

Community Health Implementation Strategy FY2020-FY2022



KVC® Hospitals

Children's Psychiatric Treatment

people matter



General Description of Hospital

KVC Hospitals Kansas City is owned by KVC Hospitals, Inc. and offers Psychiatric Residential Treatment Facility (PRTF) Services designed to provide active treatment in a structured therapeutic environment for children and adolescents with severe emotional disturbances, substance abuse, or mental illness. KVC Hospitals Kansas City also serves as the state hospital alternative for children with psychiatric needs in Kansas, and serves children that other area hospitals cannot serve, will not serve, or those children whose treatment has been unsuccessful at other facilities. In this capacity the Hospital serves as the state-wide safety-net for the most acute and at-risk population of children and adolescents. Based on its agency-wide history of accepting children with high-risk needs, the Hospital operates with a no-eject, no-reject philosophy for admitting children. No child is turned away due to the complexity and depth of his/her needs. The Hospital's services are provided with safety and treatment as priority focuses to help clients develop the skills to succeed in less restrictive, permanent settings. The Hospital's treatment program offers a behavioral management component in a safe environment and all services are delineated to meet the individual needs of the clients referred. KVC Hospitals Kansas City provides 24-hour admission, 7 days a week.

Youth admitted to the Hospital typically have attempted, or threatened, to harm themselves or others. These safety threats require intensive treatment, supervision, and care in a safe and secure setting. Youth are generally in an acute state of crisis and often also present with behaviors and special needs which negatively impact their home and school life, such as violence, psychosis and/or an inability to care for themselves. In addition to psychiatric diagnoses, the Hospital treats youth with concurrent medical conditions such as epilepsy, diabetes, multiple sclerosis, and physical limitations including speech and hearing impairments. It is common for children and youth to also present with significant chronic medical health needs. The Hospital assists in accessing necessary medical treatment services and blends the physical and mental health treatment plans to meet these special needs wherever possible.

Our mission is to Enrich and enhance the quality of life of individuals, families and communities by providing comprehensive and compassionate trauma-focused behavioral and mental healthcare, education and medical services.

The Hospital's specialized treatment teams include psychiatrists, primary health physicians, therapists, case managers, nurses and behavioral healthcare technicians. When children come into the care of the Hospital, they receive:

- Nursing assessment within eight hours
- Psychiatric evaluation within 24 hours
- Medical assessment within 24 hours
- Psychosocial assessment within 72 hours
- Lab work as needed
- Nutritional assessment as needed

The treatment team meets regularly to review the plan and the child's progress and provide extensive services including:

- Psychiatric evaluations
- Psychological testing
- Medication management
- Recreational activities
- Individual, family and group therapies

KVC Hospital's treatment teams collaborate with clients, their families and community members to guarantee safe and healthy discharge. We have established relationships with numerous hospital liaisons and community mental health centers, and we welcome the continued development of these partnerships to facilitate smooth community transitions for youth in our care. We are also committed to identifying continuing aftercare services to foster successful reintegration of youth into their homes and the long-term wellness of the family system.

KVC's psychiatric hospitals embrace family-centered practice in which parents or guardians drive all aspects of the treatment plans, including therapy, the development of the discharge plan and aftercare planning. KVC Hospital's staff support and encourage input and participation from family throughout the entire course of treatment.

KVC Hospital's Residential Treatment Programs serves vulnerable and at-risk youth, many of whom struggle with Major Depressive Disorder, Bipolar Mood Disorder, Post-traumatic Stress Disorder, ADHD and other psychotic disorders. The Residential Treatment Programs provide children and adolescents the opportunity to receive intensive clinical services in a structured environment while attending an accredited educational center and living within the Hospital's residential program. The residential setting allows children and adolescents to engage in treatment and learn new skills through individual and family therapy in a safe and supportive environment. The Residential Treatment Programs offer psychiatric services including assessment, development and implementation of treatment plans, and monitoring of psychotropic medications.

Recreation and leisure activities include an indoor gym and outdoor recreation areas.

Group therapies cover a wide range of issues, including topics such as anger management,, boundaries, resilience,and grief and loss, among others.

In addition, Milieu groups focus on the activities of daily living, and every activity is structured with the intent of the client learning. Milieu groups include:

- Emotion regulation training
- Community meetings
- Goals group and review
- Current events
- Social skills

KVC Hospitals, Inc., a subsidiary of KVC Health Systems is a private, not-for-profit organization providing a continuum of medical and behavioral healthcare, education, and social services to children and families. KVC Health Systems is the most comprehensive behavioral healthcare network in Kansas, providing one of the most extensive continuums of care for at-risk children. KVC Health Systems began in 1970 as Wyandotte House a single group home for boys and it has grown into an organization that touches the lives of more than 63,000 children and families per year. KVC's success in improving the lives of children and families stems from the philosophies of innovation, adaptability and creativity. When KVC sees a need for children, we work toward a solution.

Introduction

Internal Revenue Code (IRC) Section 501(r) requires health care organizations to assess the health needs of their communities and adopt implementation strategies to address identified needs. Per IRC Section 501(r), a byproduct of the *Affordable Care Act*, to comply with federal tax-exemption requirements, a tax-exempt hospital facility must:

- Conduct a community health needs assessment every three years.
- Adopt an implementation strategy to meet the community health needs identified through the assessment.
- Report how it is addressing the needs identified in the community health needs assessment and a description of needs that are not being addressed with the reasons why such needs are not being addressed.

The community health needs assessment must take into account input from persons who represent the broad interest of the community served by the hospital, including those with special knowledge of or expertise in public health. The hospital must make the community health needs assessment widely available to the public.

This community health needs assessment, which describes both a process and a document, is intended to document KVC Hospitals Kansas City (Hospital) compliance with IRC Section 501(r). Health needs of the community have been identified and prioritized so that the Hospital may adopt an implementation strategy to address specific needs of the community.

The *process* involved:

- An evaluation of the implementation strategy from the previous needs assessment which was adopted by the Hospital Board of Directors in 2016.
- Collection and analysis of a large range of data, including demographic, socioeconomic and health statistics, health care resources.
- A survey of persons who represent a) the community served by KVC Hospitals Kansas City b) populations of need or c) persons with specialized knowledge in children's behavioral health issues.

This document includes the results from the Evaluation of Prior Implementation Strategy, Prioritization of Identified Health Needs from 2019 CHNA data and Implementation Strategy priorities for FY2020 to FY2022.

Evaluation of Prior Implementation Strategy

The Hospital made progress in each of the priority areas during the last three years. Goals and strategies for each priority area are summarized below.

PRIORITY 1: Lack of trauma-informed assessment and intervention strategies

KVC Hospitals has partnered with the KVC Institute of Health Systems Innovations (KVC Institute) to conduct Trauma-Informed Research and Development to provide outreach education and training opportunities for the community KVC serves. The staff of KVC Hospitals, Inc. has continued to collaborate with staff of the KVC Institute to research and provide helpful information and tools to educate and support Trauma Informed Practices and Care. Since July of 2016, staff members from both KVC Hospitals, Inc. has presented or trained at numerous events, conferences and forums in the identified areas of need in Kansas.

PRIORITY 2: Access to services

Goal: Focus on first maintaining services to those who have limited access due to costs and acuity. Then add other creative ways through technology for better access for parents to engage more in their child's treatment.

Strategies:

- ✓ Maintain the ongoing state hospital alternative grant to serve those without fiscal means and who have been turned away by other providers in the region.
- ✓ Continue to enhance tele-psychiatry options to provide ease of access for parents/guardians to participate in treatment with their child, especially in central and western Kansas.
- ✓ Prioritize expansion into programs which have been identified as having shortages and difficult to access.

Actions on Strategies:

- ✓ KVC Hospitals has maintained the state hospital alternative program coordinated with the Kansas Department of Aging and Disabilities (KDADS) with a “No Reject, No Eject” philosophy to provide a safety net for all of Kansas. This can be accessed on our website to review at <https://hospitals.kvc.org/how-we-help/services/state-hospital-alternative-program/>
- ✓ In 2018, tele psychiatry and tele medicine equipment was added to provide additional services as needed at both KVC Hospitals, Inc. Hays & Kansas City.
- ✓ KVC Hospitals identified shortages of children psychiatric beds in Wichita, Kansas “, the most populated city of Kansas,” and shortage of support service program placements such as Psychiatric Residential Treatment Facilities (PRTF). To meet these needs the following actions have been taken or in process:
 - In 2018 KVC opened a Youth Residential Center (YRC) in Kansas City, KS within six miles of KVC Hospitals Kansas City

- Expansion of KVC Hospitals Hays to add 20 PRTF beds projected to be completed by August 2019
- The projected opening of a children's psychiatric in Wichita, Kansas with 54 acute beds projected for July 2019

PRIORITY 3: Need for increase integration of families into treatment and education of families, schools and others who interact with the client post-discharge

Goal 1: Enhance processes to better integrate families and other support systems into the treatment pre and post discharge.

Strategies:

- ✓ Implement a "Hospital to Home" process for hospital staff to integrate families and community supports in the treatment pre and post discharge.
- ✓ Continue Work closely with designated providers like Foster Care Contractors, and Community Mental Health Center to educate and coordinate appropriate treatment.

Actions on Strategies:

- ✓ KVC Hospitals has presented the "Hospital to Home" model to various funders to support this under funded service and have not had any progress. But the new state KanCare Request for Proposals (RFPs) with Management Care Organizations (MCOs) have something similar to this with new purposed health home requirements which will assist with coordinated care transition.
- ✓ The staff of KVC Hospitals Kansas City has worked closely with the KVC– Kansas (Eastern Kansas Foster Care Contractor), Wyandotte, Inc. (Wyandotte County), Johnson County Community Mental Health Center (Johnson County), ComCare (Sedgwick County) and other Community Mental Health Centers (CMHCs) in Eastern, Southeast and Central Kansas to educate on treatment and coordinate transition of patients back into the community after their hospital stay. KVC Hospitals Hays staff members have worked closely with Saint Francis Community Services (Western Kansas Foster Care Contractor), High Plains Mental Health Center (Ellis County), ComCare (Sedgwick County) and other CMHCs in Central, Western and Southwest Kansas to educate on treatment and coordinate transition of patients back into the community patient after their hospital stay.

Goal 2: Provide educational treatment resources for families, schools and other community supports to access post discharge.

Strategies:

- ✓ Educate parents to connect to the patient electronic health record portal to access their child's treatment history post discharge.

- ✓ Connect to a health information exchange (HIE) to better coordinate and move over care plans to an integrated care network of community providers.
- ✓ Provide treatment educational resources on KVC Hospitals and Health Systems website to support providers post discharge.

Actions on Strategies:

- ✓ KVC Hospitals, Inc. has staff that created a patient portal MyHealthPointe for parents and/or guardians to access care information from their hospital stay.
- ✓ The Kansas KHIN statewide network has been set up to connect all hospitals to be able to exchange approved health information. This network is currently primarily set up to share primary/medical health information. Mental health provider's connectivity is still limited. In 2016, KVC Hospitals had an administrative staff member who has elected to serve on the Governors Behavioral Health Planning Council Children' Subcommittee. One of these subcommittee's initiatives is to research and recommend integrated health Information databases to the Kansas State Mental Health Council that would serve as statewide health information exchange for all Kansas health providers (primary and mental health).

Since 2016, KVC Hospitals staff have added resources and tools on their website to support parents and their children post discharge. This can be accessed at our website at <https://hospitals.kvc.org/resourcelibrary/>

Prioritization of Identified Health Needs

Priority setting is a required step in the community benefit planning process. The IRS regulations indicate that the needs assessment must provide a prioritized description of the community health needs identified through the assessment and include a description of the process and criteria used in prioritizing the health needs.

The mental health needs of children and adolescents are increasing in Kansas. Addressing these needs is important to the communities. Based on the data from our assessment, the following community mental/behavioral health needs for children and adolescents were identified:

Secondary Data

- Poor mental health days (morbidity)
- Deaths of despair rate
- Poor physical health

Primary Data

Health needs identified through key stakeholder surveys were included as health needs. Needs for vulnerable populations were separately reported in the analysis in order to facilitate the prioritization process. Many of the following needs were included in the Hospital's 2016 CHNA report; however, while progress has been made the needs of the community remain.

- Lack of funding for mental health services and preventive programs*
- Increase in hospitalization wait times
- Lack of community-based services
- Lack of appropriate resources (e.g. insurance coverage, providers and/or treatment facilities)
- Coordination with other systems of care (e.g. school)
- Access to services (cost)*
- Lack of health knowledge regarding the impact of trauma on mental health/lack of trauma treatment
- Increase in children who self-harm or harm others
- Cost of medication
- Need for increased integration between primary care and mental health services
- Need for increased integration of families into treatment and education of families, schools and others who interact with the client post-discharge

**Impacts vulnerable populations*

To facilitate prioritization of identified health needs, KVC Hospitals' management prioritized the needs identified above based on the following four factors.

1. How many people are affected by the issue or size of the issue
2. What are the consequences of not addressing this problem

3. The impact of the issue on vulnerable populations
4. Whether or not the Hospital has existing programs to respond to the identified need

As a result, the top three mental and/or behavioral health needs for the KVC Hospitals Kansas City CHNA Community were determined.

1. Lack of trauma-informed assessment and intervention strategies
2. Access to services (cost)
3. Access to services (availability of acute & PRTF beds in the community)
4. Coordination with other systems of care

While the priorities above were also included in the Hospital's 2016 CHNA report, as described previous in the *Evaluation of Prior Implementation Strategy*, progress has been made; however, the needs of the community remain.

The Hospitals' next steps include developing an implementation strategy to address these priority areas.

Priorities of Focus Areas for FY2020 to FY 2022

PRIORITY 1: Lack of trauma-informed assessment and intervention strategies

Goal: Partner with and educate community stakeholders on trauma-informed assessment and intervention strategies.

Strategies:

- ✓ Create awareness by presenting trauma informed information to community group forums, the stake holder group, and legislative meetings.
- ✓ Provide trauma-informed resources, information, and tools for parents, schools, community mental health centers(CMHCs), to implement with children and adolescents.
- ✓ Partner with other children's organizations to expand reach for trauma-informed intervention strategies.

PRIORITY 2: Access to services (cost)

Goal: To provide care to patients regardless of socioeconomic status by offering diverse payor options

Strategies:

- ✓ Maintain the ongoing state hospital alternative grant to serve those without fiscal means and who have been turned away by other providers in the region.
- ✓ Maintain and develop new contracts and agreements with diverse payor sources throughout catchment area.
- ✓ Offer financial assistance as determined by resources available to guarantors.

PRIORITY 3: Access to services (availability of acute & PRTF beds in the community)

Goal: Increase availability of access to acute and PRTF beds within our catchment area

Strategies:

- ✓ Assess trends in referral patterns to determine access needs.
- ✓ Increase bed capacity of Acute and PRTF facilities within the catchment area based on need.
- ✓ Provide tele-psychiatry options to increase access for parents/guardians to participate in treatment with their child, particularly for those from rural and frontier areas.

- ✓ Increase community awareness of available beds and services

PRIORITY 4: Coordination with other systems of care

Goal: To enhance the transition of care between providers

Strategies:

- ✓ Increase presence on state sub-committees with other systems of care.
- ✓ Partner with other providers (CMHCs, PRTFs, Hospitals, primary care physicians) to be a part of Kansas Health Information Network (KHIN).
- ✓ Enhance relationships with other systems of care by including their representatives in KVC Hospitals hosted workshops and forums.

Needs not Addressed

Some issues identified through the community health needs assessment have not been addressed in this plan. In initial discussion and subsequent prioritization, the KVC Hospital's Needs Assessment Team considered the levels to which some needs were already being addressed in the service area. Additionally, some community needs fall out of the scope of expertise and resources of KVC Hospitals. The following chart outlines how some of the needs identified in the assessment are addressed by others or in different ways:

Community Need	How Need is Addressed
Lack of community based services	Community based services are being addressed by Community Mental Health Centers (CMHC) and the private sector.
Lack of funding for mental health services and preventive programs*	The Governor's Behavioral Health Services Planning Council (GBHSPC) subcommittees identifies specific, effective practices to facilitate collaboration, coordination and the use of evidence-based practices across all child and family-serving sectors to address the behavioral and mental health needs of all children and families across the continuum of care statewide in Kansas. The GBHSPC presents this information to the Kansas Governing bodies for funding options.
Cost of Medication	This is outside of our scope, and is addressed by insurance, and government agencies.

Next Steps

This Implementation Plan will be rolled out over the next three years, from November 15, 2019 through June 30, 2022. The Team will work with community partners and health issue experts on the following for each of the approaches to address the identified health needs:

- Develop work plans to support effective implementation
- Create mechanisms to monitor and measure outcomes
- Develop a report card to provide on-going status and results of these efforts to improve community health.

KVC Hospitals, Inc. is committed to conducting another community health needs assessment and implementation strategy within three years.