Community Health Needs Assessment – Spokane

Shriners Hospitals for Children® - Spokane
Mission and Vision

This section describes the Mission and Vision of your hospital and organization

Mission:
- Provide the highest quality care to children with neuromusculoskeletal conditions, burn injuries and other special healthcare needs within a compassionate, family-centered and collaborative care environment.
- Provide for the education of physicians and other healthcare professionals.
- Conduct research to discover new knowledge that improves the quality of care and quality of life of children and families.

Vision:
- Shriners Hospitals for Children will be the unquestioned leader, nationally and internationally, in caring for children and advancing the field in its specialty areas.

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Our Commitment to the Community

About the Hospital
Shriners Hospitals for Children — Spokane is part of a 22-hospital system established by the Shrine of North America. The first Shriners Hospital was opened in 1922 in Shreveport, Louisiana. Our hospitals, which are located in the United States, Canada and Mexico provide pediatric specialty care for children with orthopaedic conditions, burns, spinal cord injuries, and cleft lip and palate. All children are eligible for care, regardless of the families' ability to pay. The orthopaedic Shrine Hospitals were among the first specialized pediatric orthopaedic hospitals in North America. Many of the Shriners Hospitals’ first patients were treated for problems caused by polio.

The Shriners Hospital mission is threefold, providing excellent pediatric orthopaedic services, educating tomorrow’s physicians and other health care providers and performing research to ensure quality care, develop new knowledge and improve the quality of life for our patients.

The Spokane Shriners Hospital has been caring for the pediatric orthopaedic needs in our region for over 90 years. What began as a mobile unit in 1924, the hospital has grown into a beautiful state-of-the-art 30-bed hospital treating thousands of patients each year.

Shriners Hospitals for Children – Spokane treats kids 0-18 years old from Washington, Idaho, Montana, Alaska and Canada and globally as well. In 2015, the hospital saw nearly 11,000 kids in the patients in the Outpatient Clinic. Outpatient surgery percentage continues to increase. In 2015 approximately 75% of total surgeries were outpatient surgeries resulting in average length of stay and average daily census to decrease.
While our outpatient visits continue to rise year over year the total number of surgeries have remained constant at about 900 surgeries per year. More positive impact has been a continual increase of new patients year over year, in 2015 the hospital received over 3200 new referrals which represents a 17% increase over 2014.

The Spokane Shriners Hospital treats conditions ranging from serious orthopaedic issues requiring multiple surgeries, to fractures or sports injuries easily corrected through same-day surgery. In addition patients also receive physical rehabilitation, radiology, lab services and casting, all within the Spokane hospital.

The Spokane Hospital is fortunate to have the largest group of fellowship trained pediatric orthopaedic surgeons in our region. What that means to our families is that they are being treated by experts with the highest level of training, and highest number of years of experience in pediatric orthopaedics.

The medical staff includes orthopaedic surgeons, a pediatrician/hospitalist, pediatric trained orthopaedic physician assistants and pediatric trained anesthesiologists. Consulting staff includes hand, total joint, plastic surgery, muscular dystrophy and thoracic specialists as well. Nursing staff, respiratory therapy, physical therapists, occupational therapists and recreational therapists with expertise in the management of the inpatient and outpatient pediatric orthopaedic patient complete our team.

**Medical Staff**

- Pediatric Orthopaedic Surgeons
- Pediatrician/Hospitalist
- Pediatric Trained Anesthesiologists
- Pediatric Physician Assistants
- Recreation Therapists/Child Life Specialists
- Registered Nurses
- Physical Therapists
- Occupational Therapist
- Respiratory Therapists
- Movement Analysis Gait Lab Experts
- Laboratory Technologists
- Radiology Technologists
- Pharmacists
What We Treat

- Scoliosis & spinal deformities
- Hip dysplasia
- Club Foot & other foot deformities
- Adolescent sports Injuries
- Fractures/Dislocations (Stable)
- Knee & hip disorders
- Foot & hand injuries

- Prosthetics & Orthotics
- Limb Discrepancy/Limb Loss
- Fractures & ligament injuries
- Cerebral Palsy, muscular dystrophy & other neuromuscular conditions
- Osteogenesis imperfecta

Ancillary Services

- Rehabilitation therapy
- Movement Analysis Lab
- Radiology services

- Casting services
- Full laboratory services
- Child Life/Recreation Therapy

Access to care has never been easier. The Spokane hospital is a great resource and safety net for children with pediatric orthopaedic problems without insurance or ability to pay. We have active contracts with the top payors in the market. However, whether or not a family has insurance has never been a factor; acceptance for care is based only on medical need.

Caring for children beyond our borders is an important part of our mission. Our medical staff volunteers their time and expertise to patients in Mexico, Central America and Africa each year. In addition, every other month a team travels to our Nogales, New Mexico outreach clinic to evaluate kids from Mexico with orthopaedic concerns. We see more than 100 patients a year in the clinic and those children requiring surgery are brought to our hospital in Spokane for treatment.

As demand for specialty pediatric services has continued to grow, the Spokane Hospital has remained committed to enhancing access to care and expanding key services to continue to make an impact in the
communities we serve. We are proud to be a part of this community and to continue to care for the families in our region.

Spokane Hospital Region: Insured children
- Washington – 87.7%
  - Spokane County – 87.7%
- Alaska – 80.9%
- Idaho – 80.7%
- Montana – 83.3%
- Oregon – 85.6%

Spokane Hospital Payor Mix

![Pie chart showing payor mix:]

- Managed Care/HMO/PPO, Commercial/Indemnity, BCBS, & Other 45%
- Medicaid Managed Care 36%
- Medicaid 14%
- Uninsured, Charity, Medicaid Pending 5%
Population data: Spokane County

Spokane County is located along the central portion of the eastern edge of Washington State. Spokane County was the fourth most populous county in the state in 2014 with 484,500 individuals. This accounts for 7.0% of the state’s population. The city of Spokane was the second most populous incorporated city in the state with 212,300 individuals. The city of Spokane accounts for 43.8% of the county population with another 27.3% living in other incorporated municipalities and 28.9% living in unincorporated areas in Spokane County. Spokane County has the eighth highest population density in the state (out of 39 counties) with a density of 275 individuals per square mile.

Source: Spokane Regional Health District, Demographics and Social Characteristics: 2015

2014 Spokane County Total Population

<table>
<thead>
<tr>
<th>AGE GROUP</th>
<th>PERCENTAGE OF THE POPULATION</th>
</tr>
</thead>
<tbody>
<tr>
<td>Older Adults:</td>
<td>35-64</td>
</tr>
<tr>
<td>Youth:</td>
<td>0-17</td>
</tr>
<tr>
<td>Young Adults:</td>
<td>18-34</td>
</tr>
<tr>
<td>Seniors:</td>
<td>65+</td>
</tr>
</tbody>
</table>

Pediatric Population:
- Under 5 = 6.26%
- Under 18 = 22.79%
1. Among Spokane County residents in 2014, 89.2% were White, 2.0% Black, 1.4% American Indian/Alaska Native, 2.7% Asian/Pacific Islander and 3.8% were of two or more races

2. Spokane County Non-Hispanic Population 95.11% / Hispanic or Latino Population 4.89% 
   *(Community Commons Website)*

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**Spokane County 2014**

- **White:** 90
- **Black:** 2
- **American Indian/Alaska Native:** 2
- **Asian/Pacific Islander:** 2
- **2 or more races:** 2

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**Family Structure**

<table>
<thead>
<tr>
<th>Family Structure</th>
<th>Total Count</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>TOTAL HOUSEHOLDS</td>
<td>186,456</td>
<td>100%</td>
</tr>
<tr>
<td>Family households (families)</td>
<td>114,660</td>
<td>61.5%</td>
</tr>
<tr>
<td>with own children under 18 yrs</td>
<td>47,842</td>
<td>41.7%</td>
</tr>
<tr>
<td>Married-couple families</td>
<td>86,147</td>
<td>75.1%</td>
</tr>
<tr>
<td>with own children under 18 yrs</td>
<td>31,416</td>
<td>36.5%</td>
</tr>
<tr>
<td>Female householder, no husband present</td>
<td>20,904</td>
<td>18.2%</td>
</tr>
<tr>
<td>with own children under 18 yrs</td>
<td>12,339</td>
<td>59.0%</td>
</tr>
<tr>
<td>Male householder, no wife present</td>
<td>7,609</td>
<td>6.6%</td>
</tr>
<tr>
<td>with own children under 18 yrs</td>
<td>4,087</td>
<td>53.7%</td>
</tr>
</tbody>
</table>
• **Median household income** = Spokane County $63,873
• **Children Below 200% FPL** = Spokane County - 41.95%
• **High school graduates and Associate’s degree or higher** = 75%/Associates Degree or higher 25%
Community Need Index

The Dignity Health/Truven Health Analytics Interactive Community Need Index (CNI) maps community health need by county and by zip code based on a variety of socio-economic indicators. The areas measured include income, culture, education, insurance and housing, with combined scores ranging from 1 (low need) to 5 (high need).

Across Spokane County, the highest need areas were zip codes 99201 and 99202, these are the closest to the city center. The second highest need area (3.4 – 3.6) were still the city of Spokane but in addition, included: Deer Park, Airway Heights and Fairchild Air Force Base.
Process and Methods

The Shriners Hospitals for Children – Spokane Community Health Needs Assessment committee is comprised of representatives from the hospital with the knowledge of target markets and populations as well as the ability to gather critical data to create the CHNA. Administration, Patient Care Services, Public Relations, Performance Improvement and Finance are the driving representatives in our CHNA.

The group goal was to address a need which is consistent with the mission of Shriners Hospitals for Children – Spokane and will make the most impact in meeting the healthcare needs of our community.

The Hospital developed its own primary data surveys, and was also able to benefit from existing local and regional efforts to determine the needs of the community. Staff from the Spokane Shriners Hospital collaborated with a variety of local health care related organizations and Boards: Spokane Regional Health District, Better Health Together, School Health Care Association of Spokane County, Community Health Assessment Board, Greater Spokane Inc.: Health Industry Development Group and Washington Rural Health Association. In addition, the Spokane Hospital CHNA team worked with local health care systems for collaboration and input. Finally, the group researched pediatric orthopaedic journals, websites, reports and studies for further insight to the development of the plan.

The task set for the committee was to review existing data and gather new primary data. Two specific surveys were developed to query; a referral group and the hospitals own patients and families. Following analysis of the data, priorities were set by the group to determine the needs the hospital could meet and to choose one issue and finally develop a plan to address the specific community health need. For the purposes of this assessment, the team focused our efforts on access to care, addressing the pediatric population and focusing specifically on pediatric orthopaedics.

Target Population:
- Children 0-18 years old
- Living in Washington, Idaho, Montana, Alaska and Canada
- Orthopaedic Conditions: ranging from serious orthopaedic issues requiring multiple surgeries, to fractures and sports injuries easily corrected through outpatient surgery
- Care and services, always regardless of insurance or ability to pay
Key Findings

*It will take a high degree of cooperation to increase access to health and reduce disparities of health. Our state’s future and prosperity depend on it – Cott Bond, Collaboration is crucial to improving health care.* – Journal of Business, Feb 25, 2016.

Secondary Data Collection

Secondary data was gathered from local and state sources. When available, other community health assessments were reviewed for comparison of priority health issues. Analyses were conducted at the most local and age specific level possible.

The Spokane Shriners Hospital is a member of the Community Health Assessment Board whose purpose is to foster the collaborative use of data to improve the health of our community and reduce the costs associated with poor health outcomes. The Board is comprised of representatives from multiple agencies from many different sectors in the region, including but not limited to: academic, nonprofit, healthcare, government, public health, education.

A community health needs assessment was conducted by the Spokane Regional Health District (SRHD). Working in collaboration with the SRHD, the Spokane Shriners Hospital was able to benefit from the findings of the regional survey.

“REGIONAL INVENTORY OF ASSESSMENT NEEDS AND PRACTICES IN EASTERN WASHINGTON”

The Community Health Assessment Board (CHAB) determined the need to conduct a regional inventory of assessment needs and practices in Eastern Washington to assist with aligning planning processes among participating stakeholders for community health assessment work. 36 organizations contributed information to Phase 1 of the inventory. The survey assessed local communities to identify priority areas for improvement.

The top three regional priorities were identified as:

- Behavioral Health
- Access to care
- Overweight/obesity
METHODS

The Community Health Assessment Board (CHAB) collectively decided that the inventory should be conducted via in-person interviews to the extent possible in order to accommodate the wide range of knowledge and practices surrounding community needs assessment processes. The organizations to be included in the inventory were those primarily located in Eastern Washington, reflecting the regional scope of the Accountable Communities of Health work. This region was defined to include Spokane County, Lincoln County, Whitman County, Adams County, Pend Oreille County, Stevens County, and Ferry County.

It was also determined that the inventory would be conducted in phases in order to manage scope with the limited available resources. Three inventory phases were identified:

1. First phase:
   - Nonprofit hospitals
   - Public hospital districts
   - Local health jurisdictions
   - Tribal health
   - Health systems
   - Health plans
   - City and county governments
   - Federally qualified health centers
   - Northeast Washington Educational Service District 101

2. Second phase:
   - Large nonprofits
   - Large coalitions
   - Foundations
   - School districts

3. Third phase:
   - Smaller organizations

Analysis

The Data Center project staff compiled responses from all interviews and key pieces of information from supporting documentation provided (measures, data sources, tools, service area, etc.). Once all information was compiled, data for each question included in the interview moderator guide was tabulated or themed to produce final results.

What is the primary community need(s) your organization is working to meet?

![Health or Community Priorities Identified](chart.png)
### Additional community needs were identified:

<table>
<thead>
<tr>
<th>Basic and special needs (3)</th>
<th>Water supply (2)</th>
<th>Evaluation and treatment facility services (1)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Behavioral health (3)</td>
<td>Accidents (1)</td>
<td>Immunizations (1)</td>
</tr>
<tr>
<td>Chronic disease management (3)</td>
<td>Addressing health disparities (1)</td>
<td>Infrastructure (1)</td>
</tr>
<tr>
<td>Housing (3)</td>
<td>Assisting schools in</td>
<td>Involuntary detention services (1)</td>
</tr>
<tr>
<td>Obesity prevention (3)</td>
<td>preparing students for success (1)</td>
<td>Medication management (1)</td>
</tr>
<tr>
<td>Cancer-related deaths (2)</td>
<td>Case management (1)</td>
<td>Mental health (1)</td>
</tr>
<tr>
<td>Care coordination and integration (2)</td>
<td>Closing gaps in care (1)</td>
<td>Rehabilitation services (1)</td>
</tr>
<tr>
<td>Care for individuals with developmental disabilities (2)</td>
<td>Cost of pharmaceuticals (1)</td>
<td>Smoking cessation (1)</td>
</tr>
<tr>
<td>Community and economic development (2)</td>
<td>Crisis phone services and stabilization (1)</td>
<td>Teen pregnancy prevention (1)</td>
</tr>
<tr>
<td>Improved quality of life (2)</td>
<td>Employment services (1)</td>
<td>Transportation (1)</td>
</tr>
<tr>
<td>Suicide prevention (2)</td>
<td>ER services (1)</td>
<td>Veteran needs (1)</td>
</tr>
<tr>
<td></td>
<td>Public health (2)</td>
<td></td>
</tr>
</tbody>
</table>

A next step in gathering secondary data, Shriners Hospitals for Children – Spokane studied additional resources from the State, regional, national and local level to further validate the needs of our community and our families and to ascertain where the Spokane Hospital can make the biggest impact.

**Washington State Health Improvement Plan 2014 – 2017**

The Washington State Health Improvement Plan is a call to action for all based on a future where everyone is actively seeking health care. The State Health Improvement Plan includes both near term and long term goals.

**NEAR TERM IMPACT**

In the next three years, the public health system will improve:

- Access to care - Track the participation in the Accountable Communities of Health - regionally based, voluntary collaborative groups aligned to achieve healthier communities and populations, improve healthcare quality, and lower costs.
LONG TERM SHIFT

- Invest in the health and well-being of our youngest children and families. Ensure that families and communities build a strong foundation in the early years for a lifetime of good health, educational success and economic prosper

Washington is home to some of the most innovative and transformational efforts in the nation to improve health and health care and lower costs, which have only been strengthened by an infusion of energy and resources upon passage of the Affordable Care Act. Washington’s purchasers, labor organizations, providers, quality improvement organizations, local jurisdictions, and health plans are leaders in performance measurement, clinical practice transformation, and innovative payment and delivery methods, ensuring focus on value rather than volume.

**Healthier Washington**

Healthier Washington will help people experience better health throughout their lives and receive better—and more affordable—care when they need it. A unique multi-agency effort supported by federal funding, Washington’s state agencies are working with the public and private sectors toward:

- Building healthier communities through a collaborative regional approach.
- Integrating how we meet physical and behavioral health needs so that health care focuses on the whole person.
- Improving how we pay for services by rewarding quality over quantity.
Shriners Hospitals for Children – Spokane is an active participant with Spokane community’s Accountable Community of Health (ACH) Better Health Together.

Accountable Communities of Health (ACHs) are a key component of Healthier Washington, our state’s coordinated effort to help ensure better health, better care and lower costs for Washington residents. Better Health Together serves as lead for the Spokane region ACH, a community-based partnership working across all sectors and all seven of our counties, to develop shared priority, strategies and action plans to improve health. Leading health care delivery organizations, such as Shriners Hospitals for Children – Spokane, helps to enable patients to overcome bureaucratic, transportation, eligibility, language, and other barriers to secure the resources they need to be healthy.

“The Accountable Communities of Health model is focused on addressing the gap in the current delivery system by funding interventions that connect patients with the resources they need to be healthy.”
Primary Data Collection

The Spokane Hospital conducted two surveys to gather primary data from and about our pediatric population.

Audiences surveyed:

- Washington and Idaho School Nurses
- Shriners Hospitals for Children – Spokane patients/families

School Nurses: 127 responses received

![Graph showing survey results]

Over 95% of the total response group feel there are unmet needs for the population they serve; children 6-18 years of age.
"Transportation is huge issue for families in rural areas"

"If the care they need is not offered in their area, it requires travel to get it."

"Available resources"

"Ability to pay is probably the biggest issue with language usually the least."

"Lack of identification of the problem by the primary care provider and lack of referral (or awareness of referral resources)"

"The gap we typically see in children not accessing care is related to services covered under state-sponsored insurance but lack of providers willing to provide the service."

"Not enough providers in the community."

Of the four categories, orthopaedics ranked lowest, however nearly 30% of the respondents chose orthopaedics as an unmet need.

"Orthopedics wait times are usually long in our current community"

"Initial fracture treated in ER but inability to find specialists in orthopedics for follow-up due to lack of insurance or no provider accepting their insurance"
Sports injuries ranked the highest condition chosen as a need in our community at 56% and attention with Fracture Treatment right behind at 43%.

<table>
<thead>
<tr>
<th>Answer Choices</th>
<th>Responses</th>
</tr>
</thead>
<tbody>
<tr>
<td>Scoliosis (includes diagnosis and treatment)</td>
<td>35.85%</td>
</tr>
<tr>
<td>Fracture treatment</td>
<td>43.40%</td>
</tr>
<tr>
<td>Foot and Ankle disorder</td>
<td>30.19%</td>
</tr>
<tr>
<td>Sports injuries</td>
<td>66.60%</td>
</tr>
<tr>
<td>Orthotics and Prosthetics</td>
<td>39.62%</td>
</tr>
<tr>
<td>Other</td>
<td>9.43%</td>
</tr>
</tbody>
</table>

Total Respondents: 53
Shriners Hospitals for Children – Spokane Patients and Families:
288 Responses Received

The Spokane Shriners Hospital has a strong referral network. Our Physician Relations Liaison’s efforts and marketing efforts have helped the hospital show approximately 90% referrals from Physicians or other health care providers each month.

Results show time for appointment for patients other than Fracture Patient is somewhat evenly distributed. From some of the feedback from the comments, we can still do better.

When analyzing the success of the Fracture Clinic access to care, it is clearly working as we see these patients same day. The comments regarding access to fracture care are positive.
“Great service, they were very helpful”
“Got an appointment in less than 3 days. Fantastic Service!”
“Unable to connect with anyone when I called in. Would always go straight to voicemail and could never reach anyone directly”
“Had to be rescheduled and then had to wait an additional month”
“Just the wait time but everyone was amazing to get us in as soon as possible”
“Called to reschedule for end of January but then was able to get in early. So fixed :)”
Emerging Issues in Access to Health Services


National Access to Care for Children with Fractures

Lobst, Christopher MD†; Arango, Dillon BA†; Segal, Dale BS†; Skaggs, David L. MD, MMM‡

Abstract

Background: Access to health care for many pediatric orthopaedic patients is becoming more difficult. In some communities, children with fractures have limited access to care regardless of insurance status. The purpose of this study was to determine the level of difficulty in obtaining access to care for children with fractures nationally and compare our results to the published results of a national survey in 2006.

Methods: Five orthopaedic offices were identified in each state using an internet search with Google maps by typing “general orthopedics” under the search heading for each state. Each office was contacted with a scripted phone call describing a fracture in a 10-year-old boy that does not involve the growth plate. The office was then told the patient has Medicaid insurance. If no appointment was given, the reason was recorded and the office was asked to refer us to another orthopaedic surgeon. A second phone call was made to the same office a few days later using the same script but the office was told the patient has a private preferred-provider organization insurance. If no appointment was given, the reason was recorded.

Results: Of the 250 (23.6%) offices across the country, 59 would see a pediatric fracture patient with Medicaid. 41.3% (79/191) of the offices refusing the patient stated that they do not accept Medicaid patients. Of the 250, 205 (82%) of the offices across the country would see a pediatric fracture patient with a private preferred-provider organization insurance. The 10 states with lowest Medicaid reimbursement offered an appointment 6% of the time, whereas the 10 best reimbursing states offered an appointment 44% of the time.

Discussion and Conclusions: The access to care for children with fractures is becoming more difficult across the country. Compared with the published data in 2006, the number of offices willing to see a child with private insurance has decreased from 92% to 82%. The number of offices willing to see a child with a fracture and Medicaid insurance has decreased from 62% to 23% over the same time span.
Access to health care services in the United States is regarded as unreliable; many people do not receive the appropriate and timely care they need. The U.S. health care system, which is already strained, will face an influx of patients in 2014, when 32 million Americans will have health insurance for the first time. All of these issues, and others, make the measurement and development of new strategies and models essential.

Source: “Healthy People 2020” HealthyPeople.gov

Access to pediatric subspecialty care is a crisis in the United States. There are five main causes of the access problem: 1) an insufficient number of pediatric subspecialists; 2) dramatically increasing demand for pediatric subspecialty care; 3) a fragmented and inefficient system of pediatric primary and specialty pediatric care.

Source: US Department of Health and Human Services

Overall Assessment Results

Access to health care is “the timely use of personal health services to achieve the best possible health outcomes.” This definition, developed by the Institute of Medicine (IOM), underscores the importance of “timeliness” as a feature of good access to care.

The data collected by Shriners Hospitals for Children – Spokane, both primary and secondary, still shows access to care is a TOP priority in our region.

Other needs identified by the Spokane Regional Health District:

- Behavioral Health: Out of scope of care
- Overweight and Diabetes: The hospital has some programs in place to encourage healthy nutritional habits for our patients. In addition, the hospital has implemented a Teen Exercise Group to address the needs of our patients 13-18 years of age.
- Preventative services, health education and care coordination: The hospital has staff and programs in place to ensure our patient population are being informed of community resources. In addition, the hospital has a care management team who coordinates the care for our patients both in and outside of the hospital.

After evaluating the needs of the community with the resources available at the Spokane Hospital, the other identified community needs were not chosen as a focus of this CHNA. The CHNA team surmised our biggest impact was certainly “Access to care”.

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The hospital analyzed the success of our initial efforts in 2012 and looked for additional programs to address the issue of access to care. The Spokane Hospital 2012 CHNA also identified “access to care” as a top priority of the Spokane community. From this assessment in 2012, the first Fracture Clinic was developed. Since inception, the Clinic continues to be popular with Spokane community families. Patients who may have not been able to get expert care in an expedited manner, now have a solution available to them.

Access to appropriate pediatric medical care is important for children, especially in orthopaedics because further complications may occur if care is delayed. The Spokane Hospital has the opportunity to play an important role in providing pediatric specialty care.

The Spokane Shriners Hospital has the medical staff and resources in place to provide access to comprehensive, quality health care services for all children regardless of socioeconomic status, ethnic origin, immigration status, insurance or ability to pay.
Action Plan

Access to high-quality health care is an important part of a healthy local economy. Shriners Hospitals for Children – Spokane plans to continue to increase access to pediatric orthopaedic specialty services for the families in our region to achieve the best health outcomes.

Goal:
- Reduce barriers to accessing pediatric orthopaedic care by delivering the right resources at the right time

The Spokane Hospital has identified two initiatives to address this need.
- Urgent Pediatric Fracture Clinic
- Richland WA Satellite Clinic

Implementation:
Shriners Hospitals for Children – Spokane Care has developed an implementation plan designed to address Access to Care, a need where the hospital can have the greatest impact on the community’s overall health. The implementation plan includes components of education, awareness and collaboration with other agencies, services and care providers.

Two distinct programs:
1. Urgent Pediatric Fracture Clinic – This Clinic addresses the community need for immediate access to pediatric orthopaedic medical experts. A child’s bones are much different from an adults, when a child has a fracture, what is most important is getting the child to a pediatric orthopaedic surgeon. The Spokane Hospital has a process in place to see kids with documented fractures the next day. No waiting, no need for an appointment, regardless of their ability to pay.

2. The Pediatric Satellite Clinic in Richland, WA addresses the need for increased access to care for our families by bringing the hospital’s expert care closer to our patients. The Satellite Clinic is located in Central Washington approximately 2 hours from the hospital. Where transportation might be an issue, the Clinic helps to alleviate this burden on families.
Urgent Pediatric Orthopaedic Fracture Clinic

Shriners Hospitals for Children® — Spokane introduced its Urgent Pediatric Fracture Clinic in April 2013. Since inception, its popularity and growth have exceeded expectations.

The program gives priority scheduling to documented cases of stable fractures in the Outpatient Clinic. The availability of expedited care has become popular with the area’s referring providers and the community’s families. Shriners Hospital knows that providers often see fractures under urgent circumstances and do not have time to research specialty care options or make phone calls to set up appointments for patients and families. Children might wait one to two weeks for an appointment with a specialist in other settings. The Spokane Hospital Fracture Clinic provides an effective solution for both providers and families.

The process is simple and streamlined. Once a fracture is confirmed and documented, patients are given a Patient Instruction Sheet and providers simply fax the Fracture Clinic Referral Form to the Spokane Hospital. The hospital has dedicated the first part of each morning, Monday through Friday, in the Outpatient Clinic to these patients. The next business day, patients bring that documentation to Shriners Hospital between the hours of 7:30 am – 9:00 am. After checking in, they receive priority scheduling with no prearranged appointment required.

Fractures are common in children. However, because a child's bones are subject to a unique injury called a growth plate fracture, it is important that broken bones in kids are treated promptly and properly. The child needs proper treatment before the bone begins to heal, as the long-term consequences may include limbs that are crooked or of unequal length. Spokane and surrounding communities are lucky to have access to expert fellowship trained pediatric orthopaedic surgeons at Shriners Hospitals for Children – Spokane.

Patients receive total fracture care at Shriners Hospital that could include reduction, surgery, casting, post-fracture follow up and rehabilitation as needed. Much of the popularity of the Fracture Clinic is due to the dedicated effort of the hospital staff. The registration staff, new patient nurse and surgery scheduler coordinate scheduling. The providers, nurses and radiology staff are excellent at treating patients while keeping wait times to a minimum.
The Urgent Pediatric Fracture Clinic highlights the expert services and streamlined processes that the Spokane Shriners Hospital already embodies. Shriners Hospital has always offered the highest quality pediatric specialty care. The intake process is well established. The Fracture Clinic concentrates these qualities into a well-focused solution to a common problem. Referring providers appreciate the easy referral and parents appreciate the expedited expert care.

Fracture Referral Guidelines:

- *Children and adolescents up to age 18.*
- *Documented fracture by radiograph.*
- *Stable patients only who do not require immediate intervention (e.g. open fracture).*
- *Provide the patient with the Shriners Hospital Patient Instruction Sheet. (provided)*
Evaluation

The success of the Fracture Clinic is evident in the volume increases year-over-year. From inception, the Clinic’s new patient visits have increased 111%. Surgeries generated from the Fracture Clinic continue to rise as well, in 2015 the number increased 30% over 2014 with a total increase from inception of over 50%.

Community Awareness and Education:
A variety of communication tactics are used to increase awareness of the Fracture Clinic. In addition, Fracture Clinic education materials are included and distributed at area health fairs, tradeshows, community fairs as well as medical conferences and exhibitions.
Pediatric Orthopaedic Satellite Clinic

Access to care close to home is an important aspect of treating infants, children and adolescents. As a part of the plan to continue to increase access to care, the Spokane Hospital has developed its first Pediatric Orthopaedic Satellite Clinic outside of Spokane County. The first Satellite Clinic has been implemented in Central Washington region, specifically, the Tri-Cities/Richland, WA area. The three surrounding counties; Franklin, Benton and Walla Walla, were chosen because research shows growth in the region and great potential to care for additional patients.

The hospital has established the satellite clinic co-located at the Northwest Orthopaedic & Sports Medicine (NOSM) in Richland, Washington. The Shriners Hospitals for Children Satellite Clinic consists of a full team of doctors, nurses, medical assistants and registration staff needed to treat kids. It is ultimately an extension of the Outpatient Clinic in the Spokane hospital; kids will see the same expert medical staff just in a different location.

For those families where travel might be an obstacle, this new Clinic will remove these barriers giving the community enhanced access to care and provide the hospital staff an opportunity to care for more kids with orthopaedic conditions.

The Clinic is operated on the 3rd Friday monthly throughout the year, with plans to increase the number Clinic days. NOSM provides the SHC-Spokane Satellite Clinic team with up to (4) clinic rooms, a registration workstation and shared physician and dictation workspace. The team utilizes NOSM’s on-site radiology when needed.

Patients seen in the Satellite Clinic are SHC-Spokane patients, pre-registered through our current intake and registration procedures. The team has access to the patient medical record through a secured hospital owned laptop linking to Spokane SHCIS. To accommodate for last minute add-on appointment needs, these patients are registered on site by the SHC-Spokane staff at the Clinic.

Expanding our reach into nearby communities:

- Provides improved access to care
- Helps expedite the process of connecting patients with the most appropriate care
- Reduces appointment waiting time
Evaluation:

The current appointment capacity is based on hours the Medical staff is available in the Clinic, taking into account type of appointment and travel time.

Scheduled appointments are currently:
- New patients: 16
- Existing patients: 5

TOTAL patient volume for one Clinic = 21 patients. The Clinic fills to capacity each month.

Total visits in 2015 = 137
Total NEW patient visits in 2015 = 104

Of the 104 new patient visits, the hospital scheduled fifteen surgeries, which translates to approximately 1 in 7 patient visits generating a surgery. This is a higher percentage than originally projected based on current trends.
Referral growth within close proximity to the SHC-SPO Satellite Clinic

Richland, WA is located in Benton County, Franklin County sits directly next to Benton. Richland, WA is part of the Tri Cities which cover both the two counties. As the graph above shows, growth in the closest two counties has been steadily increasing. The percentage of increase since inception of the Satellite Clinic continues to increase.

Yakima, WA is just over one hour driving distance from Richland, WA. The Satellite Clinic does not seem to show the same impact and increase in patient referrals, further substantiating the need for closer access to care for patients.
Community Awareness and Education:
A variety of communication tactics are used to increase community awareness of the Satellite Clinic. In addition, Satellite Clinic education materials are included and distributed at area health fairs, tradeshows, community fairs as well as medical conferences and exhibitions.
Acknowledgements

**CHNA Committee:**
Peter Brewer, Hospital Administrator
Lynda Vilanova, Director of Patient Care Services
Monica Hickman, Director of Fiscal Services
Kristin Monasmith, Director of Public Relations
Sarah Older, Manager of Performance Improvement

**External Resources**

1. Spokane Regional Health District


5. U.S. Census Bureau

6. The U.S. Department of Health and Human Services

7. Community Commons., Core Health Indicators Report by State

8. The Dignity Health/Truven Health Analytics Interactive Community Need Index (CNI)

9. Health Resources and Services Administration (HRSA), www.hrsa.gov

10. Health Affairs Blog - Accountable Health Communities and Expanding Our Definition of Health Care, Rocco Perla and Rebecca Onie, March 2, 2016


Exhibits

Washington & Idaho
School Nurses Survey

Q1: Do the children you serve have any unmet medical needs?

   YES   NO

Q2: Please choose the appropriate unmet needs from the list below:

   • Orthopaedic
   • Nutrition
   • General Medicine
   • Counseling
   • Other

   Comments:

Q3: Please choose any appropriate barriers to the children accessing pediatric medical care:

   • Ability to pay
   • Transportation
   • Language
   • Other

   Comments:

Q4: If Orthopaedic, please select the appropriate conditions for the list below:

Scoliosis (includes diagnosis and treatment)
   • Fracture treatment
   • Foot and Ankle disorder
   • Sports injuries
   • Orthotics and Prosthetics
   • Other

   Comments:
Parents and Families Survey

Q1: How were you referred to Shriners Hospitals for Children – Spokane?
☐ Physician
☐ Friend/Family
☐ Shriner
☐ Self
Comments:

Q2: How long did it take between being referred and having an appointment?
N/A - Fracture Clinic
☐ 1-2 Weeks
☐ 2-4 Weeks
☐ 4-8 Weeks
☐ 8+ Weeks
Comments:

Q3: Did you experience any barriers in getting to your appointment?
☐ YES
☐ NO
Comments:

Q4:
Please provide us with any additional info you may find helpful:
SHRINERS HOSPITALS FOR CHILDREN - SPOKANE
Urgent Pediatric Fracture Clinic Referral Form
Clinic Hours: 7:30 a.m. - 9:00 a.m. Monday - Fridays (excluding holidays)

For an immediate referral, complete this form and fax to: 509-623-0472
Patients will be seen the following business day.

Fracture Referral Guidelines:
- Children and adolescents, 18 years and younger.
- Documented fracture by radiograph.
- Stable patients only who do not require immediate intervention (e.g., open fracture).
- If you are concerned the patient may require surgery, please instruct the patient to be NPO after midnight and check the necessary box on the Patient Instruction Sheet.
- Please instruct the patient to bring Patient Instruction Sheet with them to Shriners Hospital.

Please do not hesitate to contact one of our physicians for other pediatric orthopaedic issues or questions.
Business hours: 509-623-0431
After Hours: 509-623-0430
Shriners Hospitals for Children is now part of most major insurance networks. No insurance? No problem. We treat any child regardless of the family's ability to pay.

DATE: ______________________

Type of Fracture

Documented fracture on XRAY

Referring Provider
Name: (please PRINT) Facility: Phone:

Patient Information
Please include patient Facesheet or complete the following information.

Child’s Last Name: __________________________ Child’s First Name: __________________________

<table>
<thead>
<tr>
<th>Gender</th>
<th>Age</th>
<th>Date of Birth</th>
</tr>
</thead>
<tbody>
<tr>
<td>☐ Male</td>
<td>☐ Female</td>
<td>/ /</td>
</tr>
</tbody>
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Parent/Guardian Name: __________________________

Family Phone Number: __________________________ Alternate Phone Number: __________________________

NOT PART OF THE MEDICAL RECORD
This fax may contain privileged or confidential information protected by law. Any unauthorized dissemination, distribution, or copying of this communication is prohibited. If you have received this fax in error, please destroy the attached document(s) and notify us immediately by telephone.

Rev Date: 7/2015
Shriners Hospitals for Children - Spokane: Urgent Pediatric Fracture Clinic

Clinic Hours: 7:30 a.m. - 9:00 a.m. Monday - Fridays (excluding holidays)

Patient Instruction Sheet: Please bring this form with you.

Your child will receive prompt fracture care at Shriners Hospital that could include reduction/re-alignment, surgery, casting, post-fracture follow up and rehabilitation as needed. All care is provided regardless of patient's ability to pay.

Clinic Hours: 7:30 am - 9:00 am Monday - Friday (excluding holidays)

Check-in at the Outpatient Clinic on the 3rd Floor. Your child will be placed in the priority schedule to be seen by medical staff, which may include a pediatric trained Physician Assistant. If you arrive after 8:00 am, you may be required to return the following day.

If you have questions, concerns or changes in your child's condition or you are unable to keep your appointment, please call our Outpatient Clinic: 509-623-0400.

Location:
- The Spokane Shriners Hospital is located on the corner of 5th Avenue and Monroe Street in Spokane. Parking is located in the parking garage on the first floor.

What To Bring:
- Patient Instruction Sheet
- Parent/Guardian photo identification and insurance card (if applicable)
- Any medications the child is currently taking

What if my Child Needs Surgery?

Please follow the instructions below if your referring provider checked this box or there is a concern your child might need surgery.

No solid foods after midnight!
Your child should not have ANY solid foods, milk products, including infant formula, or juice with pulp (orange juice) after 12:00 Midnight.

Breastfed Children:
- 3:00 am: You may breastfeed your child as usual up to 3:00 am the morning of surgery.
- Between 3:00 am and 4:00 am only: Offer only clear fluids (water, apple juice, white grape juice or clear Gatorade). NO RED DRINKS.
- After 4:00 am: Your child should not have anything by mouth.

Children under age five should be awakened and offered clear fluids (water, apple juice, white grape juice or clear Gatorade, NO RED DRINKS) at 4:00 AM only.

All age children: Do NOT give your child ANYTHING by mouth after 4:00 am. Candy, gum, cigarettes are not permitted during the fasting period. May brush their teeth, but shouldn’t swallow.

Rev Date: 7/2015
Sample Print Advertisement for the Fracture Clinic Fracture Clinic flyer

Spokane Shriners Hospital Urgent Pediatric Fracture Clinic

Shriners Hospitals for Children — Spokane is now accepting immediate referrals for all documented, stable fractures. Ask your provider for information.

Your child will receive total expert fracture care at Shriners Hospital that could include (as needed):
- Reduction/re-alignment
- Surgery
- Casting
- Post-fracture follow-up
- Rehabilitation

All care is provided regardless of the patient’s ability to pay.

Request an appointment:
(509) 623 - 0431 • (888) 895 - 5951

Shriners Hospitals for Children — Spokane • 911 W. 5th Avenue Spokane, WA 99204
Shriners Hospitals for Children® - Spokane Community Health Needs Assessment

Sample Print Advertisements for the Satellite Clinic

![Sample Print Advertisement 1]

Shriners Hospitals for Children — Spokane
**Tri-Cities Pediatric Orthopaedic Satellite Clinic**

Our expert pediatric orthopaedic team is coming to you!

- Full Outpatient Pediatric Orthopaedic Services
- Come see us EVERY MONTH!
- The Shriners Hospital Satellite Clinic is a team of doctors, nurses and other critical staff ready to treat your child.
- Co-located with Northwest Orthopaedics & Sports Medicine (a division of Proliance Surgeons)

Simple fractures to complex conditions, always regardless of insurance or the family’s ability to pay.

Call us to make an appointment: 888-895-5951

![Sample Print Advertisement 2]

Clinic now in Tri-Cities, WA!

“We will treat your child just like our own.”
- Missy, RN, Outpatient Clinic Supervisor

Pediatric orthopaedic Experts.
To request an appointment, call us at:
(509) 623-0431 or (888) 895-5951