

**2022 CHILDREN'S HEALTH
COMMUNITY HEALTH
NEEDS ASSESSMENT
FINAL REPORT**



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Introduction

Children’s Health has been established as the leading pediatric healthcare system in North Texas through more than 100 years of caring for children and serving as a prominent authority and passionate advocate for the advancement of pediatric health throughout its communities.

A passionate commitment to fulfilling the critical mission, to make life better for children, lies at the heart of a dynamic, growing system, with two full-service hospitals, Children’s Medical Center Dallas and the expanding Children’s Medical Center Plano, the transformative Children’s Medical Center Research Institute at UT Southwestern, numerous specialty centers and urgent care locations, the Children’s Health Andrews Institute for Orthopaedics & Sports Medicine, the Rees-Jones Center for Foster Care Excellence, groundbreaking telehealth services both in and out of schools, and the Children’s Health Care Network, a collaborative network of health providers who work together to provide the best care for children in the community. Children’s Health has a longstanding commitment to serving its communities – one that extends beyond the walls of the hospitals and clinics, meeting families where they live, learn and play. With more than 50 pediatric specialty and subspecialty programs across North Texas and more than 1,300 medical and dental staff, Children’s Health is providing the highest possible quality of care to more children in more places than ever before.

Through community health initiatives, outreach services and a growing network of health providers in the area, Children’s Health is continually expanding and improving its ability to deliver care. This strengthened access will provide better understanding and ability to address the significant health needs of the children and families in the communities, today and for years to come.

Since 1996, Children’s Health has published *Beyond ABC*, a comprehensive report on the quality of life of children in North Texas. The report tracks not only health and safety factors, but also economic and education data. An advisory board, comprised of several dozen community leaders, meets throughout the year to discuss the data and to contribute input from the field.

Beyond ABC is a building block of the organization’s strategic planning, allowing it to maximize its impact on childhood wellbeing through service delivery and advocacy. Children’s Health commits significant resources to facilitate the collaborative needs assessment each year. Children’s Health desires to continue providing clinical programs and services to meet community needs, while also pursuing continuous improvement through existing and future programs to improve the overall health of the communities served. As such, Children’s Health has conducted a Community Health Needs Assessment (CHNA), with primary and secondary data included in the *2021-2022 Beyond ABC Assessing the Well-Being of Children in North Texas (2021-2022 Beyond ABC)* report described above, to ensure community benefit programs and resources are focused on significant health needs as perceived by the community at large, as well as alignment with the Children’s Health mission, services, and strategic priorities.

The Children’s Health CHNA defines health in the broadest sense and recognizes that numerous factors at multiple levels impact children’s health — from health behaviors (e.g., diet and exercise), to clinical care (e.g., access to medical services), to social and economic factors (e.g., education, childcare, nutrition, and housing), to safety. These factors provide a context for how the data for the CHNA was compiled and analyzed. Identified health needs include social determinants that influence an individual’s health.

Background

This report is provided in fulfillment of Internal Revenue Code Section 501(r)(3)(A) which requires a not-for-profit, tax-exempt hospital organization to conduct a Community Health Needs Assessment once every three years and to adopt an implementation strategy to meet the community health needs identified through the CHNA. In accordance with Federal tax regulations, 26 CFR § 1.501(r)-3(b)(1)(iv) the 2022 Children’s Health Community Health Needs Assessment report was approved in December 2022 by the Children’s Health System of Texas Board of Directors, the authorized body for the hospital facilities included in this report as further defined.

Written comments regarding the health needs that have been identified and prioritized in the Community Health Needs Assessment should be directed to:

Children’s Health
Re: 2022 CHNA Comments
1935 Medical District Drive
Dallas, TX 75235
Attn: Communications Department
Mailstop ST9.01

Communities Served by Children’s Health

Children’s Health includes the following licensed hospital facilities:

Children’s Medical Center Dallas located at 1935 Medical District Drive, Dallas, TX

Children’s Medical Center Plano located at 7601 Preston Road, Plano, TX

*Our Children’s House rehabilitation hospital formerly located at 1340 Empire Central, Dallas, TX**



● Children’s Medical Center Dallas

● Children’s Medical Center Plano

**Our Children’s House is permanently closed. Integrated Therapy services previously offered at Our Children’s House relocated to Children’s Medical Center Dallas on July 19, 2022. This includes the rehabilitation, pulmonology and feeding inpatient programs. Outpatient / day programs also relocated.*

Defined Community

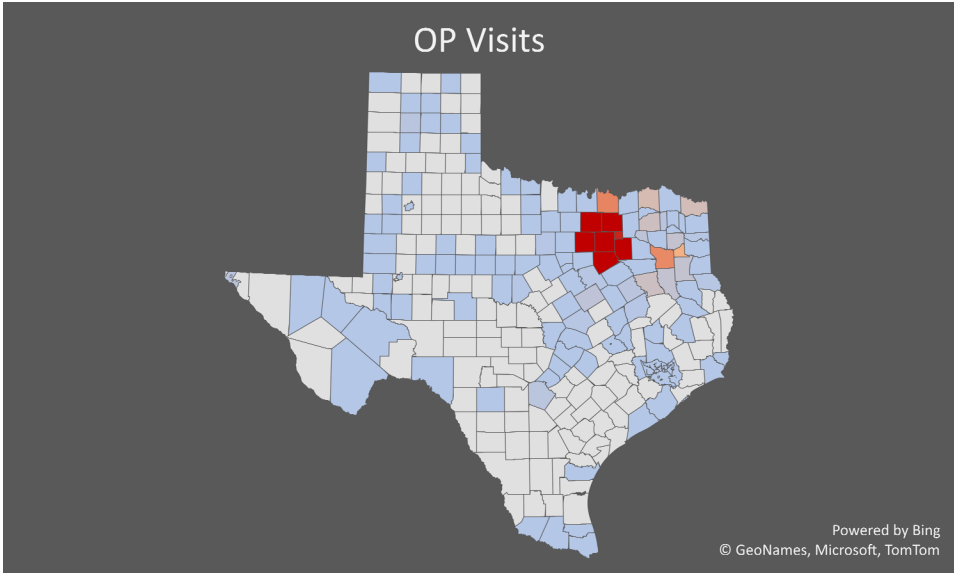
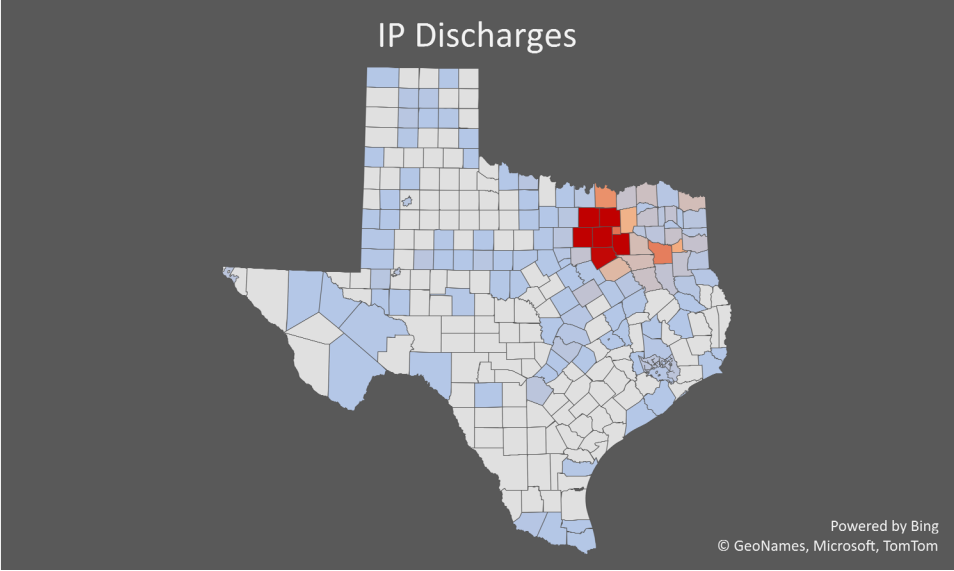
For the purposes of the Community Health Needs Assessment, Children’s Health defined its community based on the geographic area served. The community is further identified by the geographic area from which a significant number of the patients utilizing hospital services reside. Based on the patient origin of inpatient discharges and outpatient visits from fiscal year 2021 and the locations of Children’s Health facilities, management has identified the community served to include the six North Texas counties (Dallas, Collin, Cooke, Denton, Fannin, and Grayson), referred to as the North Texas Corridor in the 2021-2022 *Beyond ABC* report and as the “CHNA Community” within this report. The summary below reports the number of inpatient discharges as well as outpatient visits for the six counties that make up the CHNA Community.

Exhibit 1
Children's Health
Summary of Inpatient and Outpatient Visits by County
January 1, 2021 to December 31, 2021

County	Inpatient Discharges	Percent of Total Discharges	Outpatient Visits	Percent of Total Visits
Dallas	7,473	47.2%	325,358	59.2%
Collin	2,246	14.2%	70,657	12.9%
Denton	1,247	7.9%	32,929	6.0%
Grayson	255	1.6%	4,793	0.9%
Fannin	56	0.4%	1,235	0.2%
Cooke	14	0.1%	433	0.1%
Total CHNA Community	11,291	71.4%	435,405	79.3%
Other Texas Counties	4,087	25.8%	108,352	19.7%
All Other	440	2.8%	5,576	1.0%
Total	15,818	100.0%	549,333	100.0%

Source: Children's Health Cases by County Information

As reported in *Exhibit 1*, the CHNA Community represents 71.4% of inpatient discharges and 79.3% of outpatient visits. Presented below are detailed maps of Texas counties served by Children’s Health by showing the counties shaded by the number inpatient discharges or outpatient visits. Those counties shaded in darkest red represent counties with a significant number of discharges and outpatient visits for Children’s Health.



Community Population and Demographics

Based on the analysis of U.S. Census Bureau American Community Survey 5-Year estimates for 2014 and 2019, performed by the Institute for Urban Policy Research (IUPR), the total youth population for the CHNA Community increased by approximately 24,000 children during the relative period. *Exhibit 2* below shows the estimated 2017 total youth population compared to the 2019 total youth population by county for the CHNA Community.

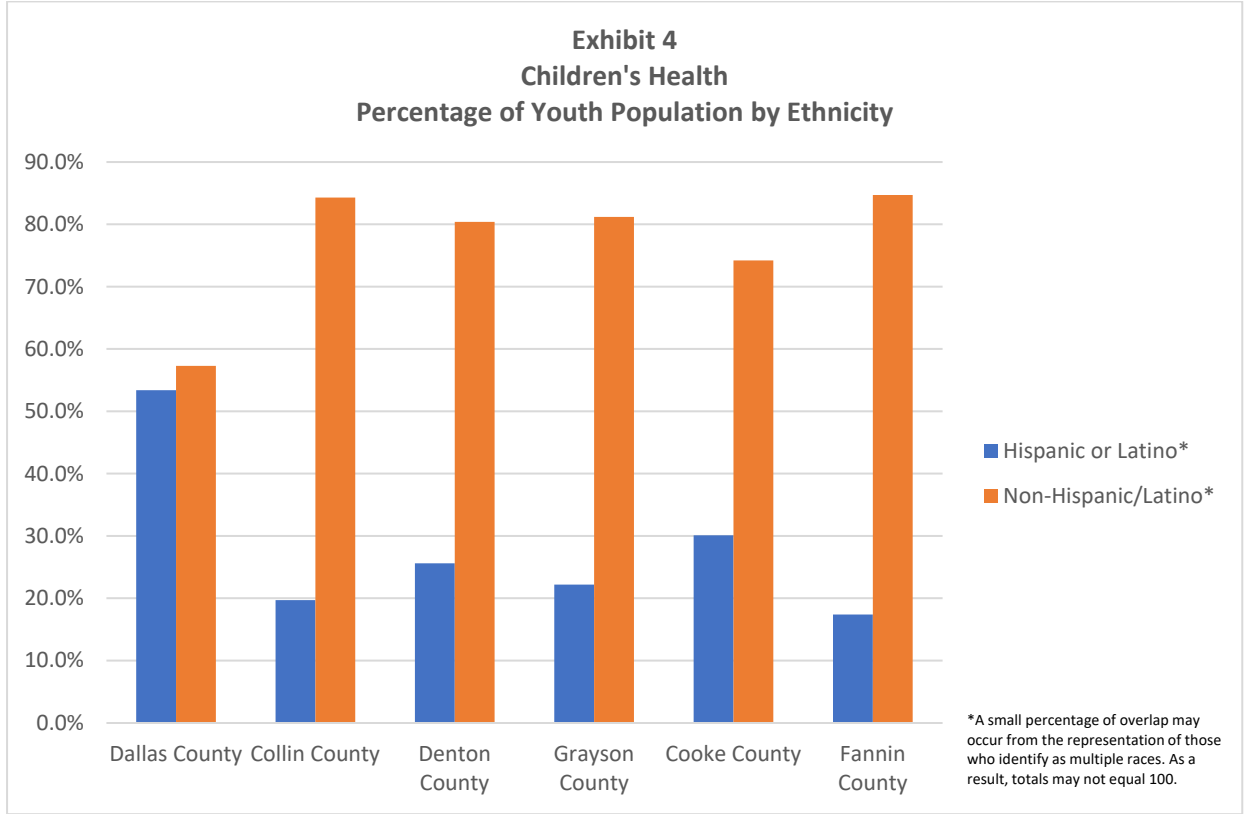
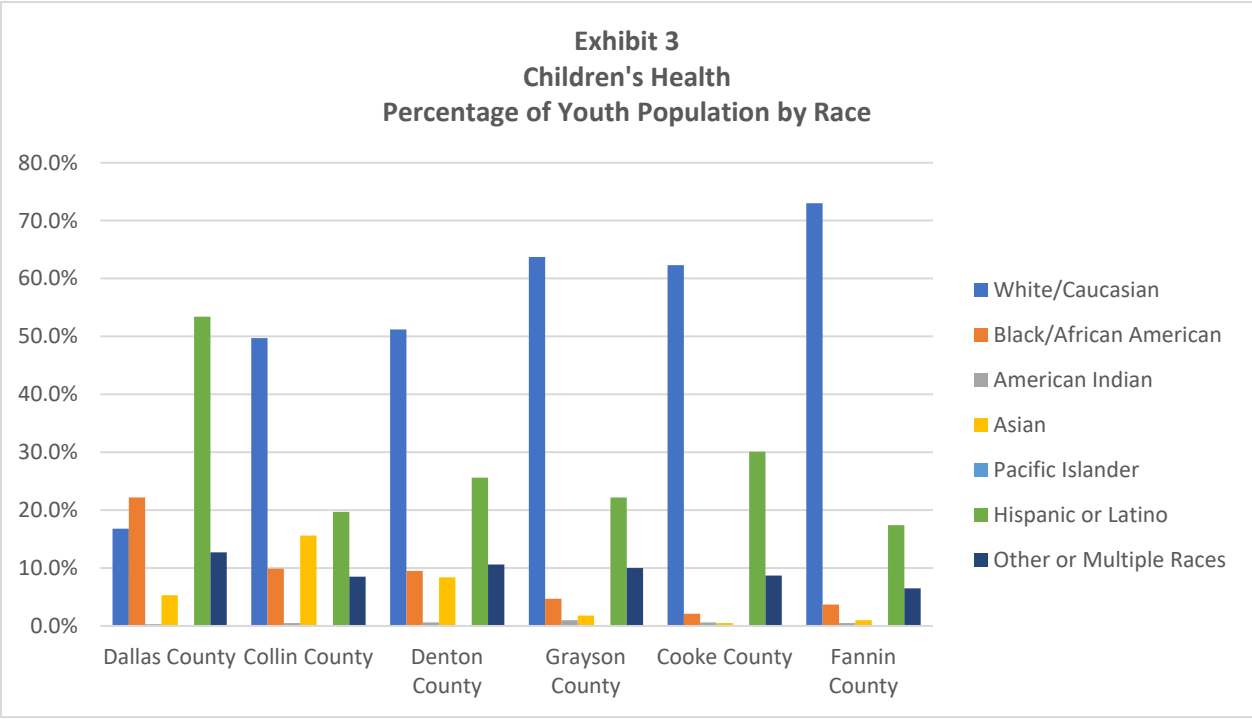
Exhibit 2
Children's Health
Youth Population in CHNA Community

County	2017 Total Youth Population	2019 Total Youth Population	Increase/ (Decrease)	Percent Increase/ (Decrease)
Dallas	681,537	685,833	4,296	0.63%
Collin	245,631	255,940	10,309	4.20%
Denton	200,061	208,142	8,081	4.04%
Grayson	29,999	31,068	1,069	3.56%
Cooke	9,260	9,402	142	1.53%
Fannin	7,127	7,316	189	2.65%
Total CHNA Community	1,173,615	1,197,701	24,086	2.05%

Note: Youth Population refers to children under 18

Source: IUPR analysis of U.S. Census Bureau American Community Survey 5-Year estimates for 2014 and 2019

The charts on the following page show the population by race and ethnicity for the youth population in the CHNA Community. Dallas County has the most diversity among the six counties in the CHNA Community. More than 53% of the youth population in Dallas County are Hispanic or Latino.



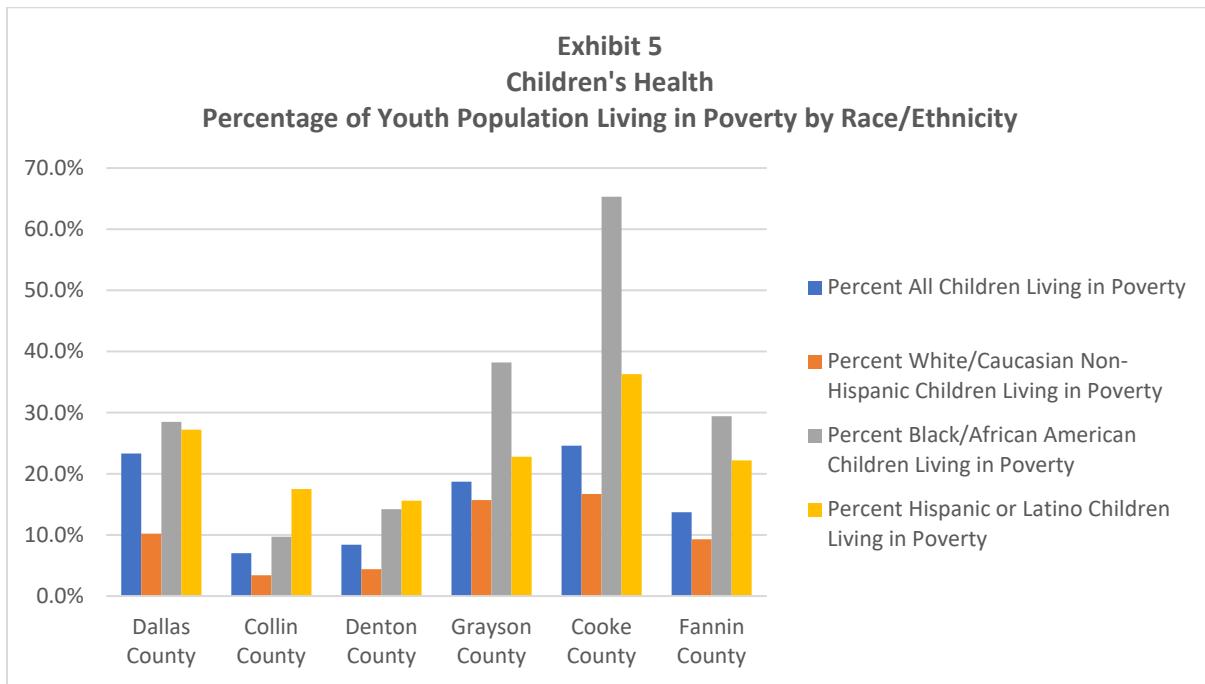
Additional and expanded demographic information for the six counties that make up the CHNA Community can be found in the attached copy of the *2021-2022 Beyond ABC Report, Pages 14-20*.

Socioeconomic Characteristics of the Community

The socioeconomic characteristics of a geographic area influence the way families access health care services for their children and perceive the need for health care services within society. The economic status of an area may be assessed by examining multiple variables within the community. Those variables also have an impact on community health, including household income and poverty, employment, uninsured population and educational attainment for the community. These standard measures will be used to analyze the socioeconomic status of the CHNA Community.

Poverty

The current percentage of all children living in poverty is 23.3% (Dallas), 7.0% (Collin), 8.4% (Denton), 18.7% (Grayson), 24.6% (Cooke), and 13.7% (Fannin). The percentage of all children living in poverty decreased from 2014 to 2019 for each county in the CHNA Community, according to the *2021-2022 Beyond ABC Report*. There was also a noticeable decrease in the proportion of children living in households receiving some form of public assistance for the CHNA Community. *Exhibit 5* reports the percentage of youth living in poverty by race/ethnicity for each county in the CHNA Community.



Poverty is a key driver of health status and is relevant because poverty creates barriers to access, including health services, healthy food choices and other factors that contribute to poor health. There are certain segments of the communities served by Children's Health which have extreme poverty. Although a decrease in the childhood poverty rate in Dallas County was seen over the reporting period, nearly 1 in 4 children in Dallas County still lives in poverty.

Insurance Coverage

Exhibit 6 reports the percentage of children without health insurance coverage for each of the six counties within the CHNA Community over the 5 years of most recent available data. The uninsured population is relevant because lack of insurance is a primary barrier to health care access, including regular primary care, specialty care and other health services that contribute to poor health status.

Exhibit 6
Children's Health
Percent of Children Without Health Insurance

	2015	2016	2017	2018	2019
Dallas	11.7	10.6	14.3	15.2	17.0
Collin	5.8	6.0	8.0	7.8	8.0
Denton	8.3	4.7	7.7	6.7	9.7
Grayson	11.3	13.3	10.7	19.1	15.2
Cooke	11.0	13.0	11.4	12.0	11.4
Fannin	11.2	10.6	10.5	11.2	11.4

Source: U.S. Census Bureau; American Communities Survey, 1Y Estimates (Collin, Dallas, Denton and Grayson) 3Y and 5Y Estimates (Cooke and Fannin)

As reported in the *2021-2022 Beyond ABC Report*, North Texas counties have a considerably greater percentage of uninsured children than the United States as a whole. Nationally, only 5.9 percent of children were uninsured. The percentage of children without health insurance has increased in Dallas County from 11.7 percent in 2015 to 17 percent in 2019; each of the other counties is also up from 2015, although their trends are less stable. And Dallas and Grayson counties reported uninsured rates higher than the state average, which was 12.7 percent for 2019.

Other Social Determinants of Health

Numerous social and economic factors impact the health of children. The following pages and exhibits, summarize information related to certain social determinants as detailed in the *2021-2022 Beyond ABC Report* and provide significant findings for the CHNA Community, such as:

- More than 10,400 children are homeless in the CHNA Community
- Over 212,000 children lack access to enough food for an active and healthy life
- The confirmed number of victims of child abuse and neglect was 10,643 for 2020
- Steady decline over 5 years in licensed childcare facilities within the CHNA Community
- All counties, except Collin, have less than 50% of third graders meet grade level in reading

Housing Instability

As presented in *Exhibit 7*, across the CHNA Community region, counties reported fewer housing-unstable children in 2020 as compared to 2018. Unfortunately, this is due less to a decrease in need than a decrease in detection.

Exhibit 7
Children's Health
Number of Children and Youth without a Permanent Residence

	2015	2016	2017	2018	2019	2020
Dallas	6,821	10,748	9,892	9,643	-	7,248
Collin	2,873	2,934	2,254	2,052	-	1,071
Denton	2,064	2,275	2,086	3,107	-	1,556
Grayson	848	806	806	688	-	498
Cooke	124	101	47	68	-	25
Fannin	105	146	146	171	-	93

Source: Texas Education Agency, Public Information Request

Food Insecurity

The number and percent of children who lack access to enough food have steadily decreased across the CHNA Community according to the 5 years of most recent data reviewed, as shown in *Exhibit 8*. However, due to the COVID-19 pandemic, some estimates suggest that food insecurity may have tripled during the pandemic.

Exhibit 8
Children's Health
Number of Children Lacking Access to Enough Food

		2015	2016	2017	2018	2019
Dallas	Number	162,240	157,870	156,630	145,120	139,800
	Percent	24.2	23.3	22.9	21.1	20.3
Collin	Number	47,920	44,420	45,920	38,920	34,000
	Percent	20.2	18.4	18.7	15.5	13.3
Denton	Number	38,790	36,810	37,700	32,610	28,860
	Percent	20.1	18.7	18.7	15.9	13.8
Grayson	Number	7,480	7,060	6,850	7,190	6,660
	Percent	25.6	23.9	22.8	21.9	19.2
Cooke	Number	2,340	2,270	2,250	2,250	2,050
	Percent	24.7	24.1	23.9	23.7	21.5
Fannin	Number	1,870	1,680	1,630	1,580	1,400
	Percent	26.0	23.6	22.8	21.9	19.2

Source: Feeding America; Hunger Research, Map the Meal Gap

Child Abuse and Neglect

Exhibit 9 below, presents the number and rate per one thousand of cases of child abuse and/or neglect confirmed by Child Protective Services (CPS). As reported in the 2021-2022 *Beyond ABC Report*, some child welfare advocates suggest that inadequate supervision often arises from the lack of available or affordable childcare for working parents, especially those living near or below the poverty line.

Exhibit 9
Children's Health
Confirmed Victims of Child Abuse and Neglect

		2016	2017	2018	2019	2020
Dallas	Number	4,535	6,242	7,174	6,860	7,145
	Rate	6.6	9.0	10.2	9.5	9.8
Collin	Number	1,183	1,149	1,340	1,328	1,139
	Rate	4.6	4.4	5.0	5.2	4.5
Denton	Number	806	932	1,337	1,328	1,568
	Rate	3.8	4.3	6.0	5.2	7.4
Grayson	Number	589	459	509	570	464
	Rate	19.9	15.5	17.2	18.7	15.2
Cooke	Number	206	253	312	195	210
	Rate	21.1	25.7	31.5	21.7	23.4
Fannin	Number	135	99	124	111	117
	Rate	17.7	12.8	16.0	15.9	16.8

Source: Texas Department of Family and Protective Services; Annual Report and Data Book, 2016-2020

Access to Childcare

As seen in Exhibit 10, there has been a steady decline in licensed childcare facilities for 2016-2020. However, childcare slots have not followed a clear trend. More than 1 million children in Texas are eligible to receive childcare subsidies, but only 10 percent of those children receive them. Furthermore, there are 15,000 childcare providers in Texas, with only half participating in the state subsidy program.

Exhibit 10
Children's Health
Licensed Child Care Slots & Licensed Child Care Facilities

		2016	2017	2018	2019	2020
Dallas	Child Care Slots	98,429	95,842	89,611	91,661	91,789
	Child Care Facilities	1,860	1,668	1,508	1,470	1,417
Collin	Child Care Slots	60,992	61,843	63,283	65,784	69,073
	Child Care Facilities	780	758	747	732	735
Denton	Child Care Slots	42,825	45,034	42,497	43,620	43,731
	Child Care Facilities	719	692	655	637	593
Grayson	Child Care Slots	3,538	3,337	3,206	3,264	3,471
	Child Care Facilities	94	90	99	96	81
Cooke	Child Care Slots	1,046	1,089	997	1,017	1,190
	Child Care Facilities	42	35	32	30	30
Fannin	Child Care Slots	787	865	681	681	681
	Child Care Facilities	17	15	15	15	13

Source: Texas Department of Family and Protective Services; Annual Report and Data Book, 2016-2017. Texas Health and Human Services Commission Child Care Licensing Data Book, 2018-2020

Third-Grade Reading Proficiency

Students who perform below grade level in third-grade reading are 4 times more likely to drop out of high school. And 88 percent of those who failed to complete high school struggled to read in the third grade. *Exhibit 10* summarizes the State of Texas Assessments of Academic Readiness (STAAR) reading scores for the CHNA Community six counties as outlined in the *2021-2022 Beyond ABC Report*.

Exhibit 11
Children's Health
Percent of third-graders meeting STAAR standards in reading

		2015	2016	2017	2018	2019
Dallas	Approach Grade Level	72.0	68.4	67.0	74.5	71.7
	Meets Grade Level	35.6	38.8	40.5	41.0	40.4
Collin	Approach Grade Level	89.2	86.7	85.0	88.1	86.9
	Meets Grade Level	58.7	61.8	62.5	60.3	60.5
Denton	Approach Grade Level	81.7	80.1	80.2	82.9	79.9
	Meets Grade Level	46.4	52.1	54.4	50.3	49.2
Grayson	Approach Grade Level	84.6	77.9	76.4	80.8	76.0
	Meets Grade Level	46.9	42.5	46.2	45.0	43.1
Cooke	Approach Grade Level	78.7	73.6	76.1	77.0	76.6
	Meets Grade Level	36.4	43.2	44.4	46.4	39.3
Fannin	Approach Grade Level	81.1	75.3	74.4	84.2	77.6
	Meets Grade Level	39.8	43.1	43.9	44.9	45.1

Source: Texas Education Agency: STAAR Aggregate Data

Additional information on the presented factors and others, as well as historical rates and other detailed information, can be found in the attached copy of the *2021-2022 Beyond ABC Report, Pages 21-103*.

Health Status of the Community

Summary of *Beyond ABC*

As previously mentioned, since 1996, Children’s Health has published *Beyond ABC*, an in-depth report on the quality of life of children in North Texas. The *2021-2022 Beyond ABC* report is an in-depth report which tracks a wide variety of issues, with data on poverty levels, Medicaid enrollment, reading levels, college readiness, teenage pregnancies, foster care, abuse and neglect, immunizations, diabetes, asthma, mental health, school meals, homelessness, child support, food insecurity and infant and child mortality, among many other factors affecting pediatric health and well-being.

Many agencies, both governmental and private, collect data about the health of children. However, the *2021-2022 Beyond ABC* report provides a critical baseline that allows Children’s Health to compare certain key indicators over time to tell us how children are doing and evaluate how our children’s lives are getting better – or worse. While the *2021-2022 Beyond ABC* report provides a baseline against which Children’s Health can measure the effects of their implementation strategy, the document also provides a regular channel by which its users can regularly find the state of North Texas’ children. The report is popular with legislators and policy officials, as well as non-profit and government agency leaders, all of whom rely on the publication to inform and shape their response to the changing needs of our children.

Key Findings

Health

- The rates of uninsured children for all six North Texas counties in 2019, were each well above the national average of 5.9%. 17.0% of Dallas County children are uninsured.
- Dallas County reported its lowest number of children receiving service through the Children with Special Health Care Needs Services Program and the largest waitlist of any year since 2014.
- Medicaid coverage in Collin, Denton, Grayson, Cooke, and Fannin counties has remained consistent for the past five years, with only slight fluctuations. Dallas County has experienced a consistent decline in Children’s Medicaid enrollees since 2016.
- An estimated 165,522 children in the CHNA Community suffer from an emotional disturbance or addictive disorder including an estimated 32,147 being considered serious emotional disturbance or addictive disorder.
- The counties which make up the CHNA Community have a lower rate of teenage pregnancy than the national rate of 16.7 births per 1,000.
- Over the past 5 years, preterm births have risen, especially in Dallas, Collin, Denton and Fannin counties.
- Dallas County continues to have the highest infant mortality rate across North Texas and is the only one that exceeds the state average and national goal.
- The estimated number of children with developmental disabilities has been steadily increasing across the CHNA Community since 2013.
- Collin and Denton counties have experienced the most significant decreases in vaccination rates, dropping to 90 percent for several vaccines in Collin and as low as 85 percent in Denton.
- Cancer rates for Texas children, and specifically in North Texas, are considerably higher than the national average.
- All counties within the CHNA Community observed a net increase in the number of diabetes cases compared to the previous year.
- More than an estimated 80,000 children in North Texas had a current asthma diagnosis in 2019.

Economic Security

- Across the state, approximately one in five children lived in poverty in 2019. In 2019, 203,119 children in North Texas lived below the poverty line. Dallas and Cooke counties exceed the state and national rates, with 23 and 25 percent respectively.
- More than 1 million children in Texas are in need of subsidized childcare services; however less than 10% receive assistance.
- The number of homeless students enrolled in public schools from kindergarten through 12th grade has increased more than 100 percent nationwide from 2008 to 2019. Texas reported 114,055 students were homeless in 2019.
- In 2019, more than 212,000 children in North Texas were considered food insecure.
- In Dallas County, 73.2% of all students are eligible to receive free or reduced-price lunches.
- Across Texas, more than a million children are eligible to receive childcare subsidies, but only 10 percent of those children receive them.

Safety

- In 2020, the CHNA Community had 10,643 confirmed cases of child abuse and neglect.
- Despite an increase in approved homes, Texas currently faces a significant shortage of homes and beds for foster youth. There is a large gap between the number of approved homes and the number of children who need a foster home.
- Many advocates characterize the current foster care situation as a crisis.
- In 2020, the CHNA Community had 933 confirmed victims of sexual abuse, a decrease of 3.2% from the 964 in 2019.
- Suicide is the second-leading cause of death among children ages 10-24.
- North Texas had 570 children hospitalizations for traumatic injuries in 2019, a 21.9% increase from 470 reported for 2018.
- In 2019, more than 10,300 students in North Texas were disciplined for possession of alcohol, tobacco or a controlled substance on school grounds. That represents a 17% increase from 2018.

Education

- There is a notable decline in kindergarten readiness from 2016 through 2020 for Dallas, Collin, Denton, Grayson, and Fannin counties. Only Cooke County has demonstrated sustained growth over the past five years.
- STAAR (State of Texas Assessments and Academic Readiness) results for the 2018-2019 school year reflect a slight decline in third-grade reading performance across the region.
- Across North Texas, within the CHNA Community, more than 100,000 students received special education services during the 2019-2020 school year.
- In response to pandemic-related closures, Dallas ISD conducted an internal investigation and discovered that it failed to serve more than 2,000 students with disabilities during the previous two school years.
- College readiness varies widely across the counties within the CHNA Community, with Collin County reporting nearly 70 percent college readiness and Fannin County reporting under 40 percent.

Process and Methods used to Conduct the CHNA

Children's Health conducted a Community Health Needs Assessment to support its mission responding to the needs in the communities it serves and to comply with the *Patient Protection and Affordable Care Act of 2010* and the requirements imposed on federally tax-exempt hospital facilities by Internal Revenue Code Section 501(r)(3). Identified health needs were prioritized in order to facilitate the effective allocation of hospital resources to respond to the identified health needs. The following steps were conducted as part of the Children's Health CHNA:

- The community served by Children's Health was defined by utilizing inpatient and outpatient data regarding patient origin and is inclusive of medically underserved, low-income, minority populations and people with limited English proficiency. This process is further described in *Communities Served by Children's Health*.
- Population demographics and socioeconomic characteristics of the community were gathered and assessed utilizing various sources.
- The health status of the community was assessed by reviewing community health status indicators from the 2021-2022 *Beyond ABC* report and its other sources. Health indicators with significant opportunity for improvement were noted.
- Input representing the broad interests of the community was also obtained through the *Beyond ABC* Advisory Board from the 2021-2022 *Beyond ABC: Assessing the Well-Being of Children in North Texas* report.
- Identified health needs were then prioritized considering the priorities identified in the 2021-2022 *Beyond ABC* report as well as the ability for Children's Health to impact the overall health of children based on alignment with its mission and services provided.
- An inventory of health care facilities and other community resources potentially available to address the significant health needs identified through the CHNA was prepared.
- Evaluation and review of the 2019 CHNA and the community benefit initiatives which were implemented over the course of the last three years.
- Priority areas were determined, and an Implementation Strategy was developed for 2023 through 2025.

Limitations and Information Gaps

As with all data collection and review efforts, limitations exist related to the CHNA's research methods that should be acknowledged. Years of the most current data available differ by data source. In some instances, 2020 may be the most current year available for data, while 2018 may be the most recent for other sources.

Additionally, the input from *Beyond ABC's* Advisory Board should not be considered statistically representative of a larger population. The Advisory Board is comprised of members that are key stakeholders in the community who are knowledgeable of key issues impacting the health and wellbeing, specifically of children. The Advisory Board's recommendations are the results of the trusted insights, expertise and ideas presented by the members.

Input Received from Persons Representing the Community

2021-2022 Beyond ABC Advisory Board

In addition to publishing the *2021-2022 Beyond ABC* report, the *Beyond ABC* process includes the utilization of an advisory board to evaluate the data and recommend focus areas. Each year, Children's Health recruits a citizen advisory board made up of key stakeholders serving children and knowledgeable in public health. These community leaders meet regularly to discuss and analyze the issues and current conditions affecting the health and well-being of children in North Texas.

The Advisory Board Members contribute their experience, insights, and expert recommendations for the *Beyond ABC* report, as well as recommendations for advocates and public officials in order to improve the lives and health of children. Members of recent advisory boards come from sources that represent the broad interest of the community, including Dallas County Health and Human Services, a local public health department, along with many members from other agencies and organizations representing the interests of the medically underserved, low-income, and minority populations within the community. The full list of members for the *2021-2022 Beyond ABC* Advisory Board is included in *Appendix B*.

As provided in the *2021-2022 Beyond ABC* report, the *Beyond ABC* Advisory Board proposed the following recommendations:

OVERARCHING RECOMMENDATION

Strengthen mental and behavioral health care for Texas children and adolescents.

In 2019, the Advisory Board made an overarching recommendation to address children's mental and behavioral health needs. Unfortunately, the Covid-19 pandemic has only worsened the mental health stress on children and youth, who have experienced more social isolation, academic challenges and home stressors than ever before. Last year, emergency rooms saw a 24 percent increase in mental health-related visits for children ages 5-11 and a 31 percent increase for older children. The Centers for Disease Control and Prevention (CDC) also reported a significant increase in emergency department visits for adolescent suicide attempts, especially among adolescent girls. The effects of the pandemic on mental health highlight the need to advance policy solutions now that improve early intervention and prevention while helping kids in crisis. The Advisory Board supports dedicated investment to build mental health capacity across the continuum of care and increase access to behavioral health services.

HEALTH RECOMMENDATIONS

Improve health coverage for uninsured Texas children and families.

Texas still leads the nation in the number of uninsured children, with nearly 1 million Texas children uninsured in 2019. The 87th Texas Legislature made some progress to expand health coverage for certain populations, including babies and new mothers on Medicaid, and to allow more eligible children to remain enrolled in Medicaid by reducing unnecessary mid-year eligibility reviews. However, many low-income families still face challenges accessing and maintaining health insurance coverage, which can limit kids' access to care and negatively impact their health outcomes and quality of life. The Advisory Board advocates for policies that both improve health coverage for vulnerable Texans and ensure the safety net remains strong for all kids.

Support greater community health equity.

Health equity is about working to ensure everyone has equal access to high-quality health care – regardless of race, ethnicity and geography. Racial disparities in health are apparent in areas like chronic illnesses and preexisting conditions, infant and maternal mortality rates, and health insurance coverage and access. The pandemic compounded existing inequities, disproportionately hitting vulnerable communities of color the hardest and revealing glaring disparities in Covid-19 testing, cases, deaths and vaccination rates. Geography is also often a barrier to care, contributing to worse health outcomes for residents in underserved urban and rural communities. Technology and telemedicine, if utilized effectively, can help close these gaps and improve health equity for vulnerable populations. The Advisory Board advocates for innovative programs and strategies that target and address health disparities so that all children can live healthier lives.

ECONOMIC SECURITY RECOMMENDATIONS

Improve housing stability throughout North Texas.

Before the Covid-19 pandemic, North Texas faced an affordable housing and homelessness crisis. The job loss driven by the pandemic worsened housing issues in the region, leaving many families unable to afford their rent or mortgage payments and facing eviction. At the same time, the North Texas housing market has boomed, and home prices have soared to record highs, beyond the reach for many middle-income families. Safe, stable housing is essential for the health, safety and economic well-being of children and families. The Advisory Board supports immediate solutions – like rental and financial assistance for those facing eviction – that stabilize families now, as well as long-term solutions that expand affordable housing options throughout the region.

Invest in a stronger, more effective early childhood education and childcare system.

Working parents with young children rely on childcare so they can work and contribute to a healthy economy. While the pandemic has highlighted the essential role of childcare and early childhood education, it has also hurt the childcare infrastructure in North Texas. Many childcare centers were forced to close due to reduced or unpredictable enrollment and a sharp increase in operating costs, further limiting parents' options for affordable, high-quality childcare. Without access to this essential service, parents face significant challenges trying to maintain a stable job. The Advisory Board recommends the state invest in early childhood education infrastructure throughout the region to better support families and working parents.

SAFETY RECOMMENDATIONS

Support safe and effective homes and services for kids in the foster care system.

While the focus should be on keeping children safe with their families, when possible, children who do enter state conservatorship need safe and stable placements. Unfortunately, the pandemic increased the risk of children experiencing abuse or neglect and entering foster care. It also exacerbated the shortage of safe and effective homes, placements and services for children who are removed from their families. Kids in foster care need support and appropriate care and living environments that ensure they can heal and thrive. The Advisory Board supports improved resources and oversight to ensure more safe and effective homes and services are available to children in foster care.

Combat and prevent online threats to children.

In today's digital age, threats to our children are ever-increasing, from cyberbullying and device dependency to exploitation, stalking and trafficking. As children spend more time online for their socializing and entertainment, more perpetrators are finding new ways to prey on them. Too often, the victims are seeking refuge online from other problems like domestic abuse and family instability, making them more vulnerable to the false promises made by perpetrators. The Advisory Board commends the actions the 87th Texas Legislature took to fight trafficking and child exploitation and urges the state and local governments to be vigilant in toughening punishments for those who victimize children.

EDUCATION RECOMMENDATIONS

Address unfinished learning and close achievement gaps.

The pandemic especially impacted student learning, with many students falling behind in subjects like reading and math and struggling to make up lost ground amid widening achievement gaps. Education officials have reported lower academic engagement rates, lower attendance rates and online learning fatigue. Further, a growing number of high school students are not completing their educations or pursuing postsecondary education, a situation exacerbated by remote schooling and economic stressors. The Advisory Board supports funding and programs to recover unfinished learning and address systemic challenges so that students at all academic levels of achievement can excel.

Bridge the digital and technology resource divide.

Often those who lack access to high-speed internet and technology and are on the wrong side of the "digital divide" are Texas' most vulnerable children, including those of color, low-income students in urban and rural areas, English learners, students with disabilities and homeless students. The Covid-19 crisis has underscored the equity and learning implications of these gaps, as students in underserved neighborhoods and school districts with limited technology and broadband access have suffered more unfinished learning during the pandemic than their peers. The Advisory Board encourages state and district leaders to invest additional resources to expand access to technology and broadband in underserved areas. Not only will this help close gaps in education and digital learning, but also expand access to health care services and economic resources delivered through telemedicine and technology.

Public Comments – Comments on any prior CHNA conducted by Children’s Health

As of November 1, 2022, Children’s Health has not received any written comments from any person regarding the most recently conducted CHNA, most recently adopted Implementation Strategy, any prior conducted CHNA, or any prior adopted Implementation Strategy.

Prioritization of Identified Health Needs

Priority setting is a required step in the community benefit planning process. The IRS regulations indicate that the CHNA must provide a prioritized description of the community health needs identified through the CHNA and include a description of the process and criteria used in prioritizing significant health needs.

Using findings obtained through the collection of primary and secondary data, Children’s Health compiled a listing of identified needs. To facilitate prioritization of identified health needs, a modified Hanlon Method was used to rank the identified needs. The Hanlon Method is a well-respected technique which objectively takes into consideration explicitly defined criteria such as magnitude of each need.

The following factors were used to prioritize the identified health needs:

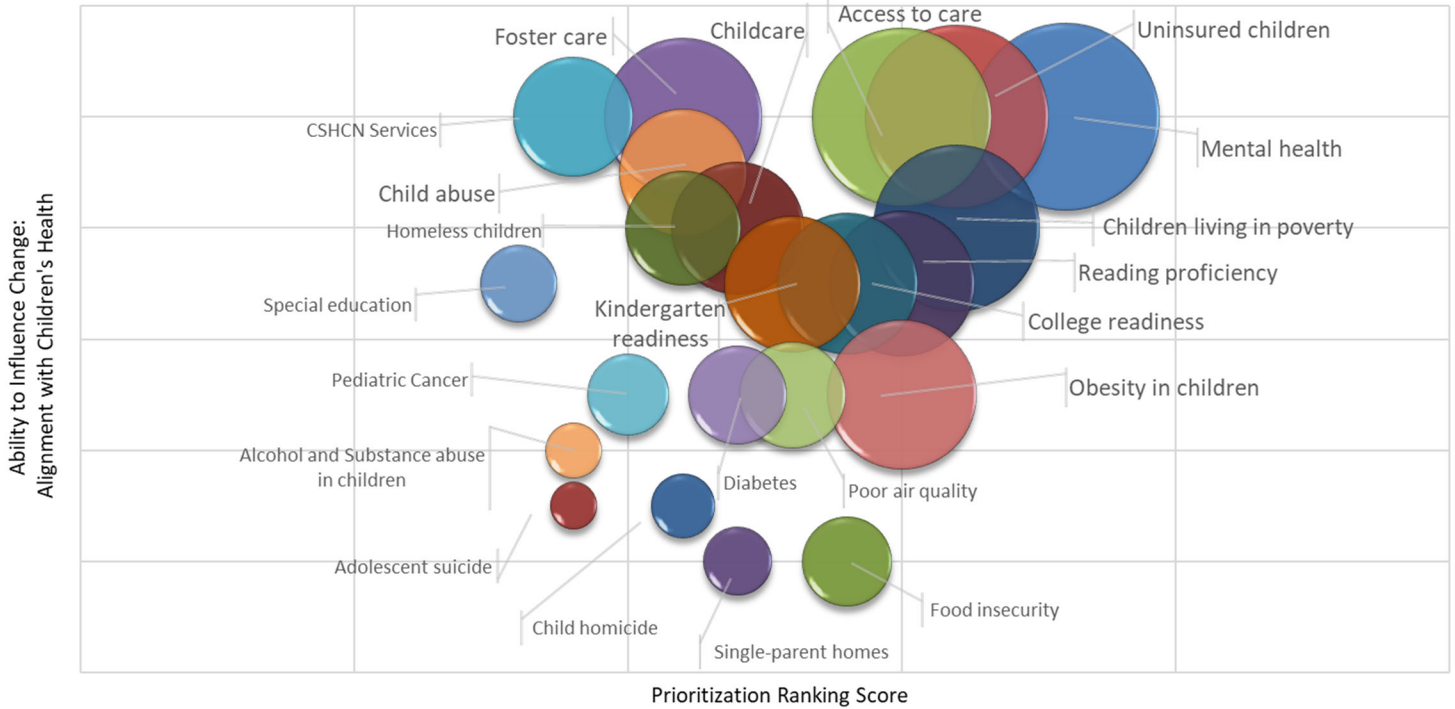
1. Reach: The size of the problems and number of people affected
2. Severity: The seriousness and consequences of not addressing the needs
3. Exposure: The impact of the issues on vulnerable populations and people groups

Significant needs were further reviewed and analyzed regarding:

1. Alignment with Children’s Health: how closely the need aligns with the Children’s Health mission, current and key service lines, and/or strategic priorities
2. Alignment with *Beyond ABC* Advisory Board: how closely the need aligns with the solicited input and recommendations from the 2021-2022 *Beyond ABC* Advisory Board.

The prioritization table is included in *Appendix C*. Based on the prioritization described above, identified health needs were plotted on the chart below.

Exhibit 10
Children's Health
Prioritization of Identified Needs: 2022



Based on the information gathered through this Community Health Needs Assessment and the prioritization process described above, the health needs below have been identified as the most significant health needs in the community. Opportunities for health improvement exist in each area.

Health	Economic Security	Safety	Education
<ul style="list-style-type: none"> • Mental and behavioral health among children • Insurance coverage • Access to pediatric care • Childhood obesity 	<ul style="list-style-type: none"> • Children living in poverty • Childcare 	<ul style="list-style-type: none"> • Foster care • Child abuse and neglect 	<ul style="list-style-type: none"> • Reading proficiency • College readiness • Kindergarten readiness

Resources Potentially Available to Address the Significant Health Needs

HEALTH

Mental and behavioral health for children

School-Based TeleBehavioral Health program at Children’s Health connects students with licensed behavioral health providers at school via secure mobile technology, eliminating traditional barriers to access such as limited provider availability and transportation issues. As of the end of the 2020- 2021 school year, the program was in 208 elementary, middle, and high school campuses across nine North Texas counties.

www.childrens.com/specialties-services/virtual-care/school-based-programs/school-telebehavioral-health

Insurance coverage

Children’s Health Outreach representatives help children in North Texas without health insurance get low-cost health care through CHIP or no-cost healthcare with Children’s Medicaid. Both programs cover office visits, prescription drugs, dental care, eye exams, glasses and more. Outreach representatives help families apply for assistance throughout the community, whether it is at a child’s school, library, or other community-based location. Children’s Health also works with community partners which include churches, non-profit organizations, and area school districts to ensure North Texas families have access to healthcare.

Children's Health Coverage Coalition, formerly Texas CHIP Coalition, brings together state and local organizations to support adequate state funding and program improvements for the Children’s Health Insurance Program (CHIP) and Children’s Medicaid.

www.texaschip.org

Cover Texas Now is seeking a sustainable health care system and to provide quality, affordable health coverage.

www.covertexasnow.org

Access to pediatric care

Los Barrios Unidos Community Clinic is a federally funded community health center in Dallas County designed to provide comprehensive primary care services that are accessible and affordable to all North Texans.

www.losbarriosunidos.org

Parkland Youth and Family Centers is a partnership between Parkland Health & Hospital System and Dallas Independent School District to create health care facilities on school campuses.

www.parklandhealth.org/locations?taxonomy=youth-family-centers

PediPlace is a not-for-profit pediatric clinic that offers a broad scope of health services in North Texas, providing a medical home to uninsured and underinsured patients.

www.pediplace.org

Childhood obesity

Get Up & Go offers its Weight Management Program, designed by physicians and registered dietitians. Get Up and Go addresses the needs of children with high weight or obesity by creating awareness and understanding of how lifestyle choices affect health. This free 10-week physician-referred weight management program for children and families is offered through the Children's Health and YMCA partnership.

www.childrens.com/specialties-services/specialty-centers-and-programs/endocrinology/programs-and-services/get-up-and-go

ECONOMIC SECURITY

Children living in poverty

Building Community Workshop a nonprofit design center working to improve communities' livability and viability.

www.bcworkshop.org

City Square Community Health Services is changing the trajectory of peoples' lives by fighting the causes and effects of poverty through service, advocacy, and friendship.

www.citysquare.org

Dallas Housing Authority provides quality, affordable housing to low-income families and individuals through the effective and efficient administration of housing assistance programs across North Texas.

www.dhantx.com

Childcare

Child Care Group provides childcare, early childhood care and education services outside the home for low-income families.

www.childcaregroup.org

SAFETY

Foster care

Children's Health Rees-Jones Center for Foster Care Excellence is the only clinic in North Texas that treats the unique physical and emotional needs of children in foster care.

www.childrens.com/specialties-services/specialty-centers-and-programs/health-care-for-foster-children

Child abuse and neglect

Prevent Child Abuse Texas is a statewide non-profit organization working to prevent child abuse and neglect in all its forms throughout Texas.

www.preventchildabuse.org

TexProtects: Champions for Safe Children protects Texas children from the trauma of abuse and neglect and empowers families to thrive through education, research, and advocacy.

www.texprotects.org

Reading proficiency & College readiness

United Way of Metropolitan Dallas (UWMD) is focused on preparing kids to graduate and succeed, helping families leave poverty permanently and enabling people to live healthy, responsible lives. As a part of its Aspire United 2030 goals, UWMD is working to increase by 50% the number of third graders who read on grade level.

www.unitedwaydallas.org

Kindergarten readiness

Head Start of Greater Dallas provides children with the foundation of skills and knowledge they need to be successful in school and life and fosters self-reliant families and communities.

www.hsgd.org

Other Community and Partnership Resources

Education and outreach programs

At Children's Health the primary concern every hour of every day is with the health and well-being of all children. Children's Health provides a number of education and outreach programs to keep your kids healthy and safe.

Partner Organizations

Children's Health created the Health and Wellness Alliance for Children which represents a partnership with more than 60 local, state, and national organizations dedicated to measurably improving the health and well-being of children. Members of the Health and Wellness Alliance for Children cross all sectors, including health, education, government, nonprofits and the faith community and partner to address critical pediatric health issues. For more information on resources potentially available to address the significant health needs identified through this CHNA, visit:

www.childrens.com/keeping-families-healthy/community-resources

Evaluation of Impact on Significant Health Needs from Prior CHNA

The Children's Health Implementation Strategy: 2020-2022 outlined a plan developed from the identified priorities in the 2019 CHNA. Listed below is each priority from the Children's Health Implementation Strategy: 2020-2022 along with the relevant strategies and impacts completed by Children's Health and community partners over the last three years. The list is grouped into four focus areas: Health, Economic Security, Safety, and Education.

HEALTH

Priority Recommendation: Increase the number of insured children and safeguard access to CHIP and Medicaid.

The Children's Health CHIP and Medicaid outreach program helps families access low-cost or no-cost health insurance coverage through the Children's Health Insurance Program (CHIP) or Children's Medicaid, respectively. Both programs cover office visits, prescription drugs, dental care, eye exams, glasses and more. Dedicated outreach representatives help families apply for assistance throughout the community, whether it is at a child's school, library, or other community location. In 2020, the Children's Health Community Outreach Team directly served almost 3,800 children and families by assisting with CHIP and Medicaid enrollment and referrals to health and wellness resources in the community.

Priority Recommendation: Promote strategies to increase child immunization rates and combat vaccine hesitancy.

Children's Health became an advocate for and a source of Covid-19 vaccinations. To begin, all staff, as well as their household members, were offered the vaccines soon after they were approved for emergency use. Once the vaccines were approved for children ages 12 or older, Children's Health began to offer vaccinations to patients in May 2021. Vaccinations were offered at Children's Health Dallas and Plano campuses, in addition to hosting pop-up vaccination sites in Southern Dallas, Plano and Richardson. To accompany the grassroots vaccination efforts, Children's Health launched an energetic outreach campaign enlisting health expert to inform parents and guardians about the benefits of getting children vaccinated.

ECONOMIC SECURITY

Priority Recommendation: Ensure that all working Texas parents have access to affordable, safe and quality childcare.

Children's Health continued to partner with local organizations, such as Child Care Group which provides childcare, early childhood care and education services outside the home for low-income families in the area. Children's Health also continued to collaborate with regional coalitions dedicated to advocating for affordable, accessible, and quality childcare.

Priority Recommendation: Expand viable transportation options to connect more people with jobs.

Children's Health connected with school nurses in more than 250 schools across nearly 30 school districts to deliver school-based telehealth services to students at school. The telehealth services are provided through innovative video technology, eliminating traditional barriers to access such as transportation issues.

SAFETY

Priority Recommendations:

Expand trauma-informed care education, training, and intervention across the child welfare system. --and--

Strengthen resources for child abuse prevention programs to keep children safe at home.

Children's Health continued to support and strengthen the Rees-Jones Center for Foster Care Excellence. It is the only clinic in North Texas dedicated exclusively to providing integrated primary medical care for children in foster care. The Center's providers are experienced in treating victims of abuse and neglect and provide a wide range of support to caregivers and families. Through health services research, policy analysis and medical education, its experts promote policies and practices that advance care and outcomes for children and families involved in the child welfare system.

EDUCATION

Priority Recommendation: Increase education and training opportunities for teachers, particularly in cultural diversity and mental health.

Children's Health worked to expand access to behavioral health services for children when and where they need them most. The school-based telebehavioral health program connects students with licensed behavioral health providers at school via secure mobile technology. As of the end of the 2020-2021 school year, the program was in 208 elementary, middle, and high school campuses across nine North Texas counties.

Priority Recommendation: Strengthen the quality of early childhood education and care.

Children's Health Continue working with regional community-based groups coordinating advocacy efforts and seeking increased funding for quality early learning and care.

Joint CHNA Report

This 2022 Community Health Needs Assessment report is intended to serve as the Joint CHNA Report for the following licensed hospital facilities:

- Children’s Medical Center Dallas,
- Children’s Medical Center Plano, and
- *Our Children’s House**

This Joint CHNA report is prepared from an integrated health care system perspective with the operating licensed hospital facilities collaborating to identify community needs and to allocate resources effectively.

**Our Children’s House is permanently closed. Integrated Therapy services previously offered at Our Children’s House relocated to Children’s Medical Center Dallas on July 19, 2022. This includes the rehabilitation, pulmonology and feeding inpatient programs. Outpatient / day programs also relocated.*

Appendix A: 2021-2022 *Beyond ABC*

A copy of the 2021-2022 *Beyond ABC* report can be downloaded at the following web address:

<https://www.childrens.com/keeping-families-healthy/dfw-childrens-health-assessment>

Appendix B: 2021-2022 Beyond ABC Advisory Board

Philip Huang, M.D. *Director, Dallas County Health and Human Services*
Stacie Adams *Vice President, External Affairs, Axxess*
Missy Bender *Trustee in Residence, Raise Your Hand Texas*
Eric Bridges *Executive Director, Texoma Council of Governments*
Nicole S. Bursey *Executive Director, Frisco Family Services*
Colleen Campbell *Executive Director, Assistance Center of Collin County*
Alyson Dietrich, J.D. *Second Asst. District Attorney and Chief of the Family Justice Div., Collin County DA's Office*
Joel Durbin *Chief Impact Officer, The Concilio*
Brooke Etie, LCSW *Vice President, Voucher Programs, Dallas Housing Authority*
Jenny Eyer *Vice President, Health Strategies, American Heart Association*
Martha Fernandez *Senior Director, Employer Resource Center, Dallas College*
Jennifer Finley, RN, NCSN *Director, Health Services, Dallas ISD*
Jordan Gates, LCSW *Assistant Director, Clinical and Professional Services, Genesis Women's Shelter*
Genesis Gavino *Resilience Officer, City of Dallas*
Courtney Gober, Ph.D. *Assistant Superintendent for Student, Family and Community Services, Plano ISD*
Allison Harding *Senior Director, Career and Financial Services, Jewish Family Service of Greater Dallas*
Mita Havlick *Executive Director, Dallas Education Foundation*
Valerie Hawthorne, Ph.D. *Director of Government Relations, North Texas Food Bank*
Tosha Herron-Bruff *Senior Vice President, Community Engagement, Dallas Regional Chamber*
Jason Isham, LMFT, CCM *Director, Integrated Behavioral Health, Children's Health*
Chelsea Jeffery *Director, Early Matters Dallas, The Commit Partnership*
Mona Kafeel *Executive Director, Texas Muslim Women's Foundation*
Diane Kazlow, LBSW *Director of Special Projects, LifePath Systems*
Steve Love *President and Chief Executive Officer, Dallas-Fort Worth Hospital Council*
Stephanie Mace *Vice President, Strong Communities, United Way of Metropolitan Dallas*
Leonor Marquez *Chief Executive Officer, Los Barrios Unidos*
Brittany McGowan *Education Specialist, Dallas Children's Advocacy Center*
Jill McLeigh, Ph.D. *Director of Policy, Advocacy and Research, Rees-Jones Center for Foster Care Excellence*
Julie Morris *Director of Media Activism, Children at Risk*
Brenda Payne *Assistant Superintendent of Administrative Services, Richardson ISD*
Dan Powers, LCSW *Chief Operating Officer, Children's Advocacy Center of Collin County*
Joli Robinson *President and Chief Executive Officer, Metro Dallas Homeless Alliance (formerly Vice President of Government Affairs and Public Policy, Habitat for Humanity)*
Jan Rugg *Manager, Public Affairs, Atmos Energy*
Ana Schaller, Ph.D. *Director of Education Services, Catholic Charities Dallas*
Lori Schwarz, AICP *Director, Neighborhood Services, City of Plano*
Monica Shortino *Director, Social Innovation, Capital One*
Jess Trudeau *Director of Strategic Initiatives, TexProtects*
Linda Turner *Vice President, Community Outreach and Administration, ChildCareGroup*
Laura Vogel, Ph.D. *Director of Therapeutic Services, Momentous Institute*
Melissa Willmarth *Executive Director, The Hope Clinic of McKinney*
Emily Zoog *Business Development Officer, Vice President, Veritex Community Bank*

Appendix C: Health Needs Scoring & Prioritization Process

Category	Identified Needs	Reach	Severity	Exposure	Total Ranking	Alignment with Beyond ABC Advisory Board Recommendation	Alignment with Children's Health Programs and Strategic Priorities	Total Alignment	Strategic Prioritization Score
Health	Increasing rates of children suffering from an emotional disturbance or addictive disorder	5	4	5	14	5	5	10	24
Health	High rates of uninsured children	5	4	5	14	5	5	10	24
Health	Lack of access to physicians for persons on Medicaid or CHIP	4	5	5	14	5	5	10	24
Economic Security	Children living in poverty	5	4	5	14	5	3	8	22
Safety	Shortage of homes and beds for foster youth	2	4	5	11	5	5	10	21
Economic Security	Access to child care	5	3	5	13	5	3	8	21
Health	Obesity among children	5	5	5	15	-	5	5	20
Safety	Child abuse and neglect	2	4	5	11	5	4	9	20
Education	Reading proficiency for third graders	5	3	5	13	5	2	7	20
Education	Lack of college readiness	5	3	5	13	5	2	7	20
Education	Kindergarten readiness	5	3	5	13	5	2	7	20
Health	Lack of access to services for children with special health care needs	2	3	4	9	5	5	10	19
Economic Security	Homeless children	2	4	5	11	5	3	8	19
Health	Poor air quality	3	5	5	13	-	5	5	18
Health	Diabetes prevalence among children	2	5	5	12	-	5	5	17
Economic Security	Child food insecurity	5	4	5	14	-	2	2	16
Education	Growth in number of students receiving special education	3	2	3	8	5	2	7	15
Health	High rates of children diagnosed with cancer	2	5	3	10	-	5	5	15
Safety	Child homicide	1	5	5	11	-	3	3	14
Economic Security	Children living in single-parent families	5	2	5	12	-	2	2	14
Safety	Alcohol and substance abuse among children	2	4	3	9	-	4	4	13
Safety	Adolescent suicide	1	5	3	9	-	3	3	12

Number of affected individuals based on assessment data

Reach	Score
Greater than 200,000	5
100,000 - 200,000	4
50,000 - 99,999	3
1,000 - 49,999	2
Less than 1,000	1

Projected consequences or outcomes if unaddressed

Severity	Score
Extreme/Possibly Fatal	5
Life altering	4
Significant	3
Nominal	2
None/Beneficial	1

Impact on vulnerable people groups and populations

Exposure	Score
Significant	5
Moderate	4
Limited	3
Neutral/Unknown	2
None/Beneficial	1

Included as a priority within Beyond ABC's recommendations

Recommendation	Score
Priority	5
Not specific	-

Degree of alignment with Children's Health programs and strategic priorities

Alignment	Score
Fully aligned	5
Partially aligned	4
Community Partner	3
Out of scope/Supportive	2
Not relevant	1

2023-2025 CHILDREN'S HEALTH COMMUNITY HEALTH NEEDS IMPLEMENTATION STRATEGY



Introduction

In fulfillment of Internal Revenue Code Section 501(r)(3)(A) which requires a not-for-profit, tax-exempt hospital organization to conduct a Community Health Needs Assessment (CHNA) once every three years and to adopt an implementation strategy to meet the community health needs identified through the CHNA. In accordance with Federal tax regulations, 26 CFR § 1.501(r)-3(a)(2) the 2023-2025 Children's Health Implementation Strategy was approved in December 2022 by the Children's Health System of Texas Board of Directors, the authorized body for the hospital facilities included in this report as further defined.

Communities Served

As established within the 2022 Children's Health Community Health Needs Assessment report (CHNA report), Children's Health defined its community based on the geographic area served. The community is further identified by the geographic area from which a significant number of the patients utilizing hospital services reside. Based on the patient origin of inpatient discharges and outpatient visits from fiscal year 2021 and the locations of Children's Health facilities, management has identified the community served to include the six North Texas counties (Dallas, Collin, Cooke, Denton, Fannin, and Grayson), referred to as the North Texas Corridor in the *2021-2022 Beyond ABC* report and as the "CHNA Community" within the CHNA report.

Joint Implementation Strategies

The 2023-2025 Children's Health Implementation Strategy is the written plan intended to serve as the Joint Implementation Strategies, according to Federal tax regulations, 26 CFR § 1.501(r)-3(c)(4) for Children's Health, which includes the following licensed hospital facilities:

- Children's Medical Center Dallas (CMCD), and
- Children's Medical Center Plano (CMCP)

This Joint Implementation Strategy is prepared from an integrated health care system perspective with the operating licensed hospital facilities collaborating to identify community needs and to collectively allocate resources effectively.

Prioritization of Identified Health Needs

Priority setting is a required step in the community benefit planning process. The IRS regulations indicate that the CHNA must provide a prioritized description of the community health needs identified through the CHNA and include a description of the process and criteria used in prioritizing significant health needs.

Using findings obtained through the collection of primary and secondary data, Children’s Health compiled a listing of identified needs. To facilitate prioritization of identified health needs, a modified Hanlon Method was used to rank the identified needs. The Hanlon Method is a well-respected technique which objectively takes into consideration explicitly defined criteria such as magnitude of each need.

The following factors were used to prioritize the identified health needs:

1. Reach: The size of the problems and number of people affected
2. Severity: The seriousness and consequences of not addressing the needs
3. Exposure: The impact of the issues on vulnerable populations and people groups

Significant needs were further reviewed and analyzed regarding:

1. Alignment with Children’s Health: how closely the need aligns with the Children’s Health mission, current and key service lines, and/or strategic priorities
2. Alignment with *Beyond ABC* Advisory Board: how closely the need aligns with the solicited input and recommendations from the 2021-2022 *Beyond ABC* Advisory Board.

Based on the information gathered through this Community Health Needs Assessment and the prioritization process described within the CHNA report, the health needs below have been identified as the most significant health needs in the community. Opportunities for health improvement exist in each area.

Health	Economic Security	Safety	Education
<ul style="list-style-type: none"> • Mental and behavioral health among children • Insurance coverage • Access to pediatric care • Childhood obesity 	<ul style="list-style-type: none"> • Children living in poverty • Childcare 	<ul style="list-style-type: none"> • Foster care • Child abuse and neglect 	<ul style="list-style-type: none"> • Reading proficiency • College readiness • Kindergarten readiness

Children’s Health Implementation Strategy: 2023-2025

Children’s Health will seek to complement existing programs and initiatives for 2023 through 2025 to respond to community health needs as identified in this CHNA. The plan outlined below has been developed from the findings and recommendations made in the Children’s Health *Beyond ABC* research process and after review of our 2019 implementation strategy. This implementation plan focuses on the four same focus areas as the *Beyond ABC* process: Health, Economic Security, Safety and Education. In accordance with Internal Revenue Code Section 501(r)(3)(A)(ii), the plan outlined in the following tables describe the actions Children’s Health intends to take to address the health needs over the following three-year period, anticipated or potential impact from actions taken, and the resources and collaborations committed to addressing the health needs of the community.

Mental and Behavioral Health

Action No. 1	Strengthen mental and behavioral health care for children and adolescents in the community by funding the addition of an ~ 100 bed child and adolescent unit at the new State psychiatric hospital in Dallas.
Anticipated or Potential Impact	Greater access to behavioral health services for more North Texas children and adolescents with complex mental health needs to address the mental health crisis affecting pediatric patients in the community.
Committed Resources (CMCD & CMCP) & Collaboration	Children’s Health, inclusive of Children's Medical Center Dallas and Children's Medical Center Plano, is funding the build-out of an ~ 100 bed child and adolescent unit at the new State psychiatric hospital in Dallas. The 200-bed adult hospital is being funded by the State of Texas and scheduled to open in Q3 2025. Planning for the child and adolescent unit is currently underway and it is anticipated this unit will open in Q2 2026. UT Southwestern through a contract with Texas Health and Human Services Commissions will operate both the adult and children and adolescent units.

Action No. 2	Strengthen mental and behavioral health care for children and adolescents in the community.
Anticipated or Potential Impact	<p>The Children's Health Behavioral Health Integration and Guidance (BHIG) initiative is focused on addressing the pediatric mental health epidemic by redistributing when and where children's mental health concerns are assessed and managed. The efforts of the initiative are guided at effectively and sustainably equipping and empowering pediatricians across North Texas to incorporate mental health services into standard primary care practice. The shift will lead to early intervention; convenient and trusted care management; a lower prevalence in severe cases; and reduced pressure on the limited mental health specialists.</p> <p>BHIG offers an achievable, affordable solution that will benefit children, their families, pediatricians, and the larger health care system.</p>
Committed Resources (CMCD & CMCP) & Collaboration	The combined efforts of Children's Health, inclusive of Children's Medical Center Dallas and Children's Medical Center Plano, and the Meadows Mental Health Policy Institute are responsible for and committed to developing the new approach to addressing pediatric mental health care needs.

Insurance Coverage

Action	Improve health coverage for uninsured Texas children and families.
Anticipated or Potential Impact	Reduce the number of uninsured children in the State. Lack of access to or ability to maintain health insurance limits the access many children have to the care they need. Increasing the rates of insured children has the potential to positively impact health outcomes and quality of life.
Committed Resources (CMCD & CMCP) & Collaboration	Through its CHIP and Medicaid Outreach program, Children's Health, inclusive of Children's Medical Center Dallas and Children's Medical Center Plano, is committed to helping families access and enroll in low or no cost health insurance coverage through the Children's Health Insurance Program (CHIP) or Children's Medicaid. Children's Health, inclusive of Children's Medical Center Dallas and Children's Medical Center Plano, will continue its collaboration with Children's Health Coverage Coalition (fka. Texas CHIP Coalition), Cover Texas Now, and regional coalitions working on strategies to promote CHIP and Children's Medicaid.

Access to Care

Action No. 1	Support greater access to emergency care by expanding the qualifications for financial assistance for patients receiving care from a Children's Health provider.
Anticipated or Potential Impact	Increase in patients receiving the emergency care they need, where situational circumstances may have previously prevented or hindered them to seek care.
Committed Resources (CMCD & CMCP) & Collaboration	Children's Health, inclusive of Children's Medical Center Dallas and Children's Medical Center Plano, has expanded its Financial Assistance Policy, as follows, Financial Assistance will be available to all individuals seen in a Children's Health Provider's emergency department and who do not have the resources to pay for the services, regardless of residency or citizenship status, including patients who have no permanent address or insurance coverage and those without access to the required application documentation.

Action No. 2	Support greater community health equity by advancing programs that provide greater access to care.
Anticipated or Potential Impact	Ensure everyone has equal access to high-quality health care – regardless of race, ethnicity, and geography. If utilized effectively, technology and telemedicine can make significant strides towards improving health equity for vulnerable populations.
Committed Resources (CMCD & CMCP) & Collaboration	Children's Health, inclusive of Children's Medical Center Dallas and Children's Medical Center Plano, is working to expand access to care through its School-Based Telehealth, School Telehealth at Home, and School-Based TeleBehavioral Health programs.

Childhood Obesity

Action	Offer programs and services focused on pediatric healthy weight management.
Anticipated or Potential Impact	Reduce and help prevent chronic conditions and diseases that come from being overweight or having obesity. The goal is to help children reach a healthier weight they can keep throughout their life.
Committed Resources (CMCD & CMCP) & Collaboration	<p>Children’s Health, inclusive of Children's Medical Center Dallas and Children's Medical Center Plano, is committed to offering a wide range of treatments and resources that address the specific needs of the whole child with maintaining healthy weight and achieving optimal growth.</p> <p>Through its Get Up & Go programs, including the Weight Management Program offered in partnership with the YMCA of Metropolitan Dallas, Children’s Health is dedicated to empowering families to make lasting healthy lifestyle changes.</p>

Foster care & Child abuse and neglect

Action	Support safe and effective homes and services for kids in the foster care system.
Anticipated or Potential Impact	Advance care and outcomes for children and families involved in the child welfare system, through health services research, policy analysis and medical education. Our goal is to support caregivers and help neglected and abused foster children become happy, healthy adults.
Committed Resources (CMCD & CMCP) & Collaboration	<p>Children's Health, inclusive of Children's Medical Center Dallas and Children's Medical Center Plano, is committed to providing integrated primary medical care for children in foster care, through its Rees-Jones Center for Foster Care Excellence. The clinic is the only one of its kind in North Texas, dedicated to treating the unique physical and emotional needs of children in foster care.</p> <p>Through the Rees-Jones Center's Community Development Program, team members work every day with caregivers, child welfare professionals, CASA advocates, judges, and attorneys. In addition, collaboration happens with other community partners, such as the Rees-Jones Center's Family Advisory Council, UT Southwestern, and Region 3 Foster Care Consortium.</p>

Children living in poverty

Action	Support and partner with community organizations dedicated to combating child poverty.
Anticipated or Potential Impact	Measurable improvement to child poverty rates that furthers the health and well-being of children
Committed Resources (CMCD & CMCP) & Collaboration	<p>Children's Health, inclusive of Children's Medical Center Dallas and Children's Medical Center Plano, serves as a member of the Dallas Coalition for Hunger Solutions, which is focused on providing education and advocacy opportunities for different programs that impact food security for families such as the Supplemental Nutrition Assistance Program (SNAP).</p> <p>The Children's Health Community Outreach Team also helps eligible families and children enroll in other government assistance programs, such as SNAP, and provides referrals to additional community resources and services.</p>

Childcare

Action	Advocate and champion for more effective early childhood education and childcare system.
Anticipated or Potential Impact	Access to affordable, safe, and quality childcare for all working parents, including low-income families.
Committed Resources (CMCD & CMCP) & Collaboration	Children's Health, inclusive of Children's Medical Center Dallas and Children's Medical Center Plano, will continue its participation in the Collin County Early Childhood Coalition and the Early Matters Dallas Coalition. These broad-based coalition groups are dedicated to working together to raise awareness about the importance of quality early education, coordinate advocacy efforts and increase funding for quality early learning to ultimately ensure a strong future workforce.

Achievement gaps: Reading proficiency, College readiness, & Kindergarten readiness

Action	Support efforts to address unfinished learning and achievement gaps, through initiatives to keep children healthy.
Anticipated or Potential Impact	Decrease the amount of time kids are out of school due to illness, thereby increasing the amount of time spent on learning. Research shows that improved health will lead to increased academic success.
Committed Resources (CMCD & CMCP) & Collaboration	<p>Children's Health, inclusive of Children's Medical Center Dallas and Children's Medical Center Plano, is partnering with local schools on several exciting new initiatives to keep children healthy. From wellness and prevention to chronic illness management, the school-based health program objectives are to ensure optimal health care outcomes for children. These programs are designed to improve health literacy.</p> <p>In addition, Children's Health, through the Health and Wellness Alliance for Children, partners with other local organization such as:</p> <ul style="list-style-type: none"> - <i>HEAD START of Greater Dallas, Inc.</i> which provides children with the foundation of skills and knowledge they need to be successful in school and life and fosters self-reliant families and communities. - <i>United Way of Metropolitan Dallas</i> with a focus on preparing kids to graduate and succeed, helping families leave poverty permanently and enabling people to live healthy, responsible lives.

Health Needs Not Being Addressed

Children's Health is focusing on the needs outlined in the tables above, in order that the health needs of the community are more effectively addressed. Partnerships and collaborations were identified in the Community Health Needs Assessment (CHNA) report as important building blocks to meeting community health needs. Children's Health does not have the capacity or resources to meet all the needs of the community, given its focused mission of making life better for children. Strategic partnerships with other healthcare providers, along with partnerships with schools and community-based organizations allow Children's Health to create and support a network of resources, such as the Health and Wellness Alliance for Children, that can be leveraged to address a wider array of the health needs of patients and families within the community.

Contact Information

Comments or questions regarding the Children's Health Community Health Needs Assessment should be directed to:

Children's Health
Re: 2022 CHNA Comments
1935 Medical District Drive
Dallas, TX 75235
Attn: Communications Department
Mailstop ST9.01