## Implementation Strategy Arkansas Children's Northwest





#### **Executive Summary**

Arkansas Children's Northwest (ACNW), the first and only pediatric hospital in the Northwest Arkansas region, opened in Springdale in early 2018. ACNW operates a 24-bed inpatient unit; a surgical unit with five operating rooms; outpatient clinics offering over 20 subspecialties; diagnostic services; imaging capabilities; occupational therapy services; and Northwest Arkansas' only pediatric emergency department, equipped with 30 exam rooms. ACNW defines its community as all children under age 21 in an eleven-county region in Northwest Arkansas (2017 population 205,767.) The counties include Benton, Carroll, Boone, Washington, Madison, Newton, Crawford, Franklin, Johnson, Sebastian, and Logan.

Internal Revenue Service (IRS) requirements formalized periodic needs assessments for nonprofit hospitals. ACNW's first community health needs assessment (CHNA) was completed in 2019 and serves as a foundation for the hospital's strategic initiatives that improve child health by identifying and prioritizing top health needs for children. This document is the corresponding Implementation Strategy (IS) that outlines ACNW's strategies to address the child health needs identified in the CHNA.

From September 2018 through February 2019, hospital staff gathered data for the CHNA. The following data sources contributed to the wide range of input gathered from community members and organizations who represent children's health interests:

- 6 focus groups targeted to parents and children's service providers across Northwest Arkansas
- 17 key informant interviews targeted to child health thought leaders and subject matter experts
- A telephone survey of 395 Northwest Arkansas parents that was statistically significant at the regional level
- A comprehensive review of child-specific secondary data from local, state, and national sources.

Resulting data were analyzed and prioritized into ten priority themes based on public health and qualitative research methods. Additional perspective is added to each theme through seven cross-cutting factors, including transportation and substance use, which were mentioned frequently as contributing elements to multiple priority themes. The themes, in priority order, are:

- 1. Equitable Access to Care
- 2. Mental Health and Substance Use
- 3. Food Insecurity
- 4. Parenting Supports
- 5. Social Issues
- 6. Child Obesity
- 7. Reproductive Health
- 8. Child Injury
- 9. Oral Health
- 10. Immunizations

For each health need in this Implementation Strategy, three-year goals, expected outcomes, resources, and collaborative partners are outlined.

#### **Implementations strategy Requirements:**

After the 2019 CHNA was completed and approved by the Hospital board in May of 2019, ACNW had several months to complete this associated Implementation Strategy. Approval by the governing body is required by August 1st, 2019. The Implementation Strategy outlines what ACNW will do during the 2020-2022 time frame to address the community health needs found in the CHNA. ACNW must also identify health needs the hospital facility will not address and explain why. For each health need, the IS:

- Describes ACNW's planned actions to address the needs and their anticipated impact
- Identifies the resources ACNW plans to commit to address the health need
- Describes planned collaboration between ACNW and other facilities or organizations in addressing the health need

#### **Current Resources to Address Health Needs:**

A variety of resources are available through ACNW to address community health needs. Depending on the issue, some or all of the funding streams below may support interventions to improve child health. Additional resources may be added as they are identified.

- Community Benefit Funds
- Grants and Contracts
- Philanthropy
- Research

#### **Recommendation 1:**

Implement evidence-based nutrition education curriculum.

Focus area: Food Insecurity and Child Obesity

#### **Data Profile:**

#### Long term leading indicators: Child Obesity and Food Insecurity

- The child obesity rate (k-10) in Northwest Arkansas is 20.8 percent. Overall, Arkansas has the worst child obesity rate in the nation.
- 21 percent of children in Northwest Arkansas do not have consistent access to nutritious meals and are considered "food insecure".
- 75 percent of Northwest Arkansas parents said in a recent phone survey that the number of children going hungry is a serious or moderate problem.

Proposed Actions:	Anticipated Impact:	Partner Groups:
Provide classes to parents	By June 30, 2022: provide	ACH, Arkansas Hunger
in the broader communi-	1-2 annual courses to com-	Relief Alliance
ty using evidence-based	munity members.	
programs such as Cooking		
Matters.		

**Current Actions:** Inpatient caregiver meal program, emergency food boxes available for families, food available in Family House for inpatient families, staff participating in food drives, and ACNW sponsorship of NWA Food Bank Gala (2019).

#### **Recommendation 2:**

Improve access to care by promoting cultural and language communication options related to health care.

Focus area: Equitable Access to Care

#### **Data Profile:**

#### Long term leading indicator: Well-child visits (3-6 years)

- The well-child visit rate in Northwest Arkansas is 54.88 percent.
- Equitable Access to Care was rated as the number one community health need in the 2019 Community Health Needs Assessment for ACNW.

Proposed Actions:	Anticipated Impact:	Partner Groups:
Additional multilingual resources and financial counseling.	Increase multilingual finan- cial counselors available.	
Additional multilingual resources and financial counseling. Decrease language barriers by increasing the number of hospital documents (i.e. immunization information) that is available in languages other than English (including Spanish and Marshallese).	Increase multilingual financial counselors available. By June 30, 2022: ensure that information (such as immunization information) is translated and readily available in English, Spanish and Marshallese.	Arkansas Coalition of the Marshallese

**Current Actions:** Interpreter services staff available (Spanish and Marshallese), iPad In-Demand availability 24/7, introduction to cultural diversity in hospital orientation, limited documents already being translated.

#### **Recommendation 3:**

Address child injury by offering safety materials and educational classes to parents and caretakers in the community.

Focus area: Child Injury and Parenting

#### **Data Profile:**

#### Long term leading indicators: Injury-related child deaths and infant mortality

- The injury rated death rate in Northwest Arkansas for children is 18.14 (out of 100,000).
- Northwest Arkansas' infant mortality rate is 6.28 (out of 1,000).

Proposed Actions:	Anticipated Impact:	Partner Groups:
Train ACNW staff on evidence based Babysitting classes such as the "Safe Sitter" curriculum and provide those classes to the community	By June 30, 2022, ACNW staff would provide 1-2 annual evidence-based babysitting classes to the community.	ACH
Encourage safe sleep practices by providing "Safety Baby Showers" for new parents as well as installing a "Safety Zone" in the ACNW hospital gift shop.	By June 30, 2022, implement a gift shop "Safety Zone" and provide 1-2 annual Safety Baby Showers to the community.	Infant and Child Death Review, ACH IPC, Wash- ington County Hometown Health, World's Largest Baby Shower ACH IPC
Train ACNW staff to be car seat advocates or technicians, and provide car seats and installation to the community.	By June 30, 2022, train at least one ACNW staff and hold 1-2 annual car seat safety trainings.	ACH IPC

Current Actions: Car seats available to families with financial need through Social Work Department, medication lock boxes and gun locks available, suicide prevention training and education provided by Injury Prevention staff on campus at ACNW 2-3 times annually, Halo sleep sacks utilized on inpatient unit (also available through Social Work based on financial need), safe sleep initiatives practiced on inpatient unit along with education to caregivers, Stop the Bleed training provided through Trauma Program.

#### **Recommendation 4:**

Improve access to immunizations by coordinating programs with activities parents and families already attend.

Focus area: Immunizations

#### **Data Profile:**

### Long term leading indicator: Long term leading indicator: 7 Vaccination Series (19-35 months)

• In Northwest Arkansas, 58.5 percent of children (19-35 months) have their full 7 vaccination series.

Proposed Actions:	Anticipated Impact:	Partner Groups:	
Support efforts to provide	By June, 30, 2021, develop	ADH, Washington County	
school-based immuniza-	an immunization outreach	Hometown Health	
tions, including an inquiry	strategy.		
into providing immuniza-			
tions via ACH Dental Vans			
or day-care centers.			

#### **Recommendation 5:**

Improve access to reproductive health education and resources by expanding partnerships with other healthcare groups.

Focus area: Reproductive Health

# Data Profile: Long term leading indicators: Teen Birth Rate • Arkansas has the highest teen birth rate in the nation, though the numbers have been improving (dropping 52 percent from 1991 to 2015). Northwest Arkansas teen birth rates have been just below the state average since 2007 Proposed Actions: Anticipated Impact: Partner Groups:

Proposed Actions:

Leverage current partnerships to provide increased reproductive
health education and resources to families.

Anticipated Impact:

By June, 30, 2021, develop partnership plan with
UAMS to address reproductive tive health issues.

**Current Actions:** Social Work provides education and resources related to pregnancy prevention, options for teen parents faced with decision, and referral for prenatal care.

#### **Recommendation 6:**

Increase access to oral health care for kids in Northwest Arkansas by providing ancillary support to a network of partners.

Focus area: Oral Health

Data Profile:			
<ul> <li>Long term leading indicator: Ratio of Population to Dentists</li> <li>In Arkansas there are about 2,218 people for every dentist. In Northwest Arkansas, there are fewer dentists per capita, with a ratio of 3,316 to 1.</li> </ul>			
Proposed Actions:	Anticipated Impact:	Partner Groups:	
Leverage current ACNW resources to expand the reach of partner groups providing dental outreach.	By June, 30, 2021, provide ancillary support to the ACH dental van such as through an on-site parking pad at ACNW.	ACH	
<b>Current Actions:</b> Children in NWA have access to services through dental van (partner with ACH)			

#### **Recommendation 7:**

Address social issues that impact child health by collaborating with a broad network of child health stakeholders in Northwest Arkansas.

Focus area: Social Issues

#### **Data Profile:**

#### Long term leading indicators: Child Poverty Rate

• The child poverty rate in Northwest Arkansas (23 percent) is lower than the state average (27 percent). However, disparities remain. About 33 percent of Black and Hispanic children in Northwest Arkansas live in poverty, compared to about 15 percent of white children.

Proposed Actions:	Anticipated Impact:	Partner Groups:
Build a strong coalition of	By June, 30, 2021, Convene	
child health advocates in	an annual meeting of child	
Northwest Arkansas from	health stakeholders to dis-	
a wide array of groups	cuss collaboration opportu-	
and partners.	nities and strategy.	

**Current Actions:** Social Work provides resources to families daily to remove barriers with social issues and increase access to healthcare. Relationships with child health stakeholders are being continuously developed through outreach by ACNW staff and leadership.

#### **Future Opportunities:**

ue to the current limited resources at ACNW, and the work already being done to address mental health and substance use in the Northwest region of the state, ACNW has chosen not to focus on Mental Health and Substance Use for the 2019 Implementation Strategy. ACNW, however, remains committed to acting on these issues when resources become available.

Focus area: Mental Health and Substance Use

#### **Data Profile:**

#### Long term leading indicator: Student Drug Use

• The rate of Northwest Arkansas student drug use is 20.4 percent, which is slightly above the rate for Arkansas as a whole (20 percent).

**Current Actions:** Social Work and Providers are routinely assessing for substance abuse, mental health, and behavioral health needs during inpatient and outpatient visits. Screening tools are utilized for patients age 10 or above in all settings. Social Work provides referrals to address both acute and outpatient mental health and substance abuse needs.



