Ann & Robert H. Lurie
Children's Hospital of Chicago®

2020-2022

COMMUNITY HEALTH IMPLEMENTATION STRATEGY PROGRESS REPORT

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Executive Summary

In 2019, Lurie Children's conducted a comprehensive Community Health Needs Assessment (CHNA) to guide the hospital's ongoing efforts to improve the health and wellbeing of Chicago's youth and their families. The CHNA informed the Community Health Implementation Strategy (CHIS), which serves as a blueprint for community health efforts for 2020-2022. The overarching goal of the CHIS is to **improve the health and wellbeing of children and adolescents and advance health equity for youth and their families.**

Through the assessment process, the following community health priorities were identified and unanimously adopted by Lurie Children's Medical Center Board of Directors:

1. Addressing social and structural determinants, or influencers, of health and improving access to care and community resources
2. Addressing the risk factors, prevention and management of chronic health conditions
3. Improving mental and behavioral health
4. Preventing unintentional and violence-related injuries and mortality

For each of these priority areas, the CHIS outlined strategies for implementation and key metrics. Details of these goals can be found in the 2020-2022 Community Health Implementation Strategy for Chicago youth, adolescents and families.

Overview of progress

The last three years have been marked with great challenges, but thanks to the steadfast dedication and resilience shown by the Lurie Children's workforce and community partners, we have made significant progress in addressing our community health priorities. Our highlights include:

Anchor Mission

- **Lurie Children's provided $1 million in loans for community development projects as a founding hospital of West Side United,** a collaborative of healthcare, community and business institutions formed to improve health and wellbeing on Chicago's West Side. **Lurie Children's also invested $25,000 annually in the West Side United Small Business Grant Pool** to strengthen and build the economic resilience of the community. In total, West Side United members provided $8.1 million in community development projects and $575,000 in the small business grant pool, providing critical support to small businesses during the disruption caused by the COVID-19 pandemic.

- **In FY21, 24 percent of new hires and nearly 20 percent of total employees lived in ZIP codes designated as areas of focus** by Senator Richard Durbin's Chicago HEAL Initiative to strengthen neighborhood engagement, reduce violence and improve health.

- **Lurie Children's has redirected procurement spend in the amount of over $3.2 million to vendors in the Chicago HEAL Initiative ZIP codes.**

- **In FY21, the Lurie Children's invested $231 million** in unreimbursed medical care, Medicaid losses and community benefit programs, an increase of more than 27 percent over investments prior to the pandemic.

Addressing Racism in Healthcare

- **Lurie Children's established the President's Council for Equity, Diversity and Inclusion (EDI)**, which developed the CARE Framework to drive multicultural partnerships and engagement, develop socioeconomically diverse talent communities, optimize people development and provide equitable, high-quality care to all patients and families.

- **Lurie Children's Mentorship & Workforce Development Program grew to include 16 internship and training opportunities serving youth and young adults, from middle school to college**. In 2020-2021, **over 560 youth** participated in Workforce Development programs. In just the last fiscal year, Lurie Children's hired over 20 program alumni in a variety of departments including Central Supply, Psychiatry, Epilepsy Center and Sleep Medicine Center.

- **Over 20 percent of non-physician new hires and over 10 percent of employees who received a promotion reside in disinvested communities** with limited economic, education and professional opportunities.

Access to Care

- **Lurie Children's established its Social and Structural Influencers of Health (SIoH) committee**, which developed a protocol for incorporating SIoH screening and data collection into our standard of care. In support of this, Lurie Children's integrated NowPow into Epic, allowing providers and community engagement staff **to provide patients with a personalized list of local community resources and support.** As of March 2022, **more than 26,500 patients have been screened for SIoH.**

- Within one month of the executive order 2020-10 (the "Stay at Home" order), Lurie Children's implemented telehealth services, with the **average number of telehealth visits approaching 6,000 each month towards the end of 2020.** To ensure that telehealth remains a viable option for Lurie Children's patients, the Collaborative for Children's Health Policy worked with Illinois state representatives and senators to pass Public Act 102-0104, telehealth parity law to provide quality, affordable and safe virtual healthcare.

- **To bring quality pediatric services and resources directly to the communities**, Lurie Children's launched the Mobile Health Program. Since 2019, the mobile unit has visited more than 40 schools throughout Chicago, conducting COVID-19 testing for 600+ students and teachers across 13 schools and vaccinating 1,500 youth and school/childcare staff in communities most severely affected by the COVID-19 pandemic. The Mobile Health Program also provides school and sports physicals, immunizations, specialty asthma care, HIV and substance use risk screening, linkages to community-based services, naloxone distribution and sexual health training to communities throughout the city, and its services are continuing to expand.

- **In early 2022, Lurie Children's launched the All Hands Health Network**, a socially and clinically integrated network that aims to serve up to 43,000 children and their families living in the Belmont Cragin and north Austin neighborhoods of Chicago.

Caregiver and Community Supports

- In close partnership with Chicago Public Schools, 13 Lurie Children's departments and divisions **provided over 40 programs to schools including health services, education and training and resource provision to thousands of students, parents, teachers, school staff and administrators.**

- Through its leadership of West Side United's Healthy Food Access Working Group, **the Consortium to Lower Obesity in Chicago Children (CLOCC) increased seven West Side food pantries' capacity** to provide healthy food and nutrition education to their clients.

- Communities across Chicago continued to engage in CLOCC's Neighborhood Walkability and Accessibility Initiative (NWAI) to identify and address challenges to walking and other forms of active transportation and we have seen that engagement led **to transportation infrastructure changes from Belmont Cragin to Garfield Park.**

Mental and Behavioral Health

- **In partnership with Chicago Public Schools (CPS), Lurie Children's Center for Childhood Resilience (CCR) expanded the Behavioral Health Team Model, a comprehensive and collaborative system to better identify and respond to Pre-K-12 students who need mental health support**. Piloted in 200 schools between 2020-2021, the program will expand to all District schools and aims to strengthen the District's response to the escalating national youth mental health crisis that has been exacerbated by the COVID-19 pandemic.

- **Lurie Children's began universal mental health screening in well-child visits** and has created and expanded training programs to **enhance workforce capacity and educate pediatricians to screen, identify and treat patients for mental health issues** such as mild to moderate anxiety, depression, ADHD and disruptive behaviors.

- **Lurie Children's Substance Use Prevention Program conducted 90 trainings (reaching 1,928 youth across 12 schools and organizations)** that detail the health effects of substance use including cannabis, alcohol and nicotine vaping.

Unintentional Injury Prevention

- **Lurie Children's Safe Sleep Program trained 42 Safe Sleep Ambassadors on Chicago's South Side** to educate their communities about safe sleep practices. The Ambassadors have distributed more than **300 Safe Sleep Kits** to their communities.

- **Lurie Children's Buckle Up Program conducted 227 education sessions** focused on motor vehicle and car seat safety, reaching 1,239 community members. **1,451 car seats have been distributed** to eligible families and **15 Car Seat Safety Technicians** have been trained.

- **Lurie Children's Injury Prevention Program was the only initiative that distributed car seats and cribs** to Chicagoans **consistently through the pandemic.**

Policy Improvements and Advocacy

- Lurie Children's Collaborative for Children's Health Policy worked with legislators on several bills focused on child and adolescent health and were key advocates for two bills that **passed focused on firearm safety**:
    - **HB562**, which requires universal background checks on all sales, including private sales, and strengthens the Firearm Owners Identification (FOID) system
    - **HB 1092 Firearm Restraining Order**, which expands the definition of petitioner and addressed oversights in original law
- Lurie Children's Potocsnak Family Division of Adolescent and Young Adult Medicine helped develop, advocate and support rollout of **SB 818,** which creates personal health and safety standards for grades K-5 and updates and expands comprehensive sexual health education standards in grades 6-12 to give young people the information and tools they need to be safe and support responsible and informed decision making about their health and well-being throughout their lives.

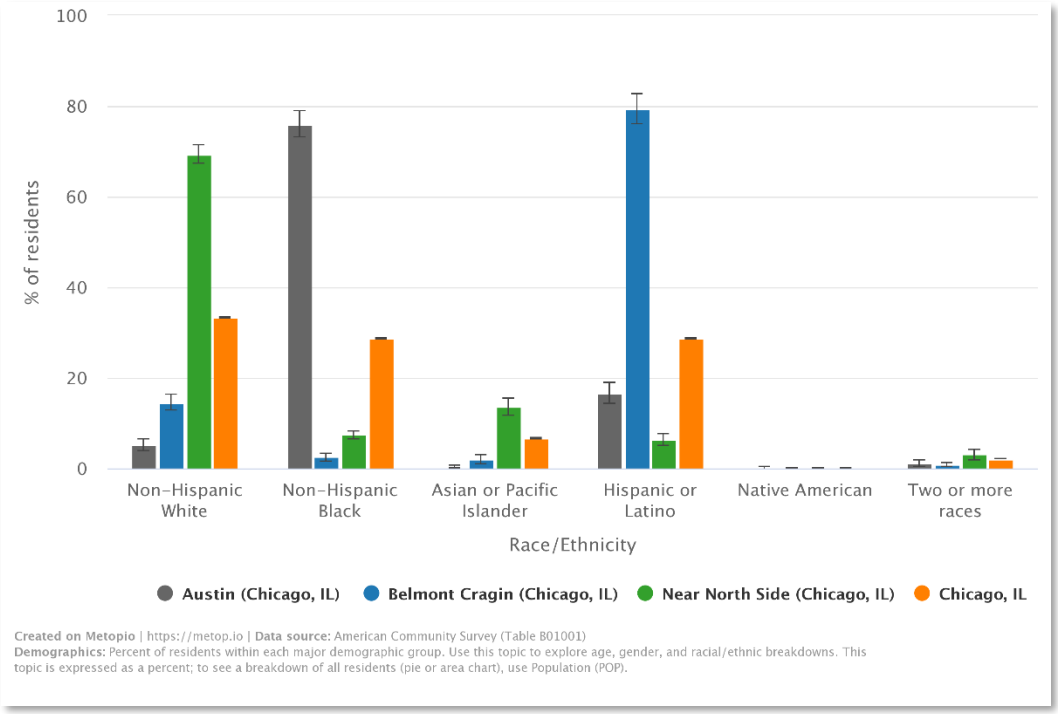
Place-based and Collaborative Initiatives

Given the complex and interrelated nature of health challenges in Chicago communities, particularly communities that have experienced historic and ongoing disinvestment, Lurie Children's has initiated intensive partnerships in West Side two neighborhoods.

In 2019, using neighborhood-level and Lurie Children's patient data, including emergency room visits, potential child maltreatment referrals and number of patients waiting for mental health services, the hospital identified two specific ZIP codes (60639 and 60651) with the highest patient volumes. These ZIP codes include the Austin and Belmont Cragin neighborhoods and have been identified as our communities of focus for these reasons.

Figures 1-4 provide a comparison of a few key metrics between Austin, Belmont Cragin, Near North Side, where Lurie Children's main hospital is located, and the City of Chicago. Austin residents are predominately Black, Belmont Cragin residents are predominately Hispanic/Latinx, Near North Side residents are predominately white, while these populations are approximately equivalent across Chicago (Figure 1).

Figure 1. Demographics by race and ethnicity, 2016-2020 for Austin, Belmont Cragin, Near North Side (where Lurie Children's main hospital is located) and Chicago.



In terms of available medical services and providers, Austin has nearly three times the federally-qualified health centers (FQHCs) compared to Belmont Cragin (Figure 2); however, Near North Side has as much as 70 times more pediatric providers (Figure 3). Much of Lurie Children's place-based efforts have focused on closing this gap and implementing initiatives to provide care and services closer to home for Austin and Belmont Cragin residents through collaborative partnerships with key community providers and social service agencies. In addition, building economic vitality is an important collaborative priority of our Anchor Mission initiatives.

Figure 2. Federally qualified health centers (FQHCs) in Austin, Belmont Cragin and Near North Side (2020)

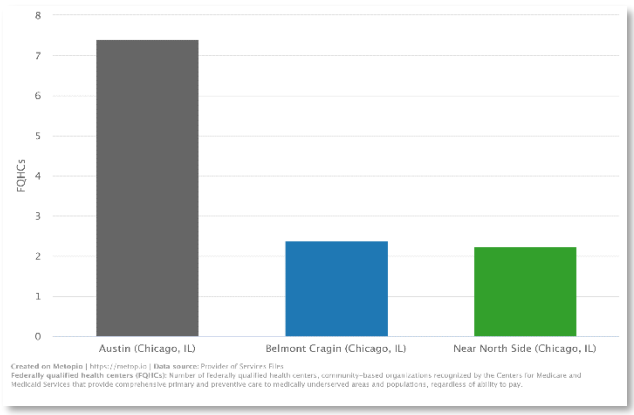
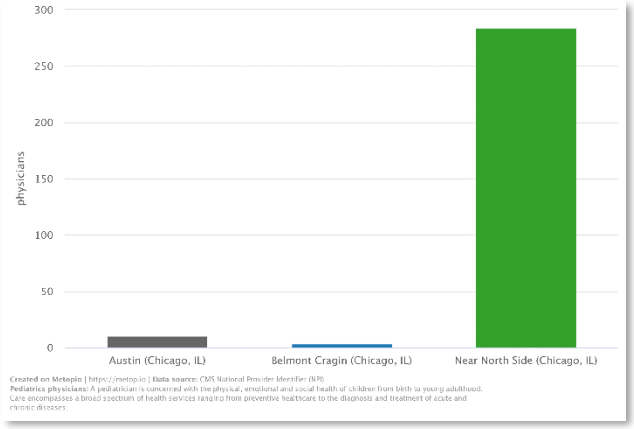


Figure 3. Pediatric physicians in Austin, Belmont Cragin and Near North Side (2021)



By focusing our efforts on specific geographic areas, we can anchor our work and strengthen partnerships with community-based leaders and organizations. We are proud to partner with the following organizations in implementing the 2020-2022 Community Health Implementation Strategy broadly, and our Anchor Mission activities specifically:

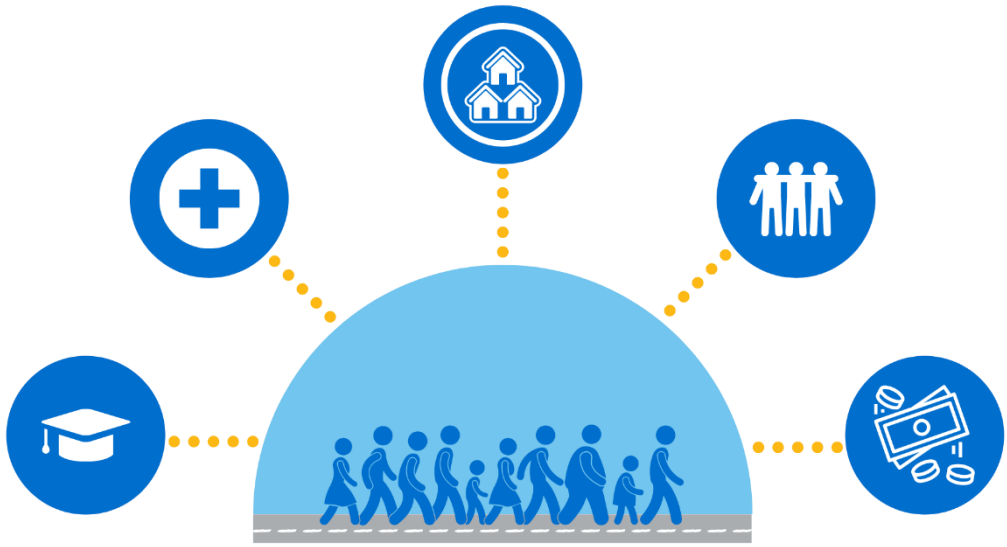
- **The Alliance for Health Equity**, a collaborative within the Illinois Public Health Institute that includes hospitals, health departments and community organizations across Chicago and Cook County. The Alliance for Health Equity's purpose is to improve population and community health by promoting health equity, building capacity, addressing social and structural determinants of health, developing city and county-wide initiatives, working collaboratively with community partners, developing data systems for population health and collaborating on health policy and advocacy.
- **The Chicago Hospital Engagement Action and Leadership (HEAL) Initiative**, a collaborative of the 10 largest hospitals working together with U.S. Senator Dick Durbin (D-IL) to reduce gun violence, heal the physical and mental trauma that violence inflicts on victims, increase paid job opportunities and create economic opportunities in the communities they serve.
- **West Side United,** a group of healthcare providers, educators, the faith community, business, government entities working together to coordinate investments in Chicago's West Side and build healthy, vibrant neighborhoods. West Side United addresses inequities in healthcare, education, economic vitality and the physical environment using a cross-sector, place-based strategy. West Side neighborhoods include 10 community areas: Austin, Belmont Cragin, Near West Side, West Town, Lower West Side, East Garfield Park, West Garfield Park, North Lawndale, South Lawndale and Humboldt Park.
- **Federally Qualified Health Centers (FQHCs)** throughout Chicago that play a significant role in eliminating disparities in access to healthcare and are Lurie Children's most significant partners in providing primary care to children and adolescents in disinvested communities.
- **The Democracy Collaborative's Healthcare Anchor Network,** a group of 65+ hospitals and health systems committed to building more inclusive and sustainable local economies. This group shares innovative ideas and best practices to expand hospitals' role as anchor institutions by increasing community hiring, procurement and investment opportunities.

Priority Area 1: Social and Structural Influencers of Health and Access to Care

The term Social and Structural *Influencers* of Health (SIoH) is defined as the conditions in which we are born, live, learn, work, play and age that affect a wide range of physical and behavioral health, functioning and quality-of-life outcomes. [1] At Lurie Children's, we consciously choose to use the term "influencers" rather than the more commonly used "determinants" of health in recognition of the fact that these conditions and their outcomes are not unchangeable nor predetermined, but instead can and ought to be improved. Examples of key SIoH include, but are not limited to (Figure 4):

- **Education access and quality**, such as public schools that foster young people's knowledge as well as their social and emotional development
- **Access to quality, affordable physical, mental and behavioral healthcare**, such as capable, qualified and culturally competent providers
- **Neighborhoods and the built environment**, such as access to stable and affordable housing, transportation, nutritious foods and opportunities for physical activity
- **Social and community context**, such as connectedness and a cohesive social fabric (or conversely, exposure to racism, discrimination and violence)
- **Economic stability,** such as steady employment, job opportunities and fair wages

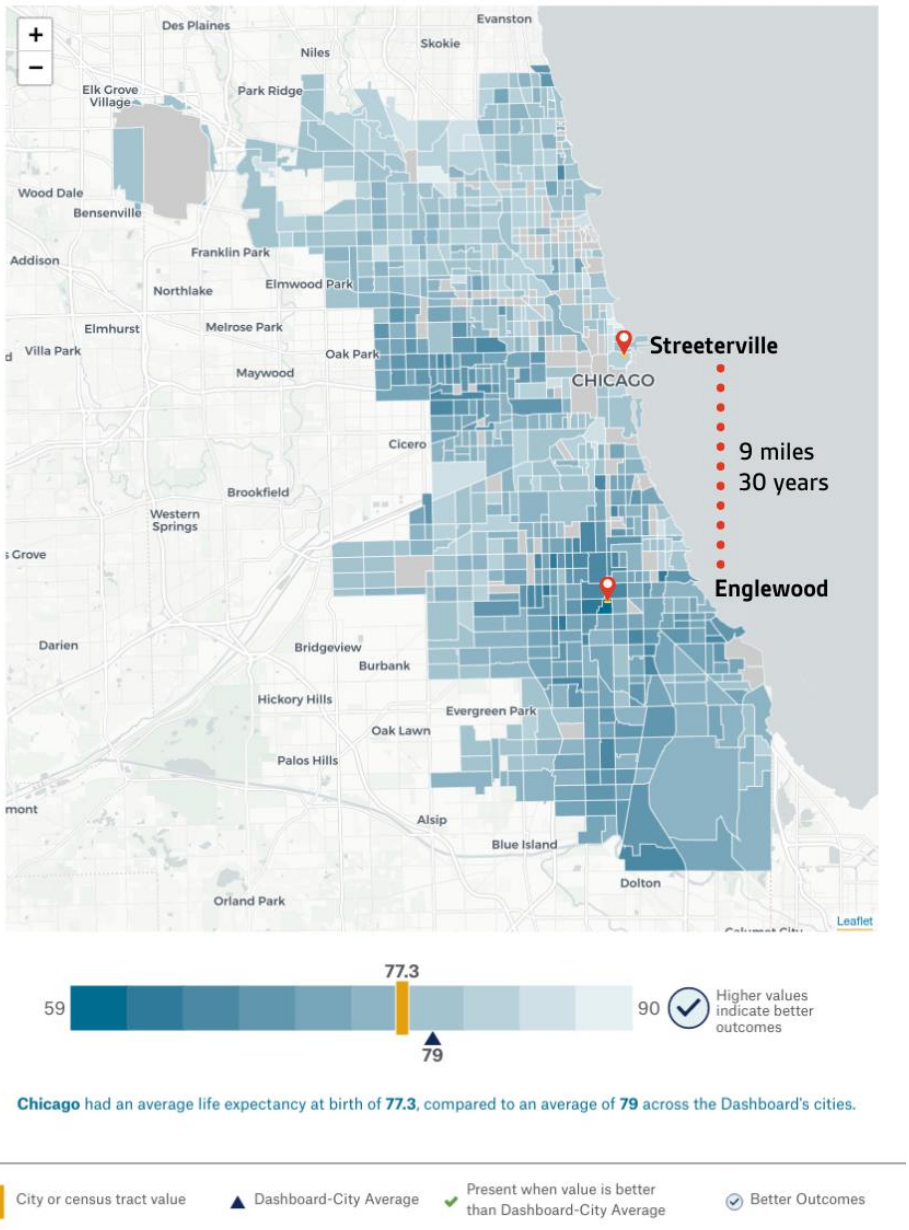
Figure 4. Social and Structural Influencers of Health



The impact of SIoH on health outcomes is well documented in research. For example, earning a high school diploma can decrease a person's risk of premature death. [2] Individuals who do not graduate high school are more likely to self-report overall poor health and more frequently report suffering from chronic health conditions like asthma, diabetes, heart disease and high blood pressure than graduates. [2] Another example that the COVID-19 pandemic made even more clear is the association between poor-quality housing and risks for poor mental health, food insecurity and infectious disease. [3]

SIoH, and the inequitable distribution of resources across neighborhoods results in vastly different quality of life and health outcomes for white, Black and Hispanic/Latinx communities. According to the Chicago Department of Public Health, there is a 10 year life expectancy gap between Black Chicagoans and non-Black Chicagoans, a gap that widens even further when comparing specific neighborhoods. For example, life expectancy in Streeterville, a neighborhood in Near North Side where Lurie Children's is located, is 90 years, but in Englewood, which is just 9 miles south, life expectancy drops to 60 (Figure 5). [4] [5] This is the largest life expectancy gap in the United States, but life expectancy gaps are evident throughout Chicago communities with disproportionate burden on West and South Side communities.

Figure 5. Life Expentancy in Chicago, IL (City Health Dashboard; Data from U.S. Small-area Life Expentancy Estimates Project: Life Expectancy Estimates File, National Center for Health Statistics, 2010-2015, 6 Year Modeled Estimate)



The Lurie Children's Community Health Implementation Strategy is committed to addressing the significant health inequities across Chicago, specifically those that disproportionately affect youth. To focus our efforts on areas that need most support, the hospital utilizes the Child Opportunity Index (COI), a composite measure of the accessibility of community resources and conditions that help children develop in a healthy way. [6] The COI considers the educational, health, environmental and socioeconomic aspects and resources available in the community. [6]

Through a collaborative assessment process, we identified the following core strategies for our SIoH efforts:

1. Increase activities that support the Lurie Children's Anchor Mission to address neighborhood disinvestment
2. Conduct SIoH screening, such as for social or economic needs, and connect patients with accessible resources and support
3. Develop supportive resources for parents and caregivers
4. Address racism in healthcare, both within our hospital and the healthcare system broadly
5. Support policy priorities that improve child and youth health through the Collaborative for Children's Health Policy
6. Provide mobile health services that bring quality care to our communities

Anchor Mission

Recognizing the link between health and economic vitality, Lurie Children's has adopted an "Anchor Mission," a commitment to intentionally utilize our economic power and human capital to address neighborhood disinvestment more directly. Our Anchor Mission drives us to set and achieve goals for workforce development and hiring, procurement and efforts to work with local community vendors and financial investment in West Side community development projects.

Initiative: Impact Investing

Due to ongoing effects of racially discriminatory practices such as redlining, predatory lending practices and restrictive covenants, the Chicago's West Side has not had equal access to economic advancement as Chicago's wealthier neighborhoods. [7] Less access to quality education, jobs and employment opportunities inhibits the economic development of the West Side, which is central to creating stability and positive health outcomes. [7] As a significant economic driver and one of the largest employers in Chicago, healthcare systems have a responsibility to invest intentionally to address generations of unjust economic practices.

To improve the social and environmental conditions of Chicago's West Side, Lurie Children's has worked with West Side United partners in investing in economic development projects. Together a total of $8.1 million was invested in four community development financial institutions (CDFIs) that loan the money to small businesses and vendors. Lurie Children's invested $1 million of the total amount.

Lurie Children's also invested $75,000 in West Side United small business grant pool, which distributed more than $1 million to over 85 small businesses including:

- Restaurants and catering services
- Landscaping and home improvement services
- Cleaning and janitorial services
- Tourism businesses
- Beauticians and boutiques

Initiative: Hiring and Procurement

To ensure access to opportunity, Lurie Children's places emphasis on inclusion in our recruitment and hiring initiatives, as well as improving diversity in the board of the Medical Center and its affiliates. A key part of our Equity, Diversity and Inclusion Strategic Plan includes the recruitment and promotion of Black and Hispanic/Latinx senior leaders. Annually, we aimed to hire at least 15 percent of new employees from

neighborhoods with a low/very low Child Opportunity Index. In 2020-2021, we exceeded that goal, with 20 percent of non-physician new hires and over 10 percent of employees who received a promotion residing in low/very low COI communities.

To mitigate the economic disparities and boost the economy of Chicago's West and South Sides, Lurie Children's has committed to enhancing our strategies for investing locally and working with local vendors for our procurement needs. Spending locally is essential to community economic vitality and, since 2018, West Side United's anchor partners have spent $90 million at local West Side businesses. In 2020-2021, Lurie Children's spent over $3.2 million in procurements from vendors in HEAL ZIP codes.

Initiative: Social needs screening and linkages to community-based resources

In 2020, Lurie Children's established its Social Influencers of Health (SIoH) committee, comprised of employees and clinicians representing various hospital departments. The SIoH committee developed a plan and protocol for incorporating SIoH screening and data collection into our standard of care. SIoH screening accounts for issues like food insecurity, housing stability, economic stability, caregiver education and employment and safety.

In 2018, Lurie Children's began screening patients for food insecurity and providing immediate food assistance through our Uptown Clinic food pantry. In July of 2021, Lurie Children's also launched a food pantry in our main hospital emergency department modelled after the success of the Uptown Clinic food pantry. Since its inception, over 41,000 patient families have been screened for food insecurity and 320 have been connected to immediate food assistance through our ED food pantry. Efforts to incorporate SIoH screening into the hospital's standard of care have been ongoing and, in January 2022, Lurie Children's added the functionality of NowPow to its SIoH screening protocol. NowPow is an online directory of vetted, quality community resources, like food pantries, shelter, financial assistance, counseling and caregiver support. NowPow is integrated into Epic and allows clinics and community engagement staff to provide patients with a personalized list of local community resources and support to help meet their needs. A record of the patient's SIoH history will stay in their chart and domains can be reassessed throughout the various contacts they have through the hospital. As of March 2022, more than 26,500 Lurie Children's patients have been screened for SIoH.

Addressing Racism in Healthcare

Pointing to the stark racial inequities that have resulted from centuries of systemic racism in Chicago and the nation, Chicago Mayor Lori Lightfoot and the Chicago Department of Public Health declared racism a public health crisis in June 2021. Racism in healthcare, specifically related to issues regarding healthcare access and quality, also emerged as a major theme in the 2019 Community Health Needs Assessment.

Lurie Children's is committed to ensuring that all employees, patients and families thrive, regardless of their race, social identity, cultural background or ZIP code. To address racism in healthcare, Lurie Children's identified and launched a set of core initiatives:

- Develop and institute an Equity, Diversity and Inclusion (EDI) Strategic Plan
- Conduct racial and health equity assessments and develop systems for monitoring progress
- Increase diversity in the recruitment and retention of staff
- Expand internal health equity education and engagement institution-wide and for all employees

Initiative: Equity, Diversity and Inclusion (EDI) Strategic Plan

In November 2019, Lurie Children's established the President's Council for Equity, Diversity and Inclusion (EDI). Under the leadership and direction of the Office of Diversity and Inclusion, the EDI Council published a Strategic Framework for advancing equity, diversity, inclusion and justice, which incorporated feedback from a broad range of Lurie Children's professionals from diverse backgrounds, including over 469 internal executives, physicians, and people leaders. The Strategic Framework, approved and disseminated in 2020, established Lurie Children's core philosophy and strategic goals that will propel health equity in Chicago alongside Lurie Children's Vision 2025.

With input from the Patrick M. Magoon Institute for Healthy Communities, the Health Equity Task Force and the department of Human Resources at Lurie Children's, the EDI Council identified four strategic pillars that provide opportunities for initiatives, programs and practices, called the CARE Framework:

- **Community and Growth:** Drive multicultural partnership, outreach and engagement to serve the health and well-being of underserved communities and suppliers in the city of Chicago.
- **Access to Opportunity:** Attract, select and sustain internal and external talent pipelines of engaged and qualified staff, faculty and trainees from cultural and social backgrounds that are underrepresented in the medical workforce.
- **Recognition and Development:** Optimize people development and recognition efforts to underscore the value of equity, diversity and inclusion through awareness, education and engagement.
- **Equity of Care:** Provide the highest quality clinical care and service to all patients and families, regardless of socio-demographic characteristics to ensure equitable care experiences and outcomes.

To inform efforts to improve our care, Lurie Children's conducted a survey of ~1500 patients to identify areas of discordance between patients' demographics recorded in EPIC and what they self-report. Major trends in the survey data indicated considerable challenges with recording patients' preferred language and correcting their race or ethnicity within Epic. A quality improvement plan is underway to address these issues and create an annual review process for demographic data to ensure it is truly representative of our patients.

Initiative: Diverse Recruitment

A substantial body of literature suggests that fostering a diverse and inclusive workforce is critical to increasing access to care and improving aspects of healthcare quality among underserved populations. [8] Studies have demonstrated that physicians and dentists from underrepresented minority groups are more likely to practice in high-need specialties and in underserved communities. [8]

Nationwide, there is a glaring lack of ethnic and socioeconomic diversity in the medical workforce. In 2019, 61 percent of the country's medical workforce was white, 18 percent Hispanic/Latinx and 12 percent was Black. [8] This lack of diversity was mirrored in the educational pipeline for medical professions, as 55 percent of recent graduates were white, 21 percent were Hispanic/Latinx and 14 percent were Black. [8]

The lack of diversity in the workforce reflects systemic economic and educational segregation and marginalization that have led to unequal access to quality education, inadequate funding for educational and training opportunities and other disparities experienced by Black and Hispanic/Latinx youth.

At Lurie Children's, we recognize these disparities in representation and are committed to addressing racism in healthcare and building a workforce that is representative of the communities we serve.

While we continue to focus efforts on training and recruiting providers to better reflect our patients, we are also working to better train our workforce to create inclusive and culturally responsive environments. These efforts include an organizational learning initiative focused on confronting implicit bias, enhancing cultural competency and developing a mindset of conscious inclusion. Close to 90 percent of Lurie Children's clinical and non-clinical staff completed trainings on anti-racism behaviors; other inclusion education, including structural competency and implicit bias training, are also being implemented by the hospital.

To ensure diversity in the medical workforce pipeline, Lurie Children's Mentorship & Workforce Development Program offers a variety of healthcare educational and professional development opportunities to predominantly on Black and Hispanic/Latinx youth and young adults from Chicago neighborhoods that have experienced historically disinvestment. Since it was established in 2001, the program has grown to include 16 internship and training opportunities serving youth and young adults, from middle school to college. Programming provides leadership development, real-world healthcare industry experience, training workshops, networking opportunities and potential for future employment.

In 2020-2021, over 560 youth participated in Workforce Development programs. In addition, three new free training programs were developed to provide young adults opportunities to earn medical or nursing certifications with the intent of being hired at Lurie Children's Hospital. In fiscal year 2022, Lurie Children's hired over 20 alumni students in a variety of departments, including Central Supply, Psychiatry, Epilepsy Center and Sleep Medicine Center.

Parent and Caregiver Supports

Supporting parents and caregivers within and beyond hospital walls is critical to sustaining a healthy and safe community. Parents and caregivers bear the enormous responsibility of trying to raise physically and mentally healthy individuals, a challenging role that has been made even harder by the COVID-19 pandemic. For parents who struggle with issues like racism and discrimination, lack of employment or unstable access to housing and food, the provision of supportive programs can be hugely beneficial.

In 2020, Lurie Children's experts and stakeholders conducted an audit of existing parenting programs and supports available within the hospital as well as across Chicago. This led to the development of a three-tiered framework for our internal strategy, outlined below:

- Tier 1: Universal Supports and Resources (Prevention)
- Tier 2: Targeted Supports and Resources (Intervention)
- Tier 3: Tailored/Intensive Supports (Treatment)

This multidisciplinary team meets regularly to discuss interventions across all three tiers and explore opportunities to increase collaboration, coordination and knowledge sharing. This has included presentations from stakeholders about parenting support initiatives, including help for youth going through difficult transitions, support for parents/caregivers with babies in the NICU, resources for parents/caregivers addressing behavioral concerns and education about safe gun storage.

Strengthening Chicago's Youth (SCY), a program within the Magoon Institute for Healthy Communities focused on violence prevention, has led the development of caregiver supports. In 2020, SCY published a Parenting Support Toolkit that empowers parents with expert advice, trusted resources, interventions and strategies to navigate common parenting struggles. The toolkit is available online and plans are underway to disseminate through the All Hands Health Network website and NowPow resource directory. Separately, SCY partnered with several Lurie Children's clinicians across specialties to develop a parenting and caregiver support podcast. The podcast covered common parenting themes, including coping with stress and anxiety, self-care and trauma-informed parenting. Podcasts were made available on the SCY website along with popular podcast platforms.

In partnership with Teamwork to Reduce Infant, Child and Adolescent Mortality (TRICAM), SCY also developed a Firearm Safety Toolkit that includes Illinois-specific information and guidance for healthcare providers, parents and caregivers. Additionally, in alignment with the Lurie Children's Zero Suicide Implementation and the increased demand for mental and behavioral health care, TRICAM provides cable gun locks free of charge to patients and caregivers of patients who have unsecured firearms in their homes. These gunlocks, supplied through a partnership with the Chicago Police Department, were available to patient families within our Adolescent and Young Adult Medicine, Emergency Medicine, Inpatient Psychiatry and Social Work departments.

Collaborative for Children's Health Policy

In 2018, Lurie Children's was a founding member of the Collaborative for Children's Health Policy, a statewide initiative with a shared mission of advancing policies and investments that promote health equity for youth, families and communities.

Initiative: Children's Health Caucus

A bipartisan group of Illinois legislators from the House and Senate have come together to form a Children's Health Caucus within the General Assembly in collaboration with Lurie Children's and co-chairs Rep. Tom Demmer, Rep. Camille Lilly, Sen. Julie Morrison and Sen. Chuck Weaver. In 2020-2021, Lurie Children's held five Children's Health Caucus educational events that were well-attended by legislators and staff. The events focused on topics such as housing instability for pregnant parents and young children, adverse childhood experiences, the Illinois Risk and Reach Report and COVID-19 and Kids.

Initiative: Stakeholder Engagement and Education

The Collaborative on Children's Health Policy engaged stakeholders and community partners at four events in 2020-2021 that, altogether, had an audience of just under 200 people. Between events, we maintained regular communications with our stakeholders and have a 20-30 percent open rate for email campaigns, which is slightly above industry average. Communications included COVID-19 vaccination fact sheets in both English and Spanish, white papers, community briefings and event announcements.

Initiative: Priority Child Health Policies

The Collaborative on Children's Health Policy's aims to identify and support priority child health policy initiatives to increase access to quality health services, improve access to mental health services and address key SIoH. The COVID-19 pandemic ushered in the rapid implementation of wide-scale utilization of telehealth in the state of Illinois as a strategy to address access to healthcare services while implementing public health measures to control the spread of COVID-19. Within one month of the executive order 2020-10 (the "Stay at Home" order),

Lurie Children's implemented telehealth services, seeing over 4,500 patients virtually in the month of April 2020 and nearly 10,000 in May 2020, with the average number of monthly visits approaching 6,000 towards the end of 2020.

Telehealth can greatly improve access to healthcare as it can provide instant access to care and reduce the need for costly and stressful transportation. To ensure that telehealth remains a viable option for Lurie Children's, the Collaborative for Children's Health Policy worked with Illinois state representatives and senators to pass Public Act 102-0104, which provides for the following until 2028:

- Insurance reimbursement parity for in-person or telehealth care
- Allows all licensed healthcare professionals in Illinois to perform telehealth
- Limits insurance companies from requiring either in-person visits or telehealth visits
- Requires the Illinois Department of Public Health to collaborate with a medical college to study the effects of telehealth "policies improve access to care, reduce health disparities, promote health equity, have an impact on utilization and cost-avoidance, including direct or indirect cost savings to the patient, and to provide any recommendations for telehealth access expansion in the future."

Mobile Health Services

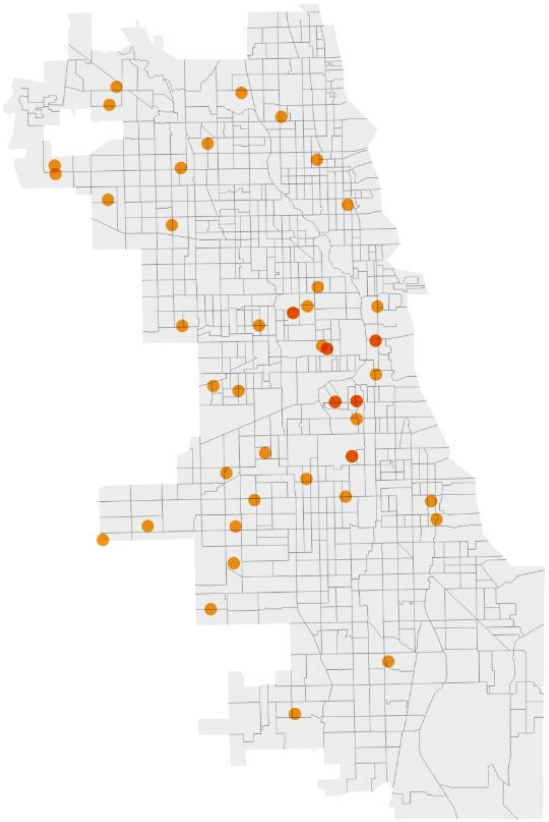
Despite being home to major academic medical centers specializing in world-class healthcare, Chicago has suffered from the loss of general hospitals and pediatric inpatient beds, predominantly on its South and West Sides. Launched in 2019, Lurie Children's Mobile Health Program expands access to care by bringing quality pediatric services and resources directly to communities, meeting families where they live and learn. The services provided by the mobile unit depend on the visit location. Overall, the types of services provided include:

- School and sports physicals
- Immunizations and well-child visits
- COVID-19 testing and vaccinations
- Asthma care
- HIV screening and linkage to care
- Substance use risk screening and linkage to care
- Naloxone training and distribution

In 2021, Lurie Children's finalized the Mobile Health Program's strategic plan and identified four focus areas:

- Focus on primary care delivery, but leverage institutional expertise to aid expansion to specialized care
- Increase physical space within the mobile health unit and staffing capacity
- Increase utilization of the mobile health unit by hospital divisions
- Expand funding to support sustainable growth

Figure 8. 2020-2021 Mobile Health School Visits



In 2020, the mobile health unit conducted 69 visits at seven CPS schools (Figure 8) and seven community-based organizations were engaged in mobile health services. In 2021, largely due to COVID-19 testing and vaccination needs, the number of schools engaged increased significantly and the mobile health unit visited 40 schools throughout Chicago. The team conducted COVID-19 testing for 600+ students and teachers across 13 schools and vaccinated 1,500 youth and school/ childcare staff in communities most severely affected by COVID-19. Overall, mobile health conducted 124 visits in 2021, expanding its reach to 28 neighborhoods across Chicago, including Belmont Cragin, Lawndale, Dunning, Little Village, Englewood and Chatham.

Since its launch, the mobile health unit has been utilized by many Lurie Children's divisions and plans are in place to expand the types of services it provides. For example, throughout 2021, Lurie Children's Potocsnak Division of Adolescent and Young Adult Medicine used the mobile health unit to conduct over 1500 HIV/STI screenings across 17 community events, plus, sexual health education and naloxone trainings and distribution across Chicago. In October 2021, the Division of Pulmonary and Sleep Medicine launched its Asthma Mobile Health Program, which visits Belmont Cragin monthly. Each patient family is seen by a pulmonary provider, asthma nurse, asthma educator and social worker – the same care that they would receive at the hospital or at one of our satellite locations.

The Mobile Health Program is continuing to explore partnerships with Lurie Children's divisions. Some barriers to providing care and programming include the size of the unit itself and a lack of running water and restroom facilities. In early 2022, we applied for funding of a new, larger mobile health unit that will be able to accommodate more services.

Success Story: Mobile Health Program Plays Crucial Role in Pandemic Response

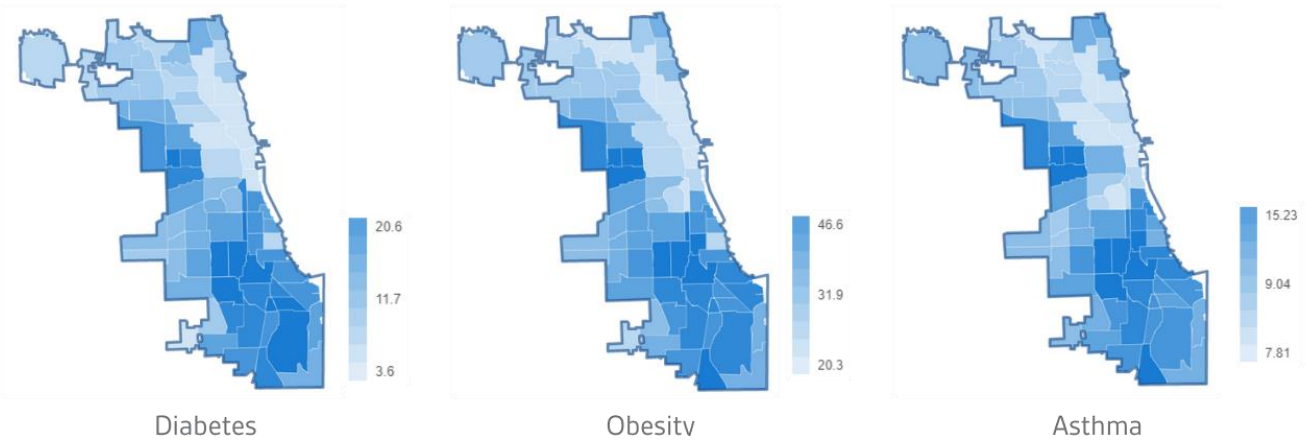
The Mobile Health Program visits Chicago Public Schools to provide services including wellness visits, sports physicals, immunizations and more. After several visits to Leland Elementary, the school's health compliance rate increase from 60 percent to over 80 percent. The mobile unit was also instrumental to CPS's COVID response and has conducted multiple COVID-19 vaccine education events and clinics and routine COVID-19 testing at 40+ CPS and neighborhood schools across Chicago. Also, in partnership with CPS principals and CPS food distribution sites, Lurie Children's distributed 9,000 youth/adult cloth masks, COVID-19 safety information in English and Spanish and 24,000 diapers to communities most impacted by COVID-19.

Priority Area 2: Chronic Health Conditions

Between 2012-2017, life expectancy has been falling for everyone except white, non-Latinx Chicagoans. One of the main drivers of this are chronic diseases like asthma, diabetes, obesity and heart disease. [9] Chicago's youth – Black and Hispanic/Latinx youth in particular – bear a disproportionate burden of these chronic illnesses. [9]

Overall, Chicago youth have higher rates of asthma (16 percent) compared to both the State of Illinois (11 percent) and the United States overall (12 percent). [10] Childhood and adolescent obesity are also prevalent in Chicago, with 36.2 percent of high school students in the metropolitan area diagnosed as overweight or obese. [11] Such health disparities are directly related to SIoH, including limited access to nutritious foods, outdoor spaces to exercise and convenient healthcare. The neighborhoods with the highest prevalence of chronic diseases are those with the lowest COI scores (Figure 9).

Figure 9. Chronic Disease Burden Across Chicago (Source: American Community Survey via Metopio)



Initiative: Expand Supportive Services for Youth with Chronic Disease and Medical Complexities

Lurie Children's has assessed our patients requiring Home & Community Based Services (HCBS) through Medicaid, including current structures and processes for referrals, best practices and gaps. The hospital is developing a plan to address the HCBS needs identified, including policy and advocacy priorities. As part of this plan, Lurie Children's launched the Complex Care Program for Youth with Special Healthcare Needs to reduce barriers and improve access to care.

All Hands Health Network

In 2019, Lurie Children's was one of only eight recipients nationwide to receive funding from the federal Centers for Medicare and Medicaid Services to develop Integrated Care for Kids, a new model of care that aims to improve health outcomes and reduce costs of care for children covered by Medicaid and Children's Health Insurance Program (CHIP). In partnership with the Illinois Department of Healthcare and Family Services (HFS) and community-based organizations, Lurie Children's launched the All Hands Health Network (AHHN) in January 2022. The AHHN is a socially and clinically integrated network that aims to serve up to 43,000 children and their families living in the Belmont Cragin and Austin neighborhoods of Chicago (Figure 10). The network brings together local pediatricians, specialists, behavioral health providers and community organizations to address the medical and social needs of children and their families.

Figure 10. AHHN Framework of Socially and Clinically Integrated Network

Transitioning to Adult Care

Switching from pediatric to adult care can be very challenging for many patients. Lurie Children's Transition to Adult Care Team helps our teenage patients ease into their new surroundings through our programs and support. In 2020, we piloted two transition programs that informed the design of the Transition Program Implementation Planner (TPIP), a blueprint for transition infrastructure that includes guidelines for clinic workflows, tracking of patient readiness, patient access to PCP network, external referral sources, transfer protocols and dissemination of educational materials to adult providers.

The Transition to Adult Care Team is expanding the TPIP to Lurie Children's Pediatric Epilepsy Center and the Division of Rheumatology. In response to demonstrated interest from divisions and departments across the hospital, the team has created a growing TPIP Learning Collaborative that includes Lurie Children's Asthma, Diabetes, Inflammatory Bowel Disease and Phenylketonuria (PKU) programs.

Initiative: Enhance Partnerships with Schools to Support Youth with Chronic Disease

Lurie Children's continues to be a key strategic and thought partner for Chicago Public Schools (CPS) when it comes to youth physical health, mental health and development. Together, we continue to explore opportunities to partner in advancing the health and education of children and adolescents in Chicago.

Lurie Children's has worked across various levels of CPS – from individual schools to networks to the district level to support youth with chronic disease. The following summary outlines many of the programs, activities and

resources Lurie Children's currently provides to students, parents, teachers, school staff and administrators throughout CPS. Our services include:

- The **Mobile Health Program** to help provide primary care and immunizations to keep students healthy and in compliance with medical requirements
- **Mental and behavioral health support** through our Center for Childhood Resilience, which provides schools trauma trainings, school-based group interventions and support for multidisciplinary Behavioral Health Team
- Expert speakers/panelists for school-based **teacher and parent training and education** sessions, including trauma-responsive practice, injury prevention, sexual health, obesity prevention and active lifestyle, LGBTQ+ cultural competency, gender inclusivity, sexual health education, and substance use
- **Care coordination services and an education liaison** to help Lurie Children's patients transition back to school settings
- **Health and wellness policy implementation support** directly to schools and indirectly to schools through partner trainings
- **Support in policy development,** including school discipline, concussion, overall health and wellness and gender inclusivity policies
- **Referrals through our ConnecTeen Program** for pregnant and parenting youth to home visiting programs and doulas in each community area
- **Facilitation of youth-led research and advocacy programs** to address substance use, teen pregnancy support and violence prevention
- **Preparation for Sudden Cardiac Arrest emergencies** through Project ADAM (Automated Defibrillators in Adam's Memory).

Per our goal to enhance partnerships with schools to support youth with chronic health conditions, to date, there are 13 different Lurie Children's departments involved in a total of 42 internal school projects. We have also conducted a total of 11 meetings (including one Whole Child Partner Summit in late 2021) in planning for the implementation of the Whole School, Whole Community, Whole Child approach that was developed by the US Centers for Disease Control and Prevention and ASCD (formerly the Association for Supervision and Curriculum Development). The Whole Child approach aims to ensure that each child, in each school, in each community is healthy, safe, engaged, supported and challenged. The expected outcome is increased coordination among district and school staff, community-based organizations, families and partners to improve the culture of health in schools and ensure that student health-related needs are treated holistically. This approach is included as one of the six core values in the 2019-2024 CPS vision "Success Starts Here."

Success Story: Reaching Students, Teachers and Parents with Youth-Centered, Inclusive Trainings

Adolescent Medicine's Sexual Health and Education (SHE) program combines the expertise of multi-disciplinary staff to facilitate a youth-centered, researched-informed and engaging curriculum. In the 2020-2021 school year, Adolescent Medicine conducted 338 workshops reaching 2,719 participants, including students and teachers. Following those workshops:

- 98 percent of students and teachers agreed or strongly agreed that "I am able to treat people with respect and dignity."
- 95 percent of students and teachers agreed or strongly agreed that "I feel more knowledgeable about the topics we covered."
- 87 percent of students agreed or strongly agreed that "I was able to ask the questions I wanted to ask."

The team also offers sexuality education tailored to the needs of LGBTQ youth for middle and high school Gender and Sexuality Alliances (GSAs). This curriculum focuses on consent, communication and safe sex. Key topics include sexual communication in gender-affirming ways, healthy LGBTQ relationships, anal sex, sex toy safety and HIV and PrEP. In school year 2020-21, eight GSAs and 82 students were served:

- 90 percent of students agreed or strongly agreed that they were able to ask the questions they wanted
- 100 percent of students agreed or strongly agreed they feel more knowledgeable about the topics covered

Initiative: Enhance Community Partnerships to Reduce Chronic Disease Risk

Housed at Lurie Children's, the Consortium to Lower Childhood Obesity in Chicago (CLOCC) – a nationally recognized leader in community-based obesity prevention – supports, coordinates and unites partners across Chicago in promoting health and active lifestyles for children and their families.

In response to the COVID-19 pandemic, CLOCC created its "Healthy at Home" toolkit, a resource for parents, caregivers, families and partners to support youth nutrition and physical activity from home. Users reported via survey an average score of 4.3 (on a scale of 1-5) regarding how useful Healthy at Home was for their work.

Success Story: Collaboration among CLOCC partners resulted in key policy and advocacy victories in 2021

- Chicago Mayor Lori Lightfoot's office established a Food Equity Council to advance a Food Equity Agenda and earmarked $10,000,000 in the city's budget to implement food equity strategies.
- $500,000 appropriated to Illinois Healthy Local Food Incentives Fund doubling money SNAP users can spend at farmers markets.
- Our advocacy through Illinois Alliance to Prevention Obesity saw the formal publication of draft health-related policy requirements in childcare, which will improve guidelines for licensed childcare centers.
- Illinois also announced a new law to make healthy beverages the default in restaurant kids' meals and Chicago's City Council is now considering an ordinance to codify that law at the local level.
- At the federal level, we successfully advocated for critical child nutrition and anti-poverty provisions in the current version of the White House's Build Back Better Bill.

While COVID-19, political and social unrest and economic challenges continued to dominate the media landscape, 75 percent of CLOCC partners maintained or increased their level of engagement with CLOCC's resources.

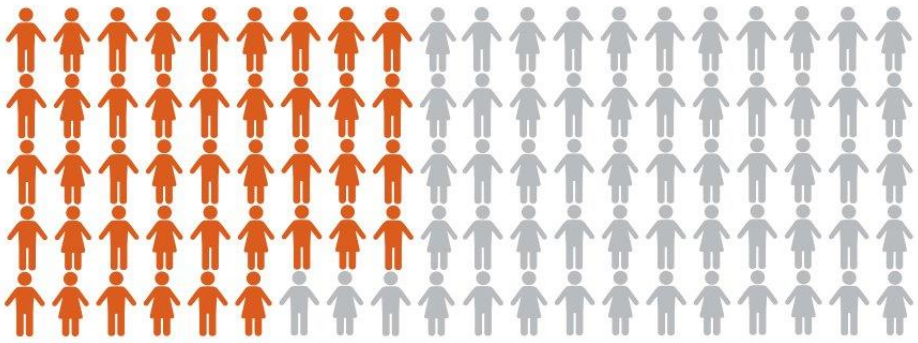
Beyond its policy and advocacy victories, 2021 was a busy year of programming for CLOCC:

- CLOCC and Chicago Public Schools continued to co-convene the +Network and Food and Fitness Partner Network. Each group of partners focused on advancing the District's local school wellness policy through the Healthy CPS initiative.
- CLOCC and the Chicago Park District concluded a four-year initiative that integrated *5-4-3-2-1 Go!* messaging with summer camp activities at six Chicago parks.
- Through CLOCC's leadership of West Side United's Healthy Food Access Working Group, we increased seven West Side food pantries' capacity to provide healthy food and nutrition education to their clients.
- Communities across Chicago continued to engage in CLOCC's Neighborhood Walkability and Accessibility Initiative (NWAI) to identify and address challenges to walking and other forms of active transportation and we have seen that engagement lead to transportation infrastructure changes from Belmont Cragin on to Garfield Park.

Priority Area 3: Mental and Behavioral Health

Even before the COVID-19 pandemic, Chicago parents ranked mental health and substance use as their top concerns for youth. [12] In 2021, Lurie Children's polled 1,000 parents about the mental health impact of the pandemic on their children – 44 percent experienced an increase in at least one mental or behavioral health symptom during the pandemic (Figure 11), 71 percent reported the pandemic had taken a mental toll on their children's health and 64 percent believed it will have a lasting impact on social and emotional development. [13]

Figure 11. Forty-four percent of Chicago children experienced an increase in at least one mental or behavioral health symptom during the pandemic compared with before the pandemic



Initiative: Foster Trauma-Responsive Environments

In partnership with Chicago Public Schools (CPS), Lurie Children's Center for Childhood Resilience (CCR) is expanding the Behavioral Health Team (BHT) Model, a comprehensive and collaborative system to better identify and respond to Pre-K-12 students who need mental health support. Piloted in 200 schools between 2020-2021, the program will expand to all District schools and aims to strengthen the District's response to the escalating national youth mental health crisis exacerbated by the COVID-19 pandemic.

The expansion of effective trauma-engaged BHT is a key initiative of the District's Healing-Centered Framework with implementation formalized under the District's recently adopted Comprehensive Mental Health and Suicide Prevention Policy. The school-based BHT model aims to maximize resources and collaboration, provide early identification of students with behavioral health needs and connect students to evidence-based interventions. The partnership with CCR at Lurie Children's will help inform, co-construct, evaluate and facilitate professional learning and coaching for BHT members on specific healing-centered interventions and practices.

BHTs meet regularly and include one or more school mental health professionals (i.e., counselor, school social worker, school psychologist). Other members vary based on school staffing and resources, but often include support staff, an administrator, a teacher team leader, a nurse, special education staff and community mental health partners. These teams are intended to support identification and appropriate referral for a range of common mental health problems, including anxiety, depression, trauma-related symptoms, disruptive behaviors, adjustment difficulties, peer problems, attentional problems and substance use. BHTs monitor student progress and make any needed adjustments.

The BHT model, developed in collaboration with schools and district leaders, provides a structure that schools can follow to establish, maintain and improve their school mental health team. The goal is to roll out the BHT model to all CPS schools by school year 2023-24, reaching 330,000+ youth from pre-K to 12th grade.

Beyond school-based initiatives, Lurie Children's CCR is also engaged in building trauma-responsive environments within community-based youth-serving organizations, such as early childhood education or after-school programs. In 2020-2021, CCR provided trauma-responsive training to more than 3,400 early childhood care professionals from organizations throughout the region including:

- Carole Robertson Center for Learning
- Chicago Health Explorers
- Chicago History Museum
- Communities in Schools (CIS) of Chicago
- Girl Scouts of Greater Chicago and Northwest Indiana
- Illinois Afterschool Network
- Illinois Governor's Office of Early Childhood Development
- Illinois Head Start State Collaboration Office
- Mikva Challenge
- Raymond Early Childhood Center
- Voices of Youth in Chicago Education (VOYCE)

Workshop topics include:

- Adult Social-Emotional Learning
- Anxiety
- Complex Trauma
- Coping with Anger
- Non-Suicidal Self-Injury
- Pandemic Related Stress and Anxiety
- Psychological First Aid
- Refugees and Immigrant Trauma
- Self-Care
- Social-Emotional Learning
- Structured Psychotherapy for Adolescents Responding to Chronic Stress
- Supporting Newcomer Youth with Stress
- Trauma 101 and Trauma 201
- Trauma in the Early Childhood Space
- Trauma, Racism & Equity

Initiative: Build Capacity of Community-Based Pediatric Providers

In response to increasing demand for pediatric mental health care, Lurie Children's worked closely with policymakers, advocates and community partners to develop new models of care delivery. Multiple solutions are being developed and implemented to address the short-term crisis and the longer-term need that emerged even before the pandemic. Lurie Children's created and expanded training programs to enhance workforce capacity and educate pediatricians to screen, identify and treat patients for mental health issues such as anxiety, depression, ADHD and disruptive behaviors. Lurie Children's, along with other pediatric healthcare providers, also advocates for increased Medicaid reimbursement for psychiatric outpatient therapy, which will open critically needed access to care for children and adolescents.

The hospital's efforts include the following:

- In late 2020, Lurie Children's began universal screening for mental health disorders during well-child checks. In the 2020-2021 academic year, residents and faculty diagnosed 239 patients with ADHD, 175 with depression and 313 with anxiety. Treatment plans were created for all diagnoses.
- Based on feedback from a needs assessment survey, Lurie Children's developed Resources for Advancing Mental Health (RAMP), online mental health educational modules and materials.
- Throughout 2021, a Collaborative Care Social Worker staffed Lurie Children's Uptown Clinic and recruitment is underway for another at our Deming location. Services provided included mental health consultations and case management, active therapy and SSRI prescriptions – 44 percent of patients reported improved anxiety symptoms and 50 percent reported improved depression symptoms.
- By the end of 2021, Lurie Children's met with mental health staff of FQHCs on Chicago's Southwest Side, including Erie Family Health Centers, Esperanza Health Centers and the Infant Welfare Society of Chicago to discuss mental health care screening, assessment and treatment and strategies to support.

Initiative: Develop and Implement Multi-Tiered Substance Use Prevention Plan

In 2020, the Lurie Children's Substance Use Strategy Working Group analyzed substance use related Emergency Department and hospitalization admission data for 12 to 24-year-olds for the preceding three years. According to findings, 11 percent (1,926) of the total admissions (14,532) were youth under the age of 18 years. For those young than 18 years old, rates were highest in the N. Lawndale & Little Village (60623), Brighton Park (60632) and Belmont Cragin & Hermosa (60639) communities (Tables 1 and 2).

Table 1. Top 10 ZIP Codes for Patients <18 with Substance Use Related Admissions

Patient's ZIP Code	N	%
60623 (N Lawndale & Little Village)	117	6
60632 (Brighton Park)	74	4
60639 (Belmont Cragin & Hermosa)	72	4
60609 (Back of the Yards)	70	4
60617 (South Chicago)	67	4
60629 (Chicago Lawn & West Lawn)	66	3
60628 (Roseland)	63	3
60625 (Albany Park & Lincoln Square)	62	3
60651 (Humboldt Park & part of Austin)	54	3
60618, 60641 (Irving Park, Old Irving)	53	3

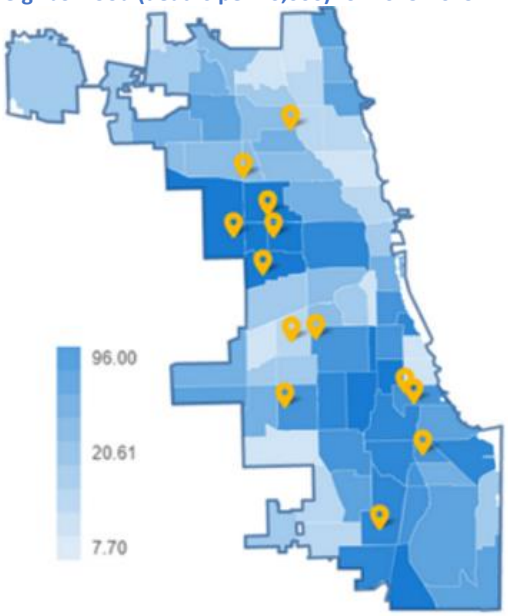
Table 2. Top 10 ZIP Codes for Patients Ages 18-24 with Substance Use Related Admissions

Patient's ZIP code	N	%
60623 (N Lawndale & Little Village)	523	4
60628 (Roseland)	448	3
60639 (Belmont Cragin & Hermosa)	412	3
60629 (Chicago Lawn & West Lawn)	370	3
60637 (Woodlawn)	367	3
60644 (South Austin)	336	2
60651 (Humboldt Park & part of Austin)	328	2
60647 (Logan Square)	324	2
60617 (South Chicago)	316	2
60624 (Garfield Park)	303	2

Holidays and festivals, including St. Patrick's Day, Lollapalooza, Memorial Day Weekend, Pride Weekend and New Year's Day, had the highest rates of admissions. For both age groups, the most used substances were alcohol, opioids, cannabis, cocaine or heroin. Overall, cannabis and alcohol usage were most common, yet higher rates of opioid use were reported for youth older than 18 years (3.9 percent) as compared to those younger than 18 years (9 percent). Similarly, cocaine or heroin use were significantly higher among youth older than 18 years (4.3 percent) as compared to those under 18 years (1.6 percent).

Figure 12 shows the distribution of drug overdose deaths by community area with the ZIP codes of Lurie Children's substance-use related admissions marked in orange.

Figure 12. Drug Overdose Mortality Rates by Chicago Neighborhood (deaths per 10,000) for 2015-2019



ZIP codes of Lurie Children's substance-use related admissions marked in orange. Source: Chicago Dept of Public Health, National Vital Statistics System-Mortality (NVSS-M)

Initiative: Substance Use Prevention

Chicago is home to many excellent youth substance use prevention efforts, but, in the past, there has been little coordination across these initiatives, and few are led by young people. Lurie Children's convenes the youth Substance Use Prevention Coalition (SUPC), a multi-agency coalition of community-based organizations, government agencies and stakeholders from across the city engaged in substance use prevention work. The coalition works to build capacity among members and community partners, engage in school policy development and facilitate connection and collaboration.

Currently comprised of 118 members, including 11 of 12 sectors identified by SAMHSA, the SUPC has facilitated trainings for members focused on:

- Naloxone Administration
- Harm Reduction
- Event Planning
- Self-Care & Vicarious Trauma

Of the trainings that were presented, on average, 61 percent of attendees reported an increase in knowledge.

To ensure SUPC's work focused on the needs of the community, SUPC partnered closely with Grand Boulevard in planning coalition activities. SUPC also worked closely with Voices of Youth in Chicago Education (VOYCE) to include a youth-led Youth Advisory Board (YAB) as a guiding voice within the coalition. In response to SUPC member feedback, staff integrated virtual networking opportunities into coalition meetings. This community building opportunity has begun to build relationships among community partners and support collaboration among SUPC members. Primarily, this community building led to several joint meetings between SUPC's YAB and the Midwest Asian Health Coalitions burgeoning YAB. SUPC partner, Midwest Asian Health Association, also looked to the SUPC for guidance in the creation of their YAB, which led to the development of a YAB creation toolkit. This toolkit will be available in the future for partners looking for guidance in this process.

The onset of COVID-19 presented challenges for both the SUPC, as well as SUPC staff's work with the YAB. A key challenge was moving from in-person to virtual youth and partner engagement. While most adult SUPC members had access to the technology necessary to attend the SUPC meetings, the new format limited organic networking opportunities. After some trial and error, the staff successfully adapted the networking model to be virtual. In addition to the challenge of a new meeting format, many SUPC members were required to shift away from the coalition and their substance use prevention work to focus on immediate community needs related to COVID-19. Members also reported having screen fatigue making it challenging for some coalition partners to prioritize online SUPC meetings. Overall, the pandemic and associated safety measures made it more difficult to engage new and existing coalition members. Overall, meetings averaged at 68 percent of SUPC member organizations represented between 2020-2021.

Notable Substance Use Prevention Program accomplishments and activities include:

- In late 2020, Connect 4 Youth (C4Y), a SAMHSA-funded early intervention program, launched with the goal of expanding access to integrated substance use and HIV screening, rapid testing and linkage to care in high-need Chicago communities. C4Y leverages a partnership between Lurie Children's and Haymarket Center to offer individualized and comprehensive navigation services for up to six months to support engagement and retention in treatment. In FY21, C4Y:
    - Conducted training for nine clinicians
    - Posted prevention education ads on Facebook and Instagram, with a total reach of 38,076 social media users in Chicago ages 18-25 years.
    - Held educational events in the following Chicago communities: Douglas Park, Chinatown, Uptown, Edgewater, West Rogers Park, Rogers Park and Little Village.

- In 2021, the Substance Use Prevention Program conducted 90 trainings (reaching 1,928 youth across 12 schools and organizations) that detail the health effects of substances (including cannabis, alcohol and nicotine vaping) and a curriculum for parents was also developed.

- Naloxone is a prescription medicine that can temporarily stop the effect of an opioid overdose and help a person start breathing again. Lurie Children's provides free naloxone and training on how to use it, offered in partnership with community organizations and other nonprofit organizations. Since August 2020, Lurie Children's has trained over 150 people and distributed 320 number of naloxone kits.

- Fentanyl test strips allow people to test for the presence of fentanyl and are an essential tool in reducing opioid overdoses. Since December 2021, Lurie Children's has trained over 75 people and distributed more than 120 fentanyl test strip kits.

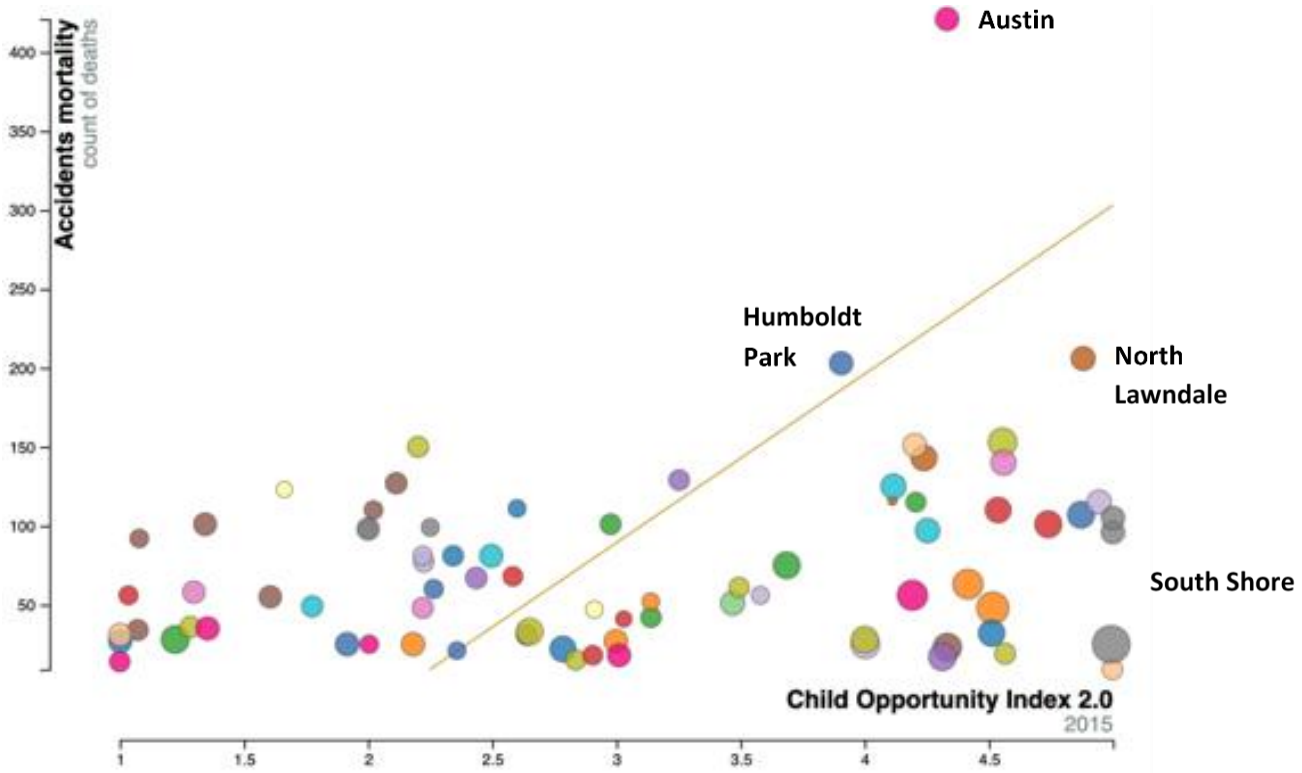
- The Substance Use Prevention Program actively leads efforts within the hospital-wide Opioid Stewardship Committee, which aims to provide thought leadership and processes to foster appropriate opioid use, reduce opioid use disorder, and decrease problems associated with opioid use while remaining true to ChildKind International principles for pain management.

Priority Area 4: Unintentional Injury and Violence

In Illinois, the leading cause of death for youth younger than 18 years is unintentional injury, including falls, motor vehicle collisions, firearm accidents, drug poisoning and drowning. [14] In 2013-2017, the Chicago neighborhoods with the highest death rates due to unintentional injuries were Austin, North Lawndale, Humboldt Park, South Shore, West Englewood, Auburn Gresham and Englewood, all of which are located on the city's West and South sides. [14]

The figures below highlight the communities of Chicago with the highest rates of mortality from unintentional injuries, firearm related injuries and motor vehicle crashes for all age groups. The scatterplot below highlights accident mortality, firearm related mortality and motor vehicle crash mortality in correlation with Child Opportunity Index in Chicago community areas.

Figure 13. Scatterplot of Accident Mortality in Community Areas in Relation to Child Opportunity Index



Initiative: Lead efforts to assess and disseminate injury and violence data across Chicago

The Injury Prevention & Research Center at Lurie Children's addresses the leading causes of injury to Illinois children and adolescents through behavioral risk reduction and the promotion of safe physical and social environments. Lurie Children's is the lead agency for the Safe Kids Chicago and Safe Kids Illinois coalitions. Members of each coalition include healthcare providers, government officials, law enforcement personnel and social service agencies who create and implement injury prevention programming. Injury surveillance data from Lurie Children's Child Health Data Lab also helps to guide IPRC priorities and activities.

In 2020-2021, Lurie Children's engaged in more than five data coalitions with a variety of Chicago Metropolitan area partners to ensure the prioritization of child and adolescent health. The coalitions include:

- Illinois Partnership for Safety Data Committee with partnership from the Illinois and Chicago Departments of Public Health, University of Illinois Chicago, Northwestern University and the Brain Injury and Suicide prevention groups.
- Window fall prevention with partnership from all pediatric trauma registrars
- Drowning prevention with partnership from the Chicago Parks Department and other entities
- All Hands Health Network
- Essence Syndromic Surveillance System

Further, to inform the development of a database of Chicago drowning cases, Lurie Children's has worked with several agencies and departments in conducting an inventory and aggregating data. They include:

- Chicago Fire Department
- Chicago Park District
- Chicago Police Department
- Chicago Public Schools
- Evanston Parks Department
- Wilmette Parks Department
- Great Lakes Surf Rescue Project
- Make the Minute Matter
- The ZAC Foundation

Initiative: Expand and refine injury prevention efforts

Safe Sleep Program Expansion

More than half of parents in Chicago report engaging in one or more unsafe sleep practices with their infants, and those with a high school education or below were more likely to do so. [15]

To help educate families about safe sleep practices and provide them with resources they need to implement them, Safe Kids Chicago has conducted the following activities in 2020-2021:

- **Trained 42 Safe Sleep Ambassadors** on Chicago's South Side to educate their communities about safe sleep practices.
- Safe Sleep Ambassadors have distributed **306 Safe Sleep Kits** to their communities

Success Story: Motor Vehicle Safety Outreach and Education

Lurie Children's Buckle Up Child Passenger Safety Program strives to reduce the number of motor vehicle related injuries and fatalities among children in Chicago through community education and behavior change public health approaches. The program was the only one of its kind in Chicago to consistently distribute free and reduced-cost car seats to families throughout the COVID-19 pandemic. Activities conducted in 2020-2021 include:

- **227 individual workshops and group education sessions** were conducted focused on motor vehicle and car seat safety, **reaching 1,239 community members.**
- **1,451 car seats have been distributed** to eligible families.
- **15 Car Seat Safety Technicians** trained
- Held a Facebook Live training session in graduated driver's licensing laws reaching an **audience of 2,600 attendees**

Sports and Physical Activity-Related Injury Education

The Lurie Children's Institute for Sports Medicine offers the Knee Injury Prevention Program (KIPP®), a neuromuscular training program designed to reduce the risk of anterior cruciate ligament (ACL) injuries among adolescent athletes. There are two components to KIPP: A free training program for coaches and a six-week neuromuscular exercise program to reduce athletes' risk of sport-related knee injuries. In 2020-2021, Lurie Children's reached over 338 athletes and coaches in virtual and in-person workshops focused on sports and physical activity-related injury prevention.

In addition to KIPP, Lurie Children's conducts trainings on concussion protocols for internal and external practitioners. In 2020-2021, 108 Lurie Children's practitioners and 740 community practitioners representing over 140 organizations were trained in concussion protocols.

Gun Safety Advocacy

Firearms are the leading cause of death for children in Illinois, with an average of 183 children and teens dying each year. [16] The state's gun violence crisis disproportionately affects Black children and teens, who are 13 times more likely to die than white children and teens. Around 60 percent of Chicago's youngest children live in community areas where 91 percent of homicides took place. [16]

Lurie Children's supported and strongly advocated for the following bills designed to protect our community from firearm injuries:

- HB4729, which would fund a statewide public awareness campaign to promote safe firearm storage and develop a gun lock distribution pilot program through pediatrician offices and other community-based organizations. Funding also would support an evaluation of the campaign. (Pending)
- HB5086, appropriating $3.5 million to the Department of Public Health to be used for the safe gun storage public awareness campaign. (Pending)

- HB5193, which provides that every school district shall include safe gun storage information in student handbooks. (Pending)
- HB5193, which provides that it is unlawful for any person to store a firearm if they have reason to believe that a minor who does not have a Firearm Owners Identification Card is likely to gain access to it without lawful permission of the minor's guardian and the minor causes death or great bodily harm with the firearm. (Pending)
- HB2254 (Safe Gun Storage Act), which requires that firearms be stored in a locked container to prevent access or use by anyone other than the lawfully authorized user; SB1966 Requires universal background checks on all sales, including private sales, requires fingerprinting, strengthens the Firearm Owners Identification (FOID) system. (Pending)
- HB562, which requires universal background checks on all sales, including private sales, strengthens the Firearm Owners Identification (FOID) system (Passed both Houses)
- HB1092 Firearm Restraining Order, which expands the definition of petitioner and addressed oversights in original law (Passed Both Houses)
- HB552, the Safe Storage Act, which would keep children and families safe by requiring firearm owners to store firearms in a locked container or make them otherwise inaccessible to people other than the lawful owner. If violated, fines will be collected for the Mental Health Fund. (Did not pass)
- HB2623, Pediatrician Assessment of Firearms in the Home, which would require pediatricians to ask about the presence of guns in the home and distribute safe gun storage information to those with guns in a home with a child. The safe storage information must also be available at DMVs and on the Department of Public Health website. (Did not pass)

Strengthening Chicago's Youth also issued 21 Action Alerts to over 550 partners, urging them to support our advocacy work by contacting their legislator, sign advocacy letters and participating in other advocacy activities.

Conclusion

As we reflect on the past three years, on our successes as well as the barriers we have faced, we are deeply grateful for our close partnerships with community residents, organizations and leaders. By linking our clinical work with their grassroots expertise, we are collectively able to develop sustainable, evidence-based initiatives to provide Chicago's youth with access to the resources they need to thrive.

Looking to the future, we are committed to strengthening our community partnerships and building new ones. To ensure that Lurie Children's long-term vision reflects the priorities and values of our communities, we recognize the importance of working alongside our community partners in designing and implementing our strategies. There is much left to be done, but what we have accomplished together in 2020-2022 has provided an important foundation for our future efforts. Our work continues with the Community Health Implementation Strategy for 2023-2025, which will be informed by the 2021-2022 Community Health Needs Assessment, that will be published later this year.

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