



Children's
of Alabama

**Community Health Needs Assessment
Children's of Alabama
December 31, 2016**

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EXECUTIVE SUMMARY

Children's of Alabama's Historical and Significant Community Role

Children's of Alabama (Children's) has provided specialized medical care for ill and injured children across the state and throughout the southeastern United States since 1911. Children's is ranked among the best children's hospital programs in the nation by US News & World Report. In 2012, Children's provided care for nearly 15,000 inpatients and more than 675,000 outpatient visits to patients from every county in Alabama and from 41 other states and four foreign countries. With more than 2 million square feet, it is the third largest pediatric medical facility in the nation. Children's offers inpatient and outpatient services across its Russell Campus on Birmingham's historic Southside with additional outpatient services provided at Children's South and Children's on 3rd. Primary care is provided at more than a dozen medical offices in communities across central and north Alabama. Children's of Alabama is the only medical center in Alabama dedicated solely to the care and treatment of children. It is a private, not-for-profit medical center that serves as the primary site of the University of Alabama at Birmingham (UAB) pediatric medicine, surgery, research and residency programs. In 2012, Children's moved much of its inpatient service into a new state of the art 760,000 square foot building, The Benjamin Russell Hospital for Children.

As a primary source of pediatric healthcare, Children's of Alabama (in affiliation with the University of Alabama in Birmingham Departments of Pediatrics and Surgery) serves children from all 67 Alabama counties and the region. In addition to traditional pediatric healthcare, Children's of Alabama boasts numerous programs designed to educate school health nurses, parents, and patients on a wide scope of conditions and illnesses, and safety. Since its inception more than fifty years ago, the Regional Poison Control Center has provided telephone medical intervention, as well as medical and public education on product safety.

Children's modifies and broadens its pediatric healthcare services as medicine advances and the regional demographics change. Over the last two decades, primary care practices were incorporated into the system structure, as well as locating some subspecialty practices outside of Birmingham. The Children's payor mix changes with the economy, and currently reflects an approximate 60% Medicaid patient population. In 2015, Children's provided more than \$75 million in community benefit and financial assistance expense to advance pediatric care, treatment training, and research for the Alabama community and beyond.

Community Health Needs Assessment

In order to better support the health of children in its community and to comply with new federal regulations, in 2016 Children's of Alabama engaged The Public Affairs Research Council of Alabama to assist in conducting a community health needs assessment to identify health concerns for children across the state. The primary geographic focus of the assessment was on Children's of Alabama's local service area of Bibb, Blount, Chilton, Jefferson, Shelby, St. Clair, and Walker counties. The assessment included a secondary focus on health needs that span the state of Alabama.

Children's of Alabama assessed community health needs and concerns by:

- Inviting school nurses, physicians, child advocates, business and community leaders to participate in an online survey addressing children's health needs.
- Conducting interviews with community leaders, public health officials and other key stakeholders to determine their biggest concerns for the health of children in their communities.
- Reviewing existing national and state public health data on key children's health issues.
- Inventorying existing programs and resources in the community that are working to address issues in child health.

Key Findings

Children's established a list of 16 indicators of child health based on The Annie E. Casey Foundation's *National Kids Count Data* and *Child Health USA* (U.S. Dept of Health and Humans Services/Health Resources and Services Administration's annual report on the health status of America's children). Using those indicators, children's compared the rankings of the counties in its primary service area (when available), and the state as a whole to national statistics.

Of the 16 indicators, there were 9 instances where Alabama ranked below the national average:

Infant mortality* ¹	Obesity
Pre-term Births*	Asthma
Low and Very Low Birth Weight Babies*	Preventable Child Deaths
Teen Pregnancy*	Children With Special Health Care Needs
	Mental Health

These findings were consistent with and supported by more than 500 responses from the survey and interviews with key stakeholders.

Implementation

Based on the findings of the assessment, in 2017 Children's of Alabama will develop business plans to:

- Focus its current community programming in child safety and asthma.
- Continue and strengthen its community partnerships around mental health, obesity, and children with special health care needs—areas of need that are well supported through community-based collaborations.
- Monitor community efforts to address infant mortality, pre-term births, low and very low birth weight babies, and teen pregnancy as these are beyond Children's scope of service and may not be included in direct actions.

The Board of Trustees adopted the implementation plan on December 15, 2016.

*These health needs are beyond the scope of COA's direct services and therefore may not receive direct action planning in the future.

COMMUNITY HEALTH NEEDS ASSESSMENT REPORT TO THE COMMUNITY

Community Health Needs Assessment Purpose

Beginning in 2011, new federal IRS regulations require all nonprofit hospitals to conduct a community health needs assessment every three years. As a requirement, community stakeholders, public health experts and officials, and community advocates shall be asked for guidance to identify significant community health needs. The community's overall health is a shared responsibility by many community and governmental entities. The desired outcome is to stimulate more collaboration and coordination of community programs by stakeholders to address the community's significant needs and create healthier communities.

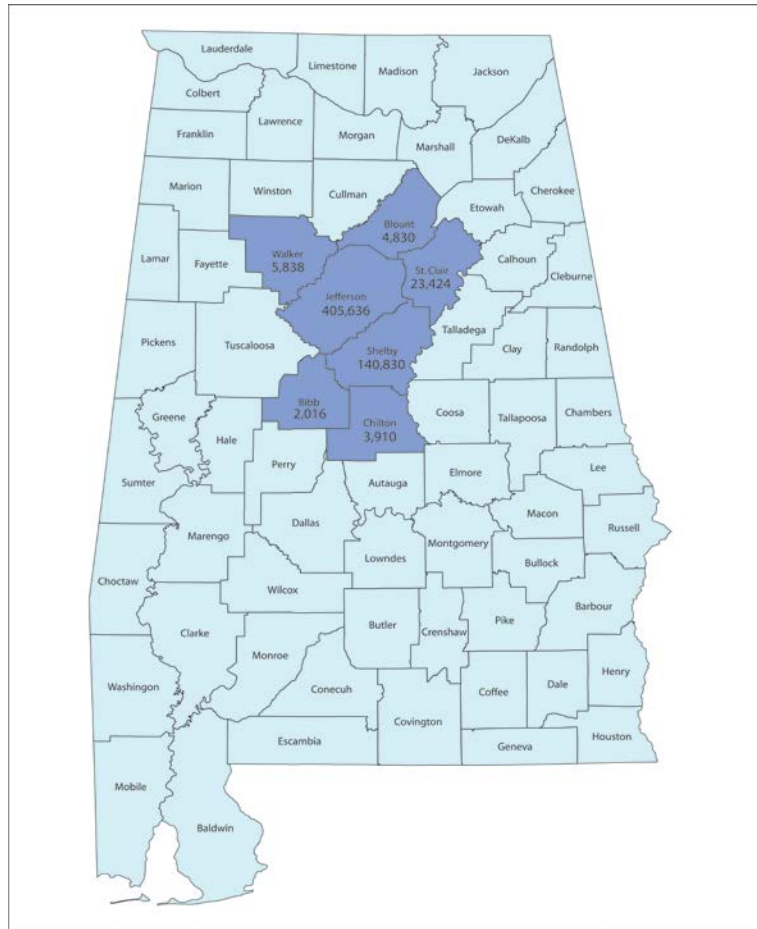
For more than a century, Children's has focused on treatment and initiatives educating and improving the health of children in the metropolitan community and throughout Alabama. The new regulations present Children's an opportunity to formally evaluate, assess, and implement existing or new programs through alignment of Children's expertise and resources with the identified needs.



Defining the Children's of Alabama Community

Children's of Alabama has identified its primary community as children (ages 0-19) in the seven county Birmingham-Hoover Metropolitan Statistical Area that includes Bibb, Blount, Chilton, Jefferson, Shelby, St. Clair and Walker counties. Children ages 0-19 comprise one quarter of the MSA population.

While the seven county MSA represents Children's of Alabama's geographic footprint and is home to a majority of its patients, the hospital has a broader reach throughout the state. Because it is the only medical center in Alabama dedicated solely to pediatric care, and 49% of its patients come from outside of the seven county MSA, Children's identified its secondary community as all children in Alabama.



Community Demographics

According to the [Alabama 2015 KIDS COUNT Data Book \(Appendix A\)](#), the seven county MSA has an average median household income of \$42,882 with approximately 18.6% of persons living below the poverty level. More than one half of mothers with young children are employed and one quarter of the population is under age 19. With respect to racial diversity, the MSA is 58.7% White, 30% African American, 6.7% Hispanic, and 4.7% other races (Native American, mixed races, etc.). Jefferson County, the largest county in the MSA, is more evenly divided racially, with a 42.7% White and 47.5% African American population.

Percentage of Patients from Seven County MSA (Source: Children's of Alabama, 2015 patient data)

County	Inpatient Cases		Outpatient Visits	
	Cases	%	Visits	%
Bibb	124	0.80	2,456	0.36
Blount	278	1.80	5,807	0.86
Chilton	257	1.66	4,687	0.69
Jefferson	4,991	32.28	377,688	55.79
Shelby	1,088	7.04	127,895	18.89
St. Clair	447	2.89	25,742	3.80
Walker	398	2.57	6,873	1.02
TOTAL Patients from MSA	7,583	49.04%	551,147	81.41%
Total system cases/visits	15,462	100%	677,037	100%

Methods Used to Conduct the Community Health Needs Assessment (CHNA)

Continuing the effort begun in 2011 to better support the health of children in its community and to comply with new federal regulations, Children's of Alabama engaged The Public Affairs Research Council of Alabama (PARCA) to assist in conducting the 2016 community health needs assessment. The main assessment focused on Children's primary service area as previously defined. The secondary service area for assessment focus was the remaining portion of the state. Children's assessment tools included an online survey, face-to-face interviews, analysis of existing public pediatric health data, and inventory of existing community programs and resources.

Online Community Survey

Children's of Alabama invited school nurses, pediatricians, family practice physicians, and community advocates to participate in an online survey to identify health needs for children in Alabama. Participants were asked open-ended questions about what they see as the greatest health needs for children ages 0-5, 6-13 and 14-18. After identifying one issue on which to focus, each respondent was asked to identify resources available in their community to address that specific need, if they have reasonable access to those resources, and if there are inadequate resources, what could be done to better support children with that particular health issue. Specific questions from the survey can be found in **Appendix B**. The survey was completed by more than 500 people between April and August 2016. Of the survey respondents, a quarter identified themselves as educators, a quarter identified themselves as health professionals, the balance were community leaders/child advocates, and a fifth did not identify themselves at all.

Interviews

In addition to the online survey tool, face-to-face and telephone interviews were conducted in July and August 2016 with Alabama's public health leaders and community advocates (**Appendix C**). They were chosen for their knowledge of medically and socially underserved areas, public health, and pediatric health challenges. Interviewees were asked what they perceive as the greatest health needs for children in their specific communities and in the state in general.

Secondary Data Sources and Analysis

An analysis of publicly available data to identify health needs for children in its primary community and throughout Alabama was provided by PARCA (**Appendix D**). Children's used the secondary data sources—primarily Child Health USA 2014 and National KIDS COUNT 2015 Data Book—to identify key indicators of child health. Child Health USA is an established annual publication of health status and service needs of America's children published by the Health Resources and Services Administration/U.S. Department of Health and Human Services. KIDS COUNT, a nationally established and recognized data project of the Annie E. Casey Foundation, annually tracks and reports on the well-being of children in the United States.

Children's compiled a list of the health status indicators that are used by Child Health USA as determinants of child health and compared them to those indicators used by the National KIDS COUNT 2015 Data Book. There is overlap in 16 indicators:

Indicator

- Infant mortality
- Preterm births
- Low birth weight babies
- Very Low birth weight babies
- Children and teens overweight or obese (ages 10-17)
- Percent of children with asthma problems (under age 18)
- Child deaths (rate per 100,000) (ages 1-14)
- Total teen births (rate per 1,000) (ages 15-19)
- Children with special health care needs (under age 18)
- Teen deaths by accident, homicide, and suicide (ages 15-19)
- Children who have one or more emotional, behavioral, or developmental conditions (ages 2-17)
- 2-year-olds who were immunized
- Children who are confirmed by child protective services as victims of maltreatment (under age 18)
- Children 18 and below without health insurance
- Children and teens not exercising regularly (ages 6-17)
- Teens ages 12-17 who abused alcohol or drugs in the past year

Children's used the indicators as its basis for determining child well being and then utilized other secondary data sources to find state, and when available, county level data in order to compare its community's rankings in these measures to the national averages.



Community Health Needs Assessment Results

The responses from the surveys and interviews were validated by the secondary data. Those areas of child health for which Alabama ranked below the national average, were also largely seen as issues to our survey respondents and interviewees.

Community Input

<i>Identified Pediatric Health Needs</i>	% of responses
Environmental Health	5%
Asthma/Allergies	
Cigarette smoke	
Water	
Nutrition and Exercise	23%
Obesity	
Lack of Exercise	
Infant Nutrition/Nutritious Foods	
Diabetes	
Mental Health Issues	26%
Anger Management	
Emotional, Behavioral, Developmental	
Depression	
Panic, Anxiety, Stress Management	
Bullying	
Autism	
ADD/ADHD	
Parent Health Education	11.5%
Child and Adolescent Safety	11%
Preventable child deaths	
Victims of maltreatment	
Abuse of drugs and alcohol	
Accident, homicide, suicide	
Access to Care	10.5%
Uninsured/Access to health insurance	
Special Health Needs	
Struggles with High co-pays/deductibles	
Access to dental care	
Transportation	
Health Prevention	8%
Immunizations	
Infant Mortality	
Preterm births	
Low birth weight babies	
Very low birth weight	
Total teen births	
Other	5%

Secondary Data

Of the 16 indicators of child health the Children's of Alabama identified, there were five areas where Alabama is average or above average relative to the United States:

Indicator	US	AL Rank	Alabama	Source
2-year-olds who were immunized (percent)	74.6%	26	76.9%	KIDS COUNT and Child Health USA 2014
Children who are confirmed by child protective services as victims of maltreatment (rate per 1,000) <18	9.4	18	7.9	KIDS COUNT and Child Health USA 2014
Children 18 and below without health insurance (percent)	6%	21	4%	KIDS COUNT and Child Health USA 2014
Children and teens not exercising regularly (percent) 6-17	46%	6	39%	KIDS COUNT (National Survey of Children's Health/CDC)
Teens ages 12-17 who abused alcohol or drugs in the past year (percent)	5%	5	5%	KIDS COUNT & SAMHSA

There were nine areas where Alabama ranked at or below the national average:

Indicator	US	AL Rank	Alabama	Source
Infant mortality (rate per 1,000 live births)	5.8	50	8.7	KIDS COUNT and Child Health USA 2014
Preterm births (percent of live births)	11%	48	15%	KIDS COUNT and Child Health USA 2014, Health Indicators Warehouse
Low-birth weight babies (percent of live births)	8 %	48	10.10%	KIDS COUNT and Child Health USA 2014
Very Low-birth weight babies (percent of live births)	1.4%	48	1.9%	KIDS COUNT and Child Health USA 2014, Health Indicators Warehouse
Children and teens overweight or obese (percent) 10-17	31%	42	35%	KIDS COUNT and Child Health USA 2014
Percent of children with asthma problems (percent) <18	9%	48	12%	KIDS COUNT and CDC
Child deaths (rate per 100,000) 1-14	16	45	24	KIDS COUNT and CDC
Total Teen Births (rate per 1,000) 15-19	24	41	32	KIDS COUNT and Child Health USA 2014
Children with Special Health Care Needs (percent) <18	20%	19	20%	KIDS COUNT and Child Health USA 2014
Teen deaths by accident, homicide, and suicide (rate per 100,000) 15-19	33	35	45	KIDS COUNT and Child Health USA 2014
Children who have one or more emotional, behavioral, or developmental conditions (percent) 2-17	17%	15	17%	KIDS COUNT (National Survey of Children's Health/CDC)

Based on percentages, the top five issues that survey respondents identified as major health issues for children in their communities were also identified as health needs based on the secondary data.

After thorough analysis of the community input and secondary data, Children's of Alabama identified the following issues to be addressed in its Community Benefit Implementation Plan:

Infant mortality	Asthma
Pre-term Births	Preventable Child Deaths
Low and Very Low Birth Weight Babies	Children With Special Health Care Needs
Teen Pregnancy	Mental Health
Obesity	

Information and Resource Gap

An inventory of current community and internal programs addressing the identified issues within the Children's scope of service was conducted over several months. Some of the resources were identified through survey responses. After analysis and evaluation of resources committed to the identified issues, two areas were isolated as areas for Children's to make the greatest impact. The two specific issue areas are Asthma and Child Safety.

Children's is currently involved and will remain involved in the multiple community/state coalitions addressing obesity, mental health, and children with special health care needs (**Appendix E**). The remaining five areas (infant mortality, pre-term births, low and very low birth weight babies, and teen pregnancy) are outside the scope of Children's direct services and may not be part of any direct action plan. Children's will monitor the community activity in these areas.

Prioritization and Implementation Planning

After reviewing the identified needs, analyzing the existing resources within the community to address those needs and prioritizing opportunities to have the most impact on child health with limited resources, Children's developed a multi-phase implementation plan to address the major community health needs recognized through the needs assessment process. Collaboration with community organizations currently addressing many of the identified needs combined with Children's pediatric programming and expertise are key to implementation. The plan also includes continuation of further identification of child health needs through strategic partnerships with community organizations conducting needs assessments.

Implementation Plan

At its meeting on December 15, 2016, the Board of Trustees of Children's of Alabama adopted the following implementation plan to address the following community health needs for the three years beginning in 2017:

1. Children's will continue playing a key role in addressing:
 - Asthma
 - Child safety
2. Children's plans to continue its work through and with its community partners to support community organizations and others who are currently addressing the following significant health needs for children:
 - Mental health
 - Obesity
 - Children with special health care needs

3. Finally, through the assessment process, four health needs were identified which are beyond the scope of Children's of Alabama's direct services. Therefore, the following four areas may not receive direct action planning or resource allocation during the 2017-2019 implementation period:
 - Infant mortality
 - Preterm births
 - Low and very low birth weight babies
 - Teen pregnancy

APPENDIX A - MSA DEMOGRAPHICS
2015 Alabama Kids Count Data Book

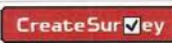
Column1	Bibb	Blount	Chilton	Jefferson	St. Clair	Shelby	Walker	Median
Median Household Income	\$39,781	\$44,392	\$41,348	\$45,024	\$52,437	\$68,718	\$37,193	\$42,882
Percent all persons below poverty level	18.1%	15.8%	19.5%	18.0%	15.2%	7.9%	20.9%	18.6%
Percent employed mothers with young children	48.5%	52.3%	39.4%	61.9%	60.7%	61.4%	46.6%	58.4%
Children in Single-Parent Families	29.8%	20.4%	27.3%	36.8%	22.2%	17.2%	28.9%	34.0%
Total County Population	22,506	57,719	43,931	660,793	86,697	206,655	65,471	
County Child Population	5,510	15,416	11,915	172,044	21,657	54,626	16,355	
Children as Percentage of Population	23.0%	25.8%	26.4%	25.6%	25.0%	26.8%	24.3%	25.4%
Under Age 5 (%)	23.2%	23.7%	24.3%	25.7%	24.6%	22.4%	24.1%	
Ages 5-9 (%)	24.9%	24.9%	25.8%	25.4%	26.6%	25.5%	24.3%	
Ages 10-14 (%)	26.4%	26.5%	26.8%	24.6%	25.5%	27.1%	26.1%	
Ages 15-19 (%)	25.5%	25.0%	23.1%	24.3%	23.3%	25.0%	25.4%	
Diversity of Children (%)								
White	74.8%	80.5%	72.7%	42.7%	82.8%	72.2%	84.3%	58.7%
African American	20.1%	2.3%	11.5%	47.5%	9.7%	13.4%	8.0%	30.0%
Hispanic	2.9%	14.8%	12.6%	5.9%	3.8%	9.4%	4.2%	6.7%
Other	2.2%	2.3%	3.1%	3.9%	3.8%	4.9%	3.5%	4.7%

APPENDIX B—SURVEY INFORMATION

Community Health Needs Assessment Survey

Community Needs Assessment Survey Children's Hospital of Alabama (...)

https://cs.createsurvey.com/edit/editsurvey?s=53640



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Subscription: Professional
Expires on: 8 Sep 2016 (days left: 16)

Community Needs Assessment Survey Children's Hospital of Alabama (For Printing)

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ADD SURVEY ITEM
append to the end of the survey

Multiple choice
single answer

Multiple choice
multiple answer

Multi-line text

Tablex

Raw HTML Code

Date Picker

Single select

Text field

Matrix

Comment

File Uploader

Page Break

Layout skin: Plain Question numbering: No Preview Survey

Save and Close

Once you finish editing, click "Save and Close" button above. You can change the questionnaire any time later.

Page #1
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Children's of Alabama has engaged the Public Affairs Research Council of Alabama (PARCA) to conduct a survey of community needs. This survey is part of Children's 2016 Community Health Needs Assessment as required by federal law. The Community Health Needs Assessment is designed to identify the needs of children in Alabama and to help us develop strategies to address these needs. We respect the privacy of those who assist us by completing this survey. All data will be collected by PARCA and reported in the aggregate to Children's. No personally identifiable information will be revealed. If you have questions or problems with the survey, contact Joe Adams, PARCA's Research Coordinator.
[Comment] id: 10

Which of the following categories best describes you?
[Single choice] id: 2

If Physician - Other, please specify:
[Single-line text field] [Skip-logic] id: 41

Age:
[Single select] id: 4

Ethnicity
[Single choice] id: 8

Gender:
[Single choice] id: 5

What is the five-digit zip code for your office or residence?
[Single-line text field] At least one non-space character id: 6

Page #2
No branching rules [Set](#)

What resources are available in your community to address child health issues for ages 0-5?
[Multi-line text area] id: 104

For young children (ages 0-5), what do you see as the two or three major health issues for kids in your community?
[Multiple choice] <Check no more than 3 checkbox(es)> id: 12

Please explain in the box below:
[Multi-line text area] [Skip-logic] id: 44

Thinking of your responses to health issues for children aged 0-5, which of the following mental health issues do you see?
[Multiple choice] [Skip-logic] id: 58

Thinking of your responses to health issues for children aged 0-5, which of the following issues do you see related to parent health education?
[Multiple choice] [Skip-logic] id: 72

Thinking of your responses to health issues for children aged 0-5, which of the following issue related to access to health care do you see?
[Multiple choice] [Skip-logic] id: 64

Thinking of your responses to health issues for children aged 0-5, which of the issues related to nutrition and exercise do you see?
[Multiple choice] [Skip-logic] id: 78

Thinking of your responses to health issues for children aged 0-5, which of the issues related to environmental health do you see?
[Multiple choice] [Skip-logic] id: 84

Thinking of your responses to health issues for children aged 0-5, which of the issues related to child and adolescent safety do you see?
[Multiple choice] [Skip-logic] id: 96

1 of 3

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ADD SURVEY ITEM
append to the end of the survey

<input type="radio"/> Multiple choice single answer	<input type="radio"/> Single select
<input checked="" type="checkbox"/> Multiple choice multiple answer	<input type="text"/> Text field
<input type="text"/> Multi-line text	<input type="table"/> Matrix
<input type="table"/> Tablex	<input type="comment"/> Comment
<input type="code"/> Raw HTML Code	<input type="upload"/> File Uploader
<input type="date"/> Date Picker	<input type="pagebreak"/> Page Break

- Thinking of your responses to health issues for children aged 0-5, which of the issues related to preventative health do you see?
[Multiple choice] [Skip-logic] ID: 90
- Are there barriers for children aged 0-5 for accessing community resources? (If so, please explain below.)
[Multi-line text area] ID: 57
- What resources are available in your community to address child health issues for children/pre-teens ages 6-13?
[Multi-line text area] ID: 105
- For children/pre-teens (6-13) what do you see as the two to three major health issues in your community?
[Multiple choice] <Check no more than 3 checkbox(es)> ID: 14
- Please explain in the box below:
[Multi-line text area] [Skip-logic] ID: 45
- Thinking of your responses to health issues for children aged 6-13, which of the following mental health issues do you see?
[Multiple choice] [Skip-logic] ID: 60
- Thinking of your responses to health issues for children aged 6-13, which of the following issue related to access to health care do you see?
[Multiple choice] [Skip-logic] ID: 68
- Thinking of your responses to health issues for children aged 6-13, which of the following issues do you see related to parent health education?
[Multiple choice] [Skip-logic] ID: 74
- Thinking of your responses to health issues for children aged 6-13, which of the issues related to nutrition and exercise do you see?
[Multiple choice] [Skip-logic] ID: 80
- Thinking of your responses to health issues for children aged 6-13, which of the issues related to environmental health do you see?
[Multiple choice] [Skip-logic] ID: 86
- Thinking of your responses to health issues for children aged 6-13, which of the issues related to preventative health do you see?
[Multiple choice] [Skip-logic] ID: 92
- Thinking of your responses to health issues for children aged 6-13, which of the issues related to child and adolescent safety do you see?
[Multiple choice] [Skip-logic] ID: 98
- Are there barriers for children/pre-teens aged 6-13 for accessing community resources? (If so, please explain below.)
[Multi-line text area] ID: 107
- What resources are available in your community to address child health issues for teens aged 14-18?
[Multi-line text area] ID: 106
- For teens (14-18) what do you see as the two to three major health issues in your community?
[Multiple choice] <Check no more than 3 checkbox(es)> ID: 16
- Please explain in the box below:
[Multi-line text area] [Skip-logic] ID: 47
- Thinking of your responses to health issues for children aged 14-18, which of the following mental health issues do you see?
[Multiple choice] [Skip-logic] ID: 62
- Thinking of your responses to health issues for children aged 14-18, which of the following issue related to access to health care do you see?
[Multiple choice] [Skip-logic] ID: 70
- Thinking of your responses to health issues for children aged 14-18, which of the following issues do you see related to parent health education?
[Multiple choice] [Skip-logic] ID: 76
- Thinking of your responses to health issues for children aged 14-18, which of the issues related to nutrition and exercise do you see?
[Multiple choice] [Skip-logic] ID: 82
- Thinking of your responses to health issues for children aged 14-18, which of the issues related to environmental health do you see?
[Multiple choice] [Skip-logic] ID: 88



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ADD SURVEY ITEM
append to the end of the survey

Multiple choice single answer	Single select
Multiple choice multiple answer	Text field
Multi-line text	Matrix
Tablex	Comment
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Date Picker	Page Break

- Thinking of your responses to health issues for children aged 14-18, which of the issues related to preventative health do you see?
[Multiple choice] [Skip-logic] ID: 94
- Thinking of your responses to health issues for children aged 14-18, which of the issues related to child and adolescent safety do you see?
[Multiple choice] [Skip-logic] ID: 100
- Are there barriers for teens aged 14-18 for accessing community resources? (If so, please explain below.)
[Multi-line text area] ID: 108
- Are there any issues that are not included above? If so, please explain: (2000 character limit)
[Multi-line text area] ID: 40
- What zip code(s) or area do you serve? List zip codes if known or counties served. If you do not serve a location, put "none."
[Single-line text field] [Skip-logic] ID: 35
- Does your organization serve the a specific city or neighborhood, the entire county, several counties, or the entire state?
[Single choice] [Skip-logic] ID: 39
- Please describe your service area below:
[Multi-line text area] [Skip-logic] ID: 49
- What school(s) do you serve?
[Single-line text field] [Skip-logic] ID: 39
- What is the name of your organization?
[Single-line text field] [Skip-logic] ID: 42
- What services do you offer that aim to address child health?
[Multi-line text area] [Skip-logic] ID: 43

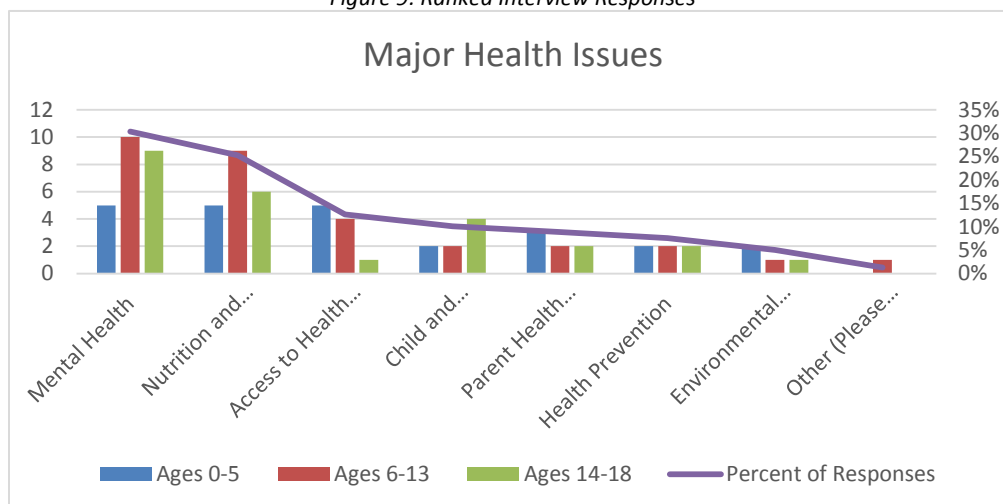
Powered by CreateSurvey

APPENDIX C—COMMUNITY AND STAKEHOLDER INPUT

PARCA conducted semi-structured in-person and phone interviews with 14 key informants across Alabama. Informants were selected jointly by PARCA and Children’s Government Relations staff. Informants were asked to identify two or three major health concerns in each of three age bands: 0-5, 6-13, and 14-18. Unlike the survey, however, responses were not suggested. Informants identified specific health concerns matching those identified by survey respondents. Informant responses were typically static across all three age bands. Informants were also asked to provide comment on or interpretation of survey data. Major health topics data from the interviews are depicted below. Interview data should be read with caution. While informants may be better informed than the average survey respondent, the total number of interviews is small. Thus, one or two responses will dramatically influence the findings.

Barbara Alford, CEO, Wiregrass Foundation
 Susan Colburn, State Parent Consultant, Alabama Department of Rehabilitation Services
 John Dorsey, Executive Director, Project Horseshoe Farm
 Gary Edwards, CEO, United Cerebral Palsy of Greater Birmingham
 Matt Holdbrooks, CEO, Kid One Transport
 Jan Hume, Director, Office of School Readiness, State Department of Education
 Steve Lafreniere, Director, Alabama Department of Youth Services
 Michael Lynch, Community Advocate, Black Belt
 Thomas Miller, MD, State Health Officer
 Aimee Risser, CEO, Big Brothers/Big Sisters of South Alabama
 Jena Ross, Secretary, Dep. of Early Childhood Education, State Department of Education
 Kathryn Strickland, CEO, Community Foodbank of North Alabama
 Yolanda Sullivan, CEO, YWCA of Greater Birmingham
 Randall Woodfin, Birmingham School Board

Figure 9: Ranked Interview Responses



APPENDIX D—SECONDARY RESOURCES

<i>Access Points</i>	<i>Data Sets</i>
Alabama Department of Public Health Alabama Kids Count Data book Child Health USA 2014 Children's Bureau Community Health Rankings Community Health Status Indicator Centers for Disease Control Dartmouth Atlas of Healthcare Data Resource Center for Child and Adolescent Health Health Indicators Warehouse Healthy People 2020 Henry J. Kaiser Health Foundation Jefferson County Department of Health Maternal and Child Health Bureau National Center for Health Statistics National Kids Count Data Book National Vital Statistics System Substance Abuse and Mental Health Services Administration United Health Foundation U.S. Census Bureau	Behavioral Risk Factor Surveillance System CDC Wonder Public Health Data Child Protective Services, Aggregated Estimates Mental Health Surveillance Among Children National Center for Injury Prevention and Control National Child Abuse and Neglect Data System National Health and Nutrition Examination Survey National Health Interview Survey National Hospital Discharge Survey National Survey of Children with Special Health Care Needs National Survey of Children's Health National Survey on Drug Use and Health National Vital Statistics Report Deaths National Vital Statistics System-Mortality Small Area Health Insurance Estimates WIC Participant and Program Characteristics Youth Risk Behavior Surveillance System

APPENDIX E—EXISTING COMMUNITY RESOURCES
General Child Health

Program	Organization
1st Look Program	Medicaid
FocusFirst	IMPACT Alabama
Health and Wellness Outreach Program	Girls, Inc.
Girllology/Guyology	Children's of Alabama
Kids-on-the-Block	Children's of Alabama
Myschoolnurse.net	Children's of Alabama
New Hope Children's Clinic	
Oral Health Education	ADPH
Reach out and Read	American Academy of Pediatrics- Alabama Chapter
Sarrell Dental	
School Nurse Workshops	Children's of Alabama
School-Based Fluoride Mouthrinse Program	ADPH
Smile Alabama! Dental Outreach Initiative	Medicaid
Student Athlete Physicals	Children's of Alabama
Tot Shots	JCDH
Vaccines for Children	ADPH
HEALS Clinic	
Kid One	
KidCheck Plus	Sight Savers America
Leadership Education in Adolescent Health (LEAH)	UAB/ AL MCH Training Network

Asthma

Program	Organization
ACES Asthma Education	Alabama Cooperative Extension Service
AL Society of Allergy and Immunology	
Alabama Asthma Coalition	ADPH
Alabama School Integrated Pest Management Program (Alabama School IPM)	Auburn University
Camp WheezeAway	YMCA Camp Chandler
Pediatric Pulmonary Centers	UAB/ AL MCH Training Network
USA BreatheMobile	University of South Alabama

Child Safety

Program	Organization
Alabama Child Death Review System (ACDRS)	ADPH
Alabama Network of Children's Advocacy Centers, Inc.	
Alabama Partnership for Children	
Alabama Safe Kids	Children's of Alabama
Asthma Education	Children's of Alabama
BodyTrek	Children's of Alabama
CPR / First Aid Classes	Children's of Alabama

Cribs For Kids	Children's Trust Fund
Cullman Caring for Kids	
Exchange Club Family Skills Center	Exchange Club
Gateway, Inc. (Various Programs)	
Grace House Ministries	
Growing Kings	
Healthy Child Care Alabama (HCCA)	ADPH
Parents Against Violence	
Regional Poison Control Center	Children's of Alabama
Prevent Child Abuse Alabama	Children's Trust Fund
SafeSitter	Children's of Alabama
Teen Driving Summits	Children's of Alabama
Teen Trauma Prevention Program	Children's of Alabama
Telephone Triage	

Children with Special Health Care Needs

Program	Organization
MCH Leadership Education in Neurodevelopmental Disabilities (LEND)	UAB/ AL MCH Training Network
Adaptive Aquatics	
Alabama Council for Developmental Disabilities	
Alabama Interagency Autism Coordinating Council	
Alabama Parent Training & Info Network for Children with Disabilities	Alabama Parent Education Center
Arts n' Autism	
Autism Society of Alabama	
Children's Rehabilitation Services	Alabama Department of Rehabilitation Services
EPSDT	Medicaid
Family Voices of Alabama	
Glenwood, Autism & Behavioral Health Center	
HANDS Program	Alabama Autism Assistance Program (AAAP)
Hearing and Speech Screenings	Children's of Alabama
Mitchell's Place	
Scoliosis Screenings	Children's of Alabama
Special Equestrians	
Success By Six/ Help Me Grow Alabama	United Way of Central Alabama
The Arc of Jefferson County	
The Arc of Shelby County	
The Arc of Walker County	
The Bell Center for Early Intervention Programs	
The Red Barn	Spirit of Hope Youth Ranch
UAB Summer Treatment Program	Civitan-Sparks Clinic

Mental Health

Program	Organization
Power Up	Girl Scouts of North-Central AL
Stop Bullying in Alabama	Alabama Department of Education
Amelia Center	Children's of Alabama
Children's Services	JBS Mental Health Authority
CHIPS Clinic	Children's of Alabama
HANDS Program	Alabama Autism Assistance Program (AAP)
Kid's Help Line	The Crisis Center
Oasis	
Teen Link	The Crisis Center

Obesity

Program	Organization
Druid City Garden Project	
E.A.T. South	The Hampstead Institute
Girls on the Run Birmingham	
Healthy Kids Healthy Communities Walking School Buses	United Way of Central Alabama
JCCEO Head Start	JCCEO
Seed to Plate	Jones Valley Teaching Farm
Leadership Education Excellence in Pediatric Nutrition	UAB/ AL MCH Training Network
Southeastern Diabetes Education Services	
The Pediatric Healthy Life Center	
Wee Can Fight Obesity	Alabama Sports Festival Foundation
Weekenders Backpack Program	Community Food Bank of Central Alabama

Coalitions

Bibb County Children's Policy Council
 Blount County Children's Policy Council
 Chilton County Children's Policy Council
 Jefferson County Children's Policy Council
 Shelby County Children's Policy Council
 St. Clair County Children's Policy Council
 Walker County Children's Policy Council
 Children's Policy Councils (Statewide)
 Bold Goals for Central Alabama
 Bold Goals for Walker County
 Jefferson County Health Action Partnership
 End Child Hunger in Alabama (Statewide)
 Alabama Health Literacy Coalition (Statewide)