community health needs assessment — 2018

action step updates

dayton children's

To work toward **improving mental health and addiction outcomes**, the following strategies are recommended:

1. Execute plan to create a psychiatry unit in Dayton Children's
2. Promote trauma-informed health care

Action Plan Update

Priority Topic: Mental health and addiction			
Strategy 1: Execute plan to create a psychiatry unit in Dayton Children's			
Action Step	**Priority Outcome & Indicator**	**Priority Population**	**May 2018 Update**
Year 1: Review results of the feasibility study conducted during previous CHNA Implementation Plan cycle. Obtain approval and begin design of pediatric psychiatry unit at Dayton Children's. Receive approval of design and begin construction of unit. Open pediatric psychiatry unit at Dayton Children's. **Year 2**: Continue execution of the plan. **Year 3:** Continue execution of the plan.	**Priority Outcome:** Reduce unmet needs, mental health **Priority Indicator:** Percent of youth with major depressive episode who did not receive any mental health treatment (NSDUH[1])	Youth	The Crisis Center will open in July 2018. We anticipate caring for about 1,200 patients in crisis our first year. The planning for our inpatient unit continues, and construction has begun. We will open a 24 bed unit for kids 11-17 years of age by July 2019. We continue to care for a significant number of mental health patients. There has been a 32% increase in the number of referrals to the Mental Health Resource Connection over last year. In addition, there has been over a 35% increase in both psychology and psychiatry visits over last fiscal year.

[1]*National Survey on Drug Use and Health*

Priority Topic: Mental health and addiction			
Strategy 2: Promote trauma-informed health care 🛡			
Action Step	**Priority Outcome & Indicator**	**Priority Population**	**May 2018 Update**
Year 1: Collaborate with PHDMC (CHIP Behavioral Health Objective 2.2) to facility an assessment among clinicians and other community organizations in the Greater Dayton Area on their awareness and understanding of trauma-informed care, including toxic stress and adverse childhood experiences. Facilitate training to increase education and understanding of trauma-informed care, especially for children in high-risk circumstances. **Year 2:** Pilot trauma-informed care within specific clinics at Dayton Children's serving high-risk populations. Collect data and outcomes to share with other providers. **Year 3:** Identify opportunities to scale trauma-informed care to other providers.	**Priority Outcome:** 1. Improve mental health status of mother and father 2. Reduce depression in children **Priority Indicator:** 1. Percentage of parents who rated their emotional health status as fair or poor (NSCH[1]) 2. Percent of children who were diagnosed with depression (NSCH[1])	Children and Families	In Spring/Summer 2017, the hospital began Trauma-Informed Care education pilots with high-risk staff (child life, bereavement team, hem-onc division). In Fall 2017, the hospital participated in planning community education for mental health/substance abuse treatment providers by the Western Ohio Prevention Council and the Ohio Children's Trust. In Winter 2018, the hospital obtained commitment of Dayton Children's Leadership team to promulgate Trauma-informed Care as a system-wide quality improvement initiative and established a work-group to design and implement Trauma-informed Care with measurable outcomes and a project timeline.

[1]*National Survey of Children's Health*

Year 1 Action Step Updates 2018 – Chronic Disease

To work toward **improving chronic disease outcomes**, the following strategies are
1. Implement nutrition policy in schools
2. Implement Safe Routes to School
3. Enhance the Dayton Asthma Alliance 🔷

Action Plan Update

Priority Topic: Chronic disease				
Strategy 1: Implement nutrition policy in schools				
Action Step	**Priority Outcome & Indicator**	**Priority Population**	**May 2018 Update**	
Year 1: Work with the PHDMC Communities Preventing Chronic Disease program to choose at least one preschool or child care center to implement a healthier choices campaign. Work with school personnel to introduce at least one priority area (where applicable) to focus on and implement: • Healthier snack "extra choices" offered during school lunches • Healthier fundraising foods • Healthier choices in vending machines • Healthier choices at sporting events and concession stands • Reducing unhealthy foods as rewards	**Priority Outcome:** Reduce childhood obesity **Priority Indicator:** Percent of children who were obese by BMI classifications (NSCH[1])	Children	Dayton Children's is working closely with local groups to support local child care centers working to obtain certification by the Ohio Healthy Program (OHP). Dayton Children's child care center updated its snack menu and policies to become compliant with the OHP requirements. Dayton Children's is hosting a web site for consumers to find summer food service program options in Montgomery County in summer 2018. The hospital has worked Public Health Dayton Montgomery County to develop a communication campaign to promote the existing summer food sites. Dayton Children's is sponsoring the YMCA's Y on the Fly program which will deliver activities and food throughout the community where these resources are limited. The hospital also facilitated	
Year 2: Continue efforts from year 1. Choose 2-3 preschools or child care centers to implement a healthier choices campaign. Each of the selected preschools or child care centers will choose at least 1-2 priority areas to focus on and implement.				
Year 3: Continue efforts from Years 1and 2. Each of the selected preschools and/or child care centers will implement at least 4 of the 5 priority areas.				

| | | | finding a suitable location in the Old North Dayton neighborhood for a weekly stop.

The collaborative Healthy Way Program continued at the Kroc Center with fall and spring sessions in addition to a winter teen session. |
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[1]*National Survey of Children's Health*

Priority Topic: Chronic disease			
Strategy 2: Implement Safe Routes to School			
Action Step	**Priority Outcome & Indicator**	**Priority Population**	**May 2018 Update**
Year 1: Work with PHDMC (CHIP Chronic Disease Prevention Objective 1.2) to collect baseline data on current **Safe Routes to School (SRTS)** programs in the Greater Dayton Area. Gather information on what types of activities are offered, how many people attend the activities, how often the activities take place, and the location. Identify key stakeholders to collaborate and develop a plan to start or expand SRTS programs. Develop program goals and an evaluation process for tracking outcomes. Look for funding sources to incentivize participation in the SRTS program.	**Priority Outcome:** Reduce childhood obesity **Priority Indicator:** Percent of children who were obese by BMI classifications (NSCH[1])	Children	Dayton Public Schools completed travel tallies in January and February 2018 to identify how children are getting to school with 171 families filling out the survey to create a baseline. Eleven local organizations are working together to develop a plan to expand the SRTS program. The plan will be voted on by the Dayton City Commission in mid-May. Girls in Gear programming was implemented at two schools each semester in Dayton Public Schools. Safe Kids Greater Dayton supported five Walk to School Day events in Kettering and two Walk to School Day events in Dayton. This support was possible through a Safe Kids Worldwide grant. Funding has been secured through an Active Transportation Grant to support a Walking School Bus program. Planning will begin for this program in June 2018. Funding and interns were secured to create a photo-voice project for Safe Routes to Play. Visit: https://rymarczyka.wixsite.com/udsaferoutes.
Year 2: Recruit individuals to serve as walking/biking leaders. Decide on the locations, walking routes and number of walking/biking groups. Link the walking/biking groups with existing organizations to increase participation. Consider faith-based organizations, schools, community-based organizations, and health care providers. Begin implementing the program with one new school district.			
Year 3: Raise awareness and promote the SRTS programs. Evaluate program goals. Increase the number of SRTS programs by 25% from baseline.			

Priority Topic: Chronic disease			
Strategy 3: Enhance the Dayton Asthma Alliance 🔷			
Action Step	**Priority Outcome & Indicator**	**Priority Population**	**May 2018 Update**
Year 1: Continue the work of the Dayton Asthma Alliance to improve health outcomes for children with asthma by implementing the following tactics: • Increasing the use of home visitors to identify asthma triggers • Increasing smoke-free multi-unit housing complexes • Increasing the number of jurisdictions implementing Tobacco 21 and other tobacco reduction policies • Increasing the number of schools, day cares and child-serving organizations implementing asthma education and environmental trigger modifications • Identify best practices in the primary care setting to address asthma Support other local health departments working to improve the health of children with asthma	**Priority Outcome(s):** 1. Reduce child asthma hospitalizations 2. Tobacco-free policies enacted **Priority Indicator(s):** 1. Emergency department visits for pediatric asthma, per 10,000 children ages (0-17) 2. In development: Number of smoke-free/tobacco-free policies enacted for K-12 schools, multi-unit housing and other spaces (per SHIP)	Children and Families	Dayton Children's hired a dedicated community health worker to conduct home visits for children/families in the pulmonary clinic and those associated with the Dayton Asthma Alliance. The Dayton Asthma Alliance is supportive of Tobacco 21 legislation and local efforts for this policy change. The Dayton Asthma Alliance engaged with 17 local Dayton Public Schools, 1 catholic school, and Miami Valley Child Development Centers to implement asthma education and home trigger modifications. The Alliance is aligning with Dayton Children's Health Partners around primary care quality metrics related to asthma.
Year 2: Continue efforts of Year 1. Target 2 additional school districts or child-serving organizations to implement asthma programming. Continue education efforts. Support local tobacco-prevention policies. Share best practices in the primary care setting to community primary care physicians.			
Year 3: Continue efforts of Years 1 and 2.			

Year 1 Action Step Update – Maternal and Infant Health

To work toward **improving maternal and infant health**, the following strategies are recommended:

1. Increase the use of safe sleep practices

Priority Topic: Maternal and infant health			
Strategy 1: Increase the use of safe sleep practices			
Action Step	**Priority Outcome & Indicator**	**Priority Population**	**May 2018 Update**
Year 1: Work with PHDMC, local hospitals and other organizations to integrate safe sleep practices (i.e. The ABC's of Safe Sleep, Cribs for Kids) into the hospital and community. Disseminate ODH materials targeted at education and awareness. **Year 2:** Continue to raise awareness and promote safe sleep practices through coordinated messages. **Year 3**: Continue efforts from years 1 and 2.	**Priority Outcome:** Reduce infant mortality **Priority Indicator:** Rate of infant deaths per 1,000 live births	Children	The Cribs for Kids program is coordinated by Dayton Children's. Since July 2017, 179 cribs (with education) have been distributed. Social needs screening have also been conducted on Cribs for Kids families with 142 families screened and 116 positive screens identifying additional social needs. Dayton Children's has a GOLD certification from Cribs for Kids. Representatives from Dayton Children's sit on multiple committees related to Infant Mortality through Public Health Dayton and Montgomery County.

Year 1 Action Step Update – Cross-Cutting Strategies

To address most, if not all priority areas, the following **cross-cutting strategies** are recommended:

1. Increase breastfeeding
2. Promote a regional childhood vaccination campaign
3. Explore and implement screenings to address social and behavioral needs
4. Integrate community health workers into clinical services
5. Implement a food insecurity screening and referral program
6. Implement a food pharmacy program

Cross-cutting Factor: Public health system, prevention and health behaviors			
Strategy 1: Increase breastfeeding			
Action Step	**Cross-cutting Outcome & Indicator**	**Priority Population**	**May 2018 Update**
Year 1: Collaborate with primary care physicians and birthing hospitals to standardize breastfeeding education across regional providers during pregnancy and postpartum. **Year 2**: Continue work from Year 1. **Year 3**: Continue work from Year 2.	**Cross-cutting Outcome:** Increase breastfeeding **Cross-cutting Indicator:** Percent of infants that were ever breastfed	Children and Families	Dayton Children's participates in the Greater Miami Valley Breastfeeding Coalition. Dr. Janet Wasylyshen-Velasco has taken the lead in this area and worked with Linda Smith at her Breastfeeding Update Workshops for health care providers through Wright State University Boonshoft School of Medicine providing lectures in August/September 2017 (1 hour – two times) for health care providers highlighting the need to improve breastfeeding rates locally. Dr. Velasco also spoke at the Ohio Lactation Consultant Association 26th Annual Breastfest Conference "Breastfeeding Connects Everything" March 16th, 2018 for 90 minutes for the clinical skills III workshop – '*What you*

| | | | don't know doctors don't know about breastfeeding"

Dr. Velasco is doing a series of 4 – 1 hour lectures for resident education on breastfeeding which is a new component for the existing resident academic curriculum.

And there will be a Grand Rounds in May 2018 titled "Lifelong health trajectories: Why the standard of care for infant nutrition matters" |

Cross-cutting Factor: Public health system, prevention and health behaviors			
Strategy 2: Promote a regional childhood vaccination campaign			
Action Step	**Cross-cutting Outcome & Indicator**	**Priority Population**	**May 2018 Update**
Year 1: Include various sectors of the community in the regional campaign (community organizations, churches, hospitals, pharmacies, health departments, political officials, law enforcement, schools, child care centers, media, etc.) Provide sectors with ways to support the campaign: posting or handing out flyers, social media campaigns, posting vaccination schedules, offering their facility as a vaccination site, offer free or reduced-cost immunizations etc.)	**Cross-cutting Outcome:** Increase childhood vaccinations **Cross-cutting Indicator:** Percentage of children who received all their recommended vaccinations	Children	In 2017-2018, Dayton Children's focused on an internal campaign for increasing the use of the flu vaccine. Dayton Children's created a program that offered parents and caregivers of inpatients the opportunity to get the flu shot while on campus. 155 flu shots were given to parents and caregivers during the flu season. In addition, baseline data was collected on how many children had received the flu which will be used to spread the campaign to more children and

| Year 2: Continue raising awareness of the importance of childhood vaccinations.

Provide vaccination information/educational materials at all community health promotion/awareness events; include information in local newspapers and magazines.

Provide vaccination information/educational materials to all local schools and child care locations.			families in future years.
Year 3: Increase number of childhood vaccination sites by 50% from baseline.			

Cross-cutting Factor: Family functioning			
Strategy 3: Explore and implement screenings to address social and behavioral needs 🛡			
Action Step	**Cross-cutting Outcome & Indicator**	**Priority Population**	**May 2018 Update**
Year 1: Continue screening and resource follow-up in the primary care clinic setting to address the social determinants of health. Share data and outcomes to scale and spread.

Identify interventions and/or connections for children and families to address identified needs. Evidence-based programs including Triple P to be explored.

Pilot program to screen at-risk children and connect to programs to improve social skills. | **Cross-cutting Outcomes:**
  1. Improve coping skills
  2. Identify and address social determinants of health

Cross-cutting Indicators:
  1. Not currently available (per SHIP)
  2. Not currently available | Children and Families | Dayton Children's Family Resource Connection conducted 4,500 screens to date with a 20% connection to resource rate. Screening within the Nutrition Clinic has also begun.

Dayton Children's Family Resource Connection was featured in a Children's Hospital Association Screening for Social Determinants of Health white paper. |
| Year 2: Continue efforts from year 1. | | | |
| Year 3: Continue efforts from year 2. | | | |

Cross-cutting Factor: Health care system and access			
Strategy 4: Integrate community health workers into clinical services 🛡			
Action Step	**Cross-cutting Outcome & Indicator**	**Priority Population**	**May 2018 Update**
Year 1: Explore the feasibility of Dayton Children's employing a community health worker (CHW) in a specific clinic setting. Identify referral process and begin collection data on CHW outcomes. **Year 2:** Continue with referral process and data collection on CHW outcomes. **Year 3:** Identify how CHW employment can be scaled and sustainable to other clinical settings.	**Cross-cutting Outcome:** Provider availability- Community Health Workers **Cross-cutting Indicator:** Address the social determinants of health in a clinical setting	Children and Families	Dayton Children's hired a community health worker who is imbedded in the pulmonary clinic. In addition, through a contract with ODJFS, Dayton Children's employs two Kinship Navigators who assist kinship families in caring for children. Dayton Children's is exploring hiring additional community health workers through grants. The Dayton Children's EPIC team as created special social needs encounters to track the work of community health workers within the medical record. Dayton Children's is also exploring the Pathways HUB models to identify pathways that community health workers can use with clients to reach optimal health outcomes while being paid by managed care companies. Training for the HUB model will be held in May 2018.

Cross-cutting Factor: Social determinants of health			
Strategy 5: Implement a food insecurity screening and referral program🌀			
Action Step	**Cross-cutting Outcome & Indicator**	**Priority Population**	**May 2018 Update**
Year 1: Research the 2-item Food Insecurity (FI) Screening Tool and determine feasibility of implementing a food insecurity screening and referral program. Educate healthcare providers on food insecurity, its impact on health, and the importance of screening and referral. Address food insecurity as part of routine medical visits on an individual and systems-based level. Implement the screening model in at least 1 location with accompanying evaluation measures. **Year 2:** Educate participating locations on existing community resources such as 2-1-1, WIC, SNAP, school nutrition programs, food pantries, etc. Continue efforts of Year 1. **Year 3**: Double the number of locations offering food insecurity screening and referrals.	**Cross-cutting Outcome:** Reduce food insecurity **Cross-cutting Indicator:** Percent of households that are food insecure (Feeding America, Map the Meal Gap)	Children and Families	Dayton Children's Pediatrics is universally screening using the 2-item Food Insecurity Tool. In addition, the nutrition clinic began using the 2-items screen along with the other social needs screening questions.

Cross-cutting Factor: Social determinants of health			
Strategy 6: Implement a food pharmacy program 🔷			
Action Step	**Cross-cutting Outcome & Indicator**	**Priority Population**	**May 2018 Update**
Year 1: Research the Alliance to End Hunger ProMedica Food Pharmacy or another similar program. Obtain baseline data to document need for a Food Pharmacy. Contact health care organizations, food pantries, farmers markets, and other potential partners. Schedule and attend meetings with potential partners to discuss the need and feasibility of a food pharmacy. Finalize location, program partners, vendors, and other details necessary for the implementation of a food pharmacy. Determine what additional program materials are needed. Develop program materials. **Year 2:** Continue efforts from year 1. Implement the food pharmacy in one location with accompanying evaluation measures. **Year 3:** Continue efforts from years 1 and 2.	**Cross-cutting Outcome:** Reduce food insecurity **Cross-cutting Indicator:** Percent of households that are food insecure (Feeding America, Map the Meal Gap)	Children and Families	A Food Pharmacy will be housed in the Center for Community Health and Advocacy building to open in Spring 2019. Initial discussions with the Food Bank have begun to identify what needs to be done to become an official partner and receive food. In addition, Dayton Children's and the Food Bank applied for and received a grant to support food boxes for families in the Food Bank drive through and eventually within the Food Pharmacy. A position to manage the food pharmacy and related activities/partnerships, a Community Food Equity Manager, has been requested in the FY2018-2019 budget.