

# 2024 Edition — Quality of Care: Children’s Health

CALIFORNIA HEALTH CARE ALMANAC

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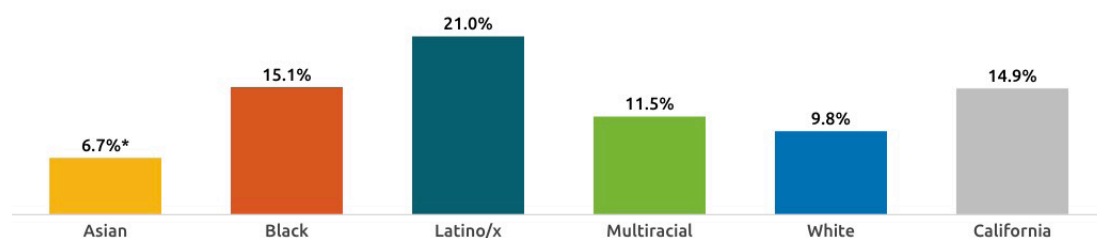
Over the last few decades, significant growth has occurred in the measurement and reporting of health care quality outcomes. As health care evolves, it is important to continue to monitor and report on the quality of care delivered to patients in California and across the US. This is part of a series of measures CHCF is publishing on the quality of care in our state. Topics range from maternal to end-of-life care and include measures on behavioral health, chronic conditions, and providers.

This set of quality measures focuses on children’s health and reports the most recently available data.

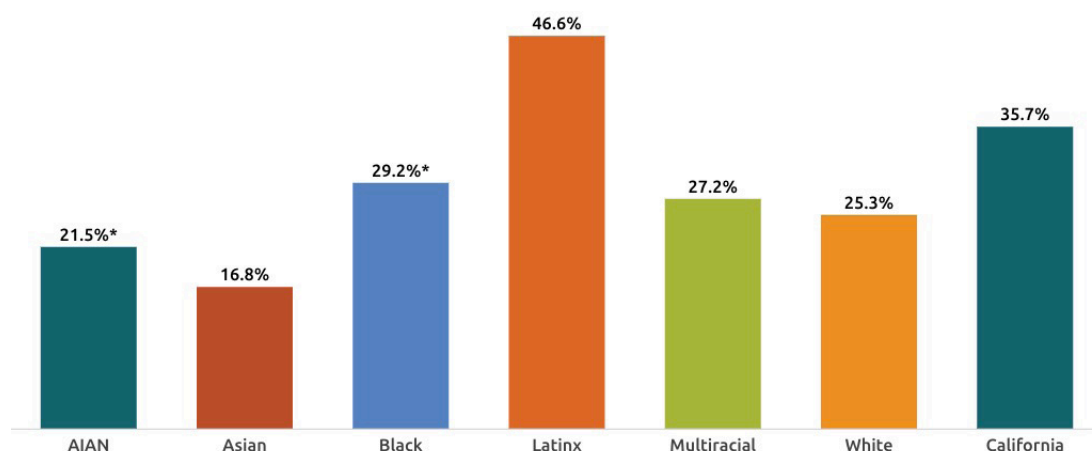
## Nearly one in two Latino/x adolescents (47%) and one in five Latino/x children (21%) were overweight in 2022.

Thirty-six percent of California adolescents overall were overweight or obese, and 15% of California children overall were overweight for their age. Rates varied by race and ethnicity. Being overweight or obese increases the risk of various health problems, including diabetes, high blood pressure, and asthma.

Overweight Children Age 0 to 11, by Race/Ethnicity, California, 2022



Overweight Adolescents Age 12 to 17, by Race/Ethnicity, California, 2022



\* Estimate is statistically unstable.

Notes: Children age 0 to 11 who are overweight for their age based on sex, age in months, and weight. Adolescents age 12 to 17 who are overweight or obese based on BMI equal to or greater than the 85th percentile of teens of the same age and sex. AIAN is American Indian / Alaska Native. Source uses African American.

Sources: “California Health Interview Survey,” UCLA.

**Pediatric hospital admission rates for ambulatory care–sensitive conditions varied across the state.**

Based on a composite measure for four conditions, 65 hospitalizations per 100,000 children (age 6 to 17) were potentially preventable through effective chronic care management and access to high-quality primary care in 2022. Three counties had rates higher than 100: Inyo (190), Fresno (121), and San Diego (111).

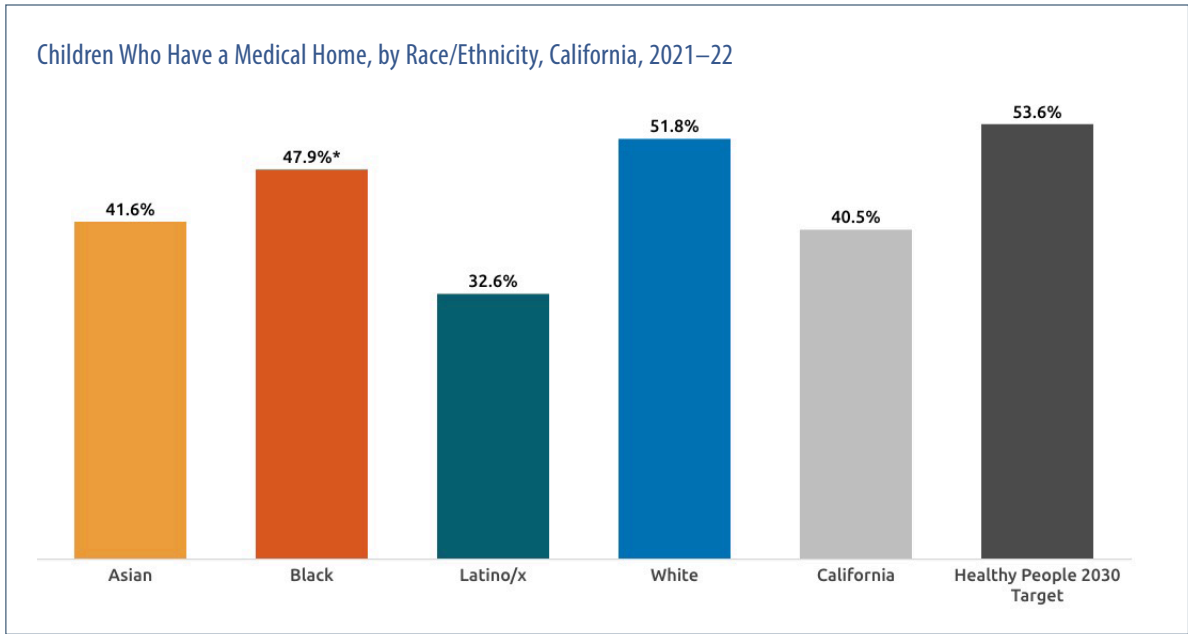


Note: Composite measure of child (age 6 to 17) hospitalization rate (observed) per 100,000 population for four ambulatory care–sensitive conditions: asthma, diabetes short-term complications, gastroenteritis, and urinary tract infection.

Source: Rates of Preventable Hospitalizations (Age<18) for Selected Medical Conditions by County, California Health and Human Services.

**Rates of children who have a medical home varied by race/ethnicity. No group met the Healthy People 2030 target of 53.6%.**

In 2021–22, 41% of California children age 0 to 17 had a medical home, defined as receiving coordinated, ongoing, comprehensive care that meets American Academy of Pediatrics medical home standards. The percentage varied by race/ethnicity, with 33% of Latino/x children, 42% of Asian children, and 52% of White children having a medical home, all below the Healthy People 2030 target of 53.6%. Studies have shown that children who have a medical home are more likely to receive preventive health care visits and have better health outcomes.<sup>†</sup>



\* Estimate is statistically unstable.

Notes: Children (age 0 to 17) who receive coordinated, ongoing, comprehensive care that meets American Academy of Pediatrics medical home standards.

Source: “California Health Interview Survey,” UCLA.

The companion Excel data file, which provides these data and more, as well as links to each data source, is available for download below. These materials are part of CHCF’s California Health Care Almanac, an online clearinghouse for key data and analyses describing the state’s health care landscape. See our entire collection of current and past editions of Quality of Care at [www.chcf.org/collection/quality-care-almanac](http://www.chcf.org/collection/quality-care-almanac).

<sup>†</sup> “Healthy People 2030,” US Department of Health and Human Services, accessed July 22, 2024.