

Children's Healthcare of Atlanta Community Health Needs Assessment and Implementation Plan

Egleston hospital
Scottish Rite hospital

November 2013



Children's[™]
Healthcare of Atlanta



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A Letter from the Chairman to the Community

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Dear Friends,

Children's Healthcare of Atlanta is pleased to present its Community Health Needs Assessment and Implementation Plan. Children's has a long history of serving children, and we are exceedingly proud of our mission to make kids better today and healthier tomorrow.

With input from a broad range of truly remarkable healthcare leaders who are passionate about the interests of children and adolescents, we have identified and prioritized pediatric community health needs to help advance the health and wellness of children and adolescents within our community.

Our Board of Trustees has adopted the 2014-2016 Community Health Needs Implementation Plans for Egleston and Scottish Rite hospitals and is committed to expanding and leveraging our existing programs, services, and resources to improve the health of children in our community.

Children's will also work with other organizations across our community to address the health need priorities of children who reside in and around metro Atlanta and across the state.

Please visit us at choa.org for more information and follow our progress.

Warm Regards,

Jonathan D. Goldman
Chairman
Children's Healthcare of Atlanta
Board of Trustees

Acknowledgments

Children’s Healthcare of Atlanta’s 2013 Community Health Needs Assessment and Implementation Plan was developed by Children’s staff with the assistance of Legacy Consulting Group and generous input from a broad group of stakeholders representing the interests of children, adolescents and young adults in Atlanta and throughout Georgia.

The individuals listed below contributed immeasurable value in the formation of this report, providing professional knowledge, expert medical information, informed public policy direction, and child health advocacy. Children’s Healthcare of Atlanta would like to acknowledge each of these individuals and thank them for their generous time and contributions to this assessment.

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Disclaimer

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Egleston Children's Hospital at Emory University Inc. is referred to as "Egleston hospital" and "Egleston." The Board of Directors of Egleston has approved this Community Health Needs Assessment.

Scottish Rite Children's Medical Center Inc. is referred to as "Scottish Rite hospital" and "Scottish Rite." The Board of Directors of Scottish Rite has approved this Community Health Needs Assessment.

Marcus Autism Center Inc. is referred to as "Marcus Autism Center."

Emory-Egleston Children's Heart Center Inc. is referred to as "Sibley Heart Center Cardiology" and "Sibley Heart Center."

Children's also wholly owns HSOC Inc., which manages Children's Healthcare of Atlanta at Hughes Spalding, referred to in this document as "Hughes Spalding Children's Hospital" and "Hughes Spalding."

Disclaimer: References to Community Resources are not the endorsements of Children's. Children's requested that each Community Resource referenced in the report approve the description of its services.

Executive Summary

About Children's Healthcare of Atlanta

In 1998, Egleston Children's Health Care System and Scottish Rite Medical Center came together to form Children's Healthcare of Atlanta—one of the largest pediatric systems in the country. In 2006, Children's assumed responsibility for the management of services at Hughes Spalding Children's Hospital. Today, our system includes three free-standing pediatric hospitals, a nationally recognized autism center of excellence, neighborhood locations and telemedicine sites across the state of Georgia. In 2012, we managed more than 847,000 patient visits and treated more than 346,000 unique patients from all 159 counties in Georgia.

Our Mission

To make kids better today and healthier tomorrow

Our Vision

Best care ... Healthier kids

Our Values

Care about people

Passionate about kids

Dedicated to better

Our Community Benefit

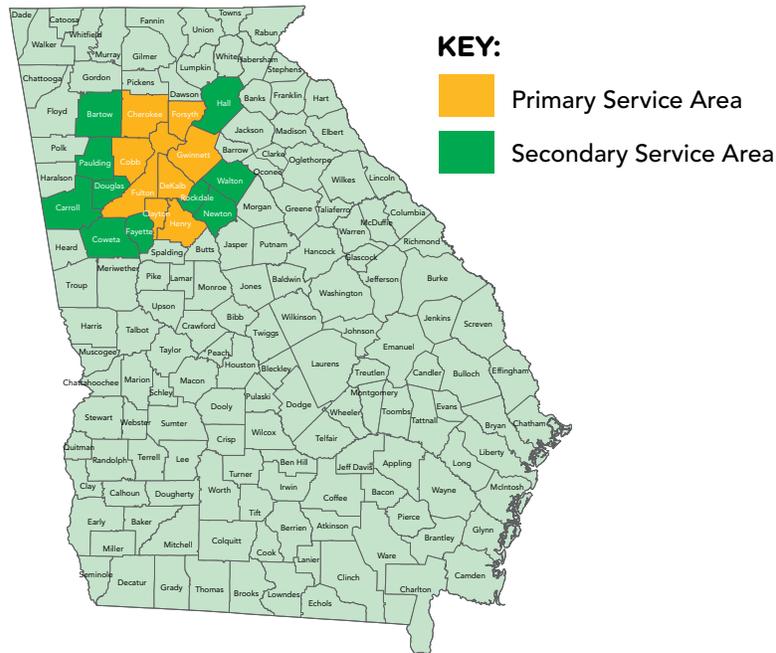
We know Georgians are counting on us to make a difference—both in the lives of kids and in the strength of our communities. Children's offers a number of programs and services to meet the health needs of the community. In fiscal year 2012, Children's provided more than \$137 million in community benefit, including approximately \$70 million in unreimbursed clinical care.

Our Community Health Needs Assessment

To continue to advance the health and wellness of children and adolescents within our community, in 2013 we conducted our first community health needs assessment. In the assessment we identified and prioritized pediatric community health needs with input from a broad range of truly remarkable people who are passionate about the interests of children and adolescents. The assessment helps Children's better understand the needs of the pediatric healthcare community, informs our community benefit activities and influences our strategic planning efforts. We will repeat the community health needs assessment process every three years and report the results of our assessment on the Children's website in compliance with IRS regulations.

Our Community of Focus

Our 2013 Community Health Needs Assessment focused on identifying pediatric healthcare needs in the greater metropolitan Atlanta region, focusing specifically on the 18 county primary and secondary service areas that account for 78 percent of admissions, 94 percent of Emergency Department visits and 90 percent of outpatient visits to Children’s during 2012. These 18 counties are Bartow, Carroll, Cherokee, Clayton, Cobb, Coweta, DeKalb, Douglas, Fayette, Forsyth, Fulton, Gwinnett, Hall, Henry, Newton, Paulding, Rockdale and Walton.



Process and Data Sources

The community health needs of children within the 18-county focus area were identified through in-depth interviews and focus groups, with 67 individuals representing the interests of the pediatric healthcare community in the greater metropolitan Atlanta region. A complete list of participants is available in the Acknowledgments. These individuals represent diverse healthcare backgrounds, including public health (16), physicians (38), community leaders (6), Children’s Healthcare of Atlanta executives (3) and community representatives (4).

Based on the collected interviews, expertise and feedback from this diverse group of advocates, a list of pediatric community health needs was developed. There was significant consensus that these issues affected children across multiple cultural, socio-economic and geographic communities within the expansive greater metro Atlanta region. A review of secondary data sources confirmed these issues as well.

After developing a list of pediatric community health needs, each contributor was asked to rank pediatric community health need priorities on an ordinal scale with 1 being the highest priority and 10 being the lowest priority. The community health needs assessment was completed from March to May 2013. An 89 percent response rate was achieved.

Our Community Health Need Priorities

The 10 pediatric healthcare needs identified in the Children’s 2013 Community Health Needs Assessment in priority order are:

1. Need for ensuring access to continuity and coordination of quality pediatric health services through development of “medical homes”
2. Need for programs to reduce the prevalence of overweight and obesity in children and adolescents within the community
3. Need for partnerships to enhance access to behavioral and developmental health services for children and adolescents
4. Need for ensuring access to affordable pediatric psychiatry, neurology, pulmonary medicine and rheumatology services for infants, children and adolescents
5. Need for programs to enhance access to health services that address adolescent health issues including teen sexuality, HPV vaccination, sexually transmitted diseases, eating disorders, adolescent gynecology, teen pregnancy prevention and hormonal modulation
6. Need for partnerships with schools to coordinate approaches for addressing primary and chronic health issues to reduce absenteeism

7. Need for programs to coordinate transition of care for individuals with chronic health issues from adolescence to young adulthood
8. Need for programs that enhance awareness of environmental causes of asthma, allergies and respiratory issues
9. Need for programs that enhance access to dental health services in under-privileged neighborhoods
10. Need for programs to address the health needs of immigrant and transient populations (language barriers, immunizations, etc.)

Our Implementation Strategy

Because each of our hospitals has a unique tax ID, separate implementation plans are required by the IRS. Unique implementation plans for Egleston and Scottish Rite hospitals are included in this report. Since Children's manages the Hughes Spalding hospital for Grady Health Systems, an implementation plan for Hughes Spalding is not included in our report.

Due to the long history of Children's working with the community, the health needs uncovered in the assessment were not unexpected. Each of the 10 needs is actively being addressed in some capacity by existing and ongoing programs and services of Children's. Additionally, there are many organizations in the community that are addressing these needs as well.

Due to limited resources and the extraordinary cost of providing highly specialized care to children throughout Georgia, the Children's community health needs implementation strategy is focused on leveraging existing programs, services and resources where possible and focuses on the health need priorities of children and adolescents who reside in our 18-county, metropolitan Atlanta primary and secondary service area communities.

In addition to leveraging existing programs, over the next three years, Children's will place special emphasis on three of the top four needs as these tightly align with our strategic plan. These needs are:

- Need for ensuring access to continuity and coordination of quality pediatric health services through development of "medical homes"
- Need for programs to reduce the prevalence of overweight and obesity in children and adolescents within the community
- Need for ensuring access to affordable pediatric psychiatry, neurology, pulmonary medicine and rheumatology services for infants, children and adolescents

Our Community Resources

No organization alone can address all of the community health needs. In addition to fostering current collaborations, whenever possible and financially feasible, Children's will assist in a supportive role other pediatric community health need efforts in the greater metropolitan Atlanta region and throughout Georgia. Existing healthcare facilities and community resources currently addressing the prioritized community health needs are highlighted in this report along with contact information for each organization.

Next Steps

Children's will report annual progress to meeting these community health needs on the Children's website. In three years the assessment process will be repeated.

Community Health Needs and Resource Inventory

Below are detailed descriptions of the 10 community health needs identified and prioritized in the Children’s Healthcare of Atlanta 2013 Community Health Needs Assessment. Each need is described in the context of comments received during interviews and focus groups conducted during the assessment. When available, facts and figures from secondary data sources are incorporated into the descriptions. The description of each need is followed by inventories of resources currently available at Children’s and in the community to address the specific community health need.

Community Health Need #1: Need for ensuring access to continuity and coordination of quality pediatric health services through development of “medical homes”

Description of Need

Based on the opinion of contributors to the Community Health Needs Assessment, there is a need for children to have access to a “medical home” to provide continuity and coordination of quality pediatric healthcare delivery as children grow and receive services across different healthcare delivery sites.

The American Academy of Pediatrics (AAP) first introduced the concept of a “medical home” in 1967 when it envisioned one central source of a child’s pediatric records and emphasized the importance of centralized medical records for children with special healthcare needs.⁽¹⁾ Since then, the AAP has developed the medical home model for delivering primary care that is accessible, continuous, comprehensive, family-centered, coordinated, compassionate and culturally effective to all children and youth, including youth with special health needs.⁽²⁾

Based on data from the National Survey of Children’s Health, 51.7 percent of children in Georgia received coordinated, ongoing and comprehensive care within a medical home during 2011/2012. This is slightly below the nationwide rate of 54.4 percent.⁽³⁾

(1) “History of the Medical Home Concept,” Calvin Sia, MD, FAAP, Thomas F. Tonniges, MD, FAAP, Elizabeth Osterhaus, MA, Sharon Taba, Med, *Pediatrics* Vol. 113 No. Supplement 4 May 1, 2004, pp 1473-1478.

(2) *The National Center for Medical Home Implementation, American Academy of Pediatrics.*

(3) “Georgia Report from the National Survey of Children’s Health.” NSCH 2011/2012. *Child and Adolescent Health Measurement Initiative, Data Resource Center for Child and Adolescent Health website. Retrieved [08/12/13] from www.childhealthdata.org.*

Children’s Healthcare of Atlanta’s Ongoing Programs/Services

Children’s provides primary care services at two locations: Primary Care Center of Chamblee and Hughes Spalding. Other services offered by Children’s assist in coordinating care of patients of Children’s.

The Primary Care Center of Chamblee is a service of Children’s providing primary care for children from birth to age 18. Primary care doctors at the Children’s Primary Care Center of Chamblee enable access to continuity and coordination of quality pediatric health services for infants, children and adolescents who primarily rely on Medicaid. The Primary Care Center of Chamblee has a fully adopted electronic medical record to better coordinate care for its patients.

Hughes Spalding is a hospital managed by Children’s for Grady Health Systems. In addition to being an acute care hospital with a full service Emergency Department and inpatient beds, Hughes Spalding provides primary care services. Hughes Spalding is in the process of seeking medical home certification and currently serves as the medical home for children in foster care and custody of the Georgia Division of Family and Children Services.

The Judson L. Hawk Jr., M.D., Clinic for Children is a service of Children’s and offers multispecialty outpatient treatment for children with a wide range of conditions. By housing all outpatient services together, families are able to receive comprehensive care for children with complex medical issues at this location. Specialists provide services to patients and families in one appointment, reducing the number of school

and work absences. The Judson Hawk Clinic provides access to continuity and coordination of quality pediatric health service for infants, children and adolescents with complex medical issues.

Nurse Advice Line provides caregivers with help to determine appropriate levels of care for their children. The Nurse Advice Line provides direct access to specially trained pediatric nurses who provide homecare advice or referral to a higher level of care when needed. The Nurse Advice Line has a community-based component enabling any family to call for advice and also provides advice for pediatricians who have chosen this system for after-hours support for their office.

Community Resources

There are several resources in the community to assist physicians and organizations seeking patient-centered medical home (PCMH) certification, and the National Committee for Quality Assurance (NCQA) enables patients to search their database to find a certified medical home near them.

Georgia Academy of Family Physicians (GAFF) offers PCMH educational opportunities to members with live activities, onsite coaching, online education and shared resources. GAFF encourages NCQA PCMH recognition. GAFF, in partnership with TransforMED and Discern Consulting, launched the Patient Centered Medical Home University in November 2010. It was an 18-month process that assisted small practices, of five or fewer physicians, in achieving the NCQA recognition as a PCMH. GAFF launched a second class in November 2013 in conjunction with Discern Consulting and Physicians in Excellence in Medicine. gafp.org

National Committee for Quality Assurance (NCQA) trains providers in the PCMH and recognizes practices implementing the PCMH program. In Georgia, NCQA has approximately 250 clinicians and 35 sites that have achieved NCQA PCMH recognition. ncqa.org

Patient-Centered Primary Care Collaborative (PCPCC) is a nonprofit that advocates nationally to advance patient-centered primary care and the medical home model. PCPCC also works to broadly disseminate resources that capture best practices and lessons learned from medical home initiatives throughout the country, including free webinars, publications and conferences. pcpcc.net

Community Health Need #2:

Need for programs to reduce the prevalence of overweight and obesity in children and adolescents within the community

Description of Need

Based on the opinion of contributors to the Community Health Needs Assessment, obesity is a serious issue in the community. Stakeholders cite that numerous issues have contributed to the growth in overweight and obesity in children over the past several decades, including:

- Lack of consistent promotion of breast-feeding from birthing hospitals within Georgia
- Urban food deserts (lack of grocery stores, fresh food and produce) within lower income neighborhoods
- Ready availability of sugary drinks, snacks, chips and candy
- Lack of food and exercise before and after school
- Unsafe neighborhoods in which to go out and play
- Inactivity and lack of vigorous exercise daily; most kids cannot pass recommended aerobic activity levels
- Increase in the amount of television watched (currently three or more hours per day)
- Cultural influences that accept “chubby” children as an indication of prosperity

Based on data from the National Survey of Children’s Health, in 2011/2012, 35 percent of children age 10-17 in Georgia were overweight or obese (measured by BMI-for-age at or above 85th percentile).⁽¹⁾

⁽¹⁾ “Georgia Report from the National Survey of Children’s Health.” NSCH 2011/2012. *Child and Adolescent Health Measurement Initiative, Data Resource Center for Child and Adolescent Health website*. Retrieved [08/12/13] from www.childhealthdata.org.

Children’s Healthcare of Atlanta’s Ongoing Programs/Services

Children’s has taken a leading role within Georgia in developing and supporting programs to reduce the prevalence of overweight and obesity in the community. Highlighted below are the extensive programs, education and services offered.

Programs in Clinical Settings: Children’s works in its clinical settings to reduce the prevalence of overweight and obesity through a number of programs, including:

- **Health4Life Program:** Scottish Rite and Hughes Spalding offer the Health4Life program. Health4Life was created specifically for children in the 85th percentile for body mass index (BMI) with a co-morbidity, or the 95th percentile for BMI. It uses a family-centered approach and provides patients complete medical assessments of obesity-related illnesses,

nutrition and mental health support. Families get the support and treatment needed to make sustainable lifestyle changes. The Health4Life Program also includes a bariatric surgery option to those children with extreme weight issues.

- **The Sibley Heart Center Cardiology** houses a preventive cardiology program to assist cardiac patients who are overweight and obese. The program provides diet and nutrition counseling.
- **Primary Care Center of Chamblee:** Within the primary care setting, nurses and doctors are alerted when a patient qualifies as overweight based on BMI. When this happens, patients and families are counseled using motivational interviewing techniques on diet, nutrition and exercise, and are asked to return every three months until the child’s weight normalizes.
- **Hughes Spalding Hospital** has an obesity clinic and refers kids to the Health4Life Clinic if they need more advanced treatment.

Strong4Life: In 2011, Children’s launched the Strong4Life (S4L) movement, a unique model for change designed to improve the health and well-being of children in Georgia. Strong4Life seeks to decrease the prevalence rate of childhood overweight and obesity in Georgia and is aligned with the state’s goals. While there are many child-focused wellness initiatives in Georgia, Strong4Life has an expert understanding of how to treat kids. Strong4Life leverages the clinical expertise and thought leadership of Children’s to collaborate and align with organizations across Georgia who have joined in the fight against childhood obesity. The Children’s dedicated team of health professionals develops and offers Strong4Life programs to meet the needs of the community. Programs are distributed through the many alliances of Children’s including healthcare settings, schools and other community venues. The 2013 goal is to train more than 1,500 key influencers and impact more than 300,000 kids.

- **Increasing Awareness of Overweight and Obesity in Children and Adolescents:** Children’s has invested in creating awareness around the issue of childhood obesity through several advertising campaigns. Market research conducted on behalf of Children’s reveals that 96 percent of families recognize childhood obesity as a serious illness, and yet 75 percent of those parents with overweight children do not recognize it in their own home. Children’s continues to leverage its marketing expertise to deliver messages that

inspire change. In addition to traditional media campaigns (TV, radio, outdoor), Children's is using digital media and other tactics to reach parents in the community.

- **Strong4Life Website:** Children's created the Strong4Life website strong4life.com to educate parents and empower key influencers to support change and provide practical solutions for those ready to change. The site contains:
 - Videos, fact sheets, recipes, activity ideas and other useful information on healthy habits
 - In-depth information on all Strong4Life programs as well as community resources
 - Specific information for physicians and other clinical professionals interested in training and Continuing Medical Education (CME)

Strong4Life Community Programs:

- **S4L Provider:** This program is designed to help medical providers initiate conversations about BMI measurement, nutrition and physical activity behaviors with patients and families and to provide support to help families adopt healthier lifestyles. The training is free. Pediatricians may also participate in the maintenance of certification (MOC) program, required for ongoing Board Certification, as part of the training.
- **S4L Webinars:** An extension of the S4L Provider program, Children's offers a series of live streaming webcasts related to the management and treatment of co-morbidities associated with childhood obesity. The webcasts feature a 45-minute roundtable discussion, offered during lunchtime, among experts in the field.
- **S4L Nutrition:** This program provides nutrition directors and managers with training to improve the nutrition environment in schools and to positively influence the diet and health behaviors of children where they make food choices. The program empowers kids and teachers, promotes responsible discussions about lifestyle choices and offers a proactive framework for addressing childhood obesity issues.
- **S4L School Nurse:** An extension of the S4L Provider program, this program teaches school nurses how to have effective conversations with students and parents about healthy behaviors. Children's provides ongoing technical assistance and webinar training to enhance the skill of the nurses.
- **S4L Challenge:** This program teaches elementary school children about the importance of good nutrition and physical activity in a fun and challenging way, energizing the entire school community. Working in collaboration with the Alliance for a Healthier Generation, the program addresses long-term sustainability by incorporating changes to the school environment and by engaging students as change agents in their schools and homes.

- **Healthy Halls:** This program consists of a 40-minute dynamic and fun-filled, education-based assembly performance by a professional theater group, accompanied by take-home materials for students and parents and resource materials for the schools.
- **Camp S4L:** This program is a family-based overnight camp that provides targeted interventions for children ages 9-14 with a BMI in the 85th percentile or higher. The unique camp experience engages the entire family through a welcome and reunion weekend, during which families learn how to work together to lead healthier lives through interactive learning sessions.
- **S4L Healthy Camp Policies:** S4L Healthy Camp Policies allow us to reach more children throughout the state as external camps adopt these policies. The adoption of these policies by external camps will improve the nutrition and physical activity environment of camps through the implementation of a wellness policy, which is a written set of standards an organization agrees to follow to provide a healthy environment.
- **S4L Ambassador:** This program trains youth leaders to serve as S4L Ambassadors to peers and younger children in their community, faith institution, school or other venue by motivating, teaching and modeling healthy habits. Using youth as change agents, participants gain the skills to impact their own lives and the lives of other individuals, organizations and communities.
- **YouthFit4Life:** In alliance with the YMCA, this program provides afterschool counselors with training and skills that greatly improve time spent in moderate-to-vigorous and vigorous activities during a structured program. As a result, each child develops self-management skills to make healthy choices beyond the school day.

Strong4Life Programs in Collaboration with Community Organizations:

Children's, in collaboration with community organizations, is working to further support the fight against overweight and obesity in children and adolescents. Some community collaborations include:

- **Alliance for a Healthier Generation:** Working as part of the S4L Challenge program, Children's collaborates with school wellness councils to complete the Alliance Healthy Schools inventory and make policy and environmental changes at the school level.
- **Atlanta Public Schools:** Children's delivered the S4L Challenge program at 20 schools and trained all the cafeteria managers in the district as part of the S4L School Nutrition program.

- **Boys & Girls Club of Metro Atlanta (BGCMA):** Children's piloted the S4L Ambassador training program with the BGCMA and also brought external funding to help refurbish a gym in the Harland club. As part of the Harland club project, permanent S4L signs are prominently displayed in the gym.
- **Cobb County Schools:** Children's delivered the S4L School Nutrition program in fall 2013 and offered the S4L Challenge to 10 elementary schools.
- **Community Health Works:** As part of the S4L pilot in Macon, Children's collaborated with this organization and provided funds for staff to execute S4L community projects, including a veggie van and farmer's market.
- **Cox Media Group:** In addition to S4L advertising on WSB-TV, Cox radio stations and digital properties, and in the *Atlanta Journal & Constitution*, Children's and Cox are collaborating on news content with the objective of furthering messages designed to increase awareness of childhood obesity risks and inspire parents and community influencers to effect changes at home and in the community.
- **DeKalb County Schools:** Children's provided the S4L Challenge program in 15 schools and delivered the S4L School Nutrition program in fall 2013.
- **Fulton County Schools:** Children's provided the S4L Challenge program in 20 schools and S4L School Nutrition training. Fulton County was also the pilot district for the S4L School Nurse program.
- **Georgia Department of Public Health (DPH):** Children's has a long-standing relationship with the DPH as it funded the S4L pilot work in Macon and Columbus and was part of the Georgia Student Health and Physical Education (SHAPE) collaboration.
- **Girl Scouts of Greater Atlanta:** Children's continues to deliver the S4L Ambassador program to the Girl Scouts. This program has been well received and allows scouts to earn a S4L patch.
- **Kids Health First:** Children's relies heavily on Kids Health First to pilot many of the provider-related projects. They mandated the S4L Provider training and continue to recruit physicians to take part in pilot projects. Kids Health First also manages the MOC program for Children's.
- **Live Healthy Columbus:** As part of the S4L pilot in Columbus, Children's collaborated with this organization and provided a staff resource to execute S4L community projects, including several community gardens.
- **University of Georgia Cooperative Extension:** As part of the No Kid Hungry campaign and through grant funds provided by the Georgia Food Bank Association, Children's will deliver the S4L Ambassador program to 4-H students statewide.

- **YMCA of Metro Atlanta:** Children's collaborates with the YMCA to develop an after-school program aimed at increasing physical activity and improving eating habits. This program is currently in pilot.

Community Resources

In addition to the plethora of programs and collaborations at Children's, the community supports an abundance of resources to reduce the prevalence of overweight and obese children.

Lieutenant Governor's Healthy Kids Georgia: Lt. Gov. Casey Cagle supports the Alliance for a Healthier Generation's Healthy Schools Program, which recognizes schools that make significant policy/environment changes. Recognizing Georgia faces an obesity epidemic, more than 1 in 3 Georgia children considered obese, Casey, as both the lieutenant governor and a parent, decided it was time to reverse these trends and confront the challenge of childhood obesity. In 2010, he launched the Lieutenant Governor's Healthy Kids Georgia, with the goal of enrolling 50 Georgia schools in the Alliance for a Healthier Generation's Healthy Schools Program within one year. After achieving this initial goal in less than three months, the lieutenant governor is now working to provide every Georgia student with access to an environment that encourages healthy lifestyle decisions. Lt. Gov. Cagle hosts an annual award ceremony for the schools that receive recognition in addition to an annual fitness festival at the Capitol to encourage physical activity.

ltgov.georgia.gov/healthy-kids-georgia

Alliance for a Healthier Generation: The Alliance for a Healthier Generation, founded by the American Heart Association and the Clinton Foundation, works to reduce the prevalence of childhood obesity and to empower kids to develop lifelong healthy habits. The alliance works with schools, companies, community organizations, healthcare professionals and families to transform the conditions and systems that lead to healthier children.

HealthierGeneration.org

Georgia SHAPE: The SHAPE Coalition, led by Gov. Nathan Deal and facilitated by the Department of Public Health, is positioned as the state's lead organization for childhood obesity initiatives. Georgia SHAPE begins with a basic, benchmark measurement of fitness among students called FITNESSGRAM. The FITNESSGRAM tool used for SHAPE's annual standardized fitness assessment evaluates five different parts of health-related fitness, including aerobic capacity, muscular strength, muscular endurance, flexibility and body composition using objective criteria. It also generates reports, providing valuable individual, school and state-level data to empower parents, schools and the community to best access the current health needs for children in Georgia. The report is delivered confidentially to families, and aggregate results are reported to create a true "snapshot" and highlight areas for improvement.

georgiashape.org

Georgia Chapter American Academy of Pediatrics (GA-AAP):

GA-AAP provides training on childhood obesity that covers treatment, diagnosis, counseling and coding. The project has been funded by the Department of Public Health on a small scale, most recently to conduct five training sessions. gaaap.com

Georgia Campaign for Adolescent Power and Potential (G-CAPP):

G-CAPP works with adolescents around childhood obesity.

gcapp.org

Georgia Family Connections Partnership (GFCP): Georgia Family Connection is a statewide network of 159 county organizations collaborating in communities to improve the quality of life for children and families. GFCP wants kids to be healthy, ready to start school and do well when they get there, and it wants families to be stable and self-sufficient. gafcp.org

Georgia Health Policy Center (GHPC): Established in 1995 in the Andrew Young School of Policy Studies at Georgia State University, GHPC provides evidence-based research, program development and policy guidance on local, state and national levels to improve health status at the community level. With more than a decade of experience, the center is at work nationwide, focusing on solutions to some of the most complex issues facing healthcare today, including child health and well-being. The center aims to improve child outcomes and child and family policies in Georgia through applied policy analysis and research. Funding from public and private sources supports work in the areas of school health, childhood obesity and child well-being. The GHPC is also home to the Georgia Center of Excellence in Child and Adolescent Behavioral Health (the COE). The COE is a partner with the Georgia Department of Behavioral Health and Developmental Disabilities in providing assistance to the state's child and adolescent behavioral health System of Care.

aysps.gsu.edu/ghpc/health-topics/child-health-well-being

Voices for Georgia's Children: Established in 2003, Voices for Georgia's Children is a non-profit child policy and advocacy organization that envisions a Georgia where children are safe, healthy, educated, employable and connected to their family and community. Its mission is to be a powerful, unifying voice for a public agenda that ensures the well-being of all of Georgia's children. Georgia Voices has received some funding for childhood obesity projects. The organization hosted a childhood obesity day at the Capitol in the spring and has assumed responsibilities for the policy arm of the Georgia After-School Council, which recently disbanded.

georgiavoices.org

HealthMPowers: HealthMPowers is a comprehensive school health intervention program exemplifying the key strategies that the Centers for Disease Control and Prevention (CDC) outlined for improving health, physical activity and healthy eating in schools. In collaboration with its sponsors, CDC, Emory School of Public Health, Children's, Piedmont Healthcare, Northside Hospital and Isakson-Barnhart, HealthMPowers has created a model that not only targets youth, but also addresses the major support networks in a child's life: school staff and family members. healthmpowers.org; 770-817-1733

Morehouse School of Medicine (MSM): MSM has been working on several community-based projects and leads a coalition to develop and plan an obesity-related initiative in faith-based organizations. In 2013, MSM hosted the Dr. Daniel S. Blumenthal Annual Public Health Summit "Preventing Obesity through Life Stages" with leading health experts discussing programs and initiatives about reducing childhood obesity.

msm.edu/exec_offices/office_marketing/Events/public-health-summit-2013/summit-topics

University of Georgia (UGA): UGA launched a major campus-wide initiative in January 2012 to help the state address its growing epidemic of childhood and adult obesity, as well as the increasing incidence of overweight infants. UGA is able to harness diverse and extensive obesity-related instruction, research activities, and public service and outreach components to address this multi-faceted problem. The initiative will develop obesity prevention and treatment programs that interested Georgia communities, employers and healthcare providers can implement. The initiative also will coordinate the study and development of state and national public health policies and economic strategies to address obesity and metabolic disorders. UGA will work cooperatively with interested parties, including other Georgia research institutions, to help bring obesity under control. The UGA cooperative extension was just awarded \$1 million from Coca-Cola for its Walk Georgia program.

obesity.ovpr.uga.edu/about/

Community Health Need #3:

Need to enhance access to behavioral and developmental health services for children and adolescents

Description of Need

Based on the opinion of contributors to the Community Health Needs Assessment, throughout metro Atlanta there is a shortage of child and adolescent psychiatrists and clinical psychologists, yet there are a growing number of children and adolescents needing behavioral and developmental health services in the community.

In addition, poor reimbursement for behavioral health services has caused many child and adolescent psychiatrists to become unwilling to accept any patients without good commercial insurance or private payment arrangements. Increasingly long waiting times to obtain referral appointments for behavioral or developmental health services has further exacerbated access to these services.

Based on data from the 2011/2012 National Survey of Children's Health, only 53 percent of children in Georgia ages 2-17 with problems requiring counseling receive mental healthcare. Children requiring mental healthcare receive access to those services more often when they are covered by private insurance (64.5 percent) than when covered by public insurance (45.3 percent). In addition, 28.4 percent of children in Georgia ages 4 months to 5 years are at moderate or high risk for mental health concerns based on their parents' specific concerns. ⁽¹⁾

Nationwide, estimates are that approximately 20 percent of adolescents have a diagnosable mental health disorder, and an estimated 67 to 70 percent of youth in the juvenile justice system have a diagnosable mental health disorder. Suicide is the third leading cause of death in adolescents nationwide. ⁽²⁾

In the United States, autism is the fastest growing serious developmental disability. It is estimated that 1 in 88 children will receive an autism spectrum diagnosis (1 in 54 boys and 1 in 242 girls). ⁽³⁾

(1) "Georgia Report from the National Survey of Children's Health." NSCH 2011/2012. *Child and Adolescent Health Measurement Initiative, Data Resource Center for Child and Adolescent Health website*. Retrieved [08/12/13] from childhealthdata.org.

(2) *Mental Health Chartbook*, Sherry Glied, Health Policy and Management, Columbia University Mailman School of Public Health, Aug. 2012.

(3) *Summary Health Statistics for U.S. Children: National Health Interview Survey*, Centers for Disease Control and Prevention, 2011.

Children's Healthcare of Atlanta Ongoing Programs/Services

Children's is a national leader in developmental healthcare with a focus on autism. In addition, Children's provides hospital inpatient consultative services and hospital outpatient services through a staff of approximately 34 psychologists and psychiatrists.

Marcus Autism Center: For children with autism, the Marcus Autism Center offers comprehensive services and evidence-based treatments to more than 5,000 children annually. The Marcus Autism Center offers clinical services (behavior treatment clinics, in-home and community services, language and learning clinic, pediatric feeding disorders program and the pediatric neurodevelopmental center), educational programs (Early Intervention Program), outreach clinics, telemedicine, support services and access to one of the largest healthcare teams dedicated to child development in Georgia.

As a National Institute of Health Autism Center of Excellence, the Marcus Autism Center serves as a community resource for parents and children across Georgia and is one of the largest and most comprehensive centers in the country for the diagnosis and treatment of autism and related disorders. The Marcus Autism Center actively collaborates with the Georgia Department of Public Health's Babies Can't Wait Program, Georgia's Department of Early Care and Learning's program Bright from the Start, and Head Start locally and nationally. The Marcus Autism Center also collaborates with 1,700 Children's community physicians and the Kids Health First pediatric alliance in metropolitan Atlanta. Strategic alliances enable the Marcus Autism Center to translate research findings in autism to providers across Georgia.

Inpatient Hospital Services:

- Children's does not operate an inpatient behavioral health unit, but it addresses behavioral health contributors to medical illness through a comprehensive consultation-liaison service.
- Inpatient and Emergency Department consultations are available at Eggleston, Scottish Rite and Hughes Spalding.

Outpatient Hospital Services:

- Outpatient behavioral health services are offered through

various service lines at Children's including Neuroscience Services, the Aflac Cancer and Blood Disorders Center, Sibley Heart Center Cardiology, Rehabilitation Services, Health4Life Clinic, Transplant Services and Pain and Palliative Care.

- These outpatient services cover a wide array of activity ranging from coping with pain to assessing potential developmental delay as a result of chemotherapy treatments.

Assessment in Primary Care Settings:

- The Primary Care Center at Chamblee and primary care at Hughes Spalding have social workers on site to help with behavioral health assessments. Children requiring treatment are referred to the appropriate setting for care.

Community Resources

There are several community resources providing inpatient and outpatient behavioral and developmental healthcare:

Behavioral Health Link: Professional staff is available any time day or night to help with a mental health crisis or problem with drugs or alcohol. behavioralhealthlink.com; 800-715-4225

The Georgia Department of Behavioral Health and Developmental Disabilities (DBHDD) provides treatment and support services to people with behavioral health challenges and addictive diseases and assists individuals who live with developmental disabilities. The agency's mission is to provide high-quality healthcare opportunities for individuals with developmental disabilities or behavioral health challenges close to their homes and in the least restrictive setting possible, allowing them to create a sustainable, self-sufficient and resilient life in their community while embracing independence and recovery. DBHDD offers crisis services, outpatient treatment and therapeutic programs to all Georgia residents. dbhdd.georgia.gov; 404-657-2252

Georgia Community Support & Solutions (GCSS) is a community-based non-profit organization that provides services to people with developmental disabilities and support to their families. GCSS offers a wide variety of program options, including respite services, residential options, children's services and day programs. GCSS programs are specifically designed for those living with autism spectrum disorders, Down syndrome, mental retardation, cerebral palsy, and other developmental and intellectual disabilities. GCSS operates 23 programs that benefit more than 1,300 individuals in 20 counties in Georgia. gacommunity.org; Chiyoko Rasser 404-634-4222

May Institute for Autism Spectrum Disorders offers a comprehensive set of educational and behavioral services to children and their families, private agencies and public schools throughout the Atlanta area. The May Institute also provides

services to military families in the Atlanta area. All services are provided by a board-certified behavior analyst (BCBA) or board-certified assistant behavior analyst (BCaBA). Working closely with families, May Institute staff members use developmentally appropriate practices based on applied behavior analysis, the methodology universally recognized as critical for teaching children with a diagnosis of autism spectrum disorders or other behavioral or developmental disabilities. May Institute's state-of-the-art programming addresses all areas of a child's development including language, peer interactions and behavior. mayinstitute.org; Sharon Miles, 770-680-8738

View Point Health provides behavioral health services to children, adolescents and their families throughout the state. View Point Health is a pioneer for Georgia's system of care, having helped develop community services and supports for over a decade. View Point Health fees are established by the state of Georgia on a sliding scale based on family size and amount of income. View Point Health does not file private insurance claims for services provided to clients. myviewpointhealth.org/; 678-209-2411

Crescent Pines Hospital is a 50-bed facility in Stockbridge, Ga., that provides psychiatric treatment and substance abuse services for children (ages 4-12), adolescents (ages 12-21) and adults. Crescent Pines provides all levels of care from acute inpatient stabilization and partial hospitalization to intensive outpatient programming. crescentpineshospital.com; 770-474-8888

Devereux Georgia in Kennesaw is licensed to serve 100 children up to the age of 21 who are experiencing emotional and behavioral challenges brought on by abuse, neglect, mental illness, sexual exploitation or intellectual/developmental disabilities. Devereux Georgia treats children struggling with mental health and/or emotional challenges including major depression, post-traumatic stress disorder, bipolar disorder and schizophrenia. devereux.org; 770-427-0147

Hillside Hospital in Atlanta provides numerous treatment options for children and adolescents ages 7-21 experiencing difficulties with emotional and behavioral issues. Hillside's primary treatment modality is Dialectical Behavior Therapy (DBT), a unique, specialized form of cognitive behavioral therapy. As a comprehensive treatment, DBT has been successfully proven to help decrease self-injurious behaviors, mood instability, chaotic relationships, anger and impulsive behaviors. DBT helps improve the understanding of personal boundaries and relationships and how to better deal with conflicting or painful emotions. The aim is to decrease disruptive and self-injurious behaviors. Hillside Hospital's continuum allows children and their families to move along a

spectrum of programming from residential, day programming/ partial hospitalization, intensive outpatient and outpatient services as well as community intervention programs and therapeutic foster care as needed. **hside.org**; Danielle Brock, Admissions Coordinator, 404-875-4551, Ext. 1017

Laurel Heights Hospital is a private intensive residential treatment center located in Atlanta in the Emory/Druid Hills neighborhood. Laurel Heights specializes in the treatment of children and adolescents ages 7-21 with complex psychiatric and behavioral problems with co-occurring developmental disabilities and has a specialty program for children with autism spectrum disorders. Laurel Heights also provides an acute service for these children who are in crisis situations. The 12-acre campus offers seven residential cottages, separate clinic, school, cafeteria, gym, swimming pool and several outdoor playgrounds. Laurel Heights accepts pay from commercial insurance, Medicaid, TriCare, agencies and School Systems. **laurelheightshospital.com**; Contact: 404-888-7860

Peachford Hospital in Atlanta provides mental health and chemical dependency treatment in a nurturing environment for children (ages 4-12), adolescents (ages 13-18), adults and senior adults to find hope and healing from emotional, psychiatric and addictive diseases. The Peachford Hospital system includes a 246-bed inpatient acute-care facility and partial-hospitalization and intensive outpatient programs. **peachfordhospital.com**; 770-455-3200

Ridgeview Institute: Located in Smyrna, Ga., Ridgeview's Youth Services offer comprehensive, individualized care for young people ages 11-17 with psychiatric, addiction or dual diagnosis disorders. Ridgeview's inpatient, partial-hospitalization and intensive outpatient treatment options give patients direct access to the least restrictive level of care. Patients participate in treatment with peers in their age group. The program includes separate tracks for psychiatric disorders and addiction. All programming takes place on the Youth Services Cottage. **ridgeviewinstitute.com**; 770-434-4567

RiverWoods Behavioral Health is located behind the Southern Regional Medical Center campus in Riverdale, GA and provides psychiatric and chemical dependency services, intensive outpatient programs, partial hospitalization programs, adolescent treatment, adult treatment and supportive care/ senior services. 770-991-8500

SummitRidge Hospital in Lawrenceville, Ga., treats teenagers with addiction problems through inpatient and partial-hospitalization programs. **summitridgehospital.net**; 678-442-5800

Community Health Need #4:

Need for ensuring access to affordable pediatric psychiatry, neurology, pulmonary medicine, and rheumatology services for infants, children and adolescents

Description of Need

Based on the opinion of contributors to the Community Health Needs Assessment, there are many pediatric subspecialists within metro Atlanta, but they are not distributed throughout each community. Specifically, many children and adolescents needing pediatric subspecialists who live in Henry, Clayton and south DeKalb counties, and in the West End neighborhood, have to travel long distances to see pediatric subspecialists. In addition, many pediatricians are unwilling to accept Medicaid patients, creating long wait times for subspecialty appointments with pediatricians who do accept Medicaid. Furthermore, language barriers are increasingly present in pediatrician offices.

The most frequently mentioned subspecialties with access issues were: psychiatry, neurology, dermatology, adolescent health, rheumatology, endocrinology, pulmonary medicine and developmental pediatrics.

Children's Ongoing Programs/Services

Children's has 60 pediatric specialties and programs. In 2012, Children's conducted a pediatric specialty vulnerability assessment. From this assessment, Children's implemented a physician resource allocation process to monitor access to pediatric subspecialties. In addition, Children's maintains a physician manpower plan and actively trains as many providers as possible in specialties demonstrating need. All specialists with Children's accept and serve Medicaid patients.

Children's Specialty Services is managed by the Children's Physician Group. This group of more than 400 doctors offers services to patients across several pediatric specialties, including psychiatry, neurology, pulmonary medicine and rheumatology.

Select Pediatric Specialties:

- **Pediatric Psychiatry:** Children's offers psychiatry consultation services to patients in the Emergency Department and in the hospital setting.
- **Pediatric Neurology:** Children's offers pediatric neurology services.

- **Pulmonary Medicine:** The Children's asthma center is located at Hughes Spalding and is a joint effort between Emory University School of Medicine, Morehouse School of Medicine and physicians in private practice. In addition, Children's supports a sleep center, an apnea center and a cystic fibrosis program.
- **Pediatric Rheumatology:** Children's has one of the few pediatric rheumatology teams in Georgia with four physicians through the Children's Physicians Group and supports a fellowship program in rheumatology.

Georgia Partnership for TeleHealth (GPT): In collaboration with the GPT, Children's is able to improve access to pediatric specialists throughout Georgia with our Telemedicine Program. With 26 specialists and 43 presenting sites in Georgia, this program uses specialized high-definition cameras to allow specialists to provide consultations and evaluations for patients in communities with limited access to services. In 2012, our sub-specialists provided 971 visits to children across the state and 539 distance learning and outreach offerings to healthcare professionals. Access is provided to the following sub-specialty areas: autism, cardiology, child protection, concussion/neurosurgery, endocrinology, fetal ECHO, gastroenterology, nephrology, pulmonology and sports medicine/concussion.

Community Resources

There are very few pediatric subspecialists in the community who are not affiliated in some way with Children's who accept Medicaid.

Transportation Access to Specialty Pediatric Services:

Medicaid provides non-emergency transportation (NET) services to its members to visit their doctors or specialists if they have no other means of transportation. Public transportation vouchers are also provided in some circumstances. PeachCare for Kids offers a similar shared ride program that will take members to covered medical providers. One escort is allowed.

Community Health Need #5:

Need for programs to enhance access to health services that address adolescent health issues including teen sexuality, HPV vaccination, sexually transmitted diseases, eating disorders, adolescent gynecology, teen pregnancy prevention and hormonal modulation

Description of Need

Based on the opinion of contributors to the Community Health Needs Assessment, children today are reaching puberty at earlier ages than past generations. This introduces the need for child and teen healthcare services that address healthcare issues associated with adolescence. These healthcare issues include: adolescent gynecology, hormonal modulation, HPV vaccinations, sexually transmitted diseases, sexual identity, pregnancy and prenatal care, tobacco use, alcohol and substance use, and alcohol and substance abuse. All of these issues lead to a need for programs that encompass a coordinated approach to adolescent health issues.

Children's Healthcare of Atlanta Ongoing Programs/Services

Beginning in September 2013, Children's operates an adolescent health clinic opened at Hughes Spalding. Teens are referred from across Children's network to the clinic.

Adolescent Health Clinic: The clinic at Hughes Spalding provides services in the following areas:

- Comprehensive medical care for adolescents
- Comprehensive sexual education and medical care for teens with developmental delays and chronic conditions
- Evaluation and treatment of menstrual and gynecological disorders
- Pregnancy education and testing
- Screening and medical care for patients with eating disorders, from anorexia to obesity
- Screening and treatment for mental health issues, including ADHD, uncomplicated anxiety, depression disorders and self-injurious behaviors
- Substance abuse screening
- Screening and treatment for sexually transmitted infections and HIV
- Tobacco cessation counseling

Community Resources

There are many community resources that focus extensively on adolescent health issues.

Georgia Adolescent Health and Youth Development (AHYD):

This program includes 30 teen centers and 18 district youth coordinators and is available to children ages 10-19. Services include: abstinence education, drug/alcohol prevention education, reproductive health services, and seminars to increase awareness about sexually transmitted diseases and teen pregnancy. health.state.ga.us/pdfs/familyhealth/ahyd/TeenCenterContactList.pdf; George Crawford, 404-657-2613

Georgia Campaign for Adolescent Power and Potential (GCAPP) provides programs in teen pregnancy, physical activity, and nutrition and healthy relationships. Among the many programs GCAPP offers it specifically works to lead Georgia in offering comprehensive and improved sexual health education in school districts, educate high-risk youth on abstinence and contraception, and decrease teen pregnancy rates in metro Atlanta through a youth leadership council. gcapp.org; 404-524-2277

Grady Teen Center: The Grady Teen Center serves adolescents ages 12-19 and provides birth control, gynecological care, pregnancy testing, STI testing and treatment, HPV vaccinations and sports physicals. gradyhealth.org/specialty/teen-center.html; 404-616-3513

Planned Parenthood offers sex education/counseling and reproductive services and coordinates with schools to provide education programs. There are three locations in metro Atlanta: downtown and in Cobb and Gwinnett counties. plannedparenthood.org; Nora Spencer, 404-688-9312

Community Health Need #6: Need for partnerships with schools to coordinate approaches for addressing primary and chronic health issues to reduce absenteeism

Description of Need

Based on the opinion of contributors to the Community Health Needs Assessment, there is a need for partnerships with schools to coordinate approaches for addressing primary and chronic health issues to reduce absenteeism.

Based on data from the National Survey of Children's Health 2011/2012, 3.6 percent of children ages 6-17 (approximately 58,599 children) in Georgia miss 11 or more days of school because of illness or injury. This is lower than the 6.2 percent of children nationwide who miss 11 or more days of school because of illness or injury. Also, 30.5 percent of Georgia children age 6-17 miss no school due to illness or injury, 7.6 percent higher than nationwide (22.9 percent).⁽¹⁾

(1) "Georgia Report from the National Survey of Children's Health." NSCH 2011/2012. Child and Adolescent Health Measurement Initiative, Data Resource Center for Child and Adolescent Health website. Retrieved [08/12/13] from childhealthdata.org.

Children's Healthcare of Atlanta Ongoing Programs/Services

Children's has a robust history of collaboration with schools in the community and provides several services and alliances to keep kids healthy and reduce absenteeism.

School Nurse Manual: Children's provides school nurses with a regularly updated, free online School Nurse Manual, which is also available for purchase in hard copy. The manual includes sections on injury management and emergency medical concerns, administration of medications, communicable disease and infection control, chronic health conditions, special health procedures in a school setting, mental health in schools, screening considerations in the school setting, health education, and employee health and workplace wellness.

choa.org/Health-Professionals/Nurse-Resources/School-Nurses/School-Health-Consultant-2013

School Health Consultant Program: The Children's School Health Consultant Program focuses on coordinating three to four School Nurse Updates each year and on providing staff education for school districts in metro Atlanta.

School Wellness: Children's is inviting schools to collaborate in an effort to improve child wellness and reduce childhood obesity.

- Children's is collaborating with Kohl's to provide Healthy Halls School Wellness, a program to teach nutrition and physical activity to children focusing on Strong4Life healthy habits. This comprehensive wellness program is free to metro Atlanta elementary schools and offers resources to school nurses, teachers, school staff, students and parents. In 2012, the program reached 80 schools and 49,362 children. choa.org/Child-Wellness/Strong4Life-Programs/Schools/Kohls-Healthy-Halls
- Children's also offers the Strong4Life Challenge, an alliance with select elementary schools in areas with higher rates of obese/overweight children to teach kids about the importance of healthy eating and physical activity in a fun way that encourages engagement from students, parents and school staff.

Project S.A.V.E.: Children's cardiac services support Project S.A.V.E. (Sudden Cardiac Death: Awareness, Vision for Prevention and Education). This program helps Georgia's schools become recognized as heart-safe, which means they have implemented our comprehensive program to prevent sudden cardiac deaths. It includes teaching CPR, implementing automated external defibrillators (AEDs) and preparing coaches, school nurses and other staff to manage these emergencies. Since Project S.A.V.E. began in 2004, 24 adults and 15 students have been saved because their schools were prepared when they experienced sudden cardiac arrest. In 2012, 87 school nurses and other staff members were trained as American Heart Association CPR instructors. Additionally, 104 new schools joined Project S.A.V.E., bringing the total number of heart-safe schools to 942. choa.org/childrens-hospital-services/cardiac/services/project-save

Transition Back to the Classroom: Different services are offered at Children's to facilitate the transition of kids who have been patients at Children's back into the classroom. These services are organized by service line.

- The School Program is available for patients who miss school because of hospitalizations and clinic appointments. Certified hospital teachers serve as liaisons between patients and schools to coordinate instruction and educational support. The team educates parents on available services with their child's local schools and provides the latest medical updates and recommendations to schoolteachers. In 2012, the School Program served 2,194 patients, 720 of whom were taught

in one of our classrooms, clinics or at bedside, and 1,474 received additional education support.

- **School Care Plans for Epilepsy:** Kids with epilepsy receive a personalized school care plan to take back to their school. There are two epilepsy coordinators available to go to schools when invited and educate teachers and administration on epilepsy. In addition to in-person visits to schools, training materials are available online and through the nurse's manual to educate nurses and staff on proper care for epilepsy patients.
- **Asthma Care Plans:** Children's has a pilot program involving an asthma demonstration project for community physicians to standardize the asthma action plans so that they can be better implemented by patients and their families and carried out in the school setting. Children's is working with 20 practices and has plans to expand to hundreds of practices across the state.

Athletic Injury Prevention: Children's has contracts to provide approximately 20 athletic trainers in 20 high schools and 32 club sports for injury prevention around metro Atlanta. The goal is to add 10 schools in the next two years. In addition, quarterly sports medicine seminars are provided to coaches, school nurses and pediatricians in the community covering topics including exercise-induced asthma, heat illness and more. Children's sports medicine physicians serve as a resource in the area of concussion management in schools.

Nurse Navigator: Hughes Spalding has an alliance with the Sheltering Arms Early Learning Center through a grant that places a nurse navigator in the facility to address the needs of kids with chronic ailments (mainly asthma and sickle cell).

Community Resources

School nurses in the community are committed to improving the health of children and reducing absenteeism.

Georgia Association of School Nurses (GASN): The GASN was organized in 1991 to unite school nurses committed to providing quality healthcare services to school children. GASN remains dedicated to promoting excellence in school health through its continued education programs and advocacy.
gasn.org

Georgia Department of Education, School Nurse Exchange: The School Nurse Exchange provides a collection of resources for school nurses to keep abreast of current trends and best practices in the leadership and delivery of school-based health services. Their webpage serves as a vehicle for exchanging ideas and suggestions to support school nurse programs across Georgia. adoe.org/Curriculum-Instruction-and-Assessment/CTAE/Pages/School-Nurse; Georgia Howard, RN, MS, School Health Nurse Program, 404-657-8309

Community Health Need #7: Need for programs to coordinate transition of care for individuals with chronic health issues from adolescence to young adulthood

Description of Need

Based on the opinion of contributors to the Community Health Needs Assessment, there continues to be a need for programs to coordinate transition of care for individuals with chronic health issues from adolescence to young adulthood. Many children are nurtured very closely within the pediatric health delivery system and then are released into the adult health delivery system where they are “just another patient.” Kids who have transplants, heart surgery, cystic fibrosis, diabetes and cancer, for example, need to be followed as they transition to adult care. These programs need to provide continuity and quality of care in transitioning from pediatric specialists to adult specialty physicians.

Based on data from the National Survey of Children’s Health 2011/2012, 66.1 percent of children ages 12-17 with special healthcare needs in Georgia do not receive the services required to make an appropriate transition to adult healthcare, work and independence. Special healthcare needs include learning disabilities, ADD/ADHD, depression, anxiety, autism/Asperger syndrome/ASD, behavioral problems, developmental delay, intellectual disability, cerebral palsy, speech problems, Tourette syndrome, asthma, diabetes, epilepsy, hearing problems, vision problems, bone/joint/muscular problems and brain injury. ⁽¹⁾

Use of transition care services by children with special healthcare needs varies by insurance status. Privately insured children with special healthcare needs receive services necessary to make appropriate transitions to adult healthcare, work and independence 50.5 percent of the time compared to publically insured children who receive necessary services just 17.8 percent of the time.⁽¹⁾

(1) “Georgia Report from the National Survey of Children’s Health.” NSCH 2011/2012. Child and Adolescent Health Measurement Initiative, Data Resource Center for Child and Adolescent Health website. Retrieved [08/12/13] from childhealthdata.org.

Children’s Healthcare of Atlanta Ongoing Programs/Services

Children’s collaborates with Emory University and Grady Hospital to provide programs to coordinate the transition of care from adolescence to young adulthood for patients with cystic fibrosis, congenital heart disease, cancer and sickle cell disease. Beginning in fall 2013, Children’s began care transition coordination for spina bifida patients.

Cystic Fibrosis: The transition program for pediatric cystic fibrosis patients began in 2007. Journey to Independence is a five-stage program that begins at age 8 and ends at age 18. The program requires patients to complete various age-appropriate homework assignments and hands-on activities to advance through the program. There are a total of 25 activities throughout the program.

Congenital Heart Disease (CHD): At Children’s, teens with moderate to complex congenital heart disease work with their doctors and nurses to prepare them to transition to adult care. They are given a booklet about growing up with CHD, and pediatric cardiologists help them fill out an “Owner’s Manual” about their condition. The booklet outlines expectations for many life decisions teens will face, such as guidelines for insurance coverage, ability to start a family and physicians who should be a part of their adult care team. Many patients transition to the Emory Adult Congenital Heart Center.

Cancer: The Aflac Cancer and Blood Disorders Center of Children’s has developed a multidisciplinary team to address the needs of childhood cancer survivors. Cancer survivors each establish a survivor healthcare plan (a long-term, follow-up plan that includes medical summary of cancer diagnosis and treatment, individualized risk profile and personalized surveillance program) and have access to SurvivorLink (an information technology network that serves as a crucial tool for helping childhood cancer survivors in Georgia receive the recommended survivor care and, as a result, optimal health and quality of life). SurvivorLink includes a survivor healthcare plan, individualized risk profile, personal surveillance plan, educational materials, national guidelines for survivorship care and other information needed. SurvivorLink electronically facilitates communication and shares information among the survivor, survivor team, primary care physician and

subspecialists. Children's also supports Survivor Day, an annual, free patient education session to discuss resources to cover the cost of care, applying for Medicare, accessing insurance plans and more.

Sickle Cell: At Children's, patients with sickle cell participate in a transition clinic. As part of the transition program, teenagers are taken to the Grady sickle cell program for adults and introduced to adult providers. The transition to adult providers occurs by age 18. Children's also supports Sickle Cell Day, an annual, free patient education session to discuss resources to cover the cost of care, applying for Medicare, accessing insurance plans and more.

Transplant: Children's also offers specific adolescent transplant clinics for teenage liver, kidney and heart transplant patients to provide care specific to the needs of the adolescent transplant population. Patients in adolescent transplant clinics receive age-appropriate healthcare education, opportunities for independence (they are seen without their parents at most clinic visits), comprehensive, individualized care and a tour of Emory for patients preparing to transition to an adult facility.

Community Resources

There are several community resources addressing the transition from adolescence to young adulthood for youth with chronic health issues.

Chronic Kidney Disease: The National Kidney Foundation has developed a toolkit for to assist pediatric nephrology social workers in helping transition adolescents with chronic kidney disease to adult facilities. kidney.org/professionals/CNSW/toolkit.cfm (Note: to view the toolkit modules, one must enroll as a member of the website.)

Congenital Heart Disease: The American Heart Association has published "Best Practices in Managing Transition to Adulthood for Adolescents with Congenital Heart Disease: The Transition Process and Medical and Psychosocial Issues—A Scientific Statement from the American Heart Association" to assist healthcare providers in creating a formal transition process for youth with congenital heart disease. circ.ahajournals.org/content/123/13/1454.full

Cystic Fibrosis: The Cystic Fibrosis Foundation developed, in conjunction with John Hopkins Cystic Fibrosis Foundation Center, a webcast, "Partnering for Care: Transition to Adult Care," which identifies specific and concise goals for adolescents as they transition from pediatric to adult care. Goals are established for 12-14-year-olds, 16-18-year-olds, and 21-year-olds with the focus on each individual developing a

sense of personal responsibility for his own care and treatment. All patients and families have access to this webcast.

cff.org/LivingWithCF/ArchivedWebcasts/PartneringCare/

Diabetes: The National Diabetes Education Program (NDEP) is a program of the National Institutes of Health and the Centers for Disease Control and Prevention and provides a "Pediatric to Adults Diabetes Care Transition Checklist" designed to help healthcare providers, young adults and families discuss and plan the change from pediatric to adult healthcare. The young adult, family and healthcare provider can obtain online transition resources at the NDEP website.

yourdiabetesinfo.org/transitions

HIV-Infected Youth: The American Academy of Pediatrics has published an article for healthcare providers on transitioning HIV-infected youth from pediatric/adolescent healthcare providers to adult healthcare providers.

pediatrics.aappublications.org/content/early/2013/06/19/peds.2013-1073.abstract

Osteogenesis Imperfecta Foundation (OIF) provides information to parents, youth and healthcare providers on the transition from pediatric to adult care for teens with osteogenesis imperfecta, a genetic bone disorder characterized by fragile bones that break easily. oif.org/site/DocServer/Transition_from_Pediatric_to_Adult_Care.pdf

Sickle Cell Disease Association of America (SCDAA) provides resources to assist patients, family members, healthcare providers and medical social workers with the transition of patients with sickle cell disease from pediatric to adult care. sicklecelldisease.org/index.cfm?page=transition-from-adolescent-to-adult-care

Community Health Need #8: Need for programs for enhancing awareness of environmental causes of asthma, allergies, and respiratory issues

Description of Need

Many Atlanta area pediatricians interviewed as part of the Community Health Needs Assessment reported that between 20 and 35 percent of the kids seen in their practices have asthma, allergies and/or respiratory problems. Physicians and public health officials reported environmental issues including secondhand smoke, pollution and mold as major causes of respiratory problems within the community. In addition, several contributors reported that children are missing a lot of school and parents are missing work because of problems associated with asthma in children and adolescents within the community.

According to the Georgia Department of Public Health, an estimated 9 percent of children ages 0-17 in Georgia have asthma. Boys have a higher prevalence of asthma (14 percent) than girls (9 percent), and black children have a higher prevalence (14 percent) than white children (8 percent).⁽¹⁾

In Georgia, asthma is a top-10 cause for emergency room visits across children of all age groups.⁽²⁾

Children <1 year old _____ 6th leading cause

Children 1-4 years old _____ 3rd leading cause

Children 5-9 years old _____ 3rd leading cause

Children 10-14 years old _____ 4th leading cause

Children 15-17 years old _____ 9th leading cause

(1) Cheng V., Clarkson L., Lopez F., Chambers S. 2012 Georgia Asthma Surveillance Report. Georgia Department of Public Health, Health Protection, Epidemiology, Chronic Disease, Healthy Behaviors and Injury Epidemiology Section, April 2012

(2) Online Analytical Statistical Information System (OASIS), Community Health Needs Assessment Dashboard, Georgia Department of Public Health, Office of Health Indicators and Planning (OHIP). Retrieved 08/12/13 from oasis.state.ga.us/

Children's Healthcare of Atlanta Ongoing Programs/Services

Children's is committed to reducing the prevalence of asthma and to reducing the number of emergency room visits covered by asthma. Several programs at Children's work to make this happen.

Children's Asthma Demonstration Project: The project has developed and offers standardized tools to improve the asthma action plans of physicians so that they can provide better care

to their asthma patients and their families. Children's is involved with 20 private physician practices with plans to expand to hundreds of practices across the state. Part of the Asthma Demonstration Project is a plan to implement asthma pathway guidelines in physician offices.

Children's Asthma Center: The Center located at Hughes Spalding provides testing and treatments for asthma. Pediatricians at the center will go into the homes of patients to coordinate their care and assess the environmental conditions of the child's living environment. Pediatricians at the center also educate patients, community physicians and school staff on triggers and asthma management.

Asthma Care and Education (ACE) Program: Through this program, experts from Children's supply school and daycare personnel with the necessary resources, equipment and education to care for children with asthma. Between September 2009 and March 2012, Children's conducted 112 on-site asthma programs that reached 4,480 healthcare professionals. Over this period, Children's distributed 1,373 pieces of asthma equipment to children and schools enrolled in the program, educated 64 clinical providers through lunch education and conducted five educational ACE programs for 280 physicians, nurses and other healthcare professionals.

Community Resources

Several organizations in the community are committed to reducing the burden of childhood asthma.

American Lung Association in Georgia: The American Lung Association in Georgia is the lead organization in the state working to save lives by improving lung health and preventing lung disease. The association provides a wealth of resources related to respiratory health including programs for children with asthma including the Asthma 101 Program, Camp Breathe Easy and Open Airways for Schools. In addition, it is a leading advocate for creating asthma friendly environments.

lung.org/associations/states/georgia/; Contact: 770-734-5864

Georgia Asthma Control Program: The Georgia Asthma Control Program is part of a national initiative launched by the CDC, National Center for Environmental Health to reduce the burden of asthma and improve the health and quality of life for all persons affected by asthma through effective control

of the disease. Georgia Asthma Control Plan has developed a partnership with the Georgia Association of School Nurses that will lead efforts towards the adoption and implementation of the CDC's Asthma Friendly Schools Initiative throughout Georgia school systems. The core components of the program include: establishment of management and support systems for asthma friendly schools; providing appropriate school health and mental health services for students with asthma; providing asthma education and awareness programs for students and school staff; providing a healthy school environment to reduce asthma triggers; providing enjoyable physical education and activity opportunities for students with asthma; and coordinating school, family and community efforts to better manage asthma symptoms and reduce asthma-related school absences. The goal of this initiative is to reduce asthma-related hospitalizations, Emergency Department visits and days missed from school. **health.state.ga.us/programs/asthma**;
Francesca Lopez, MSPH, AE-C 404-651-7324

Not One More Life (NOML) is an asthma education program dedicated to teaching others about asthma. The program is designed to deliver knowledge needed to make informed decisions. NOML partners with communities of faith to provide asthma education. **notonemorelife.org/**

ZAP Asthma: ZAP Asthma is a 16-member public/private partnership created to reduce preventable morbidity and mortality from asthma for children living in Atlanta's Empowerment Zone. Utilizing an "action research/participatory research model," known asthma triggers in the home environment of study participants are identified and ameliorated, utilizing the skills of trained community health workers, who assist families in sustaining the environmental interventions. **zapasthma.org**; 404-658-6376

Community Health Need #9: Need for programs for enhancing access to dental health services in under-privileged neighborhoods

Description of Need

Contributors to the Community Health Needs Assessment report that many children in under-privileged communities have never seen a dentist, and that the recent economic downturn has forced many middle class parents to forego routine dental care for their kids. Furthermore, most dentists will not accept Medicaid, and as one pediatrician stated, "dental health is not on the radar of parents living paycheck to paycheck." In addition, immigrant and transient population have minimal access to preventive dental services.

Based on data from the National Survey of Children's Health 2011/2012, the percent of Georgia's children with excellent or very good oral health (74.1 percent) is comparable to the percent of children nationwide with excellent or very good oral health (71.3 percent). Additionally, 75.9 percent of children in Georgia received a dental health visit in the prior year.⁽¹⁾

Access to preventive dental health visits varies in Georgia by insurance type. In 2010/2011, 82 percent of children with private health insurance received one or more preventive health visits compared to 71.2 percent of children with public insurance and 52.8 percent of children with no insurance.⁽¹⁾

(1) "Georgia Report from the National Survey of Children's Health." NSCH 2011/2012. Child and Adolescent Health Measurement Initiative, Data Resource Center for Child and Adolescent Health website. Retrieved [08/12/13] from childhealthdata.org.

Children's Healthcare of Atlanta Ongoing Programs/Services

Children's extends comprehensive dental services to patients age 21 and younger with a primary diagnosis of craniofacial, genetic disorder (craniofacial only), hematology/oncology (including sickle cell), cardiac patients at Sibley Heart Center Cardiology, transplant patients (kidney, liver, pulmonary), neuroscience, select pulmonary conditions, facial cellulitis and trauma patients who have been admitted to Children's Healthcare of Atlanta hospitals or the Emergency Departments only. These services include preventive dental care, orthodontics, pit and fissure sealants, dental health education, restorative and surgical procedures, sedation and general anesthesia services.

In 2012, Children's had more than 5,000 dental patient appointments and more than 2,900 orthodontic patient appointments.

Community Resources

In addition to private practice dentists, there are several clinics in the community offering free, reduced rate or sliding scale dental services.

County Public Health Clinics: Every county in Georgia has a board of public health. One of the services provided by many of the boards of public health is dental clinics. Dental clinics charge fees on a sliding scale and accept Medicaid.

- **Cherokee County Health Department:** Progressive public health efforts at the Health Department's state-of-the-art dental clinic provide basic dental care for children. Services are targeted to residents of Cherokee County who have limited or no access to dental care. Preventive and clinical services for children include: routine cleanings, exams, X-rays, fillings and extractions, sealants, space maintainers, baby tooth root canal, dental health programs for school and community groups, dental screening and referral services and emergency care. Dental services for children are offered at the Canton clinic. nghd.org/CherokeeHealth/; 770-345-7371
- **Clayton County Board of Health:** Child Health Dental Services at the Clayton County Board of Health offers quality, low-cost dental health care for all children ages 1-18. Our services include cleanings, fluoride treatments, sealants, oral hygiene, fillings, stainless steel crowns, space maintainers, oral exams, X-rays, extractions and dental pulp treatment. Services are provided at a discounted fee or self-pay sliding scale. Proof of county residency and income information must be presented at each clinic visit. We accept Medicaid, Amerigroup, Peach State, WellCare, Cigna Dental and United Concordia Dental. The CCBOH Dental Clinic operates Monday through Thursday, from 8:30 a.m. to 4:30 p.m., with the exception of holidays. 678-610-7421 claytoncountypublichealth.org/dental
- **Cobb & Douglas Public Health:** The Marietta Dental Clinic promotes excellent oral health by providing professional dental care to the children and adults in Cobb and Douglas counties, as well as the surrounding counties. The Marietta Dental Clinic services include: exams, cleaning, fillings, X-rays, sealants and tooth extractions. cobbanddouglaspublichealth.org; 770-514-2372

- **DeKalb County Board of Health:** The Dental Health Program provides education and clinical services throughout DeKalb County. The goal is to promote good oral health. Clinical services are available to children and teens ages 3-20. The Board of Health's dental fees are similar to those in private practice. However, fees may be reduced based on household income. Payment is expected at the time of service. Medicaid and PeachCare for Kids clients are welcome. The dental primary prevention program offers education, screenings and dental sealants at schools and other community sites.

dekalbhealth.net/hs/dental-health;

- T.O. Vinson Health Center Dental Clinic: 404-508-7890
- Clifton Springs Health Center Dental Clinic: 404-244-4410
- East DeKalb Health Center Dental Clinic: 770-484-2623
- Kirkwood Health Center Dental Clinic: 404-370-4640
- North DeKalb Health Center Dental Clinic: 678-475-4341

- **Forsyth County Health Department:** To enable children and their families to establish and maintain healthy teeth and gums, the Forsyth County Health Department offers comprehensive dental services and a Dental Home for children under 21 years of age. They accept Medicaid and PeachCare for Kids and have a fee-for-service program for uninsured patients. Services provided include: emergency evaluations, initial and routine dental exams, cleanings, X-rays, fluoride treatments, sealants, fillings, extractions, referrals for other dental specialties including orthodontics, and oral surgery, and pediatric sedation dentistry. They also provide dental education for patients and parents or guardians to encourage long-term success in maintaining oral health. **phdistrict2.org/forsyth%20county.htm**; Norma Roush, 770-781-6900, Ext. 29

- **Fulton County Department of Health and Wellness** offers dental services to eligible children and adolescents ages 1 through 12th grade who are Fulton County residents. These services include, but are not limited to: cleanings once every six months, complete examinations ages 3 and up, well-baby exams under 3 years of age, X-rays, fillings, sealants ages 3-17, first and second molars, extractions, and limited stainless steel crowns, space maintainers, emergency dental care. They accept all forms of Medicaid and PeachCare for Kids. For children who do not have Medicaid or private insurance, county of residence, family size and total family income will be used to determine eligibility. Eligible clients will pay a registration fee to receive services for a six-month period.

fultoncountyga.gov/dhw-dental-health; 404-613-1471

- **Gwinnett, Newton and Rockdale counties:** Gwinnett, Newton and Rockdale Counties have two dental programs for children. Dental clinics are located in each public health center, providing care for children including: exams, cleanings, X-rays, fluoride treatments and fillings. The School Dental Prevention Program for Children includes: dentists and hygienists who make visits to schools and provide screenings, cleanings, fluoride treatments, and referrals as needed, dental health education program for schools, plaque awareness presentations covering bacterial plaque, oral disease prevention, relationships to systemic health, proper tooth brushing and flossing skills, tooth types, anatomy and function, healthy snacking, and the consequences of tobacco usage, awareness presentations covering tobacco as a "poisonous" plant; the scary ingredients in nicotine products; false-advertising for cigarettes, snuff, and other tobacco products; smoking versus chewing; oral and system effects; and how to just say, "No Way!"

gnrhealth.com/services/clinical-services/dental-care

- Buford Center: 770-614-2401
- Lawrenceville Center: 770-339-4283
- Norcross Center: 770-638-5700
- Lilburn WIC: 678-924-1546
- Newton Center: 770-786-9086
- Rockdale Center: 770-785-4345

Dental Hygiene Schools: Schools of dental hygiene offer dental work to patients performed by students as part of their training at highly reduced cost. **gadental.org/docs/gdaclinicsjan2013.pdf**; 404-636-7553

Georgia Dental Association (GDA): Give Kids a Smile Day is offered on the first Friday in February each year with GDA dentists providing free care to underprivileged children around the state. In addition, Georgia Mission of Mercy is a two-day event each year that provides free direct patient care to anyone (about 2,200 patients served annually). The GDA also provides a list of free and reduced-cost dental clinics on its website. **gadental.org/docs/gdaclinicsjan2013.pdf**; 404-636-7553

Good Samaritan Health Center: Good Samaritan Health Center is a non-profit healthcare center providing a comprehensive range of medical, dental, prescription and select social services for patients without health insurance or the means to afford care in Atlanta, Cobb and Gwinnett counties. Prospective patients must be uninsured and are charged on a sliding scale.

- Atlanta: **goodsamatlanta.org**; 404-523-6571
- Cobb: **goodsamcobb.org**; 770-419-3120
- Gwinnett: **goodsamgwinnett.org**; 678-280-6630

St. Josephs Mercy Care Clinic: Sponsored by the Sisters of Mercy and Saint Joseph's Health System, Mercy Care Services was created in 1985 by volunteer nurses and physicians and grew from modest beginnings into a "medical home" that provides an efficient, integrated system of primary medical care for adults and children, dental healthcare, behavioral health, education and social services reaching thousands of persons in need throughout Atlanta each year. They operate five fixed-site clinics: Mercy Clinic Downtown, Mercy Clinic North, Mercy Clinic at St. Luke's, Mercy Clinic at The Gateway and Mercy Clinic at City of Refuge. Six other clinics are conducted in community partner facilities or onboard our mobile health coach.

Their clinic services are available to the uninsured, underinsured, persons of low income, the homeless and HIV-positive individuals on a sliding-fee scale according to a patient's ability to pay. They offer resource referral, supportive services, case management and mental health assessment. They also provide health education programs on a variety of topics including prenatal care, parenting and child education to Atlanta's Hispanic community. mercycareservices.org; Mercy Clinic Downtown, 678-843-8600; Mercy Clinic North 678-843-8700; Mercy Clinic at City of Refuge, 678-843-8790

Community Health Need #10: Need for programs to address the health needs of immigrant and transient populations (language barriers, immunizations etc.)

Description of Need

Contributors to the Community Health Needs Assessment report that many children in immigrant families have never seen a pediatrician for routine well-baby visits, frequently have not completed childhood vaccinations by the time their kids enroll in school, use the emergency room for basic primary care services, experience language barriers with community pediatricians that lead to poor compliance, and often are dually illiterate in both their native language and English, which results in both poor compliance and difficulty in ensuring follow-up visits. Furthermore, many immigrant parents have no idea how to navigate the health delivery system for services.

Children's Healthcare of Atlanta Programs/Services

Children's serves a diverse patient population and provides services to facilitate access to healthcare for immigrant and transient populations.

The Primary Care Center of Chamblee: From routine health check-ups, sick visits for children, immunizations for school to colds and flu, the primary care doctors at the Children's Primary Care Center of Chamblee provide access to continuity and coordination of quality pediatric health services for infants, children and adolescents who rely on Medicaid.

- The staff at the Primary Care Center of Chamblee is fully bilingual.

- The Primary Care Center of Chamblee has extended hours Monday through Thursday until 7 p.m. and on Saturday as a walk-in-clinic to accommodate the work and transportation needs of the large immigrant community near Buford Highway in Atlanta.

Interpretative Services: Children's provides interpretative services at every facility. Children's supplies teaching sheets in both English and Spanish on patient care as well as medication instructions. In addition, Children's provides free education tapes on asthma training in both English and Spanish.

Marcus Autism Center is studying cultural and language differences in autism outcomes and diagnoses to help explain and reduce the lag behind diagnosing autism in minority communities compared to Caucasian communities. In addition, the Marcus Autism Center is building a cohort of physicians and providers who are bilingual in English and another language.

Cultural Differences: Children's has cultural resources available to its staff with information on 18 different cultures and the clinical implications associated with these cultures. Through the U.S. Department of Health and Human Services, there are two training courses available to staff to increase cultural awareness concerning the health needs of immigrant populations as well as providing instruction to increase immigrants' health literacy.

Community Resources

While there are many community clinics, most require identification (driver's license, passport, etc.) to receive care, and many immigrants lack these documents. Free or reduced cost (sliding scale) medical clinics offer services to those who have no insurance.

National Association of Free and Charitable Clinics (NAFC):

The NAFC is the only nonprofit 501(c) (3) organization whose mission is solely focused on the issues and needs of the more than 1,200 Free and Charitable Clinics and the people they serve in the United States. Founded in 2001 and headquartered in Washington, D.C., the NAFC is an effective advocate for the issues and concerns of Free and Charitable Clinics, their volunteer workforce of doctors, dentists, nurses, therapists, pharmacists, nurse practitioners, technicians and other healthcare professionals, and the patients served by Free and Charitable Clinics in communities throughout the nation.

Free and Charitable Clinics within 25 miles of Atlanta

Source: NAFCC nafcclinics.org

- Center for Black Women – Atlanta, 404-688-9202
- Grant Park Family Health Center – Atlanta, 404-627-4259
- The Good Samaritan Health Center – Atlanta, 404-523-6571
- Benn Massell Dental Clinic – Atlanta, 404-881-1858
- Healing Community Center – Atlanta, 404-564-7749
healingourcommunities.org
- Physicians' Care Clinic – Decatur, 404-501-7960
physicianscareclinic.org
- Georgia Free Clinics Network – Decatur, 678-904-3117
- Good Shepherd Clinic – Morrow, 770-968-1310
godshelp.org
- Riley Medical Clinic c/o First Baptist Church of Jonesboro – Jonesboro, 770-471-0441
- South DeKalb Center for Health Living – Lithonia 770-573-4403
- Hands of Hope Clinic – Stockbridge, 770-507-1344
handsofhopeclinic.org
- Good Samaritan Health Center of Gwinnett – Lawrenceville, 678-280-6630
- Mercy Heart Clinic – Conyers, 770-483-8700
- Gwinnett Community Clinic – Snellville, 770-985-1199

Vaccines for Children (VFC): The VFC Program is intended to help raise childhood immunization levels in the United States, especially for infants and young children. This effort requires wide participation and collaboration of private healthcare providers to reach children who might not otherwise receive vaccinations because of financial barriers or who might receive vaccines late because they would be referred to another setting for free vaccines. This federally funded program supplies vaccines free of charge to participating providers. The vaccine may then be made available to children up to 19 years of age who are:

- Medicaid enrolled
- Uninsured (child has no health insurance coverage)
- Underinsured (child has health insurance but immunizations are not a covered benefit)
- American Indian or Alaska Native

health.state.ga.us/programs/immunization/vfc/

St. Joseph's Mercy Care Clinic: Sponsored by the Sisters of Mercy and Saint Joseph's Health System, Mercy Care Services was created in 1985 by volunteer nurses and physicians and grew from modest beginnings into a "medical home" that provides an efficient, integrated system of primary medical care for adults and children, dental healthcare, behavioral health, education and social services reaching thousands of persons in need throughout Atlanta each year. They operate five fixed-site clinics: Mercy Clinic Downtown, Mercy Clinic North, Mercy Clinic at St. Luke's, Mercy Clinic at The Gateway and Mercy Clinic at City of Refuge. Six other clinics are conducted in community partner facilities or onboard our mobile health coach.

Their clinic services are available to the uninsured, underinsured, persons of low income, the homeless and HIV-positive individuals on a sliding-fee scale according to a patient's ability to pay. They offer resource referral, supportive services, case management and mental health assessment. They also provide health education programs on a variety of topics including prenatal care, parenting and child education to Atlanta's Hispanic community. mercycareservices.org
Mercy Clinic Downtown, 678-843-8600
Mercy Clinic North, 678-843-8700
Mercy Clinic at City of Refuge, 678-843-8790

Egleston

2014-2016 Community Health Needs Implementation Plan

All 10 of the health needs identified in the Community Health Needs Assessment are actively being addressed by programs and services at Children's. In addition to leveraging these existing resources, this Egleston implementation plan places special emphasis on three of the top four needs:

- **Community Health Need #1:** Need for ensuring access to continuity and coordination of quality pediatric health services through development of "medical homes"
- **Community Health Need #2:** Need for programs to reduce the prevalence of overweight and obesity in children and adolescents within the community
- **Community Health Need #4:** Need for ensuring access to affordable pediatric psychiatry, neurology, pulmonary medicine, and rheumatology services for infants, children and adolescents

Community Health Need #1: Need for ensuring access to continuity and coordination of quality pediatric health services through development of "medical homes"

In light of the community need for improved care coordination, over the next several years we will work to engage the local primary care community and facilitate the adoption of the medical home model for pediatricians within our network. Through our efforts, the number of primary care physicians practicing in a medical home in Children's primary and secondary service areas will increase over time.

In addition to engaging and supporting the primary care community in adopting the medical homes model, we will continue to support existing integrated delivery networks within the hospital and improve access to electronic medical records to provide continuity and coordination of care for patients. We will continue to provide access to continuity and coordination of quality pediatric services with particular emphasis on children and youth with special healthcare needs.

Resources have been earmarked for this particular community health need in Children's Strategic Plan.

Community Health Need #2: Need for programs to reduce the prevalence of overweight and obesity in children and adolescents within the community

We will continue our commitment to leading Georgia in the effort to reduce the prevalence of childhood overweight and obesity and will continue to take a leading role within Georgia in developing and supporting initiatives to reduce the prevalence of overweight and obesity in children and adolescents. Through clinical initiatives and community outreach, we are committed to investing in and expanding evidence-based programs and services to reach more children in Georgia and ultimately help change the obesity trends in the state.

Strong4Life will continue to deliver marketing campaigns that inspire change and offer community-based programs that assist healthcare providers in the prevention, treatment and management of pediatric weight issues; deliver innovative programs in

schools and early care centers; and support community initiatives that encourage sustainable behavior change. We will provide clinical treatment and lifestyle intervention through the Health4Life clinic and Camp Strong4Life. With a robust evaluation team established, we will conduct research around the prevention and treatment of childhood obesity and disseminate outcomes nationally.

Specific to the clinical setting, we will continue to provide preventive cardiology programs to assist cardiac patients who are overweight and obese through the Sibley Heart Center Cardiology.

Resources have been earmarked for this particular community health need in Children's Strategic Plan.

Community Health Need #3:
Need to enhance access to behavioral and developmental health services for children and adolescents

We will continue to provide inpatient and Emergency Department psychiatric consultations and select outpatient behavioral and developmental health services.

We will continue to offer comprehensive services and evidence-based treatments for children with autism through the Marcus Autism Center.

Community Health Need #4:
Need for ensuring access to affordable pediatric psychiatry, neurology, pulmonary medicine, and rheumatology services for infants, children and adolescents

As part of Children's, we support more than 60 pediatric specialties and programs, including specialists in psychiatry, neurology, pulmonary medicine and rheumatology. We are committed to maintaining a physician manpower plan and to actively training as many providers as possible in specialties that demonstrate need.

We will expand the number of pediatric neurology, pulmonology and rheumatology providers over the next several years and will continue to provide adequate availability of all specialists.

In addition, in collaboration with the Georgia Partnership for TeleHealth, we will continue to provide access to pediatric specialists throughout Georgia with the Telemedicine Program.

Resources have been earmarked for this particular community health need in Children's Strategic Plan.

Community Health Need #5:
Need for programs to enhance access to health services that address adolescent health issues including teen sexuality, HPV vaccination, sexually transmitted diseases, eating disorders, adolescent gynecology, teen pregnancy prevention, and hormonal modulation

In September 2013, Children's opened its first adolescent health clinic. The clinic is located at Hughes Spalding and is open several days each week. Adolescent patients at Egleston requiring specific adolescent health services can be referred to the clinic. Because of limited resources, we do not plan to open an Egleston clinic at this time.

Community Health Need #6: Need for partnerships with schools to coordinate approaches for addressing primary and chronic health issues to reduce absenteeism

We work with multiple schools and school districts to coordinate approaches for addressing primary and chronic health issues to reduce absenteeism.

We will continue to provide programs and services to coordinate approaches for addressing primary and chronic health issues to reduce absenteeism, including:

- School Nurse Manuals available for free online or for purchase in hard copy
- School Health Consultant Program with three to four School Nurse Updates each year
- Healthy Halls School Wellness Program in collaboration with Kohl's
- Project S.A.V.E. (Sudden Cardiac Death: Awareness, Vision for Prevention and Education)
- Transition Back to the Classroom (School Program, School Care Plans, Asthma Care Plans)
- Athletic Injury Prevention Program

Community Health Need #7: Need for programs to coordinate transition of care for individuals with chronic health issues from adolescence to young adulthood

We will continue to collaborate with Emory University and Grady Hospital to provide programs and services to coordinate the transition of care from adolescence to young adulthood for patients with:

- Cystic fibrosis
- Congenital heart disease
- Cancer
- Sickle cell
- Transplants (liver, kidney, heart)
- Spina bifida

Community Health Need #8: Need for programs for enhancing awareness of environmental causes of asthma, allergies, and respiratory issues.

We will continue to work on enhancing awareness of environmental causes of asthma, allergies and respiratory issues through better education of patients, caregivers, and school staff of asthma triggers and management. We will continue to offer standardized tools to improve the asthma action plans of physicians so they can better provide care to their asthma patients and their families.

We will continue to promote the Asthma Demonstration Project as a plan to implement asthma pathway guidelines in physician offices.

Community Health Need #9: Need for programs for enhancing access to dental health services in under-privileged neighborhoods

We will continue to extend comprehensive dental services to patients age 21 and younger with craniofacial disorders or other special medical needs. These services include preventive dental care, orthodontics, pit and fissure sealants, dental health education, restorative and surgical procedures, sedation and general anesthesia services.

Because of limited resources and an abundance of community resources for dental health services, we do not plan to provide routine dental services for healthy children at this time.

Community Health Need #10: Need for programs to address the health needs of immigrant and transient populations (language barriers, immunizations, etc.)

As part of Children's, we will continue to provide programs and services to improve the quality of healthcare provided to immigrant and transient populations in the community, including:

- Interpretative services as needed within the hospital
- English and Spanish teaching sheets on patient care and medication
- Website translations into Spanish, when feasible
- Cultural competency training for staff including information on 18 different cultures

Scottish Rite

2014-2016 Community Health Needs Implementation Plan

All 10 of the health needs identified in the Community Health Needs Assessment are actively being addressed by current programs and services at Children's. In addition to leveraging these existing resources, this Scottish Rite implementation plan places special emphasis on three of the top four needs:

- **Community Health Need #1:** Need for ensuring access to continuity and coordination of quality pediatric health services through development of "medical homes"
- **Community Health Need #2:** Need for programs to reduce the prevalence of overweight and obesity in children and adolescents within the community
- **Community Health Need #4:** Need for ensuring access to affordable pediatric psychiatry, neurology, pulmonary medicine, and rheumatology services for infants, children and adolescents

Community Health Need #1: Need for ensuring access to continuity and coordination of quality pediatric health services through development of "medical homes"

In light of the community need for improved care coordination, over the next several years we will work to engage the local primary care community and facilitate the adoption of the medical home model for pediatricians within our network. Through our efforts, the number of primary care physicians practicing in a medical home in our primary and secondary service areas will increase over time.

In addition to engaging and supporting the primary care community in adopting the medical homes model, we will continue to support existing integrated delivery networks within the hospital and at the Children's Primary Care Center of Chamblee and improve access to electronic medical records to provide continuity and coordination of care for patients. We will continue to provide access to continuity and coordination of quality pediatric services with particular emphasis on children and youth with special healthcare needs.

Resources have been earmarked for this particular community health need in the Children's Strategic Plan.

Community Health Need #2: Need for programs to reduce the prevalence of overweight and obesity in children and adolescents within the community

We will continue our commitment to leading Georgia in the effort to reduce the prevalence of childhood overweight and obesity and will continue to take a leading role within Georgia in developing and supporting initiatives to reduce the prevalence of overweight and obesity in children and adolescents. Through clinic initiatives and community outreach, we are committed to investing in and expanding evidence-based programs and services to reach more children in Georgia and ultimately help change the obesity trends in the state.

Strong4Life will continue to deliver marketing campaigns that inspire change and offer community based programs that assist healthcare providers in the prevention, treatment and management of pediatric weight issues; deliver innovative programs in schools and early care centers; and support community initiatives that encourage sustainable behavior change. Additionally, we will

provide clinical treatment and lifestyle intervention through the Health4Life clinic and Camp Strong4Life. With a robust evaluation team established, we will conduct research around the prevention and treatment of childhood obesity and disseminate outcomes nationally.

We will continue to support the Health4Life Clinic and the obesity prevention efforts at the Primary Care Center of Chamblee.

Resources have been earmarked for this particular community health need in the Children's Strategic Plan.

Community Health Need #3:
Need to enhance access to behavioral and developmental health services for children and adolescents

We will continue to offer comprehensive services and evidence-based treatments for children with autism through the Marcus Autism Center. We will continue to provide inpatient and Emergency Department psychiatric consultations and select outpatient behavioral and developmental health services.

Community Health Need #4:
Need for ensuring access to affordable pediatric psychiatry, neurology, pulmonary medicine, and rheumatology services for infants, children and adolescents

We support more than 60 pediatric specialties and programs, including specialists in psychiatry, neurology, pulmonary medicine and rheumatology. We are committed to maintaining a physician manpower plan and to actively training as many providers as possible in specialties that demonstrate need.

We will expand the number of pediatric neurology, pulmonology and rheumatology providers over the next several years.

In addition, in collaboration with the Georgia Partnership for TeleHealth, we will continue to provide access to pediatric specialists throughout Georgia with the Telemedicine Program.

Resources have been earmarked for this particular community health need in the Children's Strategic Plan.

Community Health Need #5:
Need for programs to enhance access to health services that address adolescent health issues including teen sexuality, HPV vaccination, sexually transmitted diseases, eating disorders, adolescent gynecology, teen pregnancy prevention, and hormonal modulation

In September 2013, Children's opened its first adolescent health clinic. The clinic is located at Hughes Spalding and is open several days each week. Adolescent patients at Scottish Rite requiring specific adolescent health services can be referred to the clinic. Because of limited resources, we do not plan to open a Scottish Rite clinic at this time.

Community Health Need #6: Need for partnerships with schools to coordinate approaches for addressing primary and chronic health issues to reduce absenteeism

We will work with multiple schools and school districts to coordinate approaches for addressing primary and chronic health issues to reduce absenteeism.

We will continue to provide programs and services to coordinate approaches for addressing primary and chronic health issues to reduce absenteeism, including:

- School Nurse Manuals available for free online or for purchase in hard copy
- School Health Consultant Program with three to four School Nurse Updates each year
- Healthy Halls School Wellness Program in collaboration with Kohl's
- Project S.A.V.E. (Sudden Cardiac Death: Awareness, Vision for Prevention and Education)
- Transition Back to the Classroom (School Program, School Care Plans, Asthma Care Plans)
- Athletic Injury Prevention Program

Community Health Need #7: Need for programs to coordinate transition of care for individuals with chronic health issues from adolescence to young adulthood

We will continue to collaborate with Emory University and Grady Hospital to provide programs and services to coordinate the transition of care from adolescence to young adulthood for patients with:

- Cystic fibrosis
- Congenital heart disease
- Cancer
- Sickle cell
- Transplants (liver, kidney, heart)
- Spina bifida

Community Health Need #8: Need for programs for enhancing awareness of environmental causes of asthma, allergies, and respiratory issues

We will continue to work on enhancing awareness of environmental causes of asthma, allergies and respiratory issues through better education of patients, caregivers, and school staff of asthma triggers and management. We will continue to offer standardized tools to improve the asthma action plans of physicians so they can better provide care to their asthma patients and their families.

We will continue to promote the Asthma Demonstration Project as a plan to implement asthma pathway guidelines in physician offices.

Community Health Need #9: Need for programs for enhancing access to dental health services in under-privileged neighborhood

We will continue to extend comprehensive dental services to patients age 21 and younger with craniofacial disorders or other special medical needs. These services include preventive dental care, orthodontics, pit and fissure sealants, dental health education, restorative and surgical procedures, sedation and general anesthesia services.

Because of limited resources and an abundance of community resources for dental health services, we do not plan to provide routine dental services for healthy children at this time.

Community Health Need #10: Need for programs to address the health needs of immigrant and transient populations (language barriers, immunizations, etc)

As part of Children's, we will continue to provide programs and services to improve the quality of healthcare provided to immigrant and transient populations in the community, including:

- Interpretative services as needed within the hospital
- English and Spanish teaching sheets on patient care and medication
- Website translations into Spanish, when feasible
- Cultural competency training for staff including information on 18 different cultures

We will continue to operate the Primary Care Center of Chamblee which, because of its location on Buford Highway in Atlanta, primarily serves an immigrant community. The staff is bilingual in English and Spanish. In addition, the Primary Care Center will continue to offer extended hours Monday through Thursday until 7 p.m., and on Saturday as a walk-in clinic to accommodate the work and transportation needs of the large immigrant community near Buford Highway.

Appendix

Additional Resources Available to Respond to Identified Pediatric Community Health Needs

Advocacy for Children's Community Health Needs

Annie E. Casey Foundation—Atlanta Civic Site: The Annie E. Casey Foundation is a private charitable organization dedicated to helping build better futures for disadvantaged children in the United States. KIDS COUNT is a national and state-by-state effort to track the well-being of children in the United States using data and policy analysis. The Atlanta Civic Site incorporates multiple evidence-based programs for vulnerable families with young children. These programs seek to ensure that children are healthy, thriving socially and emotionally, and developing on track to achieve academic success by the third grade. We also help their families become their child's best advocate. aecf.org; Susan Bertonaschi, Director of Health Promotion, 404-582-9115

Boys & Girls Club of Metro Atlanta: For nearly 75 years, Boys & Girls Clubs of Metro Atlanta (BGCMA) has been in the forefront of youth development, working with young people from disadvantaged economic, social and family circumstances. BGCMA enriches the lives of girls and boys that other youth agencies fail to reach. BGCMA is dedicated to ensuring that our community's young people, who are most in need of our help, have greater access to quality programs and services that help them succeed academically, live healthy lifestyles and become leaders. bgcma.org; 404-527-7100

Georgia Chapter—American Academy of Pediatrics (GA-AAP): Advocacy for infants, children and adolescents are key goals of the Georgia Chapter. Legislative advocacy occurs at the State Legislative level in the Georgia General Assembly. PedPAC, our political action committee, supports legislators who have been friends to children and to pediatrics in the General Assembly. Advocacy at the federal level—with federal administrators and with the U.S. Congress—is carried out by the American Academy of Pediatrics Washington, D.C. office. GA-AAP also advocates to the state Medicaid and PeachCare program on behalf of children and our members and to support the advancement of the concept of the medical home. gaaap.com

Georgia Family Connection Partnership (GaFCP): GaFCP is a nonprofit organization created and funded by the state and private sector to focus on improving conditions for children and families. As an intermediary we connect partners at the local and state levels to each other for peer learning, resource sharing and replicating best practices. gafcp.org

Voices for Georgia's Children: Established in 2003, Voices for Georgia's Children is a nonprofit child policy and advocacy organization that envisions a Georgia where children are safe, healthy, educated, employable, and connected to their family and community. Its mission is to be a powerful, unifying voice for a public agenda that ensures the well-being of all of Georgia's children. georgiavoices.org

YMCA of Metro Atlanta: With a focus on developing the potential of kids, improving individual health and well-being, and giving back and supporting our neighbors, your membership will bring about meaningful change not just within yourself, but in your community too. Parents find a safe, positive environment for children to learn good values, social skills and behaviors. Families come together to have fun and spend quality time with each other. Children and teens play, learn who they are and what they can achieve, and are accepted. Adults connect with friends, pursue interests and learn how to live healthier. Communities thrive because neighbors support each other and give back. We all build relationships that further our sense of belonging and purpose. mcaatlanta.org

Financial Assistance

PeachCare for Kids®: The PeachCare program is sponsored by the Georgia Department of Community Health and provides comprehensive healthcare to children through the age of 18 who do not qualify for Medicaid and live in households with incomes at or below 235 percent of the federal poverty level. Health benefits include primary, preventive, specialist, dental care and vision care. The program covers hospitalization, emergency room services, prescription medications and mental healthcare. Each child in the program has a Georgia Families Care Management Organization who is responsible for coordinating the child's care. peachcare.org; 404-463-8368

Right from the Start Medicaid (RSM): The RSM program provides Medicaid coverage for eligible children under the age of 19, pregnant women and women who have breast or cervical cancer including precancerous conditions of the breast and cervix. RSM Outreach Project works closely with the PeachCare for Kids Program for those who are not eligible for Medicaid.

dfcs.dhrs.georgia.gov/right-start-medicaid-program;
800-809-7276

Temporary Assistance for Needy Families (TANF): The TANF program, often referred to as welfare, is a monthly cash assistance program for low-income families with children under the age of 18. Cooperation with the Division of Child Support Services is a requirement for receiving TANF benefits. In order to be determined eligible for TANF benefits, a child under the age of 18 must reside in the home and must be deprived of the care of at least one parent for a variety of reasons including: continued absence from home, death of the parent, physical or mental incapacity, or if one parent has a recent connection to the work force and both parents are in the home.

dfcs.dhrs.georgia.gov/how-apply-tanf

Legal Assistance

Health Law Partnership (HeLP): HeLP is interdisciplinary community collaboration among Children's, Georgia State University College of Law, and the Atlanta Legal Aid Society to improve the health and well-being of low-income children and their families by addressing the multiple determinants affecting children's health. One determinant affecting a child's health is his housing environment. This is of particular concern for children with asthma. Housing is one type of case HeLP takes on behalf of the Children's patients and families. A physician champion from Children's devotes part of his time to HeLP. HeLP has 10 years of experience with low-income children who are or have been patients at Children's and their families. In 2012, HeLP handled 673 cases for 545 unique clients. Most of the children referred to HeLP are chronically ill or permanently disabled. **healthlawpartnership.org**; 404-705-0000

Main Locations

Egleston hospital

1405 Clifton Road NE

Atlanta, GA 30322

404-785-6000

Scottish Rite hospital

1001 Johnson Ferry Road NE

Atlanta, GA 30342

404-785-5252

Hughes Spalding hospital

35 Jesse Hill Jr. Drive SE

Atlanta, GA 30303

404-785-9500

Children's Office Park

Administration

1600 Tullie Circle NE

Atlanta, GA 30329



Children's Healthcare of Atlanta is ranked among the nation's **top pediatric hospitals** in the *U.S. News & World Report* 2013-2014 edition of "Best Children's Hospitals." Recognized as one of the most comprehensive listings of its kind, the report compiles data from 179 pediatric centers and the opinions of 150 pediatric specialists to name the best of the best in 10 specialties. The rankings are designed to serve as a tool for parents and families looking for the best and most comprehensive care for their child.

For more information, please visit choa.org



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Additional Demographic Data

Children’s Primary and Secondary Service Area Community

In 2012, 61 percent of Children’s Healthcare of Atlanta’s admissions, 84 percent of Emergency Department visits and 78 percent of outpatient visits came from eight counties around metro Atlanta. Based on the residence of patients treated, Children’s defines its primary service area community as the eight counties around metro Atlanta: Cherokee, Clayton, Cobb, DeKalb, Forsyth, Fulton, Gwinnett and Henry.

The Children’s combined primary and secondary service area community includes 18 counties in the greater Atlanta region, which accounted for 78 percent of admissions, 94 percent of Emergency Department visits and 90 percent of outpatient visits during this same period.

An additional 20 percent of admissions came from the rest of Georgia, and just over 2 percent of admissions came from out of state.

Children’s Healthcare of Atlanta 2012 Inpatient Admissions and Outpatients (All Ages)

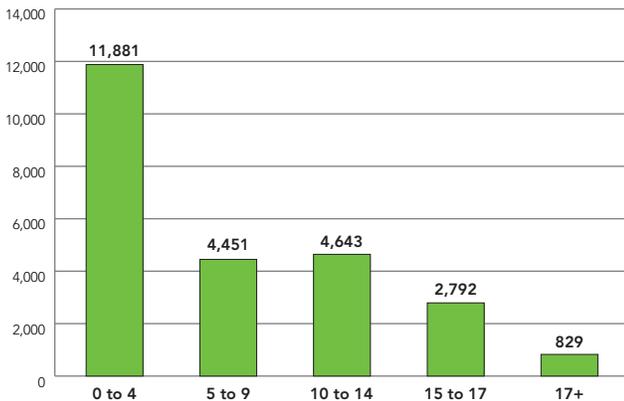
Community	Description	Hospital Admissions	% of Admissions	Emergency Visits	% of Emergency Visits	Outpatients	% of Outpatients Visits
Primary Service Area	8 Counties Metro Atlanta	15,014	61.0%	129,572	84.2%	353,245	78.4%
Primary & Secondary Service Area	18 Counties of Greater Atlanta	19,089	77.6%	144,905	94.1%	404,248	89.7%
State	All of Georgia	24,062	97.8%	151,984	98.7%	444,789	98.7%
Out of State	Non-Georgia Residents	534	2.2%	1,952	1.3%	5,955	1.3%
	Total	24,596	100.0%	153,936	100.0%	450,744	100.0%

Sources: Children’s Healthcare of Atlanta (includes Egleston and Scottish Rite hospitals)

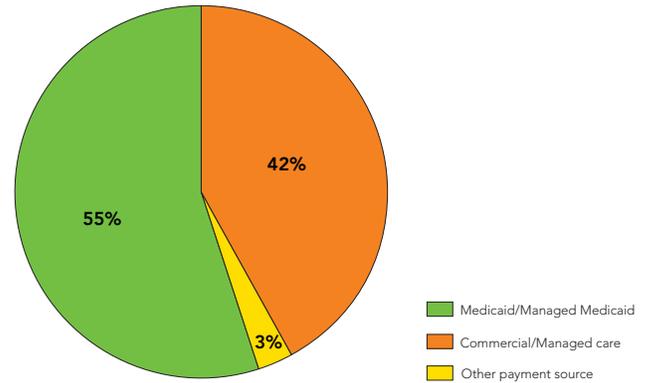
Children's Healthcare of Atlanta Patient Demographics

In 2012, Children's admitted 24,596 patients with 54 percent of patients admitted to Scottish Rite and 46 percent of patients admitted to Egleston. Infants and pre-school children accounted for 48 percent of each facility's admissions. Overall, 55 percent of patients admitted to the hospitals were on Medicaid. Egleston had 62 percent Medicaid admissions while Scottish Rite had 49 percent Medicaid admissions.

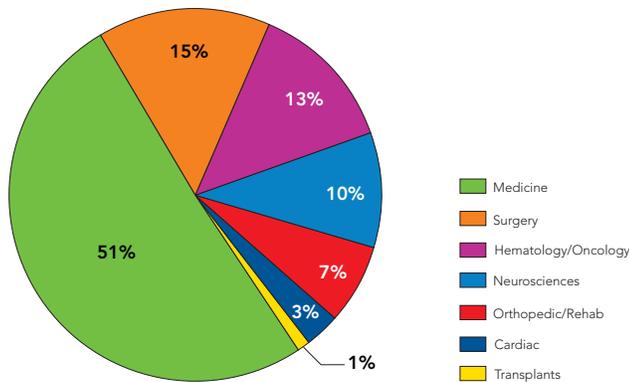
Admissions by age



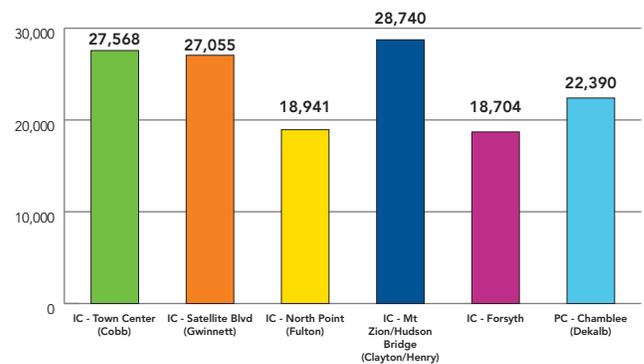
Admissions by payment source



Admissions by service line



Immediate care and primary care visits



Sources: Children's Healthcare of Atlanta (includes Egleston and Scottish Rite)

Over the period, Children's had 450,744 outpatient visits and 153,936 Emergency Department visits across Egleston and Scottish Rite.

At its outpatient satellite locations, Children's had 22,390 primary care visits seen at its Primary Care Center in Chamblee.

In addition, more than 121,000 immediate care visits were provided across five Children's Immediate Care Centers:

Town Center in Cobb County, Satellite Boulevard in Gwinnett County, North Point in Fulton County, Mt. Zion/Hudson Bridge serving Clayton and Henry Counties, and Forsyth in Forsyth County.



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