2014 Implementation Strategy
This plan represents a multi-year strategic investment in community health. Lucile Packard Children’s Hospital at Stanford (Packard Children’s) believes that long-term funding of proven community partners yields greater success in improving the health and well-being of community members. The plan continues to be based on documented community health needs. Modifications to the plan are the result of new data and information collected during the 2012-2013 Community Health Needs Assessment (CHNA) process as well as process assessments, reports, and requests submitted by community partners that detail their progress toward mutually developed goals and objectives for improving community health. Please reference the attached Health Profiles for the status of these health needs, and others, in our service area.

Three initiatives will serve as our priority areas for three fiscal years from September 2013 through August 2016:

1. Improve Access to Care
2. Prevention and Treatment of Pediatric Obesity
3. Improve the Social, Emotional, and Mental Health of Children and Youth

Health Initiative 1: Improve Access to Care

Goal: Improve access to a comprehensive medical home to children and youth ages 0-25, and pregnant women in Santa Clara (SCC) and San Mateo (SMC) counties.

This health initiative aims to address the “Access to Care” health need identified by the 2012-2013 Community Health Needs Assessment. Interventions will include improved care coordination between health care organizations and systems as well as sustainable adoption and implementation of the medical home model. Please reference the attached Health Profile for the status of this health need in our service area.
Access to Care Health Detailed Outcomes:

1. Through improved care coordination, underserved populations have a seamless transition to/from acute care settings.
2. Through the medical home model, underserved populations receive appropriate primary and follow-up medical care as well as supportive services.
3. Underserved populations have an ongoing source of primary and preventative health care.
4. Inappropriate use of the emergency department is reduced.

**Strategy 1.1: Enhance capacity of community clinics to provide a medical home for children, teens, and pregnant women.**

**Community Partners:** Ravenswood Family Health Center and San Mateo County Community Health Network for the Underserved

**Tactics:**
- Assess the needs of community clinic partners
- Provide funding and other resources, such as Packard Children’s staff recruitment services, to address identified needs of clinics
- Provide funding and support to establish initiatives aimed at improving care coordination between acute care settings and community health centers

**Strategy 1.2: Support Gardner Family Health Network’s new pediatric primary care clinic in Palo Alto**

**Community Partner:** Gardner Family Health Network

**Tactics:**
- Fund Gardner Family Health Network’s capital building project for a new community clinic in Redwood City
- Underwrite the under-reimbursement expenses for all pediatric patients insured through government or other means-tested programs
- Fund the training of the next generation of health care providers, including physicians, nurses, and other allied health professionals

**Strategy 1.3: Sustain Packard Children’s Mobile Adolescent Health Services for homeless and uninsured youth, ages 10-25**

Packard Children’s Mobile Adolescent Health Services program provides primary treatment and preventative care to homeless and uninsured adolescents ages 10 – 25. Services include acute illness and injury care; complete physical exams; family planning services; testing for, counseling, and treatment of HIV and STDs; pregnancy testing and prenatal care referrals; immunizations; mental health counseling and referrals; nutrition counseling; referrals to community partners; risk behavior reduction counseling; and substance abuse counseling and referrals.

**Community Partners:** Indochinese Health Development Center in San Francisco, Alta Vista Continuation High School in Mountain View, Peninsula Continuation High School in San Bruno, East Palo Alto Charter High School in East Menlo Park, Lost Altos High School in Los Altos, LGBTQ Youth Space in San Jose, and Job Corps training site in San Jose
Tactics:
- Provide funding for Teen Van site visits
- Provide operational support for fundraising efforts

**Strategy 1.4: Support premium fees for Healthy Kids insurance programs**

The Santa Clara and San Mateo County Children’s Health Insurance Initiatives (locally called “Healthy Kids” programs) expand health coverage to children who do not qualify for the Medi-Cal or Healthy Families insurance programs.

**Community Partners:** San Mateo County Children’s Health Initiative and Santa Clara Family Health Foundation

**Tactics:**
- Provide funding for insurance premium subsidies
- Investigate further partnership opportunities aimed at improving care coordination between Healthy Kids primary and preventative health services and other community health care agencies

**Strategy 1.5: Sustain the Care-A-Van for Kids program**

The Care-A-Van for Kids programs makes life-saving health services accessible to low-income families who lack reliable means of transportation.

**Community Partners:** Volunteer drivers and corporate funders

**Tactic:** Provide free transportation services to/from Packard Children’s for those without reliable transportation and live outside a 25 mile radius from the hospital

**Strategy 1.6: Support for Mayview Community Health Center’s capital expansion project**

**Community Partners:** Mayview Community Health Center

**Tactic:** Provide funding for Mayview Community Health Center’s capital building project for site and capacity expansion

**Strategy 1.7: Maintain and enhance a system to enroll children in appropriate insurance or financial assistance programs**

**Tactic:** Assist families in identifying what insurance programs they may qualify for and assist them in enrolling.

**Strategy 1.8: Provide appropriate financial assistance for uninsured and underinsured patients**

**Tactic:** Maintain and enhance a system for providing free and discounted care for individuals whose family income is below 400 percent of the Federal Poverty Line (FPL)

**Strategy 1.9: Train the next generation of health care providers**

**Tactics:**
- Provide funding and a setting for training medical students, residents and fellows from Stanford School of Medicine
- Provide funding and a setting for training physician assistant, nursing, clinical laboratory, physical therapy, respiratory therapy, occupational therapy, speech therapy, radiology, nuclear medicine, and psychology students
- Provide funding and a setting for training pharmacy residents

Health Initiative II: Prevention and Treatment of Pediatric Obesity

**Goal:** Reduce the prevalence and severity of overweight and obese children and youth ages 0-25 in Santa Clara and San Mateo counties, leading to improved health, wellness, and a reduction in chronic, associated health conditions.

This health initiative aims to address the pediatric obesity epidemic and associated health-related issues within San Mateo and Santa Clara counties. A holistic approach will be utilized to address the social determinants of maintaining a healthy weight, including the built environment and legislative policy, as well as the dissemination of evidence-based clinical treatment programs to children and families in the community. Obesity is identified as the top community health need among children and youth by the 2012-2013 Community Health Needs Assessment. Please reference the attached Health Profile for the status of this health need in our service area.

**Health Initiative Outcomes:**

<table>
<thead>
<tr>
<th>Community promotes healthy weight and active lifestyles</th>
<th>Reduction of individual BMI</th>
</tr>
</thead>
<tbody>
<tr>
<td>Increase in active lifestyles</td>
<td>Increased number maintaining healthy weight</td>
</tr>
</tbody>
</table>

**Health Initiative Strategies:**

- 2.1: Sustain Packard Pediatric Weight Control Program for families with children ages 8-15
- 2.2: Support Silicon Valley Youth Health Literacy Collaborative for Santa Clara County schools
- 2.3: Continue participation with strategic community collaboratives addressing prevention of pediatric obesity
- 2.4: Seek out additional partnership opportunities to reduce obesity rates and promote healthy lifestyles among children and youth

**Pediatric Obesity Detailed Outcomes:**

1. Children and youth have increased opportunities to live in communities that promote healthy weight maintenance and active lifestyles.
2. Families reduce the Body Mass Index (BMI) of their members
3. An increased number of families maintain a healthy weight

**Strategy 2.1: Sustain Packard Pediatric Weight Control Program for families with children ages 8-15**

Packard Pediatric Weight Control program is a nationally-recognized, evidence and family-based behavior modification program for overweight children. The 26-week program is offered both at the
hospital and at community locations. The program costs $3500 per family and, because insurance plans do not yet reimburse for weight management programs, this cost must be borne by the family. The hospital has set up a mechanism for families to apply for full or partial need-based scholarships through the hospital’s charity care program.

**Community Partners:** YMCA  
**Tactics:**  
- Fund the operational needs of the Packard Pediatric Weight Control Program.  
- Provide need-based scholarships for participants.

### Strategy 2.2: Support Silicon Valley Youth Health Literacy Collaborative for Santa Clara County schools

HealthTeacher is a leading provider of online health promotion, disease prevention, social and emotional wellness, and child safety resources for K-12th graders and is used by nearly 30,000 teachers nationwide.

**Community Partners:** El Camino Hospital, HealthTeacher, Inc., and participating school districts  
**Tactics:**  
- Provide funding to offer the HealthTeacher online health education and physical activity curriculum to all schools in Santa Clara County and select south-county school districts in San Mateo County.  
- Provide funding for a full-time Health Education Coordinator responsible for user support, positive participant outcomes, and utilization growth.

### Strategy 3: Continue participation with strategic community collaboratives addressing prevention of pediatric obesity

**Community Partners:** Get Healthy San Mateo County and all of its partners, Bay Area Nutrition and Physical Activity Collaborative (BANPAC) and all of its partners, Coordinated School Health projects within Santa Clara County schools and Palo Alto Unified School District, and the City of San Jose’s Street Smarts traffic safety education program  
**Tactics:**  
- Maintain connections and partnerships with multiple community efforts and advocate for community change.  
- Support these collaboratives through in-kind donations, cooperative programs, and fundraising.

### Strategy 2.4: Seek out additional partnership opportunities to reduce obesity rates and promote healthy lifestyles among children and youth

**Tactic:** To be determined
Health Initiative III: Improve the Social, Emotional, and Mental Health of Children and Youth

**Goal:** Partner with and link health care providers, mental health providers, school professionals, and community agencies to increase the emotional and social well-being of children and youth ages 0-25.

This health initiative aims to address the “Mental Health” need identified by the 2012-2013 Community Health Needs Assessment. Interventions will address the proven link between poor social, emotional, and mental health and poor behavioral health, including substance abuse and violence. Please reference the attached Health Profile for the status of this health need in our service area.

<table>
<thead>
<tr>
<th>Health Initiative Outcomes:</th>
<th>Health Initiative Strategies:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Community supports youth</td>
<td>♦ 3.1: Support dissemination and adoption of the evidence-based Sources of Strength program</td>
</tr>
<tr>
<td>Fewer youth using alcohol and drugs</td>
<td>♦ 3.2: Support the Mental Health Dissemination and Innovation Initiative</td>
</tr>
<tr>
<td>Reduction in youth depression</td>
<td>♦ 3.3: Continue active participation in the Project Safety Net community collaborative</td>
</tr>
<tr>
<td>Improve Mental Health</td>
<td>♦ 3.4: Continue a leadership role with Project Cornerstone</td>
</tr>
<tr>
<td>Increase in Developmental Assets</td>
<td>♦ 3.5: Seek out additional engagement and partnership opportunities to support the social, emotional, and mental health needs of our community</td>
</tr>
</tbody>
</table>

**Social/Emotional/Mental Health Detailed Outcomes:**

1. Fewer youth who report having had feelings of sadness and hopelessness.
2. More youth who report that they have an adult who cares about them and/or are connected to their community.
3. Fewer youth who participate in risk-taking behavior, including drug and alcohol abuse.
4. Fewer children and youth with less than 21 Developmental Assets.

**Strategy 1: Support dissemination and adoption of the evidence-based Sources of Strength program**

In response to a “contagion” of teen suicides in Palo Alto in 2009, Project Safety Net and the HEARD Alliance, two groups of health care providers, nonprofit agencies, school professionals, and community members, came together to prevent crisis situations and intervene early enough to ensure the crisis stage is never reached. In 2012, Project Safety Net and the HEARD Alliance requested funding to bring the evidence-based Sources of Strength Program to Gunn High School in Palo Alto. The Sources of Strength program trains peer leaders to change norms around codes of silence and increases help-seeking behaviors and connections between peers and caring adults as preventative measures against teen suicide.
Community Partners: Gunn High School, Health Care Alliance for Response to Adolescent Depression (HEARD), and Project Safety Net

Tactic: Provide funding to support the partnership between Packard Children’s/Stanford Child Psychiatry Department and Gunn High School to sustain the Sources of Strength program, prevent youth suicide, and boost the social and emotional health of students.

**Strategy 2: Support the Mental Health Dissemination and Innovation Initiative**

The overarching goal of the Mental Health Dissemination and Innovation Initiative is to prevent the aftermath of traumatic events in young children and adolescents and to ameliorate these effects in youth already demonstrating functional impairment. The program’s activities center on a) research on the identification of biological and sociological risk factors for stress vulnerability; b) development, application and dissemination of innovative treatment interventions; and c) community engagement.

Community Partners: Stanford University School of Medicine; Ravenswood Family Health Center; Boys and Girls Club of the Peninsula; Center for Wellness, Bayview; and various state-level committees and task forces on youth mental health

Tactics: Provide funding to support the Mental Health Dissemination and Innovation Initiative through:
- Community education and partnerships
- Partnership between Packard Children’s Early Life Stress Research program and Ravenswood City School District
- Treatment protocol dissemination
- Policy and advocacy

**Strategy 3: Continue active participation in the Project Safety Net community collaborative**

Project Safety Net is a community collaborative born in response to the 2009 teen suicide cluster in Palo Alto, whose mission is to develop and implement an effective, comprehensive, community-based mental health plan for overall youth well-being in Palo Alto. The plan includes collaborative education, prevention and intervention strategies that provide a safety net for youth and teens in Palo Alto.

Community Partners: All organizations and individuals participating in Project Safety Net, including primary and preventative care providers, mental health providers, school professionals, other community agencies, and families

Tactics:
- Seek out additional engagement and partnership opportunities
- Support the collaborative through in-kind donations, cooperative programs, and fundraising

**Strategy 4: Continue a leadership role with Project Cornerstone**

Under the auspices of the YMCA of Silicon Valley, Project Cornerstone brings the Search Institute’s evidence-based Developmental Assets to Santa Clara County. The Developmental Assets are positive values, relationships, skills, and experiences that children and teens need to foster positive identity and self-esteem, make healthy choices instead of engaging in risk-taking behavior, and thrive.
Community Partners: All organizations and individuals supporting the mission, vision, and goals of Project Cornerstone, including primary and preventative care providers, mental health providers, school professionals, other community agencies, and families
Tactic: Participate as a member of the Project Cornerstone Board of Directors

Strategy 5: Seek out additional engagement and partnership opportunities to support the social, emotional, and mental health needs of our community

Tactics:
- Identify organizations supporting the social, emotional, and mental health of children and youth
- Support these efforts through in-kind donations, cooperative programs, and fundraising