2012 Child and Adolescent Community Health Needs Assessment Implementation Plan

Seeing a child smile, sharing a first word or providing comfort when there are tears; Children’s Hospital & Medical Center is honored to spend each and every day serving children and their families. In 2012, Children’s co-sponsored the first community health needs assessment concentrating exclusively on child and adolescent populations in the Omaha metropolitan area: Douglas and Sarpy Counties in Nebraska, and Pottawattamie County in Iowa.

This assessment gathered information to assist Children’s in determining the health status, behaviors and needs of children in its primary market area. It was conducted as a telephone survey of parents with children under the age of 18. A random sample of 902 parents shared their top concerns about many aspects of their children’s physical and emotional wellbeing. Complementary focus groups comprised of community leaders and other health care professionals rounded out the conversation.

- Twenty percent of families told us they experienced difficulty or delay in obtaining health care services for a child.
- Fifteen percent shared that their children had sustained injuries requiring medical treatment.
- Nearly 39 percent, the greatest percentage of parents, identified obesity as the number one health issue for their children.

As a direct result of this assessment, Children’s Hospital & Medical Center has made obesity prevention an organizational priority with a focus on broad community outreach and education coupled with clinical intervention for young people who are already experiencing medical complications.

This report summarizes actions implemented by Children’s in seven areas which emerged as health priorities in need of intervention based on the 2012 Child & Adolescent Community Health Needs Assessment.

- Obesity and Nutrition
- Injury and Safety
- Access to Healthcare
- Asthma
- Mental Health
Obesity and Nutrition

Survey Findings:

• Obesity was most often identified among surveyed parents as the number-one health issue affecting both children and adolescents in the Metro Area.

• Three out of 10 school-age children/adolescents in the metro area are overweight or obese.

• Obesity/nutrition was identified as one of the top five key health concerns for metro area children and adolescents.

Actions:
Children's Preventing Obesity program is implementing solutions to the childhood obesity epidemic ranging from delivering education in the classroom and the community to multidisciplinary clinical intervention. Teaching parents and children to adopt lifetime healthy eating and fitness habits is the number one priority of the initiative. The effort will help build healthier communities, lower health care expenses, and reduce the number of children suffering from preventable conditions such as diabetes, heart disease, low self-esteem, and depression. Children’s expects to reach 39 million individuals with the Preventing Obesity program through events, paid, and unpaid media. A web-based health education school curriculum including nutrition and fitness content will potentially reach 160,000 area students.

Healthy Kohl’s Kids
Together through the Healthy Kohl’s Kids program, Children's Hospital & Medical Center and Kohl's Department Stores champion healthy eating and fitness programs that make a difference in the health of families in our community.

Healthy Kohl’s Kids School Outreach and Community Events
• Bike helmet giveaways to encourage bike riding as a family fitness activity
• Free jump ropes featuring an LCD display that shows total distance jumped and total calories burned.
• Free pedometers that count walking steps and calories burned.
• Kid-friendly and nutritious recipes
• Free healthy snacks.
• Special guest appearances (athletes and other healthy role models)

Healthy Kohl’s Kids Website
• Kid-friendly recipes
• Social media postings (Facebook, Twitter, and Pinterest)
• Information on nutrition and fitness
Opportunity to share videos on healthy eating and fitness for kids

**Healthy Kohl’s Kids Social Media**
- Weekly tips on nutrition and fitness
- Vehicle for families to share success stories

**Healthy Kohl’s Kids Paid Media**
- Print
- Radio
- TV
- Online
- Digital billboards
- Movie theater ads

**Healthy Kohl’s Kids News Media Placements**
- Interviews with fitness and nutrition experts
- Coverage of school and community events

**HealthTeacher Online Health Literacy Program**
- Offered free to 47 area school districts including 413 public and private schools.
- HealthTeacher, sponsored by Children’s, is an online wellness educational program offered to every school throughout a nine-county area of eastern Nebraska and western Iowa.
- The online health education lesson plans for teachers with resources for parents includes a library of more than 300 Kindergarten-through 12th grade sessions organized around 10 health topics defined by National Health Education Standards. It includes nutrition and physical fitness lessons to teach children healthy habits and prevention of obesity.
- Active in nearly three dozen metropolitan markets, HealthTeacher serves more than 10,000 schools and six million students. It is used by nine of the 15 largest school districts in the U.S.
- Children’s is offering HealthTeacher free of charge to the 413 public and private schools in Douglas, Washington, Dodge, Saunders, Sarpy and Cass counties in Nebraska, and Pottawattamie, Harrison and Mills counties in Iowa.
- HealthTeacher was originally developed in 1999 by health educators and health professionals with the goal of providing a comprehensive online resource that would make it easy to teach good health habits to children. Today, HealthTeacher is used in all 50 states and 14 foreign countries, from urban and suburban schools to after-school programs and home schools. The lesson plans can stand alone as a school’s only health curriculum, or be used to support and enhance an existing curriculum.
- HealthTeacher seeks to:
  - Increase the health literacy of all teachers.
  - Enable teachers to overcome constraints that limit health education in the classroom.
  - Provide the knowledge, skills and tools that increase the health literacy of all students.
  - Engage parents and other key community stakeholders to reinforce healthy behaviors among children.
• Children’s is supporting HealthTeacher because it advances wellness and prevention initiatives designed to improve health by impacting children at the sources of learning - the classroom and in the home.

**HEROES for Clinical Intervention**

• The Healthy Eating with Resources, Options and Everyday Strategies (HEROES) weight management program at Children’s is a comprehensive, multi-disciplinary program that treated nearly 300 obese children in 2011.

• Children accepted into the year-long, family-centered weight management program are encouraged to improve their behaviors gradually by achieving realistic, measurable goals. The comprehensive program includes experts in nutrition, behavioral modification, and a variety of medical subspecialists. These experts help not only the child, but the entire family, often made up of other members who also struggle with weight and activity issues.

• The program includes intervention, education, lifestyle modification, and clinical and behavioral support for children and adolescents who are medically obese. While some children are overweight due to a genetic medical issue, the majority of obese children are products of an unhealthy lifestyle.

• Children are referred to HEROES by pediatricians and family physicians. They suffer from adult diseases like Type 2 diabetes, high cholesterol and hypertension. They have obesity cardiomyopathy and liver disease. They have insulin resistance, asthma and obstructive sleep apnea. Many of them are bullied. HEROES helps these children change their lives, one day at a time. With the right combination of clinical and behavioral support, success is possible. HEROES strives to help children make healthy choices for the rest of their lives.

• The U.S. Centers for Disease Control and Prevention now predicts that by 2030, 42 percent of Americans will be obese. By 2050, up to 45 percent of Americans will suffer from diabetes. HEROES actively addresses the growing epidemic of obesity that threatens to bankrupt America’s health care system.

**Children’s Communications Vehicles**

• Obesity prevention messages are included in Children’s marketing vehicles that reach thousands of consumers, employees, community leaders, and physicians.

**Parenting U Parent Education Series**

• Classroom and web-based classes for parents feature advice on childhood obesity prevention from Children’s medical and behavioral experts.

• Radio advertising reaches families throughout the metro Omaha area.

**Injury and Safety**

**Survey Findings:**
• A total of 15.1 percent of area children were injured seriously enough to require treatment at some point in the past year.
  ▪ Among these children, 22.6 percent were seriously injured more than once.
  ▪ Among children 5-17 who ride bicycles, 40.3 percent wear helmets; among those riding skateboards, scooters, skates and rollerblades, only 27.1 percent wear helmets.

• Of the Metro Area children who were seriously injured in the past two years, 25.3 percent were playing when the injury occurred and 19.6 percent were participating in organized sports. Another 11.2 percent of these parents indicate their child fell or tripped when the injury occurred.

• With regard to the type of injury sustained, the largest share of responses was for broken bones (mentioned by 23.1 percent), followed by wounds needing stitches (17.9 percent), sprains (10.3 percent) and head injuries (9.4 percent).

Actions:
In the Metro Area, unintentional injury is the leading cause of death of children and adolescents past the age of one year. Traumatic injuries kill more children each year than disease and drugs combined. In the Nebraska region, hospitals see more than 42,000 children who suffer unintentional injuries.

Community Outreach and Education
• Children’s supports a dedicated effort of injury prevention by providing education though a number of programs aimed at informing parents and children about a host of safety issues including child passenger safety. Experts estimate eight in 10 child car seats are installed improperly. To combat this, Children’s participates in a series of car seat safety checks with nationally certified car seat safety technicians. For those unable to attend these events, Children’s also offers its on-site Child Passenger Safety Fitting Station. The benefits of proper car seat usage are dramatic. Studies show that children who are correctly restrained during a motor vehicle crash have an 80 percent lower risk of fatal injury than those who are unrestrained.
• Brain injury and head trauma is another key component of Children’s injury prevention program. Each year, according to the Centers for Disease Control and Prevention, children (ages 0 to 14) make almost half a million (473,947) emergency department visits for traumatic brain injuries.
• Bike helmets can prevent 85 percent of bike-related head injuries; Children’s conducts outreach to schools and other venues to provide education and free bike helmets to children.
• Water and playground safety are two more prongs of the Children’s safety initiative. With proper supervision, drowning is 100 percent preventable. Playground injuries -- the number one non-fatal injury among children 14 and under seen at Children’s -- also can be better avoided with increased supervision and education.

Safe Kids Omaha
• Children’s is the proud leader of Safe Kids Omaha, a coalition of community groups dedicated to preventing childhood injuries. Affiliated with the Safe Kids Worldwide, Safe Kids Omaha is helping raise public awareness among the general public and policy makers.

Children’s Advocacy Team
• Children’s Hospital & Medical Center created and leads the Children’s Advocacy Team to identify and manage cases of Abusive Head Trauma (formerly known as Shaken Baby Syndrome), non-accidental injury and neglect. The team works closely with a child abuse pediatrician and a non-profit community agency, Project Harmony, to meet the medical and emotional needs of a child while law enforcement investigates.

Children’s Pediatric Trauma Center
• Now verified as a Level II Pediatric Trauma Center by the American College of Surgeons Committee on Trauma (ACS-COT), Children’s believes its injury prevention efforts will gain even more traction. As a verified center, Children’s exerts even more credibility regarding injury prevention education.
• With appropriate supervision, equipment and education, many childhood injuries can be eliminated.

Access to Health Care

Survey findings:
• Access to health care was ranked the third-highest health priority among key informant focus group participants.
• One in five parents, 20.9 percent, reported difficulty or delay in obtaining health care services for their child in the past year, with inconvenient office hours being the greatest barrier. Geography, affordability and availability of specialists and technology were also listed as barriers.
• Compounding this problem is the fact that 7.6 percent of metro area parents do not have a medical home for their child’s care.
• Over a third of metro area children (35.2 percent) have been treated in an emergency room, urgent care, quick care or walk-in clinic in the past year, with 71.2 percent of these parents acknowledging that the injury or illness could have been treated in a physician’s office.

Actions:
Availability/Inconvenient Hours
• Children’s Hospital & Medical Center offers a free service to help families find pediatric primary and specialist care for children through its Find-A-Doctor feature. The feature is accessible 24 hours a day, seven days a week through a toll-free 1-800 number and via our website, including a live-chat feature to assist parents in their search. Physicians are matched to children in need based on a number of criteria deemed important by each parent.
• Today’s families are busy. That’s why Children’s Physicians mandates that its 40 pediatricians and pediatric nurse practitioners each offer extended hours one day a week for well-check visits. This way, parents don’t have to miss work and children don’t have to miss school in order to receive important, preventative well-check services. Children’s Physicians also offers Saturday hours and an after-hours phone service that connects families with experienced nurses who can address questions or concerns when the pediatrician’s office closed. If necessary, they will put families in touch with a pediatrician or refer to Urgent Care.

• The Emergency Department at Children’s Hospital & Medical Center is the only pediatric emergency department in the state and is open 24/7. It has been verified as a Level II Pediatric Trauma Center by the American College of Surgeons Committee on Trauma. Children’s also operates two pediatric urgent care centers weeknights from 6 to 10 p.m. and weekends and holidays from noon to 10 p.m. Families without a pediatric primary care physician who visit either the emergency department or urgent care centers are referred to a Children’s Physicians pediatrician to establish a medical home for their child.

Geography
• Children’s Hospital & Medical Center is expanding specialty services at its satellite campus in west Omaha/western Douglas County. Cardiology and orthopedic services will be added to this campus in 2013. Primary care, urgent care, radiology, rehabilitative and lab services are currently available.

• Children’s also provides specialty pediatric care in Lincoln, Neb. at the Children’s Specialty Pediatric Clinic which offers the following services: cardiology, hematology/oncology, respiratory medicine, endocrinology, rheumatology, neurology, neurosurgery, orthopedics, pediatric surgery and gastroenterology.

• Children’s Physicians, the pediatric primary care group practice associated with Children’s Hospital & Medical Center, plans to add two new office locations in 2013 to address community needs. It currently operates 10 offices throughout the metro area. These office locations are determined on pediatric population and need.

• As part of its continued outreach to area children, Children’s partnered with the University of Nebraska Medical Center and Alegent Creighton Health to help plan and support six school-based health centers in Omaha Public Schools. The centers are funded in part by Building Bright futures, which contracts with two area health care providers, OneWorld Community Health Centers and Charles Drew Health Center to operate the clinics.

• Children’s Hospital & Medical Center will continue to provide for the health care needs of children from throughout the region, with outreach clinics in Columbus, Grand Island, Hastings, Holdrege, Kearney, Norfolk, and North Platte, Neb.; Sioux City, Iowa; and Sioux Falls, S.D.

Technology
• Children’s offers an online health portal, Children’s Connect, which allows families to schedule or request pediatric appointments online. To enhance accessibility and further empower families to be involved in their child’s health care, Children’s Connect will be rolled out in all of Children’s 30 outpatient specialty clinics in 2013. Currently available in all Children’s Physicians offices and the Children’s Asthma/
Allergy outpatient clinic, the portal connects families to their child’s test results, diagnosis, medications, growth charts and immunization records anytime, day or night.

Affordability

• Children’s Hospital & Medical Center does not turn away any child with a medical need due to an inability to pay. In 2011, we provided $3.9 million in services (at cost) in the form of uncompensated care or charity care ($1.8 million) and bad debt write-offs ($2.1 million) for families unable to pay the bills associated with their children's medical care. This amount has been steadily increasing, and is expected to continue to rise with an uncertain national economic future.

Asthma

Survey findings:

• Asthma is the most common chronic illness in children. In the metro area, 8.7 percent of school-age children have asthma, with prevalence particularly high in African-American children (25.9 percent) and those living in Northeast Omaha (19.4 percent).
• One in five area children with asthma (20.9 percent) missed three or more days of school, and a third of parents (34.6 percent) missed at least one day of work, in the past year due to the condition.
• Compounding the problem is the fact that 16.7 percent of children with asthma do not have an asthma action plan in place.
• Over 12 percent have had 3 or more urgent/emergent care visits, and 11.8 percent have had two or more overnight hospitalizations in the past year due to asthma.

Actions:

Quality Measurements

• Any child that is an inpatient at Children’s and has a diagnosis of asthma must be prescribed a steroid and a bronchial dilator while in the hospital and must have asthma action plan done before leaving. This asthma action plan must be separate from the discharge papers and include that child's triggers, prescribed medications and list of what medications to take for each of the child's different asthma “zones,” a guide for when to call the physician and a follow-up appointment date. Children’s audits 100 percent of inpatient asthma patients and reports these numbers to The Joint Commission each month. Children’s currently has a 97 percent compliance rate.
• A new quality team investigates evidence-based best practices for pediatric asthma across the continuum of care. The team is working to determine what best practices are, where Children’s aligns with these best practices and where it can improve. This quality team will continue working throughout 2013 and report its findings.
• When left untreated, asthma can disrupt a child’s everyday activities by causing difficulty breathing and other severe complications. That’s why Children’s Physicians encourages families to schedule annual asthma assessments for children and actively measures the results. In 2011, 88 percent of Children’s Physicians patients with an asthma diagnosis had an asthma assessment in the past year, and 91 percent had a written management plan.
plan in place for home and school (if applicable). These numbers don’t include those families who haven’t scheduled their visit yet or those whose asthma is so severe they see a specialist and have the plan done through the specialist.

Children’s Connect

• Children’s Connect, an established online health portal, will expand to all Children’s pediatric subspecialty clinics in 2013. The Children’s Asthma/Allergy Clinic added Children’s Connect in late 2012 as a mechanism to enhance coordination of care, improve access to a child’s medical record and treatment plan, and as a tool to encourage parents to become more involved in their child’s health care.

Mental Health

Survey Findings:

• Mental health issues received the fourth highest mention among surveyed parents.
• Nine percent of parents identified mental health as the top health issue affecting adolescents, age 13 and over.
• Chief concerns cited include:
  ▪ School-aged children who worry a lot (21.9 percent)
  ▪ School-aged children who have difficulty falling asleep or sleeping through the night (10.2 percent)
  ▪ School-aged children experiencing sadness or hopelessness that interfered with usual activities (2 percent)
• A majority of parents, 92.4 percent, reported their child’s mental health was good “most of the time.”

Actions:

HealthTeacher Online Health Literacy Program

• HealthTeacher provides specific educational materials focused on mental and emotional health and offers active intervention to alleviate classroom stress surrounding testing and other common school-based causes of anxiety.
• HealthTeacher seeks to:
  ▪ Increase the health literacy of all teachers.
  ▪ Enable teachers to overcome constraints that limit health education in the classroom.
  ▪ Provide the knowledge, skills and tools that increase the health literacy of all students.
• Children’s Hospital & Medical Center identifies HealthTeacher as a community-wide tool that furthers general education and awareness in a non-medical setting.
• Mental and emotional health themes are shared with children and families who may not be in a full crisis, but can benefit from the information learned.

Children’s Behavioral Health Programs and Services
Children’s is committed to improving overall access to pediatric mental health services and addressing a national shortage of specialists through training of future professionals. It has developed a post-doctoral position for psychologists to provide training in a pediatric-specific environment. The first post-doctoral psychologist is being recruited for 2013. Children’s has also created field-training opportunities for fourth year ‘school psychology’ residents.

Children’s Behavioral Health offers improved access to pediatric-trained, licensed mental health specialists with extended evening hours, operating until 8 p.m. on Mondays, Tuesdays and Thursdays, and 6 p.m. on Wednesdays.

Children’s Behavioral Health specialists also partner with Children’s Physicians primary care pediatrics offices. Specialists are present in the doctor’s office to provide immediate consultation and future therapy without “stigma” or inconvenience of going to a separate behavioral health office.

A depression screening tool has been developed by Children’s Behavioral Health specialists for use with 12-18 year olds. This short survey is administered privately by Children’s Physicians pediatricians during every child’s annual well check visit. It is designed to help determine whether a child has depressive features or suicidal ideations.

Based on positive feedback and wide adaptation of the depression-screening tool, Children’s Behavioral Health will work with pediatricians to develop new screens that would be used to identify other conditions/concerns.

Children’s offers a specific Anxiety Clinic focused on pre-teens referred by family physicians and Behavioral Health specialists.

Parent education sessions complement Anxiety Clinic therapy and focus on four main anxiety-related disorders: Obsessive Compulsive Disorder, generalized anxiety disorder, panic, and separation anxiety.

Partnerships with two Omaha metropolitan districts – Westside Community Schools (District 66) and Papillion-La Vista Schools (new, Fall 2012) - facilitate classroom sharing of an anti-anxiety program developed by Children’s Behavioral Health. School psychologists identify students in need of intervention, and work directly with students to identify anxiety triggers and implement coping mechanisms like deep breathing that students self-direct after learning.

Children’s Behavioral Health offers a specific ADHD Clinic and a related parent education series. It also facilitates an ADHD therapy and social skills group for children ages 5-12.

Children’s Behavioral Health provides unique, in-house, on-call coverage (24/7) for the Children’s Emergency Department when clinical staff identifies risk taking behaviors as reason for illness or injury.

“Parenting U” Parent Education Series

- Classroom and web-based classes for parents feature advice on many different topics including discipline, teen behaviors, anxiety and ADHD.
- These classes are taught by Children’s medical and behavioral experts; they are free of charge and open to anyone who registers online or by telephone. Walk-ins are allowed if space is available.
- Parenting U is offered three times per year: spring, summer and fall.
- The summer educational series occurs off-site from Children’s Hospital & Medical Center (in 2011 and 2012 at the Omaha Children’s Museum in South Omaha).
- A series of Parenting U classes is being planned for schools and community centers.
Substance Abuse

Survey Findings:
• Substance abuse received the second-highest mention, 17.1 percent, by parents identifying the top health issue affecting adolescents and teens, ages 13-19.
• Primary elements of substance abuse as included in this survey are alcohol, prescription and illegal drugs.

Actions:

HealthTeacher Online Health Literacy Program
• HealthTeacher provides specific educational materials focused on alcohol, tobacco, prescription and illegal drugs.

• HealthTeacher seeks to:
  ▪ Increase the health literacy of all teachers.
  ▪ Enable teachers to overcome constraints that limit health education in the classroom.
  ▪ Provide the knowledge, skills and tools that increase the health literacy of all students.
• Children’s Hospital & Medical Center identifies HealthTeacher as a community-wide tool that furthers general education and awareness in a non-medical setting.
• Themes surrounding alcohol and drug use are shared (age appropriately) with children and families who may not be in a full crisis, but can benefit from the information learned.

Children’s Emergency Department
• Nursing staff in the Emergency Department at Children’s Hospital & Medical Center triage patients with a substance abuse-related medical issue/diagnosis using a protocol developed by Children’s Behavioral Health. The protocol helps to delineate level of concern, i.e. isolated incident, poor decision making vs. repeat visits, escalating risk-taking behaviors.
• A Children’s Behavioral Health specialist will consult with the family when indicated.
• Children’s will provide necessary medical care, and will direct patients to community partners and agencies for more comprehensive intervention (such as drug rehabilitation).

Community Agencies/Resources
• Substance abuse counseling and rehabilitation services are offered to the community by Boys Town, Lasting Hope Recovery Center (Alegent Creighton Health), and private providers.

Sexual Activity

Survey Findings:
• Sexually transmitted diseases received the third-highest mention, 10.3 percent, from parents identifying the number-one health issue among adolescents, age 13 and over.
• STDs, particularly chlamydia, occur in Douglas County, NE (home county of Children’s Hospital & Medical Center) at a rate much higher than state and national averages.

Actions:

HealthTeacher Online Health Literacy Program
• HealthTeacher provides specific educational materials focused on family health and sexuality.
• HealthTeacher seeks to:
  ▪ Increase the health literacy of all teachers.
  ▪ Enable teachers to overcome constraints that limit health education in the classroom.
  ▪ Provide the knowledge, skills and tools that increase the health literacy of all students.
• Children’s Hospital & Medical Center identifies HealthTeacher as a community-wide tool that furthers general education and awareness in a non-medical setting.
• Themes surrounding family health and sexuality are available to be shared (age appropriately) with children and families who may not be in a full crisis, but can benefit from the information learned.

Children’s Behavioral Health Programs and Services
• Children’s Behavioral Health specialists are available to provide appropriate intervention and therapy, as needed.

Children’s Emergency Department
• Children’s Hospital & Medical Center may be among the organizations identifying and providing care for young victims of sexual abuse.
• In these instances, Children’s works closely with investigators and follows a community-based protocol with an independent agency, Project Harmony that specializes in working with young victims of abuse and neglect.

Sexual activity and sexually transmitted infections have not been identified as an area of emphasis for Children’s Hospital & Medical Center due to the significant involvement of community public health entities (such as the Douglas County, NE Health Department) which have made this concern a high action item for their teams and programs.