

# Implementation Strategy

Arkansas Children's Hospital

2020-  
2022



Arkansas  
Children's

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## Executive Summary

Arkansas Children's, Inc. is the only healthcare system in the state solely dedicated to caring for more than 700,000 children in Arkansas. This status gives the organization a unique ability to shape the landscape of pediatric care in Arkansas and transform the health of children throughout the region. The private, nonprofit organization includes two pediatric hospitals, a pediatric research institute and USDA nutrition center, a philanthropic foundation, a nursery alliance, statewide clinics, and many education and outreach programs.

Arkansas Children's Hospital (ACH) is a 336-bed, Magnet-recognized facility in Little Rock operating the state's only Level I pediatric trauma center; the state's only burn center; the state's only Level IV neonatal intensive care unit; the state's only pediatric intensive care unit; and the state's only nationally recognized pediatric transport program. Generous philanthropic and volunteer engagement has sustained Arkansas Children's since it began as an orphanage in 1912, and today that ensures the system can fulfill our promise: Unprecedented child health. Defined and delivered.

Internal Revenue Service (IRS) requires formalized periodic needs assessments for nonprofit hospitals. From September 2018 through February 2019, ACH staff gathered data for the 2019 Community Health Needs Assessment (CHNA). The CHNA provides ACH the opportunity to understand and prioritize its community's health needs through input gathered from community members, public health experts, and existing data sets. It also satisfies the requirements of the IRS for a tri-annual needs assessment for nonprofit hospitals. For the purposes of the CHNA, ACH defines its community as all children under age 18 in the state of Arkansas (2017 population: 705,718.) The following data sources contributed to the wide range of input gathered from community members and organizations who represent children's health interests:

- 16 focus groups targeted to parents and children's service providers across Arkansas
- 39 key informant interviews targeted to child health thought leaders and subject matter experts
- A telephone survey of 401 Arkansas parents that was statistically significant at the state level
- A comprehensive review of child-specific secondary data from local, state, and national sources

Resulting data were analyzed and prioritized into 10 priority themes based on public health and qualitative research methods. Additional perspective is added to each theme through seven cross-cutting factors, including transportation and substance use, which were mentioned frequently as contributing elements to multiple priority themes. The themes, in priority order, are:

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

This Implementation Strategy outlines three-year goals, expected outcomes, resources, and key stakeholders for each health need.

## Implementations strategy Requirements:

The 2019 CHNA was approved by the ACH Board of Directors in May 2019. ACH then completed this associated Implementation Strategy. Approval by the governing body is required in October 2019. The Implementation Strategy outlines actions ACH will take from 2020-2022 to address the community health needs found in the CHNA. ACH must also identify health needs the hospital facility will not address and explain why. For each health need, the Implementation Strategy:

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



## Current Resources to Address Health Needs:

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

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

## Recommendation 1:

Improve parenting supports by promoting parent- and caregiver-friendly networks and support services within communities.

**Focus area: Parenting Supports**

**Long-term leading indicator: Infant Mortality**

Proposed New Actions:	Anticipated Impact:	Stakeholder Groups:
Improve supports to families with infants, such as through universal home visiting or other parenting supportive programs.	Communities will have better access to evidence-based resources and education for families with newborns.	Arkansas Children's Care Network (ACCN), Arkansas Children's Nursery Alliance, Arkansas Home Visiting Network, Family Connects
Create safe sleep resources that target multiple generations of caregivers. The resources are intended to make generation-inclusive, appropriate, safe sleep images available for use.	Partners will be more intentional about providing positive images of safe sleep practices seen in public including grandparents and other non-direct caregivers in educational efforts.	Arkansas Press Association, Arkansas Department of Health Infant and Child Death Review (ADH ICDR), Cribs for Kids, Arkansas Children's Strategic Marketing, ACH Injury Prevention Center (IPC), Arkansas Children's Nursery Alliance

<b>Continuing Initiatives:</b>	<b>Anticipated Impact:</b>	<b>Stakeholder Groups:</b>
Continue to support work that plans, implements, and evaluates evidence-based home visiting programs in all counties in Arkansas such as through the AR Home Visiting Network.	More families with young children across Arkansas will receive support and guidance to raise healthy children.	Arkansas Home Visiting Network
Continue to support infant mortality prevention through research, education, and community programs such as Safety Baby Showers.	Communities will have increased access to evidence-based supports that are shown to reduce infant mortality outside of hospitals.	AR Dept. of Health, Arkansas Center for Health Improvement (ACHI), ACH IPC
Continue to support motor vehicle safety for infants and children through research, education, and community programs such as the ACH Safety Zone partnership for product distribution and trainings for car seat technicians.	Fewer vehicular infant deaths in the community, outside of hospitals.	AR State Highway & Transportation Dept., AR State Police, ACH IPC

## Recommendation 2:

Improve child poverty rates and reduce the negative impacts of child poverty by addressing the social determinants of health in communities.

**Focus area: Social Issues**

**Long-term leading indicator: Child Poverty**

Proposed New Actions:	Anticipated Impact:	Stakeholder Groups:
Establish a board committee to assess ability to address the social determinants of health in the neighborhood immediately surrounding Arkansas Children’s Hospital.	Increased capacity for local neighborhood organizations to identify and address social determinants of health issues, like housing, safety, and childcare, through partnerships with ACH and other organizations, possibly including patient navigation.	LRSD, community groups, Excel by 8, Predict-Align-Prevent, ACH Medical-Legal Partnership, ACH Community Outreach, ACHI, Arkansas Children’s Hospital Child Advocay and Public Health (ACH CAPH), UAMS
Develop a culture of resource sharing between ACH, partners, and community organizations.	Improved access to available resources and stronger partnerships to move forward to improved technical solutions to resource sharing.	ACCN, ACH Social Work, ACH Population Health
Support understanding of the importance of the health implications of housing and Earned Income Tax Credits (EITC).	Increased awareness of the connections between child health, housing and tax credits.	Arkansas Advocates for Children and Families (AACF), Children’s Health Watch (CHW), The Natural Wonders Partnership Council (NWPC), ACH CAPH, Predict-Align-Prevent

<b>Continuing Initiatives:</b>	<b>Anticipated Impact:</b>	<b>Stakeholder Groups:</b>
Evaluate the effectiveness of the ACH Innovation Fund that provides support to projects that will impact child health.	ACH gains better insight into how community partners use these funds to implement innovative, timely projects to directly impact child health.	ACH CAPH, NWPC
Continue to support work that provides civil legal assistance to qualifying patients and their families such as through the ACH Medical-Legal Partnership.	More families can address health-harming legal needs, reducing social burdens.	ACH Medical-Legal Partnership, Legal Aid of AR, pro-bono volunteers
Continue to disseminate the Social Needs Screener in at least three ACH primary care clinics, Circle of Friends clinic, GPC, and Southwest Little Rock clinic.	More patient families receive referrals and resources based on their specific social needs.	ACH Population Health
Continue to support future interest in health care careers such as through the Excel program for Little Rock School District high school students	Students are exposed to a wide variety of careers in the health care field.	LRSD, ACH Community Outreach, ACH facilities

### Recommendation 3:

Empower parents and communities to address mental health issues and prevent tobacco and substance use.

**Focus area: Mental Health and Substance Use**

**Long-term leading indicator: Child Trauma (Adverse Childhood Experiences)**

Proposed New Actions:	Anticipated Impact:	Stakeholder Groups:
Teach parents how to be advocates for their child’s mental and physical health. Equip caregivers to have conversations about various mental health topics, including substance use, bullying, gender, and self-harm.	Develop parent support groups and implement a plan to provide evidence-based education to parents and caregivers on how to talk to their kids about various mental health topics.	ACH IPC, National Violent Death Reporting System, other Arkansas hospital systems, Infant and Child Death Review, Arkansas Behavioral Health Integrated Network, Arkansas AWARE, NWPC Mental Health and Substance Use group
Minimize the risks of Neonatal Abstinence Syndrome (NAS) by building a coalition of partners dedicated to prevention of substance abuse during pregnancy.	Collaborate with ongoing work to address NAS and opioid, tobacco/nicotine and alcohol abuse in the community.	UAMS Women’s Mental Health Clinic, ADH task force (on items related to Garret’s Law), ACH Safe Care Team, Arkansas Children’s Nursery Alliance
Support positive mental health by connecting school staff with evidence-based trainings such as Mental Health First Aid, Kognito, and tobacco, nicotine and vaping cessation modules.	Broader access to resources and increased options for accessing evidence-based trainings in schools.	ADH, Arkansas Department of Education, Project AWARE, Project Prevent Youth Council (PPYC), NWPC Mental Health and Substance Use group

<b>Continuing Initiatives:</b>	<b>Anticipated Impact:</b>	<b>Stakeholder Groups:</b>
Continue to support patients and their families to appropriately triage and manage their behavioral health care, through resources like the ACH behavioral health help call line.	Parents and caregivers will be able to appropriately navigate behavioral health care for their children, based on advice from an on-call nurse.	ACH Children’s Specialty Services
Continue to support work that provides, increases, and improves support and assistance for bereaved children and families in Arkansas, through resources like the ACH Center for Good Mourning.	More children and families will participate in a quality program to assist in the bereavement process.	ACH Center for Good Mourning
Continue to support grant-funded prevention and cessation projects such as the Project Prevent Youth Council that build teams of leaders in secondary schools around the state to address youth tobacco, nicotine, and vaping use.	More students across Arkansas exposed to evidence-based information and activities to support tobacco, nicotine, and vaping prevention.	AR Dept. of Health, PPYC

### Recommendation 4:

Expand equitable access to care for children in Arkansas.

**Focus area: Equitable Access to Care**

**Long-term leading indicator: Well-Child visits (Screening Ratio)**

Proposed New Actions:	Anticipated Impact:	Stakeholder Groups:
Address potential loss in enrollment and child health insurance coverage due to public charge rules changes. The new rules may block citizenship admissibility because of use of public benefits.	Increased understanding of public benefits eligibility through communication with partners, especially with immigrant groups.	SWLR Clinic, ACH Diversity and Inclusion Committee, ACH Government Relations, AC Strategic Marketing, ACH Financial Counselors, Children’s Health Watch
Assess opportunities to collaborate with existing groups to decrease the health impact of limited transportation options.	Assessment of opportunities to increase options for families to access transportation to care.	Arkansas Campaign for Grade-Level Reading (ARGLR), LR city board representation, ACCN, ACH Population Health, Rock Region Metro
Increase capacity of developmental day care providers in Arkansas through continuing education.	Conferences, materials or other educational supports provided to nurses at early-intervention day care centers.	ADH, Developmental Daycare Providers, School Nurse Academy, NWPC Access to Care group
Explore ways to increase support for school-based health care.	Options for developing school-based health care and school district partnerships in Arkansas are explored.	School-Based Health Alliance of Arkansas (SBHAA), LRSD, Arkansas Department of Education, ACH Community Clinical Programs

<b>Continuing Initiatives:</b>	<b>Anticipated Impact:</b>	<b>Stakeholder Groups:</b>
Continue to support the medical clinic at the School-Based Health Center at Stephens Elementary in the Little Rock School District.	More elementary students will receive high-quality primary care without having to miss valuable school time.	ACH Community Clinical Programs, LRSD, UAMS
Continue to support the planning and execution of the AR School Nurse Academy (SNA) that provides continuing education to school nurses across Arkansas.	More school nurses in Arkansas will provide high quality care to students through continuing education.	ACH CAPH, ADE, Donors
Continue to provide community trainings to promote emergency preparedness.	More communities with individuals certified in trainings like CPR or Stop the Bleed.	ACH Emergency Department
Continue to offer ACH financial counselors to ensure patients and families are able to appropriately pay for their health care.	More families will receive high quality-care without additional burden of cost.	ACH Financial Counselors
Continue to support the ACH Kids Care after-hours nurse resource line to direct families to appropriate care for their child's situation.	More parents and caregivers will be able to access appropriate care for their children, based on advice from an on-call nurse.	ACH Kid's Care Line
Continue to support language interpreter services that exceed required accreditation.	Patients whose first language is not English will receive high-quality care in an appropriate language.	ACH Social Work
Continue to provide services through financial assistance for families who cannot fully pay for their child's care.	More children and youth in Arkansas with access to high-quality medical care without the burden of cost.	Arkansas Children's Accounting Department

### Recommendation 5:

Decrease food insecurity among Arkansas children by maximizing existing networks to bring nutrition education, and targeted food programs to families, neighborhoods, and schools.

**Focus area: Food Insecurity**

**Long-term leading indicator: Child Food Insecurity Rate**

Proposed New Actions:	Anticipated Impact:	Stakeholder Groups:
Explore expansion of evidence-based nutrition education programs to new locations such as targeted Excel by 8 (E8) counties.	A plan is developed to help families in unreached areas have better access to evidence-based nutrition education.	Hunger Relief Alliance, Excel by 8, ACNW, ACH Community Outreach
Explore options to expand food pantry partner capacity to support food insecurity screening in additional clinics.	Enhanced partnerships with food pantries like Helping Hand to provide services to community members.	Helping Hand, Faith Community, Arkansas Food Bank, Arkansas Children’s Foundation, ACH Community Outreach
Explore connecting hospice with ACH and other community resources that provide nutrition resources.	Stronger relationships and collaboration between ACH and hospice.	ACH Community Outreach, ACCN, ACH Palliative Care, ACH Pastoral Care

<b>Continuing Initiatives:</b>	<b>Anticipated Impact:</b>	<b>Stakeholder Groups:</b>
Continue to offer evidence-based cooking classes, such as Cooking Matters, that help adults, families, youth, and children learn how to cook healthy on a budget.	More families are able to cook healthy meals on a budget.	ACH Community Outreach, AR Hunger Relief Alliance, Central Arkansas Library System - Children's Library,
Continue to offer evidence-based programs to promote healthy eating on a budget, such as Cooking Matters at the Store.	More families will know how to shop for healthy food on a budget.	ACH Community Outreach, AR Hunger Relief Alliance
Continue to offer evidence-based programs, such as Pop-Up Cooking Matters, to secondary public school students in order to promote healthy eating on a budget.	More secondary school students in Arkansas know how to shop for healthy food on a budget.	ACH Community Outreach, AR Hunger Relief Alliance
Continue to offer on-campus enrollment in SNAP and WIC to patients and families.	More families connected to public benefits to address food insecurity.	ACH Financial Counselors, ACH Nutrition Services, AR Dept. of Health, AR Dept. of Human Services
Continue to offer USDA-supported summer and after-school meals to children on the ACH campus.	More patients and their families are able to have a free meal while on campus, regardless of ability to pay.	ACH Nutrition Services, USDA, local school volunteers, Compass, Hunger Relief Alliance
Continue to screen patients at certain primary clinics for food insecurity and provide food assistance when necessary.	More patient families are able to receive food and other resources to address food insecurity.	ACH Population Health, ACH Social Work, Helping Hand Food Pantry
Continue to offer on-site mobile food pantry to patient families at the hospital.	More families are able to take home groceries when needed.	ACH Community Outreach, ACH Social Work, Helping Hand Food Pantry
Continue to support the on-site garden, which supplies produce to local food pantry.	Helping Hand Food Pantry shares locally grown, fresh produce with more families.	ACH Community Outreach, Helping Hand Food Pantry

## Recommendation 6:

Reduce child obesity by encouraging active play for kids and educating families about healthy eating.

**Focus area: Child Obesity**

**Long-term leading indicator: Child Obesity Rate**

Proposed New Actions:	Anticipated Impact:	Stakeholder Groups:
Support external organizations with successful program outcomes that encourage kids to get active and learn about healthy habits.	Based on evaluation of program outcomes, partner with organizations like the Hunger Relief Alliance on successful programs.	Hunger Relief Alliance, ACH Community Outreach, NWPC Food Insecurity
Build partnerships to encourage obesity prevention and long-term heart health for Arkansas kids. Through these partnerships, create more opportunities for kids to exercise outside and integrate exercise into daily life.	Explore a plan to address heart disease by lowering child obesity rates.	American Heart Association, Arkansas Children’s Center for Obesity and its Consequences in Health (COACH) Clinic, Project Automated Defibrillators in Adam’s Memory (ADAM), Jefferson Regional Medical Center (JRMC) Wellness Center, AC Nursery Alliance, Community Health Nurse Specialists (CHNs), Community Health Specialists (CHPs), ACH clinics, ACH IPC, ACH Community Outreach, ACH Population Health
Increase affordable access to education related to breastfeeding and other neonatal information that is linked to preventing child obesity.	Improved education and understanding of the importance of breastfeeding, through such resources as a Lactation Consultant training.	Healthy Active Arkansas (HAA), NWPC Obesity group, Arkansas Children’s Nursery Alliance

<b>Continuing Initiatives:</b>	<b>Anticipated Impact:</b>	<b>Stakeholder Groups:</b>
Evaluate the use and effectiveness of GoNoodle in elementary classrooms to provide students with short brain-breaks focused on movement throughout the school day.	Increase the number of minutes of physical activities for elementary school students in Arkansas.	ACH Community Outreach
Evaluate the use and effectiveness of evidence-based obesity prevention programs at elementary and middle schools across Arkansas such as OrganWise Guys and CATCH.	More students across Arkansas exposed to evidence-based information and activities to promote health and prevent obesity.	ACH Community Outreach

## Recommendation 7:

Promote access to evidence-based reproductive health education and materials, and target resources to marginalized youth.

**Focus area: Reproductive Health**

**Long-term leading indicator: Teen Birth Rate**

Proposed New Actions:	Anticipated Impact:	Stakeholder Groups:
Evaluate the use and effectiveness of implementing evidence-based reproductive health programs like Love Notes, and ensure the fidelity of the program.	More schools with access to important reproductive health education and tools to reduce risks of pregnancy and STIs.	LRSD, Centers for Youth and Families (CFYF), ADE School Health Services, ACH Community Outreach
Explore options to provide training and technical assistance for public school teachers who teach reproductive health, including recognizing signs of sex trafficking.	Improved capacity for public school teachers to provide quality reproductive health education.	ADE, ACH CAPH, ACH Adolescent Health and Gynecology, NWPC Reproductive Health Subgroup
Explore new programs to encourage parents and children to talk about reproductive health issues and improve reproductive health education.	Improved access to information about reproductive health resources like Long-Acting Reversible Contraception (LARCs) and HPV vaccinations.	ADH, AAP, ACH Community Outreach, March of Dimes, NWPC Reproductive Health Subgroup

<b>Continuing Initiatives:</b>	<b>Anticipated Impact:</b>	<b>Stakeholder Groups:</b>
Continue to partner with secondary public schools to offer evidence-based reproductive health curriculum, such as Love Notes, to promote healthy relationships and prevent teen pregnancy.	More secondary students in Arkansas will be exposed to accurate information about healthy relationships and reproductive health.	ACH Community Outreach

**Recommendation 8:**

Continue to grow access to preventive dental treatment and education to children and caregivers in Arkansas.

**Focus area: Oral Health**

**Long-term leading indicator: Tooth Decay or Cavities in Children**

<b>Proposed New Actions:</b>	<b>Anticipated Impact:</b>	<b>Stakeholder Groups:</b>
Explore additional options to expand dental sealant program in Southwest Arkansas to underserved school-aged children.	More elementary students will be screened for sealants and eligible students will receive sealants.	Donors, ADH, ACH Community Clinical Programs
Explore additional funding opportunities to expand dental outreach programs to Northeast Arkansas.	Increased awareness of oral health disease and access to oral health in Northeast Arkansas.	Donors, ADH, ACH Community Clinical Programs

<b>Continuing Initiatives:</b>	<b>Anticipated Impact:</b>	<b>Stakeholder Groups:</b>
Continue to support mobile dental clinics serving communities in four regions of the state (Central AR, Northwest AR, Southeast AR, and Southwest AR).	Comprehensive dental care for students in rural and underserved areas.	ACH Community Clinical Programs, Donors, ADH
Continue to support the dental sealant program that serves students at schools in five regions of the state (Central AR, Northwest AR, Northeast AR, Southeast AR, and Southwest AR).	More elementary students will be screened for sealants and eligible students will receive sealants.	ACH Community Clinical Programs, Donors, ADH

### Recommendation 9:

Focus injury prevention activities on emerging trends in child injury, while using evidence-based programs and tested messaging.

**Focus area: Child Injury**

**Long-term leading indicator: Child and Teen Death Rate**

Proposed New Actions:	Anticipated Impact:	Stakeholder Groups:
Explore development of a youth suicide prevention coalition based on best practices from other states.	Establish impact from other best practices and create a plan to form a coalition that meets regularly.	Governor’s Council, Arkansas Foundation for Suicide Prevention (AFSP), ADE, ADH, ACH IPC
Explore development and evaluation of a messaging and safe storage campaign for the “easy access” self-defense handgun in the home.	Standardized message for use across multiple platforms.	ADH, Game and Fish Commission, AFSP, 4H, Law Enforcement, local gun shop owners, NWPC Child Injury group, ACH IPC
Partner with first responders (i.e. Fire Department) to develop skills to address preventive health education issues such as car seat safety and safe sleep best practices.	Establish and begin utilizing an internal process to guide partnerships with first responders as well as how to provide technical assistance to other providers who want to do the same.	ADH, Emergency Medical Services for Children (EMSC), coroners, Arkansas Firefighters Association, ACH IPC

<b>Continuing Initiatives:</b>	<b>Anticipated Impact:</b>	<b>Stakeholder Groups:</b>
Continue to support motor vehicle safety for teens and tweens, through research, education, and community programs such as safe teen driving programs.	More tween and teens safely travel in motor vehicles, decreasing injury and death.	ACH IPC, AR State Highway & Transportation Dept., AR State Police
Continue to support and develop homicide and suicide prevention materials through research, education, and community programs such as evidence-based mental health preparedness training for teachers.	Increased awareness and prevention of intentional injury.	ACH IPC, AR Dept. of Health, AR Game & Fish Commission
Continue to support recreational safety initiatives through research, education, and community programs such as bicycle helmet distributions for communities.	More supplies and products to promote recreational safety, like bicycle helmets, are distributed. Developed methods to educate and distribute products through community based clinics.	ACH IPC

**Recommendation 10:**

Improve access to vaccinations, focusing on alternative access points in addition to traditional school and clinic-based options.

**Focus area: Immunizations**

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

Proposed New Actions:	Anticipated Impact:	Stakeholder Groups:
Explore efforts to provide immunizations at innovative locations, including an inquiry into providing immunizations via ACH Dental Vans or daycare centers.	More convenient options available for families to access immunizations for their children.	ACNW, Excel by 8, ACH Primary Care, ACH Community Clinical Programs, School Nurse Academy, ACH GPC
Educate school nurses through the School Nurse Academy on immunization schedules and messaging to overcome vaccine hesitancy.	Increased capacity of school nurses to increase vaccination rates for children in Arkansas.	ADH, Immunization Action Coalition, NWPC Immunization group

<b>Continuing Initiatives:</b>	<b>Anticipated Impact:</b>	<b>Stakeholder Groups:</b>
Continue to participate in and support the Arkansas Immunization Action Coalition's Childhood Immunization workgroup.	ACH will serve as an important task force stakeholder to support childhood immunization initiatives.	ACH Community Clinical Programs, NWPC, AR Immunization Action Coalition



**Our Promise:  
Unprecedented child health.  
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