



2019 Community Health Needs Assessment Summary and 2019–2022 Implementation Plan

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Cover: Brooklyn and her mother, Shakia, participate in Healthy Minds, Healthy Kids

Background

Children's Hospital of Philadelphia (CHOP) is the first pediatric hospital in the United States, founded in 1855, and has proudly been an active part of the Philadelphia community for more than 160 years. The organization and its employees aim to make sick children well, help well children maintain good health, and secure a healthy future for families in their own communities.

CHOP is the only freestanding, independent (i.e., not affiliated with a health system) pediatric hospital in the Commonwealth of Pennsylvania, thus affording it an unparalleled singular focus on pediatric services. It is one of only three pediatric hospitals in its primary service area. CHOP's Care Network extends throughout the region, with Primary Care practices, Specialty Care and Ambulatory Surgery centers, Urgent Care centers, Newborn & Pediatric Inpatient Care sites in community hospitals, and Home Care services available at more than 50 locations in Pennsylvania, New Jersey, and New York. In addition to having 546 licensed beds and approximately 29,000 annual inpatient admissions, CHOP receives approximately 1.3 million outpatient visits each year. CHOP is home to one of the nation's most prominent pediatric graduate medical education programs, and the CHOP Research Institute is one of the world's leading pediatric research enterprises.

CHOP Service Area and the Community Health Needs Assessment

CHOP defines its targeted service area for community benefit as all ZIP codes in the Greater Philadelphia four-county region. While the Greater Philadelphia region is CHOP's primary target area, as a globally recognized children's hospital, CHOP serves patients from 72 countries as well as 50 states and the District of Columbia. CHOP also provides primary patient care beyond the four-county Greater Philadelphia region within 14 counties of Southeastern Pennsylvania, including a large share of Delaware County, Pa., as well as Northern Delaware and Southern New Jersey.

CHOP engaged in a Regional Community Health Needs Assessment (RCHNA) that identified health needs throughout Southeastern Pennsylvania. This effort, spearheaded by the Healthcare Improvement Foundation and the Philadelphia Department of Public Health, also included the following hospitals, health systems, public health departments and other organizations as partners:

- Abington Jefferson Health
- Chester County Hospital – Penn Medicine
- Einstein Medical Center Montgomery
- Einstein Medical Center Philadelphia
- Grand View Health
- Holy Redeemer Health System
- Jefferson Northeast
- Penn Medicine
- Thomas Jefferson University Hospitals
- Chester County Health Department
- Montgomery County Office of Public Health
- Philadelphia Association of Community Development Corporations

The RCHNA incorporates primary data from 19 geographically-based focus groups in Philadelphia and surrounding counties and nine focus groups with key informants for populations of special interest, as well as quantitative data from a variety of sources. Lastly, the report includes input from other key stakeholders, such as the directors of Federally Qualified Health Centers and recent outside studies.

All quantitative and qualitative inputs were organized into 16 community health priorities that were categorized across three domains: 1) Health Issues, including physical and behavioral health issues significantly impacting the overall health and well-being of the region; 2) Access and Quality of Healthcare and Health Resources, such as availability, accessibility, and quality of healthcare and other resources to address issues that impact health in communities across the region; and 3) Community Factors like social and economic drivers of health, as well as environmental and structural factors that influence opportunity and daily life.

Identified Needs

The top 10 needs identified in the RCHNA serve as the focus of CHOP's implementation plan:

1. **Substance/opioid use and abuse**
2. **Behavioral health diagnosis and treatment**
(*e.g., depression, anxiety, trauma-related conditions, etc.*)
3. **Access to affordable primary and preventive care**
4. **Healthcare and health resources navigation**
5. **Access to affordable specialty care**
6. **Chronic disease prevention**
(*e.g., obesity, hypertension, diabetes and cardiovascular disease*)
7. **Food access and affordability**
8. **Affordable and healthy housing**
9. **Sexual and reproductive health**
10. **Linguistically and culturally appropriate healthcare**

(Details on these are on pages 7 through 19.)

Due to CHOP's long history of working with the community and ability to provide health services and conduct community-based participatory research, many of the health needs uncovered by the RCHNA were not unexpected and are actively being addressed by a number of CHOP's existing programs and initiatives. CHOP consistently invests in programs that benefit its surrounding community and strongly believes that our hospital's mission can reach outside our walls to help children living in and around our service area and beyond. This implementation plan outlines how CHOP is working on cross-collaborative partnerships in the community, highlighting continued strategies from previous implementation plans and new initiatives to respond to the needs identified in its community. The three initiatives highlighted below address many of the needs identified by the RCHNA.

Healthier Together

In response to needs identified in the most recent RCHNA and prior CHNAs, CHOP is launching a new initiative called *Healthier Together* to tackle the social determinants of health as a path to improving the health of children. *Healthier Together* focuses on some of the most pressing needs in our community – housing, hunger, trauma and poverty – all of which contribute to the social determinants of health. By resourcing programs proven to work through rigorous research, CHOP is committed to building public-private partnerships that aspire to give every child a fair chance at a healthy future. *Healthier Together* will partner with community groups, nonprofits and government agencies to learn from each other and multiply our collective impact.

Healthier Together's approach and investments are guided by five principles:

1. Focused geography.

Three zip codes in West and Southwest Philadelphia (19104, 19139, 19143).

2. Improved health.

Evidence-based programs with a proven record of reducing health disparities and improving child health by addressing social determinants.

3. Community informed.

Partner with residents and community organizations, including participation in oversight/governance meetings and outreach for program development.

4. Collaborative.

Join forces with equally committed partners, use data and metrics to improve programs and measure success, and identify sustainable, external funding opportunities.

5. Grow the local economy.

Purchase goods and services from local companies that value a diverse workforce and provide meaningful work opportunities to underrepresented members of our community.

HOUSING

One in four children in Philadelphia has asthma. Helping families manage their child's asthma has been the aim of CHOP's Community Asthma Prevention Program (CAPP) for more than 20 years. CAPP community health workers visit the homes of children with difficult-to-manage asthma and train caregivers on proper medicine use and strategies that reduce asthma triggers in the home. These interventions have reduced asthma-related emergency room visits by 58%. Under *Healthier Together*, CHOP began a partnership with the Philadelphia Housing Development Corporation (PHDC), a nonprofit agency that provides home repairs for low-income Philadelphia homeowners, with the aim of renovating homes and removing sources of asthma triggers such as mold, mildew and pests. The new initiative, CAPP+, has a goal of renovating up to 100 homes in Phase 1.

HUNGER

Nearly one in five Philadelphians do not have enough healthy food to eat in order to live a healthy lifestyle over the course of a year. Of the families that come to the CHOP Emergency Department, nearly one-third reported they are food insecure. We are building a multi-pronged strategy to address food insecurity among Philadelphia's children by partnering with other nonprofit organizations and government agencies that share the commitment to making nutritious food accessible to all.

TRAUMA

Concentrated poverty, high violence and crime rates, and other traumatic, stressful events can contribute negatively to mental health and well-being. In 2018 alone, Philadelphia had 1,402 shooting victims, of which 111 were children aged 17 or younger. Many more children are injured – physically and emotionally – by other forms of violence, including bullying. Failing to recognize and prevent violence and trauma that impact children and youth has ramifications for years to come. Our goal is to leverage our strengths – our Department of Child and Adolescent Psychiatry and Behavioral Services and our Center for the Study and Prevention of Violence (CSPV) (formerly the Violence Prevention Initiative) – to implement a comprehensive approach to violence and mental illness prevention in an urban setting that improves the emotional well-being of children and families within the area.

POVERTY

When families earn a living wage, there is enough money for safe housing, nutritious food, weather-appropriate clothing and other small items that help kids stay healthy and address minor illnesses before they develop into major problems. *Healthier Together* will pursue initiatives that grow Philadelphia businesses (especially minority- and women-owned businesses) through local purchasing at CHOP and other leading hospitals and universities. There will also be a focus on increasing household income via local hiring and maximizing access to public benefits. Ultimately, we want the economic impact of *Healthier Together* to be both broad and local.

CHOP Cares Community Grant Program

The hospital's senior leadership encourages employees to partner with community organizations to improve the lives of children where they live. In fact, many of our signature community programs, like the Refugee Health Program, began with an employee's or pediatric resident's vision for meeting the needs of underserved children. In 2013, CHOP created a Community Advisory Board comprised of CHOP employees and local civic leaders to advise the Hospital on the distribution of competitive grants awarded through the CHOP Cares Community Grant Program. The program awards grants to CHOP employees to do work in their own communities. This results in extending CHOP's reach even further into more communities to meet needs identified in the RCHNA. Over the course of five years, CHOP has awarded 155 grants and close to \$500,000. Beginning in 2020, CHOP will expand this program by offering past grant recipients more substantial funding to continue successful programs and have a deeper impact in the community.

Collaborative Opportunities to Advance Community Health

CHOP is a member of the Collaborative Opportunities to Advance Community Health (COACH) initiative, an initiative sponsored by the Hospital and Healthsystem Association of Pennsylvania that brings together hospital, public health and community partners to address community health issues in Southeastern Pennsylvania. Through the COACH initiative, participating hospitals are developing strategies for collective actions that are informed by best practices, while leveraging existing resources and expertise, to make a significant impact on community health. The collaborative will be focusing on priorities such as healthy food access, food insecurity, and access to behavioral and mental health care. In addition, CHOP will leverage its partnerships with Penn Medicine and the City of Philadelphia's Community Empowerment and Opportunity, Place Based Initiatives Office to ensure that community initiatives are aligned, thus guaranteeing the greatest community health impact.

Additional Priority Areas

Across CHOP, clinicians, divisions and community programs are working to address the most emerging needs identified in our community. Since most of the community needs continue to persist from the initial Community Health Needs Assessment findings in 2013, many of the programs and initiatives highlighted in subsequent reports continue to expand and further enhance their efforts. New programs and initiatives are addressing emerging needs in the community. These initiatives are highlighted by each core area of focus:

Priority 1: Substance/opioid use and abuse

In CHOP's service area, drug overdose deaths have tripled and are the leading cause of death among young adults (ages 18 to 34) in the region. Instances of infectious illnesses like HIV and hepatitis C, neonatal abstinence syndrome, the number of children in foster care, and rates of homelessness have risen due to substance/opioid use and abuse.

OBJECTIVE: Increase community and clinical awareness and education of safe usage and management of pain medication.

ANTICIPATED IMPACT: Safe usage and disposal of pain medication will be a more standard practice.

STRATEGIES:

- 1. Development of a Comprehensive Opioid Response and Education Program (CORE)** – CORE will provide a centralized, enterprise-wide forum for opioid response initiatives.
- 2. Creation of an Opioid Stewardship Program (OSP)** – OSP will translate opioid research into action including opioid policy, advocacy and education through its three pillars:
 - Pain Assessment and Management (PAMS) Task Force, which focuses on best practices for opioid prescribing
 - Substance abuse and use disorder taskforce
 - Community education taskforce, which will destigmatize and promote safe medication storage and disposal within households.
- 3. Expanded installation of take back bins** – We will be placing take-back bins at CHOP ambulatory locations for safe medication disposal.

Priority 2: Behavioral health diagnosis and treatment

(e.g., depression, anxiety, trauma-related conditions, etc.)

In CHOP's service area, there is a gap in behavioral health treatment, particularly for youth, as undiagnosed and untreated conditions like depression, anxiety and trauma-related conditions result in high utilization of emergency departments for mood and depressive disorders. There is a significant lack of community-based, integrated and/or mobile behavioral health services.

OBJECTIVE: Increase access and treatment to mental and behavioral health services for children and adolescents and curb the impact of trauma.

ANTICIPATED IMPACT: An increase in the number of children receiving treatment for trauma-related, behavioral and mental health needs and a sufficient capacity to treat them.

STRATEGIES:

- 1. Continue and expand co-location of mental health services provided at CHOP's Primary Care locations** – Focus on promoting programs such as Healthy Minds, Healthy Kids, which continues to integrate behavioral health providers within primary care teams in the CHOP Care Network. This initiative to provide co-located services has helped patients and families see a behavioral health specialist more quickly, while also creating greater access to behavioral health providers and subsequently reducing wait times. Integrating behavioral health into families' traditional primary care also serves to reduce the stigma sometimes attached to seeking mental health services.
- 2. Continue and expand services provided at the Philadelphia Children Response Center** – In partnership with CHOP, the Philadelphia Children Response Center (PCRC) continues to see patients transferred from CHOP's Emergency Department. PCRC accepts all children under 17, while also accepting any type of insurance. PCRC conducts a thorough assessment of each patient's needs to determine the most effective level of care. Services include: therapeutic stabilization, admission into its onsite Crisis Stabilization Unit, referral to appropriate level of care and crisis/aftercare planning.
- 3. Continue and expand services provided in current CHOP programs** – CHOP programs that provide behavioral health diagnosis and treatment include The Safe Place Treatment and Support Program, the Children's Intensive Emotional and Behavioral Services program (partial day-hospital services located in Atlantic County, N.J., expanded to now include an extended-day program), and the Sexual Assault Response Team in the CHOP Emergency Department.
- 4. Expand the reach of the Center for the Study & Prevention of Violence (CSPV), formerly the Violence Prevention Initiative (VPI)** – Created in response to CHOP's 2013 needs assessment and acts of youth violence in Philadelphia and across the nation, CSPV is a hospital- and community-based effort to reduce exposure to and impact of violence among children and families. CSPV staff conduct high-impact research and design innovative, evidence-based programs that are implemented across clinical, school and neighborhood settings. CSPV programs are guided by trauma-informed practices, principles of social justice and equity, and community-based participatory research. Signature programs include:

A. Universal Prevention: For All Children and Families:

- *Friend to Friend and PRAISE* – small-group and classroom programs run with third to fifth grade students in Philadelphia schools with goals to reduce aggression and bullying, improve problem-solving, and to promote a safe and positive learning environment. These programs will be expanded to approximately 10 to 15 Philadelphia schools per year over the next three years, with a goal for broader regional and national dissemination. CSPV will also explore opportunities to expand its peer relations programming into CHOP departments (e.g., Department of Psychiatry, CHOP Care Network).
- *Trauma Trainings for Providers and Staff* – CSPV's training core provides trauma-informed care training that teaches providers the importance of recognizing the role that prior stress plays in a person's current health and behavior, and how to respond accordingly. It also provides One Kind Word training that teaches providers strategies for positively intervening in challenging parent-child interactions. A goal of CSPV is to make CHOP the first trauma-informed pediatric health system.

B. Selective Prevention: For Children and Families at Higher Risk for Violence:

- *STOP Intimate Partner Violence (STOP IPV)* – provider-initiated screening in CHOP's Emergency Department and Karabots Primary Care practice in West Philadelphia to identify CHOP patients and families experiencing IPV and provide onsite support and safety planning by CHOP-based medical advocates from Lutheran Settlement House. CSPV will explore opportunities to expand STOP IPV across other areas at CHOP (e.g., Department of Psychiatry, CHOP Care Network) and to serve as model for other hospitals.

- *Screening for bullying* – provider-initiated bullying screening, referrals and resources that will continue to be provided in CHOP’s primary care centers and expand to other CHOP departments.
- *Screening for suicide and behavioral health issues* – an average of 5,000 teenage patients complete the web-based Behavioral Health Screen in the CHOP Emergency Department each year. Selective follow-up care is provided for the 23% who have moderate to severe depression and 9% who have suicidal ideation. This screening stimulates multidimensional system change that facilitates partnerships between medical providers and local mental health providers.
- *Firearm Safety* – a pilot program in the CHOP Emergency Department, which enables families that express a need for a firearm safety device to receive a free gun lock as well as parent gun safety education.

5. Indicated Prevention: For Children and Families Already Experiencing Violence:

- *Violence Intervention Program (VIP)* – identifies assault-injured youth in the CHOP Emergency Department and Trauma Unit and provides post-discharge community-focused case management that addresses mental health and other service needs (e.g., medical, education, legal, housing) to promote safety and recovery, and prevent future violent events. Furthermore, VIP provides group therapy support for youth to build resilience after a traumatic event (BRAVE). VIP also provides organizational and peer support for frontline staff to prevent secondary traumatic stress (Stress-Less Initiative). CSPV will explore opportunities to expand referral sources and services within CHOP (e.g., Department of Psychiatry, CHOP Care Network). As an emerging national model, a goal is to disseminate VIP, BRAVE and Stress-Less Initiative across other health systems and community organizations.
- *In addition, CSPV will also look to expand efforts in other areas of youth violence prevention – suicide, cyberbullying and gun violence.*

6. Continue offering counseling and support services to families cared for in CHOP’s Center for Fetal Diagnosis and Treatment (CFDT) and Garbose Family Special Delivery Unit – Ongoing initiatives include the utilization of a universal screening protocol for all expectant parents two to three weeks post-fetal diagnosis as well as immediately after families have visited their babies in the NICU and the Cardiac ICU. Parents are identified for heightened risk for emotional distress and receive psychological interventions to decrease anxiety, depressive and traumatic stress. They also have access to weekly mindfulness stress-reduction parent support groups to help them cope with the stresses of a high-risk pregnancy and a neonatal hospitalization. CHOP distributes educational materials on perinatal mood and anxiety disorders to help providers and parents understand the risks and options for treatment.

7. Continue operationalizing the Telephonic Psychiatric Consultation Service Program (TiPS) – TiPS is now active at CHOP. As a Pennsylvania HealthChoices program, it increases the availability of child psychiatry consultation teams, regionally and by phone, to primary care providers (PCPs) and other prescribers of psychotropic medications. The program is available for children insured by Pennsylvania’s Medical Assistance (Medicaid) Program. TiPS provides real-time, peer-to-peer resources to the PCPs who need immediate consultative advice for children (up to age 21) with behavioral health concerns. There is one TiPS team in each of the five HealthChoices zones in Pennsylvania. CHOP provides consultation to providers in the Southeast Zone.

Priority 3:

Access to affordable primary and preventive care

Children's access to affordable primary and preventive care in CHOP's service area is limited by a combination of factors, such as long wait times to see primary care providers, declines in Medicaid acceptance among health providers, a lack of providers, affordability, and language/cultural accessibility for immigrant and non-English speaking communities.

OBJECTIVE: Increase capacity and accessibility to primary care

ANTICIPATED IMPACT: A decrease in barriers will allow more patients to easily access quality primary care.

STRATEGIES:

- 1. Expanded hours** – CHOP's Primary Care Network sites continue to implement strategies to increase access to primary care, including extended hours during the day and on weekends.
- 2. Establishment of a will-call list** – Since no-show rates are high in the urban primary care practices and the demand for primary care is higher than the available appointment slots, the will-call list was established. CHOP will continue to rely on the will-call list to meet the demand for primary care appointments. When patients are a no-show for their appointment, someone else can fill their empty appointment slot.
- 3. Increase access to health education through existing and expanded community programming** – PCore community programs, such as the Injury Prevention Program at CHOP, Center for Injury Research and Prevention, Vaccine Education Center, Homeless Health Initiative, Youth Heart Watch, I know U should 2, and Transition to Adulthood Program, will continue to provide education and training in the community.
- 4. Increase patient access to information** – Patient families can continue to access portions of their child's medical records, schedule appointments and receive referrals through an online portal called MyCHOP, which will continue to increase families' access to their child's medical information.
- 5. Increase access to support groups and health education to augment preventive/primary care** – CHOP will increase the number of parent support groups for families on topics such as general health, healthy weight and diabetes management. An example of a CHOP support group is the breastfeeding support group for moms at the Karabots Pediatric Care Center. CHOP primary care practices will also continue to provide information on wellness activities and events for families in the community.
- 6. Increase access to providers** – More providers will continue to be added to CHOP's primary care centers. CHOP Urgent Care Centers will also continue to offer after-hours care on evenings and weekends in King of Prussia, Brandywine Valley, Bryn Mawr and Bucks County.
- 7. Continue the After-Hours Program (AHP)** – CHOP's 24-hour telephone hotline continues to be available for patient families. AHP is a telephone triage service staffed by specially trained pediatric nurses available when a patient's primary location is closed.

- 8. Continue offering assistance through the CHOP Poison Control Center** – The CHOP Poison Control Center will continue to offer a 24-hour, toll-free, multilingual emergency hotline to assist patients and their caretakers with all of their poison-related concerns and questions. Additionally, the Poison Control Center will continue to provide education on poison prevention, provide expert advice to public health agencies, advocacy groups, government officials and news media on poison-related issues, provide healthcare professionals with patient-specific poison information, and participate in surveillance and research regarding the latest poison-related trends.

Priority 4:

Healthcare and health resource navigation

Navigating healthcare services and other health resources, like enrollment in public benefits and programs, remains a challenge due to general lack of awareness, fragmented systems and resource restraints.

Financial costs and logistics associated with transportation can be a barrier to accessing healthcare and health resources for vulnerable populations, including individuals/families with low income, the uninsured and children with disabilities.

OBJECTIVE: Raise awareness of the available healthcare navigation resources and services at CHOP and in the greater community

ANTICIPATED IMPACT: Patients to receive proper quality care in a more timely and efficient way

STRATEGIES:

- 1. Add more support for those referring patients to CHOP clinical services** – The Department of Physician Referral Services, staffed by physician liaisons and support personnel, links pediatricians, family practitioners, pediatric and adult specialists, and other healthcare providers to CHOP’s many programs and services available for referred patients. Physician liaisons continue to offer resources to make it easier to access care including:
 - *1-800-TRY-CHOP* – clinical priority line to discuss patient care with a CHOP clinician or for help navigating CHOP
 - *Link2CHOP* – an electronic, Internet-based portal for referring physician offices that provides real-time, “read-only” access to the CHOP Electronic Medical Record (Epic)
 - *Patient Referral Toolkit* – offers clinical resources and concierge services for providers and staff
 - *Pediatric Partners Newsletter* – monthly e-newsletter for clinicians with latest news from CHOP clinical departments and leadership, upcoming professional education opportunities, new staff and community initiatives
 - *“Partnership Made Easy” cards* – handed out nationally at conferences, locally to pediatric offices, and at programs with outreach opportunities to educate on access to primary care through the CHOP Care Network
- 2. Increase Quality of Patient and Family Experience** – An increased focus on both qualitative and quantitative data collection from patients, families and staff feedback is woven into all aspects of operations across CHOP to eliminate barriers to care and increase the quality of the patient and family experience. A multidisciplinary steering committee is working on the following initiatives:
 - *Physical updates* – The Center for Families has been added to the first floor of the Main Building and additional welcome space has been added in the Buerger Center for Advanced Pediatric Care. Enhancements to CHOP’s wayfinding and signage are in progress to make accessing CHOP easier for families
 - *Data-driven improvements* – CHOP is using the Press Ganey patient and family experience

survey data to help clinicians and staff improve the patient and family experience

- *Real-Time Check-ins* – CHOP staff is increasing contact with families in all inpatient units to evaluate and improve communication during the course of care

- 3. Continue to utilize the electronic health record to improve continuity of care** – EPIC, the hospital's electronic medical record system, allows the sharing of clinician notes from provider to provider and now includes resource information to help with referrals and community resources. EPIC's Population Health module, Healthy Planet, improves proactive outreach to patients with chronic conditions and helps avoid gaps in care. Some initiatives include:
 - A variety of real-time care gap identification tools are available across CHOP's primary care practices to track and contact patients who need to come in for well visits, routine immunizations, lead testing, etc. EPIC-based patient registries have also been built to facilitate outreach and track the receipt of recommended care for patients with chronic disease.
 - In order to better manage their patient populations and conduct proactive outreach, CHOP personnel will be working with clinical teams across the hospital in multidisciplinary workflows involving physicians, nurses, social workers, registrars, nutritionists and other team members.
 - A process is being implemented (through Healthy Planet) to help inpatient social workers prioritize their highest need patients, reach patients in a timely manner and, ultimately, improve the patient experience and discharge process. There are now more than 800 CHOP staff members who have used these tools for patient care and outreach. This work will continue in future years to meet the needs of other patient populations with chronic disease at CHOP.
- 4. Provide care coordination services to foster care children** – The Fostering Health Program continues to provide care coordination for foster care children. The program provides comprehensive health assessments for children in Philadelphia foster care and then creates a plan to inform the child's care moving forward. The Fostering Health Program also continues to work closely with the Philadelphia Department of Human Services (DHS), Community Umbrella Agencies (CUA) and families.
- 5. Continue to promote the Family Health Coverage Program (FHCP)** – CHOP's FHCP assists patient families in signing up for coverage under CHOP's financial assistance program and/or for appropriate state health insurance programs. Signage at patient access points throughout the CHOP campus, satellite offices, and on hospital and physician billing statements will continue to be promoted. In addition, information can be obtained on CHOP's website and financial assistance packets are available at all CHOP Care Network sites (primary care, outpatient subspecialty centers and specialty care clinics). Financial counselors are available to families either at the time of scheduling an appointment for services, during treatment or after services are provided. FHCP has a designated email account and two hotline numbers that are utilized for patient referrals. An active partnership exists between and among the hospital's social work department, case managers, emergency room clerks, financial counselors and FHCP. Informational flyers will also continue to be distributed as a standard resource at health fairs and during community presentations, and will be proactively sent to community organizations.
- 6. Centralize care coordination programs for children with complex, chronic illnesses** – The formation of an enterprise-wide care management team – that works to coordinate care between primary care physicians and specialists for patients with complex, chronic conditions – is

developing ways to keep kids out of the hospital and healthy in a more efficient and less costly manner. This includes Community Health Worker Programs for conditions such as diabetes, lupus and sickle cell.

- 7. Establish a resource mapping and social risk screening tool** – An interdisciplinary team at CHOP is partnering to create a free community resource map database of community services that both providers and patients can use to easily identify and access the appropriate care and resources needed for their particular situation. Over the next three years, the team plans to offer the use of the community resource map both as part of usual care and as part of a pilot that will test its effectiveness when integrated with the use of a social risk screener and the electronic health record. The project team is also participating on the City of Philadelphia’s Task Force for Clinical Community Linkages to discuss collaborative efforts around resource mapping with other health systems and community organizations, ensuring efficient coordination and navigation regardless of an individual’s social or healthcare needs.

Priority 5: Access to affordable specialty care

Inadequate care coordination, high specialty care costs and low appointment availability (which can result in long wait times) are all barriers to seeking specialty care services. Ultimately, if left unaddressed, these barriers can lead to avoidable emergency department utilization for acute needs, which should have been addressed through accessible and affordable specialty care.

OBJECTIVE: Increase access to specialty care and proper care coordination.

ANTICIPATED IMPACT: An increase in the number of patients utilizing specialty care and a decrease in emergency department visits.

STRATEGIES:

- 1. Continue work in various specialty programs to provide access to healthcare and health information for families** – This includes the Leadership Education in Neurodevelopmental and Related Disabilities (LEND) Program, Minds Matter: Concussion Care for Kids Program, Center for Autism Research and the Center for Pediatric Inflammatory Bowel Disease (IBD) Frontier Program.
- 2. Continue to expand telehealth in specialty care** – CHOP is working to ensure that school nurses will be able to use medical instruments and refer in real time to a CHOP employee for specialty care diagnosis and second opinions, such as sending images through the MyCHOP app at designated pilot schools.
- 3. Provide assistance with transitioning to adult care providers** – A specialized team at CHOP will continue to provide patients seeing multiple specialists with centralized assistance during their transition to adult care providers. The service develops care plans and assesses patients’ psychosocial, self-care and health insurance needs.
- 4. Consolidate the location of specialty care providers for patient convenience at CHOP’s Main Campus in University City** – The Buerger Center for Advanced Pediatric Care now houses all CHOP specialties within one facility (except for dental), with ophthalmology being the most recent addition. The facility was designed in a system of clinical neighborhoods, where certain related

specialties are grouped together on one floor. This means many patients do not have to travel to a different building or floor to receive different services, making specialty care more conveniently accessible to patient families at CHOP's Main Campus.

5. **Continue to expand services at CHOP Care Network locations** – Specialty care services, including day surgery and after-hours urgent care, continue to expand throughout CHOP's primary service area. CHOP currently operates more than 50 pediatrician offices, surgery centers, specialty care centers and urgent care centers, enabling us to provide care for more than 1.38 million patient visits each year and growing.
6. **Continue to provide access to dental and vision care and providers** – These services continue to be provided through a number of methods, including:
 - Volunteer dentists, alongside doctors, nurses and social workers, provide high-quality medical and dental care to families living in local emergency housing shelters through the Homeless Health Initiative.
 - CHOP continues to partner with KidsSmiles to provide dental services to primary care locations and with the University of Pennsylvania School of Dental Medicine.
 - CHOP's Division of Ophthalmology continues to partner with the Eagles Charitable Foundation and the Eagles Eye Mobile to visit schools in Philadelphia and provide eye exams and glasses to under-insured and uninsured children. CHOP also receives referrals for students with more serious eye conditions from the Eagles Eye Mobile.

Priority 6: Chronic disease prevention

(such as obesity, hypertension, diabetes and cardiovascular disease)

Overall rates of cardiovascular disease (CVD)-related chronic diseases have continued to rise among children in Philadelphia. Premature CVD deaths are two to three times higher in Philadelphia, as compared to the national average, in those under 21 due to related causes of higher rates of smoking, obesity and hypertension. A higher poverty rate is a large driver. Smoking rates in Philadelphia are far higher than the national average, and the number of children diagnosed with asthma within CHOP's service area has risen dramatically.

OBJECTIVE: Increase access to prevention education and programming for the entire family

ANTICIPATED IMPACT: A decrease in children and families affected by chronic disease

STRATEGIES:

1. **Continue to expand the Healthy Weight Program (HWP)** – CHOP provides this program at various locations throughout the service region. HWP advances the prevention and treatment of childhood obesity through the integration of clinical care, research, education and community advocacy.
2. **Continue offering the Tobacco Dependence Program** – This innovative program helps parents and caregivers stop smoking by providing free education, counseling, support and nicotine replacement therapy.
3. **Expand access to healthy activities for children and families living in shelter** – CHOP's Homeless Health Initiative will continue to provide programming that offers nutrition and

fitness resources for children and mothers through Operation CHOICES, Safe Physical Activity and Recreation for Kids (SPARK), and Women’s Wellness at local shelters including Families Forward Philadelphia, People’s Emergency Center and Episcopal Community Services/St. Barnabas Mission.

- 4. Continue Healthy Kids Running Series in West Philadelphia** – The series is open to children from the Healthy Weight Program as well as children in the area and is widely advertised throughout the CHOP Care Network.
- 5. Continue to offer and expand the Integrative Health Program** – Integrative healthcare focuses not just on disease prevention and treatment, but on the whole child, as well. Physicians and researchers have found that providing complementary care that considers a child’s family, environment, mind, body and soul can reduce stress, speed healing and in some cases resolve symptoms that weren’t being addressed through more conventional therapies. At CHOP, the Integrative Health Program is focused on offering integrative therapies that are evidence-based, including mindfulness, yoga, acupuncture and pediatric massage.

Priority 7: Food access and affordability

Lack of access to affordable healthy foods is a driver of poor health in many communities. Neighborhoods that have poor food environments often lack grocery stores or other sources of fresh food and produce and are saturated with fast food outlets, convenience and corner stores, and other sources of unhealthy, often less expensive, food options. Families relying on food assistance deserve access to a healthy food environment. In communities where food insecurity is highest, the food environment is the poorest. This fact is particularly true in parts of North, West and Southwest Philadelphia County.

OBJECTIVE: Increase access to healthy food and connect families to community resources and benefit programs

ANTICIPATED IMPACT: A decrease in children categorized as overweight or obese, being diagnosed for chronic diseases, such as diabetes, and those affected by food insecurity

STRATEGIES:

- 1. Increase outreach via the CHOP Healthy Weight Program (HWP)** – HWP will continue to support and lead opportunities for increased access to healthy, affordable food and wellness education to patients and children in the surrounding area.
 - *Food Pharmacy* – HWP will continue to offer the Food Pharmacy program where patients identified as food insecure will receive a three-day supply of healthy foods and recipes (up to four times per year). Families will also be connected with various food access resources within their community and receive follow-up calls from the Healthy Weight Social Worker.
 - *HWP will continue partnering with the Vetri Foundation to provide two 10-week cooking series per year to Healthy Weight patients.* These cooking labs will provide hands on teaching to children on how to prepare healthy, delicious recipes. The STEM curriculum-based educational approach will focus on cooking, nutrition and food education.
- 2. Continue to operate a community garden** – CHOP’s 1,200 square foot Community Garden at the Karabots Center will continue to provide new opportunities to connect CHOP patients and the West Philadelphia community to locally-grown, nutritious food.

- 3. Implement and expand food insecurity (FI) screening and resource referrals** – CHOP will continue to connect patients and families to the Complete Eats program, which is CHOP’s partnership with the U.S. Department of Agriculture and Philadelphia’s Nutritional Development Service. The program offers free lunches to children at several CHOP locations as part of a Summer Meals Program. Additionally, the Healthy Weight Program’s Food Pharmacy will continue to offer universal screening for food insecurity at every visit with referrals to the Food Pharmacy if families screen positive, food distribution to food insecure families, referrals to Healthy Weight social workers when needed, and education to promote healthy eating on a limited budget.

Priority 8: Affordable and healthy housing

Affordable housing is a major challenge in the region. Rates of excessive housing costs (greater than 30% of income) are as high as 50% in some communities across the region. Additionally, rapid gentrification of some historically low-income neighborhoods creates risk of displacement and housing insecurity. The issue of healthy housing is just as pressing as housing affordability. Poor housing conditions like old lead paint, asbestos, poor home hygiene, infestations, lack of running water or HVAC, and damaged infrastructure disproportionately impact low income populations leading to: poor childhood health (e.g., lead poisoning, asthma hospitalizations, injuries); mental distress and trauma; and, forgoing health care, food and other necessities due to financial strain.

OBJECTIVE: Improve housing conditions and decrease displacement of children and their families

ANTICIPATED IMPACT: Healthier living conditions for children and families

STRATEGIES:

- 1. Educate the local community about asthma triggers and identify housing conditions that lead to a higher risk of asthma-related medical interventions** – CHOP will continue its work with the Community Asthma Prevention Program (CAPP) to decrease the number of children living with, or at risk of developing, asthma through CAPP community classes and CAPP home and school interventions.
- 2. Continue to identify and repair homes in need through CAPP+** – In partnership with the City of Philadelphia and the Philadelphia Housing Development Corp., the Healthier Together initiative has expanded CAPP to Community Asthma Prevention Program Plus (CAPP+). CAPP+ will send specially trained community health workers to the homes of children with tough-to-control asthma. The community health workers will inspect the home, suggesting home repairs that would reduce asthma triggers – irritants that can cause an asthma attack – and qualifying the family to receive such repairs, thus making their home healthier. Such measures will also reduce the risk of displacement of families from their current homes and increase overall economic stability.
- 3. Improve the health outcomes of children living in local emergency housing shelters** – CHOP will continue to work with the Homeless Health Initiative (HHI) to provide free health services to children living in local emergency housing shelters. Services provided will continue to include: high-quality, acute medical and dental care; connecting families with health insurance as well as primary and specialty care providers; and health education on topics such as nutrition and fitness. HHI will continue to serve children living in the following shelters: Episcopal Community Services/St. Barnabas Mission, Families Forward Philadelphia, HomeFront in Mercer County, N.J., The People’s Emergency Center, Red Cross House, Salvation Army/Red Shield Family Residence, and Women Against Abuse.

- 4. Expanding the Medical Legal Partnership** – The Medical Legal Partnership located on-site at CHOP’s Karabots Primary Care Center will continue to expand its work to specifically address the housing needs of CHOP families as well as other legal matters that impact children’s health.

Priority 9: Sexual and reproductive health

Nationally, teen births have declined substantially over the last decade, but are two times higher in Philadelphia and four times higher among Latina women. Sexually transmitted infection (STIs) rates are rising among young minority men who have sex with men, people who inject drugs, high-risk heterosexuals and younger females. Philadelphia’s overall rate of infection is six times higher than suburban counties. Some public schools lack comprehensive sexual education.

OBJECTIVE: Create a comfortable and safe environment for adolescents to receive sexual health education and care

ANTICIPATED IMPACT: A reduction in teen pregnancies and rates of STIs and HIV transmissions

STRATEGIES:

- 1. Adolescent Mobile Health Unit** – This new initiative will create an adolescent designed and focused Mobile Health Unit (MHU) that will provide an extension of clinical and adolescent sexual health services in the Philadelphia area, bringing mobile healthcare into youth communities that need it most. Services will include:
 - offering point-of-care services and referrals to Title X federally funded CHOP clinics for ongoing sexual health services, such as STI/HIV testing and reproductive health
 - providing health education sessions, clinical navigation services, such as insurance support, referrals for behavioral and mental health support, referrals for homeless youth, and referrals to social/community support groups and programs
 - creating entry points to build long-term relationships for healthcare
- 2. Expand the Adolescent Health Clinic** – Focusing on HIV prevention and care in adolescents and young adults, CHOP’s Adolescent Health Clinic provides comprehensive, interdisciplinary primary and HIV specialty care for affected teenagers. Youth who are HIV positive are guaranteed access to state-of-the-art, adolescent-focused HIV specialty care. HIV negative patients are offered adolescent-focused sexual care at CHOP Adolescent Care Center.
- 3. Continue providing adolescent family planning, basic reproductive information and care to youth patients** – These services will continue to be provided at CHOP Care Network practices in Philadelphia (Karabots and Cobbs Creek), through Health Resource Centers at Philadelphia Juvenile Justice Center, West Philadelphia and South Philadelphia high schools, and at CHOP Connections, a primary care center co-located at Covenant House Pennsylvania.
- 4. Expand web-based tools and education** – “Parents Are Talking” is a website that provides resources parents can use to guide conversations with their teens about sexual health. Considering the breadth of parents’ personal beliefs on sexual health and sexuality, the purpose of the program is not to tell them exactly what to say to their children, but rather to ensure they have accurate information and techniques for doing so. The information is designed to fit the needs of a diverse age spectrum, ranging from preteen to college-aged adolescents.

Priority 10:

Linguistically-and culturally-appropriate healthcare

About 12% of the population across the targeted four counties studied by the RCHNA were not born in the United States, and as much as 26% of some neighborhoods do not speak English very well. Beyond language access, which can limit a family's ability to navigate the healthcare system, cultural and religious norms influence individual beliefs about health.

OBJECTIVE: Increase cultural competency and bilingual acuity of CHOP's staff

ANTICIPATED IMPACT: An increase in access and coordination of care for patients who speak English as a second language

STRATEGIES:

- 1. Increase access to language services for inpatients and outpatients** – CHOP will continue to enhance and expand language services it provides in order to meet the linguistic and cultural needs of our diverse patient population. CHOP will continue to: provide staff interpreters as well as contracted interpreters for in-person sessions; provide telephonic interpreting access from any phone as well as video interpreting; translate vital documents; use the CHOP Speaks Your Language System for top nine languages to provide families access to interpreters when they call the hospital; and produce educational videos for patients and families dubbed/translated in Spanish and Arabic. Further, CHOP will continue to collaborate with community organizations to enhance language access and to support the Limited English Proficient community.
- 2. Increase access to language services for families with limited hearing abilities** – Enhancement and expansion of communication assistance and support for the deaf and hard of hearing patients and families within CHOP will continue to be a priority. CHOP will continue to provide patients and families with a fulltime staff American Sign Language (ASL) interpreter, collaborate with nonprofit vendors specialized in ASL, use Video Remote Interpreting provided by certified ASL interpreters in 17 locations, and provide various auxiliary aids. Special focus will be given to the following three goals:
 - Create an educational module to inform CHOP staff about best practices when working with deaf or hard of hearing patients and families
 - Offer in-person presentations on best practices when working with deaf and hard of hearing patients and families in three ambulatory sites with traditionally higher volume of deaf and hard of hearing patients and families
 - Offer educational presentation for spoken language staff and vendor interpreters on how to best work with ASL interpreters
- 3. Expand the CHOP Refugee Health Program** – Through the CHOP Refugee Health Program, CHOP will continue to see medically complex CHOP Charity Care patients. CHOP will also continue working with HIAS Pennsylvania, a resettlement agency, to expand access and quality of care for asylees and asylum-seeking children. CHOP providers will continue to work with the Philadelphia Refugee Health Collaborative to advocate for refugee and immigrant children. In addition, providers from the Refugee Health Program will be working on projects to improve access to healthcare and improved care coordination for families with limited English proficiency.
- 4. Provide more outreach to Spanish-speaking communities** – CHOP clinicians will continue to volunteer with Puentes de Salud's bi-monthly clinic to see children for both well and acute visits. CHOP's Refugee Health Clinic will also continue to provide high quality, compassionate healthcare for refugee children from diverse linguistic and cultural groups.

5. **Increase diversity in workforce, including more bilingual staff** – CHOP will continue to empower and support its diverse workforce by ensuring that culturally competent services are made available to patients and families by incorporating equity and inclusion into the hiring, review and advancement of employees. Additionally, CHOP’s Language Services Department will continue to highlight the skills of diverse staff and meet the needs of patients and families by offering a language assessment for bilingual staff. As a result, CHOP staff will be able to use their language skills and become qualified to speak directly to patients and families through the institution.
6. **Increase wayfinding signage in the languages of CHOP’s patients and families and provide information cards in many patient languages** – CHOP will continue to ensure the effectiveness of its signage and wayfinding system to include colors and other features that will be used throughout various locations in order to help patients, families and staff navigate CHOP buildings.
7. **Explore virtual remote interpreting (VRI) to provide on-demand, visual interpreter services in more settings, supplementing the existing in-person and telephonic interpreting services** – VRI will continue to be available in 17 locations (three ambulatory sites and three urgent care sites included) for the top 25 languages.
8. **Increase access to care for developmentally disabled children who speak English as a second language** – The Spanish version of the Survey of Well-being of Young Children Milestones screening tool will continue to be an online resource for Spanish-speaking families. The successful use of this effective tool will continue to improve care for developmentally disabled, Spanish-speaking children.

Note: The hospital reserves the right to amend this implementation plan at any time as circumstances warrant. Community health needs may evolve, requiring adjustments to the described strategic initiatives.

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