

community health needs assessment — 2019
action step updates



Year 2 Action Step Updates 2019 – Mental Health and Addiction

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

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

Action Plan Update

Priority Topic: Mental health and addiction			
Strategy 1: Execute plan to create a psychiatry unit in Dayton Children’s			
Action Step	Priority Outcome & Indicator	Priority Population	May 2019 Update
<p>Year 1: Review results of the feasibility study conducted during previous CHNA Implementation Plan cycle. Obtain approval and begin design of pediatric psychiatry unit at Dayton Children’s. Receive approval of design and begin construction of unit. Open pediatric psychiatry unit at Dayton Children’s.</p> <p>Year 2: Continue execution of the plan.</p> <p>Year 3: Continue execution of the plan.</p>	<p>Priority Outcome: Reduce unmet needs, mental health</p> <p>Priority Indicator: Percent of youth with major depressive episode who did not receive any mental health treatment (NSDUH¹)</p>	<p>Youth</p>	<p>The Crisis Center opened in July 2018. The hospital evaluated approximately 1,600 children this year at risk for self-harm.</p> <p>Screening for suicide risk was initiated for all patients ten years of age and older who presented to the hospital’s Emergency Departments or Perioperative services, allowing the hospital to identify high-risk children before they attempt to hurt themselves.</p> <p>The 24-bed behavioral health inpatient unit is scheduled to open on July 9, 2019.</p> <p>The Mental Health Resource Connection program has experienced a 42 percent increase in referrals, while visits to Psychology have increased 21 percent and Psychiatry visits have increased 40 percent over the last fiscal year.</p>

¹National Survey on Drug Use and Health

Priority Topic: Mental health and addiction

Strategy 2: Promote trauma-informed health care 

Action Step	Priority Outcome & Indicator	Priority Population	May 2019 Update
<p>Year 1: Collaborate with PHDMC (CHIP Behavioral Health Objective 2.2) to facility an assessment among clinicians and other community organizations in the Greater Dayton Area on their awareness and understanding of trauma-informed care, including toxic stress and adverse childhood experiences.</p> <p>Facilitate training to increase education and understanding of trauma-informed care, especially for children in high-risk circumstances.</p>	<p>Priority Outcome:</p> <ol style="list-style-type: none"> 1. Improve mental health status of mother and father 2. Reduce depression in children <p>Priority Indicator:</p> <ol style="list-style-type: none"> 1. Percentage of parents who rated their emotional health status as fair or poor (NSCH¹) 2. Percent of children who were diagnosed with depression (NSCH¹) 	<p>Children and Families</p>	<p>The hospital's trauma-informed care committee has continued to meet on a monthly basis. After conducting a needs assessment for the hospital, it was determined that a priority area was for caregivers of children hospitalized in the ICU.</p> <p>A "stress thermometer" project which has been implemented successfully at other children's hospitals was adapted and will be piloted in the pediatric ICU beginning May 2019.</p> <p>Dayton Children's also partnered with Westwood Neighborhood Schools Center (Zip Code 45417) to provide a trauma-informed education program. Dr. Nora Vish conducted several workshops for teachers and school leadership to build trauma-informed skills.</p>
<p>Year 2: Pilot trauma-informed care within specific clinics at Dayton Children's serving high-risk populations. Collect data and outcomes to share with other providers.</p>			
<p>Year 3: Identify opportunities to scale trauma-informed care to other providers.</p>			

¹National Survey of Children's Health

Year 2 Action Step Updates 2019 – Chronic Disease

To work toward **improving chronic disease outcomes**, the following strategies are

1. Implement nutrition policy in schools
2. Implement Safe Routes to School
3. Enhance the Dayton Asthma Alliance 

Action Plan Update

Priority Topic: Chronic disease			
Strategy 1: Implement nutrition policy in schools			
Action Step	Priority Outcome & Indicator	Priority Population	May 2019 Update
<p>Year 1: Work with the PHDMC Communities Preventing Chronic Disease program to choose at least one preschool or child care center to implement a healthier choices campaign.</p> <p>Work with school personnel to introduce at least one priority area (where applicable) to focus on and implement:</p> <ul style="list-style-type: none"> • Healthier snack “extra choices” offered during school lunches • Healthier fundraising foods • Healthier choices in vending machines • Healthier choices at sporting events and concession stands • Reducing unhealthy foods as rewards 	<p>Priority Outcome: Reduce childhood obesity</p> <p>Priority Indicator: Percent of children who were obese by BMI classifications (NSCH¹)</p>	<p>Children</p>	<p>Dayton Children’s is collaborating with local groups to support local child care centers working to obtain certification by the Ohio Healthy Program (OHP). Dayton Children’s child care center became OHP certified.</p>
<p>Year 2: Continue efforts from year 1. Choose 2-3 preschools or child care centers to implement a healthier choices campaign.</p> <p>Each of the selected preschools or child care centers will choose at least 1-2 priority areas to focus on and implement.</p>			<p>Dayton Children's hosted a web site for consumers to find summer food service program options in Montgomery County in summer 2018 and will do so again in 2019. The hospital has worked Public Health Dayton Montgomery County to develop a communication campaign to promote the existing summer food sites.</p>
<p>Year 3: Continue efforts from Years 1 and 2.</p>			<p>Dayton Children’s sponsored the YMCA’s Y on the Fly program which delivers activities and food throughout the community where these resources are limited, including continuing to provide a stop in the Old North Dayton neighborhood.</p>
<p>Each of the selected preschools and/or child care centers will implement at least 4 of the 5 priority areas.</p>			

			The collaborative Healthy Way Program continues at the Kroc Center with ongoing programming throughout the year.
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¹National Survey of Children's Health

Priority Topic: Chronic disease

Strategy 2: Implement Safe Routes to School

Action Step	Priority Outcome & Indicator	Priority Population	May 2019 Update
<p>Year 1: Work with PHDMC (CHIP Chronic Disease Prevention Objective 1.2) to collect baseline data on current Safe Routes to School (SRTS) programs in the Greater Dayton Area. Gather information on what types of activities are offered, how many people attend the activities, how often the activities take place, and the location.</p> <p>Identify key stakeholders to collaborate and develop a plan to start or expand SRTS programs. Develop program goals and an evaluation process for tracking outcomes.</p> <p>Look for funding sources to incentivize participation in the SRTS program.</p>	<p>Priority Outcome: Reduce childhood obesity</p> <p>Priority Indicator: Percent of children who were obese by BMI classifications (NSCH¹)</p>	<p align="center">Children</p>	<p>Dayton Children’s collaborates with several local organizations to improve walking and biking infrastructure to ensure children in our community are safe and have access to activities to keep them healthy.</p> <p>The Safe Routes to Schools Large District Travel Plan was passed in July 2018 by the Dayton City Commission. The Safe Routes to Schools committee is made up 11 organizations invested in implementing Safe Routes to Schools, including Dayton Children’s. After the travel plan was boarded, the City of Dayton received infrastructure funds from the state to complete various projects listed in the plan.</p> <p>The Girls in Gear program was implemented at four Dayton Public Schools. This program is for girls grades 4 to 6 and teaches them empowerment through building bikes. Each girls receives a bike and helmet at the end of the session.</p> <p>Safe Kids Greater Dayton supported Eight Walk to School Day events in Kettering and Dayton. This support was possible through a Safe Kids Worldwide grant.</p>
<p>Year 2: Recruit individuals to serve as walking/biking leaders.</p> <p>Decide on the locations, walking routes and number of walking/biking groups.</p> <p>Link the walking/biking groups with existing organizations to increase participation. Consider faith-based organizations, schools, community-based organizations, and health care providers.</p> <p>Begin implementing the program with one new school district.</p>			
<p>Year 3: Raise awareness and promote the SRTS programs.</p> <p>Evaluate program goals.</p> <p>Increase the number of SRTS programs by 25% from baseline.</p>			

			<p>Dayton Children’s partnered with Bike Miami Valley to provide helmets, lights, and bike lock to children in the Old North Dayton Neighborhood at Taste of Old North Dayton. Over 50 children got their bikes tuned up and received helmets, approximately 20 children joined a ride on a planned route in the neighborhood. A similar event was scheduled in May 2019 at the Trotwood-Madison Library.</p> <p>Safe Kids Greater Dayton secured funding and interns were secured to conduct a walking audit of three Safe Routes to Schools programs in the Sugarcreek, Kettering and Dayton. The results of these audits proved that while infrastructure had been built to accommodate walking and biking to school, this infrastructure is not being used widely by students to commute to and from school. Dayton Children’s will be planning programming on appropriate use of infrastructure.</p>
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Priority Topic: Chronic disease

Strategy 3: Enhance the Dayton Asthma Alliance

Action Step	Priority Outcome & Indicator	Priority Population	May 2019 Update
<p>Year 1: Continue the work of the Dayton Asthma Alliance to improve health outcomes for children with asthma by implementing the following tactics:</p> <ul style="list-style-type: none"> • Increasing the use of home visitors to identify asthma triggers • Increasing smoke-free multi-unit housing complexes • Increasing the number of jurisdictions implementing Tobacco 21 and other tobacco reduction policies • Increasing the number of schools, day cares and child-serving organizations implementing asthma education and environmental trigger modifications • Identify best practices in the primary care setting to address asthma <p>Support other local health departments working to improve the health of children with asthma</p>	<p>Priority Outcome(s):</p> <ol style="list-style-type: none"> 1. Reduce child asthma hospitalizations 2. Tobacco-free policies enacted <p>Priority Indicator(s):</p> <ol style="list-style-type: none"> 1. Emergency department visits for pediatric asthma, per 10,000 children ages (0-17) 2. In development: Number of smoke-free/tobacco-free policies enacted for K-12 schools, multi-unit housing and other spaces (per SHIP) 	<p align="center">Children and Families</p>	<p>Dayton Children’s hired a dedicated community health worker to conduct home visits for children/families in the pulmonary clinic and those associated with the Dayton Asthma Alliance.</p> <p>The Dayton Asthma Alliance is supportive of Tobacco 21 legislation and local efforts for this policy change.</p> <p>The Dayton Asthma Alliance engaged with several Dayton Public Schools and Huber Heights Schools to run the Open Airways self-management program.</p>
<p>Year 2: Continue efforts of Year 1. Target 2 additional school districts or child-serving organizations to implement asthma programming. Continue education efforts. Support local tobacco-prevention policies. Share best practices in the primary care setting to community primary care physicians.</p>			<p>The Alliance is aligning with Dayton Children’s Health Partners, the hospital’s clinically integrated network, around primary care quality metrics related to asthma.</p>
<p>Year 3: Continue efforts of Years 1 and 2.</p>			<p>Dayton Children’s Pulmonary Clinic held community event for families on April 6 to learn more about asthma education.</p> <p>Dayton Children’s is partnering with Miami Valley Child Development Centers to train staff in asthma during summer 2019.</p>

Year 2 Action Step Update – Maternal and Infant Health

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

1. Increase the use of safe sleep practices 🇺🇸

Priority Topic: Maternal and infant health			
Strategy 1: Increase the use of safe sleep practices 🇺🇸			
Action Step	Priority Outcome & Indicator	Priority Population	May 2019 Update
<p>Year 1: Work with PHDMC, local hospitals and other organizations to integrate safe sleep practices (i.e. The ABC's of Safe Sleep, Cribs for Kids) into the hospital and community. Disseminate ODH materials targeted at education and awareness.</p> <p>Year 2: Continue to raise awareness and promote safe sleep practices through coordinated messages.</p> <p>Year 3: Continue efforts from years 1 and 2.</p>	<p>Priority Outcome: Reduce infant mortality</p> <p>Priority Indicator: Rate of infant deaths per 1,000 live births</p>	Children	<p>The Cribs for Kids program is coordinated by Dayton Children's. Since July 2017, 375 cribs (with education) have been distributed. Social needs screening have also been conducted for Cribs for Kids families with 290 families screened and 235 positive screens identifying additional social needs.</p> <p>Dayton Children's has a GOLD certification from Cribs for Kids.</p> <p>Representatives from Dayton Children's sit on multiple committees related to Infant Mortality through Public Health Dayton and Montgomery County.</p>

Year 2 Action Step Update – Cross-Cutting Strategies

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

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

Cross-cutting Factor: Public health system, prevention and health behaviors			
Strategy 1: Increase breastfeeding 🇺🇸			
Action Step	Cross-cutting Outcome & Indicator	Priority Population	May 2019 Update
<p>Year 1: Collaborate with primary care physicians and birthing hospitals to standardize breastfeeding education across regional providers during pregnancy and postpartum.</p> <p>Year 2: Continue work from Year 1.</p> <p>Year 3: Continue work from Year 2.</p>	<p>Cross-cutting Outcome: Increase breastfeeding</p> <p>Cross-cutting Indicator: Percent of infants that were ever breastfed</p>	<p>Children and Families</p>	<p>Dayton Children’s partnered with the Greater Miami Valley Breastfeeding Coalition to develop and implement medical resident education around breastfeeding. Residents are giving resident lectures to one another on the topic.</p> <p>Dayton Children’s is updating EPIC documentation to reflect breastfeeding as a standard of care. This project includes improved clinic flow and education for nursing and support staff to establish better support of breastfeeding.</p> <p>Dayton Children’s is revising much of the Safe Sleep materials including training and marketing products to reflect proper breastfeeding practices. Integration of</p>

			<p>breastfeeding into our Safe Sleep initiatives to highlight the significant reduction in SIDS risk (up to 70%) provided by exclusive breastfeeding</p> <p>The Hospital Art & Aesthetics Committee approved changes to improve the signage for the current lactation rooms (19 at present) and additional spaces that will be added as hospital renovations continue.</p> <p>Dayton Children's participated in the "<i>A Fresh Look at the Science and Psychology of Breastfeeding</i>" with Premier Health in cooperation with the Breastfeeding Institute of Wright State University and Bright Future Lactation Resource Centre on May 9 and 14.</p>
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Cross-cutting Factor: Public health system, prevention and health behaviors

Strategy 2: Promote a regional childhood vaccination campaign


Action Step	Cross-cutting Outcome & Indicator	Priority Population	May 2019 Update
<p>Year 1: Include various sectors of the community in the regional campaign (community organizations, churches, hospitals, pharmacies, health departments, political officials, law enforcement, schools, child care centers, media, etc.)</p> <p>Provide sectors with ways to support the campaign: posting or handing out flyers, social media campaigns, posting vaccination schedules, offering their facility as a vaccination site, offer free or reduced-cost immunizations etc.)</p>	<p>Cross-cutting Outcome: Increase childhood vaccinations</p> <p>Cross-cutting Indicator: Percentage of children who received all their recommended vaccinations</p>	<p align="center">Children</p>	<p>Data collected from the 2017-2018 flu season showed that only 28 percent of patients who visited Dayton Children’s were vaccinated against the flu. We began offering walk up flu shots at our Main and South campus pharmacies and 816 flu shots were given in the 2018-2019 season.</p> <p>Dayton Children’s is closely watching state legislation that could lesson some of the progress made to have more children immunized.</p>
<p>Year 2: Continue raising awareness of the importance of childhood vaccinations.</p> <p>Provide vaccination information/educational materials at all community health promotion/awareness events; include information in local newspapers and magazines.</p> <p>Provide vaccination information/educational materials to all local schools and child care locations.</p>			
<p>Year 3: Increase number of childhood vaccination sites by 50% from baseline.</p>			

Cross-cutting Factor: Family functioning

Strategy 3: Explore and implement screenings to address social and behavioral needs

Action Step	Cross-cutting Outcome & Indicator	Priority Population	May 2019 Update
<p>Year 1: Continue screening and resource follow-up in the primary care clinic setting to address the social determinants of health. Share data and outcomes to scale and spread.</p> <p>Identify interventions and/or connections for children and families to address identified needs. Evidence-based programs including Triple P to be explored.</p> <p>Pilot program to screen at-risk children and connect to programs to improve social skills.</p>	<p>Cross-cutting Outcomes:</p> <ol style="list-style-type: none"> 1. Improve coping skills 2. Identify and address social determinants of health <p>Cross-cutting Indicators:</p> <ol style="list-style-type: none"> 1. Not currently available (per SHIP) 2. Not currently available 	<p align="center">Children and Families</p>	<p>Dayton Children’s Family Resource Connection conducted 11,487 (positive and negative) screens to date with 3,854 position screens since 2016. The program has a 40 percent connection to resource rate. In addition we have had 632 general referrals including walk-ins or calls from social work.</p> <p>Screening within the Nutrition Clinic has been successful and the program is exploring spread to the Emergency Departments at both the main campus and the south campus.</p> <p>Dayton Children’s is participating in a national Collaborative to Advance Social Health Integration Institute for Healthcare Improvement (CASHI) through the Health Leads organization. Dayton Children’s Family Resource Connection is sharing and learning best practices in implementing social needs programs within a clinic setting.</p>
<p>Year 2: Continue efforts from year 1.</p>			
<p>Year 3: Continue efforts from year 2.</p>			

Cross-cutting Factor: Health care system and access

Strategy 4: Integrate community health workers into clinical services 

Action Step	Cross-cutting Outcome & Indicator	Priority Population	May 2019 Update
<p>Year 1: Explore the feasibility of Dayton Children’s employing a community health worker (CHW) in a specific clinic setting. Identify referral process and begin collection data on CHW outcomes.</p>	<p>Cross-cutting Outcome: Provider availability-Community Health Workers</p> <p>Cross-cutting Indicator: Address the social determinants of health in a clinical setting</p>	<p align="center">Children and Families</p>	<p>Dayton Children’s has a community health worker who is imbedded in the pulmonary clinic. In addition, through a contract with ODJFS, Dayton Children’s employs two Kinship Navigators who assist kinship families in caring for children. In 2018, Dayton Children’s received a grant from the HealthPath Foundation to hire an additional community health worker for support the complex care clinic.</p> <p>Dayton Children’s is also exploring the Pathways HUB models to identify pathways that community health workers can use with clients to reach optimal health outcomes while being paid by managed care companies.</p>
<p>Year 2: Continue with referral process and data collection on CHW outcomes.</p>			
<p>Year 3: Identify how CHW employment can be scaled and sustainable to other clinical settings.</p>			

Cross-cutting Factor: Social determinants of health

Strategy 5: Implement a food insecurity screening and referral program

Action Step	Cross-cutting Outcome & Indicator	Priority Population	May 2019 Update
<p>Year 1: Research the 2-item Food Insecurity (FI) Screening Tool and determine feasibility of implementing a food insecurity screening and referral program.</p> <p>Educate healthcare providers on food insecurity, its impact on health, and the importance of screening and referral. Address food insecurity as part of routine medical visits on an individual and systems-based level.</p> <p>Implement the screening model in at least 1 location with accompanying evaluation measures.</p> <p>Year 2: Educate participating locations on existing community resources such as 2-1-1, WIC, SNAP, school nutrition programs, food pantries, etc.</p> <p>Continue efforts of Year 1.</p> <p>Year 3: Double the number of locations offering food insecurity screening and referrals.</p>	<p>Cross-cutting Outcome: Reduce food insecurity</p> <p>Cross-cutting Indicator: Percent of households that are food insecure (Feeding America, Map the Meal Gap)</p>	<p>Children and Families</p>	<p>Dayton Children’s Pediatrics is universally screening using the 2-item Food Insecurity Tool. In addition, the nutrition clinic began using the 2-items screen along with the other social needs screening questions.</p> <p>As clinics move the Child Health Pavilion in Summer 2019 the hospital will explore adding additional clinics.</p>

Cross-cutting Factor: Social determinants of health

Strategy 6: Implement a food pharmacy program

Action Step	Cross-cutting Outcome & Indicator	Priority Population	May 2019 Update
<p>Year 1: Research the Alliance to End Hunger ProMedica Food Pharmacy or another similar program.</p> <p>Obtain baseline data to document need for a Food Pharmacy.</p> <p>Contact health care organizations, food pantries, farmers markets, and other potential partners. Schedule and attend meetings with potential partners to discuss the need and feasibility of a food pharmacy.</p> <p>Finalize location, program partners, vendors, and other details necessary for the implementation of a food pharmacy.</p> <p>Determine what additional program materials are needed. Develop program materials.</p>	<p align="center">Cross-cutting Outcome: Reduce food insecurity</p> <p align="center">Cross-cutting Indicator: Percent of households that are food insecure (Feeding America, Map the Meal Gap)</p>	<p align="center">Children and Families</p>	<p>The Community Food Equity Manager was hired in January 2019. This person will manage the food prescription program and related activities/partnerships.</p> <p>A food scripts program is housed in the Child Health Pavilion which opened April 30, 2019.</p> <p>A pilot project was initiated in partnership with The Food Bank in September 2018 to purchase and build food boxes for patient families identified as food insecure by the Family Resource Connection social needs screening program. These families were referred to The Food Bank and provided an electronic voucher to pick up a food box. In the new location, the boxes are made available in the same location as the Family Resource Connection for families identified as food insecure.</p>
<p>Year 2: Continue efforts from year 1. Implement the food pharmacy in one location with accompanying evaluation measures.</p>			
<p>Year 3: Continue efforts from years 1 and 2.</p>			

