Quick Shot Presentation

Bridging the Gap - Emerging Leaders

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Identifying Need

- 85% of Bridging the Gap patients (BTG) had a previous pediatric encounter with VCU Health System (VCUHS) before sustaining serious violent injuries.
  - VCU Hospital and Trauma Registry data

- In FY 2013, 17.4% of ED visits by 10-17 year olds were youth who lived in the 23223 zip code
  - The greatest number of violently injured patients admitted to VCUHS lives in the 23223 zip code.
  - VCU Hospital and Trauma Registry Data

- Between 2009-2013, the homicide rate in Richmond, VA among 10-24 year olds was 4 times higher than the state rate.
  - Most injuries that resulted in homicide occurred in the 23223 zip code
  - VCU Clark-Hill Institute for Positive Youth Development – A CDC National Center of Excellence for Youth Violence Prevention. (Masho, SM and Bishop, DL.)
**Intervention Design**

- Emerging Leaders (EL) was developed as the prevention arm of BTG, designed to assess risk factors and prevent youth violence before it occurs.

- **Target Population:**
  - 14-18 year olds
  - 23223 zip code
  - Exhibit at-risk behaviors associated with violence

- **Collaborating Partners:**
  - VCU Health System
  - Richmond Police Department
  - Richmond City Mayors Youth Academy
  - Inspire Workgroup – multi-sector stakeholder coalition of committed organizations and citizens

- EL uses prevention tools such as:
  - educational skill building
  - financial literacy
  - mental health support
  - job readiness through internships and other recreational programming.

- EL aims to connect youth to resources, reduce risky behaviors, prevent youth from engaging in violence, and provide youth with pro-social programming.
Program Implementation

- EL seeks to reduce the number of youth involved in violence through programming and wrap-around case management to youth presenting to the VCUHS Peds ED, Adolescent Clinics and outside referral sources.

- Staffing:
  - 1 FTE – Program Coordinator
  - The Coordinator spends on average 6.5hrs per youth each month, to include 2 hour biweekly group sessions.

- Today, EL operates on budget of approximately $100,000. Includes:
  - Salary/fringe for 1 FTE
  - local travel reimbursement
  - safety net funds (flexible funding to assist youth and families in crisis)
  - supplies
  - catering/food expenses for group meetings
  - equipment such as laptops and cell phones
  - paid internship opportunities for youth

- Funding Sources:
  - VCUHS Trauma Program (current)
  - Local philanthropic organizations (past)

Implementation Timeline

January 2014: received initial seed funding from VCUHS
January 2014-March 2015: Planning and Development Phase
March 2015: Implementation Phase 1
September 2017: Implementation Phase II
Program Evaluation

- Types of evaluations completed: Process and outcome evaluation
- Emerging Leaders evaluation methodology:
  - Self-administered surveys
  - Intakes on risk factor determinants
  - Follow-up questionnaires on risk behaviors
  - Also, tracking of school attendance, involvement with law enforcement, psychosocial adjustment
- Success stories:
  - EL Participant 1: 17yo female, visited Peds ED for flu-like symptoms
  - EL Participant 2: 16yo male, admitted due to GSW
Program Outcomes

- **Process:**
  - 74 young people have been enrolled since inception

- **Outcome:**
  - Indicator target: 70% of enrolled participants will attend group sessions each month. Achievement: 63% of enrolled participants attended sessions.
  - Indicator target: Less than 10% of youth will be charged with a violent crime. Achievements: None of the youth (0%) reported being charged with a violent crime after being enrolled in the program.
  - Indicator target: 80% of students will demonstrate improved school attendance. Achievements: 100% of participants reported that they were attending school regularly.

- EL is easily adaptable. The six components are flexible enough to fit most hospital systems where youth violence is a significant issue. Need to have:
  - Hospital buy-in between ED, leadership and injury prevention programs
  - Use of evidence-based tools to assess risk
  - Strong community partners (police departments, mental health providers, etc.)