





Introduction

LCMC Health is a Louisiana-based, not-for-profit healthcare system serving the needs of the people of Louisiana, the Gulf South, and beyond. LCMC Health currently manages award-winning hospitals including Children's Hospital New Orleans, Touro Infirmary, New Orleans East Hospital (NOEH), University Medical Center New Orleans (UMCNO), and West Jefferson Medical Center (WJMC).

Children's Hospital New Orleans is a 229-bed, not-for-profit pediatric academic medical center offering a complete range of healthcare services for children from birth to 21 years. With over 40 pediatric specialties and more than 400 physicians, it is the only full-service hospital exclusively for children in Louisiana and the Gulf South. Children's Hospital had almost 200,000 patient encounters (visits) in 2018 with children coming from 64 parishes in Louisiana, 43 states and 4 foreign countries. In all 79,147 children received care from Children's Hospital last year.

Children's Hospital operates or partners with several signature programs designed to improve the overall health of the community it serves including, but not limited to, the Parenting Center, the Greater New Orleans Immunization Network, the Audrey Hepburn Care Center, the New Orleans Child Advocacy Center, the Ventilator Assisted Care Program, the Hogs House Family Center, and the Miracle League. Additionally, Children's Hospital has created a committee of its Board of Trustees focused on providing oversight and direction to the organization's community benefits activities.

The Patient Protection and Affordable Care Act (PPACA), which went into effect on March 23, 2010, requires tax-exempt hospitals to conduct community health needs assessments (CHNA) and implementation strategies in order to improve the health and well-being being of residents within the communities served by the hospital(s). These strategies created by hospitals and institutions consist of programs, activities, and plans that are specifically targeted towards populations within the community. The execution of the

implementation strategy plan is designed to increase and track the impact of each hospitals' efforts.

Tripp Umbach was contracted by Metropolitan Hospital Council of New Orleans (MHCNO) to conduct a CHNA for East Jefferson General Hospital, LCMC Health, Ochsner Health System, HCA Healthcare (Tulane Medical Center), Slidell Memorial Hospital, and St. Tammany Parish Hospital. The overall CHNA involved multiple steps that are depicted in Chart 1. The CHNA process undertaken by LCMC Health, along with East Jefferson General Hospital, HCA Healthcare (Tulane Medical Center), Ochsner Health System, Slidell Memorial Hospital, and St. Tammany Parish Hospital, with project management and consultation by Tripp Umbach, included input from representatives who represent the broad interests of the community served by the hospital facilities, including those with special knowledge of public health issues, data related to underserved, hard-to-reach, vulnerable populations, and representatives of vulnerable populations served by each hospital. Tripp Umbach worked closely with Working Group members to oversee and accomplish the assessment and its goals. This report fulfills the requirements of the Internal Revenue Code 501(r)(3), established within the Patient Protection and Affordable Care Act (PPACA) requiring that nonprofit hospitals conduct CHNAs every three years.

Data from government and social agencies provides a strong framework and a comprehensive piece to the overall CHNA. The information collected is a snapshot of the health of residents in Southern Louisiana, which encompassed socioeconomic information, health statistics, demographics, and mental health issues, etc. The CHNA report is a summary of primary and secondary data collected for LCMC Health — Children's Hospital while the implementation strategy planning report is a plan for how LCMC Health — Children's Hospital will address the identified needs from the CHNA over the next 3 years.

The requirements imposed by the IRS for tax-exempt hospitals and health systems must include the following:

- Conduct a CHNA every three years.
- > Adopt an implementation strategy to meet the community health needs identified through the assessment.
- Report how it is addressing the needs identified in the CHNA and a description of needs that are not being addressed, with the reasons why.

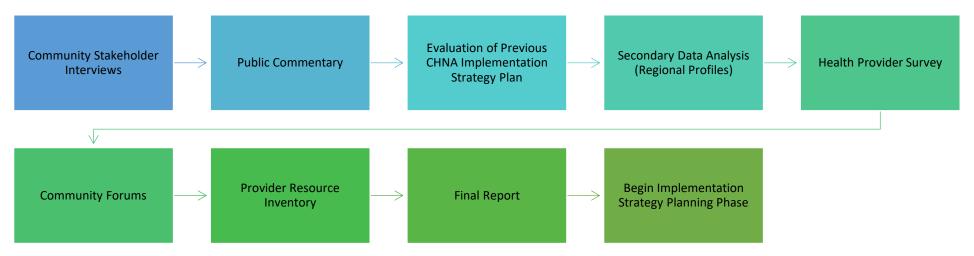
The Department of the Treasury and the IRS require a CHNA to include:

- 2. A description of the community served by the hospital facilities and how the description was determined.
- 3. A description of the process and methods used to conduct the assessment.
 - A description of the sources and dates of the data and other information used in the assessment and the analytical methods applied to identify community health needs.
 - A description of information gaps that impact the hospital organization's ability to assess the health needs of the community served by the hospital facility.
 - Identification of organizations that collaborated with the hospital and an explanation of their qualifications.
- 4. A description of how the hospital organizations considered input from persons who represent the broad interests of the community served by the hospitals. In addition, the report must identify any individual providing input that has special knowledge of or expertise in public health. The report must also identify any individual providing input who is a "leader" or "representative" of populations.
- 5. A prioritized description of all of the community health needs identified through the CHNA, as well as a description of the process and criteria used in prioritizing such health needs.
- 6. A description of the existing health care facilities and other resources within the community available to meet the community health needs identified through the CHNA.
- 7. A description of the needs identified that the hospital intends to address, the reasons those needs were selected, and the means by which the hospital will undertake to address the selected needs.

Addressing Community Health Needs

In 2018, Children's Hospital began a joint process of conducting a comprehensive Community Health Needs Assessment (CHNA) along with regional health care institutions and organizations in Southern Louisiana. The process connected public and private organizations, such as health and human service entities, government officials, faith-based organizations, and educational institutions to evaluate the needs of the community. The 2018 assessment included primary and secondary data collection and incorporated a multitude of phases as part of the assessment process. The overall CHNA involved multiple steps that are depicted in the below flow chart.

Chart 1: CHNA Process Chart



With the conclusion of the CHNA, a regional strategic planning phase was implemented and managed by Tripp Umbach with participation from representatives of LCMC Health, along with East Jefferson General Hospital, HCA Healthcare (Tulane Medical Center), Ochsner Health System, and Slidell Memorial Hospital. The developments and results from the implementation strategy report is to address the needs identified from Children's Hospital's community health needs assessment completed in 2018 (i.e., behavioral health (mental health and substance abuse), health literacy, and access to care).

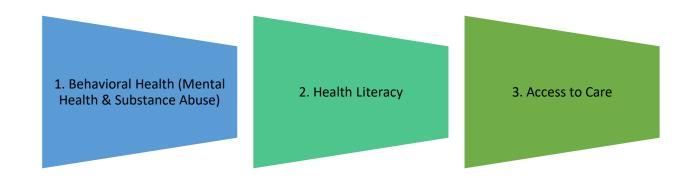
Tripp Umbach worked closely with administrative leadership from Children's Hospital to complete the implementation strategy planning phase through the review of previous strategies and planning actions. The identification of community health priorities helped hospital leaders align needs with best practice models and available resources, defined action steps, timelines, and potential partners for each need to develop the accompanying implementation strategy plan. Hospital strategies and subsequent action steps were recognized to address the health needs identified in the service area.

Prioritizing Community Health Needs

According to the Office of Disease Prevention and Health Promotion, a healthy community is "a community that is continuously creating and improving those physical and social environments and expanding those community resources that enable people to mutually support each other in performing all the functions of life and in developing to their maximum potential." This idyllic description is for a healthy community that also has access to health services, ample employment opportunities, high-quality education, affordable, clean housing options, and a safe physical environment. The reduction of poor health outcomes and poor health behaviors are essential in order to build a healthy community. Collaboration

and teamwork from community groups, health care institutions, government leaders, and social and civic organizations can also improve the health status of a community. Healthy partnerships can lead to building a strong community infrastructure that addresses community health needs and provides services to prevent and stem preventable diseases.

Upon review of all data collected, with feedback from community leaders who were present at the community forum, and input from internal hospital leadership, the following needs were identified as the key community health needs in the Children's Hospital's community.



Community Definition

In 2018, a comprehensive CHNA was completed for Children's Hospital. Tripp Umbach has completed CHNAs and implementation strategy planning cycles for the hospital/health system and provided benchmarking or trending data to track and observe positive or negative movements in the primary and secondary data (where applicable).

A comprehensive CHNA was completed for Children's Hospital which began in early 2018. The primary service area for Children's Hospital was defined by ZIP codes that contain a majority of inpatient discharges from the health care facility. In 2018, a total of 89 ZIP codes were identified for Children's Hospital's service area as containing a majority of inpatient discharges. The information collected from these specific ZIP codes will assist in future health care planning services, community benefit contributions, and programming efforts.

Table 1: Overall Study Area Profile

	ZIP Code	City	Parish
1.	39426	Carriere	Pearl River County, MS
2.	39466	Picayune	Pearl River County, MS
3.	39503	Gulfport	Harrison County, MS
4.	70001	Metairie	Jefferson Parish, LA
5.	70002	Metairie	Jefferson Parish, LA
6.	70003	Metairie	Jefferson Parish, LA
7.	70005	Metairie	Jefferson Parish, LA
8.	70006	Metairie	Jefferson Parish, LA
9.	70032	Arabi	St. Bernard Parish, LA
10.	70037	Belle Chasse	Plaquemines Parish, LA
11.	70043	Chalmette	St. Bernard Parish, LA
12.	70047	Destrehan	St. Charles Parish, LA
13.	70053	Gretna	Jefferson Parish, LA
14.	70056	Gretna	Jefferson Parish, LA
15.	70057	Hahnville	St. Charles Parish, LA
16.	70058	Harvey	Jefferson Parish, LA
17.	70062	Kenner	Jefferson Parish, LA
18.	70065	Kenner	Jefferson Parish, LA
19.	70068	LA Place	St. John the Baptist Parish, LA
20.	70070	Luling	St. Charles Parish, LA

	ZIP Code	City	Parish
21.	70072	Marrero	Jefferson Parish, LA
22.	70075	Meraux	St. Bernard Parish, LA
23.	70084	Reserve	St. John the Baptist Parish, LA
24.	70085	Saint Bernard	St. Bernard Parish, LA
25.	70087	Saint Rose	St. Charles Parish, LA
26.	70092	Violet	St. Bernard Parish, LA
27.	70094	Westwego	Jefferson Parish, LA
28.	70112	New Orleans	Orleans Parish, LA
29.	70113	New Orleans	Orleans Parish, LA
30.	70114	New Orleans	Orleans Parish, LA
31.	70115	New Orleans	Orleans Parish, LA
32.	70116	New Orleans	Orleans Parish, LA
33.	70117	New Orleans	Orleans Parish, LA
34.	70118	New Orleans	Orleans Parish, LA
35.	70119	New Orleans	Orleans Parish, LA
36.	70121	New Orleans	Jefferson Parish, LA
37.	70122	New Orleans	Orleans Parish, LA
38.	70123	New Orleans	Jefferson Parish, LA
39.	70124	New Orleans	Orleans Parish, LA
40.	70125	New Orleans	Orleans Parish, LA

	ZIP Code	City	Parish
41.	70126	New Orleans	Orleans Parish, LA
42.	70127	New Orleans	Orleans Parish, LA
43.	70128	New Orleans	Orleans Parish, LA
44.	70129	New Orleans	Orleans Parish, LA
45.	70130	New Orleans	Orleans Parish, LA
46.	70131	New Orleans	Orleans Parish, LA
47.	70301	Thibodaux	Lafourche Parish, LA
48.	70345	Cut Off	Lafourche Parish, LA
49.	70354	Galliano	Lafourche Parish, LA
50.	70359	Gray	Terrebonne Parish, LA
51.	70360	Houma	Terrebonne Parish, LA
52.	70363	Houma	Terrebonne Parish, LA
53.	70364	Houma	Terrebonne Parish, LA
54.	70373	Larose	Lafourche Parish, LA
55.	70374	Lockport	Lafourche Parish, LA
56.	70380	Morgan City	St. Mary Parish, LA
57.	70392	Patterson	St. Mary Parish, LA
58.	70394	Raceland	Lafourche Parish, LA
59.	70401	Hammond	Tangipahoa Parish, LA
60.	70403	Hammond	Tangipahoa Parish, LA
61.	70422	Amite	Tangipahoa Parish, LA
62.	70427	Bogalusa	Washington Parish, LA
63.	70433	Covington	St. Tammany Parish, LA
64.	70435	Covington	St. Tammany Parish, LA
65.	70438	Franklinton	Washington Parish, LA

	ZIP Code	City	Parish
66.	70443	Independence	Tangipahoa Parish, LA
67.	70444	Kentwood	Tangipahoa Parish, LA
68.	70445	Lacombe	St. Tammany Parish, LA
69.	70447	Madisonville	St. Tammany Parish, LA
70.	70448	Mandeville	St. Tammany Parish, LA
71.	70452	Pearl River	St. Tammany Parish, LA
72.	70454	Ponchatoula	Tangipahoa Parish, LA
73.	70458	Slidell	St. Tammany Parish, LA
74.	70460	Slidell	St. Tammany Parish, LA
75.	70461	Slidell	St. Tammany Parish, LA
76.	70466	Tickfaw	Tangipahoa Parish, LA
77.	70471	Mandeville	St. Tammany Parish, LA
78.	70560	New Iberia	Iberia Parish, LA
79.	70570	Opelousas	St. Landry Parish, LA
80.	70601	Lake Charles	Calcasieu Parish, LA
81.	70726	Denham Springs	Livingston Parish, LA
82.	70737	Gonzales	Ascension Parish, LA
83.	70769	Prairieville	Ascension Parish, LA
84.	70785	Walker	Livingston Parish, LA
85.	70802	Baton Rouge	East Baton Rouge Parish, LA
86.	70805	Baton Rouge	East Baton Rouge Parish, LA
87.	70815	Baton Rouge	East Baton Rouge Parish, LA
88.	70816	Baton Rouge	East Baton Rouge Parish, LA
89.	71291	West Monroe	Ouachita Parish, LA

Methodology

A complete CHNA process performed for included the collection of primary and secondary data. Community organizations and leaders within the primary region were engaged to distinguish the needs of the community. Civic and social organizations, government agencies, educational systems, and health and human services entities were engaged throughout the CHNA. The comprehensive primary data collection phase resulted in the contribution of over 100 community stakeholders/leaders, organizations, and community groups.

The primary data collection consisted of several project component pieces. Community stakeholder interviews were conducted with individuals who represented a) broad interests of the community, b) populations of need or c) persons with specialized knowledge in public health. Health provider surveys were collected to capture thoughts and opinions regarding health providers' concerns about the care and services they provide. Community representatives and stakeholders attended a community forum facilitated by Tripp Umbach to prioritize health needs, which assisted in the implementation and planning phase. A resource inventory was generated to highlight available programs and services within the service area. The resource inventory identifies available organizations and agencies that serve the region within each of the priority needs.

A robust regional profile (secondary data profile) was analyzed. The regional profile contained local, state, and federal data/statistics providing invaluable information on a wide-array of health and social topics. Different socioeconomic characteristics, health outcomes, and health factors that affect residents' behaviors; specifically, the influential factors that impact the

health of residents were reviewed and discussed with members of the Working Group and Tripp Umbach. In total, six regional health profiles were compiled based on the locations and service areas of the participating hospitals. For the overall assessment process, the regional profiles were: Baton Rouge, Jefferson, New Orleans, North Shore, West Bank, and St. Anne (Raceland)/Lafourche region.

Children's Hospital continues to contribute towards regional programming efforts, educational initiatives, and high-quality patient care to improve the health and security of its community. Children's Hospital continues their obligation and devotion to their region not only with the completion of their CHNA but also with the implementation strategies and planning efforts involving strong partnerships with community organizations, health institutions, and regional partners through a comprehensive implementation strategy plan. Children's Hospital is a strong economic driver in Southern Louisiana with a strong focus on improving the health of the residents in their community and surrounding regions.

Note: The implementation planning strategy report identifies specific approaches and actions to address the community health needs from the 2018 CHNA. Specific timeframes and measures/metrics are tracked internally for reporting purposes. Hospital administration will utilize these measures/metrics to ensure benchmarking efforts are being tracked between each assessment cycle.

Key Community Health Priority 1: Behavioral Health

Mental disorders and substance use disorders affect people of all racial groups and socioeconomic backgrounds. Mental health is defined as a state of well-being in which every individual realizes their own potential, can cope with the normal stresses of life, can work productively and fruitfully, and is able to contribute to their community. Mental health affects how we think, feel, and act. It also helps determine how we handle stress, relate to others, and make choices. Good mental health is freedom from depression, anxiety, and other psychological issues. It also refers to the overall coping mechanisms of an individual. Having a behavioral health condition is not the result of one event but rather multiple linking causes such as genetics, environment, and lifestyle.

People with serious mental and/or substance use disorders often face higher rates of cardiovascular disease, diabetes, respiratory disease, and infectious disease; elevated risk factors due to high rates of smoking, substance misuse, obesity, and unsafe sexual practices; increased vulnerability due to poverty, social isolation, trauma and violence, and incarceration; lack of coordination between mental and primary health care providers; prejudice and discrimination; side effects from psychotropic medications; and, an overall lack of access to health care, particularly preventive care.¹

Providers are approaching patient health with an integrated care model because they realize the importance of treating the whole individual. Behavioral health impacts physical health and vice versa. With proper monitoring and treatment, individuals suffering from behavioral health issues can lead healthy, productive lives and be contributing members of the community. The difficulty lies in identifying these issues and linking these individuals with behavioral health services.

In addition to the growing behavioral health problem in the study region, there is an increased use of drugs. Drug use and its consequences touches every sector of our society. Drug use effects our health and has a significant effect on the criminal justice system. Drug use also endangers the future of our youth. Addiction is a chronic disease, difficult to control as well as being difficult to break. Individuals who take drugs do so for many reasons including environmental influences, genetics, to escape reality, etc. An essential role the community can implement to stem its use is to provide programs towards prevention and reinforcement of keeping drugs and alcohol out of neighborhoods and schools; therefore, providing a safe and secure environment for all community residents. Prevention is a cost-effective approach to promoting safe and healthy communities.

Successful treatment of drug abuse is, most often, a life-long process. Treatment is intensive and expensive and requires a significant investment of time and effort on behalf of health professionals, social services, community-based organizations, the patient's support network, not to mention the patients themselves. Substance abuse treatment often requires multiple attempts to be deemed successful.

Children's Hospital provides programs and services to many in the parish and surrounding regions. Behavioral health was identified as a top need through the 2018 community health needs assessment. While Children's Hospital is not the only health care institution in the region, the following strategies were identified and revealed to address the growing issue. Children's Hospital, in partnership and collaborating with other regional health care organizations, will continue to capitalize on the communities' existing resources to tackle and confront the needs of the region.

Need: Children's Behavioral Health (Mental Health and Substance Abuse)

What is the goal? Provide in-patient and out-patient behavioral health services.

What is the anticipated impact? Provide access to pediatric behavioral health services in the hospital service area.

Strategy -1	Target Population	Actions	Timeframe/Measures	Potential Resources/Partners
Offer behavioral health services to youth in the hospital service area.	Youth 0-21 served by CHNO regardless of ability to pay	Year 1-3: 1. Provide inpatient and outpatient behavioral health services. a. Rapid Treatment Program b. The Child and Adolescent Behavioral Health Center c. Audrey Hepburn CARE Center d. Autism Center Construct and open 51-bed inpatient pediatric Behavioral Health Hospital. Develop strategic plan for growth and sustainability of pediatric behavioral health service line. Explore opportunities to leverage telehealth capabilities to overcome transportation challenges for patients and families served by Children's Hospital.	Year 1-3: Document # of patients served in each program	Resources: Budget, staff time, materials, durable goods, dedicated space Partners: Kingsley House Covenant House Catholic Charities/Metairie Catholic Charitiess Archdiocese of New Orleans Daughters of Charity/Carrollton LSU-HSCD School Based Health Center/at Eleanor McMain Mercy Family Center Jewish Family Services Celebration Hope Center, The Guidance Center, Jefferson Parish Human Services Authority Family Services of Greater New Orleans Metropolitan Human Services District Enhanced Destiny Services Inc. Integrated Behavioral Health LLC. New Pathways New Orleans

Provide care coordination for patients receiving behavioral health services. a. Provide information and connection to community resources as needed to patients and families through the social services department.	# of referrals made	Resources: Staff time, dedicated space, funding Partners: Same
3. Explore opportunities to increase access to behavioral health services in schools.	# of additional opportunities recognized and implemented	Resources: Staff time Partners: Same
Participate in LCMC System-wide activities related to Behavioral Health service offering and community engagement.	TBD	Resources: Staff time Partners: LCMC Health System

Key Community Health Priority 2: Health Literacy

Education plays a critical role in overall public health. Individuals without basic education and life skills are more likely to experience lifelong disadvantages such as lack of job opportunities, poor health outcomes, increased likelihood to engage in risky health behaviors, and a general inability to be self-supporting/productive and or to be a contributing member of society. Reading and reading comprehension skills are important to helping us understand and interact with the world around us.

Education and knowledge are crucial to successfully managing all aspects of life including health care needs, nutrition and food preparation, financial health needs, and basic life skills. Education provides the necessary tools to make informed decisions; where to look for information, determine its validity, and how to interpret and best apply it to the decision at hand.

Health Education/literacy is instrumental to laying a foundation of basic health knowledge and life skills to improve overall public health. The Nation's Report Card is the largest continuing and nationally representative assessment of what our nation's students know and can do in subjects such as mathematics, reading, science, and writing. Standard administration practices are implemented to provide a common measure of student achievement. The National Assessment of Educational Progress (NAEP) is a congressionally mandated project administered by the National Center for Education Statistics (NCES), within the U.S. Department of Education and the Institute of Education Sciences (IES). The NAEP reading scale ranges from zero to 500.

The 2017 Reading State Snapshot Report revealed that the average reading score of Louisiana eighth grade students was 257; lower than the national average score of 265. When compared to the rest of the United States, Louisiana's average reading score was lower than 41 other states/jurisdictions, not significantly different than nine, and only higher than the District of Columbia. The 2017 report also indicated score gaps among different student groups. Black students had an average score that was 27 points lower than white students. Hispanic students had an average score that was 16 points lower than that of white students. Students who were eligible for free/reduced-price school lunch, an indicator of low family income, had an average score that was 24 points lower than students who were not eligible. This performance gap was not significantly different from that in 1998 (20 points).

Education about health in schools is instrumental to laying a foundation of basic health knowledge and life skills to improve overall public health. In recognition of the serious lack of educational performance among students in Louisiana school districts, the Louisiana Department of Education created and implemented the Louisiana Believes initiative. Louisiana Believes is a cohesive academic plan that raises expectations and educational outcomes for students through five priority areas: access to quality early childhood education, academic alignment in every school and classroom, teacher and leader preparation, pathways to college or a career, and supporting struggling schools. As a result of this focus, over the past five years, Louisiana has seen an increase in student performance in every measure both locally and nationally.

Need: Children's Health Literacy

What is the goal? Expand capability to provide culturally and linguistically appropriate health care.

What is the anticipated impact? Increased ability to meet patient care needs of limited English-speaking patients.

Strategy -1	Target Population	Actions	Timeframe/Measures	Potential Resources/Partners
Provide early intervention and preventive health services in the communities served by CHNO.	Youth 0-21 served by CHNO regardless of ability to pay	Ensure providers are aware of the most up to date preventive practices and detection methods by providing outreach and education to local providers.	# of outreach efforts to providers	Resources: Staff time, materials Partners: Families Helping Families Covenant House March of Dimes American Cancer Society New Orleans Office Boys & Girls Club of Southeast Louisiana Baptist Community Ministries Catholic Charities Boy Scouts of America Southeast Louisiana Council
		 Offer general and special pediatric care which includes services to facilitate early intervention with any health issues outside of typical child development including referrals: Child Abuse Care Center Dialysis and Transplant Center Developmental delay clinics Healthy lifestyles clinic 	# of youth served by each area # of referrals	Resources: Staff time Partners: Same
		3. Provide parents with the education and support necessary to facilitate early intervention and preventive care for youth served by CHNO. a. The Parenting Center at Children's Hospital b. Cancer community outreach education	# of parents served # of presentations given	Resources: Staff time Partners: Same

		4. Provide patients with information about and access to healthy options. a. Ambulatory Clinical and Nutritional Support b. Miracle League of Greater New Orleans	# of youth served by each area	Resources: Staff time Partners: Same
Strategy -2	Target Population	Actions	Timeframe/Measures	Potential Resources/Partners
Ensure effective communication with patients and their families through culturally sensitive communications and education.	Youth 0-21 served by CHNO with varying cultural backgrounds (i.e., Latino, Vietnamese, etc.) and residents with limited English skills	1. CHNO will screen patients during admission for their language of preference and provide appropriate translation services for patients that prefer a language other than English. a. Offer a language line for translation b. Offer education and outreach in a variety of languages c. Ensure comprehension of medical documents for patients with limited English-speaking skills.	Year 1-3: # of uses of the translation line (cost and languages) # of classes/educational outreach efforts provided in a language other than English.	Resources: Staff time, cost of language line, cost of document translation and printing Partners: CyroCom, One World, Deaf Action Center
		CHNO will strive to offer culturally sensitive care to patients. a. Offer chaplain services to provide oversight and coordination for religious preferences and practices for a variety of affiliations.	# number of chaplains on staff	Resources: Budget, staff time, materials, durable goods Partners: Community-based Chaplains
		3. CHNO will offer CPR classes to Spanish speaking parents.	# of participants for Spanish speaking language line for CPR	Resources: Staff time Partners: Parenting Center
		4. Participate in LCMC System-wide initiatives related to health literacy.	TBD	Resources: Staff time Partners: LCMC Health System

Key Community Health Priority 3: Access to Care

Access to comprehensive, high-quality health care services is important for promoting and maintaining health, preventing and managing disease, reducing unnecessary disability and premature death, and achieving health equity for all Americans. The Patient Protection and Affordable Care Act (PPACA) of 2010 improved access to health care by providing health insurance for 20 million adults. Despite this increase, significant disparities still exist with all levels of access to care by sex, age, race, ethnicity, education, and family income.ⁱⁱ

Most Americans underuse preventive services and vulnerable populations with social, economic, or environmental disadvantages are even less likely to use these services. Both routine preventive and regular primary care are essential to good health; providers are able to detect and treat health issues early; preventing complications, chronic conditions, and hospitalizations. Individuals without insurance or the financial means to pay out of pocket are less likely to take advantage of routine preventive and primary care. These individuals consume more public health dollars and strain the resources of already overburdened facilities dedicated to free and low-cost care.

The level of access a community has to health care has a tremendous impact on the community's overall health. Several factors including, geography, economics, and culture, etc., contribute to how residents obtain care. Geography impacts the number of providers that are available to patients in a given area as transportation options are limited to some residents. Health problems affect productivity resulting in 69 million workers reporting missed days due to illness each year. Lack of job opportunities can reduce access to affordable health insurance. Both geographic and

economic factors are impacting young residents of the Children's Hospital service area. While there are quality health care resources available to residents within the service area, many residents either cannot afford health services or have additional access issues which affect their ability to obtain and receive care

Characteristically, access to care refers to the utilization of health care services or the ability in which people can obtain health care services. Disparities in health service access can negatively impact and affect an individual's quality of life. High cost of services, transportation issues, and availability of providers are some of the top barriers or problems to accessing health care services. Identifying access to care was a top community need in the Children's Hospital community; as this community need was a top community concern in the 2015 community health needs assessment.

As part of LCMC Health, Children's Hospital provides youths access to health care in the parish and surrounding regions. Access to care was identified as a top need through the 2018 community health needs assessment. While Children's Hospital is not the only health care institution in the region, the following strategies were identified and revealed to address the growing issues. Children's Hospital working in partnership and collaborating with other regional health care organizations, will continue to capitalize on the communities' existing resources to tackle and confront the needs of the region.

Need: Access to Care

What is the goal? Provide access to medical and preventive health services available to youth in our hospital service area.

<u>What is the anticipated impact?</u> Provide and improve access to youth seeking care at Children's Hospital of New Orleans that may not otherwise have access to health services.

Strategy -1	Target Population	Actions	Timeframe/Measures	Potential Resources/Partners
Provide access to medical and preventive health services available to youth in the hospital service area.	Youth 0-21 served by CHNO regardless of ability to pay	 Expand access to medical and preventive care to patients within the community. Expand primary care access points throughout the community Expand specialty care access throughout the community Expand telehealth capabilities to help overcome transportation barriers for patients and families 	Year 1-3: Growth in outpatient volume # Increase in specialty care visits	Resources: 1a. Budget, staff time, materials, durable goods, committed space, cost of clinic operations 1b. Unfunded specialty care, staff time, equipment Partners: Family Service of Greater New Orleans Office/Westbank Louisiana Medicaid/Jefferson Parish West Bank Louisiana Medicaid/Plaquemines Parish Louisiana Medicaid/St. Charles Parish Louisiana Medicaid/St. Charles Parish Daughters of Charity/Metairie City of NO Health Department/School based Dental Van Cohen School Based Health Center

			LSU-HSCD School Based Health Center/At Science and Math Daughters of Charity/St. Cecilia Daughters of Charity/Carrollton One Bunch Hook Up LLC Cheatam Medical Transit, Happy Day Transportation Service A-One Transportation LLC Punctual Transportation LLC New Orleans Regional Transit Authority Crawford Transit Service, Birds Transportation LLC Just around the City Green Light Transportation
	 2. Provide preventative services contributing to overall health improvement of pediatric community including immunizations. a. GNO Immunization Program b. Ambulatory Clinical and Nutritional Support to support healthy eating and lifestyle 	# of Immunizations given # of youth served	Resources: Operational cost, staff time, supplies Partners: Same
	 3. Provide a health insurance coverage option for those families not able to obtain an otherwise sufficient insurance plan. a. Children's Healthcare Assistance Program (CHAP) - assists in providing medical care to our facility to uninsured or under insured patients. b. Offer a Medicaid enroller on site to assist families in applying for Medicaid. 	3a. # of patients Amount of \$ committed 3b. # of Youth assisted	Resources: Operational cost, budget to cover care, staff time, cost of transportation when provided Partners: Same

Participate in LCMC System initiatives designed to expand access to care.	# of access to care initiatives	Resources: Staff time Partners: TBD
5. Own and operate family housing available to families on a sliding fee scale to make it easier for families to stay in close proximity to their children while they receive care at Children's Hospital.	# of families who are enrolled into program # of facilities opened	Resources: Staff time Partners: TBD

Conclusion

LCMC Health was founded by Louisiana's only freestanding chilor hospital, and currently consists of Children's Hospital, Touro, University Medical Center New Orleans, New Orleans East Hospital and West Jefferson Medical Center. In addition to its five hospitals, LCMC Health significantly expanded its footprint and scope in the past several years through a joint ownership agreement with Crescent City Surgical Centre, an urgent care partnership with Premier Health, and a joint ownership agreement with Fairway Medical Center. In 2017, LCMC Health joined the Health Leaders Alliance clinically integrated statewide network, and in 2018 introduced its own clinically integrated network, LCMC Health care Partners, LLC. As a large health system in Louisiana, LCMC Health is uniquely positioned to adapt to the rapidly changing healthcare environment through its size, scale and leadership, and is committed to providing the best care possible for its community.

Children's Hospital will continue to improve health services for children by leveraging the region's resources and assets; while existing and newly developed strategies can be successfully employed. The collection and analysis of primary and secondary data armed the Working Group with sufficient data and resources to identify key health needs. Local, regional, and statewide partners understand the CHNA is an important building block towards future strategies that will improve the health and well-being of residents in their region. Children's Hospital will work closely with

community organizations and regional partners to effectively address and resolve the identified needs.

Children's Hospital took into consideration the ability to address the region's identified needs and viewed the overall short and long-term effects of undertaking the task. Children's Hospital will address the identified needs and view them as positive and encouraging changes. Children's Hospital will complete the necessary action and implementation steps of newly formed activities or revise strategies to assist the underserved and disenfranchised youth population. Future community partnerships and collaboration with other health institutions, organizations, involvement from government leaders, civic organizations, and stakeholders are imperative to the success of addressing the region's needs. The available resources and the ability to track progress related to the implementation strategies will be managed by the health system along with other hospital departments at Children's Hospital to meet the region's need. Tackling the region's needs is a central focus hospital leadership will continue to measure throughout the years. Children's Hospital will continue to work closely with community partners, as the implementation strategy planning report is the first step to an ongoing process to reducing the gaps of health disparities and ensuring all residents have access to the high-quality health care resources available in the region.

Endnotes

iv Ibid.

ⁱ Substance Abuse and Mental Health Services Administration: www.samhsa.gov/wellness-initiative

[&]quot;Healthy People 2020: www.healthypeople.gov/2020/topics-objectives/topic/Access-to-Health-Services

 $[\]label{thm:control} \begin{tabular}{ll} \beg$

Trìpp Umbach