadors" effectively trained to facilitate Parent Cafés.	On-going	# of net new ambassadors trained	33	32
3	[Hood and Wise Counties] Publish and distribute awareness/educational materials and prevention tools (brochures, fact sheets, hand outs, posters, other collateral materials) on child abuse prevention.	On-going	# of printed or other resources distributed	8,313	14,243
4	The parents of children <5 months of age whose child is admitted to Cook Children's Medical Center will be offered education and training in the form of "Period of Purple Crying" [PoP] program materials.	On-going	% of eligible parents receiving PoP		27.4%
5	Sustain and grow the Center for Preventing Child Maltreatment	On-going	t.b.d.		
6	Develop and distribute training resources for early detection of child abuse for specific audiences; medical professionals, first responders and others whose occupation puts them in contact with children	On-going	# of persons completing training		1,503
7	Explore and develop the use of Risk Terrain Modelling as a predictive analytics tool to quantify the geography of children at greatest risk of maltreatment	On-going	t.b.d.		
8	Improve awareness about child maltreatment issues via social and digital media, e.g., Website, Facebook, etc.	On-going	# of C4PCM Website visitors	3,771	11,611
			# C4PCM FB Impressions		1,187,784
9	Create a model of care within CCHCS that provides a coordinated and reliable source of supportive care for foster children and implement a "proof of concept" project upon Board approval	Through 2017	t.b.d.		

Increase access to pediatric medical care and services

Strategy		Time Line	Unit(s) of Measure	10/1/2014 to 9/30/2015	10/1/2015 to 9/30/2016
1	Increase points of access to pediatric medical care and services by building neighborhood clinics as pediatric medical homes in underserved areas.	On-going	# of NHCs	6	7
			# of NHC visits	99,872	107,352
2	Increase convenience of access to pediatric medical care and services by building pediatric urgent care centers in convenient locations.	On-going	# of UCCs	3	4
			# of UCC visits	79,633	98,497
3	Sustain the Homeless Initiative which provides primary care services to children of families in temporary shelters and work to sustain those services as their medical home after leaving the shelter.	On-going	# of children enrolled	1,259	1,387
			% of children returning	36%	42%
4	Sustain and grow Cook Children's Health Plan, a provider-based MCO, as a way to assure financial issues are not barriers to access for eligible families.	On-going	# of "covered lives"	121,034	122,500
5	Successfully implement STARKids contract, demonstrating compliance with State performance measures (e.g., timely conduct of assessments and interval contacts, prompt response to member concerns, accurate reporting of encounter information)	Beginning November, 2016	# of additional "covered lives"		8,100

Child health issues Cook Children's cannot address directly

Children and their families face numerous health issues which are beyond the scope, resources and capacity for Cook Children's to develop active community programs. Those issues are being addressed in the community and both CCMC and CCNH take active leadership or supporting roles in such child health issues as Infant Mortality, Teen Pregnancy, Child Drug Use and Substance Abuse, Gang Violence, School Graduation Rates, Vision and Hearing Screening and others. Currently Cook Children's is active in the following community-wide initiatives:

Big Tent Mental Health Connection Parker County	Johnson County Community Resource Group
Blue Zones Project Fort Worth	Johnson County Mental Health Connection
Burleson Be Healthy Initiative (Johnson County)	Mental Health Connection (Tarrant County)
Child Fatality Review Team – Tarrant County	NorTex Community Advisory Board
Children at Risk - North Texas	North Texas Asthma Consortium
Children's Hospital Association Board, Child Health Committee	North Texas Health Alliance
Community Response to Homelessness in Early Childhood (Tarrant County)	Nurse Family Partnership Advisory Board (Tarrant County)
Denton County Behavioral Health Leadership	Parker County Community Resource Group
Denton County Healthy Communities Coalition	Renaissance Heights United - a Purpose Built Community
Denton Regional Suicide Prevention Coalition (Denton County)	Tarrant Area Food Bank
Early Learning Alliance of North Texas (Tarrant County)	Texas Child Heat Stroke Task Force
Fort Worth Drowning Prevention Coalition (Tarrant County)	Texas Drowning Prevention Alliance
Fort Worth Safe Communities (Tarrant County)	THR Harris Fort Worth Community Health Council (Tarrant County)
Foundation for Wellness Texas - FitWorth - Mayor's Childhood Obesity Initiative	United Way Steering Committee – Arlington (Tarrant County)
Healthy Tarrant County Collaboration	UNT Health Science Center - Community Advisory Board
Hood County Substance Abuse Council	UNT Health Science Center Institute for Patient Safety
Immunization Collaboration of Tarrant County	Wise County Health Forum