Please note that all patient, staff and provider pictures used throughout this 2022 Community Health Needs Assessment report for Shriners Children’s Portland have given permission to use their photograph or likeness through the signing of either a Patient or Non-Patient General Marketing, Public Relations, or Fundraising form.
Shriners Children’s at a Glance

Shriners Children’s® is a health care system with locations in the U.S., Canada and Mexico. Our staff is dedicated to improving the lives of children by providing pediatric specialty care, conducting innovative research, and offering outstanding educational programs for medical professionals. Children up to age 18 with orthopedic conditions, burns, spinal cord injuries, and cleft lip and palate are eligible for care, regardless of the families’ ability to pay. Within these broad service lines, many types of care are provided. For example, some locations offer reconstructive plastic surgery, treatment for craniofacial abnormalities, or care for sports injuries. Generally, care is provided until age 18, although, in some cases, it may be extended to age 21. All services are provided in a compassionate and family-centered environment. Our patients are our priority. We take the time to care and to listen. At Shriners Children’s, every patient and family can expect respectful, compassionate, expert care.

The mission of Shriners Children’s is to:

Provide the highest quality care to children with neuromusculoskeletal conditions, burn injuries, and other special health care needs within a compassionate, family-centered, and collaborative care environment.

Provide for the education of physicians and other health care professionals.

Conduct research to discover new knowledge that improves the quality of care and quality of life of children and families.

This mission is carried out without regard to race, color, creed, sex or sect, disability, national origin, or ability of a patient or family to pay.

Shriners Children’s is committed to its employees and the diverse patient population that Shriners Children’s serves. As a result, no person will be discriminated against because of race, religion, color, sex, sexual orientation, gender identity or expression, age, marital status, citizenship, national origin, genetic information, disability or any other protected class as outlined in applicable state or local regulations.
About Shriners Children’s Portland

Shriners Children’s Portland is part of this health care system. For over 95 years, Shriners Children’s Portland has been providing pediatric orthopedic care in the Pacific Northwest. In 1983, the hospital moved from its original location in Northeast Portland to its current location on Marquam Hill. Since the move, the hospital has experienced tremendous growth in all areas of patient care services.

Currently, the hospital is equipped to provide care for virtually all pediatric orthopedic conditions from sports injuries to the more complex cases including scoliosis, clubfoot and other foot deformities, hand and hip deformities, and orthopedic conditions related to cerebral palsy and spina bifida, among many other conditions. The hospital also offers services in the areas of burn scar reconstructive surgery and cleft lip and palate (CLP) repair and reconstruction.

The mission of Shriners Children’s Portland is to provide the highest quality care to all children within a compassionate, family-centered and collaborative care environment. By consistently maintaining and investing in current programs, this hospital addresses, and will continue to support, the health needs of the local community.
Purpose

A Community Health Needs Assessment (CHNA) is a report based on epidemiological, qualitative, and comparative methods that assess the health issues in a hospital organization’s community and that community’s access to services related to those issues.

The Patient Protection and Affordable Care Act (PPACA), enacted on March 23, 2010, requires not-for-profit hospital organizations to conduct a CHNA once every three taxable years that meets the requirements the Internal Revenue Code 501(r) set forth by the PPACA. The PPACA defines a hospital organization as an organization that operates a facility required by a state to be licensed, registered, or similarly recognized as a hospital; or, a hospital organization is any other organization that the Treasury’s Office of the Assistant Secretary (“Secretary”) determines has the provision of hospital care as its principal function or purpose constituting the basis for its exemption under section 501(c)(3).

This assessment is designed and intended to meet the IRS needs assessment requirement as it is currently understood and interpreted by Shriners Children’s leadership.

Shriners Children’s Commitment to the Community

Shriners Children’s Portland is committed to providing care within the scope of our mission without regard for the family’s ability to pay. We work collaboratively with community partners to assess community needs and to develop new clinical and community benefit programs that enhance the health and well-being of children in our community. Shriners Children’s Portland, like other U.S.-based hospitals in the Shriners Children’s health care system, reaffirms its commitment to providing excellent care through the development of its CHNA. Based on the findings, we have developed an Action Plan to work alongside community stakeholders to address the health needs of the community.
Our Community

Service Area

Care provided by Shriners Children’s Portland spans an extremely wide area (see map), including Oregon, Washington, Alaska, Idaho, Alberta and British Columbia in Canada. As the greatest share of patients are from Oregon and Washington (97.3% in 2021), this assessment focuses on communities located in the Portland-metropolitan area. This includes Multnomah, Washington, and Clackamas Counties in Oregon, and Clark County in Washington.

Population

According to the United States Census Bureau, the population of the four county Portland-metropolitan area was an estimated 2,338,129 in 2021.\(^1\) This estimation represented an average growth rate of 13.8% since April of 2010 (see Core Service Area: County Demographics, pg. 7).

From 2010 – 2020, Multnomah County added more than 80,000 new residents, followed by Clark County, Washington with nearly 78,000 new residents.\(^1\) Washington County, Oregon added more than 70,600 new residents, followed by Clackamas County, with just over 45,400 new residents.\(^1\) According to U.S. Census Bureau data, Multnomah County has the largest population in the state (803,377 in 2021), while Clark County in Washington State experienced the greatest 10-year growth rate (+20.2%).\(^1\)

Children and teens under the age of 18 comprise, on average, 21.4% of the local area population, indicating a strong need for medical services that cater to this age group.\(^1\)

Race and Ethnicity

While the race and ethnicity of all four counties in the Portland-metropolitan area is predominantly White (non-Hispanic/Latino), the demographics of the population continue to diversify. Based on 2021 census data, the primary service area for Shriners Children’s Portland was 73.1% White, 12.1% Hispanic or Latino, 7.4% Asian, 3.0% Black or African American, 1.2% American Indian or Alaska Native, and 0.6% Hawaiian.

or Pacific Islander. Washington County continued to be the most ethnically diverse of the four counties, reporting 17.1% of residents as being of Hispanic or Latino descent, followed by 11.7% being of Asian descent.

Of the four counties in the core service area, Multnomah County reported the largest percentage of Black or African American residents (6.0%), followed by Asian residents (8.1%). Washington County and Multnomah County were the most diverse counties with respect to percentage of households with a primary language other than English, at 24.8% and 19.9%, respectively.

### Core Service Area: County Demographics

<table>
<thead>
<tr>
<th></th>
<th>Clackamas County, OR</th>
<th>Multnomah County, OR</th>
<th>Washington County, OR</th>
<th>Clark County, WA</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Total Population</strong></td>
<td>422,537</td>
<td>803,377</td>
<td>600,811</td>
<td>511,404</td>
</tr>
<tr>
<td>Population Growth % Change (4/1/2010 - 7/1/2021)</td>
<td>12.4%</td>
<td>9.3%</td>
<td>13.4%</td>
<td>20.2%</td>
</tr>
<tr>
<td><strong>Age</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Under 5 years</td>
<td>5.2%</td>
<td>5.1%</td>
<td>5.8%</td>
<td>6.0%</td>
</tr>
<tr>
<td>Under 18 years</td>
<td>21.2%</td>
<td>18.4%</td>
<td>22.5%</td>
<td>23.5%</td>
</tr>
<tr>
<td><strong>Race/Ethnicity</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>White, not Hispanic or Latino</td>
<td>81.1%</td>
<td>69.1%</td>
<td>64.6%</td>
<td>77.5%</td>
</tr>
<tr>
<td>Black or African American</td>
<td>1.2%</td>
<td>6.0%</td>
<td>2.5%</td>
<td>2.4%</td>
</tr>
<tr>
<td>American Indian or Alaska Native</td>
<td>1.1%</td>
<td>1.4%</td>
<td>1.1%</td>
<td>1.2%</td>
</tr>
<tr>
<td>Asian</td>
<td>4.9%</td>
<td>8.1%</td>
<td>11.7%</td>
<td>5.0%</td>
</tr>
<tr>
<td>Native Hawaiian or Pacific Islander</td>
<td>0.3%</td>
<td>0.7%</td>
<td>0.5%</td>
<td>0.9%</td>
</tr>
<tr>
<td>Hispanic or Latino</td>
<td>9.0%</td>
<td>12.0%</td>
<td>17.1%</td>
<td>10.2%</td>
</tr>
<tr>
<td><strong>Education</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>High school graduate or higher</td>
<td>93.7%</td>
<td>92.0%</td>
<td>92.6%</td>
<td>93.0%</td>
</tr>
<tr>
<td>Bachelor’s degree or higher</td>
<td>38.0%</td>
<td>46.5%</td>
<td>44.9%</td>
<td>31.3%</td>
</tr>
<tr>
<td><strong>Employment</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Unemployment rate</td>
<td>7.2%</td>
<td>8.6%</td>
<td>6.5%</td>
<td>8.5%</td>
</tr>
<tr>
<td><strong>Income</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Median Household Income</td>
<td>$82,911</td>
<td>$71,425</td>
<td>$86,626</td>
<td>$77,184</td>
</tr>
<tr>
<td>% of children in poverty</td>
<td>7.0%</td>
<td>12.0%</td>
<td>7.0%</td>
<td>10.0%</td>
</tr>
<tr>
<td>% of children in single parent households</td>
<td>16.0%</td>
<td>23.0%</td>
<td>16.0%</td>
<td>16.0%</td>
</tr>
<tr>
<td><strong>Other</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Language other than English spoken at home</td>
<td>12.3%</td>
<td>19.9%</td>
<td>24.8%</td>
<td>15.3%</td>
</tr>
</tbody>
</table>

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Economic Profile

According to data from the Robert Wood Johnson Foundation, unemployment rates in the Portland metropolitan area have skyrocketed since the last needs assessment in 2019. For example in Multnomah County, the unemployment rate more than doubled from 3.6% to 8.6% over the last three years. Clackamas County saw an increase in unemployment from 3.7% to 7.2%, followed by Clark County, Washington (5.1% to 8.5%) and Washington County, Oregon (3.5% to 6.5%).

On a more positive note, the four counties reported an average increase in median household income of 15.9%. Washington County reports the highest median income ($86,626), followed by Clackamas County ($82,911), Clark County ($77,184) and Multnomah County ($71,425). Also encouraging, the percentage of children living in poverty dropped in all four Portland-metropolitan counties since the 2019 assessment. The decrease ranged from 2% in Washington County to 5% in Multnomah County, with Clackamas and Clark Counties reporting decreases of 3% and 4%, respectively.

In addition to growing rates of unemployment, Oregonians continue to struggle with higher cost of living and rising housing costs. According to the Cost of Living Index, in 2022, Oregon ranks as the fourth-highest cost of living state in the nation, falling behind only Hawaii, Washington D.C., and California. What is more, the median price of a house in the Portland-metropolitan area is $550,000, compared to a national average home price of $374,900.

County Health Rankings

Developed via collaboration between the Robert Wood Johnson Foundation and the University of Wisconsin Population Health Institute, the County Health Rankings & Roadmaps program provides an annual look at vital health factors across the nation. The “overall health” assessment measures a variety of factors including health behaviors, access to clinical care, socioeconomic variables, and physical environment.

According to the most recent ranking, which evaluated 35 counties in Oregon, Benton County ranked number 1 for overall health, followed by Washington County (#2) and Hood River County (#3). Clackamas County came in at #4, while Multnomah County

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came in at #6. Clark County in Washington State again came in at #11 out of 39 total counties in overall health.²

Since the last needs assessment in 2019, the percentage of uninsured individuals in the three Oregon counties has increased slightly (+1% for each). The percentage of uninsured in Clark County, Washington remains unchanged at 7%.² And while anecdotal evidence suggests that provider availability is still an ongoing issue in the four county Portland-metropolitan area, according to County Health Rankings & Roadmaps data, there has been an increase in the per capita number of primary care physicians, dentists, and mental health providers since 2019.²

**Core Service Area: County Health Rankings**

<table>
<thead>
<tr>
<th></th>
<th>Clackamas County, OR</th>
<th>Multnomah County, OR</th>
<th>Washington County, OR</th>
<th>Clark County, WA</th>
</tr>
</thead>
<tbody>
<tr>
<td>Health Factors Overall Rank²</td>
<td>4</td>
<td>6</td>
<td>2</td>
<td>11</td>
</tr>
<tr>
<td>Uninsured</td>
<td>7%</td>
<td>8%</td>
<td>7%</td>
<td>7%</td>
</tr>
<tr>
<td>Primary Care Physicians</td>
<td>1,090:1</td>
<td>680:1</td>
<td>1,110:1</td>
<td>1,330:1</td>
</tr>
<tr>
<td>Dentists</td>
<td>1,190:1</td>
<td>1,010:1</td>
<td>1,080:1</td>
<td>1,400:1</td>
</tr>
<tr>
<td>Mental Health Providers</td>
<td>280:1</td>
<td>100:1</td>
<td>210:1</td>
<td>260:1</td>
</tr>
</tbody>
</table>
Community Need Index

The Dignity Health Community Need Index (CNI) maps community health need by city, county and/or zip code based on a variety of socioeconomic indicators. Areas measured include income, culture, education, insurance and housing, with combined scores ranging from 1 (low need) to 5 (high need).

Across the four counties evaluated for this assessment, the highest need areas (4.2 – 5.0) were all located in Multnomah County. The second highest need areas (3.4 – 4.1) included additional communities in Multnomah County, along with areas of Clark County in Washington, and communities in Washington County, Oregon.

Dignity Health Community Need Index for the Shriners Children’s Portland service area (http://cni.dignityhealth.org)
Hospital Data

A review of 2020 encounter data for Shriners Children’s Portland revealed demographic data that was fairly consistent with the population of the four county service area. During 2020, 71.4% of patients seen at Shriners Children’s Portland self-reported as White, in comparison to the 73.1% for the four county area overall. The hospital does serve a higher percentage of Hispanic/Latino patients: While Hispanics/Latinos comprise, on average, 12.1% of the population within the primary service area, 18.6% of patients served by Shriners Children’s Portland in 2020 identified as Hispanic or Latino. At 2.3%, the percentage of Black or African American patients served by Shriners Children’s Portland in 2020 is comparable to this population in Washington and Clark County, at 2.5% and 2.4%, respectively. However, that figure lags behind the 6.0% Black or African American population in Multnomah County, indicating a potential opportunity to better outreach and serve this population.

Analysis of 2020 data reveals that just over one-half (50.5%) of patients served by Shriners Children’s Portland were from the four county primary service area, with remaining patients coming from other counties throughout Oregon and Washington, as well as other states and Canadian Provinces. When looking specifically at the four county local area, the greatest share of patients were from Washington County (15.2%), followed by Multnomah County (14.3%), Clackamas County (10.6%) and Clark County (10.4%).
Process and Methods

Shriners Children’s Portland utilized the *Mobilizing for Action through Planning and Partnerships* (MAPP) model as a foundation to conduct this Community Health Needs Assessment. The MAPP model leverages health data along with community input to identify the most pressing community health issues.

The MAPP Framework

![MAPP Framework Diagram]

Community Themes and Strength Assessment

Organize for Success

Partnership Development

Visioning

Four MAPP Assessments

Identify Strategic Issues

Formulate Goals and Strategies

Evaluate

Plan

Action

Implement

Community Health and Status Assessment

Community input was obtained via a survey (see Exhibit 1), which was created and distributed electronically to a variety of local organizations including churches of various denominations, little leagues and youth sports associations, public schools and educational service districts, missions and family resource centers, county health departments, food banks, free and reduced health care clinics, and the Oregon Public Health Division. The survey asked respondents to indicate if they serve children who have unmet medical needs, and if so, to specify the services that are lacking. A number
of pre-existing resources provided additional health data utilized for this assessment. These resources are identified throughout the report and in the Acknowledgements section.

Once top medical need areas were identified through both the survey and secondary (pre-existing) research, the hospital’s Community Benefits Council reviewed the need areas and identified where the hospital could have the greatest impact given organizational capacity and infrastructure. Current collaborations were also taken into consideration as they relate to the identified area of need. The council then outlined potential actions to address priority need areas, which are detailed under the Action Plan section below.
Key Findings

Below is a distribution and analysis of data points obtained through the 2022 community survey. As mentioned previously, the survey was distributed online to a variety of organizations serving children including schools, religious-based programs, sports and athletic groups, medical offices/clinics, local shelters and public health agencies throughout the Portland and surrounding metropolitan area. A total of 26 survey responses were received.

Of the 26 responses, 96.2% indicated that the children whom they serve have unmet medical needs (Figure 1). This was an increase from 92.6% reported in 2019, and from 85.7% reported in 2016.

![Figure 1](image-url)
When asked to report the age ranges of children they serve (Figure 2), 96.2% of respondents indicated they work with children and adolescents ages 11 – 18 years, followed by 92.3% who serve children ages 6 – 10 years, and 80.8% who serve children ages 0 – 5 years.

As observed in both 2016 and 2019, mental health emerged as the top unmet need in the 2022 community survey, reported by 92.3% of respondents (Figure 3). This was followed by counseling, which was reported by 88.5% of respondents. Given the close relationship between these two subjects, they have been combined for purposes of Action Planning in this report.
Following mental health and counseling in frequency of mention were nutrition (69.2%) and dental care (50.0%). Of note, while the focus of this survey was on unmet medical needs, a number of anecdotal survey comments highlighted a significant need for housing and safe places for children to live.

Given the significant worldwide impact of the pandemic, this year a question was added around difficulty in accessing services due to COVID-19. When asked to rank services from most to least difficult to access due to COVID, mental health (84.0%) and counseling (76.0%) again topped the list, followed by dental care (36.0%) and nutrition (28.0%) (Figure 4).

![Figure 4](image)

With identification of the top three need areas being mental health/counseling, nutrition and dental care, the next step was to discuss and prioritize focus areas for the 2022 Action Plan. The Community Benefits Council met on several occasions to complete this step and to rank the need areas within the prioritization grid below.
Key Finding Prioritization

<table>
<thead>
<tr>
<th>Access Variables</th>
<th>Shriners Children's Portland Community Need</th>
<th>Shriners Children's Portland Strategic Plan</th>
<th>Shriners Children's Portland Resources Available</th>
<th>Community Impact (High - Low)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mental Health/Counseling</td>
<td>Yes</td>
<td>No</td>
<td>Yes</td>
<td>High</td>
</tr>
<tr>
<td>Nutrition</td>
<td>Yes</td>
<td>No</td>
<td>No</td>
<td>High</td>
</tr>
<tr>
<td>Dental</td>
<td>Yes</td>
<td>No</td>
<td>No</td>
<td>Low</td>
</tr>
</tbody>
</table>

Based on the survey results and given our mission and the resources we have available, Shriners Children’s Portland has chosen to focus its 2022 CHNA Action Plan on access to unmet health care needs related to the following:

- Mental health/counseling

In addition to mental health/counseling, Shriners Children’s Portland remains committed to delivering on its mission of providing high-quality, family-centered pediatric orthopedic care, regardless of a family’s ability to pay. This includes identifying and pursuing opportunities to provide pediatric orthopedic-related services for which there is an identified patient need.

Shriners Children’s Portland recognizes that there are other identified unmet needs within the identified community population; however, due to the specialty nature of Shriners Children’s (its mission, vision and values), its staffing and available resources, Shriners Children’s Portland is unable to further address these needs. Shriners Children’s Portland is integrally connected with many resources in the community to refer patients and families should patients require assistance around nutrition or dental care. In addition, our Care Management department works closely with county and local health departments, Child Protective Services, institutions and agencies to help families find the assistance they need.
Action Plan

2019 Action Plan

Given the ongoing prevalence of mental health as a serious population health issue among children and teens both locally and nationally, Shriners Children’s Portland opted to focus efforts on this area following the 2019 CHNA. A secondary focus area identified was dental care, followed by orthopedics, the long-standing expertise of Shriners Children’s Portland.

Among the specific opportunities identified for *mental health* in 2019 were the following:

- Implementation of a suicide screening, assessment, and intervention program for patients.
- Invitation of a mental-health focused speaker to a Grand Rounds presentation to educate staff on mental health awareness and related issues among the pediatric population.
- Continued efforts in support of anti-bullying and inclusivity initiatives, such as public promotion of the annual Unity Day (October), providing related education to local schools, and providing related tabling collateral at local events.

One *dental care* opportunity was identified, specifically, exploring a collaboration with a local pediatric dental office, the Oregon Academy of Pediatric Dentists, or Medical Teams International to reach local children through mobile dental vans.

2019 Action Plans around *orthopedic care* emphasized providing orthopedic services to more children in more places throughout our community (i.e. telehealth), and continuing to raise awareness of hospital services that benefit all local children, including the expanded fracture and sports injury walk-in clinic, via social media, marketing, and direct community outreach efforts.

2019 Action Plan Results

With regard to *mental health*, Shriners Children’s Portland made several notable achievements in the past three years. First was the hiring of a pediatric clinical psychologist in 2020. The psychologist has been instrumental in the rollout of our suicide screening and assessment program, including staff training. The suicide screening officially began in our Outpatient Clinic in February 2021, and we are now consistently screening 100% of outpatients using the validated Ask Suicide-Screening Questions (ASQ) tool developed by the National Institute of Mental Health (NIMH).
In addition to supporting the suicide screening, the psychologist focuses her time on developing quality improvement programming to evaluate and improve care, provider, and staff education around pediatric behavioral health. Based on the above successes and recognizing the strong ongoing demand for mental and behavioral health services within our patient population, Shriners Children’s Portland was chosen to pilot telehealth with our pediatric clinical psychologist, which has now been fully implemented. This effort fits squarely with our strategic goal of serving more children in more places.

Shriners Children’s Portland did continue efforts around anti-bullying and inclusivity, including public support for the annual Unity Day (October). Unfortunately, due to the COVID-19 pandemic, outreach efforts via schools and local area events did not take place. Additionally, we were unable to secure a mental-health focused speaker for a Grand Rounds presentation to educate staff on mental health awareness and related issues among the pediatric population. Given the importance of ongoing education around mental health, this item remains a goal in our 2022 Action Plan.

While not originally identified as a mental health Action Plan item in 2019, another achievement related to mental health has taken place over the past three years. Since its founding in 2018, our TEDI (Trauma Informed, Evidence-Based, Driven by Research, Inspired) Team has expanded to include interdisciplinary participation. The team, which focuses on ensuring that children with prior developmental trauma receive the extra attention to safety, transparency, and compassion that they need to decrease stress while receiving care at Shriners Children’s Portland, has grown and received over 40 referrals in 2021 alone.

Efforts around dental care, the secondary need area identified in 2019, were significantly impacted by the COVID pandemic. Shriners Children’s Portland had identified collaboration with a local pediatric dental office, the Oregon Academy of Pediatric Dentists, or Medical Teams International to reach local children through mobile dental vans as a goal from the prior assessment. While work did begin to identify partners for such a project, efforts were stalled by the pandemic and subsequent staffing and resource constraints.
While the COVID-19 pandemic negatively impacted efforts around dental care, it had a positive effect on our third identified Action Plan: *Provide orthopedic services to more children in more places.* While planning for telehealth was already underway, the public health emergency expedited that work and Shriners Children’s Portland went live with telehealth visits in March of 2020. Beginning with just two visits that first month, telehealth quickly grew to a total of 614 visits in 2020 and 763 visits in 2021. To reach even more children in more places, the telehealth program expanded in February 2022 via an affiliate site within the David Douglas School Based Health Clinic with Multnomah County in East Portland.

The Shriners Children’s Portland fracture and sports injury walk-in clinic also provided a valuable service throughout the COVID pandemic. First expanded to a full-day clinic in 2019, the clinic was further expanded to 7 days a week during the height of the public health emergency. By providing expert orthopedic care to pediatric patients in need, the clinic relieved the burden on local emergency departments and urgent care centers, freeing them to treat more critically ill patients. Shriners Children’s Portland also provided a safe, family-centered environment for these patients to receive specialty orthopedic care outside of busy emergency departments and urgent care centers.

A notable service addition since the 2019 CHNA is the November 2021 opening of the Shriners Children’s Medford Clinic in the Medford/Rogue Valley area of Southern Oregon. Designed to fulfill a large unmet need for pediatric orthopedic care in this service area, the clinic operates every Saturday and has seen over 220 patients as of April 2022. Previously, patients had to drive 4 – 6 hours to the Portland area for care. Families now can seek care locally, saving in both time and travel costs. Feedback from community physicians and families has been overwhelmingly positive, with many expressing appreciation for the ability to receive Shriners Children’s specialized care so close to their homes.

In addition to the above highlights, Shriners Children’s Portland has continued to maintain our community resource walls, consolidating and outlining resources around mental health, dental care, and nutrition. This involves an annual review of the compiled resources, verification and updating of listed contact information (e.g. websites, phone numbers, etc.) and the identification and addition of new resources that may benefit those with needs in these specific areas. A new resource sheet discussing how best to access behavioral health resources is currently under development and will be added to the resource walls in the near future.
Written Comments on 2019 Community Health Needs Assessment

Shriners Children’s Community Health Needs Assessment and implementation was made widely available to the public on Shriners Children’s website at https://www.shrinerschildrens.org/en/community-health-needs

In addition to posting the Community Health Needs Assessment, contact information including email were listed. No comments or questions were received.

2022 Action Plan and Performance Measures

To continue addressing the significant identified community needs around mental health/counseling, the hospital will focus efforts over the next three years as follows:

- Review current hospital suicide screening practices and measure impact; evaluate potential need for additional on-site mental/behavioral health resources.
- Seek opportunities to educate staff on mental health awareness and related issues among the pediatric population (e.g. Grand Rounds presentations) – focus areas might include ADHD, autism, or eating disorders.
- Continue existing efforts in support of anti-bullying and inclusivity initiatives:
  - Promote the annual Unity Day (October) both internally and externally via the hospital’s social media channels.
- Seek opportunities for increased collaboration with community providers and others (e.g. education partners, local therapists, etc.) with a goal of raising awareness of pediatric behavioral health concerns that impact children in our community.
- Explore additional opportunities to share already created resource sheets.
- Establish a monthly support group for youth and families impacted by Neuromuscular disease.
- Encourage active participation by our behavioral health team in the Oregon Psychological Society.

Specific performance measures for each of the above initiatives are currently under development by the Community Benefits Council, along with detailed project plans and timelines.
**Other Ways Shriners Children’s Portland is Helping**

**Financial and Local Transportation Assistance for Patients & Families in Need**

The patient access department provides financial counseling services to assist eligible families with covering the cost of care. And for under or uninsured patients, Shriners Children’s Portland offers two programs – Charity Care and Shrine Assist – to help with the cost of medical treatment.

For Shriners Children’s Portland inpatients who travel more than 50 miles from their home to the hospital and who meet financial criteria via a means test, room-in accommodations for one parent/guardian or relative over the age of 18 years are provided. The parent may spend the night (room-in) with the patient, with a fold out bed and showers provided. Family guest rooms are also available if an additional parent/guardian wishes to spend the night while their child is staying in the inpatient unit.

Finally, for families coming from outside the Portland metropolitan area, Shriners Children’s Portland offers complimentary transportation to and from the Portland airport, Union Station and local hotels, when available.

**Language Assistance for Non-English Speaking Patients & Families**

Shriners Children’s Portland seeks to address language assistance needs via our Medical Interpretation and Translation Department (MITD), which supports access for all languages via our own in-house health care interpreters and independent contractors.
Community Outreach, Education & Collaboration

For the growing Hispanic population, outreach services are extended to many community organizations, including the Mexican Consulate’s program “Ventanilla de Salud” (VDS). This program aims to disseminate and improve access to primary and preventive health care services, increase public insurance coverage, and establish a medical home through information, education, counseling and referrals to quality health care facilities in a safe and friendly environment.

The Virginia Garcia Memorial Health Center, with a mission to provide high quality, comprehensive, and culturally appropriate primary health care with a special emphasis on migrant and seasonal farmworkers and others with barriers to receiving health care, is also part of Shriners Children’s Portland outreach.

Additionally, Shriners Children’s Portland has worked with the Portland and Beaverton school districts to make community resource materials available to Spanish-speaking families.

Shriners Children’s Portland also develops and produces health education materials with an orthopedic focus, which are distributed to physicians and other medical providers. The hospital provides a variety of patient education pamphlets on topics such as Vitamin D deficiency and the proper use of backpacks (see Exhibits 2 & 3). The quarterly Leaders in CARE publication, while produced by the Shriners Children’s Home Office, incorporates several pages of content written by Shriners Children’s Portland and targeted to local-area audiences.

Shriners Children’s Portland also maintains partnerships with a variety of community organizations, raising awareness of services offered through local health fairs and events. During the pandemic many of these in-person events were canceled, but Shriners Children’s Portland looks forward to continued community participation when such activities resume.
Family Support Resources

Recognizing that family plays a vital role in a child’s ability to overcome an illness or injury, Shriners Children’s Portland helps families provide the support their child needs by involving them in all aspects of their child’s care and recovery. The hospital provides comprehensive physical and psychosocial services to patients and their families. This includes supporting the Limb Differences Support Network and Muscular Dystrophy Family Nights. Shriners Children’s Portland also recently hosted a Virtual Assistive Technology (AT) User Showcase, highlighting users of assistive technology in the community and showing how they use their AT tools to support engagement in daily life.

A Patient and Family Resource Library offers a centralized “resource room” which includes books, journals, audio-visual, and other resources designed to help patients and families access the care and services they need. Topics patients might explore in the library include careers, diagnosis, independent living, recreation, relationships, support and transition to adulthood.

Continuing Medical Education for Health Care Professionals

Annually, Shriners Children’s Portland offers three continuing medical education conferences to providers. The goal of these events is to provide professional education on current pediatric orthopedic practices to medical physicians, osteopathic physicians, naturopathic physicians, nurse practitioners, physician assistants, nurses, medical assistants, physical therapists, occupational therapists, prosthetists and orthotists, residents and fellows in training, and medical students.
• The Dillehunt Memorial Lecture honors the contributions of Dr. Richard Dillehunt, a great surgeon and teacher who inspired many orthopedists. While canceled in 2020 and 2021 due to COVID, the lecture resumed in 2022 and covered topics such as management of ambulant children with cerebral palsy; orthopedic challenges in the new era of SMA treatment; avascular necrosis after hip reconstruction in children with cerebral palsy; flat feet anatomy, biomechanics and perceived disability; and the role of behavioral health in orthopedics.

Shriners Children’s Portland medical staff, residents and guests attend a recent Dillehunt Lecture.

• The Beattie Lectureship is an annual conference that honors Mr. Byron Beattie, who was so impressed with the organization’s educational mission that he created an endowment fund to support this annual lecture. The event was canceled in 2020 but resumed in October 2021. Presentations that year were on topics including biomarkers and growth predictors in pediatric orthopedics; the process towards continuous improvement; and 3D gait analysis and functional outcomes of femoral derotational osteotomies for idiopathic torsional deformities.

• The Annual Primary Care Providers Conference is dedicated to providing local and national primary care providers with a better understanding of current pediatric orthopedic practices. Canceled in 2020 and 2021 due to COVID, this event will resume in August 2022 with topics to include skeletal dysplasia; fracture management; knee injuries and pain; orthopedic conditions in newborns; metabolic bone health; nutrition and obesity; mental health considerations; back pain; adolescent hip pain; tone management; toe walking; pectus excavatum and carinatum.

In addition to the above, Shriners Children’s Portland has a monthly resident/fellow joint lecture with neighboring Oregon Health & Science University’s Orthopedic Residency Program. Recent topics covered at these lectures include clubfeet, syndromes of orthopedic importance, onset scoliosis, orthopedic management of skeletal dysplasia and pediatric ankle fractures.
Finally, orthopedic surgeons from Shriners Children’s Portland regularly provide specialized education on conditions treated and services provided to local community hospitals and professional groups.

**Teaching Affiliations and Youth Education**

Shriners Children’s Portland is proud to maintain teaching affiliations with a number of academic programs including:

- Oregon Health & Science University School of Medicine
  - Orthopedic Residency Program
  - School of Medicine (MD Program)
  - Physician Assistant Program
- Pediatric Orthopedic Society of North America (POSNA)
  - Fellowship Program-Accredited through POSNA
- Australian Orthopedic Association
  - Fellowship Program
- Medical School Affiliations:
  - A.T. Still University of Osteopathic Medicine (DO Program)
  - Pacific Northwest University (DO Program)
  - Western University of Health Sciences (DO Program)

In addition to medical students, Shriners Children’s Portland provides educational and mentoring opportunities to other health care professionals in programs including radiology, rehabilitation, nursing, nutrition services, pharmacy, and orthotics & prosthetics.

Beyond supporting current medical practitioners, Shriners Children’s Portland recognizes the importance of nurturing the next generation of health care leaders. While these efforts have been on hold due to COVID, Shriners Children’s Portland has traditionally conducted educational presentations for various local-area high schools, universities, and community groups. In addition, Shriners Children’s Portland has hosted summer camps in collaboration with “Saturday Academy” for high school and middle school students interested in pursuing a career in health care.
Research to Advance and Improve Treatment Options for Children with Orthopedic and Musculoskeletal Conditions

The Shriners Children’s health care system is committed to conducting high quality, innovative research in the areas of burn, orthopedic/musculoskeletal and neurological injury and disease, in order to improve the care and quality of life of children with these conditions. Shriners Children’s Portland is home to one of eight Shriners Children’s research centers and is affiliated academically with Oregon Health & Science University. Research conducted at this center focuses on musculoskeletal development and addresses the root causes of relevant birth defects and developmental disorders affecting children receiving care. Identifying the underlying biological disturbances in these conditions will lead to new, more effective and less invasive therapies in the future, as well as better ways to monitor disease progression and response to therapies.

The research center’s scientific approach is multidisciplinary in nature, bringing a combination of biochemistry, genetics, cell and developmental biology, and electron microscopy to bear on disturbances of bone, cartilage, and tendon development. Conditions currently under investigation at Shriners Children’s Portland research center include:

- Birth defect syndromes involving limb anomalies such as connective tissue and hand-foot-urinary syndromes
- Disorders of reduced, abnormal, or excessive bone growth including achondroplasia and multiple epiphyseal dysplasia
- Disorders in which skeletal regeneration is disturbed, for example osteogenesis imperfecta
- Malformations resulting from defective tendon formation, such as arthrogryposis

In addition to fundamental research, Shriners Children’s Portland conducts clinical research. The focus of this work is to determine treatment outcomes and the natural history of various conditions, including those with gait disturbances, muscle weakness, and spinal curvatures.

Finally, research conducted at Shriners Children’s Portland is shared broadly via articles published in scientific and medical journals, as well as presentations at various conferences geared to medical, orthotics and prosthetics, and rehabilitation professionals.
2022 Community Health Needs Assessment Report Available Online or in Print

The 2022 Community Health Needs Assessment is available at: https://www.shrinerschildrens.org/en/community-health-needs

05/23/2022
Date adopted by Shriners Children’s Portland Board of Governors
Exhibit 1: Local Survey

Community Health Needs Survey 2021
Shriners Hospitals for Children-Portland is conducting a survey to identify unmet medical needs of the local community. We would like to hear firsthand from community-based organizations and providers that serve children and their families what you consider to be the greatest needs in the Portland/Vancouver Metro area. Responses should be based on your knowledge of working with children, as you may or may not have children of your own.

Please note that all answers will remain confidential. The aggregate data will be used to help us meet our goal of better serving the community.

Thank you for your help!

1. Do the children you serve have any unmet needs?
   - Yes
   - No

2. If you answered "yes" to question #1, please select the age ranges for the children you serve (select all that apply.)
   - 0-5 years
   - 6-10 years
   - 11-18 years

3. Please choose the relevant unmet needs from the list below (select all that apply):
   - Access to healthcare delivered with cultural competence
   - Counseling
   - Dental care
   - Immunizations
   - Insurance coverage
   - Language access services
   - Mental health
   - Nutrition
   - Primary care
   - Sports injury/fracture

Other unmet need (please specify):
4. Of the needs identified above, which have been especially difficult to access due to COVID-19 (select all that apply):

- Access to healthcare delivered with cultural competence
- Counseling
- Dental care
- Immunizations
- Insurance coverage
- Language access services
- Mental health
- Nutrition
- Primary care
- Sports injury/fracture

Other unmet need (please specify):

5. If mental health was selected, please specify area(s) of need (select all that apply):

- Abuse/neglect
- Anxiety
- Bullying
- Community engagement (i.e. camps, after school activities/recreation programs, support groups, etc.)
- Coping/resiliency
- Depression
- Substance abuse/addiction
- Suicidal ideation

Other mental health issues (please specify):

6. If counseling was selected, please specify potential barriers to accessing counseling services (select all that apply):

- Access to childcare
- Access to technology
- Availability of providers
- Cultural/religious beliefs
- Insurance coverage
- Language
- Locating services
Other barriers to accessing counseling services (please specify):

7. If nutrition was selected, please specify area(s) of need (select all that apply):

- Ability to accommodate special diet
- Access to nutritious food
- Barriers to regular exercise
- Food insecurity
- Knowledge of proper nutrition/balanced diet
- Obesity

Other nutrition concerns (please specify):

8. If dental was selected, please specify area(s) of need (select all that apply):

- Access to services
- Fear
- Insurance coverage
- Knowledge of proper dental care
- Transportation

Other dental concerns (please specify):

9. If access to healthcare delivered with cultural competence was selected, please specify area(s) of need (select all that apply):

- Lack of interpretation services
- Mistrust of healthcare providers and/or systems
- Previous experience with discrimination or racism in a healthcare setting
- Previous experience with racial stereotypes and/or bias in a healthcare setting

Other (please specify):

10. If you responded to question #9, to which culture/cultures did the child/children belong?

11. We are making a concerted effort to address disparities among minority populations and welcome any additional insight you feel comfortable sharing on this topic:
12. Please describe or elaborate on any other unmet medical needs for children in the Portland-metropolitan area:

13. Of the unmet needs you identified above, please rank the top three (where 1 = greatest need):

Access to healthcare delivered with cultural competence
Counseling
Dental care
Immunizations
Insurance coverage
Language access services
Mental health
Nutrition
Primary care
Sports injury/fracture
Other (noted above)

14. In your observation, where do the populations you serve receive most of their health education? (select all that apply):

☐ Community groups
☐ Family/friend
☐ Medical online sources
☐ Medical professionals
☐ Other online sources (non-medical)
☐ Places of worship
☐ Social media
☐ Teacher/coach

Other (please specify):

15. What is the nature of your role in working with children/the public?

16. Please share any additional feedback or comments:
**Exhibit 2: Educational Brochure on Vitamin D Deficiency**

**Lifestyle Factors Contributing to Vitamin D Deficiency:**
- Decreased outdoor activities
- Constant use of sunscreen while outside
- Limited availability of Vitamin D-rich foods
- Decreased milk intake due to increased intake of sugar-sweetened beverages
- Obesity

**Recommendations to Improve Vitamin D Health**

- **Soak up the sun:** In sunny weather, your body can make Vitamin D in just a few minutes (10-15) of middle sun exposure without sunscreen.

**What foods contain Vitamin D?**
- Fortified milk (cows, soy, almond, coconut)
- Fortified orange juice
- Fortified cereal
- Fortified yogurt
- Mushrooms
- Fatty Fish (Tuna, Sockeye Salmon, Mackerel)

*Check Nutrition Facts Panel for specifics on Vitamin D content

**How much Vitamin D does my child need?**
- The American Academy of Pediatrics recommends a daily intake of 400 IU per day for children under the age of 1 year.
- The Institute of Medicine recommends that children and adolescents should have a daily intake of at least 600 IU per day.

**Consult with your RD to help determine how much daily Vitamin D your child is getting, as well as determine if and what additional supplement he/she might need.

- Avoid taking several multivitamins to get more Vitamin D as they may contain too many other vitamins that can be harmful.

**What supplements should I give my child?**

- Vitamin D supplements are readily available in child-friendly forms (chewable or liquid drops).
- Get advice from your dietitian on supplement options.
Exhibit 3: Educational Brochure on Backpack Use

### Facts About Backpacks

Used correctly, backpacks can be a good way to carry all the books, supplies and personal items needed for a typical school day. Backpacks are designed to distribute the weight of the load among some of the body's strongest muscles. However, backpacks that are too heavy or carried incorrectly can injure muscles or joints and contribute to back pain and other problems.

**The Proper Backpack is:**
- No wider than the user's chest
- Worn no higher than the base of the neck
- Worn no lower than 2 to 4 inches below the waist
- Supported by a waist or chest strap
- Made of lightweight material

**A Good Backpack has:**
- A padded back
- Several compartments
- Side compression straps
- A waist or chest strap
- Reflectors
- Two wide, padded shoulder straps

### How to Use a Backpack

**To Wear it**
- Facing the backpack, bend your knees, hold the backpack with both hands, and straighten your knees to lift it to waist height.
- Apply one shoulder strap at a time.
- Be sure to always use both shoulder straps.
- Smugly adjust it between your neck and the curve of your lower back using the shoulder straps (the closer the backpack is to your body, the less strain it will cause).

**To Load it**
- Keep it light – pack only what is needed for the day.
- Place the heaviest objects so they will be closest to your back.
- Use compartments to distribute the weight and keep things from sliding.
- Hand-carry heavy books to avoid excessive weight in the backpack.
- Clean it out daily.

### Backpack Weight

If a backpack forces the wearer to lean forward, it's overloaded and some items should be removed. Carrying an overloaded backpack can cause discomfort and, over time, lead to back injuries and other problems.

If the backpack weighs more than 15 percent of the wearer's weight, it's too heavy. To determine the proper maximum weight for a backpack, multiply the user's body weight by 0.15. If a heavier load is unavoidable, consider using a backpack with wheels.

CARRYING TOO MUCH WEIGHT OR WEARING A BACKPACK THE WRONG WAY CAN LEAD TO:
- Muscle fatigue
- Poor posture
- Painful shoulders
- Back and neck pain
- Injuries from tripping and falling
### Exhibit 4: Mental Health Resource Sheet (English Language)

<table>
<thead>
<tr>
<th>Mental Health Resource Guide</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Crisis Resources</strong></td>
</tr>
<tr>
<td>Multnomah County Crisis Line</td>
</tr>
<tr>
<td>Washington County Crisis Line</td>
</tr>
<tr>
<td>Clackamas County Crisis Line</td>
</tr>
<tr>
<td>Clark County Crisis Line</td>
</tr>
<tr>
<td>National Lines for Life Suicide Hotline</td>
</tr>
<tr>
<td>Lines for Life Youthline (teen crisis help with peer support)</td>
</tr>
<tr>
<td>David Romprey Warmline Peer support for crisis and non-crisis 9am-11pm</td>
</tr>
<tr>
<td><strong>Clinics</strong></td>
</tr>
<tr>
<td>Cascadia Behavioral Healthcare Walk-In Clinic</td>
</tr>
<tr>
<td>Urgent, Inpatient and outpatient services</td>
</tr>
<tr>
<td>Morrison Child and Family Services Counseling services for children and families</td>
</tr>
<tr>
<td><a href="http://www.morrisonkids.org">www.morrisonkids.org</a></td>
</tr>
<tr>
<td>Providence Behavioral Health Family and Individual therapy for children and youth, eating disorders, Substance use, outpatient, and 24/7 Crisis Support</td>
</tr>
<tr>
<td><a href="http://www.oregon.providence.org">www.oregon.providence.org</a></td>
</tr>
<tr>
<td>Riverstone Clackamas County Walk-In Clinic Short term services regardless of insurance</td>
</tr>
<tr>
<td><strong>Low Cost Mental Health Services</strong></td>
</tr>
<tr>
<td>Lewis &amp; Clack Community Counseling Center</td>
</tr>
<tr>
<td><a href="http://www.graduate.lclark.edu/clinics/community_counseling">www.graduate.lclark.edu/clinics/community_counseling</a></td>
</tr>
<tr>
<td>Lifeworks NW</td>
</tr>
<tr>
<td><a href="http://www.lifeworksnw.org">www.lifeworksnw.org</a></td>
</tr>
<tr>
<td>PSU Community Counseling Clinic</td>
</tr>
<tr>
<td><a href="http://www.pdx.edu/coun/clinic">www.pdx.edu/coun/clinic</a> ($15 a session, with further reduced fees available)</td>
</tr>
<tr>
<td>Wise Counsel &amp; Comfort Locations across Multnomah, Clackamas and Washington Counties</td>
</tr>
</tbody>
</table>
### Grief Support

**Adventist Medical Center Bereavement Support Group**  
503-251-6192 Ext. 5670

**The Dougy Center**  
Grief support programs for kids, teens, adults, and siblings.  
Resources, tips, podcasts and where to find groups in and out of Oregon  
[www.dougy.org](http://www.dougy.org)

### Support Groups through the Portland Shriners Hospital

**Limb Difference Support Group**  
971-544-3304

**Neuromuscular Support Group**  
For youth and families who have a neuromuscular diagnosis  
503-944-1165

### Other Support

**Adaptive Sports Northwest**  
Wheelchair basketball, swimming, track and field, power soccer and more  
[eye@adaptivesportsw.org](mailto:eye@adaptivesportsw.org)

**Doernbecher Pediatric Pain Management Clinic**  
503-418-5188

**Recreation Therapy & Movement Arts**  
Offered through the Portland Shriners Hospital - adaptive services for: dance, art, horseback riding, swimming, kayaking/rafting, gymnastics, fishing, and skiing/snowboarding. (Activity list changes occasionally - call or email for updates)  
[cfscott@shrinenet.org](mailto:cfscott@shrinenet.org)

**Oregon Family to Family Health Information Center**  
Peer and family support for families with a child or youth with chronic health conditions or Developmental delays or disabilities.  
[www.oregonfamilytofamily.org](http://www.oregonfamilytofamily.org)  
503-931-8930(Spanish)

Contact your local Parks and Rec for their Adaptive and Inclusive Recreation Programs

### Additional Tips!

- Contact your local County Behavioral Health Center  
- Talk to your Primary Care Provider for a referral  
- Dial (211) to request local resources by phone  
- Text (text your zip code to 8989211)  
- Free app (211Info app)  
- Email (help@211Info.org)  
- Contact your insurance company to find providers in your network
Exhibit 5: Food & Nutrition Services Resource Sheet (English Language)

<table>
<thead>
<tr>
<th>Oregon Food &amp; Nutrition Services</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>SNAP</strong> (Supplemental Nutritional Assistance Program)</td>
</tr>
<tr>
<td><strong>Are you pregnant or have children under age five?</strong> or call 211</td>
</tr>
<tr>
<td>- WIC (Supplemental Nutrition Program for Women, Infants and Children)</td>
</tr>
<tr>
<td><a href="http://www.211info.org">www.211info.org</a></td>
</tr>
<tr>
<td>- Multnomah County: <a href="http://www.multco.us/health/wic">www.multco.us/health/wic</a> 503-988-3503</td>
</tr>
<tr>
<td>- Clackamas County: <a href="http://www.clackamas.us/publichealth/">www.clackamas.us/publichealth/</a> 503-655-8476</td>
</tr>
<tr>
<td>- Washington County: <a href="http://www.co.washington.or.us/">www.co.washington.or.us/</a> 503-846-3555</td>
</tr>
<tr>
<td><strong>Are you a senior 60+?</strong></td>
</tr>
<tr>
<td><strong>Especially for kids:</strong></td>
</tr>
<tr>
<td>- Contact your child's school about free and reduced lunches</td>
</tr>
<tr>
<td><strong>Most farmers markets</strong> accept SNAP, WIC &amp; Senior Farm Direct vouchers, and several will match or add to SNAP dollars so you can buy more!</td>
</tr>
<tr>
<td>To find markets near you that take SNAP/WIC visit: <a href="http://www.oregonfarmersmarkets.org/market-finder/">www.oregonfarmersmarkets.org/market-finder/</a></td>
</tr>
<tr>
<td><strong>Food pantries</strong> provide free basic food and produce. or call 211</td>
</tr>
<tr>
<td><a href="http://www.211info.org">www.211info.org</a></td>
</tr>
<tr>
<td>Take free classes in gardening, cooking or shopping on a budget: <a href="http://www.oregonfoodbank.org/find-help/classes/">www.oregonfoodbank.org/find-help/classes/</a> 503-282-0555</td>
</tr>
<tr>
<td>For nutrition information &amp; low-cost healthy recipes visit: <a href="http://www.foodhero.org/recipes/healthy-recipes/">www.foodhero.org/recipes/healthy-recipes/</a> 541-737-1017</td>
</tr>
</tbody>
</table>

*What is 211? 211 is a free multilingual phone or online service that provides easy access to information about health, human services and employment assistance. Local information is updated continuously. Information and referral specialists work with callers to assess their needs, determine their options and provide appropriate programs/services, offer support, intervene in crisis situations and advocate for the caller as needed.*
SW Washington Food & Nutrition Services

**SNAP (Supplemental Nutritional Assistance Program)**
- **www.benefits.gov/categories** or call 211

Are you **pregnant or have children under age five?**
- **WIC (Supplemental Nutrition Program for Women, Infants and Children):**
  - **www.211info.org**

- **Clark County:** [www.seamar.org/services-clark](http://www.seamar.org/services-clark) 360-397-2000
- **Cowlitz County:** [www.cowlitzfamilyhealth.org/other-services](http://www.cowlitzfamilyhealth.org/other-services) 360-225-3953
- **Skamania County:**

Are you a **senior 60+?**
- **Senior Nutrition Program:**
  - **www.dshs.wa.gov/altsa/home-and-community-services/senior-nutrition-program**

- **Senior Farmers Market Nutrition Program:**
  - **dshs.wa.gov/altsa/home-and-community-services/senior-farmers-market-nutrition-program**

Especially for kids:
- **Summer meals for kids:**
  - **https://resources.parenthelp123.org/services/summer-meals** or call 211

- **Contact your child’s school about free and reduced lunches**

Most **farmers markets** accept SNAP, & WIC vouchers, and several will match or add to SNAP dollars so you can buy more!

- **To find markets near you that take SNAP/WIC visit:**
  - **www.wafarmersmarkets.com/washingtonfarmersmarketdirectory/**

**Food pantries** provide free basic food and produce.
- **Clark County:** [www.clarkcountyfoodbank.org/gethelp/](http://www.clarkcountyfoodbank.org/gethelp/) 360-693-0939
- **All other counties:** [www.211info.org](http://www.211info.org) or call 211

Take free classes in **gardening** so you can grow a portion of your own food!
- **Clark County WSU Extension:** [extension.wsu.edu/clark/gardening](http://extension.wsu.edu/clark/gardening) 564-397-5733
- **Cowlitz County WSU Extension:** [extension.wsu.edu/cowlitz/nhort/](http://extension.wsu.edu/cowlitz/nhort/) 360-577-3014
- **Skamania County WSU Extension:** [extension.wsu.edu/skamania/agriculture/](http://extension.wsu.edu/skamania/agriculture/) 509-427-3930

For **nutrition Information & low-cost healthy recipes** visit:
- **www.foodhero.org/recipes/healthy-recipes**
## Oregon Pediatric Dental Resources

### Free and Low-Cost Dental Resources

<table>
<thead>
<tr>
<th>Resource</th>
<th>Contact Information</th>
</tr>
</thead>
<tbody>
<tr>
<td>OHSU Russell Street Dental Clinic</td>
<td>503-494-6822</td>
</tr>
<tr>
<td>Portland, OR</td>
<td><a href="http://ohsu.edu/visit/russell-street-clinic">http://ohsu.edu/visit/russell-street-clinic</a></td>
</tr>
<tr>
<td>OHSU School of Dentistry</td>
<td>503-494-8867</td>
</tr>
<tr>
<td>Low cost options for dental, oral surgery &amp; orthodontia</td>
<td></td>
</tr>
<tr>
<td>OHSU Pediatric Dentistry</td>
<td>503-418-4333</td>
</tr>
<tr>
<td>Portland, OR</td>
<td><a href="http://www.ohsu.edu/xd/health/services/dental-clinics/pediatric/index.cfm">www.ohsu.edu/xd/health/services/dental-clinics/pediatric/index.cfm</a></td>
</tr>
<tr>
<td>Multnomah County Dental Access Program</td>
<td>503-988-6942</td>
</tr>
<tr>
<td>Six (6) clinics offered throughout Multnomah County</td>
<td><a href="https://multco.us/health/dental-clinics">https://multco.us/health/dental-clinics</a></td>
</tr>
<tr>
<td>Pacific University Dental Hygiene Clinic</td>
<td>503-352-7373</td>
</tr>
<tr>
<td>Hillsboro, OR</td>
<td><a href="http://www.pacificu.edu/about/community/healthcare-clinics/pacific-dental-hygiene-clinic">www.pacificu.edu/about/community/healthcare-clinics/pacific-dental-hygiene-clinic</a></td>
</tr>
<tr>
<td>PCC Dental Clinic</td>
<td>971-722-4909</td>
</tr>
<tr>
<td>Portland, OR</td>
<td><a href="http://www.pcc.edu/resources/dental-clinic.html">www.pcc.edu/resources/dental-clinic.html</a></td>
</tr>
<tr>
<td>Non-Profit and Charitable Dental Organizations</td>
<td>503-624-1026</td>
</tr>
<tr>
<td>Mobile Dental</td>
<td>503-491-7176</td>
</tr>
<tr>
<td>Mt. Hood Community College Dental Clinic, Gresham, OR</td>
<td>503-846-5861</td>
</tr>
<tr>
<td>Hillsboro:</td>
<td>503-416-4547</td>
</tr>
<tr>
<td>Canby:</td>
<td>503-941-3064</td>
</tr>
<tr>
<td>Oregon City:</td>
<td>503-850-4479</td>
</tr>
</tbody>
</table>

### For Children with Special Needs

<table>
<thead>
<tr>
<th>Resource</th>
<th>Contact Information</th>
</tr>
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<tbody>
<tr>
<td>Doernbecher Children’s Hospital</td>
<td>503-418-5799</td>
</tr>
<tr>
<td>For Interpretation:</td>
<td>503-494-2800</td>
</tr>
<tr>
<td>Providence Specialty Pediatric Dental Clinic</td>
<td>503-215-1056</td>
</tr>
<tr>
<td>Serves children birth to 18 years of age with developmental, medical &amp; behavioral disabilities</td>
<td><a href="http://www.ProvidenceOregon.org/pediatricdental">www.ProvidenceOregon.org/pediatricdental</a></td>
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### For Children with Special Needs

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<tr>
<td><strong>Smiles Change Lives</strong></td>
<td>888-900-3554</td>
</tr>
<tr>
<td><strong>Children’s Program</strong></td>
<td>503-265-5627 or 888-393-2772</td>
</tr>
<tr>
<td>Provides immediate treatment for uninsured children 5-18 years old</td>
<td>Program will provide $500 of basic dental services at no charge</td>
</tr>
<tr>
<td>The referral form can be found at:</td>
<td><a href="https://www.odsmembers.com/pdfs/child_prog_refer.pdf">www.odsmembers.com/pdfs/child_prog_refer.pdf</a></td>
</tr>
<tr>
<td><strong>NW Grotto Association</strong></td>
<td>503-594-0837 or 888-393-2772</td>
</tr>
<tr>
<td>Dental care for children with special needs under 18 years old</td>
<td><a href="http://www.hfgrotto.org/">http://www.hfgrotto.org/</a></td>
</tr>
<tr>
<td><strong>Donated Dental OR</strong></td>
<td>503-538-4289</td>
</tr>
<tr>
<td>Dental and Orthodontia care (no-cost if meet criteria), but need a referral from a physician</td>
<td><a href="https://dentallifeline.org/oregon/">https://dentallifeline.org/oregon/</a></td>
</tr>
<tr>
<td><strong>The Kids Dentist</strong></td>
<td>503-538-4289</td>
</tr>
<tr>
<td>Newburg, OR</td>
<td></td>
</tr>
</tbody>
</table>

### Dental offices accepting Medicaid and OHP

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<thead>
<tr>
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</tr>
</thead>
<tbody>
<tr>
<td><strong>Portland Children’s Dentistry – Downtown Portland</strong></td>
<td>503-477-7130</td>
</tr>
<tr>
<td>This office treats medically fragile patients</td>
<td><a href="http://www.portlandchildrensdentistry.com/">http://www.portlandchildrensdentistry.com/</a></td>
</tr>
<tr>
<td><strong>Nelson Pediatric Dentistry and Orthodontics – Beaverton, OR</strong></td>
<td>503-719-7518</td>
</tr>
<tr>
<td>This office treats medically fragile patients</td>
<td><a href="http://portlandpedoortho.com/">http://portlandpedoortho.com/</a></td>
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### Dental offices accepting only Capital and ODS

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<tr>
<th>Office</th>
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<tr>
<td><strong>Tigard Family Dental – Tigard, OR (Capital &amp; ODS)</strong></td>
<td>971-762-1268</td>
</tr>
<tr>
<td><a href="https://www.tigardfamilydental.com/">https://www.tigardfamilydental.com/</a></td>
<td></td>
</tr>
<tr>
<td><strong>Pediatric Dental Group – Downtown Portland (Capital &amp; ODS)</strong></td>
<td>503-292-9274</td>
</tr>
<tr>
<td>This office treats medically fragile patients</td>
<td><a href="http://oregonpediatricdental.com/">http://oregonpediatricdental.com/</a></td>
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### SW Washington Pediatric Dental Resources

**Free and Low-Cost Dental Resources**

<table>
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<tr>
<th>Resource</th>
<th>Address</th>
<th>Phone</th>
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</tr>
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<tbody>
<tr>
<td>Free Clinic of Southwest Washington</td>
<td>Vancouver, WA</td>
<td>360-313-1390</td>
<td><a href="http://freeclinics.org/services/dental-services/">http://freeclinics.org/services/dental-services/</a></td>
</tr>
<tr>
<td>New Heights Dental Clinic</td>
<td>Vancouver, WA</td>
<td>360-694-0355</td>
<td><a href="https://newheights.org/new-heights-clinic/">https://newheights.org/new-heights-clinic/</a></td>
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**Non-Profit and Charitable Dental Organizations**


**Mobile Dental**

Low cost dental care to low income children and adults in OR/WA

425-284-1950
# For Children with Special Needs

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</tr>
<tr>
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<tr>
<td>Braces and orthodontia-low cost for low income youth 7-21 years old</td>
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Acknowledgements

**Shriners Children’s Portland Community Benefits Council:**
Davene Dietzler, Business Development Program Manager
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Matthew Rollins, PI Specialist
Sandi Saylor, Director of Performance Improvement

**Other Acknowledgements:**
Dereesa Reid, Administrator
Dr. Matt Bernstein, Chief of Staff
Deserae Dorton, Marketing & Communications Manager
Maureen Stewart, Data Analyst
McKenzie Lane, Marketing & Communications Specialist

**External Resources**
Centers for Disease Control and Prevention ([www.cdc.gov](http://www.cdc.gov))
Dignity Health Community Need Index ([http://cni.dignityhealth.org](http://cni.dignityhealth.org))
Motley Fool ([www.fool.com](http://www.fool.com))
National Association of County & City Health Officials ([www.naccho.org](http://www.naccho.org))
Redfin ([www.redfin.com](http://www.redfin.com))
Robert Wood Johnson Foundation ([www.rwjf.org](http://www.rwjf.org))
United States Census Bureau ([www.census.gov](http://www.census.gov))
World Population Review ([https://worldpopulationreview.com](https://worldpopulationreview.com))