

Implementation strategies for Children's Hospital Colorado, Anschutz Medical Campus Community Health Needs Assessment

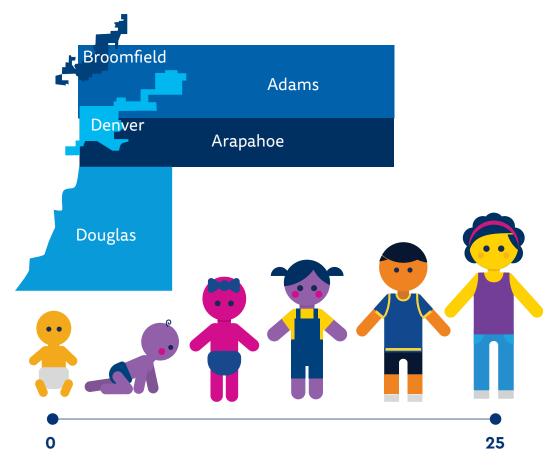
Introduction

Founded in 1908, Children's Hospital Colorado has been a leader in providing the best health care outcomes for children for more than 100 years. Our mission is to improve the health of children through the provision of high-quality coordinated programs of patient care, education, research and advocacy.

In response to our 2021 Community Health Needs Assessment, Children's Colorado is proud to present our 2022-2024 Community Health Implementation Plan. In this plan, we outline the key initiatives for the next three years in partnership with community organizations, schools, governmental agencies, and more. We look forward to implementing this work and, in doing so, expanding, evolving, and adapting as we hear from our community over the three-year period.

Defining our community

For the purposes of this implementation plan, Children's Colorado has defined community as all children aged 0 to 25 living in the five-county area in which most of the hospital's patient population resides and in which we have facilities: Adams, Arapahoe, Broomfield, Denver, and Douglas Counties. Within these counties, Children's Colorado has three licensed hospital facilities located at the Anschutz Medical Campus, North Campus, and South Campus, and our associated networks of care.



2021 Community Health Needs Assessment and Prioritization

In 2021, Children's Colorado engaged in a significant community outreach process to assess the interests and concerns of community members across neighborhoods and counties. Through collaborations, surveys, interviews, and community meetings, we were able to gather input from hundreds of people.

For the assessment, we conducted:

- A comprehensive review of 30+ state and county-level data sources of various child health indicators and demographics
- · A review of internal data on patient utilization, diagnoses, and demographics
- 22 stakeholder interviews with community and health leaders
- Four community member meetings, with 86 participants
- · One community partner meeting, with 25 participants
- A caregiver survey with responses from 408 residents in our counties of interest, in English (50%), Spanish (26%), Karen (<10%), Burmese (<10%), and French (<10%)
- · A healthcare workers survey, which generated 94 responses in our community

Once data collection was completed, Children's Colorado met with community partners and the health system's Population Health Improvement Leadership committee, comprised of Children's Colorado clinical and nonclinical leadership, to prioritize community health needs. We used the following criteria to guide prioritization: impact, community importance, viability, sustainability, scale, and health equity. Ultimately, mental health was identified as our top priority for the next three years.

To see the full needs assessment, visit:

childrenscolorado.org/community/community-health/community-health-needs-assessment/



The figure below summarizes the top health or social needs identified through our stakeholder interviews, caregiver survey and healthcare worker survey.

FIGURE 1. Top Health or Social Needs Identified, by Data Source

Top 5 Issues (in rank order)		
Interview	Caregiver Survey	Health Care Worker Survey
Mental and behavioral health	Access to health care and mental health services	Access to health care and mental health services
2 Access to care	Mental health, including suicide	Mental health, including suicide
3 Housing	Hunger and access to healthy food	Access to benefits (e.g., Medicaid, WIC, food stamps, TANF)
4 Food insecurity	Mother and infant health	Affordable housing
5 Economic issues	5 Affordable housing	Hunger or access to healthy food

Other priorities not addressed and reasons

Children's Hospital Colorado recognizes that the public health needs of the community are extensive and many needs are not explicitly addressed through our priority and goals. Access to health care, including mental health services, and several social determinants of health were identified as top needs by the community and within the data, such as food insecurity, housing, access to benefits, mother and infant health, and economic issues.

While mental health will be our primary focus for the next several years, many strategies in this plan are connected to priorities identified in our needs assessment. Specifically, this plan includes strategies to improve access to health care and mental health services and address social determinants of health, both of which can improve mental health for children and youth.



Our Holistic Approach to Addressing **Child Mental Health**

Mental health includes a person's emotional, psychological, and social well-being. It can be strengthened by social supports and environments and put at risk by traumatic events and stressors. Social and environmental factors, referred to as social determinants of health, can play a significant role in mental health outcomes. While not all mental health conditions are preventable, there are several approaches to reduce risk, promote mental health resiliency, and better prepare families, healthcare professionals, teachers, and peers to support children and youth with mental health conditions. Some protective and risk factors for child mental health are presented in Figure 2. below.¹⁻³

FIGURE 2. Protective and Risk Factors for Child Mental Health

Protective Factors	Risk Factors
Access to mental health services	Income inequality
Early screening	Food insecurity
Resiliency and coping skills	Employment instability
Access to resources to promote economic stability	Neighborhood safety
Culturally responsive, trauma-informed health care	Persistent, poor-quality housing
Social support, community belonging, emotional support from family/friends	Discrimination against one's identities, including race or ethnicity, immigration status, sexual orientation, occupational status

Our approach to addressing mental health in our communities focuses on four areas:

- 1. Direct services and supports to prevent or address mental health conditions
- 2. Advocating for improved systems of care for mental health
- 3. Reducing stressors that may impact mental health
- 4. Engaging community to inform and shape our priorities

These strategies occur at various levels: individual child or youth, caregiver, healthcare provider, school, community, or at the system and policy level. Together, these areas will comprehensively work to address mental health needs among children and youth.

Many of the initiatives outlined in this plan fall under Children's Colorado's Population Health Division. At Children's Colorado, we aim to create healthier communities through the population health approach. The population health approach is not only about access to medical care, but also supporting health and wellness in the home, communities and schools. It is about implementing creative and alternative methods to ensure access to care for our communities. It is about delivering healthcare that lasts beyond a visit to the doctor or a check-in at the clinic. We invest resources into keeping kids out of our hospital through preventive programs and partnerships, and by addressing all aspects of their care.

Community Engagement and Equity

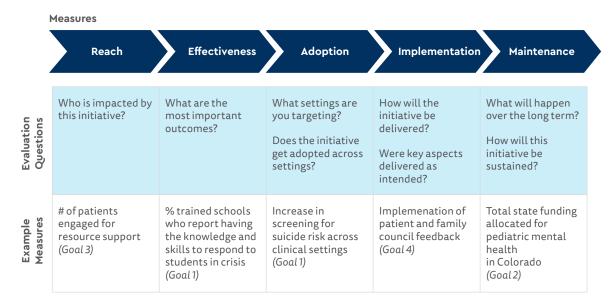
Community engagement and equity principles and practices are core values in our work and are incorporated throughout our plan. Given how many factors that influence mental health fall outside hospital walls, community engagement is critical to improving the mental health and well-being of all children and youth in Colorado. Our community engagement goals focus on partnership development and expansion, engagement activities, and organizational policies, systems and structures that support engagement.

We also know that not all populations have the same opportunities to achieve optimal mental health and well-being due to system and structural barriers, and therefore we are adding an equity-focused approach to our work. This means we are committed to understanding which populations are at disproportionate risk for negative impacts to their mental health, who may experience difficulty finding inclusive and affirming care, who experience discrimination when seeking care, or who may have additional barriers to mental health care—such as youth who identify as lesbian, gay, bisexual, transgender, and queer or questioning (LGBTQ+), families of color, or families who speak diverse languages—and redesigning how care is delivered to put patients and families first, with their language, culture, religion, and identity in mind.

Measurement

To evaluate our initiatives to promote mental health for children and youth in Colorado, we are using the RE-AIM evaluation framework, which measures the Reach, Effectiveness, Adoption, Implementation, and Maintenance of our work. As a whole, these measures can demonstrate where and how we are making the greatest impact and where we can improve our work.⁴⁻⁶ Figure 3. below displays the overarching evaluation questions for each RE-AIM domain and example measures with the corresponding goals from this plan.

FIGURE 3. Reach, Effectiveness, Adoption, Implementation, and Maintenance (RE-AIM) Framework, Evaluation Questions and Example Measures



Implementation Plan Goals and Strategies



GOAL 1: Improve mental health awareness and reduce the risk of suicide

Through Goal 1, Children's Colorado will partner with schools, clinical settings, and community leaders to teach youth resiliency and coping skills, train professionals how to respond to a mental health crisis, including suicide prevention and intervention, screen for mental health and suicide risk, and expand access to evidence-based therapies and consultation.

Anticipated impact:

- · Increase awareness of mental health conditions and access to resources, trainings, and treatments
- · Strengthen mental health and coping skills among youth and provide tools for youth and families to recognize mental health risks in both clinical and community settings

STRATEGY: Partners for Children's Mental Health (PCMH) will train trusted adults to meet child and youth mental health needs and provide implementation support in schools, clinical settings, and communities. PCMH plans to expand trainings, including the diversity of trainees and regions served.

• Tactic: Provide training and implementation support to meet mental health needs of students (e.g., dialectical behavioral therapy, suicide intervention and postvention protocols)

Setting	Measures	Partnerships
Schools	 # of professionals trained and total # of contact hours # of school districts touched Improvements in satisfaction, knowledge, confidence, and intention to use skills among trainees % trained schools who report having the knowledge and skills needed to respond to students in crisis 	Colorado schools and districts

• Tactic: Provide training and implementation support to help clinics implement youth suicide prevention care pathways using evidence-based approaches (e.g., Ask Suicide-Screening Questions (ASQ) Suicide Screening, Brief Suicide Safety Assessment, and PracticeWise MAP)

Setting	Measures	Partnerships
Health Care	 # of professionals trained and total # of contact hours Improvements in knowledge and fidelity to program implementation among trainees % clinics and # of providers trained that have implemented formal suicide screenings % behavioral health professionals that have implemented MAP system tools 	Clinics (primary care, family medicine, behavioral health)

• Tactic: Provide suicide prevention training and education with community members (e.g., Question Persuade Refer, Applied Suicide Intervention Skills Training, Youth Mental Health First Aid)

Setting	Measures	Partnerships
Community	 # of community members trained and total # of contact hours Improvements in satisfaction, knowledge, and intention to use skills among trainees % of trained community members who report having the confidence to respond to children and youth mental health crises % of trained community members who report having successfully used the skills learned in a real life situation 	Trusted adults
	# of Colorado counties reached	

STRATEGY: Screen for suicide ideation and depression in various clinical settings

• Tactic: Expand existing suicide ideation and depression screening to other clinical settings for patients aged 12 years and older

Setting	Measures	Partnerships
Health Care	 Implementation of the screening process for depression and suicide ideation Increased screening for suicide risk across settings Increased screening for depression across settings 	

STRATEGY: Pediatric Mental Health Institute (PMHI) Speakers Bureau (SB) and Community and Corporate Relations (CCR) will educate and raise awareness of child mental health needs, resources and supports, and skill building

• Tactic: Host educational presentations by physicians, nurses, and other health care experts for community organizations and schools

Setting	Measures	Partnerships
Community	 # of mental health presentations by CCR and SB 	Schools, community
Schools		organizations, businesses, local and state
		government



GOAL 2: Improve systems of care and access to mental health services

Through Goal 2, Children's Colorado will prioritize mental health policy and funding solutions that will best support children, youth and families. This will involve advocating for funding to address children's mental health from prevention to treatment and recovery, supporting policies that address the social factors that impact child, youth, and family mental health, and advocating for payment models that can better serve individuals who need access to mental health care.

Anticipated impact:

- · Develop a more coordinated and integrated system of child and youth mental health in Colorado
- · Improve access to and expertise in mental health services and supports in primary care and schools

STRATEGY: Children's Government Affairs, Medicaid Strategy and PCMH teams will advocate for and support funding, legislation, regulations, and policies that improves access to high-quality mental health services for Colorado youth

- Tactic: Strengthen the youth mental health system by:
 - Fighting for kids to get their fair share in the annual state budget.
 - Strengthening the accountability and unity of the mental health system for kids with the new Behavioral Health Administration and the next phase of Colorado Medicaid's delivery system, the Accountable Care Collaborative.
 - Advocating for local mental health resources, such as allocating American Rescue Plan Act (ARPA) funding to prevention and early identification programs as well as community-based mental health providers and programs.
 - Coordinating and strengthening youth mental health advocacy efforts in partnership with communities and advocates across the state.
 - Gathering and sharing critical data that can inform legislative efforts.
- Tactic: Support policies that address social determinants of health, including supporting funding and policy decisions that prioritize housing, economic security, and food security to reduce risk factors and promote the health and well-being of kids and families.
- Tactic: Advocate for healthcare financing models that provide better care for individuals with mental health conditions, including the integration of physical and mental health.

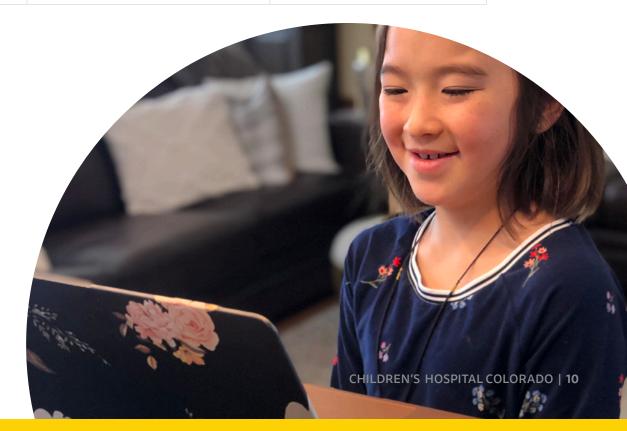
Setting	Measures	Partnerships
Policies and Systems	 # of bills monitored # of coalitions built members across policy priority areas Policies drafted for 1-2 priority bills State and local funds allocated to children and youth Changes to healthcare delivery models for mental health Estimated lives impacted by policy efforts 	 State agencies (e.g., Office of Behavioral Health) Advocacy organizations (e.g., Mental Health Colorado) Providers (e.g., Denver Health) Policymakers (e.g., lawmakers, staff, and leadership of the Office of the Governor of Colorado)

STRATEGY: The Virtual Integrated Pediatric Behavioral Health Program (VIPBHP) will provide mental health services and consultation through telehealth to primary care practices (PCPs) and coordinate care between PCPs and schools

• Tactics:

- Provide direct services (assessment, therapy, consultation) via telehealth to children as primary care-level interventions (i.e., patient is low risk for suicide)
- Coordinate care between PCPs, schools, and behavioral health providers to close the loop on referrals and support treatment provided by each partner
- Develop a learning collaborative with Pediatric Care Network to educate PCPs on behavioral health diagnoses, therapies appropriate for primary care settings, and pharmacological interventions

Setting	Measures	Partnerships
Patient Health Care Schools	 # of PCP partnerships by region/county Patient symptom improvement Increased skills and confidence in managing behavioral health conditions in primary care and school settings 	 Pediatric Care Network (PCN) Pediatric practices Colorado Pediatric Psychiatry Consultation & Access Program (CoPPCAP) Extension for Community Health Outcomes (ECHO) Coordinating Optimal Reference Experiences (CORE) program, University of Colorado



GOAL 3: Promote protective factors and reduce risk factors for mental health conditions

Through Goal 3, Children's Colorado will partner with community organizations to reduce social barriers that may affect a child and family's mental health and well-being and promote services and supports in primary care, community, and schools that can reduce stress and protect against mental health conditions.

Anticipated impact:

- · Improve healthcare and mental health outcomes by reducing barriers to social supports and care
- · Strengthen supports to improve access to behavioral and healthcare resources in community and school settings
- · Create a healthier community and culturally responsive healthcare environment

STRATEGY: Expand social needs screenings to inpatient settings

• Tactic: Address social needs of identified patients through the social needs screener and increase health navigation referrals

Setting	Measures	Partnerships
Patients	 # of patients who completed social needs screener by the domains (i.e., food insecurity, housing, etc.) # of referrals from inpatient departments # of inpatient department screening 	Medicaid Regional Accountable Entities (RAEs)

STRATEGY: Address social barriers to care by providing supports, education, and referrals

- Tactic: Health Navigation will help families to navigate systems and connect them to community resources to meet families' social needs
- Tactic: Resource Connect and its partner organizations will increase families' access to health-related social supports

Setting	Measures	Partnerships
Patients	 # of departments referring to health navigators # of patients engaged # and percent of patients engaged by resource need addressed # of departments referring to Resource Connect 	 Denver Human Services Women, Infant, and Children Energy Outreach Spectrum Advocacy Adams County Workforce A Precious Child

• Tactic: The Food as Medicine (FAM) team, who lead the Healthy Roots Food Clinic (HRFC), will increase families' access to healthy food and provides education to families about healthy eating, food preparation, and behavior change to encourage children to eat more fruits and vegetables.

Setting	Measures	Partnerships
Patients	 # of patients referred to Healthy Roots Food Clinic % of families with a successful referral Expansion of FAM model to new settings 	 Aurora Public Schools, Food Bank of the Rockies The Emergency Food Assistance Program (TEFAP) Delaney Farms Mental Health Center of Denver Hunger Free Colorado Future of Charitable Food Blueprint to End Hunger

• Tactic: The Injury Prevention team will promote safe sleep through the distribution of Pack and Plays and, in collaboration with the Community Health Navigation team, show families how to use Pack and Plays as a safe sleep option.

Setting	Measures	Partnerships
Patients	# of liability forms# of proof of education checklists	Child Health Clinic

• Tactic: The Injury Prevention team will educate families/caregivers on appropriate steps to take when an infant is crying, calming techniques, and coping mechanisms to manage stress in order to prevent Shaken Baby Syndrome through virtual classes and providing resources (e.g., BabySitter Basics handouts)

Setting	Measures	Partnerships
Community	 # of participants % of survey respondents that learned something new about Shaken Baby Syndrome % of survey respondents that learned a new way to calm a crying baby % of survey respondents that learned a new way to cope with a crying baby 	UCHealth Memorial Hospital

• Tactic: The Injury Prevention team will provide car seats and education on proper car seat installation

Setting	Measures	Partnerships
Community	# of monthly distributions# of encounters	Schomp Subaru

STRATEGY: Create a culturally responsive, equitable, and inclusive environment by training, mentorship, and workforce development with staff and community members

• Tactic: Improve health outcomes for African American and Black mothers by addressing social isolation, health and community resources, anxiety, and depression to improve perinatal health outcomes and decrease infant and maternal mortality through Kindred Mamas mentorship model

Setting	Measures	Partnerships
Patients	 # of referrals to Kindred Mamas # of enrolled in the Kindred Mamas Mentor Program # of programmatic resources provided to improve health care access and outcomes Expanding Kindred Mamas program to one external healthcare system in 2023 	 Tri-County Health Department Families Forward Resource Center

• Tactic: Provide cultural responsiveness training for healthcare providers in partnership with community-based advocates and organizations through the Center for Advancing Professional Excellence (CAPE) simulation education training

Setting	Measures	Partnerships
Healthcare workers Community	 # of CAPE trainings # of community advocates and community serving groups represented # of healthcare providers trained # of participating in training Improvement of knowledge, skills development, and maintenance of desired behaviors among trainees 	 Families Forward Resource Center Center for Advancing Professional Excellence Tri-County Health Department Denver Public Health Colorado Association of Black Social Workers

• Tactic: Engage team members in the Experience Different programming to practice and model inclusive behaviors, promote the tenants of health equity, and help create an organization that intentionally values difference

Setting	Measures	Partnerships
Healthcare workers	 # of team members trained as Captains of Inclusion Increase offering of Captain of Inclusion trainings 	Center for Health ProgressKaiser Permanente

• Tactic: Increase workforce diversity to be reflective of the community we serve

Setting	Measures	Partnerships
Healthcare workers	 Demographic diversity of those hired Percent change year over year of leadership demographic diversity 	• Willis Tower Watson

• Tactic: The Team Member Resource Groups will support hospital-wide diversity and inclusion efforts, serve as a source of educational and professional development opportunities, and maintain an open forum for the exchange of ideas

Setting	Measures	Partnerships
Healthcare workers	# of mentions in the Team Member Experience Survey	
Patients	# of Education Events/Opportunities sponsored# of Children's Colorado policies and procedures	
Community	consultations with the Groups	

STRATEGY: Provide community-based asthma programs to strengthen the circle of support for patients with asthma to improve health outcomes. These programs plan to expand geographically and potentially add direct mental health support.

• Tactic: AsthmaCOMP (Colorado Comprehensive School-Centered Asthma Program) works with students, families, and school staff to improve school-based asthma care and pediatric asthma outcomes. Health navigators assess caregiver mental health using the PHQ-4 and work to connect caregivers to community mental health services as necessary.

Setting	Measures	Partnerships
Schools Community	 # of students who participate in the program Missed school days for participating students 	 Denver Public Schools Colorado Department of Public Health and Environment

• Tactic: Just Keep Breathing provides home visits to patients with high risk asthma, improving outcomes through asthma education, environmental assessments and remediation, care coordination, and patient navigation. Health navigators assess caregiver mental health using the Patient Health Questionnaire-4 (PHQ-4) and work to connect caregivers to community mental health services as necessary.

Setting	Measures	Partnerships
Community	 # of patients who receive home visits (in person or telehealth) Emergency department (ED) and inpatient utilization for participating patients 	 Colorado Department of Public Health and Environment Energy Outreach Colorado Colorado Healthy Housing Coalition

• Tactic: Disparities Elimination through Coordinated Interventions to Prevent and Control Heart and Lung Disease Risk (DECIPHeR) is expanding school-based asthma care into communities across Colorado with a focus on local adaptation led by cross-sector Community Advisory Boards.

Setting	Measures	Partnerships
Community	# of Community Advisory Board meetings	 University of Colorado School of Medicine ACCORDS Colorado Department of Education Trailhead Institute

• Tactic: An asthma navigator supports for asthma patients and families transitioning from the inpatient setting to home, ensuring they are connected to follow up care and providing resources for identified psychosocial needs.

Setting	Measures	Partnerships
Health Care Community	 # of patients seen by the asthma navigator ED visits/Inpatient readmissions among patients seen by asthma navigator 	Colorado AccessPrimary care providers

STRATEGY: In partnership with local schools, increase access to both behavioral health resources and clinical services in school settings.

- Tactic: The School Health team will develop a strategic plan that will implement systematic training, professional development for nurses, education to students and families, and support for school nurses and childcare health consultants around behavioral health and how to access additional resources for students with 504, individualized education programs, individual family service plan, or care plans.
- Tactic: PMHI is partnering with schools to train school personnel how to lead Unstuck and On Target, a community-based curriculum for students, focused on cognitive behavioral techniques to promote executive functioning and students' success, including making goals and plans, balancing others' needs, and regulating emotions. This program will expand to the schools who receive training to lead the curriculum in their schools and classrooms.

Setting	Measures	Partnerships
Schools Community	 Development of a standardized Behavioral Health Action Plan Development of an external webpage to share care plan templates and other school health resources % of nurses that complete QPR, ASIST, and/or Youth Mental Health First Aid training # of participating schools Feedback from program 	 School Districts Healthy Childcare Colorado ECHO Colorado Department of Education School Clients

• Tactic: The School-Based Dental Clinic team will provide dental hygiene services in schools in order to prevent caries and increase access to dental services.

Setting	Measures	Partnerships Partn
Schools	 # of students who received an oral health screening # of dental hygiene visits # of providers trained 	Aurora Public SchoolsEvery Child Pediatrics

GOAL 4: Promote community voices and engagement to inform, advise, and shape mental health priorities and systems of care

Through Goal 4, we will participate in community coalitions to ensure the voice of children, youth, their families, healthcare providers, and community advocates are helping to shape systems of care and to be more unified in our approach to community health improvement and advocacy efforts.

Anticipated impact:

- · Through policies and programs, design a mental health system built for children, youth, and families across Colorado
- · Strengthen cross-collaborations in the community to improve mental health for children and youth
- · Promote inclusive youth and family-centered mental health care in Colorado

STRATEGY: Develop and participate in coalitions and councils with people with lived experience, community advocates, and governmental agencies to ensure community voices shape mental health policies and systems of care

• Tactics:

- Children's Colorado's Government Affairs, Medicaid Strategy, and PCMH teams will lead and participate in community coalitions and continue to cultivate a statewide network of child health advocates and encourage Coloradans to voice their views on the importance of child and youth mental health in public policy.
- The PCMH Youth Council, led by 14 youth from across Colorado, will shape how PCMH plans, develops and executes initiatives.
- The PMHI Youth Action Board (YAB), a program with up to 18 youth from 30 schools in the Denver metro area, will continue to promote ways to reduce stigma and raise awareness about mental health issues.

Setting	Measures	Partnerships
Policies and Systems	 # of Child Health Champion (CHC) participants # of CHC participants who take action on mental health or SDoH-related effort # of trained advocates Key milestones from community coalition building # of PCMH Youth Council recommendations applied to PCMH strategies % of PCMH Youth Council members who feel that their voice is heard, and input is used in PCMH strategies 	 State agencies, including the Office of Behavioral health Advocacy organizations, including Healthier Colorado Providers, including Denver Health Policymakers (e.g., lawmakers, staff and leadership at the Office of the Governor of Colorado)

• Tactics: Engage and collaborate with community-focused public organizations in order to offer guidance, support, and/or feedback on shared strategies and goals aimed at mental health and/or contributing factors

Setting	Measures	Partnerships
Community	 # and type of collaborations Collaboration-specific milestones 	 Colorado Alliance for School Health Colorado Blueprint to End Hunger Safe Kids Colorado Metro Denver Partnership for Health Aurora Health Alliance Future of Charitable Food Resident Leadership Council Fatality Review Boards (Adams, Arapahoe, and Douglas Counties)

• Tactics: Provide a defined avenue for families, youth, and community through Family Advisory Councils and Resource Connect Governance Council to advocate, engage, and educate Children's Hospital Colorado to improve the system of care and health outcomes for children and families receiving care

Setting	Measures	Partnerships
Patients Community	 # of families represented # of community members represented Improvements to operational efficiencies, informed by patient and family feedback # of CHCO policies and procedures consultations with the Council 	 Patients and their families Families Forward Resource Center Tri-County Health Department Denver Human Services Women, Infant, and Children Energy Outreach Spectrum Advocacy Adams County Workforce A Precious Child



Conclusion

Mental health for children and youth cannot be fully reached without extending beyond clinical walls.

Community-driven strategies are critical to get children and youth the help they need, whether that is through raising awareness, screening, conducting trainings, increasing access, reducing stressors, or promoting community voices. Through our collaborations in schools, primary care, community organizations and more, we are better equipped to improve the mental health of children and youth in and with our communities. We look forward to building upon this plan to align with the strategies that will come through our health system's mental health strategic planning that will be completed later in 2022. We will continue to look to our community to help evolve and improve our approach to best meet the mental health needs of kids in Colorado.

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Children's Hospital Colorado

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구의 면식으로 사용에서는 경구, 인의 시민 시마스를 구표로 의중하실 구 있습니다. 1-720-777-1234 注意: 如果您使用繁體中文,您可以免費獲得語言援助服務。請致電1-720-777-1234。 ВНИМАНИЕ: Если вы говорите на русском языке, то вам доступны бесплатные услуги перевода. Звоните 1-720-777-1234. ማስታወሻ: የሚና7ሩት ቋንቋ አማርኛ ከሆነ የትርፖም ስርዳታ ድርጅቶች፣ በነጻ ሊያግዝዎት ተዘጋጀተዋል: ወዷ ሚከተስው ቁጥር ይይውሉ 1-720-777-1234 (መስማት ስተሳናቸው.

ACHTUNG: Wenn Sie Deutsch sprechen, stehen Ihnen kostenlos sprachliche Hilfsdienstleistungen zur Verfügung. Rufnummer: 1-720-777-1234.

ATTENTION : Si vous parlez français, des services d'aide linguistique vous sont proposés gratuitement. Appelez le 1-720-777-1234. ध्यान दनु होस्त्वपाइले नेपाल बोल्नहन्छ भन तपाइको निम्त भाषा सहायता सवाहरू नःशल्क रूपमा उपलब्ध छ। फोन गनु होसर् 1-720-777-1234।

PAUNAWA: Kung nagsasalita ka ng Tagalog, maaari kang gumamit ng mga serbisyo ng tulong sa wika nang walang bayad. Tumawag sa 1-720-777-1234. 注意事項: 日本語を話される場合、無料の言語支援をご利用いただけます。1-720-777-1234 まで、お電話にてご連絡ください。

Ntị: Q bụrụ na asụ Ibo, asụsụ aka ọasụ n'efu, defu, aka. Call 1-720-777-1234.

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