



Community Health Needs Assessment: Implementation Plan



Community Health Needs Assessment (CHNA)

California Senate Bill 697, the Patient Protection and Affordable Care Act (PPACA) (HR3590), and Internal Revenue Service section 501(r)(3) direct tax exempt hospitals to conduct a Community Health Needs Assessment (CHNA) and develop an implementation strategy to address these needs every three years.

The CHNA is required to incorporate both primary data collection and secondary data analysis that focus on the health and social needs of the population in the hospitals' primary service area.

CHNA identifies un- and under-met health needs in the service area, provides information to select priorities for action and target geographical areas, and serves as the basis for community benefit programs.



CHNA Implementation Plan: Prioritized Community Needs

During the 2016 CHNA assessment, CHOC identified several health and social deficiencies in Orange County. In a coordinated fashion with the strategic planning process, the following areas were prioritized and ranked:

1. Mental health
2. Pediatric obesity
3. Pediatric specialist needs
4. Pediatrician needs
5. Resources for children with Autism Spectrum Disorders (ASD)
6. Pediatric dental services
7. Partnering/collaborating with other agencies
8. Outreach to schools
9. Treatment for alcohol and substance abuse
10. Community education
11. Transportation services



CHNA Implementation Plan: Prioritized Community Needs

1. Mental Health

Rationale: The most prevalent need identified through community leader surveys was pediatric mental health services. The hospitalization rate per 10,000 children for serious mental illness and substance abuse has increased by nearly 50% between 2005 and 2014, of which 64% was due to major depression and mood disorders. The lack of services is prevalent nationwide. The number of inpatient psychiatric beds in California has declined over the last 15 years. California's bed-per-capita ratio is much lower than the national ratio. The situation is even more dire in Orange County, where currently there is just one bed for every 22,000 children, and no inpatient beds for kids younger than 12.

Strategy

1. CHOC is opening Orange County's first psychiatric inpatient center for children younger than 12. The 18-bed center will benefit children 3 to 17, with priority for those younger than 12.
2. The center will be complemented by expanded outpatient mental health services. As a result, children will no longer be required to leave the area for psychiatric and mental health treatment.
3. Expansion of mental health services for serious/chronic illnesses (i.e., depression, severe anxiety, etc.).
4. Expansion of the outpatient eating disorders program to include treatment using the Maudsley method.



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2. Pediatric Obesity

Rationale: Dietary habits and exercise are significant contributors to improved health. Nearly 50% of children in Orange County consume fast food three to four times per week compared to 39% for all California. Approximately 50% of children consume one or more sodas or sweetened drinks per day compared to 42% for all California. Only 20% of children between 2 and 17 years of age consume five fruits and vegetables per day. These behaviors contribute to 36% of Orange County 5th grade children being overweight or obese as measured by Body Mass Index (BMI). While the Orange County overweight and obese rates are slightly lower than the statewide rate of 40%, Orange County rates are up from 33.3% three years ago.

Strategy

CHOC has developed several initiatives aimed at preventing serious conditions such as obesity, diabetes and heart disease, including:

1. NEW You (Nutrition, Exercise, Wellness). This interactive class encourages healthy habits for the whole family by emphasizing small changes that can lead to big health benefits.
2. Kids Fit Club. The interactive class promotes positive changes to diet and physical activity. These classes are FREE for the entire family and are offered in both English and Spanish.
3. PODER (Prevention of Obesity and Diabetes Through Education and Resources) is an in-depth program filled with lessons, games and fun activities that teach healthy eating and behaviors. Prizes are awarded for participation, completion of homework and attendance. These classes are FREE for the entire family. Classes are held on various days at many locations throughout Orange County.

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3. Pediatric Specialists' Needs

Rationale: CHOC's CHNA identified the need for additional pediatric subspecialists with a specific need for mental health providers.

Strategy

1. Actively recruiting to fulfill the need for subspecialty providers across all service lines with an emphasis on recruiting mental health providers.

4. Pediatric Primary Care Needs

Rationale: Within Orange County, federal shortage designations have been identified for several areas or populations at risk of being medically-underserved.

Strategy

1. CHOC has both primary care and specialty offices in each of the designated shortage areas (Medically Underserved Area "MUA"/Medically Underserved Population "MUP"). CHOC is committed to expanding its primary care physician network to better manage the pediatric population through improved access and preventative care.
2. CHOC is expanding its after hour pediatric services at aligned clinic practices. CHOC is also partnering with urgent care centers and non-aligned clinics to provide better access to primary care services.



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5. Resources for Children with Autism Spectrum Disorders (ASD)

Rationale: A 2011 California Department of Education study found that about 1% of all children enrolled in the state's public schools are diagnosed with autism. Orange County has the highest rate, with 1.5%; one child in 63 has been diagnosed with autism and is receiving special education services.

In 2012, The Regional Center of Orange County was serving the needs of approximately 2,875 children. Based on the state's estimate of 1.5%, there are nearly 6,400 children with an ASD who are not able to be served by the Regional Center. Autism Spectrum Disorders are typically diagnosed in toddlers or young children based on certain behavioral patterns; there is no medical diagnostic test.

Strategy

1. CHOC has placed two psychologists with the Center for Autism. One psychologist is a neuropsychologist able to provide complex assessment for children whose pattern of symptoms is unusual and an ASD diagnosis may not be warranted. The other psychologist provides both diagnosis as well as treatment.
2. Partnered on a grant with Autism Speaks to help children with ASD access dental services.
3. Scientists at CHOC are growing brain cells from skin cells to determine if communications are working properly. Understanding this will allow for targeted therapy.
4. Initiated improved care coordination between Neurology, GI and Research Institute to improve treatment of co-morbid disorders.
5. Improved collaboration between psychiatrists specializing in intractable epilepsy (many patients with intractable epilepsy also have autism.)



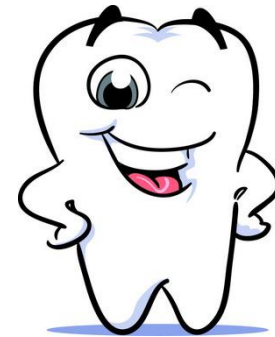
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6. Pediatric Dental Services

Rationale: In January 2015, The Children and Families Commission of Orange County published a brief on children's oral health policy. That brief describes the progression of dental care for children in Orange County over the previous decade and the funding that has been committed for dental services to low income residents. In 2013, there were 54 dentists in Orange County accepting Denti-Cal resulting in a ratio of one pediatric dentist per 1,242 children younger than 5, among the best of all counties in California. Since then, there has been a reduction in Denti-Cal reimbursement and all but seven dentists have closed their practices to Denti-Cal patients. As a result, the ratio of dentists to children younger than 5 is estimated to be far greater than the standard one pediatric dentist to 4,900 children. The ratio is even more dramatic when there is a need for sedation. Wait times for an appointment can be up to eight months. California's reimbursement is approximately 35% of the national average for comparable Medicaid- reimbursed dental services.

Strategy

1. Partnering with Healthy Smiles to integrate primary care pediatric office-based dental visits via telehealth connection to a dentist, facilitated by dental advanced practitioners, in CHOC's primary care offices. Provision of supplies and training for application of fluoride varnish in CHOC Primary Care locations.



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7. Partnering/collaborating with Other Agencies

Rationale: To improve health and address social issues related to children's safety, CHOC must take an active role in the community. In doing so, CHOC must solicit and receive input from the business, religious, social services, and public agency communities and participate in related programs and activities.



Strategy

1. CHOC is the leading organization in the Safe Kids Orange County Coalition focused on prevention of unintentional injury to children 0-12 years old. The partnership is in conjunction with OC Fire Authority, OC Sheriff, local law enforcement, and other community based organizations. Through Safe Kids Worldwide, CHOC implements strategies related to unintentional injuries in the areas of pedestrian safety, car seat safety, water safety, home safety, and helmet safety.
2. CHOC is also an active participant in the OC Child Passenger Safety Task Force. This organizations hosts car seat checkup events, car seat technician training, and car seat technician updates.

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8. Outreach to Schools

Rationale: Establishing the conditions that promote successful educational achievement for children begins with quality prenatal care and continues into the early elementary school years. With a strong and healthy beginning, children can more easily stay on track to remain in school and graduate, pursue postsecondary education and training, and successfully transition to adulthood. Yet there are significant gaps in educational achievement by race and income. It has been well-documented that health status is directly correlated to educational attainment, employment status and income level. Those with higher levels of education, reliable employment and higher wages are healthier.

Strategy

1. CHOC launched the asthma outreach program (Breathmobile) to bring asthma care and education to schools throughout Orange County. The program hosts “lunch and learns” for school personnel, including school nurses, and provides care and treatment within the mobile clinic at various school sites.
2. CHOC also collaborates with the Community Education Department to provide education in schools around drowning prevention, helmet safety and car seat education.



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9. Treatment for Alcohol and Substance Abuse

Rationale: Presently, CHOC does not provide treatment for primary alcohol or substance abuse disorders. We work with community agencies and private facilities to refer children who need detoxification or primary substance use treatment.

Strategy

1. Continue to review opportunities for development of programs or collaboration with Mission Hospital Laguna Beach on substance abuse treatment programs for adolescents.

10. Community Education

Rationale: CHOC is cognizant that taking an active role in community outreach improves health outcomes and leads to a healthier local economy. CHOC's Community Education Department is entirely devoted to this purpose.

Strategy

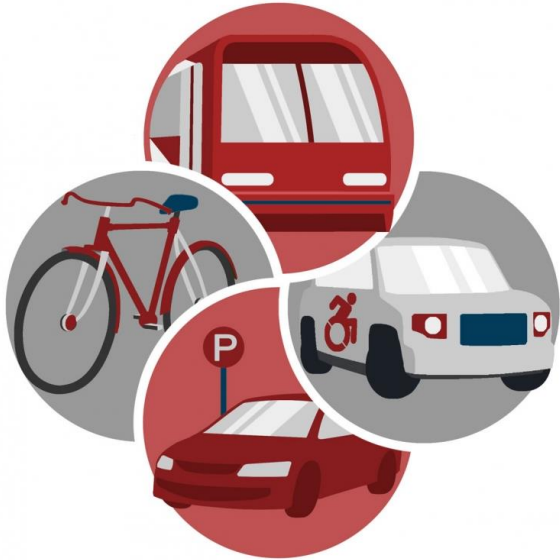
1. CHOC's Primary Care Services & Community Education and Outreach has launched education and outreach services that include the Safe Sitter Program, media presentations, and various community health fairs. The department provides written health education materials that can be found on the CHOC website. The Primary Care Services & Community Education and Outreach department also provides programs at CHOC community clinic locations including Healthy Coaching and Project DULCE.



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11. Transportation Services

Rationale: According to the community survey that CHOC conducted in 2016, lack of transportation is considered as one of the most significant contributors to children not receiving timely health care services. This is more prevalent among low income families who are faced with housing affordability in Orange County and the rising cost of living.



Strategy

1. CHOC is providing taxi vouchers, bus passes, and gas cards for low income families struggling with transportation services.
2. As of October 2017, CHOC is collaborating with Cal-Optima to educate families regarding this unique benefit of accessing non-medical transportation services (MD appts, Rx pick up, Dental, CCS, Mental Health Services).