

# The State of Children's Health in the Kansas City Region

Weighing In Coalition Presentation

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# Why a CHNA?

- Provides perspective of what is happening across the community
- Helps to better gauge community gaps and needs
- Leverages ACA requirement for non-profit hospitals
- Creates a strategic, population-based, system-wide approach to improving the health of children

# CHNA Methodology

## Focus Groups

Representatives from non-profit agencies serving children and their families

225 invited, 46 participated

## Key Informant On-line Survey

Representatives from government, legal, and business AND those from nonprofit agencies that did not participate in Focus Groups

100 invited; 46 returned surveys

## Telephone Survey

Randomly selected, stratified sample of families with at least one child living at home. From all 4 counties.

1000 Families

## Secondary Data Analysis

National, State, Local and Internal Sources

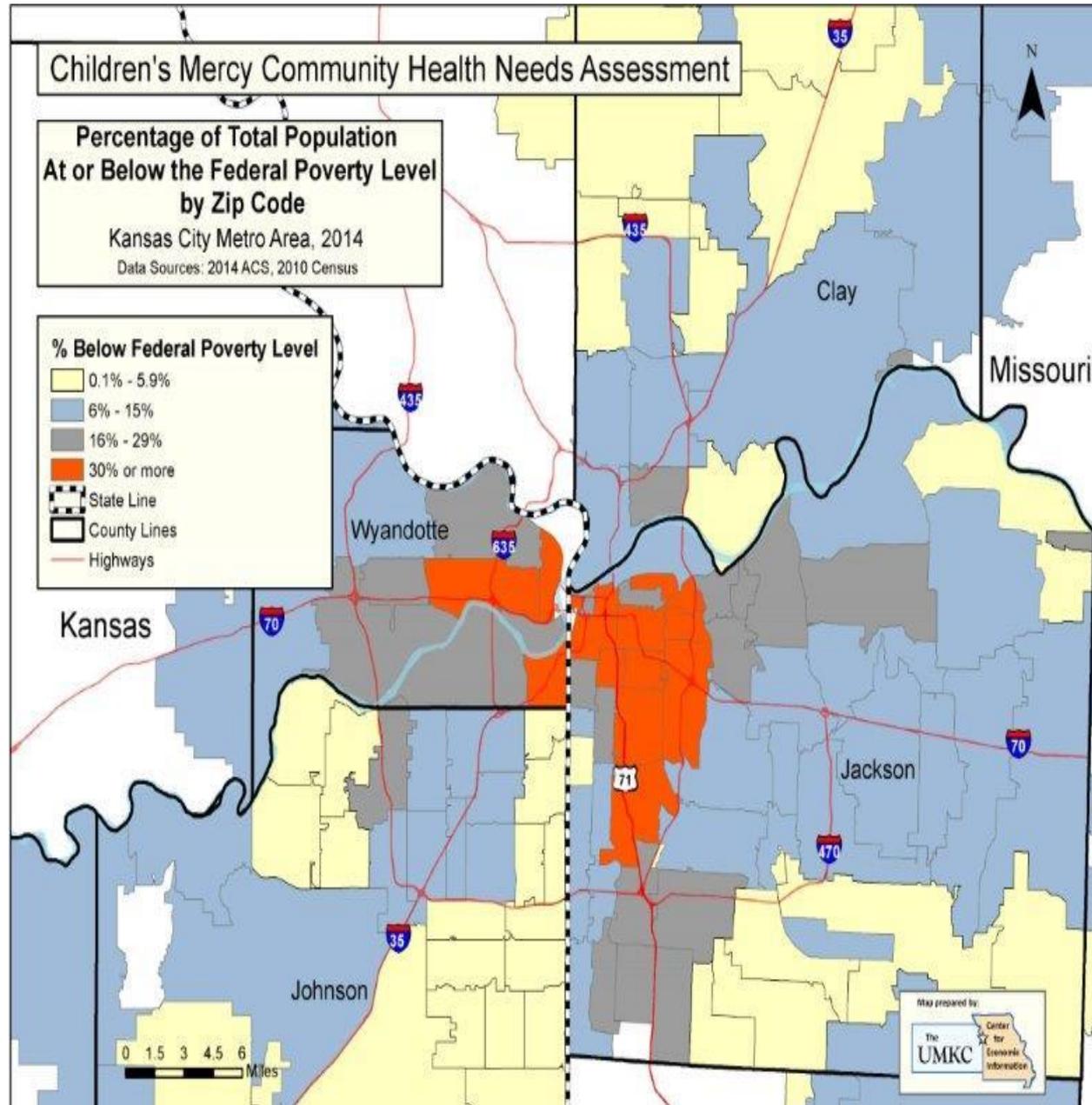
Population Characteristics  
Social & Economic Factors  
Health Data

# 71.2% of Encounters - FY15



# Who are the Children of Clay, Jackson, Johnson & Wyandotte?

- Approx. 411, 888 children or 25.9% pop
- Over 230,000 children enrolled in K-12 public education
- Across the region 19.0% live in poverty; 37.6% of children in Wyandotte County



# Ten Districts with Most Homeless-K-12 Students in KC Region

(Clay, Jackson, Johnson and Wyandotte Counties)

## 2014-15 School Year

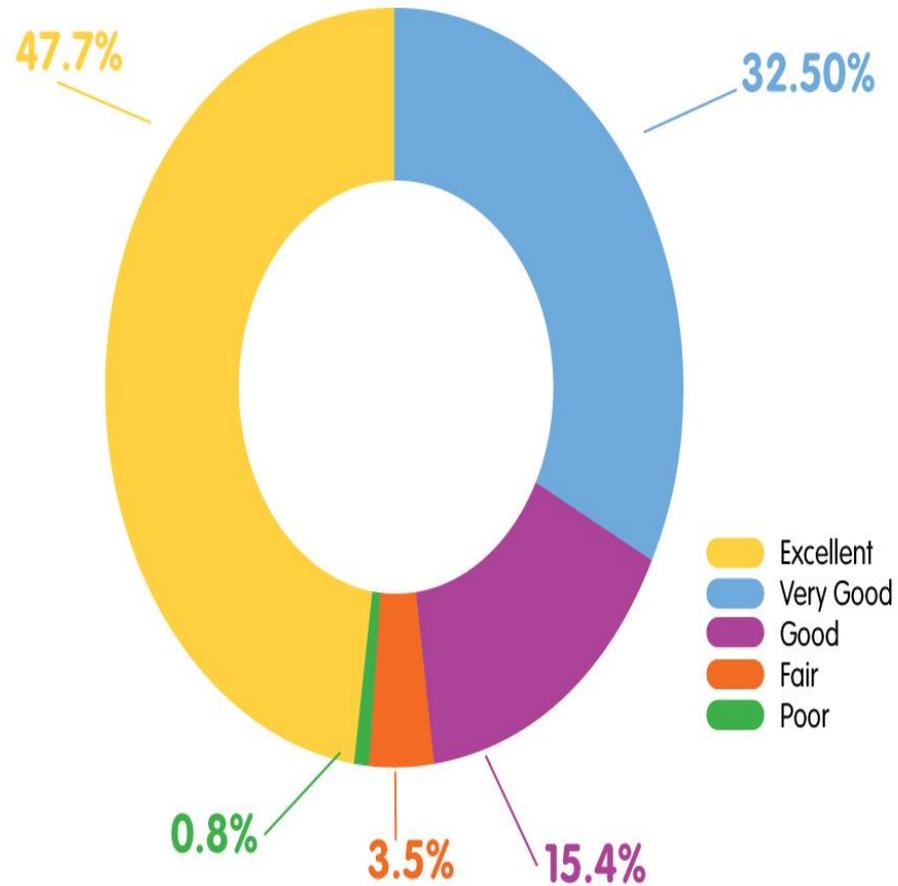
6917 Homeless K-12 Students in all Districts in the Kansas City region

- Jackson Co.: 3867
- Wyandotte Co.: 1232
- Johnson Co.: 1109
- Clay Co.: 709

District	# Homeless Students
Kansas City, MO	1,824
Kansas City, KS	1,096
Independence-MO	938
Shawnee Mission-KS	418
Olathe-KS	412
North Kansas City- MO	292
Hickman Mills-MO	225
Excelsior Springs-MO	166
Hogan-MO	154
Della Lamb-MO	123
<i>Total for the Ten Districts</i>	<i>5648</i>

Source: Kansas and Missouri Departments of Education, McKinney-Vento data

# Child's Health Status (Total Service Area, 2015)

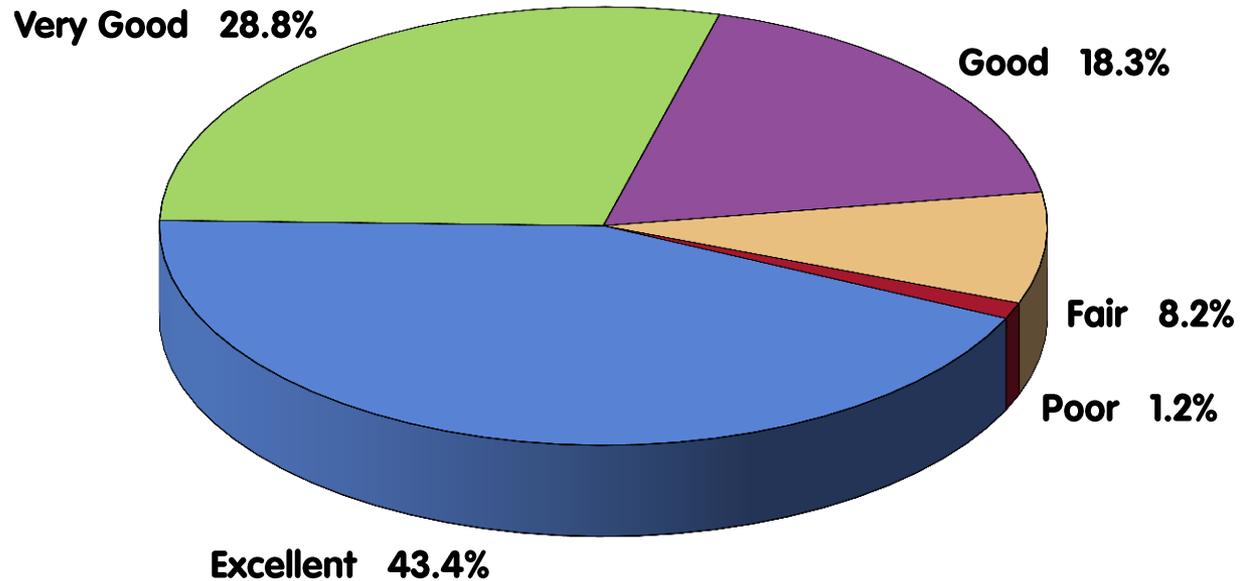


Sources: • 2015 PRC Child & Adolescent Health Survey, Professional Research Consultants, Inc. [Item 18]

Notes: • Asked of all respondents about a randomly selected child in the household.

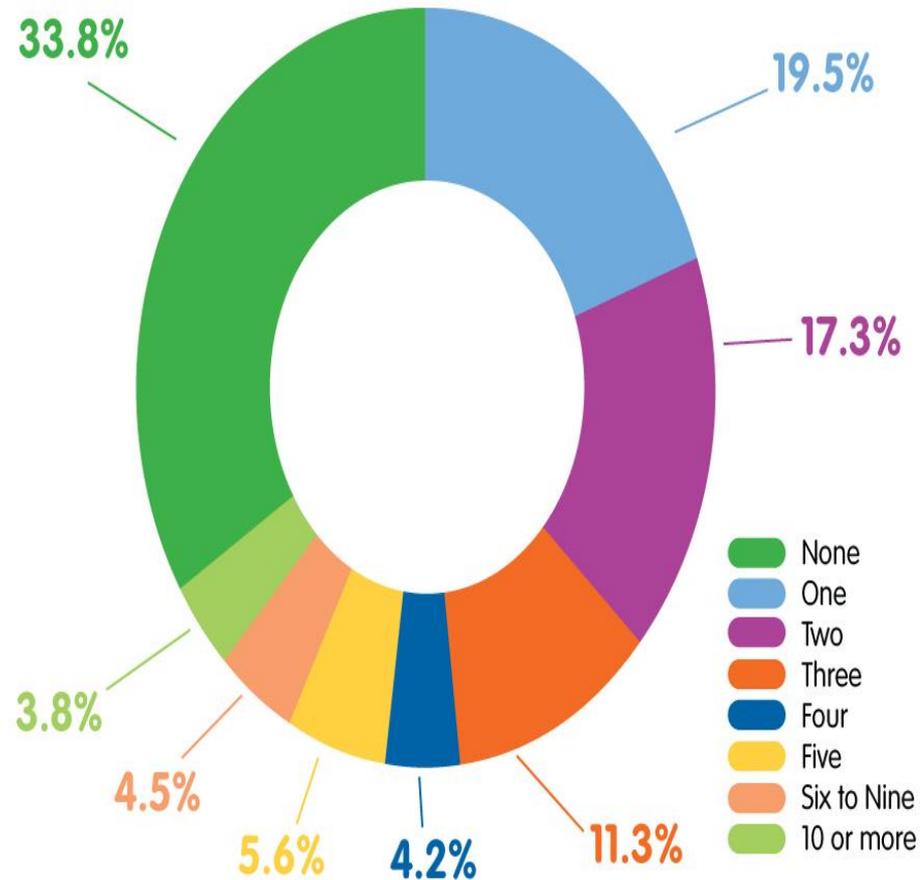
# Child's Mental Health Status

(Total Service Area Children Age 5-17, 2015)



- Sources: • 2015 PRC Child & Adolescent Health Survey, Professional Research Consultants, Inc. [Item 90]  
Notes: • Asked of respondents for whom the randomly selected child in the household is between the ages of 5 and 17.

# Number of School Days Missed in the Past Year Due to Illness or Injury (Total Service Area Children Age 5-17, 2015)



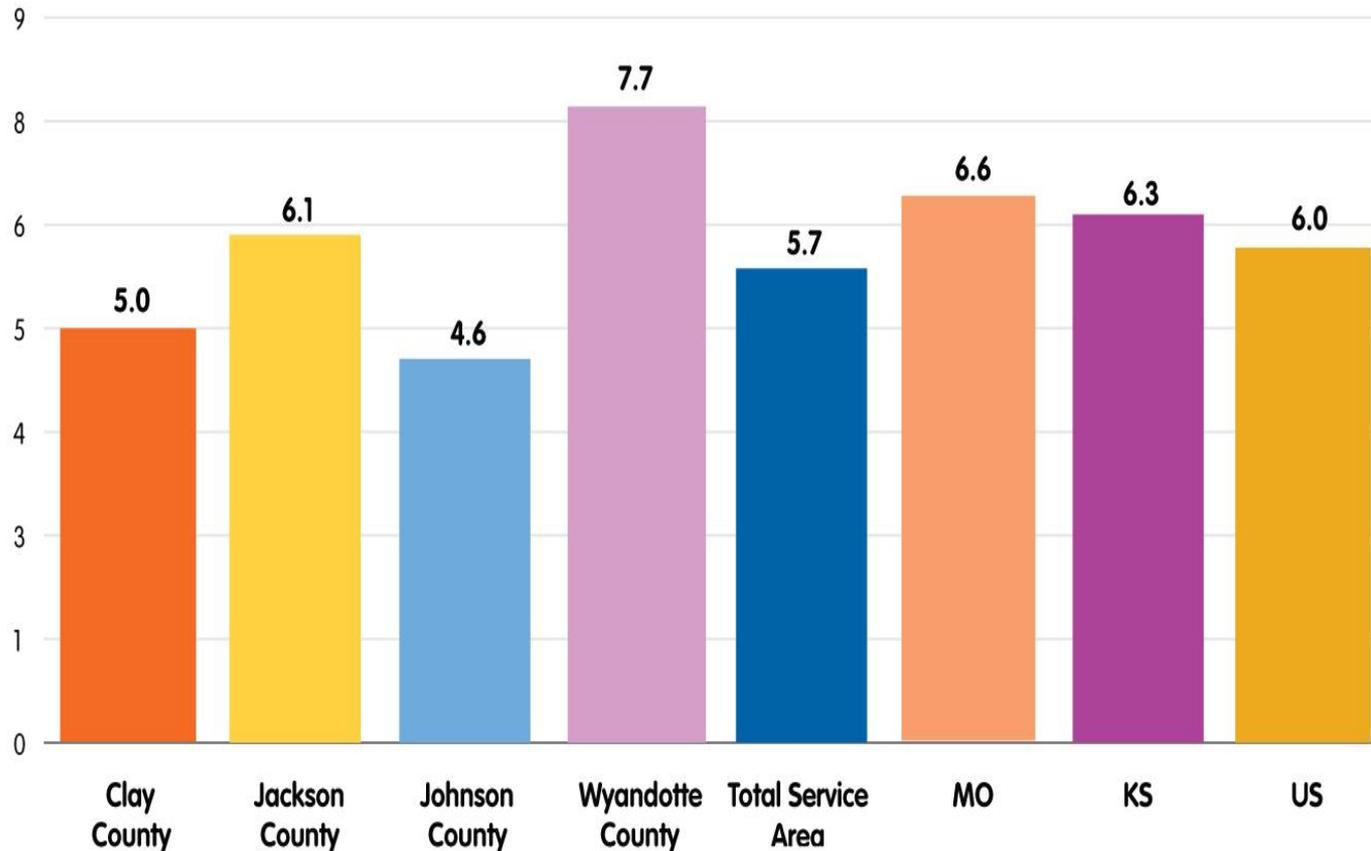
Sources: • 2015 PRC Child & Adolescent Health Survey, Professional Research Consultants, Inc. [Item 325]

Notes: • Asked of all respondents for whom the randomly selected child in the household is age 5 to 17.

# Infant Mortality Rate

(Annual Average Infant Deaths per 1,000 Live Births, 2011-2013)

Healthy People 2020 Target = 6.0 or Lower



Sources: ● CDC WONDER Online Query System. Centers for Disease Control and Prevention, Epidemiology Program Office, Division of Public Health Surveillance and Informatics. Data extracted December 2015.

● US Department of Health and Human Services. Healthy People 2020. December 2010. <http://www.healthypeople.gov> [Objective MICH-1.3]

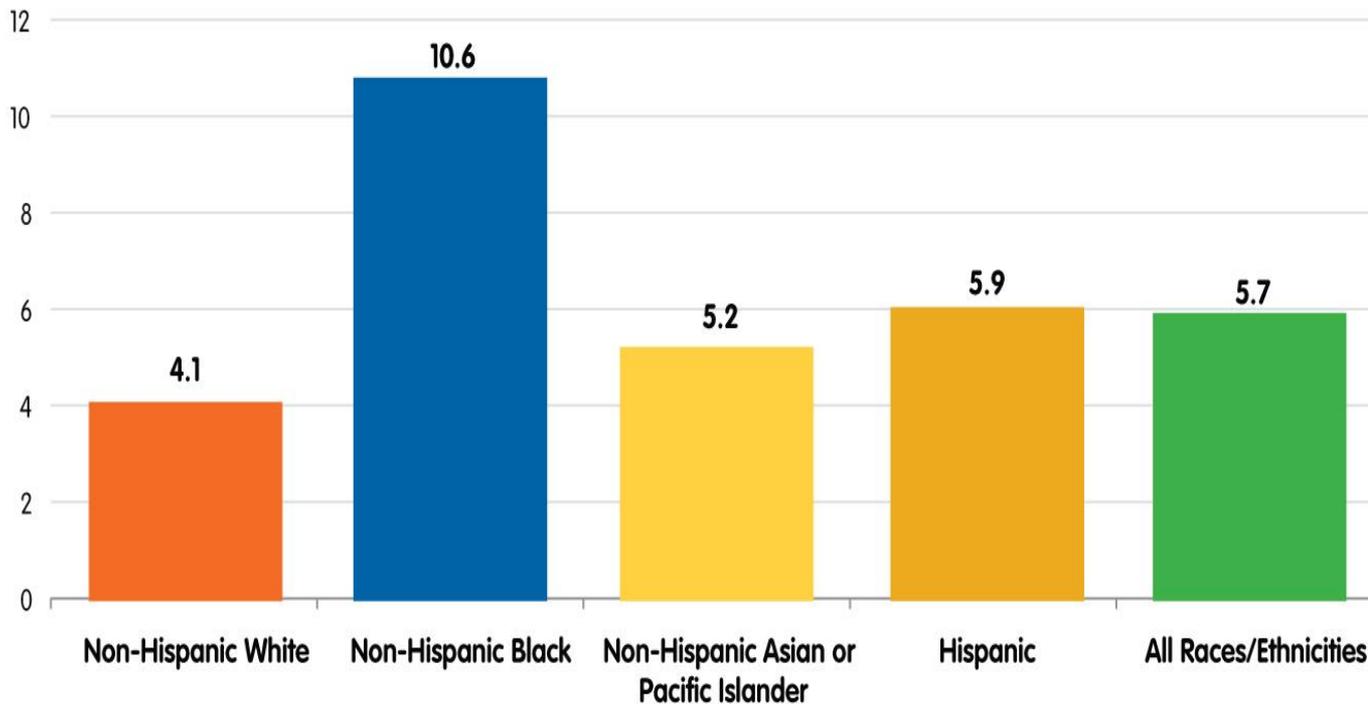
Notes:

● Infant deaths include deaths of children under 1 year old.

● This indicator is relevant because high rates of infant mortality indicate the existence of broader issues pertaining to access to care and maternal and child health.

# Infant Mortality by Race/Ethnicity

(Total Service Area; Annual Average  
Infant Deaths per 1,000 Live Births, 2011-2013)  
Healthy People 2020 Target = 6.0 or Lower



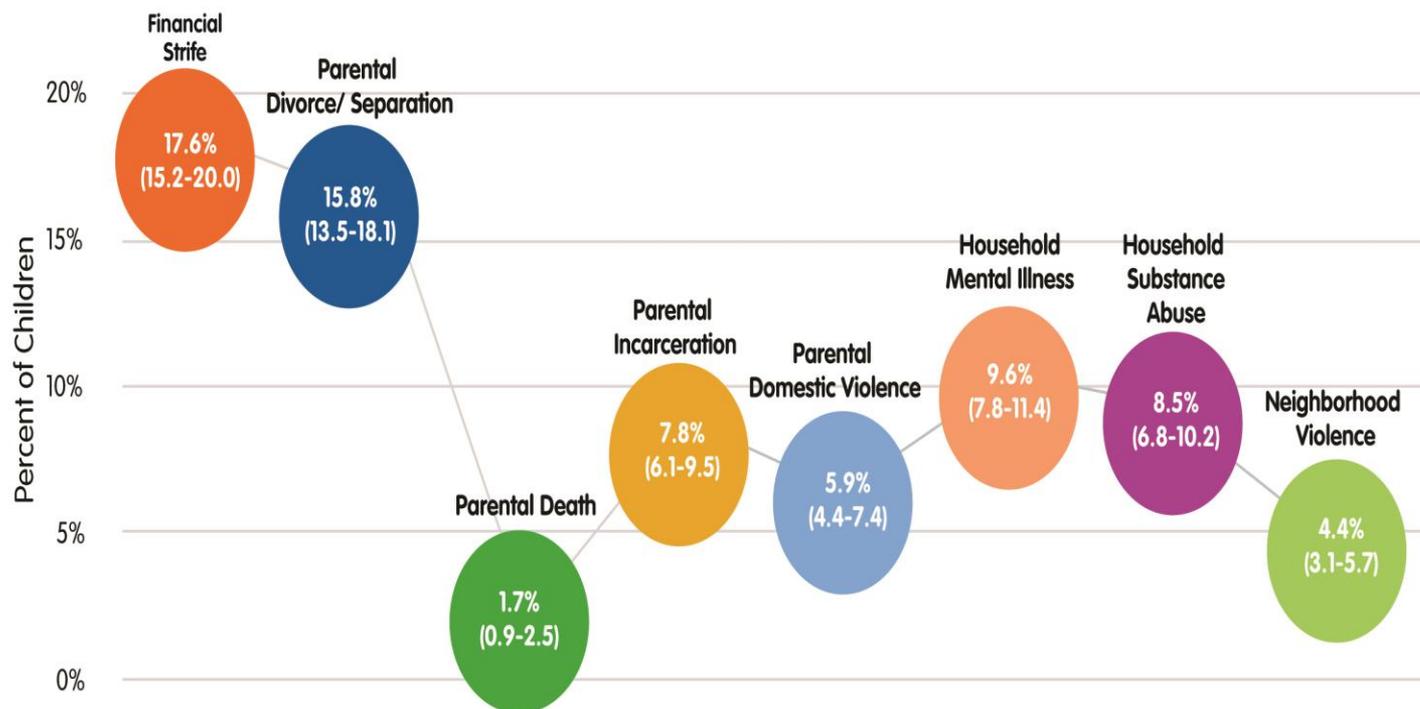
Sources: ● CDC WONDER Online Query System. Centers for Disease Control and Prevention, Epidemiology Program Office, Division of Public Health Surveillance and Informatics. Data extracted December 2015.

● US Department of Health and Human Services. Healthy People 2020. December 2010. <http://www.healthypeople.gov> [Objective MICH-1.3]

Notes: ● Infant deaths include deaths of children under 1 year old.

● This indicator is relevant because high rates of infant mortality indicate the existence of broader issues pertaining to access to care and maternal and child health.

# Adverse Childhood Experiences (ACEs) (Total Service Area Children Age 0-17, 2015)

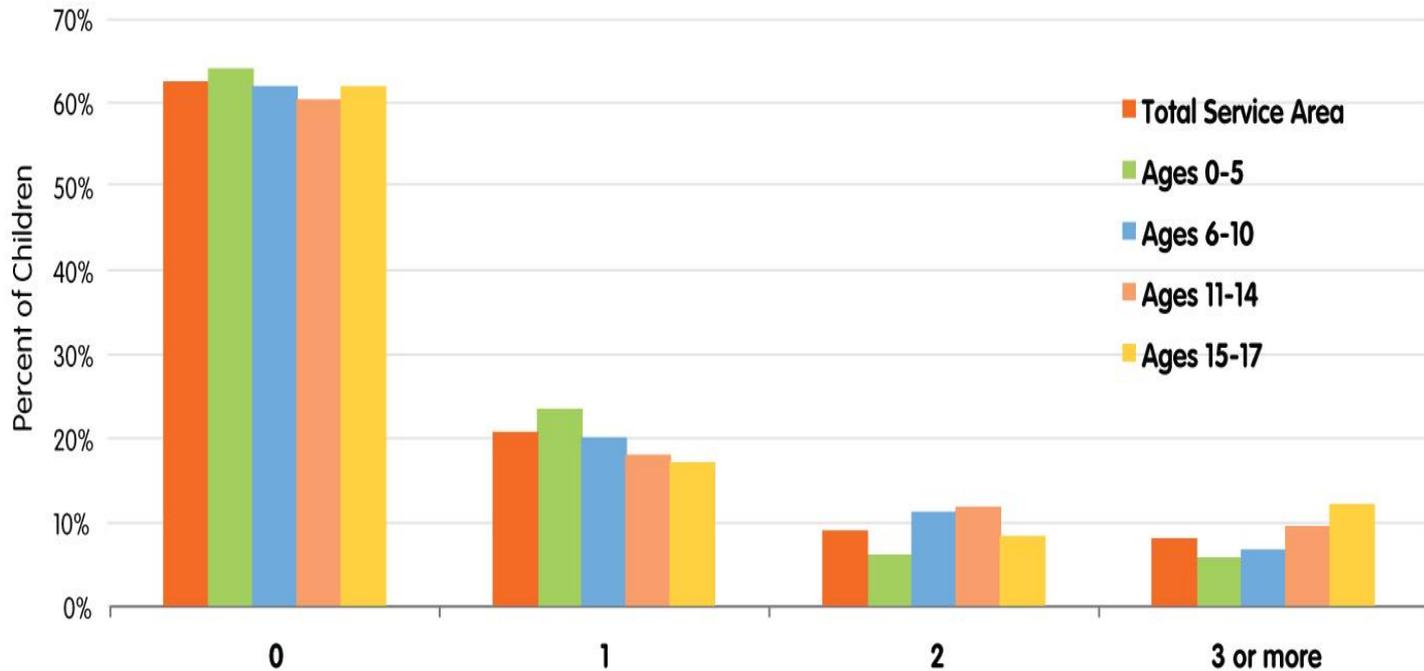


Sources: • 2015 PRC Child & Adolescent Health Survey-Kansas City, Professional Research Consultants, Inc. [Items 326-333]

Notes: • Asked of all respondents about a randomly selected child in the household.

# Total Number of Adverse Childhood Experiences (ACEs)

(Total Service Area Children Age 0-17, 2015)



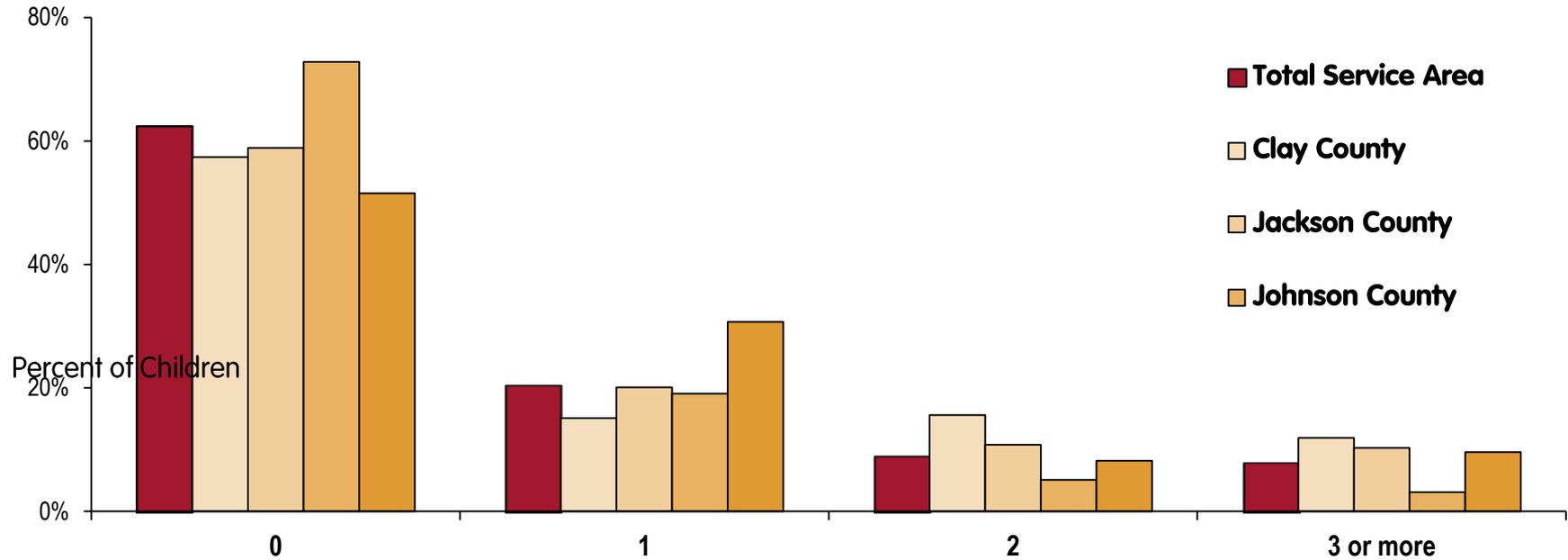
	0	1	2	3 or more
<b>Total Service Area</b>	62.4% (59.4-65.4)	20.5% (18.0-23.0)	9.1% (7.3-10.9)	8.0% (6.3-9.7)
<b>Ages 0-5</b>	64.1% (57.4-70.8)	24.0% (18.0-30.0)	6.2% (2.8-9.6)	5.7% (2.4-9.0)
<b>Ages 6-10</b>	62.0% (56.1-67.9)	20.1% (15.2-25.0)	11.3% (7.4-15.2)	6.7% (3.6-9.8)
<b>Ages 11-14</b>	60.4% (55.0-65.8)	18.1% (13.8-22.4)	11.9% (8.3-15.5)	9.6% (6.3-12.9)
<b>Ages 15-17</b>	62.0% (56.1-67.9)	17.2% (12.6-21.8)	8.5% (5.1-11.9)	12.2% (8.2-16.2)

Sources: • 2015 PRC Child & Adolescent Health Survey, Professional Research Consultants, Inc. [Item 181]

Notes: • Asked of all respondents about a randomly selected child in the household.

# Total Number of Adverse Childhood Experiences (ACEs)

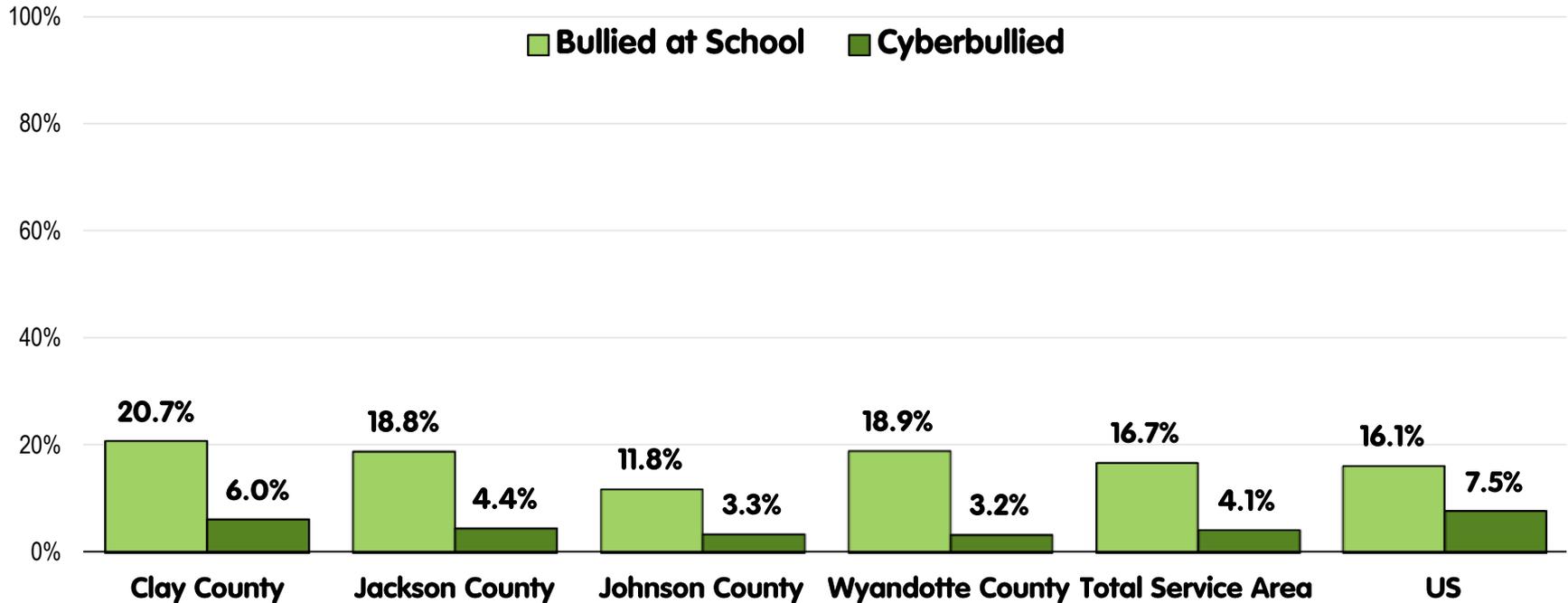
(Total Service Area Children Age 0-17, 2015)



	0	1	2	3 or more
<b>Total Service Area</b>	<b>62.4% (59.4-65.4)</b>	<b>20.5% (18.0-23.0)</b>	<b>9.1% (7.3-10.9)</b>	<b>8.0% (6.3-9.7)</b>
<b>Clay County</b>	<b>57.4% (50.5-64.3)</b>	<b>15.1% (10.1-20.1)</b>	<b>15.6% (10.6-20.6)</b>	<b>11.9% (7.4-16.4)</b>
<b>Jackson County</b>	<b>58.9% (53.7-64.1)</b>	<b>20.1% (15.9-24.3)</b>	<b>10.8% (7.5-14.1)</b>	<b>10.3% (7.1-13.5)</b>
<b>Johnson County</b>	<b>72.8% (67.3-78.3)</b>	<b>19.1% (14.2-24.0)</b>	<b>5.1% (2.4-7.8)</b>	<b>3.1% (0.9-5.3)</b>
<b>Wyandotte County</b>	<b>51.5% (44.6-58.4)</b>	<b>30.7% (24.3-37.1)</b>	<b>8.2% (4.4-12.0)</b>	<b>9.6% (5.5-13.7)</b>

# Child Was Bullied in the Past Year

(Total Service Area Children 5-17, 2015)

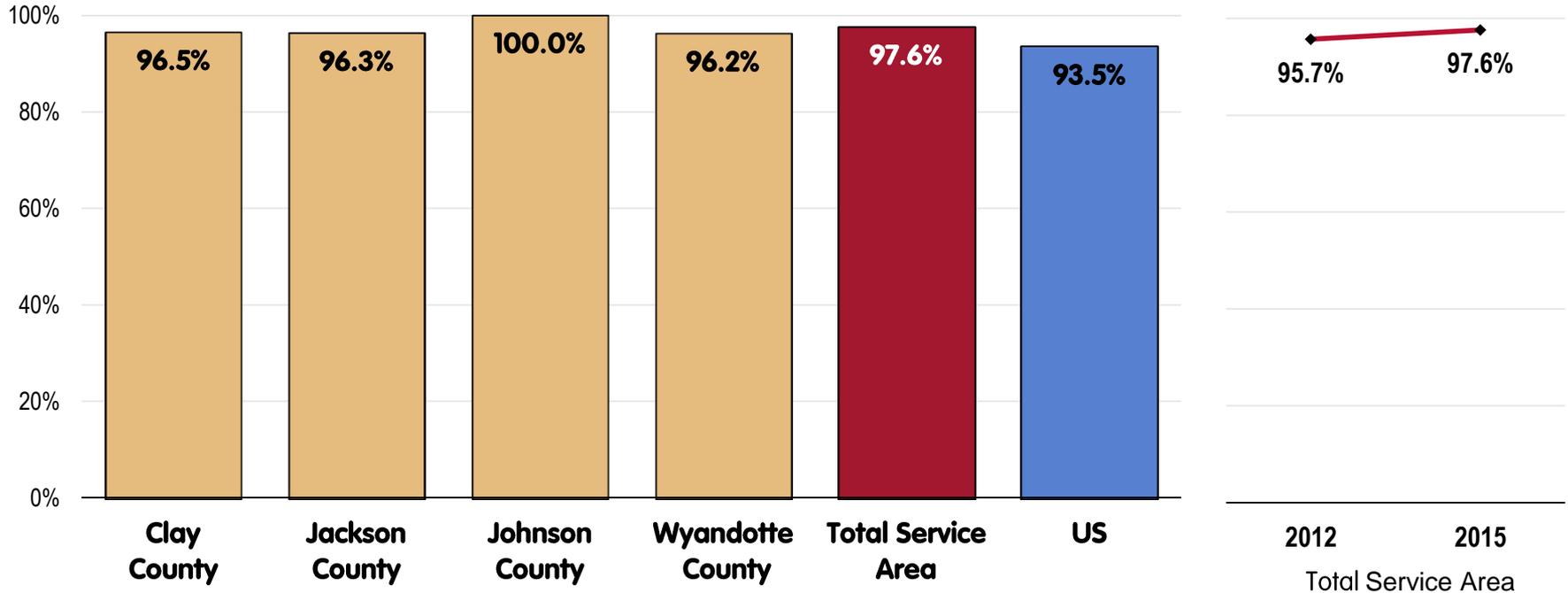


- Sources:
- 2015 PRC Child & Adolescent Health Survey, Professional Research Consultants, Inc. [Items 85, 86]
  - 2014 PRC National Child & Adolescent Health Survey, Professional Research Consultants, Inc.

- Notes:
- Asked of those respondents for whom the randomly selected child in the household is age 5 to 17.
  - Cyberbullying includes electronic bullying such as through email, chat rooms, instant messaging, websites, or texting.

# Have a Usual Source for Child's Ongoing Medical Care

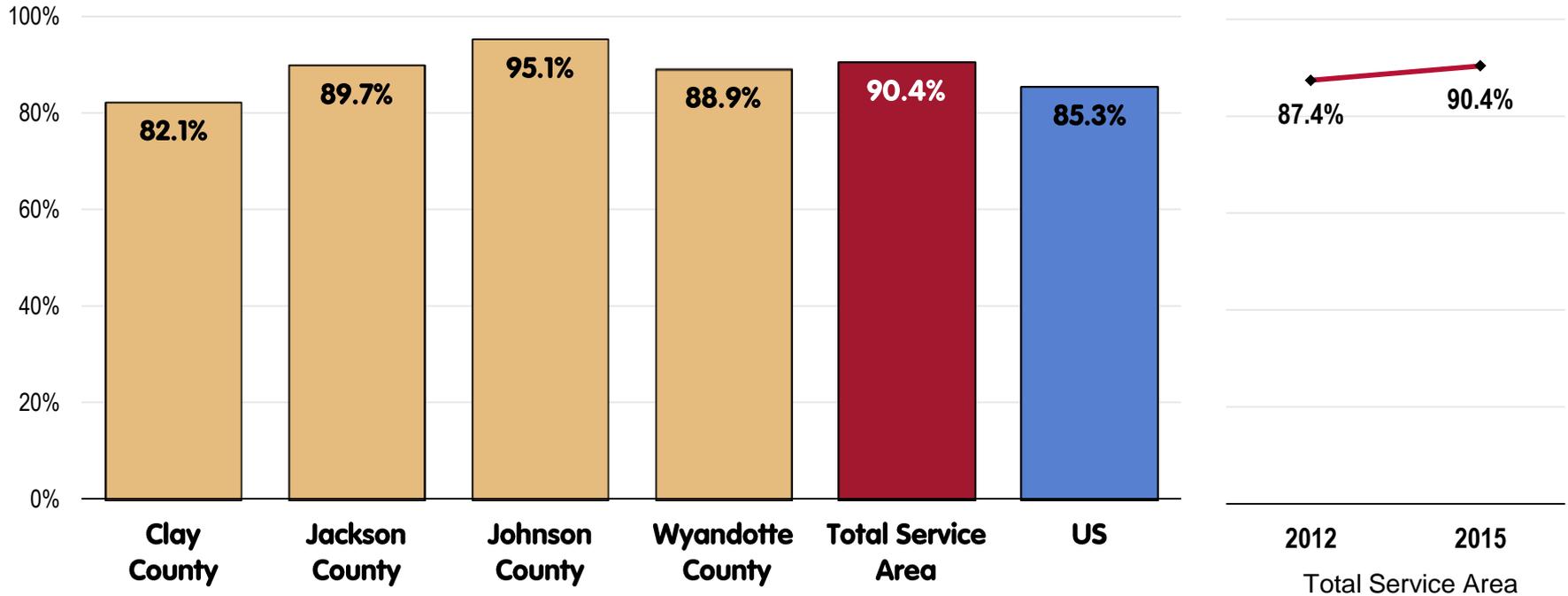
## Healthy People 2020 Target = 100%



- Sources:
- PRC Child & Adolescent Health Surveys, Professional Research Consultants, Inc. [Item 27]
  - 2014 PRC National Child & Adolescent Health Survey, Professional Research Consultants, Inc.
  - US Department of Health and Human Services. Healthy People 2020. December 2010. <http://www.healthypeople.gov> [Objective AHS-5.2]

- Notes:
- Asked of all respondents about a randomly selected child in the household.
  - Having a specific source of ongoing care for a child includes having a doctor's office, clinic, urgent care center, health department clinic, or some other kind of place to go if the child is sick or needs advice about his or her health.

# Child Visited a Physician for a Routine Checkup in the Past Year (Total Service Area, 2015)

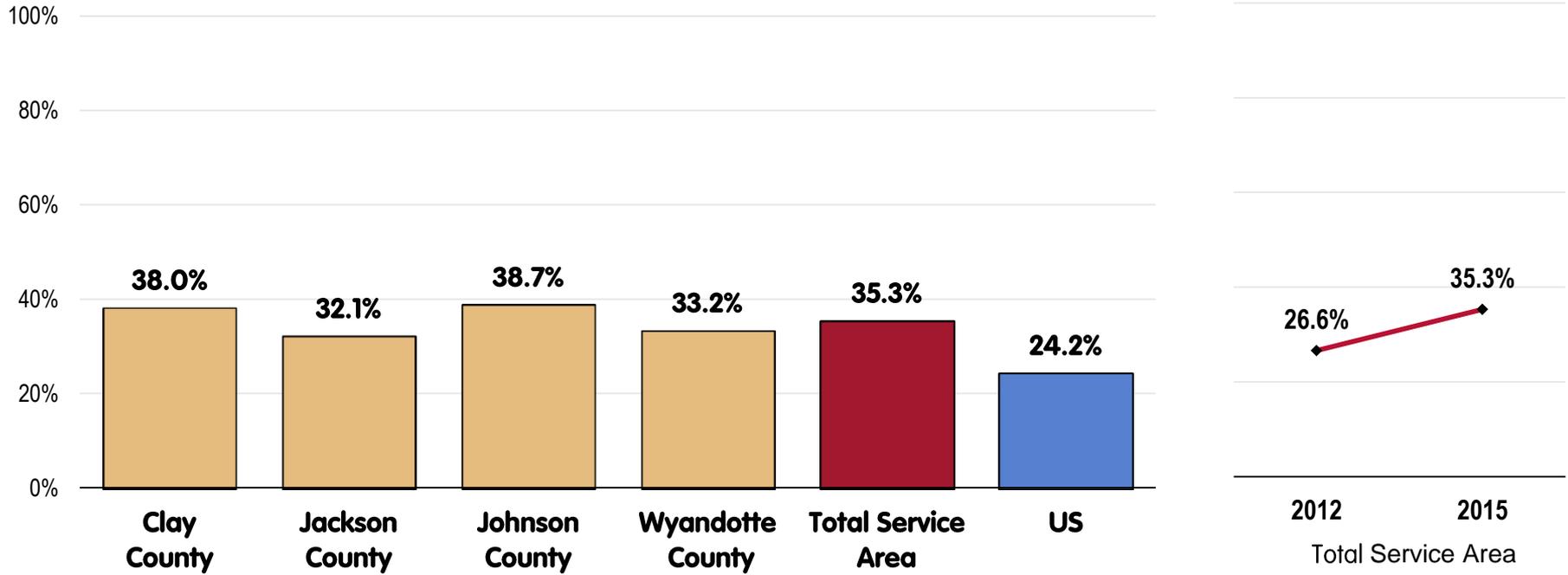


Sources: ● PRC Child & Adolescent Health Surveys, Professional Research Consultants, Inc. [Item 29]  
● 2014 PRC National Child & Adolescent Health Survey, Professional Research Consultants, Inc.

Notes: ● Asked of all respondents about a randomly selected child in the household.

# Child Needed a Specialist in the Past Year

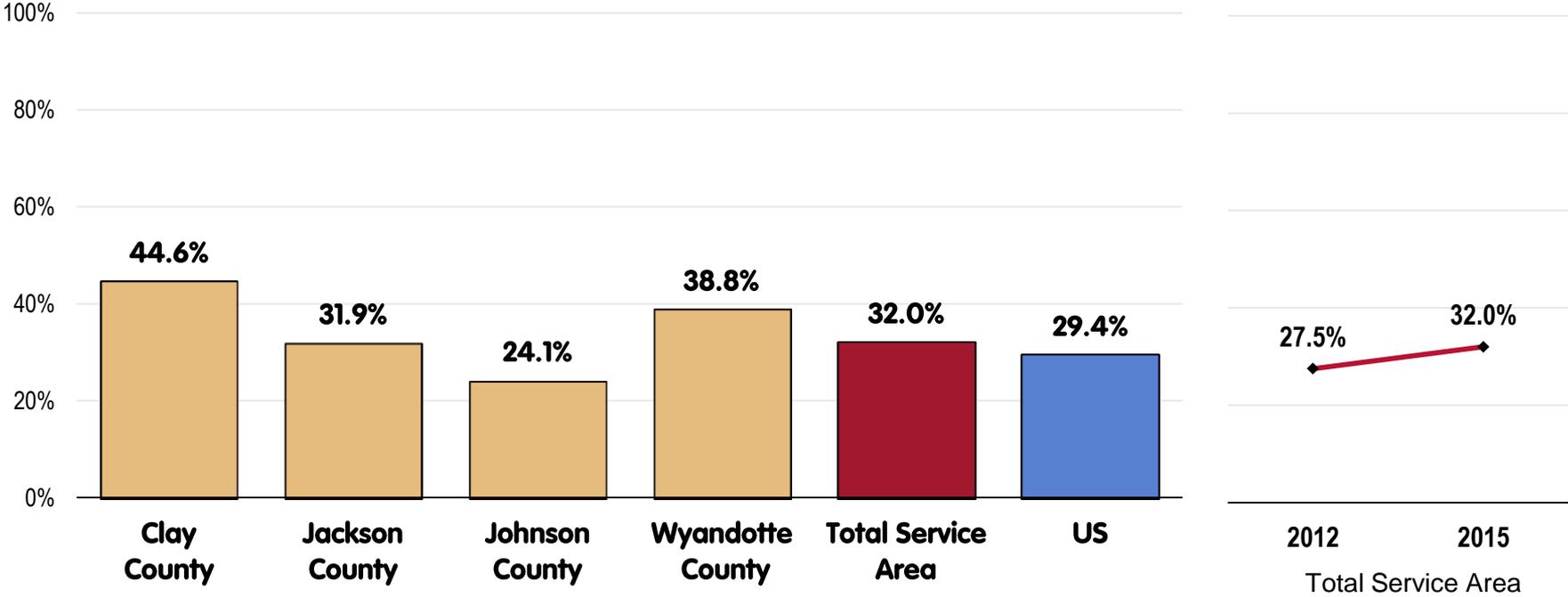
(Total Service Area, 2015)



Sources: ● PRC Child & Adolescent Health Surveys, Professional Research Consultants, Inc. [Item 30]  
● 2014 PRC National Child & Adolescent Health Survey, Professional Research Consultants, Inc.  
Notes: ● Asked of all respondents about a randomly selected child in the household.

# Experienced Difficulties or Delays of Some Kind in Receiving Child's Needed Healthcare in the Past Year

(Total Service Area, 2015)

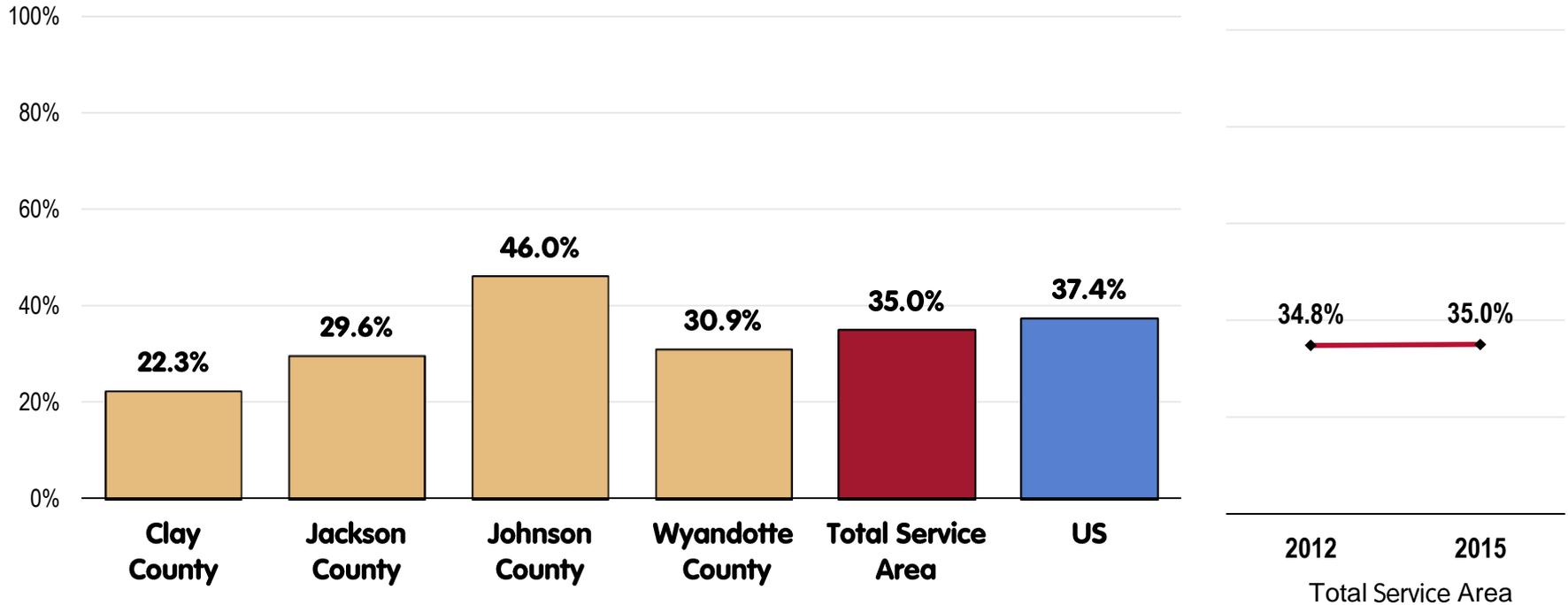


Sources: ● PRC Child & Adolescent Health Surveys, Professional Research Consultants, Inc. [Item 176]  
 ● 2014 PRC National Child & Adolescent Health Survey, Professional Research Consultants, Inc.

Notes: ● Asked of all respondents about a randomly selected child in the household.  
 ● Represents the percentage of respondents experiencing one or more barriers to accessing their child's healthcare in the past 12 months.

# Child "Always" Wore a Helmet on Skateboards, Scooters, Skates or Rollerblades in the Past Year

(Total Service Area Children Age 5-17 Who Engaged in These Activities in the Past Year, 2015)



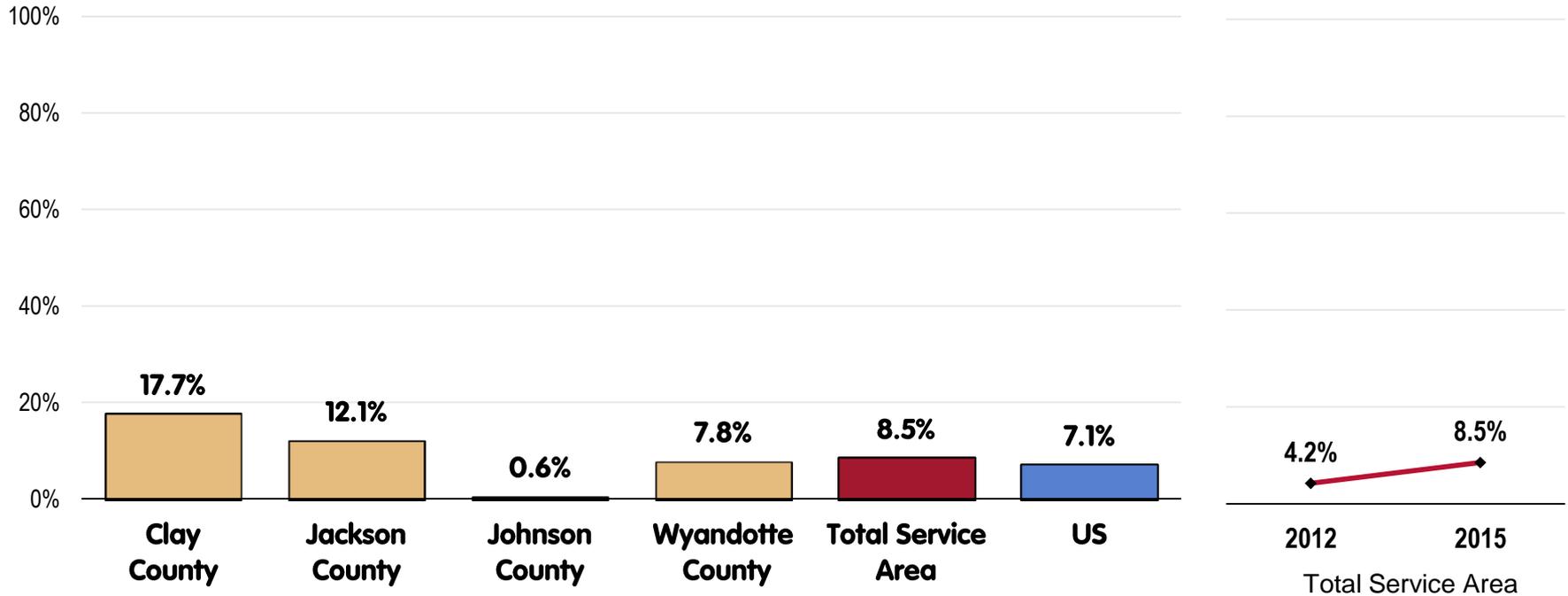
Sources: ● PRC Child & Adolescent Health Surveys, Professional Research Consultants, Inc. [Item 89]

● 2014 PRC National Child & Adolescent Health Survey, Professional Research Consultants, Inc.

Notes: ● Asked of all respondents for whom the randomly selected child in the household is age 5-17 and who rode a skateboard, scooter, skates or rollerblades in the past year; excludes the 43.9% of children who did not engage in these activities.

# Insured Child Went Without Coverage at Some Point in the Past Year

(Total Service Area Children with Insurance, 2015)

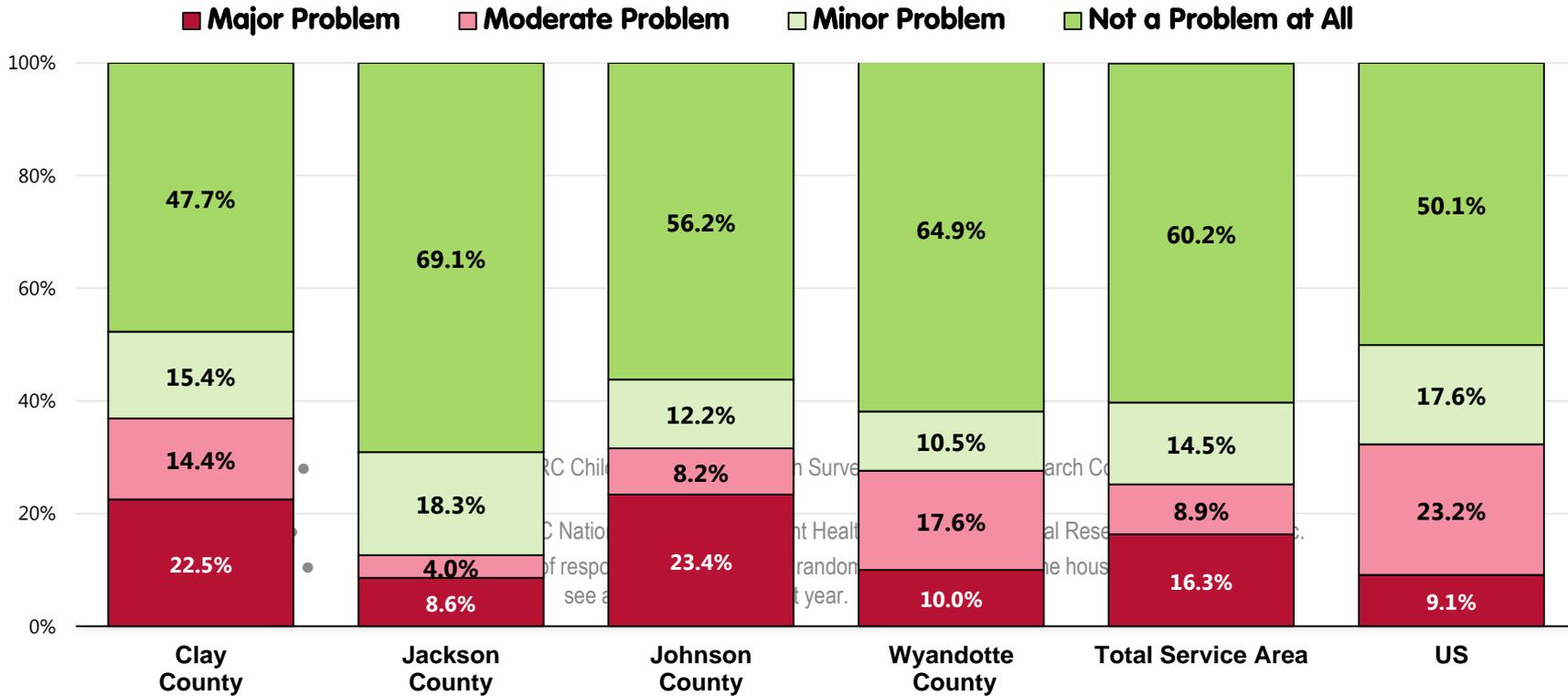


Sources: ● PRC Child & Adolescent Health Surveys, Professional Research Consultants, Inc. [Item 118]  
 ● 2014 PRC National Child & Adolescent Health Survey, Professional Research Consultants, Inc.

Notes: ● Asked of all respondents for whom the randomly selected child in the household has healthcare insurance coverage.

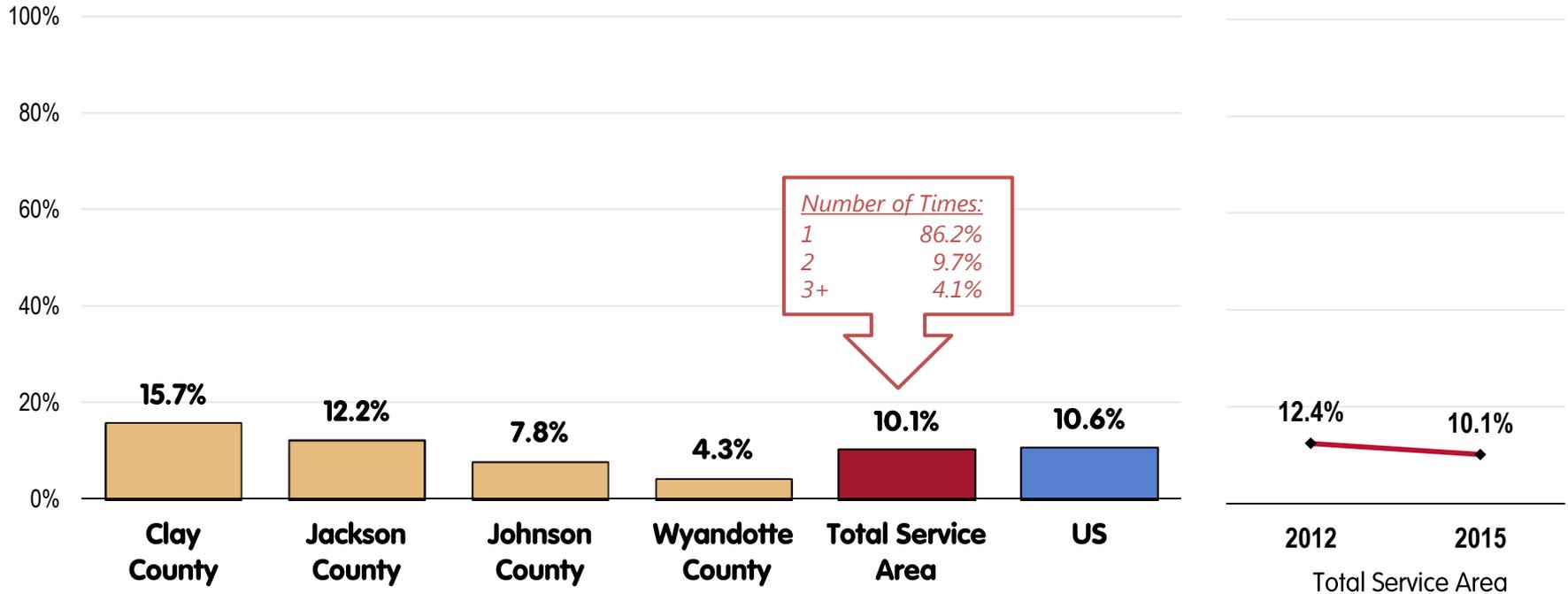
# Evaluation of Difficulty Getting Specialty Care for Child in the Past Year

(Total Service Area Parents of Children Needing to See a Specialist in the Past Year)



# Child Was Injured Seriously Enough to Need Medical Treatment in the Past Year

(Total Service Area, 2015)



- Sources:
- PRC Child & Adolescent Health Surveys, Professional Research Consultants, Inc. [Items 78-79]
  - 2014 PRC National Child & Adolescent Health Survey, Professional Research Consultants, Inc.
- Notes:
- Asked of all respondents about a randomly selected child in the household.

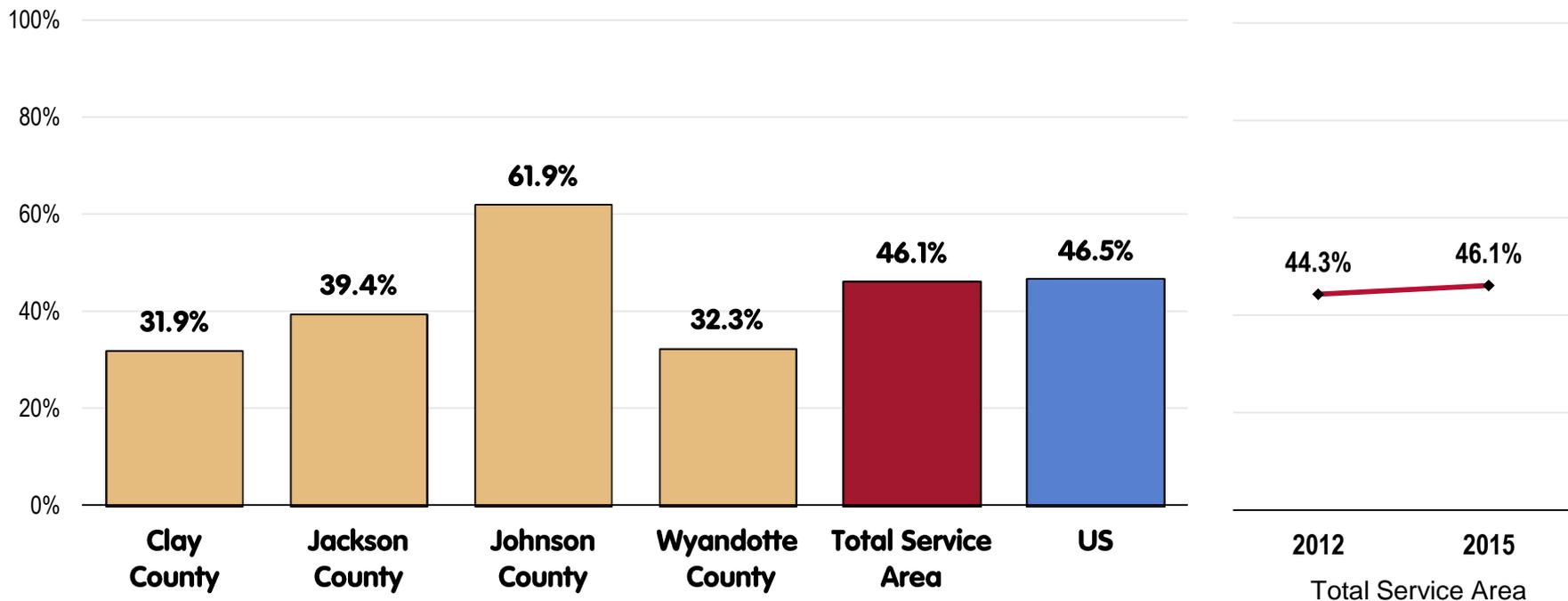
## Top Trauma Related Conditions by Age

### CMH Trauma Registry Data- 2014-2015

0-4 years	5-9 years	10-14 years	15-19 years
Multi-level Fall	Multi-level Fall	Striking Against	Striking Against
Fall	Fall	Fall	MVA
Accident/Hot Corrosive Material	Striking Against	Multi-level Fall	Fall
Child Abuse	MVA	MVA	Assault
Striking Against	Pedal Bike Accident	Action Sports	Fight Brawl Rape
MVA	Accident/Hot Corrosive Material	Pedal Bike Accident	Overexertion, sudden strenuous movement
Animal Injury	Animal Injury	Overexertion, sudden strenuous movement	Multi-level Fall
Caught In or between two objects	Cutting Accident	Off-Road Vehicle Accident	Action Sports
Overexertion, sudden strenuous movement	Water Accident	Cutting Accident	Off-Road Vehicle Accident
Cutting Accident	Action Sports	Accident/Hot Corrosive Material	Suicide

# Child "Always" Wore a Helmet When Riding a Bicycle in the Past Year

(Total Service Area Children Age 5-17 Who Rode a Bike in the Past Year, 2015)



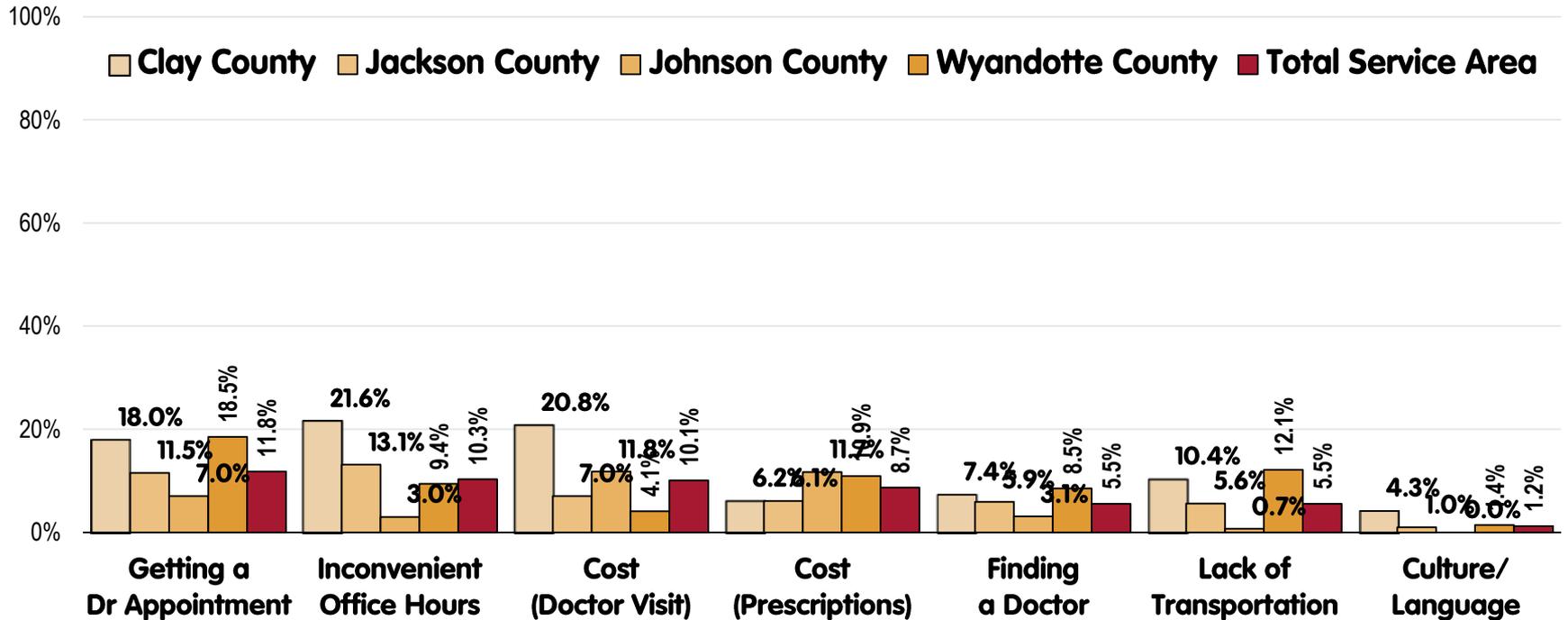
Sources: ● PRC Child & Adolescent Health Surveys, Professional Research Consultants, Inc. [Item 88]

● 2014 PRC National Child & Adolescent Health Survey, Professional Research Consultants, Inc.

Notes: ● Asked of all respondents for whom the randomly selected child in the household is age 5-17 and who rode a bike in the past year.

# Barriers to Access Have Prevented Child's Medical Care in the Past Year

(By County, 2015)

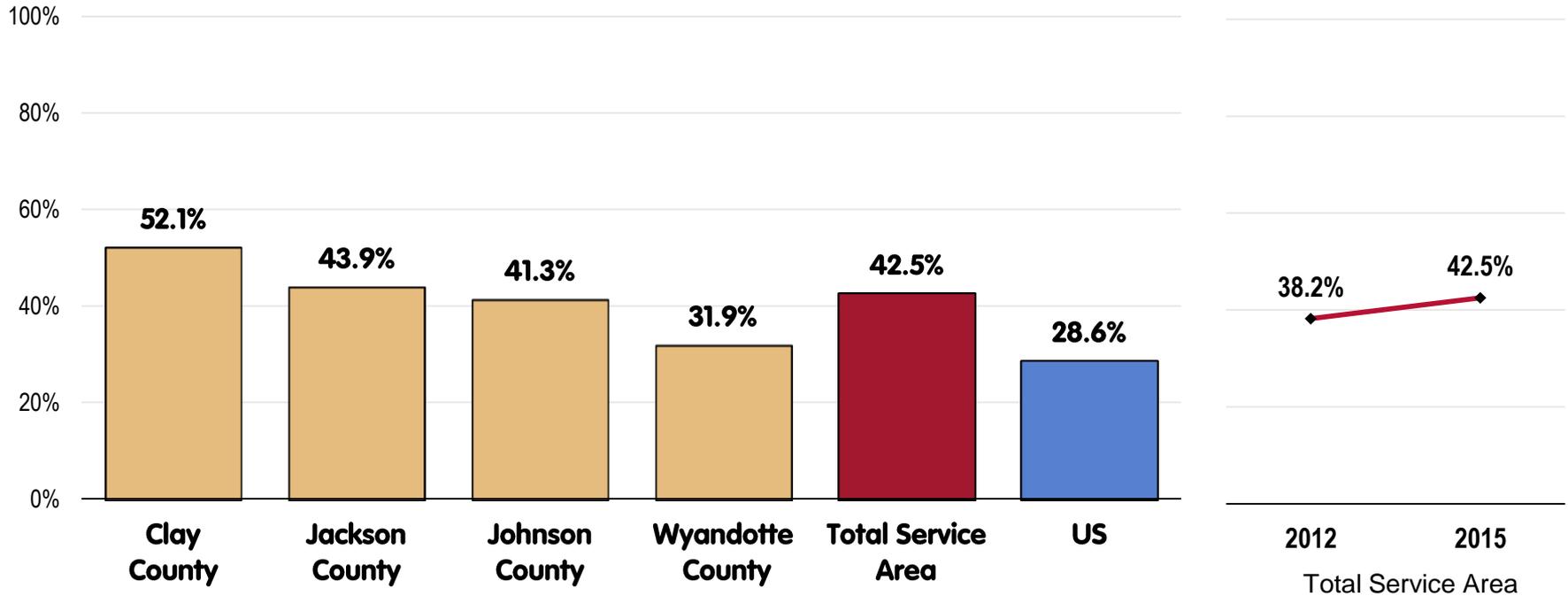


Sources: ● 2015 PRC Child & Adolescent Health Survey, Professional Research Consultants, Inc. [Items 19-25]

Notes: ● Asked of all respondents about a randomly selected child in the household.

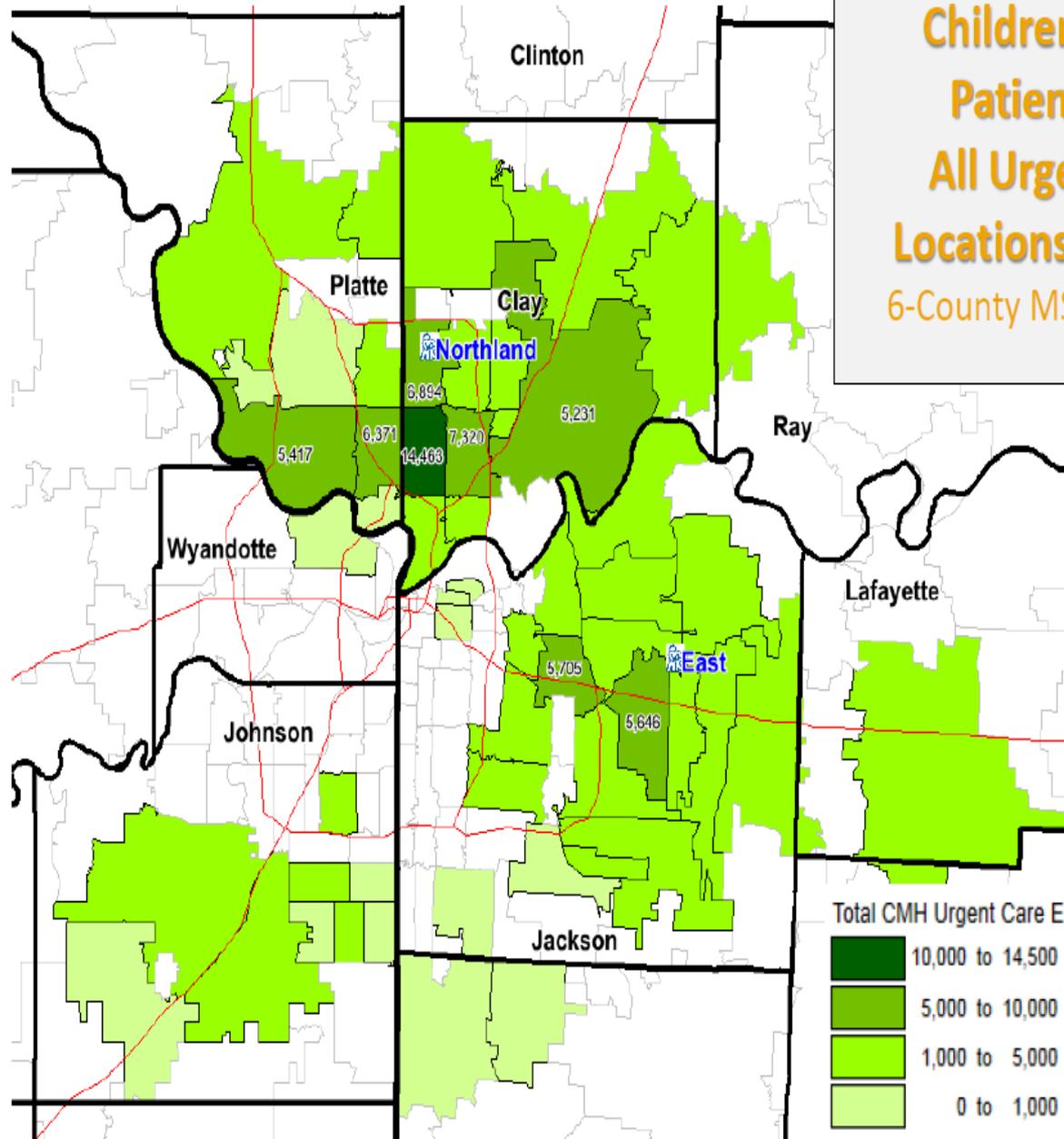
# Child Used an Urgent Care Center or Other Walk-In Clinic in the Past Year

(Total Service Area, 2015)

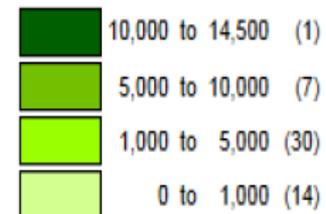


Sources: ● PRC Child & Adolescent Health Surveys, Professional Research Consultants, Inc. [Item 45]  
● 2014 PRC National Child & Adolescent Health Survey, Professional Research Consultants, Inc.  
Notes: ● Asked of all respondents about a randomly selected child in the household.

**Children's Mercy  
Patient Origin  
All Urgent Cares  
Locations (Top 80%)  
6-County MSA, 2013-2015**

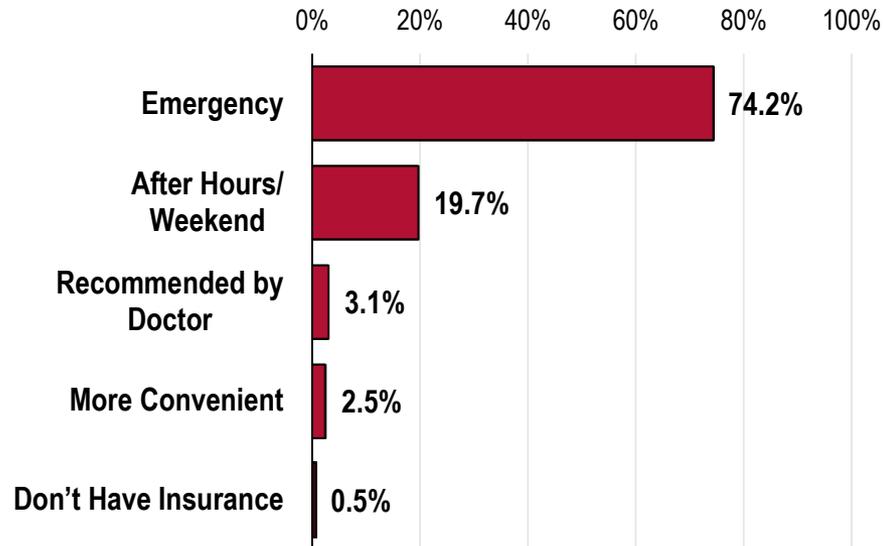


Total CMH Urgent Care Encounters



# Emergency Room Visits

(Among Total Service Area Children With Any ER Visits in the Past Year, 2015)



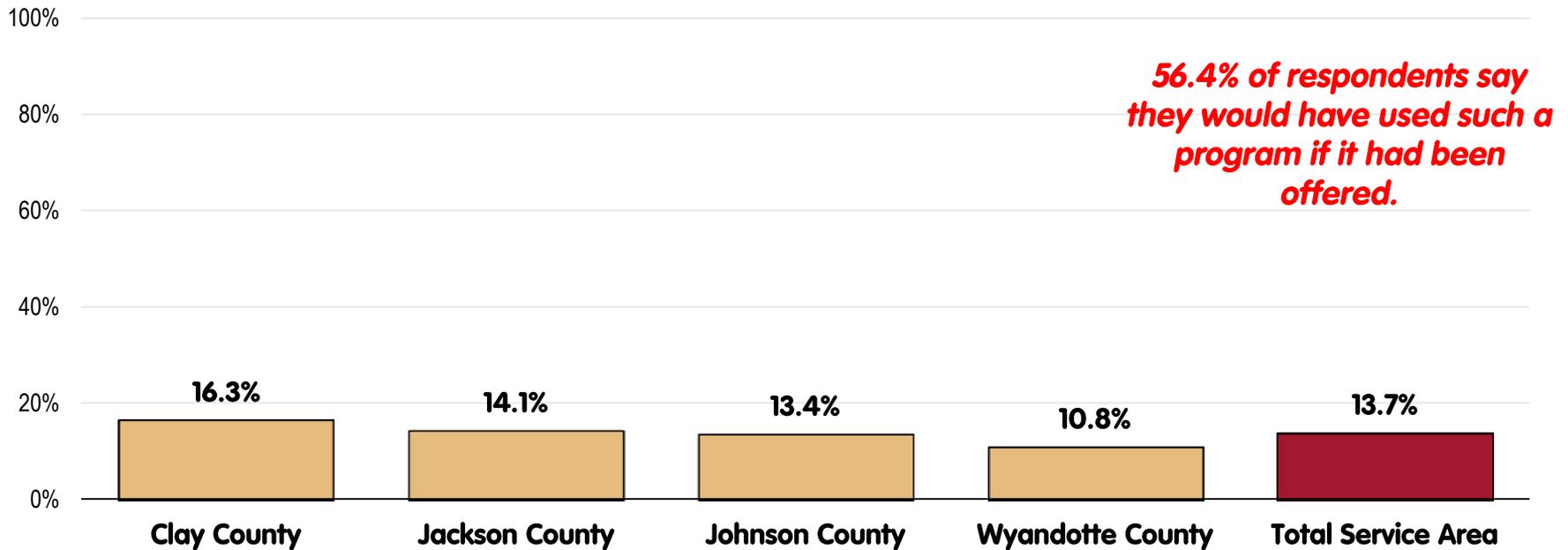
**Reason for Using the Hospital ER  
Instead of a Doctor's Office or Clinic**  
(Among Those Responding "Yes" at Left)

Sources: ● 2015 PRC Child & Adolescent Health Survey, Professional Research Consultants, Inc. [Items 42, 44]

Notes: ● Asked of respondents for whom the randomly selected child in the household used a hospital ER in the past year.

# Person from an In-Home Program for New Babies and Mothers Visited the Home since Mother was Pregnant

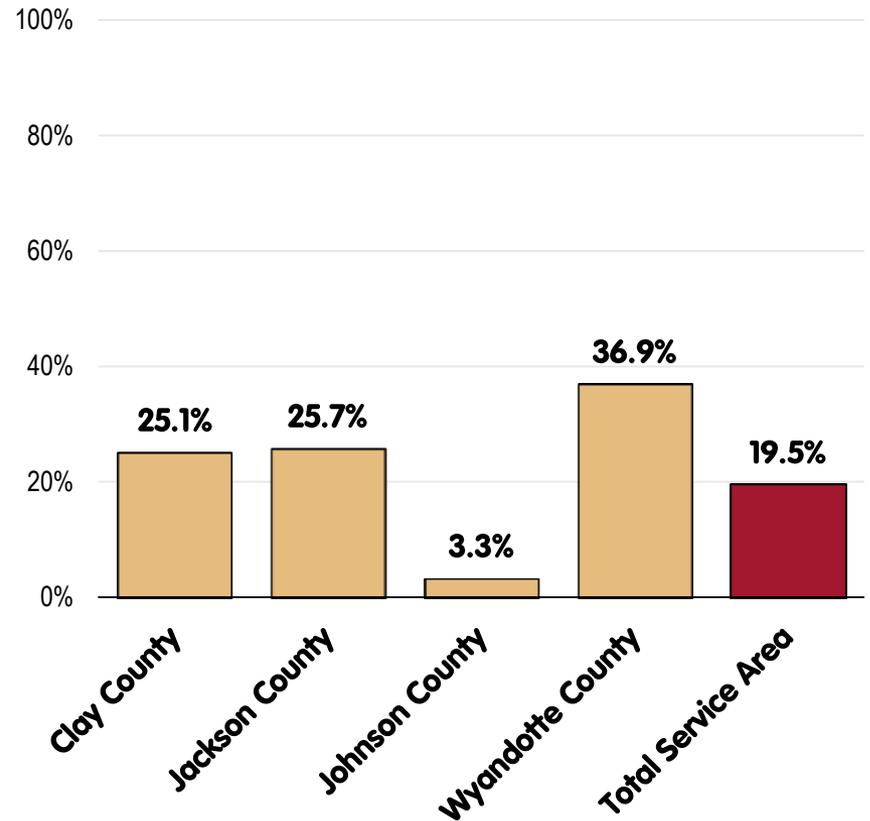
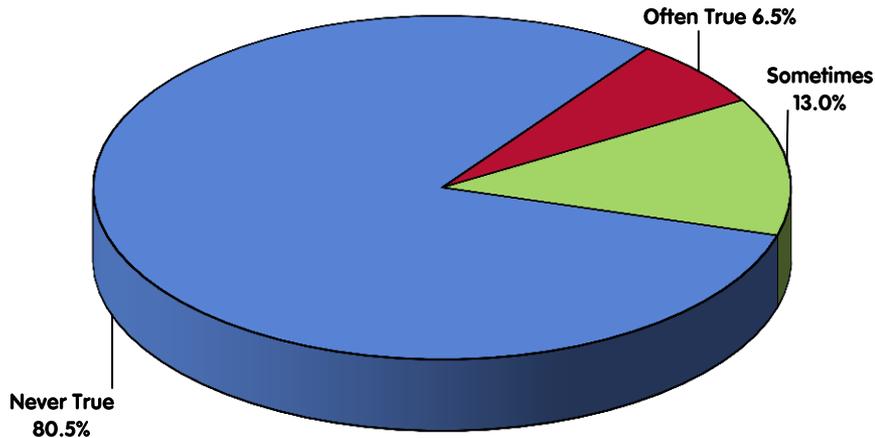
(Total Service Area, 2015)



Sources: • 2015 PRC Child & Adolescent Health Survey, Professional Research Consultants, Inc. [Items 322-323]

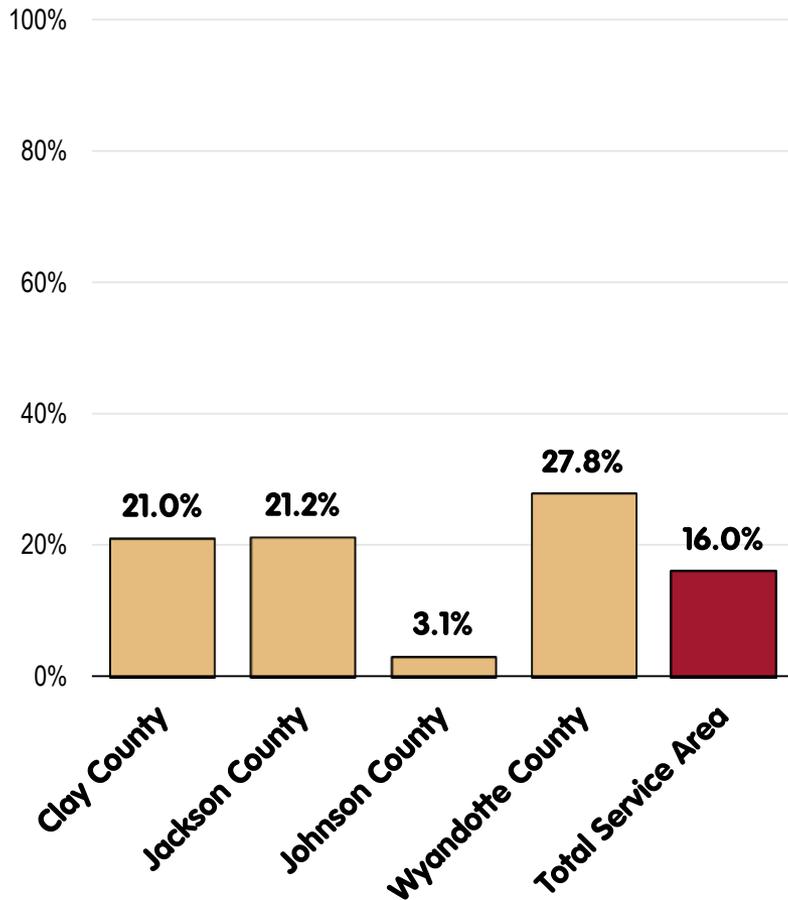
Notes: • Asked of respondents all respondents about a randomly selected child in the household.

# "I Worried About Whether Our Food Would Run Out Before We got Money to Buy More"



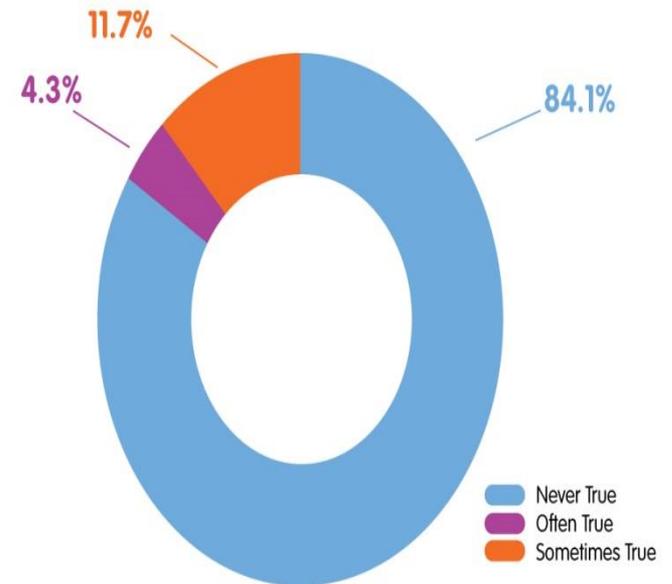
# "The Food Didn't Last and Didn't Have Money"

(Total Service Area Parents, 2015)



## "The Food We Bought Just Didn't Last, and We Didn't Have Money to Get More"

(Total Service Area Parents, 2015)



Sources: • 2015 PRC Child & Adolescent Health Survey, Professional Research Consultants, Inc. [Item 321]

Notes: • Asked of all respondents.

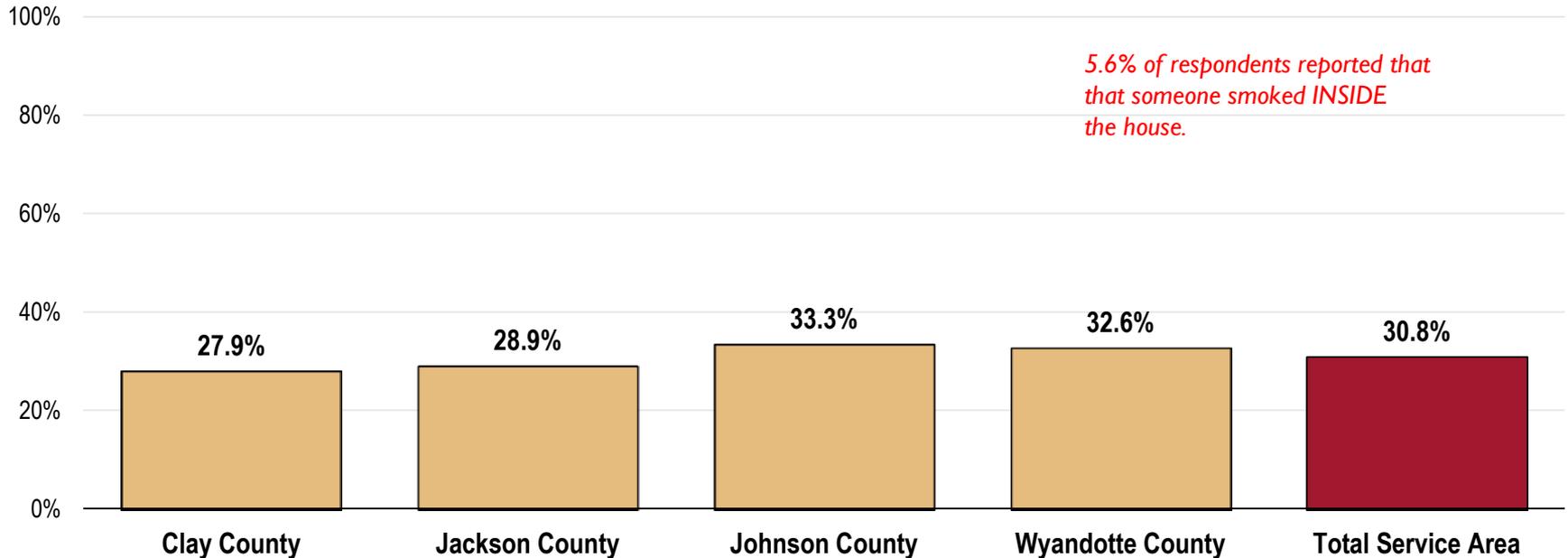
# Housing

- Approximately 50% of very low-income families live in homes built before 1950.
- Low-income black and Hispanic children in Jackson and Wyandotte County are most likely to have gone without electricity, hot water or heat in the past year.
- Black children of very low income are more likely to live in homes with peeling paint, long lasting stale odor or water leaks or flooding.

# Housing

- 16.2% Moved Residences at Least Once in the Past Year
- 43.7% of Families Worried or Stressed About Having Money for Rent or Mortgage Payment

# Someone Smokes Tobacco OUTSIDE the House (Total Service Area, 2015)



Sources: ● 2015 PRC Child & Adolescent Health Survey, Professional Research Consultants, Inc. [Item 317]

Notes: ● Asked of all respondents.

# Children's Mercy Community Health Needs Assessment

**Rate of Elevated Blood Lead Test Results in Children**  
**Percent of Tested Population >5 mcg/dL**  
**Kansas City Metro Area, 2014**

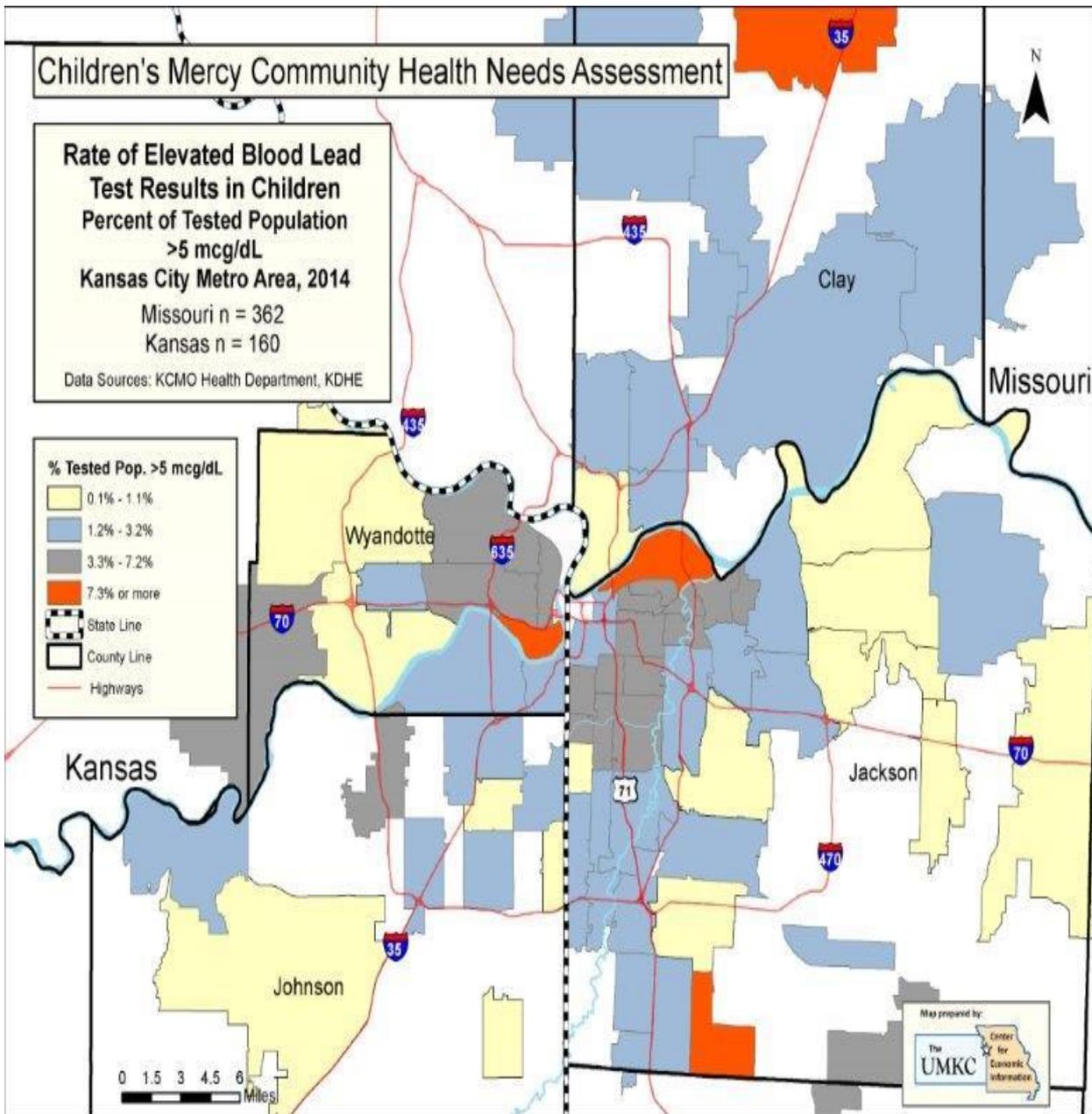
Missouri n = 362  
Kansas n = 160

Data Sources: KCMO Health Department, KDHE

**% Tested Pop. >5 mcg/dL**

- 0.1% - 1.1%
- 1.2% - 3.2%
- 3.3% - 7.2%
- 7.3% or more

- State Line
- County Line
- Highways



Kansas

Clay

Missouri

Wyandotte

Jackson

Johnson



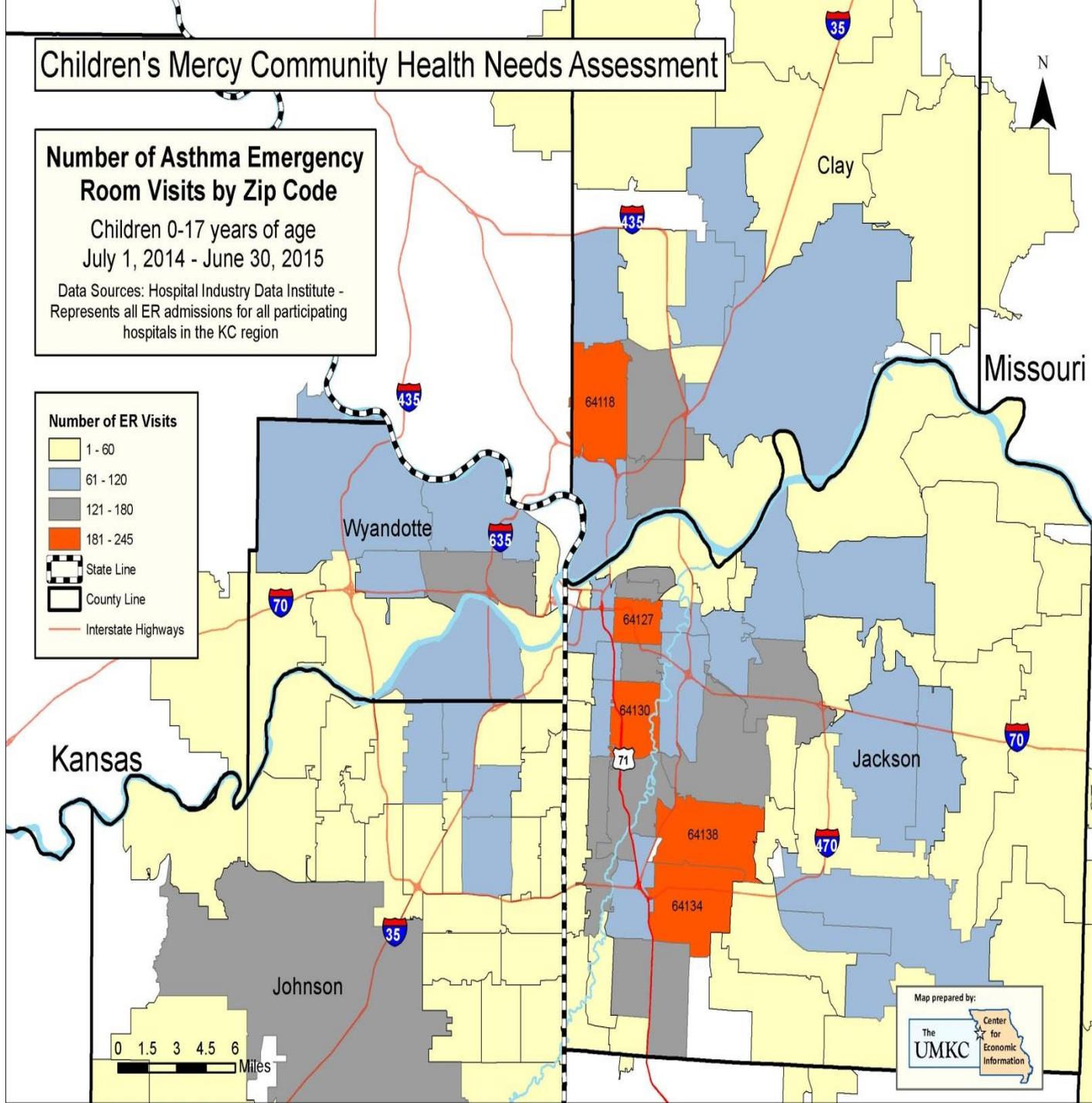
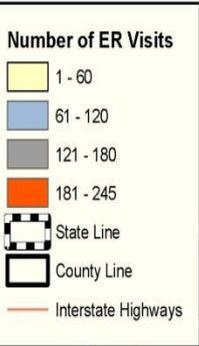
Map prepared by:  
The UMKC Center for Geographic Information

# Children's Mercy Community Health Needs Assessment

## Number of Asthma Emergency Room Visits by Zip Code

Children 0-17 years of age  
July 1, 2014 - June 30, 2015

Data Sources: Hospital Industry Data Institute -  
Represents all ER admissions for all participating  
hospitals in the KC region



Map prepared by:  
The UMKC Center for Economic Information

# The Built Environment

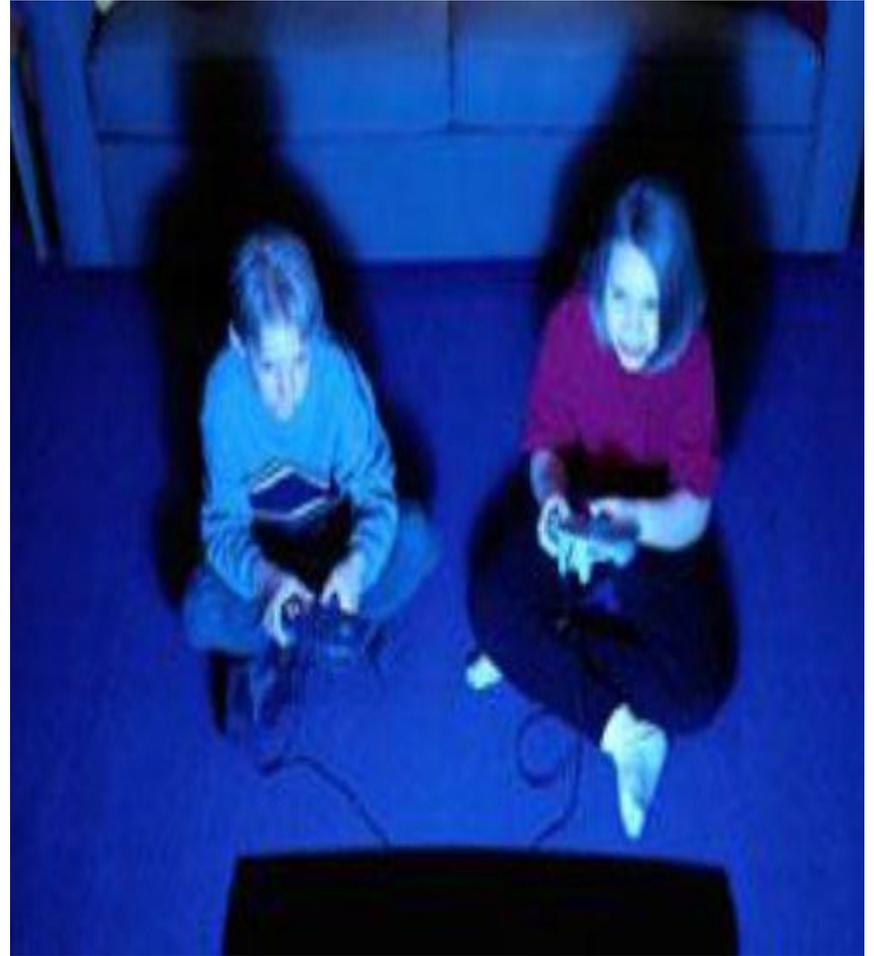


- Far too many children live in neighborhoods with:
  - Vacant Properties
  - Poorly kept housing
  - High levels of Vandalism
  - Litter and loose garbage

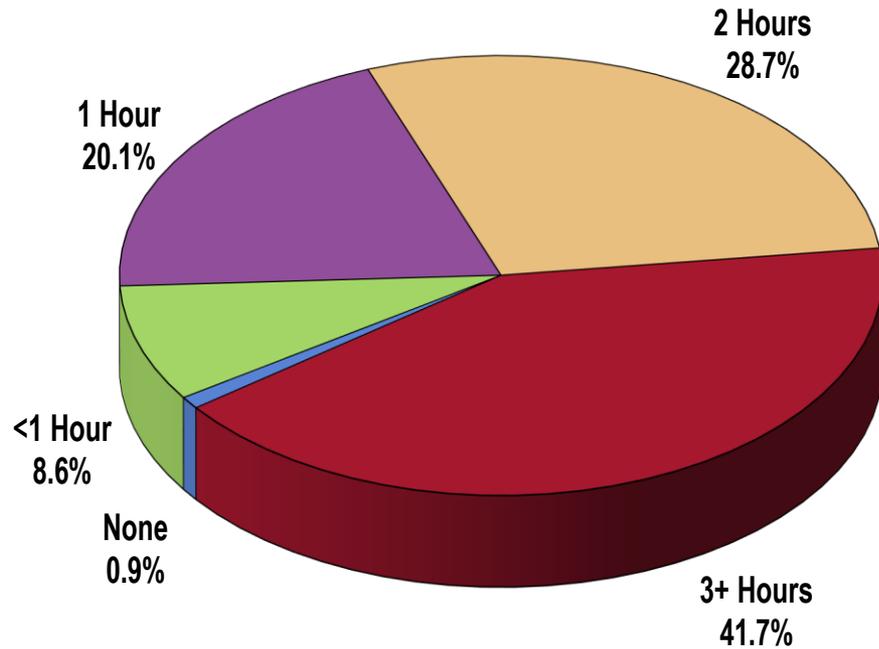
2015 PRC Child & Adolescent Health Survey-Kansas City

# Physical Activity

- A majority ( of children in the TSA (2-17 yrs) had  $\geq 60$  min physical activity on each of the seven days preceding the interview. Hispanic children had lower rates.
- A total of 70.4% of school-age children in the TSA spend two or more hours/day on screen time.



# Hours per Weekday of Total screen Time (TV, Computer, Video Games, etc.) (Total Service Area Children Age 5-17, 2015)



Sources: • 2015 PRC Child & Adolescent Health Survey, Professional Research Consultants, Inc. [Item 318]

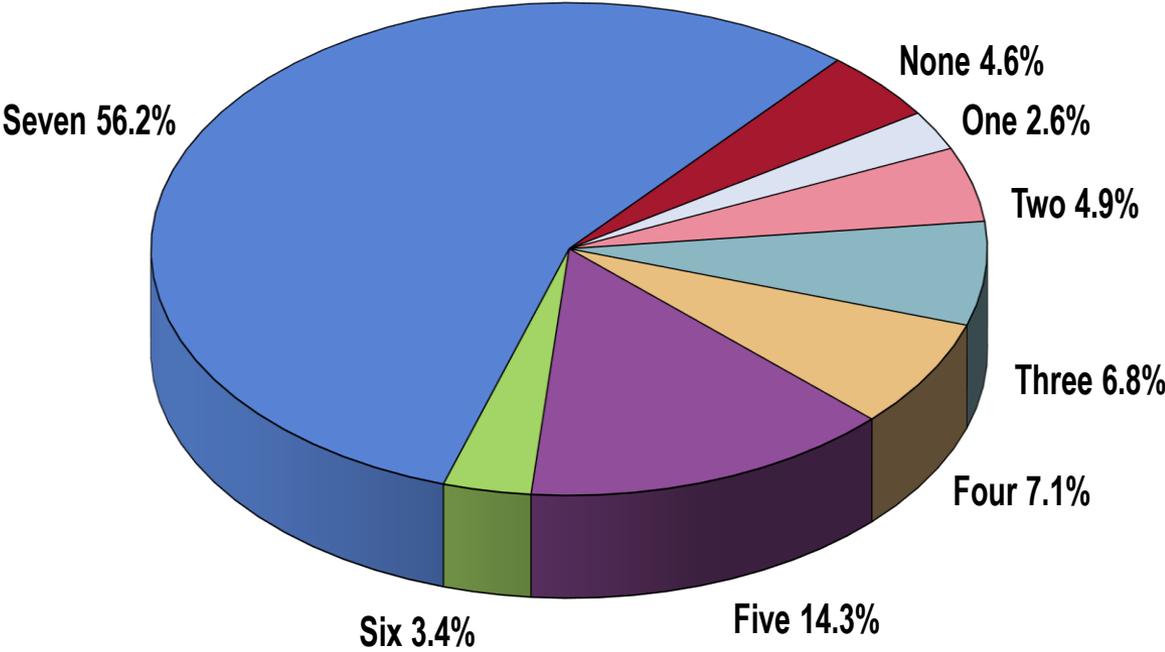
Notes: • Asked of respondents for whom the randomly selected child in the household is age 5 to 17.

• For this issue, respondents were asked about an average weekday.

• “Three or more hours” includes reported screen time of 180 minutes or more per day.

# Number of Days in the Past Week on Which Child Was Physically Active for One Hour or Longer

(Total Service Area Children Age 2-17, 2015)



Sources: ● 2015 PRC Child & Adolescent Health Survey, Professional Research Consultants, Inc. [Item 124]

Notes: ● Asked of those respondents for whom the randomly selected child in the household is between the ages of 2 and 17.



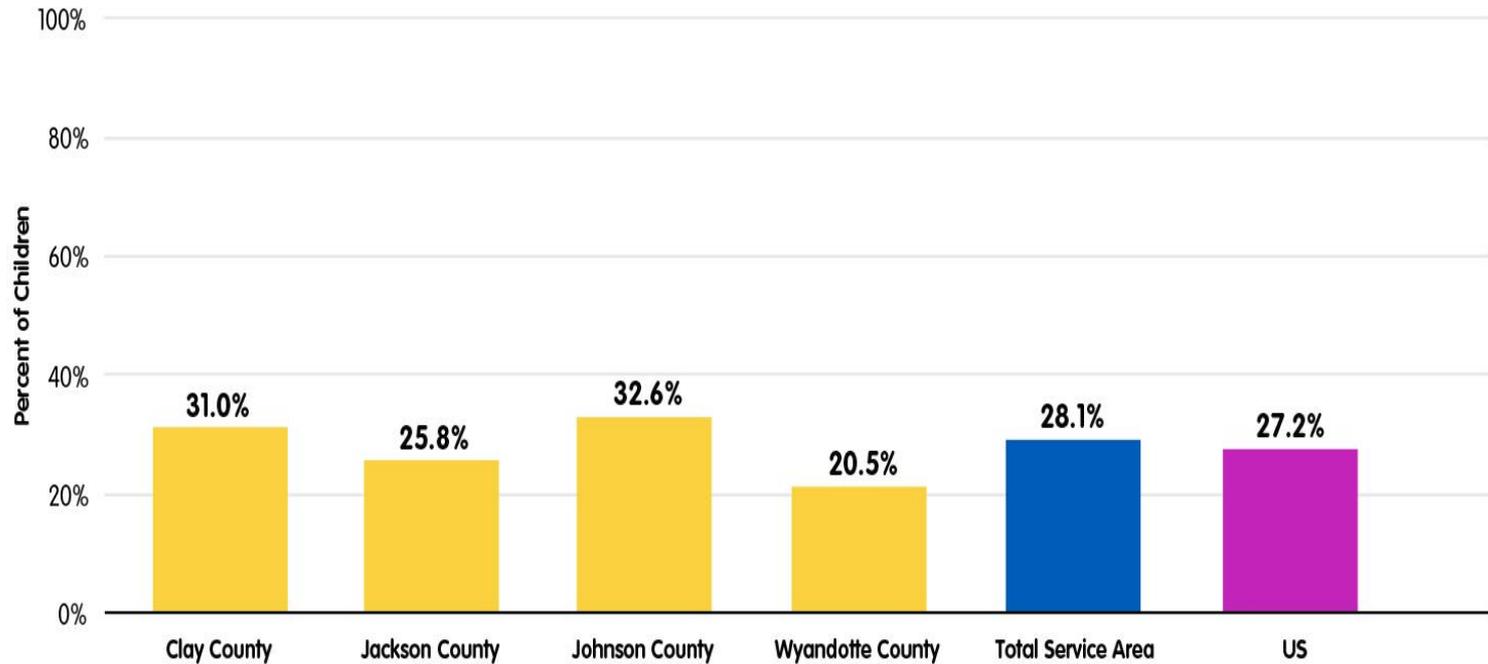
# *Physical Activity & Sedentary Behavior*



*“Children are programmed to enjoy physical activity. Our environments and policies socialize them out of it.”*

*Steven Gortmaker, PhD*

# Child Was Exclusively Breastfed for at Least 6 Months (Total Service Area, 2015) Healthy People 2020 Target = 25.5% or Higher

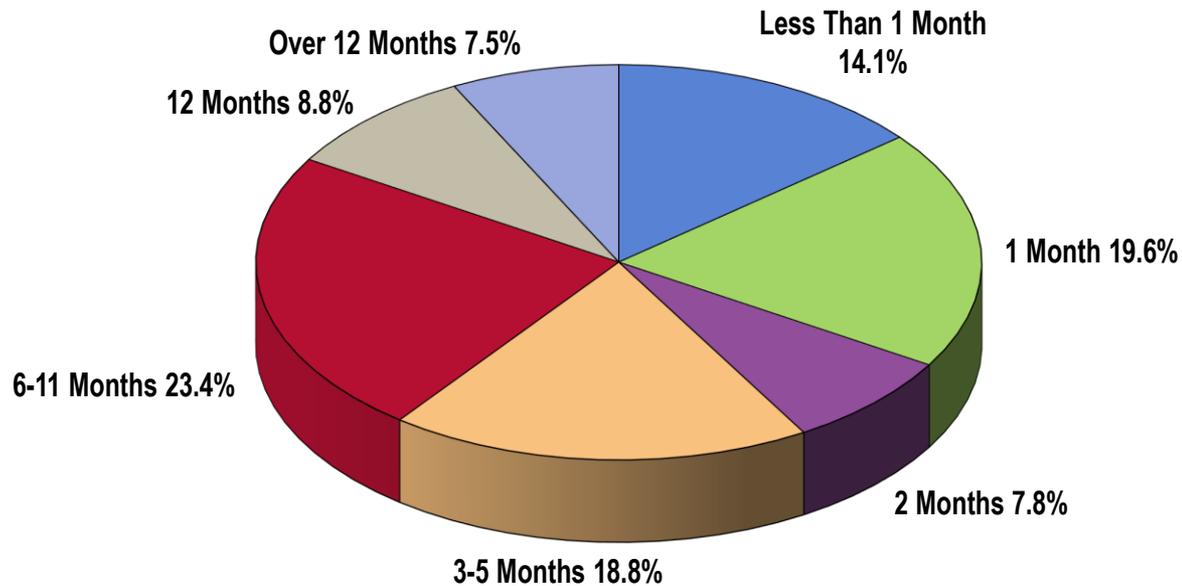


Sources: • 2015 PRC Child & Adolescent Health Survey, Professional Research Consultants, Inc. [Item 159]  
• 2014 PRC National Child & Adolescent Health Survey, Professional Research Consultants, Inc.  
• US Department of Health and Human Services. Healthy People 2020. December 2010.  
<http://www.healthypeople.gov> [Objective MICH-21.5]

Notes: • Asked of all respondents about a randomly selected child in the household.

## Age of Child When Introduced to Foods Other Than Breast Milk

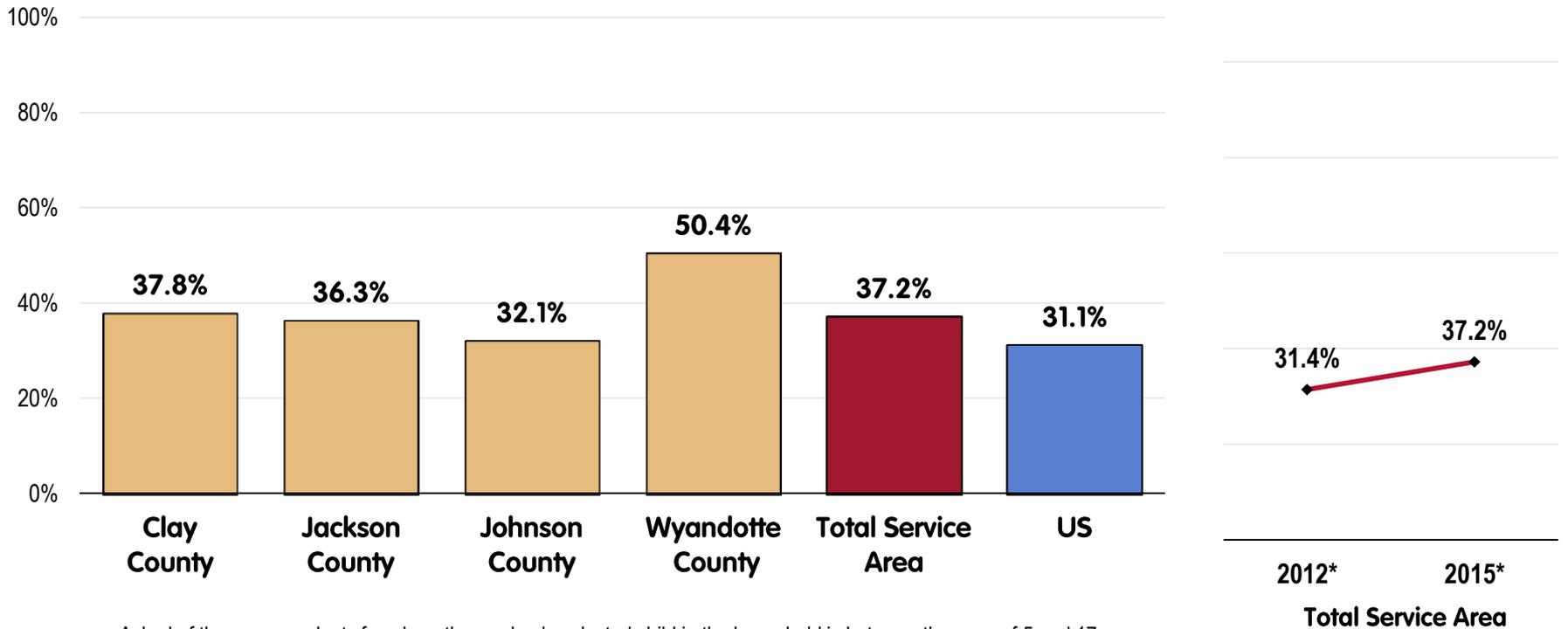
(Among Parents of US Children Who Were Ever Fed Breast Milk, 2014)



Sources: • 2014 PRC National Child & Adolescent Health Survey, Professional Research Consultants, Inc. [Item 135]  
Notes: • Asked of those respondents with a randomly selected child who was fed breast milk as an infant.

# Child Is Overweight or Obese

(Johnson & Wyandotte Counties, Kans. and Clay & Jackson Counties, Mo., Children Age 5-17 With a BMI in the 85<sup>th</sup> Percentile or Higher)



- Asked of those respondents for whom the randomly selected child in the household is between the ages of 5 and 17.
- Overweight among children 5-17 is determined by child's Body Mass Index status at or above the 85<sup>th</sup> percentile of US growth charts by gender and age.
- \* Note that BMI was calculated slightly different in the 2012 and 2015 studies: in 2012, age-in-years midpoints were used to calculate BMI; in 2015, BMI cutoffs were based on child's actual age in both years and months. Analysis shows that the difference between the two calculation methods is marginal.



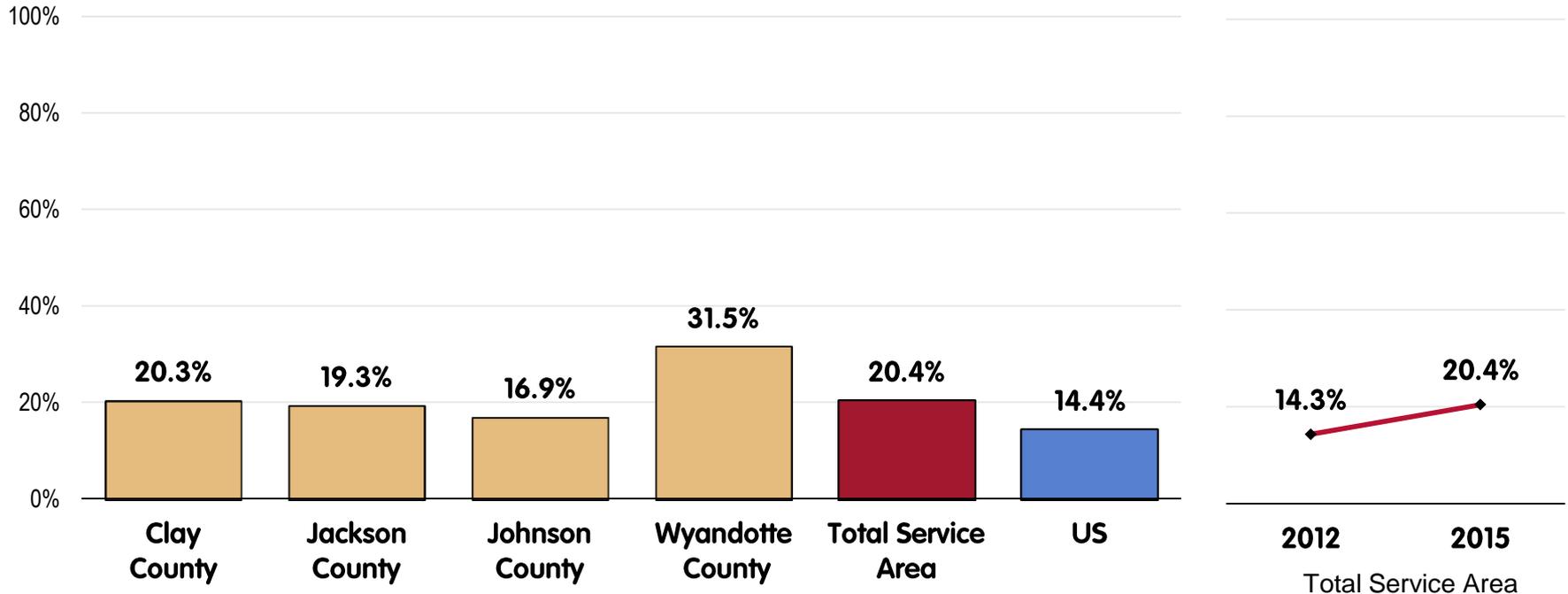
Notes: • Children's Mercy Hospital Community Health Needs Assessment, 2016. [www.childrensmc.org/About/Us/Community\\_Health\\_Assessment](http://www.childrensmc.org/About/Us/Community_Health_Assessment)

• Asked of all respondents about a randomly selected child in the household.

Source: • 2015 PRC Child & Adolescent Health Survey-Kansas City, Professional Research Consultants, Inc. [Items 326-333]

# Child Obesity Prevalence

(Johnson & Wyandotte Counties, Kans. and Clay & Jackson Counties, Mo.,  
Children Age 5-17 with a BMI in the 95th Percentile or Higher)  
Healthy People 2020 Target = 14.5% or Lower



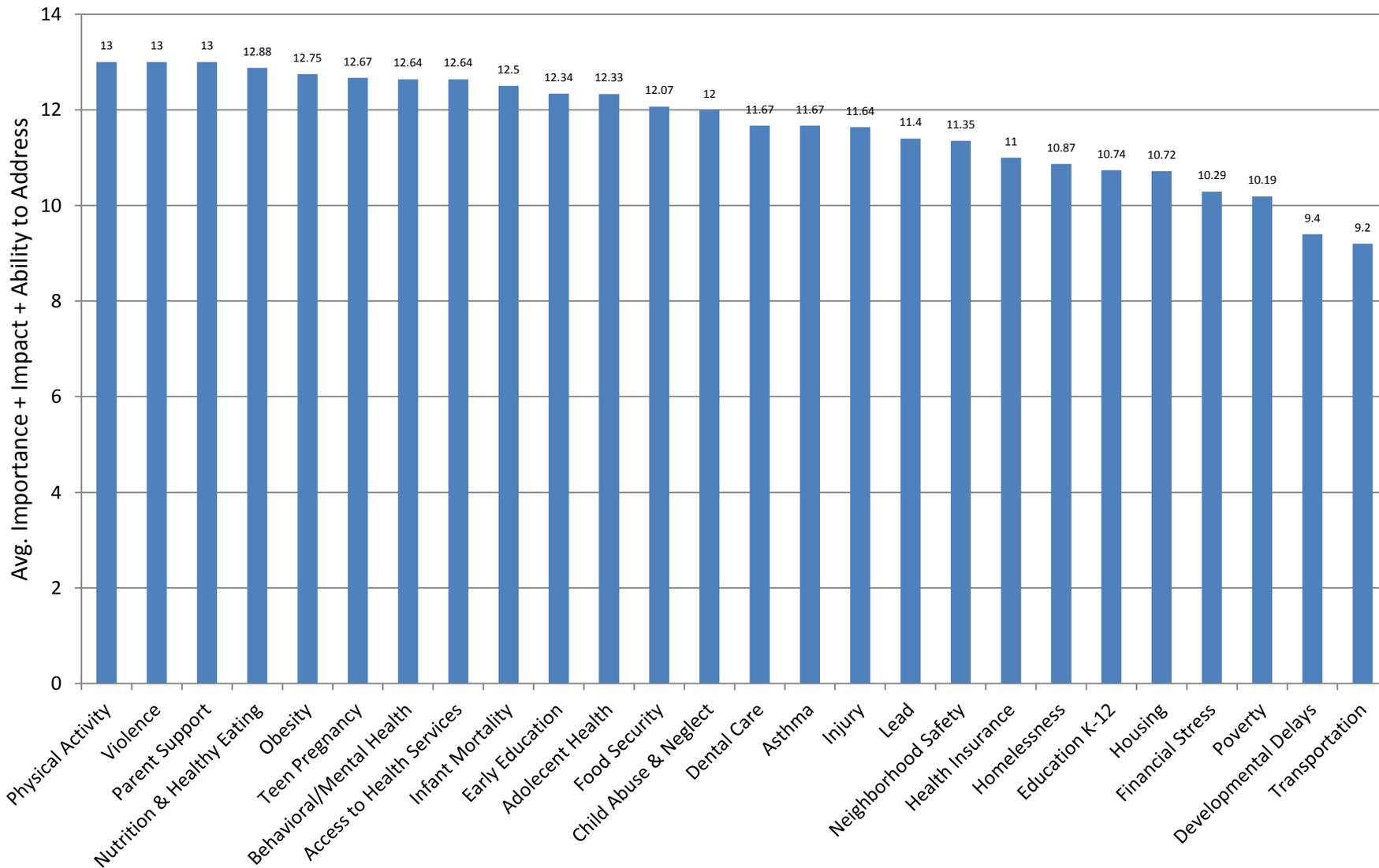
- US Department of Health and Human Services. Healthy People 2020. December 2010. <http://www.healthypeople.gov> [Objective NWS-10.4]
- Asked of those respondents for whom the randomly selected child in the household is between the ages of 5 and 17.
- Obesity among children is determined by children's Body Mass Index status equal to or above the 95<sup>th</sup> percentile of US growth charts by gender and age.

Notes: • Children's Mercy Hospital Community Health Needs Assessment, 2016. [www.childrensmc.org/About/Us/Community\\_Health\\_Assessment](http://www.childrensmc.org/About/Us/Community_Health_Assessment)  
 • Asked of all respondents about a randomly selected child in the household.  
 Source: • 2015 PRC Child & Adolescent Health Survey-Kansas City, Professional Research Consultants, Inc. [Items 326-333]



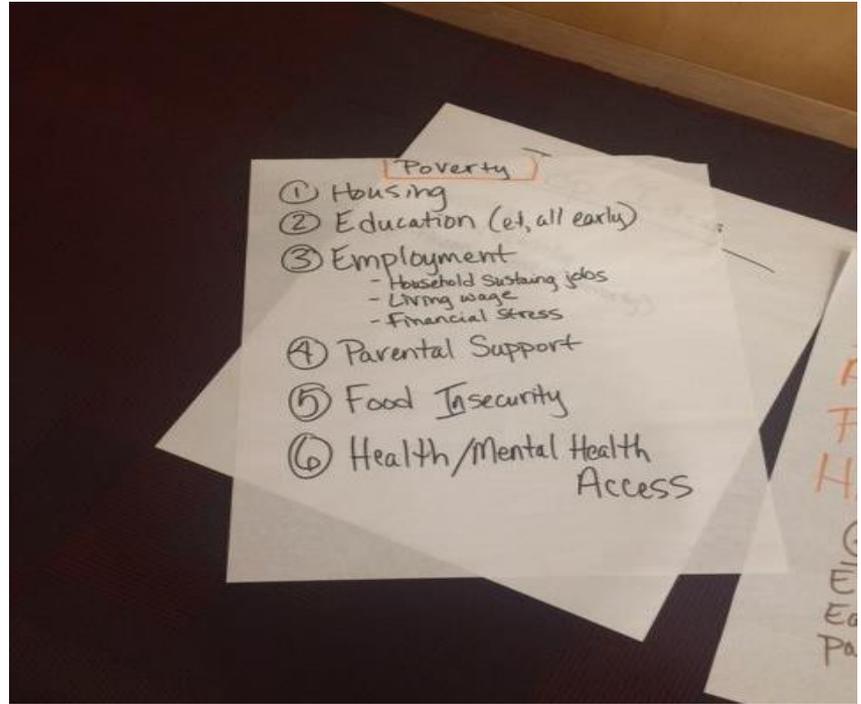
## Important/Impact/Ability Rating of 26 Issues Affecting Children's Health in the KC Region by participants at March 11, 2016 CMH Child Health Summit

**Top Score was a 15**



# Children's Health Summit: Community Priority Setting Process

## 168 Attendees

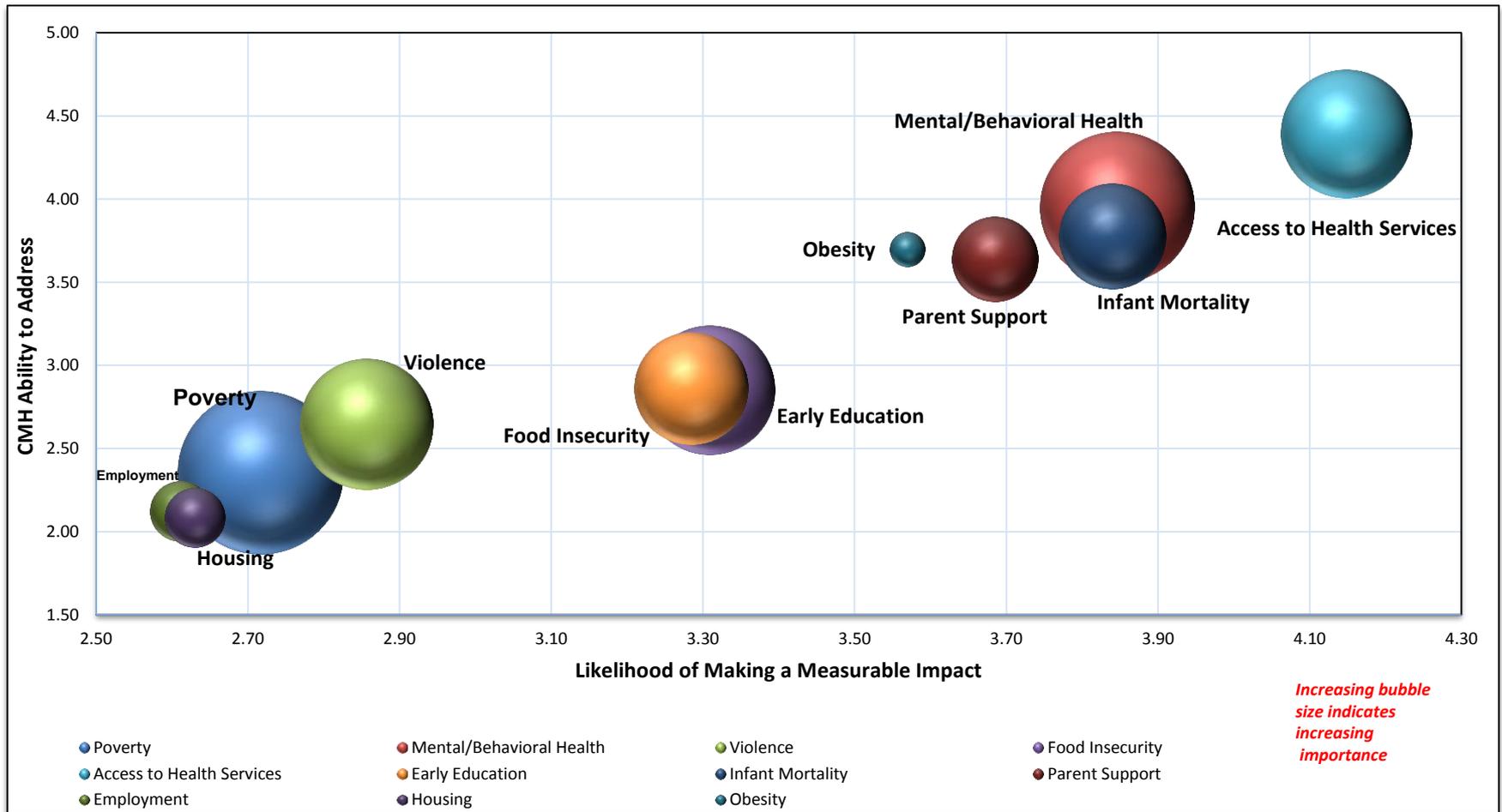


### **Community Identified Major Issues Influencing Children's Health:**

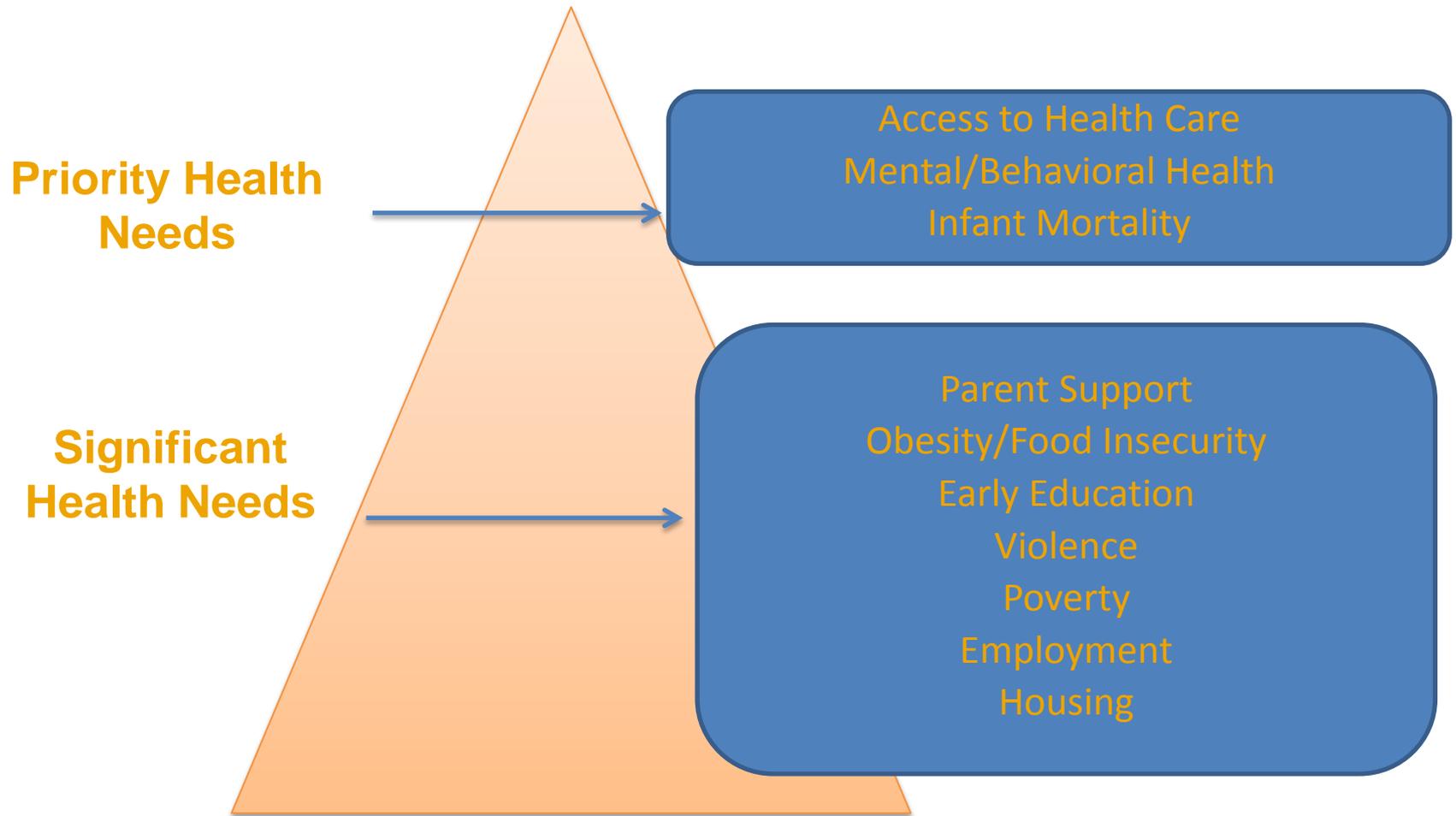
Access to Health Services, Early Education, Employment, Food Insecurity, Housing, Infant Mortality, Mental/Behavioral Health, Obesity, Parent/Family Support , Poverty, Violence

# CMH Internal Rating of Significant Health Needs

## n=81



# 2016-2019: Priority Health Needs



# For more information:

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