



**Community  
Health Needs  
Assessment**  
**2023**  
*Progress Report*



**NEMOURS**  
CHILDREN'S HEALTH<sup>®</sup>

Well Beyond Medicine

# Table of Contents

About Nemours Children’s Health ..... 2

Community Health Needs Assessment ..... 4

Violence Prevention ..... 7

Food Insecurity ..... 12





**About Nemours  
Children's Health**

# About Nemours Children’s Health

We are one of the nation’s largest multistate pediatric health systems, which includes two free-standing children’s hospitals and a network of over 75 primary and specialty care practices. We seek to transform the health of children by adopting a holistic health model that utilizes innovative, safe and high-quality care, while also caring for the health of the whole child beyond medicine. We also power KidsHealth.org from Nemours® KidsHealth® – a pioneer and leader in pediatric health content, trusted by millions worldwide for more than 25 years to help keep families healthy.

In the Delaware Valley, we provide comprehensive pediatric care at our nationally ranked Nemours Children’s Hospital. We also offer families access to primary and specialty care in Delaware, Pennsylvania, and New Jersey. In 2023, we provided nearly 500,000 outpatient visits at these locations. As Delaware’s only Level 1 Pediatric Trauma Center, we have reduced child deaths from injuries and contributed to statewide injury prevention initiatives.

Our mission is to provide leadership, institutions and services to restore and improve the health of children through care and programs not readily available. We offer one high standard of quality and distinction, regardless of the recipient’s financial status. We are committed to providing patient- and family-centered health care; educating the next generation of health care providers through a variety of education affiliations; offering extensive online and in-person continuing medical education; providing health and wellness information for kids, teens, parents and educators via KidsHealth.org; and offering families 24/7 access to virtual consults with our health care providers via mobile and computer devices.

We have been recognized as a model of, and an advocate for, transforming the pediatric health care system from a focus on sickness to a focus on wellness, often in collaboration with community and health care partners. Our leaders and associates serve on numerous boards of organizations addressing health and children’s issues, and a wide range of community organizations also receive sponsorship support as part of our commitment to support those who support children. We are also focused on bringing our standard of care – and better health – to local communities. We do this not only by providing both primary and specialty care at various locations throughout the region, but also by continuously seeking answers to the most vexing problems in children’s health.

Our researchers look for and find novel treatments for complex childhood conditions while our population health and prevention specialists work to reverse long-standing patterns of unhealthy behavior across our communities. Our Community Health Needs Assessment (CHNA) provides us an opportunity to survey community members and systematically address their concerns. This report details the strategies we employed in 2022 to address the top concerns identified, as well as the ongoing work to be conducted in these areas.



# Community Health Needs Assessment



# Community Health Needs Assessment

Every three years, we conduct a CHNA in compliance with requirements in the Affordable Care Act. Since 2016, the CHNA has allowed us to obtain a comprehensive data set on the health status, behaviors, and needs of children in our community, which for this assessment includes the three counties in the state of Delaware (New Castle, Kent and Sussex). This data informs a multiyear strategic plan to address community health needs.

Nemours Children's associates analyzed secondary data sources from the most up-to-date national, state and local sources to assess the health needs of the community, while taking into account input from members of the community, stakeholders and patient families. In 2022, our associates approached primary data collection differently than in years past. Instead of only asking the community "what" is wrong, we took the opportunity to draw from multidisciplinary expert panel discussions, in conjunction with information collected from over 30,000 Social Determinants of Health (SDOH) screenings in primary care locations across the region, to develop a more robust, community-facing survey that leverages existing knowledge of the issues that persist with solution-driven questions related to their upstream causes and potential intervention strategies.

By expanding the scope of questions at the survey development stage, we ensured the community voice was not only present in the prioritization phase, but also included in the implementation process and plan. Engagement with other internal and external networks involved in this work further bolstered our efforts in crafting a CHNA in 2022 that was truly responsive to the health landscape of our region. Our CHNA team remains in regular contact with the CHNA team at our Florida hospital as well as other health systems across the state to facilitate alignment, awareness of data-driven approaches, and partnership opportunities where appropriate. To download our 2022 CHNA Report, please visit [Nemours.org/about/community-health-needs.html](https://nemours.org/about/community-health-needs.html).

During the prioritization process, we asked survey participants to identify:

- The two most important characteristics of a healthy community
- The top three needs when thinking about the health of children, teens and adolescents in their household and their community

Participant feedback was aggregated to compile the below prioritization list for Delaware. This is the second iteration (2019, 2022) for which Health Care Access, Behaviors, and Outcomes are ranked separately from SDOH. The goal in having two different categories of need is to remain focused on a more comprehensive model, treating symptoms and diseases while also shifting focus to further upstream strategies.

Ranking	Health Care Access, Behaviors, Outcomes	Totals (n=537)	Social Determinants of Health	Totals (n=481)
1	Access to mental health care	297	Youth Activities and Opportunities	226
2	Mental Health/Trauma	206	Affordable Healthy Homes	180
3	Access to Medical Health Providers	188	Community Crime or Violence	174
4	Access to Dentists	142	Education	163
5	Substance Use/Misuse	125	Economic Development/Jobs	154
6	Not Enough Assistance/Resources to Health With Basic Needs	122	Environment/Air Quality	151
7	Nutrition	101	Transportation	122
8	Sexual/Reproductive Health	58	Food Insecurity	105
9	Asthma/Other Respiratory Conditions	51	Lack of Access to Affordable/Reliable Internet	37
10	Access to Necessary Rx/Med Devices/Therapies (\$\$\$)	41	-	-

Senior leaders at Nemours Children’s examined this information to identify the top two focus areas to be incorporated into our 2023–2025 CHNA Implementation Plan. In addition to considering the magnitude and severity of issues, the impact of these issues on the most vulnerable populations, resources available, areas in which we should be partnering with other key stakeholders, and the feasibility of addressing these issues over the next three years — our leadership also reviewed key SDOH screening tool data from thousands of patient families. This is in alignment with the 2020–2022 CHNA Implementation plan, which includes a specific goal around the use of SDOH screening tool data to inform strategy and recommendations in future iterations. Food insecurity remained a top three-identified need based on screening results over the previous 12 months. Based on these results, coupled with food insecurity landing within our top 10 community-identified needs, Nemours Children’s decided to incorporate food insecurity into the implementation plan for 2023-2025 period.

The final top two areas chosen were:

- Violence Prevention
- Food Insecurity

The remaining issue areas (those not chosen to be addressed here) continue to be important to us, and we will work to improve these aspects of children’s health through our patient care, research and population health management efforts. Our commitment — in communities where it has a physical presence and beyond — is to be an important leader in designing the future of caring for children. As part of our journey to create the healthiest generations of children, we recently joined the Healthcare Anchor Network (HAN) to develop and implement a health care anchor strategy that leverages our economic impact on local communities to help address economic, social and racial inequities. Momentum behind efforts like these directly align with the CHNA work and are key to ensuring a meaningful investment in community is built into everything we do.



# Violence Prevention





# Violence Prevention

According to the CDC, youth homicides and nonfatal physical assault-related injuries result in an estimated \$100 billion annually in costs including medical, lost work, and quality and value of life. This estimate does not include costs to the criminal justice system. Children and adolescents exposed to violence are at risk for poor long-term behavioral and mental health outcomes regardless of whether they are victims, direct witnesses, or hear about the crime. Exposure to violence in a community can be experienced at various levels, including victimization, directly witnessing acts of violence, or hearing about events from other community members. This exposure can have long-term effects on a child's physical, mental and emotional health, including an increased risk of chronic diseases, mental health disorders, and substance abuse. Delaware (6.9 per 100,000 population) does not meet the Healthy People 2030 goal of reducing the homicide rate to 5.5 per 100,000 population. In addition, more than 50% of the 2022 CHNA survey respondents have witnessed violence in their neighborhood or community on more than one occasion. Community members ranked community crime or violence as one of the top priorities for Nemours Children's to address in its implementation plan.

Firearms are the leading cause of death for children and teens ages 1 to 19 years old in the United States. Delaware ranks number five in highest rate of gun violence per capita. The department of Population Health Management established a violence prevention task force, comprised of experts in the field, to advise on the most effective program plan to address these staggering statistics. The group evaluated existing efforts and resources to identify opportunities for strategic partnerships, reviewed evidence-based best practices to understand how to address gaps, and leveraged established infrastructure to shape a CHNA violence prevention implementation plan reflective of the following key points:

- While many violence intervention programs exist in the state of Delaware, there are significant gaps in primary prevention-based programs and initiatives.
- Secure gun storage is critical to prevent accidental and/or unintended death or injury and suicide.
- Hospital systems with trauma centers have a unique opportunity to develop data-driven, impactful programs that support gunshot wound/assault victims in their care to prevent future victimization, retaliation and death.
- The trust relationship between a physician and family needs to be leveraged to broker information and resources designed to prevent violent injury and death in youth.
- A focus on parents/caregivers in high-quality violence prevention education programs is key.
- Successful violence prevention programs center on health and safety vs. polarizing statements that take a firm stance on gun ownership/rights.

The health and safety of our patients and families has always been our top priority, and health and safety are not possible without gun safety. Suicide and community violence each contribute to nearly half of all annual gun deaths in the state. There are 4.6 million children living in homes with access to unlocked or unsupervised guns. In 75% of youth firearm suicides for which the gun storage method could be identified, the gun was stored loaded and unlocked. What's more, 32% of firearm suicides and unintentional firearm fatalities among youth could be reduced through safe storage alone. These realities, coupled with a wealth of research on the opportunity health providers have to broker safety discussions and resources, informed the strategic direction of the 2023-2025 Implementation plan.

With the awareness that violence is a very complex and multifaceted issue that we cannot solve alone, or in just one specific area, Nemours Children's had to be very intentional in our focus for the purposes of the CHNA implementation plan, with the goal of leveraging this work as the foundation for a more robust and comprehensive program(s) in the long-term. For example, community violence is an issue that requires policy-driven interventions to achieve impact, and as a health system, this is not something we are traditionally well-positioned to mobilize in the care setting. Moving the needle in this area will require meaningful engagement with external organizations to better understand how we can be an effective partner to those already championing these efforts on the front lines. Please see Additional Investments in Violence Prevention on page 11 for more information on how we are working to address other areas of violence outside of this plan.

# Implementation Plan

## Initiative

- Implement a referral pathway to an evidence-based violence intervention program that incorporates support services to patients who experience violence to promote healing and prevent future confrontation and death.

## Goals

- Establish a violence prevention partnership with Christiana Care Health System by the end of Y2, Q2 (Formerly 6/30/2023, now June 30, 2024).
  - **Status: On Hold until Y2. Due to a significant reduction in workforce, as well as changes within the organizational structure that directly impacted the CHNA, this initiative was placed on hold in Y1. The CHNA team has been working diligently to maintain our relationship with the partnering organization so that we are well-positioned to resume all activities on January 1, 2024. We have revised the timeline accordingly to reflect this.**
- Develop a pathway that triggers patient referral to the EVOLV program based on established eligibility criteria by the end of Y2 (December 31, 2024).
  - **Status: On Track. Nemours Children's has been in communication with key stakeholders to ensure the remainder of the timeline is not impacted by the hold.**
- Refer at least 75% of eligible patients to the EVOLV Intervention Program in Y3 (January 1, 2025 - December 31, 2025).
  - **Status: On Track.**

## Metrics

- MOU in place between Nemours Children's and Christiana Care
    - **This metric will be reported on in Y2.**
  - Final approval of defined eligibility criteria
    - **This metric will be reported on in Y2.**
  - Final approval of referral pathway
    - **This metric will be reported on in Y2.**
  - # of patients seen at Nemours Children's who meet eligibility criteria for EVOLV referral
    - **This metric will be reported on in Y3.**
  - # of patient referrals to EVOLV
    - **This metric will be reported on in Y3.**
-



## Initiative

- Identify opportunities in education for patients, families and providers that promote evidence-based health and safety measures for the reduction of preventable death and injury due to gun violence.

## Goals

- Develop and disseminate parent/caregiver educational materials in all 12 Delaware practice locations and at least one digital platform (i.e., Nemours app, Nemours website) by the end of Y2 (Formerly 12/31/23, now December 31, 2024).
  - **Status: On Hold until Y2. Due to a significant reduction in workforce, as well as changes within the organizational structure that directly impacted the CHNA, this initiative was placed on hold in Y1. The CHNA team has been working diligently to maintain our relationship with the partnering organization so that we are well-positioned to resume all activities on January 1, 2024. We have revised the timeline accordingly to reflect this.**
- Operationalize a supply pathway for the distribution of universal gun locks to eligible patient families by the end of Y2, Q2 (June 30, 2024).
  - **Status: On Track. Nemours Children’s has identified a gun lock repository through the Delaware Veterans Association and is working with our partners at the Coalition for a Safer Delaware to operationalize a platform for access and distribution.**
- Develop and publish a provider-centric, online, trauma-informed violence prevention training on Nemours University by the end of Y3 (Formerly 12/31/2024, now December 31, 2025).
  - **Status: On Hold/Under Revision. Due to a significant reduction in workforce, as well as changes within the organizational structure that directly impacted the CHNA, this initiative was placed on hold. In the interim, the CHNA team remained steadfast in protecting progress whenever possible. To this end, we continued to expand our network in and around the violence space which has further shaped our understanding of specific training methodology that would be most impactful. We are currently working on a new roadmap that reflects this growth and will report on those specifics in Y2. We have revised the timeline accordingly to reflect this.**
- Achieve a 75% completion rate of the trauma-informed violence prevention training by the end of Y3 (December 31, 2025).
  - **Status: Under Revision based on new information (see Goal 3). Updated goal language will be included in the Y2 progress report.**

## Metrics

- Final approval of parent/caregiver educational materials
  - **This metric will be reported on in Y2.**
- Educational materials printed and delivered to all 12 Delaware practices.
  - **This metric will be reported on in Y2.**
- Educational materials adapted and published on one or more digital platforms.
  - **This metric will be reported on in Y2.**
- Gun lock repository secured.
  - **This deliverable is complete (Y1).**
- Distribution pathway approved.
  - **This metric will be reported on in Y2.**

## Metrics (Continued)

- # of employees eligible to take the online trauma-informed violence prevention training.
    - **This metric is under revision.**
  - # of employees who completed the online trauma-informed violence prevention training.
    - **This metric is under revision.**
- 

## Additional Investments In Violence Prevention

Nemours Children's continues to explore other ways we can support efforts outside of the CHNA work, as we remain committed to advancing the physical, social and emotional well-being of our patients with the same vigor applied to medical care. The following efforts related to violence prevention have already taken shape:

- Working with data analytics to improve how we record and track initial trauma encounters in the Emergency Department to understand how we can better align with other health systems across the state to facilitate a cohesive system that reliably captures key information that can inform predictive models and associated preventative measures of violence.
- Collaborating with social workers and other key stakeholders to build a roadmap for a hospital-based violence intervention program at Nemours Children's. This program will build upon the inpatient Victims of Crime Act (VOCA) intervention framework and benefit patients that are not eligible for, or need additional support outside of, the EVOLV program.
- Partnering with the Nemours Children's Hospital Trauma Center to reinvigorate Stop the Bleed efforts by using a train the trainer structure to build capacity needed to expand school and community-based training capabilities. Training events will be hosted at various Nemours Children's locations for qualifying staff to become instructors to train other staff, as well as volunteer for community events to provide materials and instruction to the populations we serve. We will also leverage the school-based health centers to expand school nurse training outside of the Wilmington catchment area (previous focus).
- Establishing a violence prevention advisory committee comprised of a multidisciplinary group of stakeholders dedicated to evaluation, sustainability, continuous improvement, and spread and scale of current initiatives, as well as providing recommendations for addressing gaps that remain. Committee members represent areas of expertise in the fields of social work, behavioral health, surgical services, population health and trauma services.
- In 2023, we partnered with other leading local health care systems and hospitals (led by Northwell Health in New York) to create the "It Doesn't Kill to Ask" campaign. The campaign equips parents, caregivers, and community members with information, providing actionable tools to speak up about safe gun storage and help them feel empowered to ask other parents about access to guns in a home their child might visit. This campaign will take the form of a website, along with printed works, broadcasts, and digital public service announcements.
- Next steps: exploring expansion into the community violence space in 2024.



# Food Insecurity



Second Harvest  
FOOD BANK  
CENTRAL FLORIDA



# Food Insecurity

Children exposed to food insecurity are of particular concern given the implications posed to the child's health. Malnutrition during the first 1,000 days of life can have irreversible effects on a child's physical and cognitive development. In addition to immediate health impacts, food insecurity can also have long-term consequences for a child's overall well-being. Children who experience food insecurity may be at a higher risk for chronic health conditions, such as obesity and diabetes, later in life. The 2022 CHNA revealed that approximately 50% of households in Delaware with children under the age of 18 participate in the Supplemental Nutrition Assistance Program (SNAP). Additionally, nearly 1 in 4 (22%) of survey participants report having to cut the size of meals because there was not enough money in the budget for food. Therefore, it is important for Nemours Children's to address food insecurity to help mitigate the negative impacts it has on children in the communities we serve.

To address the identified needs reflected in the 2022 CHNA, a series of meetings were held with external stakeholders and key Nemours Children's staff (i.e., social workers/care coordinators) to determine a path forward. During these discussions, information routinely collected from patients and families around specific barriers to securing food was utilized in conjunction with assessment results and professional expertise to ensure an effective and responsive action plan. These planning sessions yielded the following themes aligned with evidence-based best practices:

- A recognition that there is food available via the Food Bank of Delaware and other resources.
- Access to food bank locations is a challenge (i.e., food pickups located on the racetrack that is approximately 3/4 of a mile away from a bus stop)
- Items are difficult to transport long distances if a patron does not have access to a vehicle and is either walking or using public transportation.
- Food boxes from some organizations can be prepacked with items that are not culturally appropriate (i.e., pork products) and, thus, go unused.
- Food boxes can often contain items unfamiliar to families who do not know how to prepare items.

We used these five points of information to begin shaping CHNA interventions in this area, as well as a call to action in terms of what additional stakeholders need to be at the table for implementation to be possible. For example, we reached out to the Food Bank of Delaware to secure stops at several of our community practices centrally located near the populations we serve. The proximity to these locations ensures community members can easily access the services offered (Food Bank drops and on-site pantry), as well as transport the items back to their homes without additional means of transportation. Moreover, with the on-site pantry, families can select items they wish to take home, alleviating challenges related to culturally inappropriate or unfamiliar preselected foods. We believe that bringing services closer to our patients' front doors can promote the ease and accessibility needed to get them the food they will use.

As we continue to embrace more community-facing, patient-driven work, it is imperative that we elevate the community voice when developing meaningful and effective intervention plans for the purposes of the CHNA and beyond. These values are reflected in the goals and metrics laid out in the 2023-2025 CHNA Implementation Plan.



## Implementation Plan

### Initiative

- Expand Nemours Cares Closets to additional practice sites throughout the Delaware Valley

### Goals

- Identify at least two additional Cares Closet sites by the end of Y1, Q1 (March 31, 2023).
  - **Status: Complete.** In Y1, Q1, a total of 10 Delaware Valley sites were identified for expansion in addition to the existing two sites slated for transition.
- Stock pantries at each new site based on need by the end of Y3, Q2 (Formerly 9/30/23, now June 30, 2025).
  - **Status: On Hold.** Due to a significant reduction in workforce, as well as changes within the organizational structure that directly impacted the CHNA, this initiative was placed on hold in Y1. We have revised the timeline accordingly to reflect this.
- Rollout Cares Closets in new sites by the end of Y3 (Formerly 12/31/23, now December 31, 2025).
  - **Status: On Hold.** Due to a significant reduction in workforce, as well as changes within the organizational structure that directly impacted the CHNA, this initiative was placed on hold in Y1. We have revised the timeline accordingly to reflect this.
- Continue to monitor program operations to inform parameters for spread and scale by the end of Y3 (December 31, 2025).
  - **Status: On Track.** The CHNA team is exploring existing programs to identify best practices for potential future expansion if/when pause is lifted.

### Metrics

- # of additional Cares Closet sites
    - **This metric will be reported on in Y2.**
  - Total # of sites stocked with food.
    - **In Y1, a total of two existing Cares Closets were stocked and functional. Stock at newly identified sites will be reported on in Y2 and Y3.**
  - Final approval of recommendations to spread and scale the program.
    - **This metric will be reported on in Y3.**
-

## Initiative

- Partner with a mobile food pantry to coordinate regular stops at our practice locations across the Delaware Valley

## Goals

- Identify at least two practice sites for pantry stops based on need and availability by the end of Y1, Q1 (March 31, 2023).
  - **Status: Complete.** In Y1, Q1, a total of two Delaware Valley sites were identified for pantry stops with the potential for additional expansion.
- Finalize MOU with the Food Bank of Delaware by the end of Y3, Q1 (Formerly 9/30/23, now March 30, 2025).
  - **Status: On Hold.** In Y1, Q1, an MOU between Nemours Children’s and the Food Bank of Delaware reached the final signature stage, and internal processes were established to aid in the transition of pantry operations. In Y1, Q2, funding was not released in accordance with agreed upon terms and all transition and expansion efforts related to food pantries were placed on hold due to a significant reduction in workforce, as well as changes within the organizational structure that directly impacted these efforts. We have revised the timeline accordingly and anticipate moving forward in Y2.
- Partner with Nemours Children’s Marketing and Communications (MarCom) Department to distribute promotional materials in at least two different modalities (web, print, app, text, etc.) by the end of Y3, Q1 (Formerly 9/30/23, now March 30, 2025).
  - **Status: On Hold.** Due to a significant reduction in workforce, as well as changes within the organizational structure that directly impacted CHNA efforts, this initiative was placed on hold in Y1. The CHNA team was able to engage MarCom staff at Nemours Children’s prior to the hold. During these discussions, draft informational materials were created, and a communications plan was vetted through the necessary channels, including compliance. We hope to resume this work in Y2 and have revised the timeline accordingly to reflect this.
- Rollout mobile food pantry stops in all identified locations by the end of Y3, Q3 (Formerly 3/31/24, now September 30, 2025).
  - **Status: On Hold.** Due to a significant reduction in workforce, as well as changes within the organizational structure that directly impacted CHNA efforts, this initiative was placed on hold in Y1. We have revised the timeline accordingly to reflect this.
- Assess feasibility of expansion of mobile food pantries to additional sites across our system and provide recommendations based on findings by the end of Y3 (December 31, 2025).
  - **Status: On Track.** If the hold is lifted in Y2, the timeline for this deliverable will not be impacted.

## Metrics

- # of sites identified for pantry stops
  - **This deliverable is complete (Y1 - two sites).**
- MOU in place between Nemours Children’s and Food Bank of Delaware
  - **This metric will be reported on in Y3.**
- # of modalities used to market/publish promotional materials
  - **This metric will be reported on in Y3.**



## Metrics (Continued)

- # of mobile food pantry visits per month by location
  - **This metric will be reported on in Y3.**
- Final approval of recommendations to spread and scale mobile pantries to other locations across the enterprise.
  - **This metric will be reported on in Y3.**

## Additional Investments In Food Insecurity

Nemours Children’s continues to explore other ways we can support efforts outside of the CHNA work, as we remain committed to advancing the physical, social and emotional well-being of our patients with the same vigor applied to medical care. The following efforts related to violence prevention have already taken shape:

- Advocating for additional food pantry locations in new spaces that would support our patient populations in innovative ways. For example, incorporating a food pantry off the hospital atrium as a resource for inpatient families to stock up on items to take with them after discharge.
- We host an annual “Food Fight” to support local food banks in our communities to fight food insecurity through associate and foundation donations. In 2023, Nemours Children’s 5th Annual Food Fight provided over 170,000 meals to families in need.
- As our SDOH screening tool continues to elevate issues related to food insecurity, results will drive efforts and investments that continue to build on the initiatives outlined in this report.
- In 2024, Nemours Children’s plans to expand the scope and reach of Food Insecurity work through community engagement and effective partnerships. The Y2 progress report will expand on that progress.

**Progress reports will be posted annually on:**  
[Nemours.org/about/community-health-needs](https://nemours.org/about/community-health-needs)

**Please direct all CHNA-related inquiries to:**  
Laurel Grant, MPH  
Population Health Specialist  
Nemours Children’s Health, Delaware Valley  
[Laurel.Grant@nemours.org](mailto:Laurel.Grant@nemours.org)