

## PRIORITIES

### Mental Health

Mental illness emergencies, suicide ideation and depression among adolescents, lack of behavioral health services and specialists for children, trauma and adversity, cyberbullying.

### Economic Security/Housing

Addressing social determinants of health in health care settings; housing displacement, crowding, lead exposure, and homelessness; generational poverty.

### Healthcare Access/Delivery

Transportation, immigrant health, access to specialty care among MediCal, small mental health workforce, lack of services for LGBTQ.

### Diet/Nutrition/Food Access

Food deserts, diabetes hospitalizations, obesity among African American and Pacific Islander populations, preponderance of fast food, Latino populations generally.

Abbreviations: BCHO=UCSF Benioff Children's Hospital Oakland; TICC=Trauma Informed Care Collaborative; CCCH=Center for Child and Community Health; CoE=Center of Excellence in Immigrant Health; CVC= Center for the Vulnerable Child.

## A. Mental Health

<b>Objective 1: Increase screening for traumatic stress within the hospital and in the community</b>
<b>Strategies</b>
1.1 Initiate universal ACEs screening at the Claremont Clinic using the PEARLS tool.
1.2 Initiate universal ACEs screening at the Castlemont High School Clinic using the PEARLS tool.
1.3 Expand training/utilization of the PEARLS screening tool to 12 other clinics in Alameda County.
1.4 Initiate screening for acute trauma among hospitalized patients.
<b>Objective 2: Increase awareness of trauma informed principles amongst BCHO providers, patients, and families</b>
<b>Strategies</b>
2.1 Maintain the hospital's internal trauma informed care collaborative; educate BCHO staff about trauma informed principles.
2.2 Provide training to BCHO staff and community professionals on screening, prevention, and awareness of trauma and suicide in the adolescent population.
2.3 Provide training for and implement the trauma Toolbox® at the Claremont Clinic.
2.4 Provide video psychoeducation on medical-induced trauma to families of hospitalized patients.
<b>Objective 3: Expand access to behavioral health services</b>
<b>Strategies</b>
3.1 Develop a behavioral health "warm line" using telehealth technology; provide consultations to 1,000 children by 2022.
3.2 Sustain and expand by 50% the volume of families attending the "resiliency clinic" at the Claremont federally qualified health center.
3.3 Initiate a group trauma prevention and treatment intervention model at Castlemont HS Clinic.
3.4. Develop a mental health strategic plan; advance other expansion initiatives.

## B. Health Care Access and Delivery

<b>Objective 1: Improve access and convenience for specialty care services</b>
<b>Strategies</b>
1.1 Develop single phone number for making appointments with any of the hospital's services.
1.2 Simplify and digitize referral process for specialty clinics
1.3 Improve % of new patients who are seen within 14 days (baseline 58%: target 75%)
1.4 Pilot test the FETCH program to provide free Lyft rides for families with transportation challenges.
<b>Objective 2: Increase access to--and attractiveness of-- BCHO for immigrant families</b>
<b>Strategies</b>
2.1 Establish and fund a Center of Excellence for Immigrant Child Health and Wellbeing.
2.2 Establish "safe hospital" policies and protocols.
2.3 Develop curriculum for residents on caring for immigrant families.
<b>Objective 3: Strengthen family-centered care in Alameda County</b>
<b>Strategies</b>
3.1 Expand the FINDconnect platform to more BCHO departments
3.2 Expand cultural humility trainings to pediatric residents and other providers at the hospital
3.3 Host 2 brown bag lunches for BCHO staff focused on strengthening services to underserved cultural communities in collaboration with representatives from those communities.
3.4 Maintain and expand social workers in gender clinic

## C. Economic Security and Housing

<b>Objective 1: Improve the economic security for patients at the hospital and students in the community</b>
<b>Strategies</b>
1.1 Refer newborns born into poverty to the Brilliant Baby program to receive college savings accounts and financial coaching.
1.2 Train residents to incorporate referrals to financial coaching into health care visits.
1.3 Provide educational career opportunities for at least 200 at-risk students through the CHAMPS and CHORI Summer Research Programs
<b>Objective 2: Maintain or expand services for homeless/transitional children and their guardians.</b>
<b>Strategies</b>
2.1 Connect families with landlord or shelter problems with appropriate services via FINDconnect
2.2 Maintain Encore Clinic to provide a medical home to homeless and transitional children.
2.3 Maintain Foster Care Clinic to provide health care and case management to children in foster care

## D. Diet, Nutrition, and Food Access

<b>Objective 1: Improve identification and referrals for families with food insecurity</b>
<b>Strategies</b>
1.1 Make screening for food insecurity a routine part of primary care and other departments at the hospital.
1.2 Connect in-need families to the Alameda County Food Bank via FINDconnect
<b>Objective 2: Provide affordable and healthy food options for families facing food insecurity.</b>
<b>Strategies</b>
2.1 Maintain and expand Pop Up Food Farmacies from 2 to 4 days each month.
2.2 Evaluate the impact of community supported agriculture home deliveries (CSA Boxes) via the Food as Medicine Program

## Appendix

Strategy	Status 10/19	Lead	Input/Support
A 1.1	Active	Claremont Clinic	Existing grant from Tara Health
A 1.2	Pending	Castlemont Clinic/ CCCH	Existing grant from Sarlo Foundation
A 1.3	Pending	CCCH	Existing grant from Stupski Foundation
A 1.4	Active	P. Steinbuchel	Existing grant from PIF
A 2.1	Pending	TICC	Ongoing in kind support
A 2.2	Pending	TICC	Ongoing in kind support
A 2.3	Active	Claremont Clinic/ CCCH	Existing grant from Stupski Foundation
A 2.4	Active	Petra Steinbuchel	Existing grant from PIF
A 3.1	Pending	Division of Psychiatry	Existing grant from M. Benioff
A 3.2	Active	Claremont Clinic	Need to initiate billing
A 3.3	Pending	CCCH/Castlemont Clinic	Pending grant from Sarlo Fdn.
A 3.4	Pending	Administration/Mental Health	Operations/billing
B 1.1	Active	Administration	Operations
B 1.2	Pending	Ambulatory	Operations
B 1.3	Pending	Ambulatory	Operations
B 1.4	Active	CCCH	Existing grant from Sunlight Fdn.
B 2.1	Pending	CoE/CCCH	Will seek funding
B 2.2	Pending	CoE	Will seek funding
B 2.3	Inactive	CoE	Will seek funding
B 3.1	Active	CCCH	Existing grant from Stupski/CFMG
B 3.2	Active	Leanna Lewis	Existing grant from HRSA
B 3.3	Inactive	Sharon Leno	Future proposal to PIF
B 3.4	Active	Gender clinic/Andrea Works	Will pursue future funding
C 1.1	Active	CCCH/Claremont Clinic	Grant from Measure A
C 1.2	Active	Claremont Clinic	Grant from Measure A
C 1.3	Active	CCCH and CHORI	Existing grants (various)
C 2.1	Active	Claremont Clinic/CCCH	Existing support
C 2.2	Active	CVC	Existing grant from HRSA + billing
C 2.3	Active	CVC	Existing grant from HRSA + billing
D 1.1	Active	Claremont Clinic	Ongoing institutionalization efforts
D 1.2	Active	Claremont Clinic	Ongoing institutionalization efforts
D 2.1	Active	CCCH	Existing grant from Sunlight Fdn.
D 2.2	Active	CCCH	Existing grant from Battery Fdn.