



Children's Hospital Colorado  
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# Community Health Needs Assessment

## Implementation Plan 2019

Approved by an Authorizing Body of the Children's  
Hospital Colorado Board of Directors, May 16, 2019.



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## Introduction

Children’s Hospital Colorado has a 110-year history of working to ensure that all children in Colorado live safe and healthy lives. Our mission is to improve the health of children through the provision of high-quality coordinated programs of patient care, education, research and advocacy. While we pride ourselves on the world class medical care that we provide to children in our facilities, we are also committed to keeping kids out of the hospital by preventing injuries and illness and generating health.

Children’s Colorado is a not-for-profit pediatric healthcare network.

3,000+

Pediatric specialists

5,000+

Full-time employees helping to carry out our mission

We provide comprehensive pediatric care at our hospital on the Anschutz Medical Campus in Aurora and at several locations throughout the region.

Each year, the network has

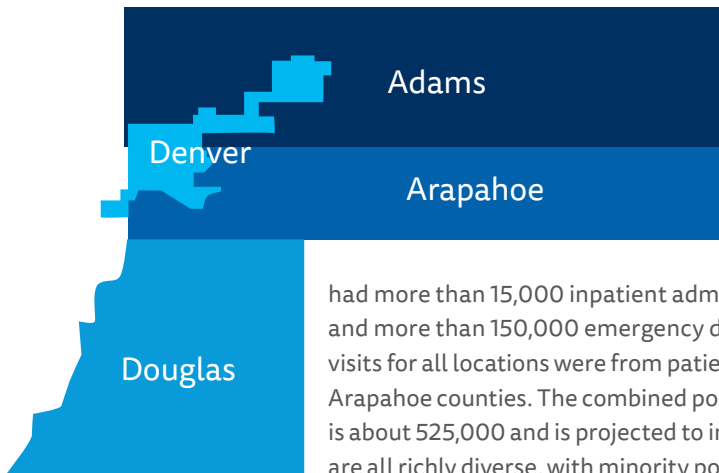
15,000+

Inpatient admissions

600,000+

Outpatient visits

### Definition of community



While our network serves children in a seven-state region, for the purposes of this implementation plan we have defined community as all children living in the four-county area from which most of our patient population is drawn and in which we have facilities. This includes Denver, Douglas, Adams and Arapahoe counties. In 2017, we

had more than 15,000 inpatient admissions, more than 624,000 outpatient visits, and more than 150,000 emergency department and urgent care visits. 60% of all visits for all locations were from patients who reside in Denver, Douglas, Adams and Arapahoe counties. The combined population of children age 0 to 17 in those counties is about 525,000 and is projected to increase by about 5% by 2023<sup>i</sup>. These counties are all richly diverse, with minority populations ranging from 20% in Douglas County to 70% in Denver County<sup>ii</sup>. While Colorado is generally an affluent state, with an

average household income of nearly \$75,000, 16% of children in the state are living in poverty. For our four-county area, the rate ranges from a high of 25% in Denver to just 4% in Douglas County.

Additional emphasis is given in this implementation plan to the neighborhood surrounding the main campus in Aurora. Ward 1 of Aurora has a population that is nearly 95% minority, has a poverty level of greater than 30%, and has a median household income of just over \$30,000.

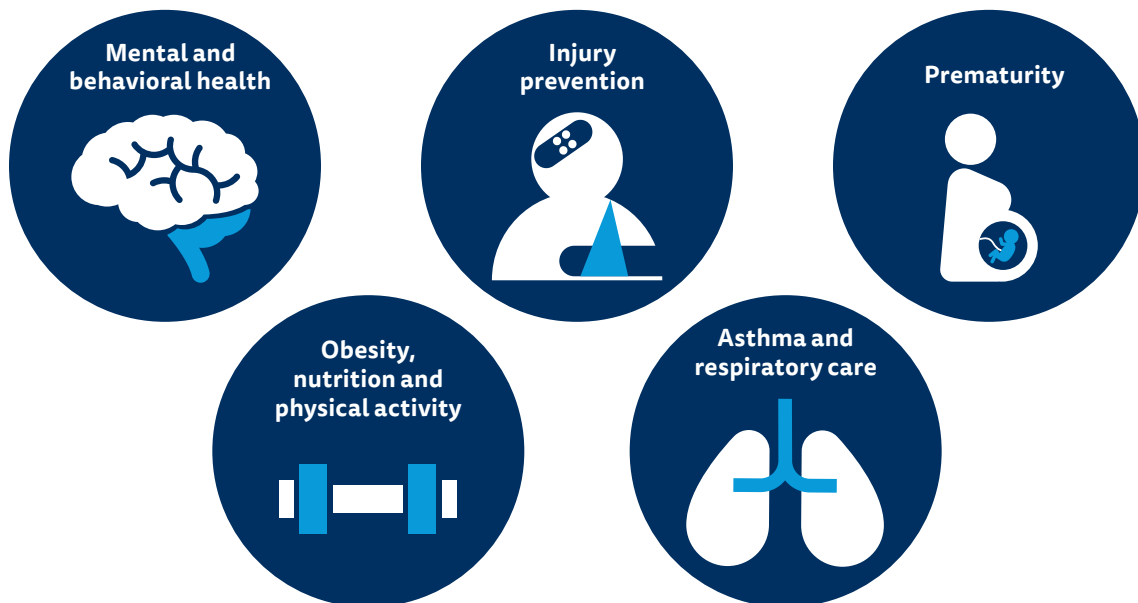
## Health priorities

In 2018, as part of our commitment to be an active partner in the community that goes well beyond the provision of patient care, we conducted a comprehensive community health needs assessment. For the assessment we conducted:

- 44 stakeholder interviews with community and health leaders
- Six focus groups with a total of 48 participants
- A parent survey which generated responses from 582 residents of our four-county community including 409 in English and 173 in Spanish
- A provider survey which generated 108 responses from practitioners in our community
- A comprehensive review of state and county level data on many child health indicators as well as basic demographic information
- A review of internal data on admissions, diagnoses and patient demographics

The goal of the assessment was to better understand the concerns and priorities of the families we serve, the community organizations we partner with, and the providers who work with our patients. The 2018 Community Needs Health Assessment, which summarizes these findings, can be found at [childrenscolorado.org/globalassets/community/childrens-hospital-colorado-2018-community-health-needs-assessment.pdf](https://childrenscolorado.org/globalassets/community/childrens-hospital-colorado-2018-community-health-needs-assessment.pdf).

Through our needs assessment, we identified five priority areas that will be the focus of our community health improvement work for the next three years:



This plan outlines our three-year goals for each of those priorities and details the strategies we plan to use to tackle these complex issues. It should be noted that these priorities have been important to the hospital for many years, and we have long standing outreach, advocacy and prevention efforts already in place in each of these areas. We are also excited to share new efforts that will be introduced or enhanced in the coming years. We look forward to working with our many community partners to fulfill our commitment to keep all of Colorado's children health and safe.

# Methodology

To create the implementation plan, Children’s Hospital Colorado used the information gathered through the community health needs assessment as the major source of information and incorporated additional insights from planning discussions with community partners. We then convened a series of five strategy sessions with providers, community health strategists and administrators. Each of these sessions focused on one of the five priority areas that had been selected through the needs assessment. With the help of an outside facilitator, teams developed vision statements, goals and objectives for each priority. The objectives selected are all quantifiable and time-limited, which will allow for effective evaluation of our efforts in the future.

In addition, we used a set of mutually-agreed upon principles to help narrow the objectives, and to ensure there was coherence and focus to our work.

## Guiding principles

### Health Equity

Children’s Hospital Colorado believes that every child should have the opportunity to live a healthy life. We also recognize that many factors contribute to disparities between different socio-economic and ethnic groups. While 91% of Non-Hispanic White families in Colorado report that their child’s health is either very good or excellent, only 84% of Hispanic families and 87% of Black families say that is the case for their children<sup>iii</sup>. Similarly, 92% of Colorado parents with household incomes greater than \$50,000 say their child’s health is very good or excellent, compared to just 75% of parents with household incomes below \$25,000<sup>iv</sup>. We have prioritized offering programs and services that will benefit low-income and vulnerable children.

Children’s Hospital Colorado is also physically located in an area that has a higher-than-average minority population and has a lower median income than the rest of the metro area. Because we believe that we have an opportunity to significantly impact the health of those children who live and play closest to us, we have made special efforts to conduct outreach and offer programs in the three-zip-code area nearest us. Many of the objectives in this plan are specific to advancing the health of children who reside in the 80010, 80011 and 80012 zip codes.

### Partnerships and community network

Our hospital is one part of a vibrant network of organizations that support the health and wellbeing of children in our community. We strive to be a responsible and reliable community partner. This means sometimes serving as a lead on community programs and advocacy efforts. More often, it means offering our support to other organizations through partnerships, data sharing, and collaborative problem solving. Children’s Colorado is working collaboratively with partners in other sectors such as schools, primary care, local government, local public health, and other community-based organizations to identify shared priorities and formalize our commitments to addressing the needs of our community together, so we can maximize our impact.

### Social determinants of health

Children’s Hospital Colorado recognizes and believes in the growing body of evidence that the conditions in which children are born, grow and live has significant lifelong impact on their health. For that reason, we have chosen to include programs and services that address these social issues, in addition to more traditional medically-focused efforts, as part of our work. Investments in screening for social needs, formalizing referral processes with community partners, data capture and sustaining a workforce of community health navigators is being integrated across our partnerships.

### Using data to target efforts

We believe it is important to use data to inform the ways we work with the community. We have access to rich data systems and intend to use the information we have in responsible and innovative ways. Our goal is to ensure that the right preventions and interventions are delivered to the right populations at the right place and time. A component of this work is also striving to understand how we as part of a community network can create a shared language and understanding across our partnerships in terms of how we collect and share information to advance our collective aims on behalf of children and families.

### Community engagement and responsiveness

In addition to relying on data to inform our work, we are committed to being responsive to community voice. Our intent is never to “do unto” the community, but rather to listen to the needs and interests of the community and to serve with humility and respect. Within each of the health areas we have prioritized, we are making efforts to not only use data to target our efforts to focus on the populations who are most affected by the health issue, but also to engage more deeply with the affected population to inform our response to the identified needs.

## Strategies

We also decided to focus our work on five types of activities. We believe these activities have the most potential to impact child health outcomes. We also believe that focusing on a few core strategies makes our work more efficient and effective. Those strategies include:

- **Policy and advocacy** — Children’s Hospital Colorado often leverages its expertise, brand and credibility to propose, endorse or oppose policy changes and the local, state and national level. We will continue to serve as a leading advocacy voice for children in Colorado.
- **Education and Training** — As a teaching hospital, we recognize the power of sharing knowledge and empowering others to act on behalf of children. Many of our community efforts are designed to share our expertise with those who are closest to children and to increase their professional capacity.
- **Direct services and supports** — At times, providing services and supports directly to patients and their families is the most impactful way to address their health. While we strive to keep our core medical services distinct from our community work, we feel there is also an appropriate time and place for direct services in our community efforts.
- **Screening, Referrals and Navigation** — We have observed that one of the biggest barriers to children leading their healthiest lives is that it is difficult for families to access the services that are available to them. We believe that we have an important role to play in helping families to get appropriate referrals to community resources and assisting with follow-through on those referrals.
- **Innovating new models and roles** — Rapid advancements in technology, medical research and the health care industry are opening exciting new ways for us to do our work, and opportunities to pilot roles that previously did not exist in health care. We are committed to creating the space for our team members to advance new models and programs to effectively serve our community.

Together, our guiding principles and our core strategies help us develop a comprehensive and rational set of objectives for the next three years. We are pleased to share those objectives with the broader community through this plan.

## GOALS AND OBJECTIVES



# Mental and Behavioral Health

*Mental and behavioral health emerged as a top community concern through every method of data collection in our community health needs assessment. Parents, caregivers, medical providers and community leaders all share a belief that the mental health of children is a critical issue. Nearly 1 in 5 parents in Colorado reports that their child has social and emotional challenges, and 15% report that their child requires mental health care or counseling<sup>v</sup>.*

Children's Hospital Colorado has, for decades, dedicated substantial resources toward improving the mental health of our state's children. Through our 2017 Hospital Mental Health Stigma Reduction Action Plan, we worked to reduce mental health stigma within the hospital walls and across Colorado. We also partnered with 20 statewide organizations to help launch the Let's Talk Colorado online messaging platform, which has garnered tens of millions of impressions to date.

As part of promoting youth mental health and wellness, we are committed to ensuring that all children receive the support they need for healthy social and emotional development and will continue to focus in this area in the coming years.

### **Goal 1: Advocate for a mental and behavioral health care system that prioritizes the needs of families.**

Advocacy is one of our core community health strategies, and we see ample opportunity to advance the mental health of children on a large scale by impacting mental and behavioral health policies at the state and local level.

### **Goal 2: Reduce the risk of youth suicide through targeted community engagement.**

More than one out of six high school students in Colorado has considered committing suicide<sup>vi</sup>. Suicide is also the second leading cause of death for children and youth ages 10 to 24 in our state. Children's Hospital Colorado is uniquely positioned to help identify areas where the risk is greatest and to deliver targeted and effective interventions to prevent any more tragic deaths.

### **Goal 3: Improve the social emotional wellness of children and families through a combination of clinical and community-based efforts.**

One of the most impactful ways that we can affect the well-being of children is to ensure that all families are well informed about the importance of social and emotional development. We will work within our own practice and with our community partners to make relevant and useful information available to a wide audience.



## GOALS AND OBJECTIVES



## Injury Prevention

*Unintentional injury is the leading cause of death for children between the ages of 1 and 24 in Colorado. Injury is also the leading cause of hospitalization for children ages 1 to 14 in our state, with falls and motor vehicle accidents as the most frequent incidents.*

Children's Hospital Colorado has a long-standing commitment to working with the community to prevent injury and to help keep kids safe. We have completed thousands of car seat inspections and have trained dozens of community partners on child passenger safety. We have partnered with community groups and schools statewide to provide safe driving training to teens. Families and patients have benefited from our safe sleep training and the free portable cribs we have offered. And state level policies aimed at preventing unintended injury have advanced, in part, through our advocacy efforts.

Over the next three years, we will continue our successful evidence-based prevention efforts while also growing the capacity of other organizations to contribute to this important work.

**Goal: Implement and evaluate evidence-based, culturally relevant programs to reduce the incidence of unintentional injury.**

## GOALS AND OBJECTIVES



# Prematurity

*Premature birth is the second leading cause of infant mortality in Colorado and can create life-long challenges for those babies who survive. Children's Hospital Colorado has been a national leader in preventing and treating premature birth. We believe that we can and will decrease prematurity in our state and are working hard to increase awareness about the importance of prenatal care.*

### **Goal 1: Increase awareness about the contributors of pre-term birth through community and clinical outreach.**

Colorado faces one of the highest preterm birth rates of any state in the nation, and Black and African Americans are at greater risk than any other group. We believe that improving both provider and community awareness of the factors that put a mother at risk of preterm delivery will help to decrease prematurity in our state. This includes confronting bias and the systemic racism that are driving factors in this pervasive health disparity.

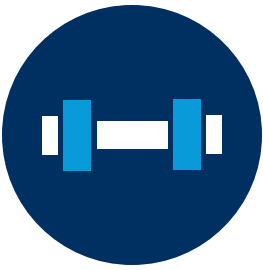
### **Goal 2: Advance policies to support families and mitigate prematurity at the organizational, local, and state level through education and advocacy.**

As with our other priority areas, we see policy and advocacy as one of the core ways we can reduce the number of premature births in our state and improve health care equity.

### **Goal 3: Improve access to care and supports for families through strengthening community and clinical connections and pathways.**

We have observed, that while our community has many resources available to children and their families, it is often difficult to access these resources. Children's Hospital Colorado will work to diminish the complexity of the referral system and to make it easier for those who need support to find it.

## GOALS AND OBJECTIVES



## Obesity, nutrition and physical activity

*While Colorado is typically viewed as a healthy, fit and active state, the reality is that we face substantial challenges with nutrition, physical activity, and obesity. Nearly one quarter of our state's children are overweight or obese, and vulnerable populations have significantly higher rates of obesity<sup>vii</sup>.*

While nutrition and physical activity are distinct issues, they are also closely correlated with obesity and we have therefore decided to think of them as a connected set of concerns. With fewer than half of children in the state getting the recommended 60 minutes of daily physical activity and only 1 in 8 consuming 3 or more servings of vegetables a day, we know that there is a great deal of work to be done.

Our recent accomplishments in this area include implementing Peak Champions, a camp program for low-income, underserved youth who are overweight or obese, teaching families about good nutrition through serving as a lead agency for offering the Cooking Matters program, and developing policy recommendations to address food insecurity in our state. Looking ahead, we plan to continue those efforts that have proven effect while also piloting promising new initiatives.

### **Goal: Reduce obesity rates of children through a combination of clinical and community-based efforts.**

While proper clinical care is clearly an important component of reducing obesity, we also firmly believe in working with families and community groups to support overweight and obese children. Over the next few years, we plan to increase our partnerships with community organizations and to test new ways to coordinate our efforts to support healthy lifestyles across our shared population.

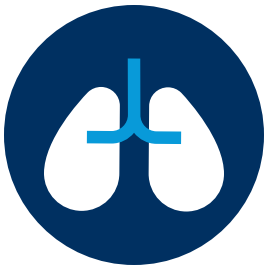
### **Goal: Increase knowledge about and access to quality physical activity options for kids.**

Because so many of Colorado's kids continue to struggle with increasing rates of obesity we must continue our work to ensure our youth have regular access to physical activity, regardless of their zip code, income bracket, ethnicity, language of preference, race, gender or age. Our efforts will include a comprehensive approach to continued awareness of the value of regular physical activity and how to have access to quality activity options.

### **Goal: Increase knowledge about and access to healthy food and quality nutrition service for kids.**

While the causes of obesity are complex, it is well known that proper nutrition can help protect against children becoming overweight. Some of the barriers to healthy eating are insufficient public awareness about the importance of the nutrition, and limited access to affordable healthy foods. We intend to give children and families practical and useful information and tangible connections for increasing their consumption of healthy foods.

## GOALS AND OBJECTIVES



# Asthma and respiratory care

*Asthma and respiratory illness is one of the leading causes of both inpatient and outpatient visits at Children’s Hospital Colorado. While we pride ourselves on our world class clinical programs for the treatment of these conditions, we are also invested in reducing our patients’ need for emergency department and inpatient care.*

Through our Colorado Step Up school-centered asthma program, we have helped six school districts improve asthma case management in schools. Our home visitation program has helped families provide a safe home environment for patients. And our advocacy efforts over many years have contributed to a reduction in tobacco use statewide.

### **Goal: Reduce exposure to tobacco smoke and e-cigarette vapor among children in Colorado.**

Indirect and direct exposure to tobacco smoke, nicotine vaport and related products is one of the greatest risk factors for pediatric respiratory illness. We believe we can have the greatest impact on exposure through our policy and advocacy work.

### **Goal: Increase awareness of respiratory health and ways mitigate threats to respiratory health statewide.**

Children’s Hospital Colorado is uniquely positioned to communicate with the public about a range of health issues. Using our media presence and other communication channels, we will prioritize improving public awareness about how to protect children’s respiratory health.

### **Goal: Increase access to community-based respiratory health education and care coordination.**

We believe that, by sharing our asthma expertise with schools and community organizations, who all play a role in supporting children with this condition, we can help children lead more productive and joyful lives.

## GOALS AND OBJECTIVES



## Healthy Neighborhoods

*Kids can't achieve optimal health if the environments they live and learn in aren't places that support and generate health. We are committed to working with community based partners to further build and grow healthy neighborhoods.*

**Goal 1: Develop the architecture for a data exchange system that allows key community partners with shared goals and populations to track how families are accessing community resources, and facilitates tracking of outcomes.**

Community partnerships play a critical role in addressing social determinants of health, and embracing a holistic approach to health and wellness. Data exchange provides vital connectivity between community organizations and systems to overcome challenges of siloed systems and fragmentation of services—while also simultaneously building capacity to improve how impacts and outcomes data are tracked and captured.

**Goal 2: Develop a community-driven engagement process that leads to an effective Community Network co-designed by the communities it serves.**

Building a family-centered Community Network that effectively supports families with needs that span across health and social services requires connecting directly to families to understand their realities, and gaining their input and buy-in. Designing, implementing and promoting how a Community Network, which coordinates and connects services across organizations and systems, must therefore include a strong partnership with community members throughout.

## Enduring Priorities

Children’s Hospital Colorado recognizes that the public health needs of the community are extensive and include many issues not explicitly addressed through our goals and priorities. While our five priority areas will be the focus of our community efforts for the next several years, we will also continue our ongoing efforts in several areas that benefit the community. Of particular interest is oral health. While oral health remains an important public health issue, and was one of our priority needs in 2016, the rates of children in Colorado who are visiting dentists has steadily improved, and as of 2016, 86% of children ages 1 to 14 had a seen a dentist for preventative care in the past 12 months<sup>viii</sup>. Fewer than 10% of parents statewide reported that they had delayed needed dental care for their child in the past year<sup>ix</sup>.

While we are gratified that more children are receiving the care they need, Children’s Colorado remains committed to this issue. Each year, more than 1,500 infants and toddlers receive care in our Cavity Free at Three clinic. Patients are also seen in our dental clinic, in the Child Health Clinic and through community-based clinics, where they receive important preventive services. Children’s Colorado also serves as a resource for medical and dental providers by offering training in infant oral health using the Cavity Free at Three model. Each year, 120 pre-doctoral dental students and 32 pediatric medical resident care providers receive clinical training in infant oral health at Children’s Colorado. In the 2018-19 school year, we enhanced our oral health screening, education, and preventive services for young children in Aurora through a partnership with the Aurora Public Schools district, and we look forward to building upon these efforts in the years to come. Finally, we have a history of advocating for policies that increase access to dental care and improve the quality of care and will continue to do so.

## Conclusion

Children’s Hospital Colorado prides itself on being a trusted partner in the community and on working collaboratively to improve the health of all children in Colorado. Through our work with schools, primary care, and community-based organizations and the legislature, we believe that we can and will ensure that children and their families are well supported and have access to high quality care. We will continue to strive to

- Reduce inequities in the health system
- Improve the environments in which children grow, learn and play
- Create systems-level change that increases the efficiency and effectiveness of diverse organizations
- Push for policies that improve the health and well-being of children and their families

This implementation plan will steer our work for the next three years. We will also continue to seek out innovative and impactful ways to contribute to the health of our community. We also welcome continued feedback on our strategies for addressing community health needs. Comments, questions and suggestions can be sent to [communitybenefit@childrenscolorado.org](mailto:communitybenefit@childrenscolorado.org).

We look forward to the work ahead!

## Note

Children's Hospital Colorado reserves the right to amend this implementation plan at any time. Community health needs may evolve, and adjustments to the goals and strategies described in this plan may be warranted.

## Endnotes

<sup>i</sup>Sg2 Demographics

<sup>ii</sup>Ibid

<sup>iii</sup>Colorado Department of Public Health and Environment, 2014-2016 Child Health Surveys

<sup>iv</sup>Ibid

<sup>v</sup>Ibid

<sup>vi</sup>Colorado Department of Public Health and Environment, 2015 Healthy Kids Colorado Survey

<sup>vii</sup>[colorado.gov/pacific/sites/default/files/DC\\_CD\\_fact-sheet\\_Childhood-Obesity.pdf](http://colorado.gov/pacific/sites/default/files/DC_CD_fact-sheet_Childhood-Obesity.pdf)

<sup>viii</sup>Colorado Department of Public Health and Environment, 2014-2016 Child Health Surveys

<sup>ix</sup>Ibid



