



KidsPeace® And The

2016 Community Health Needs Assessment

History of the Healthcare Council

The Health Care Council (HCC) of the Lehigh Valley was formed and funded in 2011 by the Dorothy Rider Pool Trust in response to a requirement of the Affordable Care Act (ACA). ACA requires that charitable hospital organizations covered by 501(c)(3) of the Internal Revenue code meet certain requirements in order to maintain tax exempt status.

Requirements include:

- Conduct a community health needs assessment (CHNA) once every three years in order to identify strengths and needs of the area as related to healthcare
- Adopt an implementation strategy to address community health needs as identified in the CHNA

History of the Healthcare Council

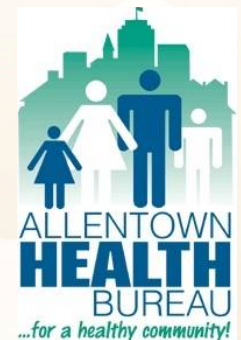
The HCC created a shared CHNA in order to fulfill the new IRS Schedule H requirement focusing on Lehigh and Northampton counties.

Danielle Walters facilitated as Project Manager.

Health Care Council of the Lehigh Valley

Worked together to produce the CHNA

- KidsPeace
- Sacred Heart Health Care System
- Lehigh Valley Health Network
- St. Luke's University Health Network
- Good Shepherd Rehabilitation Hospital
- Allentown Health Bureau
- Bethlehem Health Bureau
- Neighborhood Health Centers of the Lehigh Valley
- Dorothy Rider Pool Trust



KidsPeace and the Community Health Needs Assessment (CHNA)

KidsPeace worked with eight other Nonprofits and the Dorothy Rider Pool Trust to create the CHNA.

- Identified strengths and needs of the area as related to healthcare.
- Information from CDC, the counties, and other sources.
- Three focus groups were also conducted (2 Adult, 1 Teen)
- We are legally required to do this.
- We created our own implementation plan in response to the CHNA.

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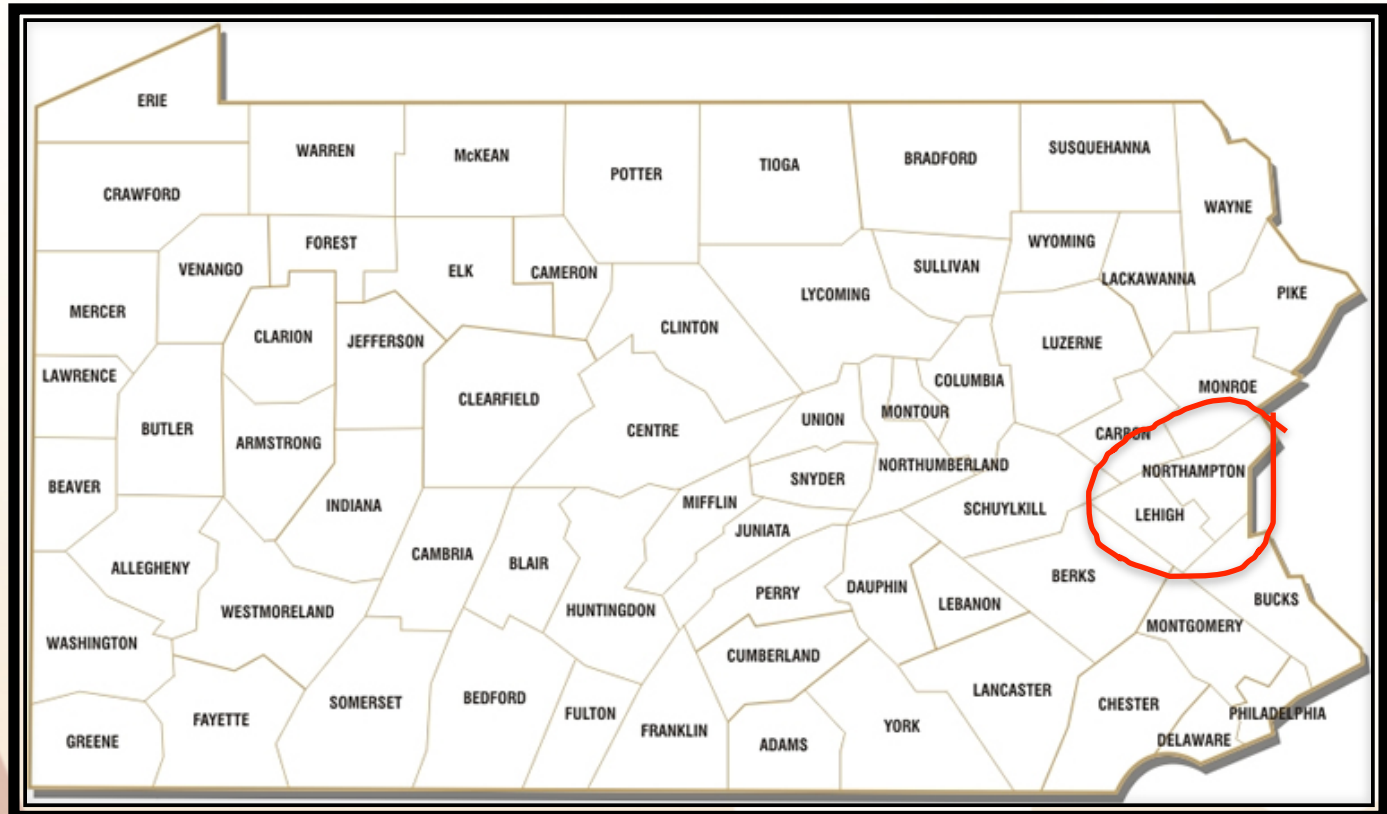
Jodi Whitcomb, MS

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The Road to Health

Health Profile for the 2016 Community Health Needs Assessment for the Lehigh Valley

REPORT AREA: Northampton and Lehigh Counties



Life and Quality of Life Indexes

Ranking out of 67 PA Counties (Ranking of “1” is highest)

	LEHIGH	NORTHAMPTON
Length of Life	14	11
Quality of Life	33	54

People are living longer in the Lehigh Valley *but their quality of life is an area for improvement.*

How can we improve health?

Areas that influence overall health....

1. Housing
2. Education
3. Air and Environment
4. Individual Behaviors
5. Support and Relationships

Factors that contribute to our health and well-being:

- Homes, families and how we spend our time
- Taking care of our bodies
- Medical care and local insitutions

Individuals and institutions must work together to make the changes that can improve health and quality of life.

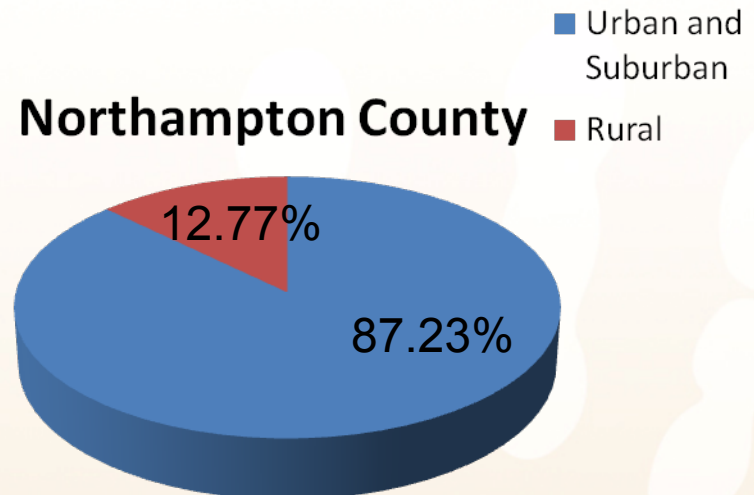
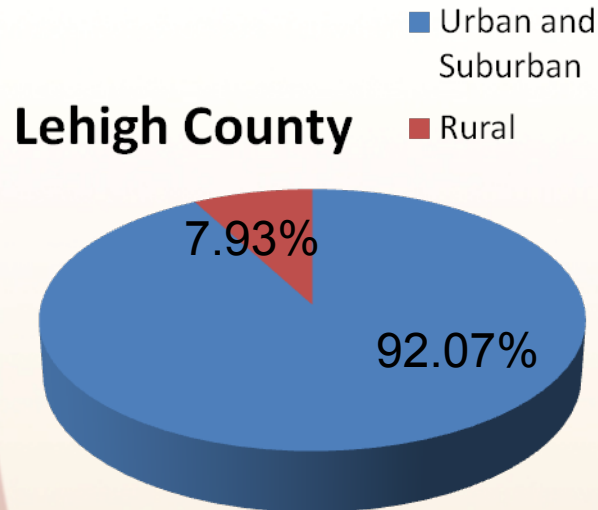
Leading Causes of Death – Lehigh Valley

Areas that influence overall health....

	LEHIGH	NORTHAMPTON	PA	USA
Heart Disease	Improving	Improving	Improving	Improving
Cancer	Improving	Improving	Improving	Improving
Stroke	Improving	Improving	Improving	Improving
Lung Disease	Improving	Improving	Improving	Improving
Injury & Violence	Getting Worse	Getting Worse	Getting Worse	No Change
Diabetes	Improving	Getting Worse	Getting Worse	No Change

Who are we?

Population Change



In general, the population in the LV has grown between 2000 and 2014. The proportion of people ages 45 and over is higher in the LV than in the US population as a whole. This contributes to the causes of death and ailments most prevalent in this area.

Who are we?

Population Change

	LEHIGH	NORTHAMPTON	PA	USA
% of Population over Age 5 with Limited English Proficiency	9.1%	4.5%	9.1%	4%
% of Population with a disability	13.8%	12.8%	13.4%	12.3%
% White	80.8%	86.76%	82.22%	74.02%
% Black	6.45%	5.06%	10.88%	12.57%
% Asian	3.08%	2.62%	2.86%	4.89%
% Latino/Hispanic**	21.5%	12%	6.6%	17.4%
% Other Race	7.02%	3.07%	2.13%	5.72%
% Multiple Races	2.65%	2.49%	1.91%	2.8%

Work and How We Get There

	LEHIGH	NORTHAMPTON	PA	USA
Median Income	\$54,923	\$60,097	\$52,548	---
Unemployment	7.8%	7.7%	7.4%	7.4%
% Living Below Poverty	13.7%	9.7%	13.3%	---
% Children in Poverty	22%	13%	19%	22%

When families cannot meet the basic needs of their children, this can greatly impact the physical and mental health of all involved.



How We Live: Housing

	LEHIGH	NORTHAMPTON	PA	USA
% Occupied housing units with substandard conditions	36.11%	34.33%	\$31.6%	36.11%

Hazards and Issues: Environmental (lead, mold, asbestos), overcrowding, high cost, limited or no kitchen or plumbing facilities, needed repairs that are unaffordable, frequent moves (changes in school districts for children and break-down of social networks for adults), lack of pride in home/living space, older homes

Housing issues can cause physical health problems as well as depression, anxiety, stress and hopelessness.

Housing affects health...
 “If you have a decent place, you feel decent.”

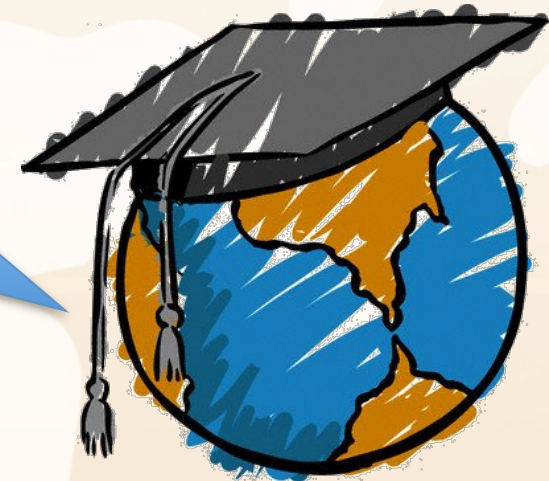


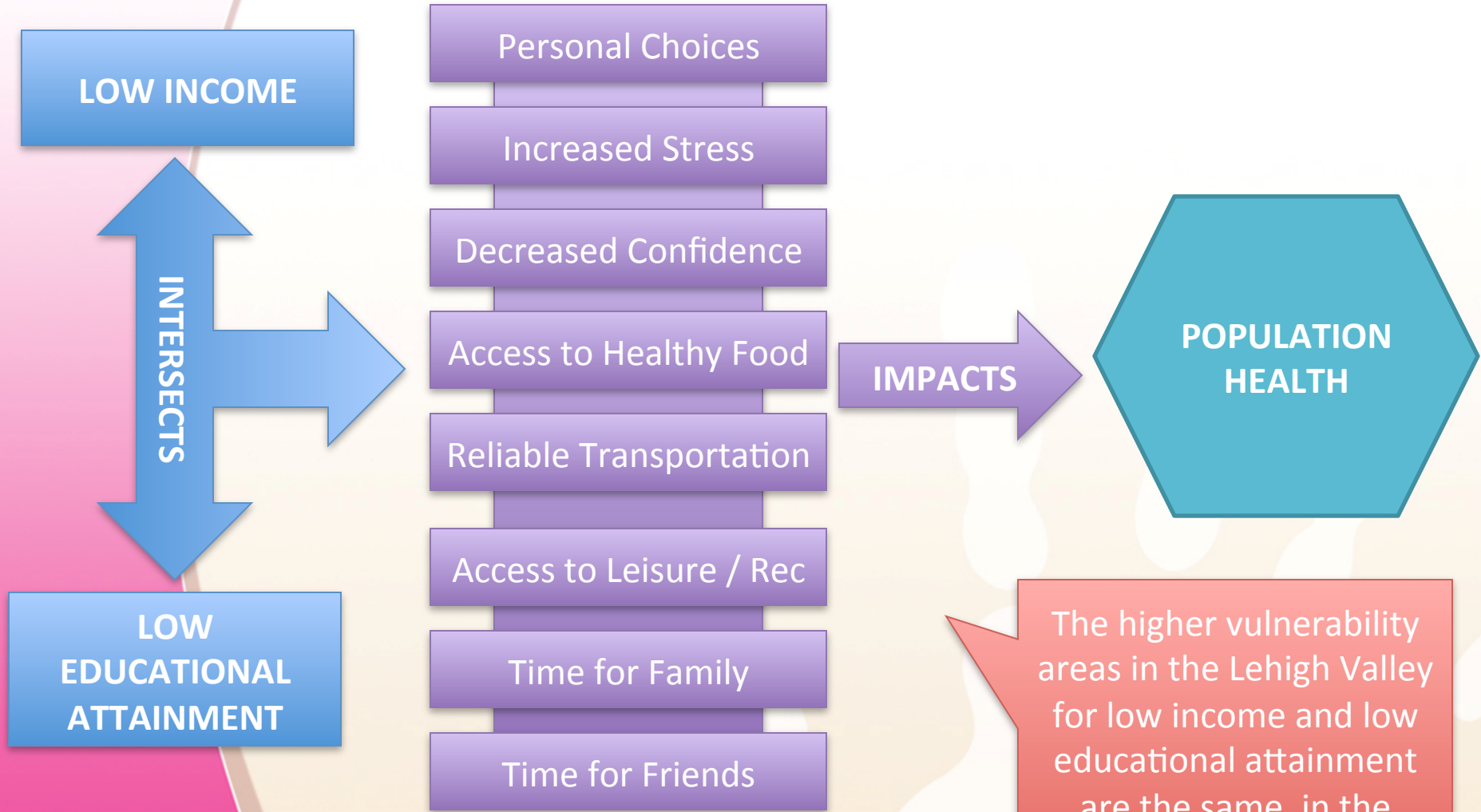
How We Live: Education

	LEHIGH	NORTHAMPTON	PA
% Adults without HS Diploma	13.2%	11.3%	11.3%
% Adults with completed Bachelors	28.1%	26.6%	27.5%

On-Time Graduation: Rural and suburban schools have higher rates of on-time graduation than Allentown, Easton and Bethlehem districts. However, over the past three years the percentages have increased in these districts.

Education leads to better jobs, higher income, longer and healthier lives. Children of educated adults are more likely to thrive.





The higher vulnerability areas in the Lehigh Valley for low income and low educational attainment are the same, in the urban areas of Allentown, Bethlehem and Easton.

Transportation and Air Quality

	Lehigh Valley	PA	USA
% Using Public Transit for Commute	1.74%	5.41%	5.01%

	LEHIGH	NORTHAMPTON	PA
AVG Daily Density of Fine Particulate Matter	11.9 Improving since 2011	11.7 Improving since 2011	12.9 Improving since 2011

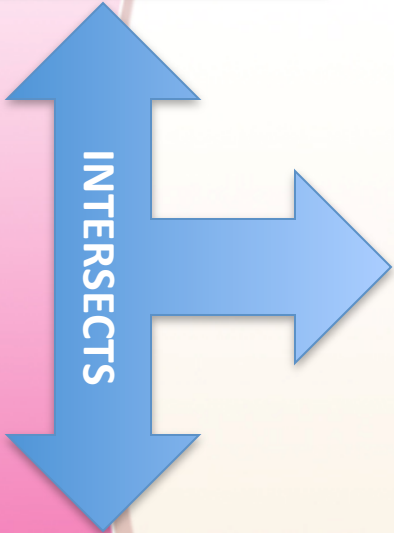
Poor Air Quality Risks:

Respiratory disease, stroke, low birth weight, heart disease

EPA Standards: No higher than 12.0 PM_{2.5} (Lehigh Valley just making the standard as of 2011)



LIMITED ACCESS
TO PUBLIC
TRANSIT

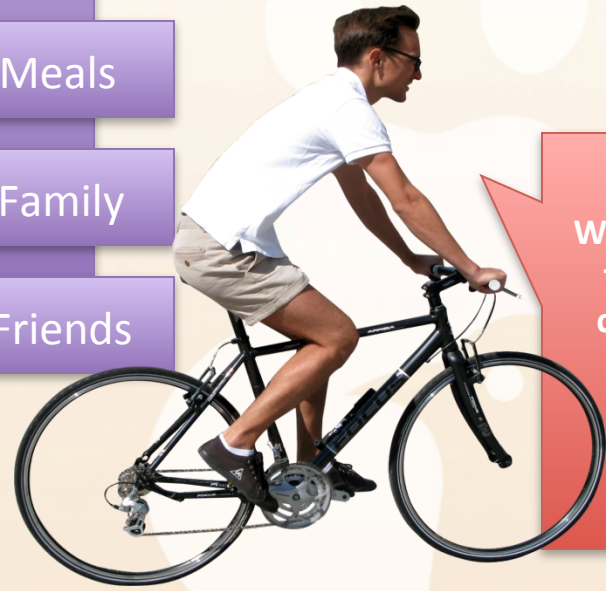


POOR AIR
QUALITY

- Limited time for exercise
- Excessively Long Commutes
- Increased Traffic Injuries
- Limits Employment Opportunity
- Difficulty Keeping Health Appointments
- Reduced Healthy Meals
- Reduces Time for Family
- Reduces Time for Friends



POPULATION
HEALTH



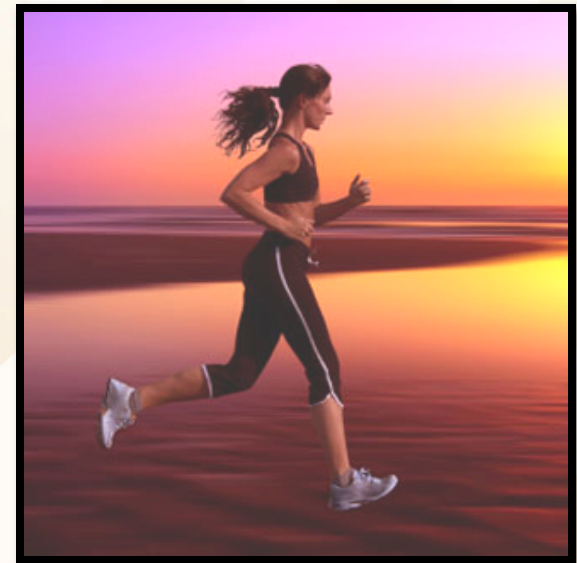
Walkable, bikeable, transit-oriented communities are associated with healthier populations.

Healthy Behaviors: Physical Activity

	LEHIGH	NORTHAMPTON	PA	USA
% of Physical <u>In</u> activity <i>National 2020 Goal: 32.6% or less</i>	21% Improving since 2012	25% Holding steady	24% Improving since 2012	30.5%

Benefits of Physical Activity: healthy weight, easier time with daily tasks, lowers risk for depression, heart disease, diabetes, cancer

The Lehigh Valley has more parks and recreational facilities than other PA communities. More people living here exercise than the national average and we continue to improve.



Healthy Behaviors: Nutrition & Food Security

	LEHIGH	NORTHAMPTON	PA
Food Environment Index (10=highest)	7.9	8.3	7.7

Food Environment Index: Includes food insecurity (lack of access to food in general), access to healthy food, % of children eligible for free or reduced cost lunches

The Food Environment Index is relatively high in this area. However, just because something is available in the environment does not mean that everyone has access to it. In the LV 10% of households cannot access adequate food quality due to lack of money and other resources.



Healthy Behaviors: Obesity

	REPORT AREA	PA	USA
% of Adults with >30.0BMI (Obese)	27.87% Rising at a higher rate than PA and USA	28.36%	27.14%

	LEHIGH	NORTHAMPTON
% Obese children ages K – 6 th grade	17%	18%
% Obese children ages 7 th – 12 th grade	17%	19%

In the LV nearly 40% of school children are either obese or overweight according to the PA Dept. of Health. Obesity is a risk factor for diabetes, heart disease and depression.



Healthy Habits: Being Tobacco and Drug Free

	LEHIGH	NORTHAMPTON	PA	USA
% of Adults who smoke <i>National 2020 Goal: 12% or less</i>	20% Holding steady since 2012	18% Getting worse compared to 2012	20% Getting a little better	18.2% Getting better
% of Adults who drink excessively	18% Holding steady since 2010	17% Getting worse compared to 2010	17% Getting a little better	---

Excessive Drinking: Defined as drinking more than 4 or 5 drinks on one occasion within a 30 day period or more than 1-2 drinks daily on average.

Cigarette smoking and binge drinking harms nearly every organ of the body, causing many diseases, and reduces overall health in general.



Healthy Relationships: Friends and Family

	LEHIGH	NORTHAMPTON	PA
Number of Social associations per 10,000 people	10.8	11.3	12.3

There are fewer opportunities for organized social activities in the LV compared to the rest of PA. Lack of access to social groups for children and teens could place them at various risks. Focus groups felt that risks associated with crime, drugs, sex and other issues could be prevented with increased access to both in-school and after-school activities.



Healthy Relationships: Sexual Relations

	LEHIGH	NORTHAMPTON	PA	USA
Teen Pregnancy Rate <i>National 2020 Goal: 36 or lower</i>	35	22	28	29
Number of New Chlamydia Infections per 100,000 people	441 Increasing since 2009	287 Increasing since 2009	434 Increasing since 2009	---

Children Born to Teen Parents: More likely to have lower educational attainment and lower health outcomes throughout their lives.

Untreated sexually transmitted diseases can lead to long-term health consequences including cancer, infertility and mental health issues.



Access to Healthcare

	REPORT AREA	PA	USA
Primary Care Physicians Availability (Rate per 100,000 pop)	88.31 Greatly improving since 2008	80.5 Improving since 2008	75.5 Slowly improving
% of Adults without any regular doctor	11.17%	12.73%	22.07%

Connecting to Healthcare: The reasons for lack of access to healthcare are complex. However, the LV greatly exceeds the rest of PA and the nation in terms of helping people get access to their providers.

Access to affordable, quality healthcare is important to physical, social and mental health. This is a joint responsibility of insurance companies and providers.



Access to Healthcare: Mental Health

	REPORT AREA
% of Teens saying they feel sad or depressed most days in the last year	1 in 3
% of Adults over age 65 being treated for depression	15%
Access to mental health care providers per 100,000 pop	30.1 – 55 (mid-range rating)

	LEHIGH	NORTHAMPTON	PA
AVG number of reported “bad mental health days” in the last 30 days	3.4	3.9	3.6

Research shows that good mental health and a positive outlook improves physical health. Poor mental health increases risks of cancer, heart disease and diabetes. Poor physical health then also affects mental health.



Access to Healthcare: Seniors

	LEHIGH	NORTHAMPTON	PA
Rate of Preventable Hospital Stays	63 Greatly improving since 2012	69 Greatly improving since 2012	63 Greatly improving since 2012
% of Female Medicare patients receiving mammograms	66% Getting worse	61% Getting worse	63.4% Getting worse

Medicare diabetic patients have also been receiving more HbA1c monitoring since 2012. This is connected to earlier detection and prevention of complications.



Access to Healthcare: Moms and Babies

	LEHIGH	NORTHAMPTON	PA	USA
% Moms with late or no pre-natal care	26.8%	22.54%	26.79%	17.25%

Benefits of Pre-Natal Care:

Increase chances of healthy pregnancy and birth, begins healthy life-path for child and mother, able to provide early intervention and possibly cures for neo-natal problems.



PA has a much higher rate of pregnant mothers who access little or no pre-natal care compared to the national average.



CHNA Action Plan

Giving to the community

- The KidsPeace action plan emphasizes our mission to give to the community by

“giving hope, help and healing to children, families and communities.”

- There are many ways we already do this in addition to our regular work.



Employment



- KidsPeace employs 1200 people in the Lehigh Valley
- Benefits emphasize wellness
- Monetary bonus incentivizes wellness
- EAP availability



Education and Support

- KidsPeace Institute trainings
- Awareness conference
- Critical Incident Response Team
- Emerging Healthcare Professionals
- Conference and Convention Presentations

Additional Resources

- TeenCentral.net
- Healing Magazine



Implementation Plan

- Our community-based programs are most involved
- Addresses needs highlighted in the CHNA
- Impact on community health goals
- Impact = measurable goals + (outputs and outcomes)
- Quantitative data
 - Number of groups, trainings
 - Wait times
 - Discharge disposition
- Qualitative data
 - Survey results
- Three-year plan
- Process evaluation and outcome/impact evaluation



Implementation Plan

Item One: Improving Social Factors

- Social Factors contribute to health needs (per CHNA).
- People in the focus groups strongly emphasized the need for more activities for youth.

Implementation Plan: Social Factors

During a teen focus group conducted while completing the CHNA, it became clear that teens are seeking more chances for meaningful, positive social contact and support.

•To address this, KidsPeace will increase therapy group offerings by three new groups.

✓The impact of this Action Item will be measured through surveys which assess the satisfaction of group members.

-Monthly surveys.



Implementation Plan: Social Factors

New Group Offerings



- Sacred Heart
 - Social and Coping skills for elementary age
 - Social and coping skills for Teens
 - Self Esteem for adults
 - Spanish language women's group for adults
- Family Center OP
 - LGBT Group for teens
 - LGBT Parent group for parents of LGBT youth
- Added to existing groups which include an early intervention group and social and coping skills groups for several other age ranges.

Implementation Plan: Social Factors

The CHNA, as well as other surveys of the population, has revealed that mental health issues are prevalent in 20% of the population but that less than half of those with needs seek treatment. Thus, mental health needs are undertreated, most likely due to the related stigma.

To address this, a KidsPeace associate will be certified as a trainer in Mental Health First Aid

✓The Impact of this Action Item will be measured through the number of trainings offered and surveys administered at the end of the training.

Youth Mental Health First Aid



Research shows that YMHFA improves participants' :

- Knowledge of the signs, symptoms and risk factors of mental illnesses and addictions.
- Identification of multiple types of professional and self-help resources for individuals with a mental illness or addiction.
- Confidence and likelihood to help an individual in distress.
- Increased mental wellness in themselves.

Youth Mental Health First Aid



Main teaching points:

- Addressing the stigma of Mental Health
- Identifying a person who might be suffering from a mental health problem or crisis
- Using the **ALGEE** action plan to help:
 - A**ssess risk
 - L**isten non-judgmentally
 - G**ive reassurance
 - E**ncourage professional help
 - E**ncourage self-help and other strategies



Youth Mental Health First Aid



At KidsPeace:

- 5 courses completed (1 scheduled for November)
- 59 participants certified
- Average presentation score: 4.73 (out of 5)
 - National average: 4.69
- Average content score 4.65
 - National average: 4.64

Based on a 21 question survey

Implementation Plan: Access to Care

- Lehigh Valley has a significant number of mental health providers
- Not everyone who needs help gets it
- Many barriers
 - transportation
 - schedules
 - insurance
 - language
 - stigma



Implementation Plan: Access to Care

Action Item: KidsPeace plans to take immediate action steps to ensure that access to care is improved.

To address this need, KidsPeace will provide walk-in services through all four mental health clinics in Northampton, Lehigh, and Monroe Counties.

✓The impact of this Action Item will be measured by showing the associated benefit of the free walk-in service KidsPeace provides.

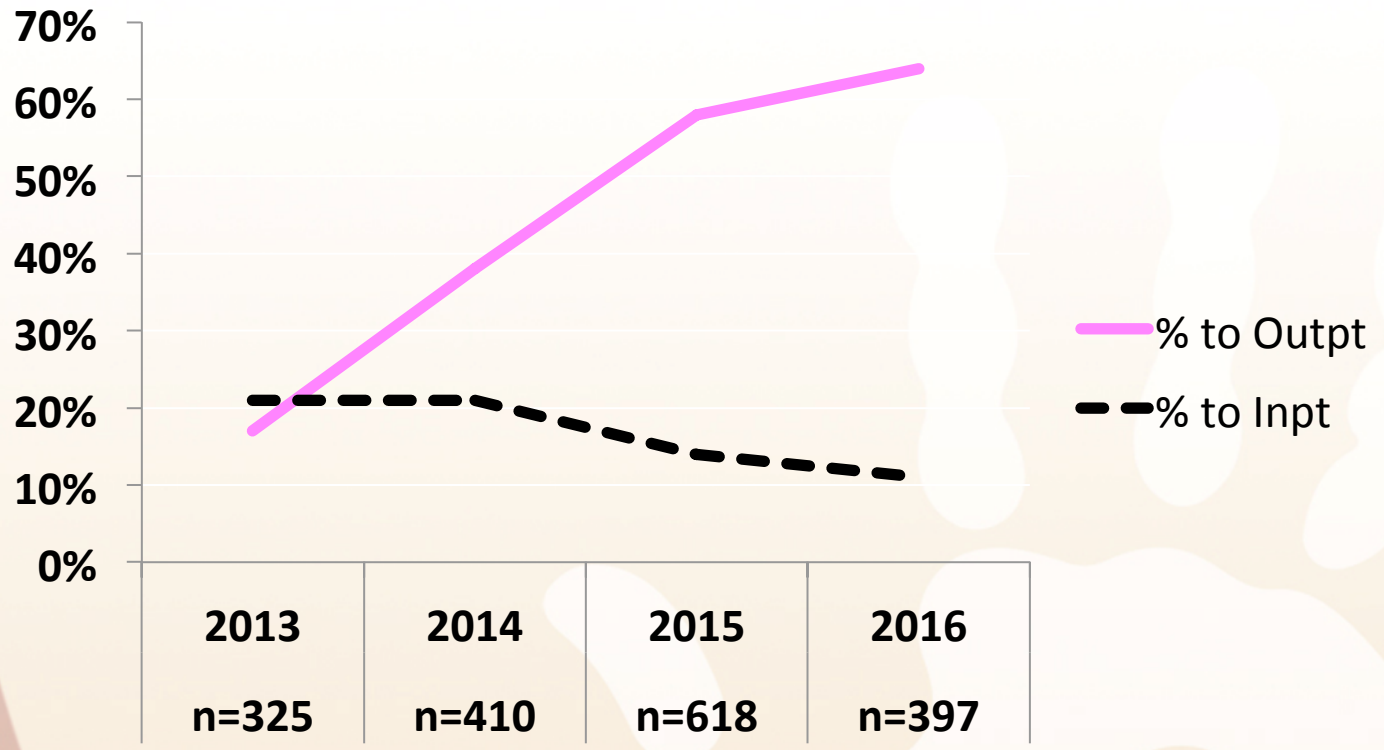


Walk-In Services



- A walk-in is a free, brief screening for individuals experiencing an urgent mental health need.
 - Way to avoid ERs and police calls.
 - Completed by a Master's level clinician.
 - Offered at several Community Programs sites from 9-5 Monday through Friday.

Where did walk-ins get referred to?



Implementation Plan: Access to Care



Action Item: KidsPeace has developed Mental Health Clinics co-located in medical collaboratives which also house family practices and other medical services.

In an effort to improve access to all medical providers in the collaboratives, KidsPeace will work together with other medical offices in the building.

- ✓ Impact will be measured through
 - number of referrals made to collaboratives
 - number of referrals received from collaboratives
 - number of warm hand-offs
 - number of shared treatment team meetings
 - number of education sessions held across offices

Warm Hand Offs

A person-to-person transfer of a client from a higher level of care to a less restrictive level of care

There were 44 warm handoffs at Sacred heart since January 2016.

Other access improvements

- 6 Shared treatment team meetings, which happened shortly after we opened.
- 1 Education session for other professionals at Sacred Heart so far.

Implementation Plan: Access to Care, Telehealth

- In recent years, various forms of telehealth and telemedicine have become increasingly prevalent.
- Telepsychiatry involves utilizing telehealth technologies to provide mental health services to clients.
- Psychiatry lends itself to telehealth much more easily than some medical specialties.
- Telepsychiatry must maintain confidentiality and videoconferencing software must be HIPAA compliant.

Implementation Plan: Access to Care, Telehealth

- In 2015, telepsychiatry was approved in our Tobyhanna outpatient program
- Telepsychiatry has two main goals:

- 1) To increase psychiatric coverage
- 2) To reduce the wait time for psychiatric appointments

In order to improve access to psychiatric care, KidsPeace intends to expand the active utilization of telepsychiatry to all four outpatient sites.

- Telepsychiatry impact will be measured by:
 - 1) Number of telepsychiatry appointments offered
 - 2) Wait time improvement: telepsych vs. traditional appointments

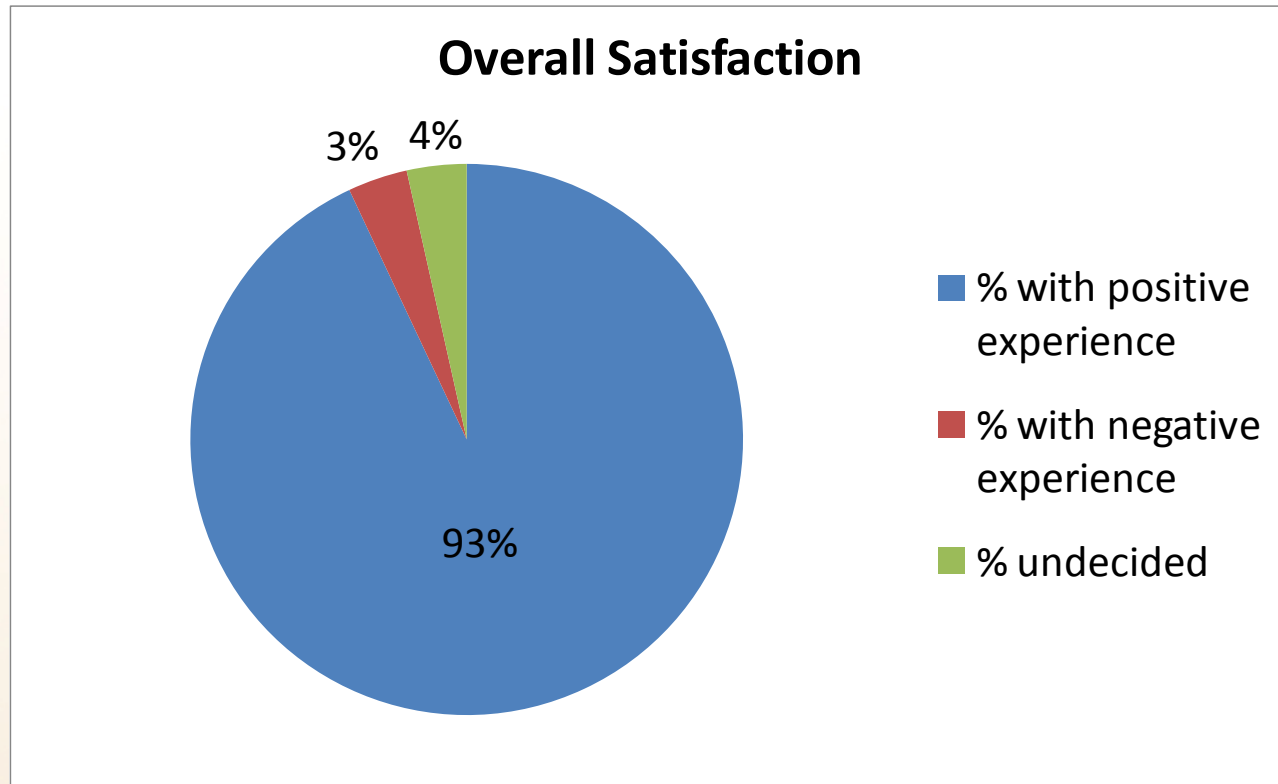
Telepsychiatry Survey Results

- Administered to clients after their KidsPeace telepsychiatry appointment
- Nine-item survey
- 102 surveys have been completed to date
- Percentages of those who agree or strongly agree are below

- 1). By using telepsychiatry, I was able to have an appointment with a physician earlier than normal. **99%**
- 2). I was made aware of the right to refuse this service. **100%**
- 3). The role of the physician and other staff members participating in telepsychiatry was made clear to me. **100%**

- 4). I was made aware of the psychiatrist's location and was informed of all parties who were present at each end. **92%**
- 5). The session was uninterrupted and free of technical difficulties. **82%**
- 6). The procedure for receiving medication scripts was clear and the process was explained. **96%**
- 7). The communication between treatment team members was **not** impacted. **91%**
- 8). I would continue to use telepsychiatry as an option. **95%**
- 9). Overall, my experience with telepsychiatry was positive. **98%**

Telepsychiatry



Consumer Comments and Concerns

Positive

- Really enjoyed my appointment and I would recommend to others.
- Dr. was great and case manager was extremely helpful.
- Thanks to telepsychiatry we were able to see the doctor 5 weeks sooner.
- The experience was really positive.
- Went very well.
- Doctor was detailed, nice, caring, and understanding.
- I received positive information.
- Everyone was extremely helpful.
- Staff were able to fit me in and helped as if they really cared—
don't get that often.
- Everything was great.

Consumer Comments and Concerns

Negative

All negative comments were related to sound quality –

- Couldn't hear doctor at times.
- Sound cut in and out.
- Hard to understand, cutting in and out.
- Sound went in and out occasionally.
- Physician hard to hear.
- Volume was not consistent.

Future Directions for KidsPeace Telepsychiatry

- Update network infrastructure to improve sound/video quality and bandwidth
- Develop a true KidsPeace Telepsychiatry Service
 - Incorporate nationally established telemedicine guidelines and best practices
 - Expand use of telepsychiatry for KidsPeace community programs, AND inpatient/residential programs
 - Potentially utilize handheld devices (phones, tablets)
 - Combine remote telepsychiatry physicians with “boots on the ground” psychiatric advanced practice professionals as a local contact for clients who need questions answered, med refills, etc.

Summary / Question & Answer



Accessing the Complete Community Health Needs Assessment

<http://www.kidspeace.org/wp-content/uploads/2016/03/HCC-2016-CHNA-Health-Profile-Final.pdf>

<http://www.kidspeace.org/wp-content/uploads/2016/09/KidsPeace-Action-Plan-Final-Draft-Community-Benefit-Service-area-plan-081016.pdf>

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