Rady Children’s FY 2017-2019
Implementation Strategy

In Support of the 2016 San Diego Community Health Needs Assessment

Rady Children’s Hospital -- San Diego
3020 Children’s Way
San Diego, CA 92123
Community Health Needs Assessment
Implementation Strategy
Fiscal year 2017 - 2019

Introduction

Rady Children’s Hospital and Health Center (Rady Children’s) has been meeting the health needs of San Diego County children and families since 1954. In response to a polio epidemic, Rady Children's officially opened its doors on August 19, 1954 to receive its first 12 patients. Today, Rady Children's is a non-profit, 551-bed pediatric-care facility dedicated to excellence in care, education, and research. Rady Children’s is the only hospital in the San Diego area dedicated exclusively to pediatric healthcare and the region’s only designated pediatric Trauma Center. In addition, Rady Children’s is the 6th largest pediatric hospital in the country, and the provider of care for 91% of the region’s children.

Rady Children’s is ranked in 9 pediatric specialties surveyed by U.S. News & World Report in 2015. In partnership with the University of California, San Diego School of Medicine, Rady Children’s is the region’s teaching hospital for the next generation of pediatric clinicians, and is a major pediatric clinical research center.

In 2015, Rady Children’s added the first pediatric genomics institute in the country, a groundbreaking pediatric research facility, joining talent, technology and resources to transform the diagnosis and treatment of childhood diseases. The Institute is developing an integrated approach to personalized medicine, bringing together world-class scientists and physicians to effectively translate the discoveries of genetic and genomic research from “bench to bedside.” Genomic sequencing has begun on critically ill infants with unknown conditions in the neonatal intensive care and pediatric intensive care units, where it is most urgently needed.

Demographic Background

San Diego County (San Diego) is the second most populous of California's 58 counties, and the fifth largest county in the United States. Currently home to 3.2 million residents, San Diego is anticipated to grow to four million by 2020. The region is socially and ethnically diverse, with over 22% of the population under the age of eighteen. While the median household income is approximately $64,000, over 18% of persons are living below poverty level; children under age 18 are disproportionately affected. In addition, 37% of persons speak a language other than English at home.¹

Approval from Governing Body

The Rady Children’s Board of Trustees (Board) must approve both the triennial 2016 Community Health Needs Assessment (CHNA) report and corresponding Implementation Strategy during its 2017 fiscal year. The 2017 Implementation Strategy, as outlined in the remainder of this document, is updated annually with an outcomes report to the Board.

Community Health Needs Assessment

Continuing a longstanding commitment to address community health needs in San Diego, Rady Children’s and six other healthcare systems reconvened in 2015-2016 through the Hospital Association of San Diego and Imperial Counties (HASD&IC), with the Institute of Public Health, to complete a 2016 triennial Community

¹ United States Census Bureau [http://quickfacts.census.gov/qfd/states/06/06073.html](http://quickfacts.census.gov/qfd/states/06/06073.html)
Health Needs Assessment (CHNA). The CHNA identifies and prioritizes the most critical health-related needs of San Diego County and includes feedback from community residents in vulnerable neighborhoods.

Top health priorities for all age groups identified in the collaborative CHNA (in alphabetical order) include:

1) Cardiovascular disease
2) Diabetes (Type 2)
3) Mental and behavioral health
4) Obesity.

**Top Community Health Needs – Child Focused Priorities**

Recognizing that children have unique healthcare needs, Rady Children’s supplemented the findings of the CHNA with the [2015 San Diego County Report Card on Children & Families](#) (see Attachment X). Management and Clinical Leadership also considered other pediatric assessments.

Top priorities identified for children include:

1) Mental and behavioral health;
2) Obesity and Type 2 diabetes;
3) Other (Injury prevention, Autism).

**Addressing Top Child Health Needs**

The findings from health needs assessments and surveys yield valuable information in helping Rady Children’s to provide programs that address the most pressing health conditions impacting children in the region. The following section provides a review of current programs and proposed new interventions.

**Childhood Obesity Initiative**

Rady Children’s holds leadership positions in a countywide collaborative program (Childhood Obesity Initiative) to reduce and prevent childhood obesity. Programming includes the Teaching Kitchen - nutrition education and skills training as a preventive measure for obesity and management of Type 2 diabetes; *Re-Think*
Your Drink, which aims to reduce consumption of sugar-laden drinks in a number of settings; and Safe Routes to School, targeting obesity and injury prevention by making walking and biking to school safe, and healthy alternatives to driving.

Regional Partnerships – Childhood Obesity Initiative (COI)
Rady Children’s has participated in the San Diego County Childhood Obesity Initiative (COI) since its inception in 2004. The COI is a countywide collaborative that strives to reduce and prevent childhood obesity through a multi-pronged approach. Through the COI, Rady Children’s collaborates with other healthcare leaders, San Diego County Health and Human Services, and other partners in the community. Rady Children’s provides staff and medical leadership to support the COI.

Let’s Get Cooking
- Implementation Strategies Addressed by the Program:
  - Community and cultural competency
  - Early identification and prevention.
Rady Children’s has a long history of participating in the City Heights Wellness Center (Wellness Center) in collaboration with Scripps Health. The Wellness Center Teaching Kitchen serves as the site for Let’s Get Cooking classes which addresses obesity and Type 2 diabetes through nutrition education and cooking classes in a high risk community. Following its success in the pilot program at the Wellness Center, Rady Children’s will work to find the resources necessary to continue Let’s Get Cooking classes both at the Wellness Center and through the creation of a mobile “Teaching Kitchen” to increase the capacity to bring the program to communities and partners without established cooking facilities. Schools and other community organizations throughout the region without kitchens have requested Let’s Get Cooking classes but do not have kitchens to support them.

Rethink Your Drink
- Implementation Strategies Addressed by Program:
  - Knowledge/education
Studies indicate that sugar-sweetened beverages are a leading cause of childhood obesity. Implemented 4 years ago, the Rethink Your Drink initiative was designed to provide education about the health effects of added sweeteners in beverages, increase the availability and consumption of healthy drink options, and make healthy beverages the standard available in our organization for employee, patient and visitor consumption. The promotion of healthy beverages and reduction of sugar-sweetened beverages has been strongly recommended by researchers. Through this initiative, Rady Children’s has been aligning the workplace environment with the recommendations of the medical community. Rady Children’s serves as a role model for patients, families, and other hospitals in our community. Going forward, Rady Children’s will continue to share program information with the COI and other hospitals. Information will also be shared with schools at community events.
Mental and Behavioral Health

Depression Screening

- Implementation Strategies Addressed by Program:
  - Early identification and prevention
  - Knowledge/education

Depression Screening: A Depression Risk Screening (PHQ9) is provided to all patients at Rady Children’s, ages 12 and over, visiting a Medical Practice Foundation (MPF) High Risk Specialty clinic. Contact sheets with referrals in the community for treatment are provided to families with an at-risk score, and physicians whose patients are identified with a high threshold at-risk score are alerted for immediate intervention. Depression screening is an important tool for obesity, Type 2 diabetes, and children with single chronic illness, as all of these conditions carry a high risk for depression, which negatively impacts disease management.

KidSTART Clinic

- Implementation Strategies Addressed by Program:
  - Early identification and prevention
  - Care integration and coordination

The KidSTART Clinic serves children who are Medi-Cal eligible, ages 0-5, and exhibit complex medical needs that range from developmental to mental health needs. A unique aspect of the program includes integrated care team meetings where therapists, San Diego County social workers, parents, and foster parents meet to discuss proposed treatment plans. A new component being offered to KidSTART families includes oral health screening, education and referral.

Crisis Stabilization Unit

- Implementation Strategies Addressed by Program:
  - Early identification and prevention
  - Care integration and coordination

The psychiatric crisis stabilization unit is a physical unit within the hospital with the capacity for four patients that is ideally structured to receive patients from the Emergency Department (ED) for short-term crisis assessment and treatment. The program reduces the inherent stresses for children and teens in a psychiatric crisis waiting for treatment in the ED. The CSU assists patients experiencing acute symptoms of mental illness requiring 24-hour supervised crisis intervention to be more quickly assessed and treated by mental health professionals who can de-escalate symptoms and provide interventions that allow many children and teens to be discharged to home.

Developing Programs

Mid-City Behavioral Health Urgent Care (BHUC)

- Implementation Strategies Addressed by the Program:
  - Early identification and Assessment
  - Crisis intervention
  - Care integration and coordination
  - Parent/patient education
  - Case Management and referral services
The Mid-City Behavioral Health Urgent Care Clinic addresses the need for immediate access to mental health services for families concerned about their child or adolescent’s urgent mental health or behavioral symptoms. These families also experience numerous barriers to accessing care, including reliance on public transportation or the inconsistent availability of family or neighbors for transportation; language limitations; and, issues of acculturation. The Mid-City facility addresses this community’s unmet mental health needs by establishing a prominent presence in the Mid-City area, making services directly available to children and families in their own neighborhood. The comprehensive behavioral health program will include a range of high-quality behavioral health services, including assessment, crisis intervention, medication evaluation, case management, and referral to on-going treatment, if needed. The services are available on a “walk-in”, no appointment required basis.

Pediatric Outpatient Psychiatry Community Capacity Expansion

- Implementation Strategies Addressed by the Program:
  - Early identification and assessment
  - Crisis intervention
  - Improved access to psychiatric care

Currently Rady Children’s Psychiatry Department operates outpatient psychiatry clinics in the Central, North Coastal, and North Inland regions of the County, which provide services to families with Medi-Cal and those without any funding support. There are, however, many working families with commercial insurance that have limited access to services in their communities. Rady Children’s is exploring the development of behavioral health clinic locations to provide assessment and treatment services to these families.

Expanded community-based outpatient psychiatry services offered by the Rady Children’s Psychiatry Department will provide improved access to behavioral health assessments, individual and family therapy, medication evaluation and treatment, and psychological testing. The intended outcome of this program is to improve access to behavioral health services in local communities, and increase parenting skills and knowledge.

The initial implementation of this strategy is occurring in the Carmel Valley area of the County in which outpatient psychiatry services are co-located with developmental services. The new services include therapy, medication services, psychological testing, and assessment from a full-time Child and Adolescent Psychiatrist.

Autism

- Implementation Strategies Addressed by the Program:
  - Early identification and prevention
  - Care integration and coordination
  - Knowledge/education

The Developmental Services department at Rady Children’s provides a continuum of integrated services across various disciplines and community partners to support early brain development, social/emotional development, and the needs of the whole child through every aspect of care delivery. Emphasizing early identification, diagnosis and intervention, a variety of programs are provided, including programs focused on Autism and ADHD. Autism is a developmental disorder that affects multiple aspects of a child’s functioning, characterized by difficulties in communication, impairment in social interactions, and behavioral symptoms. The prevalence of autism appears to be on the rise and is the third most prevalent developmental disorder, occurring in 1 of 150 births.
The Autism Discovery Institute (ADI)

The Autism Discovery Institute is a state-of-the-art facility that serves children with Autistic Spectrum Disorders (ASD) through a multidisciplinary approach, as well as provides a forum for research, to improve the lives of children with ASD. The goal of the ADI is to provide comprehensive care that will improve the lives of children with autism spectrum disorders. Rady Children’s collaborates with a myriad of community-based agencies and providers.

A variety of intervention strategies are provided in naturalistic settings. The multidisciplinary team includes Occupational Therapists, Speech and Language Pathologists, Audiologists, Neurologists and other specialties, Developmental Specialists, and Psychologists. The ADI provides one of the nation’s only research and clinical collaborations that fosters knowledge exchange to enhance treatment for autistic children. Rady Children’s also provides training for professionals working with children with ASD. The ADI is bringing together many of Developmental Services’ multidisciplinary programs on autism, including developmental evaluations and an inclusive educational program – Alexa’s Playful Learning Academy for Young Children (Alexa’s PLAYC).

Developmental Evaluation Clinic (DEC)

The Developmental Evaluation Clinic provides diagnostic developmental evaluations for infants, preschoolers, and school-age children to identify developmental, learning and social delays and determine the need for further intervention. Children are referred for evaluation due to premature birth and other neonatal complications, slow development, kindergarten readiness, behavioral problems, Autistic Spectrum Disorders, or family history of learning disabilities. Once delays have been identified, referrals are made to a variety of public education programs, as well as public and private therapy programs.

The goal of DEC is to provide early identification and developmental evaluation services by specially-trained clinical and developmental psychologists and other specialists for children presenting with potential delays. Children identified with special needs are referred and linked to the appropriate services. Several process measures are tracked. Of note, 90% of children referred were identified as having developmental or behavioral needs, and nearly 20% were diagnosed with an Autism Spectrum Disorder. A Developmental Services multidisciplinary team and leadership are dedicated to the DEC. Rady Children’s collaborates with a myriad of community-based agencies and providers to implement this program.

How Rady Children’s Meets Other Health Needs of the Community

In addition to the top health needs, Rady Children’s also addresses the following physical, mental and social health needs of children through numerous hospital departments and community-based settings and serves as the regions safety net provider for all pediatric services.

Other unique community programs include:

The Center for Healthier Communities

Childhood Injury Prevention

The CHC plays a primary leadership role in the community in childhood injury prevention. Data from the Rady Children’s Trauma Center and other sources is reviewed to determine priorities and focus, and the information is brought to communities to raise awareness, problem solve, and advocate for public policy and safety regulations. Programs include:

Safety Store: Providing products to keep families safe.
Safe Kids San Diego: Addressing drowning prevention, child passenger safety and other prevalent injury areas through a local coalition, in which Rady Children’s is the lead organization.

Injury-Free Coalition for Kids: Preventing injuries as part of a national program of the Robert Wood Johnson Foundation.

Safe Routes to School: Increasing the number of children who walk or bike to school safely as part of a national initiative.

Kohl’s Transportation Safety Program: Providing weekly child passenger safety seat inspections through a grant from Kohl’s Department Store.

Sports Injury and Concussion Prevention Program: Preventing sports injuries and concussions in children and teens through our 360 Sports Medicine program and other initiatives.

Maternal and Child Health

Immunizations: Ensures the safety of children in the community by increasing numbers of fully-immunized children through information and resources provided to parents.

Health and Lifestyle Programs

FACES for the Future: Inspires youth to become leaders through a coordinated school, community and hospital-based program that provides youth development, health careers preparation, and nutrition education.

Juvenile Hall Wellness Team: Provides health and wellness information and counseling for incarcerated youth. A Wellness Team works in conjunction with medical, mental health and probation staff to promote healthier lifestyles and assist minors in avoiding high-risk behaviors through increasing the incarcerated minors’ knowledge of pertinent health issues, connecting them to outside health services, and encouraging minors and/or their families to obtain health insurance coverage.

Oral Health

Anderson Center for Dental Care: Improves the oral health of all children in San Diego County through improved access to care, education, and advocacy.

Asthma (new program)

Community Approach to Severe Asthma Program (CASA) is an innovative pilot program in San Diego with the goal of improving management and outcomes for children identified by Rady Children’s with severe childhood asthma.

The Chadwick Center for Children and Families

The primary focus of the Chadwick Center for Children and Families at Rady Children’s is the prevention, detection and treatment of child abuse and neglect, domestic violence, and post-traumatic stress in children. The Center staff is composed of a variety of professional disciplines from medicine and nursing to child development, social work, and psychology. In addition, the Chadwick Center provides professional education to providers. The Center served more than 9,000 children, parents and professionals in fiscal year 2016.

The Chadwick Center, one of the largest hospital-based child advocacy and trauma treatment centers in the nation, is staffed with more than 107 professionals in the field of medicine, social work, psychology, psychiatry,
child development, nursing, and education technology. The staff is committed to family-centered care and a multidisciplinary approach to child abuse and family violence prevention and treatment. Services are accessible to underserved families and children in the Child Welfare system.

The Trauma Counseling Program has been committed to treating the after-effects of a child’s traumatic experience. In addition, the Program has worked to support the recovery of family members and to improve their ability to support the child. Interventions include individual, group, and family therapy. The staff of the Trauma Counseling Program is primarily composed of Licensed Clinical Social Workers, Marriage and Family Therapists, and Psychologists. The staff’s expertise is in treating childhood traumatic events, including neglect; physical and sexual abuse; sexual assault; domestic, school, and community violence; and, natural disasters. Treatment for the psychological aspects of medical trauma and chronic pain is also available. A short summary of programs provided by the Chadwick Center includes:

**Forensic & Medical Services**
- This program provides services to children who may have been sexually or physically abused or witnesses to violence. San Diego County law enforcement agencies and the County Department of Health and Human Services regularly refer these children to this program. The aim of the Forensic and Medical Services program is to assist the children to provide verbal or physical evidence of the possible abuse they suffered or witnessed. There are two main types of Forensic and Medical Services offered by the Chadwick Center: forensic interviews and forensic medical exams.

**Failure to Thrive Clinic**
- This program provides care to pediatric patients in an outpatient setting. The clinic specializes in treatment of patients who are not gaining weight or growing due to an unknown reason.

**Options Foster Parent Training**
- This program provides child development and parenting classes to foster parents and potential foster parents.

**Polinsky Center**
- This program provides assessments and medical evaluations for abused, abandoned, and neglected children. Services are administered at the Polinsky Center and staffed by Chadwick Center physicians. The Polinsky Center offers a temporary sanctuary for children before being placed in the care of a foster parent.

**Professional Education**
- The Chadwick Center offers accredited professional education to those involved in fields of prevention, investigation, diagnosis, treatment, and prosecution of child abuse and family violence. Since its beginning in 1976, the Chadwick Center has trained more than 100,000 professionals from all fifty states and over forty countries. Major educational activities include the annual San Diego International Conference on Child and Family Maltreatment, the Clinical Training Program for visiting professionals, the weekly multidisciplinary Child Protection Team Case Conference, and various local, county, and state trainings funded through contracts.
Mandated Reporter Training

- Funded by the California Department of Social Services and Office of Child Abuse Prevention, the goal of this project is to make web-based training available for mandated child abuse reporters so they may carry out their responsibilities properly.

Support Groups and Services

Cancer Support

The groups are led by facilitators from the Peckham Center for Cancer and Blood Disorders’ Families Helping Families program.

- Some of My Best Friends are Bald - For cancer patients ages 13 older and their teen siblings
- Families Supporting Families - For parents of children with cancer
- Sibling Support Group - For siblings of children with cancer
- CHAMPS - For children with cancer ages 6 to 12
- Kites of Hope Group - For bereaved parents of children who had cancer
- Grupo Papalotes de Esperanza

Cardiac Support Group

- A parent support group for families of children with congenital heart disease.

Child Life Services

- Offers a variety of services to help patients and families cope with the hospital experience. Based on the child's individual needs and developmental level, Child Life Specialists can provide:
  - Psychological preparation for surgery, procedures and medical tests
  - Pre-operative tours and education to help patients and siblings understand and cope with upcoming medical events
  - Emotional support and coping techniques, such as relaxation, diversion and deep breathing
  - Medical and therapeutic play to help patients become more familiar with medical equipment and procedures and encourage expression of feelings
  - Activity Room programming to promote healing, creativity, peer interaction and independence, all which are all vital to normal growth and development
  - School visits or consultations to promote classmates' understanding of illness and healthcare
  - Resources on child development

Helen Bernardy Center Parent-to-Parent Support

- A program in which parents of children currently residing at the Center provide support to parents of newly-admitted children. This support system provides new parents with an opportunity to gain insight
from a parent’s perspective on what they may expect during their child’s stay and how to seek or gain resources to help support their child. Most importantly, the program provides the parent with a liaison/advocate in working with the multiple agencies and healthcare systems designed to meet their medically-fragile child’s ongoing needs.

BOARD ACTION

Rady Children’s 2016 CHNA Implementation Strategy summarizes significant community benefit activities that are responsive to top child health needs identified in the assessments. Going forward, planning and strategies developed will continue to be adjusted based on the most current information provided by our Community Health Needs Assessment and Implementation Strategy findings and other reports that provide guidance on how child health status and population health in the community can be improved.

This report and accompanying SBAR were prepared for the December 2016 meeting of the Rady Children’s Hospital and Health Center Board of Trustees and Rady Children’s Hospital – San Diego Board of Directors.
## FY 2017 – 2019 Implementation Strategy

**Identified Community Need: Obesity/Type 2 Diabetes**

<table>
<thead>
<tr>
<th>Program Name</th>
<th>Goals and Objectives</th>
<th>Description</th>
<th>Strategies and Approaches</th>
<th>Evaluation Methods and Measurable Targets</th>
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</table>
| Let’s Get Cooking     | Obesity and Type 2 diabetes prevention and management.  
Increase knowledge of healthy nutrition and confidence in hands-on skills to cook nutritious meals.  
Seek resources to continue and replicate program in additional communities. | Cooking classes for parents and children ages 8+ – 6-week series in various communities throughout San Diego. | Perform cooking demonstrations, food preparation and tasting, nutrition education and planning, and tips for shopping economically for nutritious foods.  
Partner with low-income community housing projects, schools, and community-based organizations to reach target population. | **Evaluation Methods:**  
Track number of individual children and family members signing up for and participating in 6-week series.  
Administer post-surveys to measure confidence and likelihood individual participants will be able to achieve their goals for themselves and their families.  
**Measurable Targets:**  
• 60 individual children and adults will participate in the 6-week series.  
• 80% of parents will indicate confidence to achieve their healthy eating goals. |
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| Re-Think Your Drink  | Aim to reduce consumption of sugar sweetened beverages (SSB’s), a major contributor to obesity and Type 2 diabetes. Promote the use of common materials in the community, and other San Diego hospitals. | Continue multi-pronged approach at Rady Children’s, targeting employees (over 5,000), and families. | Environmental: Position non-SSB’s at eye level and color code red, yellow, green beverages in the cooler.  
Policy: Eliminate SSB’s from catering menu, make available only upon request.  
Adopt Healthier Hospitals Initiative, with target of 80% of beverages offered to be non-SSBs.  
Provide non-SSB’s at Rady Children’s sponsored major events.  
Provide standardized educational messages about SSB’s in Rady Children’s food service areas.  
Ensure option of 60% healthy beverages in Rady Children’s vending Machines.  
Provide technical assistance and educational materials to external organizations as requested. | Evaluation Methods:  
Monitor sales of sugar sweetened beverages.  
Measurable Targets:  
- No more than 35% of beverage sales will consist of SSBs.  
- Sign National Healthier Hospital Beverage Pledge. |
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<tr>
<td>Safe Routes to School</td>
<td>Reduce high incidence of child pedestrian and bicycle injuries in communities with high numbers of pedestrian incidents. Make biking and walking to school safe alternatives to driving, and increase children’s physical activity.</td>
<td>SRTS programs employ the 5E’s: Education; Encouragement Enforcement; Engineering; Evaluation. Collaboration includes partnering with schools, police, traffic engineers, city planners, and others to conduct walk audits, community forums, student education, adult volunteer safety patrols.</td>
<td>Continue SRTS program in National City for 2 years to build a sustainable culture for safety in all 10 elementary schools by securing and training school-based volunteer coordinators. Implement a comprehensive program in 2 schools in Linda Vista and 3 schools in El Cajon.</td>
<td>Evaluation Methods: Track increase in walking and biking to school using classroom tally’s and parent surveys. Document Safe Routes to School activities in 2 additional schools. Measurable Targets: • Increase number of children walking or biking to school from beginning to end of school year in each district. • Increase number of students walking/biking to school by 10%.</td>
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### Identified Community Need: Behavioral Health (continued)

<table>
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<tr>
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<tr>
<td>KidSTART Clinic Program</td>
<td>The purpose of KidSTART Clinic services is to help children and caregivers reach their fullest potential and return to typical developmental trajectories through treatment and caregiver support. Ensure access to specialty care for children ages 0-5 with complex needs.</td>
<td>Provide comprehensive assessment and treatment services for children ages 0-5 with complex developmental and behavioral health needs (including autism).</td>
<td>Provide evidence-based and evidence-informed practices focused on trauma-informed, infant and early childhood mental health services.</td>
<td>Evaluation Methods:</td>
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<td>Track number of children with complex developmental and behavioral health needs treated.</td>
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<td>Post-treatment satisfaction surveys for parents and children.</td>
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## Identified Community Need: Behavioral Health (continued)

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</tr>
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</table>
| Psychiatric Crisis Stabilization Unit (CSU)                                  | Improving quality of care for children with psychiatric diagnoses accessing our ED.   | The psychiatric Crisis Stabilization Unit is a physical unit within the hospital that is ideally structured to receive patients from the ED for short-term crisis assessment and treatment. The program assists patients experiencing acute symptoms of mental illness requiring 24-hour supervised crisis intervention to be more quickly assessed and treated appropriately. | Continue teaching of successful coping mechanisms to avoid regression upon discharge. Engage child in family therapy and crisis management to divert future hospitalizations. | Evaluation Methods:  
- Track number of children and teens accessing the Crisis Stabilization Unit from the ED and monitor discharge rates.  
- Track number of children and teens from ED’s outside of Rady Children’s.  
Measurable Targets:  
- Increase the number of patients transferred from ED to CSU by reducing ED wait time to 4 hours or less. |
## Identified Community Need: Behavioral Health (continued)

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</table>
| Mid-City Behavioral Health Urgent Care | Bring high-quality specialized mental health services for children and families in Mid-City region in a location that is easily accessible via public transportation for families living south, east, and west of Mid-City. Create a pediatric urgent care mental health walk-in clinic where none exists now. | Pediatric Urgent Care Walk-in Clinic, outpatient child psychiatrist services, crisis intervention and stabilization, case management, and referral services. | Open a new pediatric mental and behavioral health Urgent Care Walk-in Clinic to include Medi-Cal eligible families, families with no fiscal resources, and families with insurance. Offer board-certified Child psychiatrist to provide assessment and medication evaluation. Develop relationships with agencies and clinics in the Mid-City and Central region to expedite referrals to on-going services. | Evaluation Methods:  
- Track number of patients in crisis admitted to the program, percentage of patients returned home with safety plans, and number of patients hospitalized in an inpatient psychiatry unit or transported to an emergency room.  
Measurable Targets:  
- Percentage of total admissions returned home and diverted from emergency rooms and inpatient psychiatry units. |
<table>
<thead>
<tr>
<th>Program Name</th>
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<th>Description</th>
<th>Action Items</th>
<th>Evaluation Methods and Measurable Targets</th>
</tr>
</thead>
</table>
| Pediatric Outpatient Psychiatry – Capacity Enhancement | Expand capacity to provide access to behavioral health services in communities where children and families live. | Comprehensive mental health and psychosocial services to children, adolescents, and their families with behavioral and emotional problems through the provision of diagnostic evaluations; individual, family and group therapy; psychological testing; medication evaluation and treatment. | Develop community-based clinical services offered by the Department of Pediatric Outpatient Psychiatry to include child and adolescent psychiatry and psychology services. | Evaluation Methods:                                                                                                                      
|                                           |                                                                            |                                                                                                                                              |                                                                                                                                               | • Track number of children requesting and receiving assessment and psychiatric services.                                                                  |
|                                           |                                                                            |                                                                                                                                              |                                                                                                                                               | • Track types of services requested by modality, including assessment, therapy, medication services, and psychological services.                  |
|                                           |                                                                            |                                                                                                                                              |                                                                                                                                               | • Track average length of treatment for patients in on-going therapy.                                                                            |
|                                           |                                                                            |                                                                                                                                              |                                                                                                                                               | Measurable Targets:                                                                                                                                |
|                                           |                                                                            |                                                                                                                                              |                                                                                                                                               | • Number of unduplicated patients admitted to services at baseline month (July 2016) vs. number of unduplicated patients as of the end of 16/17 FY. |
|                                           |                                                                            |                                                                                                                                              |                                                                                                                                               | • Number of assessments, medication evaluations, and psychological test batteries provided in July 2016 vs. at the end of 16/17 FY.                |
|                                           |                                                                            |                                                                                                                                              |                                                                                                                                               | • Number of community clinic locations as of June 17 FYE vs. June 19.                                                                           |
## Identified Community Need: Autism

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<thead>
<tr>
<th>Program Name</th>
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<tbody>
<tr>
<td>Pathways Program</td>
<td>The goal of Pathways program is to help children with autism spectrum disorders generalize skills learned in one-on-one setting to more complex settings.</td>
<td>A group language therapy program designed for children ages 3 to 5 with limited, but emerging expressive language.</td>
<td>Provide specialized therapy for children with limited language skills.</td>
<td>Evaluation Methods:</td>
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<td></td>
<td>• Measure number of children who access a specialized language therapy group.</td>
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<td>Measurable Results:</td>
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<td>• Increase number of children who utilize this program from 40 to 50.</td>
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<td>Autism Discovery Institute (ADI)</td>
<td>The goal of ADI is to help children with autism spectrum disorders develop to their full potential, by increasing access to specialized developmental services and expand research.</td>
<td>The ADI brings together many of Developmental Services experts and multidisciplinary programs on autism under one roof.</td>
<td>Provide children with autism with a tailored developmental environment to treat the whole child -- physical, social, intellectual and emotional aspects.</td>
<td>Evaluation Methods:</td>
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<td>• Several standardized measures are recorded and analyzed from baseline and throughout program interventions to measure progress and improvement.</td>
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<td>Measurable Targets:</td>
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<td>• Maintain number of children who have utilized the Autism Discovery Institute in FY 2016.</td>
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<td>• Aim for over 60% of children in the program mainstreaming to kindergarten.</td>
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