



Shriners Children's Chicago
2021 Community Health Needs
Assessment

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Shriners Children's at a Glance

Shriners Children's is a health care system with locations in the U.S., Canada and Mexico. Our staff is dedicated to improving the lives of children by providing pediatric specialty care, conducting innovative research, and offering outstanding educational programs for medical professionals. Children up to age 18 with orthopaedic conditions, burns, spinal cord injuries, and cleft lip and palate are eligible for care, regardless of the families' ability to pay. Within these broad service lines, many types of care are provided. For example, some locations offer reconstructive plastic surgery, treatment for craniofacial abnormalities or care for sports injuries. Generally, care is provided until age 18, although, in some cases, it may be extended to age 21. All services are provided in a compassionate, family-centered environment. Our patients are our priority. We take the time to care, and to listen. At Shriners Children's, every patient and family can expect respectful, compassionate, expert care.

The mission of Shriners Children's is to:

Provide the highest quality care to children with neuromusculoskeletal conditions, burn injuries and other special health care needs within a compassionate, family-centered and collaborative care environment.

Provide for the education of physicians and other health care professionals.

Conduct research to discover new knowledge that improves the quality of care and quality of life of children and families.

This mission is carried out without regard to race, color, creed, sex or sect, disability, national origin, or ability of a patient or family to pay.

About Shriners Children's Chicago

Shriners Children's Chicago is changing lives every day through innovative pediatric specialty care, research and outstanding medical education. The Shriners Chicago hospital focuses on a wide range of pediatric orthopaedic conditions, including rare diseases and syndromes. This means that when you visit Shriners Children's Chicago for orthopaedic appointments, you might see your neighbors, but you might also meet families visiting from states such as Michigan or Ohio. We also provide expert rehabilitation/spinal cord injury and cleft lip and palate care. All services are provided in a family-centered environment, regardless of the families' ability to pay.

Shriners Children's Chicago is affiliated with University of Illinois Hospital & Health Sciences System. The partnership is a result of the Shriners Chicago hospital's efforts to collaborate with leading academic medical centers to help reach more children through leveraging the clinical expertise of each organization. The Shriners Chicago hospital is a training site for UI Health's orthopaedic residents and other trainees.

Each day, inside Shriners Children's, patients and families say thank you to the Shriners – those men in the red fezzes. Our model for care was imagined and established by the Shriners, the fraternal organization for which the health care system is named.

Determined to give all children access to specialized pediatric care, the Shriners opened their first hospital in 1922. Polio was reaching epidemic proportions and only families of means had ready access to doctors, leaving thousands of children at risk without health care.

Recognized as leading philanthropy, Shriners Children's has evolved into an international health care system recognized for its devotion to transforming the lives of children through care and research. It is a destination of choice for parents whose children have orthopaedic problems, burns, spinal cord injuries, cleft lip and palate, and other complex medical needs.

Purpose

A Community Health Needs Assessment (CHNA) is a report based on epidemiological, qualitative, and comparative methods that assess the health issues in a hospital organization's community and that community's access to services related to those issues.

The Patient Protection and Affordable Care Act (PPACA) enacted on March 23, 2010, requires not-for-profit hospital organizations to conduct a CHNA once every three taxable years that meets the requirements the Internal Revenue Code 501(r) set forth by the PPACA. The PPACA defines a hospital organization as an organization operating a facility required by a state to be licensed, registered, or similarly recognized as a hospital; or, a hospital organization is any other organization that the Treasury's Office of the Assistant Secretary ("Secretary") determines has the provision of hospital care as its principal function or purpose constituting the basis for its exemption under section 501(c)(3).

This assessment is designed and intended to meet the IRS needs assessment requirement as it is currently understood and interpreted by Shriners Children's leadership.

Shriners Children's Commitment to the Community

Shriners Children's Chicago, a pediatric hospital located on Chicago's far west side, treats children from across the United States and from countries around the world. It is part of a larger system of Shriners Children's, whose home office is located in Tampa, Florida. Shriners Children's Chicago provides specialty care to pediatric patients regardless of the family's ability to pay. Several of the major conditions treated by Shriners Children's Chicago include:

- Arthrogryposis
- Brachial Plexus Injuries, Hand Injuries
- Cerebral Palsy
- Clubfoot
- Craniofacial Anomalies
- Hip Dysplasia
- Limb Deficiencies
- Osteogenesis Imperfecta
- Plastic Surgery
- Scoliosis
- Spina Bifida
- Spinal Cord Injury
- Stable Fractures

A number of sub-specialty services are also offered to comprehensively treat and support our patients and families.

Shriners Children's Chicago is a teaching hospital supporting the educational needs of medical; nursing; physical, occupational, and speech therapies; and radiology residents/students. Research is one of the cornerstones of Shriners Children's Chicago's mission. Our in-house research teams include internationally renowned experts whose discoveries have changed treatment methodologies and improved the lives of countless children. Whether in the laboratory or in clinical environments, we are committed to the continual pursuit of knowledge that improves the delivery of clinical care.

Shriners Children's Chicago can meet the unmet health needs of our respective communities by virtue of the services we already provide.

Our Community

At Shriners Children's Chicago, we serve our patients within a 60 licensed bed facility. Approximately 80 percent of our U.S. patients come from within a 128-mile radius of our facility. Below is a heat map of where our patients are located (Figure 1). The darker orange color on the map represents a larger patient population. Many of our patients live in the greater Chicago area, or within northern Illinois and Indiana. We also serve patients from the surrounding states: Wisconsin, Iowa, Michigan, and Ohio.

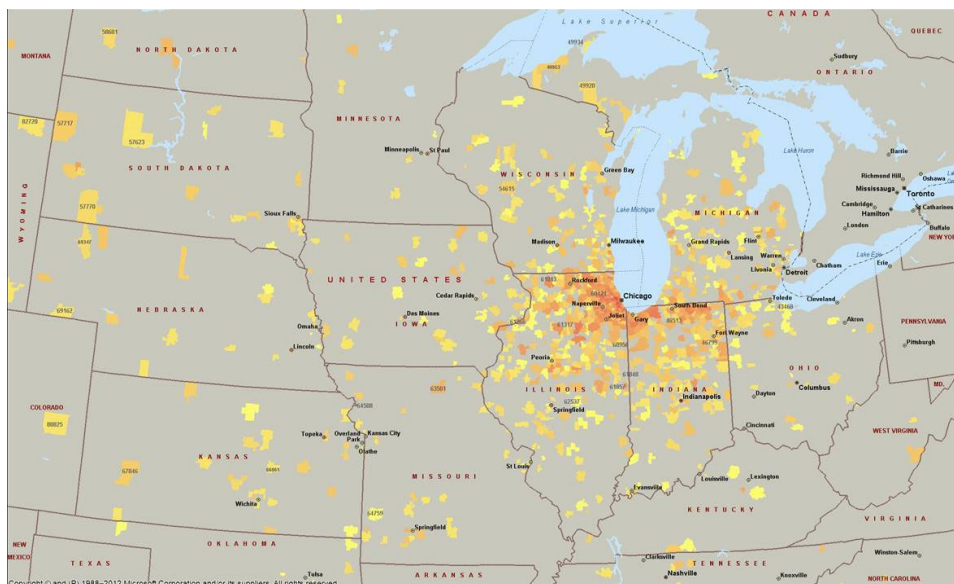


Figure 1

SHC – Chicago specializes in three pediatric service lines: orthopedics, craniofacial deformities including cleft lip and palette, and pediatric rehabilitation/spinal cord injury. All of the patients we serve are under the age of 18 years old and have a condition or diagnosis within one of the above-mentioned service lines.

Below is a chart (Figure 2) of the change in pediatric population within 120 miles.

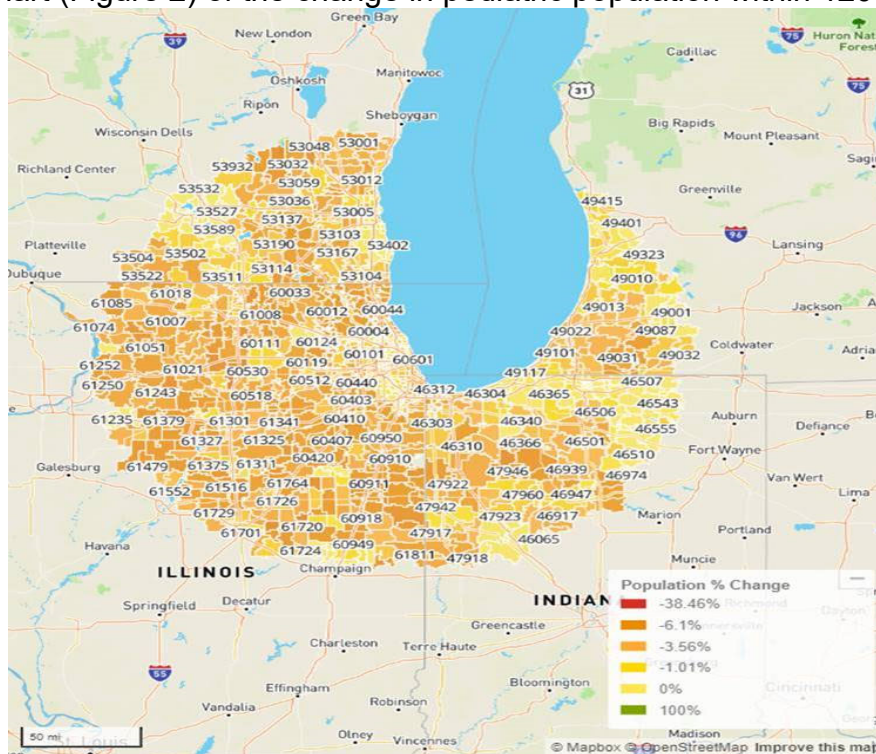


Figure 2

Process and Methods

This year, due to the global COVID-19 pandemic, the Director of Performance Improvement and Risk Management collaborated with the hospital's Administrator, Director of Patient Care Services, Director of Financial Services, and the Chief of Staff to perform this year's Community Health Needs Assessment.

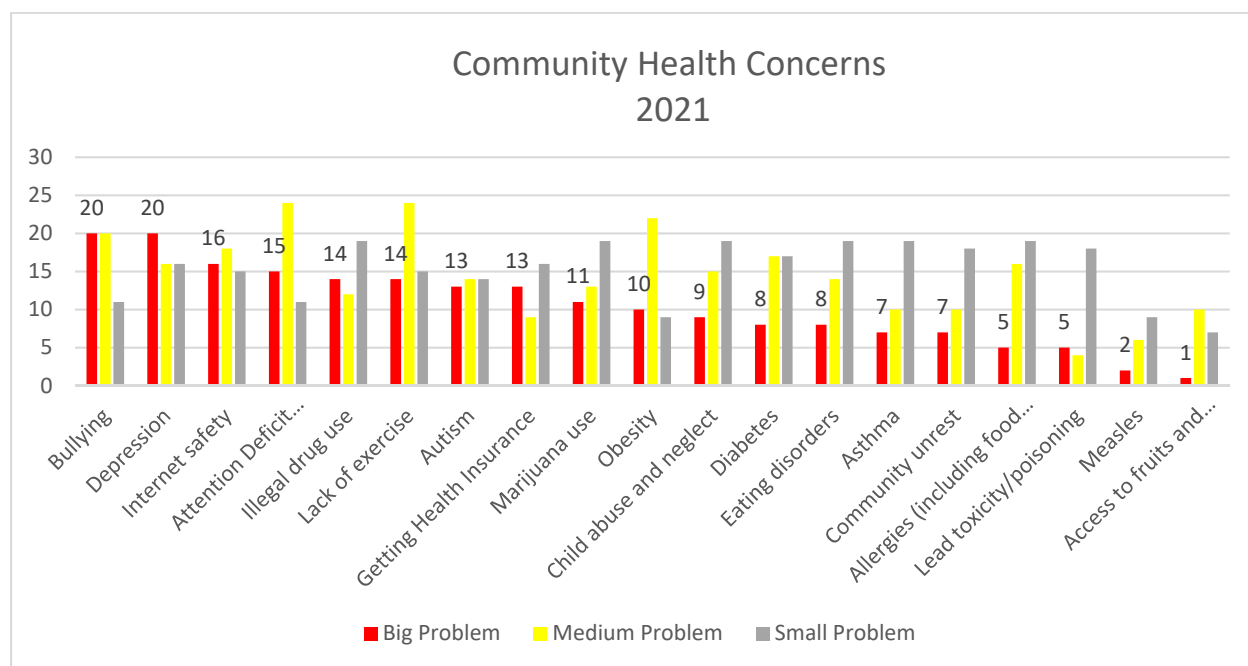
Primary Community Survey of Parents/Caregivers

As survey was developed to query parents and caregivers on their concerns of the most pressing health concerns in the community. The survey was given to the parents/guardians of all patient types (outpatient, inpatient, ambulatory surgery) when they presented at the Patient Registration desk for their visit encounter.

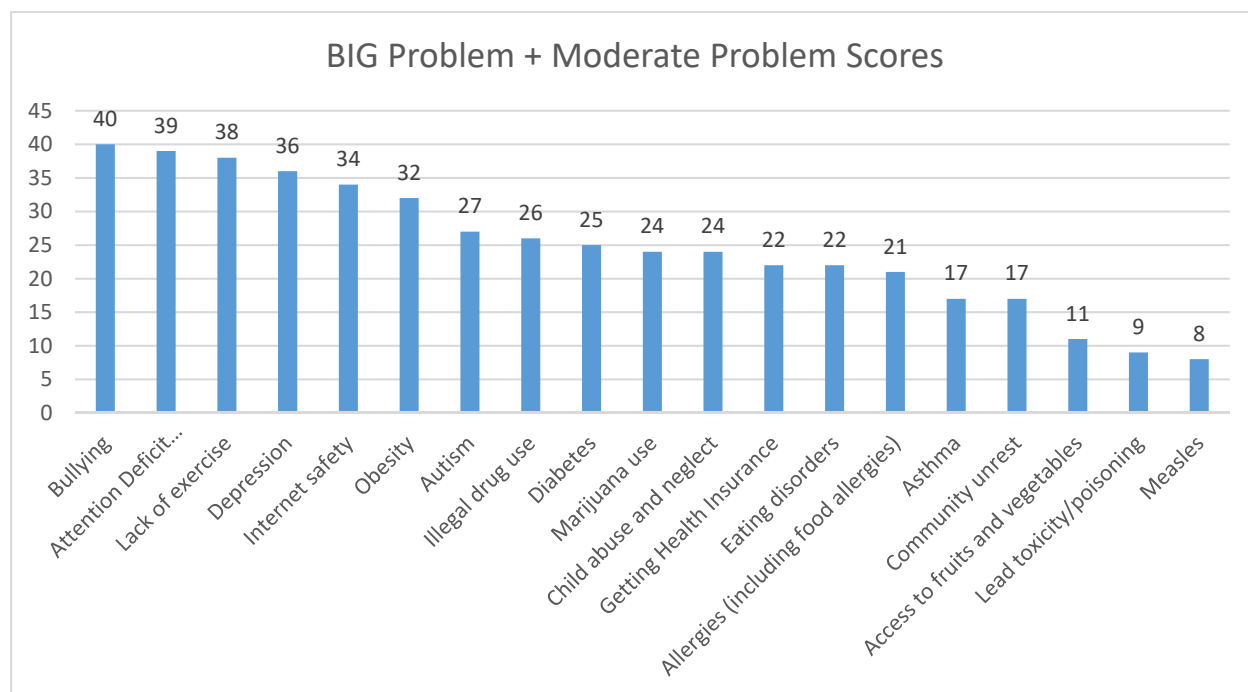
Parents/guardians were encouraged to complete the survey while they waited for their appointment. Drop off boxes were located at two different areas of the lobby to facilitate easy, anonymous submission of the completed survey. The survey was distributed from August 1, 2021 through October 31, 2021.

Key Findings

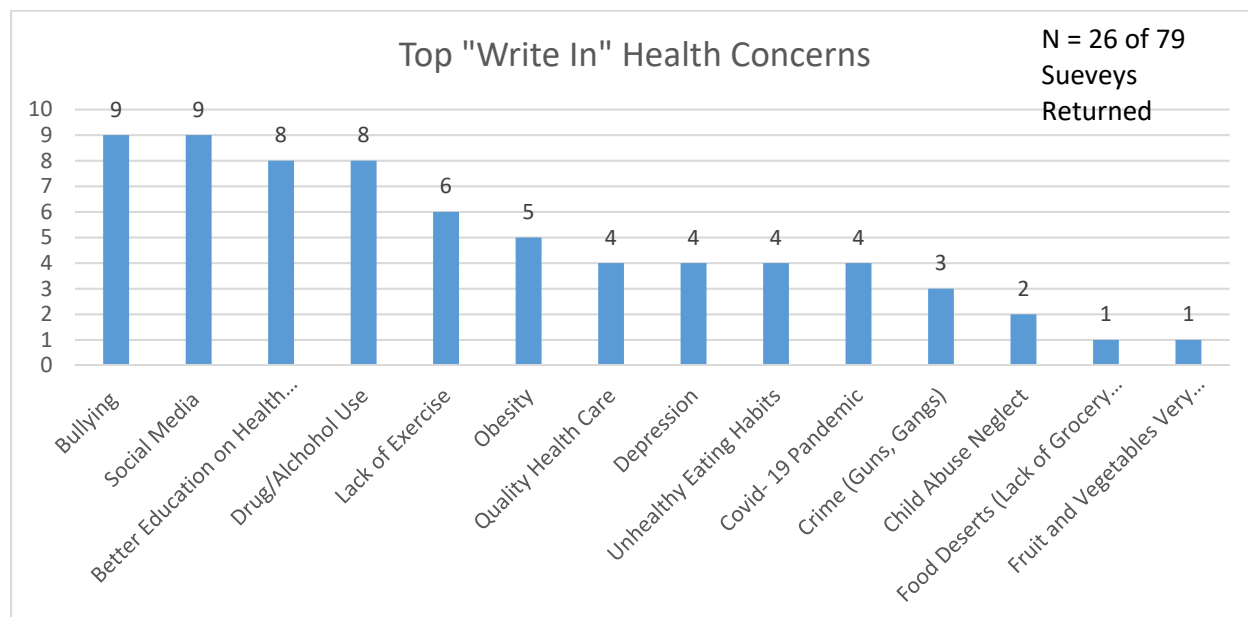
There were 79 surveys returned in total. Not all questions were answered on each survey and not all surveys had the "write in your top 3 community concerns" section completed. In fact, only 33% of the surveys had one or more responses to the question.



Bullying, depression and internet safety were the top three issues rated as "big problems", with bullying and depression each capturing 25% of the respondents as the top problem.



When reviewing the issue categories, several respondents rated the top issues as a “medium issue” indicating it was still a concern for them. When the scores for “big problem” and “moderate problem” were combined, bullying stayed as the number one issue. However, attention deficit disorder and lack of exercise moved up in importance.

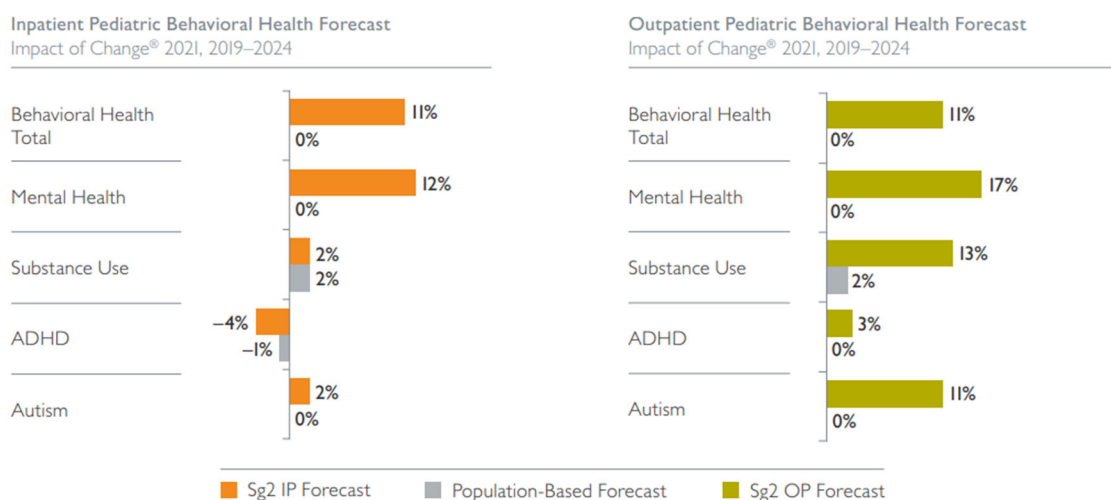


Lastly, when given the opportunity to express their greatest concern via free text, parents/guardians clearly revealed bullying, internet safety and healthy lifestyle issues were of greatest concern.

Secondary Data Analysis

When looking at pediatric health concerns across the country, evidence shows there is a growing prevalence along with an increase in severity of behavioral health conditions and obesity. This rise in prevalence has contributed to gaps in health inequalities and has created significant workforce and facility challenges. According to a report published by Sg2¹, the COVID-19 pandemic has led to an increase in the incidence of mental health and substance use condition and as a result, this is driving long-term care needs. The report further illustrates access barriers will persist due to heightened demand, stigma, insufficient treatment availability and continued strains on the behavioral health workforce.

Healthcare providers expect to see amplified acuity and suicidality in both children and adults due to the stressors as well as delays in care brought about by the pandemic. In order to combat such outcomes, it is essential healthcare providers and communities work together to prevent gaps in access and avoidable utilization. The table below outlines the expected increase or decrease in behavioral/mental health disparities among the pediatric population.



Based on the previous table, mental health issues, substance abuse and autism continue to show growth among individuals ages 0-17. This has been a growing concern, with an increase over the last 10 years. The extent, to which mental health issues are prevalent among children and adolescents, and the necessity to treat such issues, has led to the creation of the 28 goals within the Healthy People 2030² framework. This website provides clearly defined objectives, data, priority areas along with additional goals and resources. These goals include everything from increased access to care; decrease in suicide, neglect and abuse; and an increase in resiliency following anxiety and depression in this age group.



Other concerns among the pediatric population include obesity, bullying, internet safety (including social media) and obesity/diabetes. Recent national polling by Mott Children's indicates the following are the top 10 Child Health Concerns in 2020.

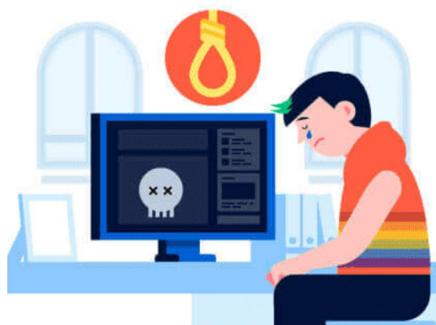


For years, healthcare and public health professionals have been developing tools to address healthy eating habits, the importance of physical activity, and the dangers of smoking. However, it should be noted internet safety, overuse of social media and bullying are listed as concerns by all three parent demographics in the table above. These issues have been gathering momentum among parents and adolescents as they pose significant risk to the development of mental health disorders and behaviors addressed above.

It is also important for parents to remember social media can be an important vehicle for them to maintain social and family connections that are so vital for their emotional well-being during stressful times such as the recent pandemic. However, increased time online can also raise the risk of cyberbullying and other types of abuse. Parents and caregivers need to have ongoing conversations with their children and teens to guide them in safe internet practices, which include the privacy protection and how to avoid those who try to prey on kids via the internet.

Latest information regarding internet safety and bullying show some startling statistics³:

- 70% of kids encounter sexual or violent content online while doing homework research
- 17% of tweens (age 8-12) received an online message with photos or words which made them feel uncomfortable
 - o only 7% of parents were aware of the occurrence
- 65% of 8-14 year-olds have been involved in a cyberbullying incident
- 36% of girls and 31% of boys have been bullied online
- 16% of high school students have considered suicide because of cyberbullying



16% of highschool students have seriously considered suicide because of cyberbullying.

Cyberbullying affects up to **15%** of children and even more for subgroups who are particularly vulnerable (LGBT, obese or those with disabilities).

According to stopbullying.gov⁴, cyberbullying is bullying that takes place over digital devices like cell phones, computers, and tablets. Cyberbullying can occur through SMS, Text, and apps, or online in social media, forums, or gaming where people can view, participate in, or share content. Cyberbullying includes sending, posting, or sharing negative, harmful, false, or mean content about someone else. It can include sharing personal or private information about someone else causing embarrassment or humiliation. Some cyberbullying crosses the line into unlawful or criminal behavior.

The most common places where cyberbullying occurs are:

- Social Media, such as Facebook, Instagram, Snapchat, and Tik Tok
- Text messaging and messaging apps on mobile or tablet devices
- Instant messaging, direct messaging, and online chatting over the internet
- Online forums, chat rooms, and message boards, such as Reddit
- Email
- Online gaming communities

The same site, stopbullying.gov provides some good starting points for parents and caregivers to utilize when such instances happen. We have provided these suggestions below:

What to Do When Cyberbullying Happens

If you notice the warning signs of a child who may be involved in cyberbullying, take steps to investigate the child's digital behavior. Cyberbullying is a form of bullying, and adults should take the same approach to address it: support the child being bullied, address the bullying behavior of a participant, and show children cyberbullying is taken seriously. Because cyberbullying happens online, responding to it requires different approaches. If you think a child is involved in cyberbullying, there are several things you can do:

- Notice – Recognize if there has been a change in mood or behavior and explore what the cause might be. Try to determine if these changes happen around a child's use of their digital devices.
- Talk – Ask questions to learn what is happening, how it started, and who is involved.
- Document – Keep a record of what is happening and where. Take screenshots of harmful posts or content if possible. Most laws and policies note bullying is a repeated behavior, so records help to document it.
- Report – Most social media platforms and schools have clear policies and reporting processes. If a classmate is cyberbullying, report it the school. You can also contact app or social media platforms to report offensive content and have it removed. If a child has received physical threats, or if a potential crime or illegal behavior is occurring, report it to the police.
- Support – Peers, mentors, and trusted adults can sometimes intervene publicly to positively influence a situation where negative or hurtful content posts about a child. Public Intervention can include posting positive comments about the person targeted with bullying to try to shift the conversation in a positive direction. It can also help to reach out to the child who is bullying and the target of the bullying to express your concern. If possible, try to determine if more professional support is needed for those involved, such as speaking with a guidance counselor or mental health professional.

Sources:

- 1) Impact of Change®, 2021; Proprietary Sg2 All-Payer Claims Data Set, 2018; The following 2018 CMS Limited Data Sets (LDS): Carrier, Denominator, Home Health Agency, Hospice, Outpatient, Skilled Nursing Facility; Claritas Pop-Facts®, 2021; Sg2 Analysis, 2021
- 2) Office of Disease Prevention and Health Promotion. (n.d.). *Healthy People 2030*. U.S. Department of Health and Human Services. <https://health.gov/healthypeople/objectives-and-data/browse-objectives>
- 3) www.guardchild.com/statisticss
- 4) www.stopbullying.gov

Prioritization of Community Health Needs

Key Findings Prioritization Table

Variables	SHC-Chicago Community Need Identified	SHC-Chicago Strategic Plan	SHC-Chicago Resources Available	Community Impact (High - Low)
Depression	YES	YES	YES	High
Social Media/Internet Safety/Bullying	YES	NO	YES	Medium
Drug & Alcohol Use/Miss Use	YES	NO	YES	Medium
Healthy Weight and Nutrition	YES	YES	YES	High

Based on the data reviewed and given our mission and the resources we have available, Shriners Children's Chicago has chosen to focus its 2021 CHNA Action Plan on the unmet needs of our entire patient population related to the above topics.

Shriners Children's Chicago recognizes there are other identified unmet needs within the identified community population. Due to the specialty nature of the hospital, its mission, vision and values, staffing and available resources, Shriners Children's Chicago is unable to care for these needs. However, Shriners Children's Chicago is integrally connected with many resources in the community and will continue to refer patients and families as appropriate.

Action Plan

Past Efforts - 2019 Action Plan Results

Shriners Children's Chicago chose to focus its 2019 CHNA Action Plan on the unmet community needs related to the diagnosis and treatment of scoliosis.

- Educational materials on scoliosis screening were developed by Shriners Children's Chicago and distributed to Cook County public schools and schools in DuPage, Will, and Lake counties, as well as to several pediatricians and school nurses in the area

- Educational seminars (Virtual Grand Rounds) for local pediatricians were hosted by Shriners Children's Chicago and have been well received.
- A Scoliosis Screening Poster (in English and Spanish) was created as an educational tool for potential evaluators in schools/clinics. These posters were distributed to school nurses in four county areas and at various conferences to pediatricians, nurse practitioners and other health care providers.
- Connected through Facebook and Twitter with local and national scoliosis family and awareness groups. Information sharing and messages of support occurred.
- Shared patient success stories of how scoliosis diagnosis and proper treatment improved their everyday lives, on our hospital blog and website.
- Website was redesigned to include more resources, links and education for the community.
- Shared outcomes from research on patients with scoliosis and best practices in treatment.
- Continued partnerships with Easter Seals, and several other community programs to offer assessment and care to patients in need of our services.

Ongoing and Future Efforts Related to Scoliosis

- Continue to conduct screening at community events (i.e.: health fairs, expos, community outreach events, etc.)
- Orthopaedic surgeons provide weekly clinics at University of Illinois Health and John H. Stroger, Jr Hospital of Cook County.
- Additional pediatric orthopedic spine surgeon hired at Shriners Children's Chicago to help treat more children with spine deformity in the community.
- Continue to offer opportunities for pediatric spine fellowships at the Chicago Hospital.
- Participate in the American College of Surgeon's National Database to share outcome data.
- Continue to host and present educational seminars for pediatricians and family physicians to understand better how to diagnose and treat patients with scoliosis.

Written Comments on 2019 Community Health Needs Assessment

Shriners Hospitals for Children Community Health Needs Assessment and implementation was made widely available to the public on Shriners Hospitals for Children website at <https://www.shrinerschildrens.org/en/community-health-needs> In addition to posting the Community Health Needs Assessment, contact information including email were listed. No comments or questions were received.

2021 Action Plan and Performance Measures

<i>Goal</i>	<i>Objective</i>	<i>Strategy</i>	<i>Timeframe</i>
Support and/or treat children at high risk for depression and suicide	<ol style="list-style-type: none"> 1. Identify children at high risk for depression and suicide. 2. Provide supportive care to patients identified as high risk while in house and make appropriate referrals to the community in preparation for discharge 	<ol style="list-style-type: none"> 1. Hire additional psychologist (1.0 FTE) 2. Continue to administer screens to all outpatients and inpatients 3. Continue to escalate positive screens to psychologist assessments 4. Update screening process and documentation 5. Provide community referrals as needed 	<ol style="list-style-type: none"> 1. 1 Q 2022 2. On-going 3. On-going 4. May 2022 5. On-going
Have patients and parents feel knowledgeable and able to help their child navigate the internet and social media safely	Increase awareness and knowledge of potential strategies to combat Cyberbullying and promote social media and internet safety	<ol style="list-style-type: none"> 1. Provide educational information to all outpatients and inpatients at the time of registration 	<ol style="list-style-type: none"> 1. 3Q 2022 and on-going
Have patients and parents feel knowledgeable and able to help their child navigate substance use and abuse	Increase awareness and knowledge of potential strategies to combat substance abuse	<ol style="list-style-type: none"> 1. Provide educational information to all outpatients and inpatients at the time of registration 	<ol style="list-style-type: none"> 1. 4Q 2022 and on-going
Support and/or treat children with special nutritional needs and physical limitations	<ol style="list-style-type: none"> 1. Identify children with special nutritional needs and at risk for obesity 2. Provide nutritional support and education patients identified as high risk and make appropriate referrals to the community resources as necessary 	<ol style="list-style-type: none"> 1. Hire additional dietician (0.6 FTE) 2. Continue to assess and provide dietary recommendations to all inpatients (Chicago and St. Louis) 3. Continue to assess and provide recommendations to high-risk outpatients as requested. 4. Provide weight management counseling as requested 5. Provide community referrals as appropriate 	<ol style="list-style-type: none"> 1. 2 Q 2022 2. On-going 3. On-going 4. 2Q 2022 5. On-going

Conclusion

2021 Community Health Needs Assessment Report Available Online or in Print

The 2021 Community Health Needs Assessment is available at:

<https://www.shrinerschildrens.org/en/community-health-needs>

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Date adopted by Shriners Children's Chicago leadership team.