

## ASPR TRACIE Technical Assistance Request

**Requestor:**

**Requestor Phone:**

**Requestor Email:**

**Request Receipt Date (by ASPR TRACIE):** 24 November 2015

**Response Date:** Initial response 30 November 2015

**Type of TA Request:** Standard

**Request:**

██████████ requested if there are any known community or agency pediatric needs assessments available.

**Response:**

The ASPR TRACIE team reached out to Subject Matter Expert (SMEs) Cadre Members specializing in pediatric issues to determine if they have resources to share. In addition, the ASPR TRACIE team is including the resources below that may be helpful. Some of these are from the Draft Pediatric Topic Collection (due to be completed in mid-December 2015).

The 2010 Patient Protection and Affordable Care Act requires each tax-exempt hospital to “conduct a [CHNA] every three years and adopt an implementation strategy to meet the community health needs identified through such an assessment.” Therefore, there are many more assessments than what is included here, but these are the most readily, open source assessments available.

### Pediatric Needs Assessments

Anderson, M., Amparo, A., Kaplowitz, L., et al. (2015). [Near-Term Strategies to Improve Pediatric Surge Capacity during Infectious Disease Outbreaks](#). U.S. Department of Health and Human Services, Office of the Assistant Secretary for Preparedness and Response.

This report summarizes the methods, limitations, gaps, key findings, and results of the National Advisory Committee on Children and Disasters Surge Capacity Work Group's assessment of current national pediatric surge capacity. The assessment focused on: the current state of readiness to transport large numbers of critically ill children, the current state of general emergency/ pediatric emergency surge capacity; the current readiness of children's hospitals to surge during an infectious disease outbreak; the current state of non-pediatric facilities to care for children in large-scale disease outbreaks; a summary of potential mitigation strategies for identified gaps; and a review of best practices and a summary of practical tools to help build healthcare coalitions aimed at increasing community readiness to care for children.

Ann & Robert H. Lurie Children's Hospital of Chicago. (2013). [Community Health Needs Assessment 2013](#).

This needs assessment was conducted in order to identify barriers to good health and well-being for Chicago children and adolescents, and to guide continuing efforts of the Lurie Children's Hospital to improve pediatric health in Chicago. Key findings include: Chicago children and families are 50% more likely than families nationally to rely on Medicaid; the two dominant causes of death to children and adolescents are complex and chronic health conditions and homicide; mental health diagnosis are a leading cause of hospitalization for adolescents.

Children's Hospitals and Clinics of Minnesota. (2013). [Community health needs assessment](#).

Children's Hospitals and Clinics of Minnesota conducted this CHNA to understand the health needs in their local communities and inform an implementation strategy to address priority needs. Topics and data addressed in this report include demographics, economic issues that affect children, community issues, health status indicators, health access indicators, health disparities indicators, and availability of healthcare facilities and resources.

Children's National Health System, Emergency Medical Services for Children National Resource Center. (2013). [National Pediatric Readiness Project](#).

The National Pediatric Readiness Project is a multi-phase quality improvement initiative to ensure that all U.S. emergency departments (ED) have the essential guidelines and resources in place to provide effective emergency care to children. The first phase of this project was a national assessment of EDs' readiness to care for children. Results for each state and U.S. territory are available, and includes their overall assessment response rate; the median pediatric readiness score; a list of meetings, conferences, and publications related to project implementation; and a list of the National Pediatric Readiness State Team members.

Dayton Children's Hospital. (2014). [2014 Community Health Needs Assessment](#).

Dayton Children's Hospital conducted this Community Health Needs Assessment (CHNA) to evaluate the status of their region's pediatric health. It covers many health and safety topics and is intended to provide community health advocates insights into the health and well-being of the region's children. This report also includes the implementation plan to address the priority issues identified in the CHNA.

Nicklaus Children's Hospital (formally Miami Children's Hospital). (2012). [Miami Children's Hospital Community Needs Assessment](#).

This assessment includes input from hospital leadership, community focus group feedback, and data from various local, state, and national resources. Measures include material and fetal health, immunizations, childhood obesity prevention, pediatric asthma, and access to care.

## Additional Resources

Kenningham, K., Koelemay, K., and King, M. (2014). [Pediatric Disaster Triage Education and Skills Assessment: A Coalition Approach](#). (Abstract only.) *Journal of Emergency Management*. 12(2):141-51.

This article describes the successful coalition-wide training for medical providers to enhance their preparedness and response skills by the King County Healthcare Coalition (now known as the Northwest Healthcare Response Network). It provides an example of creating value for members and consistency of training across a region.

U.S. Department of Health and Human Services, Administration for Children and Families. (2010). [National Commission on Children and Disasters: 2010 Report to the President and Congress](#).

This report includes the findings and recommendations from the Commission's examination and assessment of the preparedness, response, and recovery needs of children from all hazards. It includes 32 recommendations in areas such as disaster management, mental health, emergency medical services and pediatric transport, sheltering, and evacuation. Appendix B of the report includes an index organized by the agency, group, or individual charged with implementing the recommendations.

Various authors. (2009). [Pediatric Surge Pocket Guide](#). California Hospital Association.

This pocket guide contains clinical checklists, guides, and just-in-time references to manage a surge of pediatric patients. It includes the following sections: Normal Values; Triage and Assessment; Treatment and Medications; Equipment; Decontamination; Mental Health; and Pediatric Safe Areas.