COMMUNITY HEALTH NEEDS ASSESSMENT

IMPLEMENTATION PLAN

For Children's Hospital of The King's Daughters

Children’s Hospital of The King’s Daughters
601 Children’s Lane
Norfolk, VA 23507

www.chkd.org

September 2016
IMPLEMENTATION STRATEGY

Children’s Hospital of The King’s Daughters (CHKD) is Virginia’s only freestanding children’s hospital and is at the heart of a comprehensive pediatric healthcare system. CHKD Health System services are unique to the region in that they are exclusively dedicated to children and thus often meet pressing public health needs that would otherwise go unmet.

CHKD is home to the region’s only pediatric emergency room, the area's largest and most sophisticated neonatal and pediatric intensive care units, a transitional care unit for technology dependent children and Virginia's only acute inpatient rehabilitation unit. In addition to its inpatient services, CHKD offers more than 25 pediatric sub-specialty programs that care for children with chronic illnesses like asthma and diabetes. The Health System’s Surgery Group includes more than 20 pediatric surgeons in six specialties, including cardiac surgery, neurosurgery, orthopedic surgery, pediatric general surgery, plastic and reconstructive surgery and urology. With approximately 3000 employees, CHKD offers a full range of pediatric-trained clinical and support staff exclusively dedicated to the care and well-being of children.

From November 2015 to April 2016, CHKD conducted a community health needs assessment (CHNA) with support from Toxcel, LLC. The joint CHNA covered all three licensed facilities associated within the CHKD Health System: Children’s Hospital of The King’s Daughters (CHKD) located in Norfolk and CHKD’s two Health and Surgery Centers, one at Oyster Point in Newport News and one at Princess Anne in Virginia Beach.

The CHNA provided an overview of the primary and secondary data used to identify key health issues within the CHKD community. Based on the key health issues identified, CHKD leadership, providers and stakeholders identified five priorities to focus on in its implementation strategy including:

- Pediatric mental/behavioral health
- Access to care
- Childhood obesity
- Neonatal care
- Child abuse

A new and highly focused objective for CHKD is to target resources and programs to improve pediatric mental/behavioral health over the next three years.

CHKD Implementation Strategy from 2016-2018

This document outlines the implementation strategy that CHKD has developed to address the community health needs and priorities identified in its CHNA over the next three years. For each of the priorities listed above, this implementation strategy describes:

- Current work that CHKD already has underway to support the priority areas
- Actions that CHKD plans to take to further address the priority areas
- Programs, resources and collaborations that CHKD plans to utilize to address the health needs
- Anticipated impacts of these actions
Issues Not Addressed in the Implementation Strategy
The health needs identified through the CHNA that are not addressed specifically in the implementation strategy are outside the scope of CHKD’s mission, expertise, resources or any combination thereof. Many of these items are within the purview of other health care providers and/or community or public agencies. CHKD regularly and routinely offers its expertise and assistance as community resources to address a broad range of issues relating to the health and welfare of children. By addressing the prioritized issues such as pediatric mental/behavioral health, CHKD will be able to positively influence pediatric health and well-being overall, affecting multiple other identified health needs in the CHNA, such as dental services, violence, crime, educational success, substance abuse and, as our pediatric population grows older, their transition to adult care services.

Priority Issues

Pediatric Mental/Behavioral Health
In order to address mental and behavioral health, CHKD established a behavioral health service line that focuses on early intervention, family-based services and the complex interplay between mental health concerns and chronic medical illness. These services include psychiatry (Child and Family Guidance Clinic), psychology and a newly developed (2014) outpatient therapy services program. According to CDC data in 2014, suicide is now the second leading cause of death for children ages 10-14 and ages 15-24. CHKD evaluates approximately 600+ children per year in our emergency department for suicidal ideation or post suicide attempt. Care available today for these children is fragmented, and children face extensive wait times for services. With a high demand and limited availability of acute inpatient psychiatric beds, children often wait extended periods of time in the emergency department awaiting the availability of an inpatient psychiatric bed. Furthermore, there is a national shortage of child and adolescent psychiatrists. In Hampton Roads, some children wait several months to obtain specialty psychiatric care, and others wait equally as long for an appointment with a qualified licensed provider. Many children can improve with early intervention and by applying evidence-based treatment; therefore, CHKD established an outpatient behavioral health program staffed by licensed clinical social workers under the medical direction of a child and adolescent psychiatrist. In just two years, CHKD’s LCSW team numbers 18, providing behavioral health assessments and treatment in several outpatient locations as well as providing behavioral health support to patients in our ED and inpatient units. In FY15, the CHK’s outpatient behavioral health team provided 625 visits. In FY16, the number jumped to 5,500 visits. In FY17, we anticipate well over 8,000 visits. The goal is to offer quick access for evaluations. Not all children referred to the CHK program meet criteria for ongoing brief treatment; thus, collaboration with community agencies and practitioners is essential for connecting children to ongoing care.

Action Steps
In order to further support mental/behavioral health for children and adolescents over the next three years, we plan to:

- Expand access to outpatient behavioral health services by adding or enhancing services in locations both on the Southside and Peninsula to better meet the needs of all children in our service area.
• Provide the CHKD ED with round-the-clock licensed behavioral health clinicians to address the emergent behavioral health needs of patients arriving for emergency care.
• Hire a second board certified child and adolescent psychiatrist and other professionals in order to serve more patients.
• Strengthen CHKD’s inpatient consult-liaison team by adding behavioral health professionals to better address the needs of patients.
• By year 3, implement the zero suicide initiative at the hospital -- patients ages 10+ will be screened for depression and suicide using the PHQ-9A assessment tool.
• Implement Parent-Child Interaction Therapy (PCIT) by ensuring that key staff members attain certification in this evidence-based modality that treats children ages 2-6.
• Pilot a telehealth assessment for remote pediatric practice locations to provide access in underserved areas.
• Continue to evaluate the best model for addressing both the primary care needs of the pediatric population as well as their behavioral health care needs.
• Evaluate the need for and development of a cohort of inpatient beds (med/psych unit) to serve patients with a primary medical condition and co-existing behavioral health condition.
• Provide education for pediatric residents, nursing and health system staff on Crisis Prevention Intervention techniques that involve recognizing and managing challenging behaviors in patients and parents.
• Establish a multidisciplinary evaluation and treatment program for children within the foster care system, focusing on early intervention for medical and behavioral health needs in collaboration with CHKD Medical Group, local Departments of Social Services and others. Partner with local CSB’s to provide wrap-around services.
• Evaluate the community need for acute inpatient psychiatric care for children and teens, and develop recommendations on CHKD’s role. Evaluate the need for additional behavioral health services, including family based treatment.

Collaborations
CHKD is committed to collaborating with Virginia Beach DSS to provide a medical home for children in foster care to include mental health evaluation, treatment and referral. Our hope is that this program will expand to other social service localities throughout Hampton Roads. CHKD also works closely and collaboratively with CSBs throughout the region and with the hospital’s Child Abuse Program. As part of CHKD’s efforts to expand access to care for children in need of behavioral health services, CHKD works in partnership with local pediatricians, behavioral health practitioners and programs, schools and other organizations with shared goals.

Anticipated Impact
CHKD’s goal is to provide early intervention and to improve access to outpatient behavioral health services for children throughout Hampton Roads. By FY17, CHKD will increase the number of patients seen to over 8,000 visits and add 5 new clinicians. After FY17, we anticipate that our growth and expansion into the community will continue and will provide an integrated framework to meet more of the community health needs of our patients and their families. CHKD’s behavioral health program will provide better integration with primary care providers to address the continuum of medical and behavioral health needs. Furthermore, coordination and collaboration with schools is a goal. By
delivering evidence-based behavioral health care, CHKD will measure outcomes of intervention and the impact of this new program on the greater Hampton Roads community.

Access to Care
CHKD improves access to care through locations as far north as the Middle Peninsula, as far west as Williamsburg and as far south as Elizabeth City, North Carolina. It has 18 pediatric practices, some with multiple office locations. In total, there are pediatric practices in 28 different locations and 10 additional locations see patients for therapy and medical and surgical specialty clinic visits. CHKD also operates two health and surgery centers plus additional multidisciplinary outpatient buildings throughout Hampton Roads. In 2015, CHKD added Urgent Care in Chesapeake and in Virginia Beach in 2016 with additional locations slated for the coming years in Virginia Beach and Newport News.

Despite the vast array of services and locations that CHKD offers, the CHNA underscored that access to care continues to be a critical need in the community we serve.

Action Steps
CHKD plans to increase access to care by developing a telehealth program, expanding urgent care locations, applying for certification as a Level I pediatric trauma center, building and expanding new facilities on the main campus and throughout the community and assessing the current services we provide to determine additional needs. In the next three years, we plan to:

- Develop and implement a plan to introduce telehealth in a phased approach to ensure ease of access and participation for physicians and patients.
- Expand CHKD Urgent Care to additional locations both Southside and Peninsula to offer better access to care when primary care offices are closed. Base an acute care transport team and vehicle in Virginia Beach and a critical care transport team and vehicle in Newport News to expedite transfers for inpatient care.
- Apply for certification as a Level I pediatric trauma center to better serve children in the region.
- Assess current practice and clinic capacity by specialty, location and provider to ensure capacity meets patient-care demand.
- Collaborate with the University of Virginia Children's Hospital to expand cardiovascular telemedicine services and to deliver coordinated care to pediatric cardiac surgery patients.
- Renovate select inpatient care units and build an on-campus outpatient services building to allow for better delivery of care as well as expanded service offerings for patients using CHKD’s main campus.
- Enhance and establish multidisciplinary outpatient health centers in Virginia Beach, Newport News, Williamsburg and Suffolk to improve access to pediatric medical and surgical specialty care.

Collaborations and Resources
Many of the action steps planned involve internal assessments that require a great deal of coordination, communication and information provision across CHKD’s numerous sites and hundreds of care providers.

CHKD plans to commit internal resources and personnel to implement the Telehealth program and assess how to expand access to care through a variety of technology-assisted means. In order to
establish a successful telehealth program, CHKD will collaborate with providers across the region and the state.

Through the leadership CHKD’s Medical Group is collaborating with the Virginia Beach Department of Social Services to provide a medical home for children entering the foster care system. Included in this process will be a mandatory mental health evaluation by one of CHKD’s clinicians to occur within the first 30-days of entering care. This comprehensive assessment will help to identify need, exposure and response to trauma, and facilitate an appropriate treatment plan to assist with their continuity of care. This program is being looked at by state level AAP designees as a best practice model of care. Early meetings have taken place with Social Services departments in other localities to determine the feasibility of extending the foster care program to others in order to improve care for children in foster care.

Other sections of this report address collaborations that also represent improved access to care for patients, from CHKD’s behavioral health services to its child abuse program, for example. Please reference those areas as well.

**Anticipated Impact**

CHKD anticipates being able to reach more patients through its telehealth services and provide increased access to care, especially for those patients living in underserved areas and/or more distant communities. CHKD’s plans for campus expansions and renovations, for new Urgent Care sites and outpatient care buildings are all aimed at improving access to care for children throughout the service region. Additionally, CHKD hopes to decrease patient wait times at existing practices and clinics.

**Childhood Obesity**

The epidemic of childhood obesity continues to be a concern and focus area for CHKD. In order to address this critical issue, in 2001, CHKD established a comprehensive program called *Healthy You for Life* that is offered to children ages 3 through high school. *Healthy You for Life* offers a multidisciplinary team approach that provides clinical and psychological evaluation and treatment planning for individuals. In addition, group classes that cover nutrition, exercise and lifestyle management are available to patients and their families. The program’s staff includes physicians, nurses, registered dietitians, licensed clinical social workers and exercise specialists as well as a community outreach coordinator. In the 2016 fiscal year, the team conducted nearly 1,450 visits and saw 576 individual patients and their families.

*Healthy You for Life* participants come from throughout the greater Hampton Roads region, including:

- 76% Southside
- 19% Peninsula
- 2.3% N. Carolina
- 1.6% Western Tidewater

**Action Steps**

In order to further decrease rates of childhood obesity and address the continued demand for obesity prevention services in the next three years, we plan to:
• Expand clinic and class services to Virginia Beach, offering patients additional options for appointments, fitness and lifestyle classes.
• Consider and evaluate level four treatment options which include the use of pharmaceuticals and bariatric surgery based on a higher acuity level in teens.
• Evaluate systems to offer shorter wait times and provide more streamlined scheduling for new patients.
• Assess attrition rates and develop an action plan to increase participation.
• Continue community outreach work to raise awareness of the program’s availability.

Collaborations
In order to provide our patients with the best possible resources to address childhood obesity and the co-morbidities associated with it, Healthy You for Life has strong partnerships with various CHKD specialists and multiple community providers and agencies including local health departments, YMCAs, Hampton Roads public schools and Park and Recreation Centers.

Anticipated Impact
CHKD will assess the impact of the Healthy You for Life program in a number of ways. Clinical metrics such as improved BMI and improved lab values will be assessed. Patients and families will be observed for positive lifestyle changes as well as increased knowledge of nutritional and fitness choices and consequences. The Healthy You for Life program will continue to assess and refer patients for treatment of co-morbidities such as depression and other mental health issues, sleep apnea, cardiac abnormalities and diabetes in an effort to prevent chronic illnesses into adulthood.

With the addition of a new clinic and class location in Virginia Beach, we will be able to offer patients four different treatment locations. This allows for easier accessibility to patients all over the Tidewater/Hampton Roads region. With the addition of staff and locations we will be able to offer 20 new patient time slots a week, decreasing wait time for new patients to enter the program. This availability of new patient appointments will increase by approximately 200 for the year.

Neonatal Care
As the home of the region’s only subspecialty neonatal intensive care unit, CHKD operates a 62 bed NICU with 7 additional step-down neonatal beds. As the regional perinatal/neonatal referring hospital for southeastern Virginia and Northeastern North Carolina, CHKD serves patients from every hospital delivering babies in the region.

Investment in Partners
CHKD’s Maternal Newborn Transport Review (MNTR) programs are a critical component of its work to prevent infant mortality/morbidity. All newborns who are transported to CHKD’s Neonatal Intensive Care Unit (NICU) are followed by the staff of the Neonatal Perinatal Outreach Center. Ongoing communication regarding the infant’s condition throughout the NICU course is provided to the referring physicians and hospitals. Regular reviews of transported infants are held at individual regional referral hospitals. Program staff from CHKD lead and organize the team for each MNTR, ensuring that a CHKD neonatologist and EVMS perinatologist offer thorough analysis of the transport and condition of the child to the referring hospitals’ obstetricians, pediatricians and obstetrical and neonatal/nursery nurses. The sessions are intended to highlight current therapies, best practices and/or changes in treatment
modalities to ensure the best possible outcomes from the transfer of high-risk newborns to CHKD. Participation in the program provides CME credits for participants.

CHKD also provides annual financial support to the Eastern Virginia Medical School’s (EVMS) Maternal Fetal Medicine (MFM) program to ensure that its services are available throughout greater Hampton Roads. This funding supports the MFM program to provide consultation, assessment, emergency and continuing care services for high-risk pregnancies. CHKD’s continued investment ensures that comprehensive evidence-based care will be delivered to high-risk obstetrical patients in an effort to reduce infant mortality and low birth weight deliveries.

**Innovative Therapies**

Human milk is the best nutrition for all babies, but there are many factors that can prevent mothers of preterm or critically ill infants from being able to provide a sufficient supply of their own milk. In an effort to prevent life-threatening complications and infections in critically ill infants, CHKD opened The King’s Daughters Milk Bank. The King’s Daughters Milk Bank at CHKD is a non-profit, hospital-based donor human milk bank that was established to provide the life-saving benefits of breast milk to severely premature and critically-ill infants, improving their potential to survive and thrive. The milk bank at CHKD is the first in the state of Virginia and is fully accredited by The Human Milk Banking Association of North America. The generosity of altruistic milk donors throughout the country has enabled CHKD to not only provide over 50,000 ounces of safe, pasteurized donor human milk to our facility annually, but also to supply more than 20 additional health care facilities with this invaluable treatment throughout the East Coast.

**Action Steps**

In order to further decrease rates of infant mortality/morbidity and increase neonatal health in the next three years, we plan to:

- Facilitate ongoing education opportunities for community physicians on medical and technological advances related to the causes and prevention of premature and low birth weight deliveries through regular Maternal/Newborn Transport Reviews.
- Continue to invest in and support the EVMS Maternal Fetal Medicine Program to ensure access to care for high-risk pregnancies.
- The CHKD Milk Bank will continue to obtain and process donor human milk (DHM) for use by neonates in the CHKD NICU and other patients who can benefit clinically from the availability of DHM. Continue to supply DHM to other health care facilities throughout the East Coast.
- Convert multi-bed NICU pods to private and "twin" rooms to better address the clinical, developmental and psychosocial needs of neonates and their families.
- Devote resources to safety and quality initiatives to improve care delivery and neonatal outcomes, specifically to reduce the risk of infections and to address the efficacy of nutrition on an individualized basis.

**Collaborations**

As highlighted throughout this section, infant mortality/morbidity is being addressed on a number of fronts by a multitude of community providers and agencies, including EVMS’ Maternal Fetal Medicine program, hospitals and healthcare providers throughout the region.
Anticipated Impact
The region’s incidence of preterm births, very low birthweights and infant mortality is far too high, and the underlying causes and factors are multi-layered and complex. CHKD will continue its role as the regional referral center for specialty and subspecialty neonatal intensive care, recognizing that studies demonstrate that a regionalized approach to neonatal care with care provided in higher volume centers yields better outcomes for neonates. CHKD will continue to work with numerous other agencies, organizations and providers and will assess the impact of its neonatal program by monitoring and measuring outcomes related to infant mortality/morbidity. Through a regionalized approach to care and in collaboration with community partners, the goal is for the infant mortality/morbidity rates in the region to continue to decrease.

Child Abuse
CHKD’s Child Abuse Program coordinates the region’s efforts to accurately identify, treat and protect children who have been abused or neglected. The program provides comprehensive assessment, evaluation and treatment services to suspected victims of abuse and neglect. These services include forensic interviewing, medical examinations and consultations, which include 24/7 coverage of acute sexual assaults of children and an array of evidence-based mental health services. Through case management, the program also helps coordinate the efforts of investigative agencies involved in the investigation and prosecution of abuse.

The Child Abuse Program is a Children’s Advocacy Center (CAC) accredited by the National Children’s Alliance and serves all of southeastern Virginia and neighboring areas. The main office is in Norfolk, but services are also provided in the CHKD Oyster Point and Princess Anne facilities.

Multidisciplinary Team Provides Child-Centered Care
Approximately 1,100 children are served annually and many of these children have multiple visits, including regular psychotherapy appointments. The CAC model provides a safe, child-friendly place for children involved in cases of alleged maltreatment to receive quality services, including forensic interviews, medical evaluations, psychological evaluations and treatment. The model includes a Multidisciplinary Team (MDT), which brings together the professionals involved in the investigation and prosecution of child abuse as well as intervention and advocacy for the child and family. The Child Abuse Program has six city MDTs and three military MDTs that review all new cases of child abuse, exchange information among professionals and make decisions about cases.

In FY16, the Child Abuse Program saw 893 children from the Southside, 118 from the Peninsula and 184 from other areas in the region.

Action Steps
- Strengthen relations within the nine Multi Disciplinary Team (MDT) communities and surrounding areas.
- Add an additional city and MDT, and reach out to cities further away to create MOUs that will enable better communications and collaborations.
- Through a National Children's Alliance grant, train forensic interviewers from Child Advocacy Centers across Virginia.
- Provide additional training for all staff that will improve understanding of commercial sexual exploitation of children (CSEC), and build a protocol to effectively serve and protect this population.
• Fill a gap in the region to assist in changing the way the CSEC population is being treated and served over the next three years.

• Through the Family and Children's Trust grant, expand and enhance trauma-informed family advocacy services to meet the unique needs of these families.

• Expand office space and staff on the Peninsula to increase capabilities to provide better access to care and evidence-based forensic medical and mental health services in an efficient manner by FY 2018.

Collaborations
Child abuse is being addressed on a number of fronts by a multitude of community providers and agencies, with CHKD providing its expertise and assistance in keeping with the organization’s core mission and availability of resources. CHKD acknowledges that it neither is, nor should be, the sole entity responsible for addressing this focus area. Key organizations and partners of CAP include Child Protective Services, law enforcement, Commonwealth’s Attorney, city attorneys, Victim Witness staff, JAG, military advocacy program and Champions for Children-Child Abuse Hampton Roads.

Anticipated Impact
In the next three years, CHKD anticipates increasing the number of children served through the CAP by increasing the MDT communities and expanding an existing office location. It also aims to reduce the impact of child maltreatment on children in Hampton Roads by continuing to build and support a trauma-informed network of care and, thereby, increase children’s access to evidence-based, trauma-informed services across the region.