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Adventist Health Overview

Adventist Health Ukiah Valley is an affiliate of Adventist Health, a faith-based, nonprofit integrated health system serving more than 75 communities on the West Coast and Hawaii.

Adventist Health entities include:

- 19 hospitals with more than 2,800 beds
- More than 280 clinics (hospital-based, rural health and physician clinics)
- 13 home care agencies and seven hospice agencies
- Four joint-venture retirement centers
- Workforce of 33,000 includes more than 24,600 employees; 5,000 medical staff physicians; and 3,700 volunteers

We owe much of our heritage and organizational success to the Seventh-day Adventist Church, which has long been a promoter of prevention and whole person care. Inspired by our belief in the loving and healing power of Jesus Christ, we aim to bring physical, mental and spiritual health and healing to our neighbors of all faiths. Every individual, regardless of his/her personal beliefs, is welcome in our facilities. We are also eager to partner with members of other faiths to enhance the health of the communities we serve.

Our commitment to quality health care stems from our heritage, which dates back to 1866 when the first Seventh-day Adventist health care facility opened in Battle Creek, Michigan. There, dedicated pioneers promoted the “radical” concepts of proper nutrition, exercise and sanitation. Early on, the facility was devoted to prevention as well as healing. They called it a sanitarium, a place where patients—and their families—could learn to be well.

More than a century later, the health care system sponsored by the Seventh-day Adventist Church circles the globe with more than 170 hospitals and more than 500 clinics, nursing homes and dispensaries worldwide. And the same vision to treat the whole person—mind, body and spirit—continues to provide the foundation for our progressive approach to health care.
Letter from the President

Dear Friends and Colleagues,

As President of Adventist Health Ukiah Valley (AHUV) I am pleased to share our 2017 Community Health Plan Update/Annual Report. As the largest health care provider in the county we take our role in improving the health of the communities we serve to heart. The provided report reflects our work in collaboration with great community partners to build a healthier community.

Our vision for a healthier community looks beyond medical care and addresses what are included in the social determinants of health—mental health, housing, poverty, childhood experiences, access to nutritious foods and social support. As we know, these factors all play a part in the overall health and well-being of our residents in Mendocino County.

We do not stand alone in our efforts. Local partnerships are an invaluable component in building a healthier community and reaching the goals set forth in our Community Benefit Plan. Together, we are discovering what works and what it will take in moving forward to truly move the dial on key indicators to achieve a Healthy Mendocino.

With the support of our lasting partnerships and diverse stakeholders I know that we can continue to improve the health and well-being of residents in Mendocino County, fostering a shared vision for achieving a healthy vibrant community where the young and old alike can thrive!

Warmly,

Gwen Matthews
President, Adventist Health Ukiah Valley
Hospital Identifying Information

Number of Acute Care Beds: 67 licensed; 49 operated
Mailing Address: 275 Hospital Drive, Ukiah, CA 95482
Contact Information: Gwen Matthews – AHUV President; (707) 463-7637

Existing healthcare facilities that respond to community health needs:

Adventist Health Ukiah Valley

Acute Care: 19-bed ER, 6-bed ICU, Birthing Center with Level II Neonatal Intensive Care, Perioperative Services

Outpatient Diagnostic, Rehabilitation & Surgical Services:

Laboratory Draw Stations (3)
Medical Imaging Outpatient Locations (2)
PT/OT/ST outpatient rehab services and outpatient endoscopy suite

Advanced Wound Care Center with Hyperbaric Chambers

Rural Health Clinics:

Ukiah Valley Rural Health Centers with locations in Ukiah, Ft. Bragg (secondary service area), and Lakeport (secondary service area) providing primary and specialty care.

Hospital Based Outpatient Clinics

General Surgery
Ophthalmology
Oncology with Infusion/Chemo Services
Behavioral health
Patient Management

Gastroenterology
Cardiology (Ukiah & Lakeport)
Orthopedic Surgery
Urology
ENT

Population Health Services

Outpatient Case Management/Population Health for MediCal, Blue Shield, Blue Cross
Clinically Integrated Network for Mendocino County for Blue Shield Commercial
LiveWell Program
Street Medicine & Complex Care Clinic
Community Health Development Team

Gwen Matthews,
President, Adventist Health Ukiah Valley

Leanna Sweet,
Director, Population Health/Outpatient Care Management

Tiffany Gibson,
Director of Community Wellness

CHNA/CHP contact:
Willow Anderson; Manager, Marketing & Communication
275 Hospital Drive, Ukiah, CA 95482
Phone: 707-463-7524

Request a paper copy from Administration/President’s office. To provide comments or view electronic copies of current and previous community health needs assessments go to: AdventistHealth.org/communitybenefit or https://www.adventisthealth.org/pages/about-us/community-health-needs-assessments.aspx
Invitation to a Healthier Community

Fulfilling AH’s Mission

Where and how we live is vital to our health. We recognize that health status is a product of multiple factors. To comprehensively address the needs of our community, we must take into account health behaviors and risks, the physical environment, the health system, and social determinant of health. Each component influences the next and through strategic and collective action improved health can be achieved.

The Community Health Plan marks the second phase in a collaborative effort to systematically investigate and identify our community’s most pressing needs. After a thorough review of health status in our community through the Community Health Needs Assessment (CHNA), we identified areas that we could address through the use of our resources, expertise, and community partners. Through these actions and relationships, we aim to empower our community and fulfill our mission, “Living God’s love by inspiring health, wholeness and hope.”

Identified Community Needs

The results of the CHNA guided the creation of this document and aided us in how we could best provide for our community and the most vulnerable among us. As a result, Ukiah Valley Medical Center has adopted the following priority areas for our community health investments for 2017-2019:

- Mental Health
- Childhood Obesity & Family Wellness
- Childhood Trauma

\textit{Ukiah Valley Medical Center will also provide support, as appropriate, to the following community-identified priority areas: 1) Housing, 2) Poverty.}

Additionally, we engage in a process of continuous quality improvement, whereby we ask the following questions for each priority area:

- Are our interventions making a difference in improving health outcomes?
- Are we providing the appropriate resources in the appropriate locations?
- What changes or collaborations within our system need to be made?
- How are we using technology to track our health improvements and provide relevant feedback at the local level?
- Do we have the resources as a region to elevate the population’s health status?

Building a healthy community requires multiple stakeholders working together with a common purpose. We invite you to explore how we intend to address health challenges in our community and partner to achieve change. More importantly though, we hope you imagine a healthier region and work with us to find solutions across a broad range of sectors to create communities we all want for ourselves and our families.
2017 Community Benefit Update

In 2016, Adventist Health Ukiah Valley, conducted a community health needs assessment and was followed by a 2017 Community Health Plan (Implementation Plan) that identified the priority needs listed below. The prioritized needs were chosen based on community health data and the voices of our community. Working together with our community is key to achieving the necessary health improvements to create the communities that allow each member to have safe and healthy places to live, learn, work, play, and pray. Below you will find an inventory of additional interventions supporting the health of our communities.

Priority Need - Mental Health

The needs within the mental health and substance abuse are high within Mendocino County. Of the five indicators tracked by Healthy Mendocino, Age-Adjusted Death Rate due to Suicide, Depression in the Medicare Population, and Frequent Mental Distress all are in the red zone with most recent data from 2015 and 2016. Adults Needing and Receiving Behavioral Health Care Services and Adults with Likely Serious Psychological Distress are in the yellow zone with most recent data from 2014 and 2015.

The problem is complex as well as the solutions. In 2017, a significant measure was approved on the November ballot to fund a needed psych health facility as well as training. An 11-member board will provide oversight of how the funds are spent. During the year, explorations were made to address upstream mental health wellness through implementation of Blue Zones as well as downstream improvement of addressing patients presenting in psychiatric crisis to the ER. Putting in place the safety net as well as the community touchpoints in the life radius will take years and multiple innovations to meet the myriad of needs.

Two initiatives were focused on in 2017:

1. The development of a street medicine outreach and case management program was a focus in 2016 and 2017. The homeless are a population where mental health issues and substance abuse are prevalent. This program is described in more detail below.
2. The LiveWell program was launched in May 2017 to support those with drug dependence issues or poor health habits with lifestyle medicine, also described in more detail below.

Intervention: Homeless/Street Medicine Outreach: Addresses the complex care patients with high impact social determinants of health. A team of staff and volunteers bring healthcare to homeless individuals and families in the Ukiah area. Scheduled clinics referrals from Mendocino County Health Clinic and Rural Health Clinics to homeless shelters, medical respite units, social services, Project Sanctuary, Manzanita and MCHAVN. In addition, an RN case manager was placed in the Emergency Department and the EDie/PreManage software was implemented in the ER to provide exchange of critical information to facilitate coordination of care and alignment with the plan of care across the continuum.

- Number of Community Members Served by the Outreach Team: 1,378
Intervention: **LiveWell Programing**: Launched in 2017 is comprised of lifestyle medicine together with pain management, behavioral health and support groups that assist those who struggle with drug addiction, opioid dependence and poor health management. A team will work to determine specific health goals and implement a variety of services that include fitness training, nutritional counseling, psychiatric counseling, diabetes education, pain management or addiction services. Open to all through self-referral or provider referral.

- Number of Community Members Served from June 2017 through December 2017: 87

**Partners in Services to the Homeless**

- Redwood Quality Management Services
- MCAVHN (Mendocino County Aids/Viral Hepatitis Network)
- Redwood Children’s Center
- Project Sanctuary
- Department of Health and Human Services
- Food Bank
- Ford Street Project
- Mendocino County Health Clinic
- Manzanita Services
- Employment Development Department
What was the impact in 2017 for your priority area?

### Health/Mental Health & Mental Disorders

**Adults Needing and Receiving Behavioral Health Care Services**

<table>
<thead>
<tr>
<th></th>
<th>CA Counties</th>
<th>CA Value</th>
<th>Prior Value</th>
<th>Trend</th>
</tr>
</thead>
<tbody>
<tr>
<td>2013-2014</td>
<td></td>
<td>(57.0%)</td>
<td>(39.0%)</td>
<td></td>
</tr>
</tbody>
</table>

This indicator shows the percentage of adults needing care for emotional or mental health or substance abuse issues who stated that they did obtain help for those issues in the past year.

**Adults with Likely Serious Psychological Distress**

<table>
<thead>
<tr>
<th></th>
<th>CA Counties</th>
<th>CA Value</th>
<th>Prior Value</th>
<th>Trend</th>
</tr>
</thead>
<tbody>
<tr>
<td>2013-2013</td>
<td></td>
<td>(8.2%)</td>
<td>(4.7%)</td>
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</tr>
</tbody>
</table>

This indicator shows the percentage of adults who have likely had serious psychological distress in the last year based on the Kessler 6 scale.

**Age-Adjusted Death Rate due to Suicide**

<table>
<thead>
<tr>
<th></th>
<th>CA Counties</th>
<th>CA Value</th>
<th>US Value</th>
<th>Prior Value</th>
<th>Trend</th>
<th>HP 2020 Target</th>
</tr>
</thead>
<tbody>
<tr>
<td>2013-2015</td>
<td></td>
<td>(10.3%)</td>
<td>(12.9%)</td>
<td>(23.9)</td>
<td></td>
<td>(10.2)</td>
</tr>
</tbody>
</table>

This indicator shows the age-adjusted death rate per 100,000 population due to suicide.

**Depression: Medicare Population**

<table>
<thead>
<tr>
<th></th>
<th>CA Counties</th>
<th>U.S. Counties</th>
<th>CA Value</th>
<th>US Value</th>
<th>Prior Value</th>
<th>Trend</th>
</tr>
</thead>
<tbody>
<tr>
<td>2015</td>
<td></td>
<td></td>
<td>(14.3%)</td>
<td>(16.7%)</td>
<td>(15.5%)</td>
<td></td>
</tr>
</tbody>
</table>

This indicator shows the percentage of Medicare beneficiaries who were treated for depression.

**Frequent Mental Distress**

<table>
<thead>
<tr>
<th></th>
<th>CA Counties</th>
<th>U.S. Counties</th>
<th>CA Value</th>
<th>US Value</th>
<th>Prior Value</th>
<th>Trend</th>
</tr>
</thead>
<tbody>
<tr>
<td>2016</td>
<td></td>
<td></td>
<td>(10.6%)</td>
<td>(15.0%)</td>
<td>(12.0%)</td>
<td></td>
</tr>
</tbody>
</table>

This indicator shows the percentage of adults who stated that their mental health, which includes stress, depression, and problems with emotions, was not good for 14 or more of the past 30 days.
Program Highlight:

One of our regular clients from street medicine directed us to his friend who sat behind a dumpster and was found to have an injured foot. He was covered in his own urine and feces and reported that his foot had been run over. Our outpatient care management nurse took the patient to medical respite to get cleaned up before going to the ED to have his foot examined. Unfortunately, the patient left the ED before being examined. Months later Street Medicine found the man in the same state and proceeded to examine him at the emergency winter shelter referring him to the ED for further complex care including his dementia. OPCM stayed with patient at the ED to make sure he was admitted to the hospital for the proper workup.

Over the subsequent six months this gentleman had close case management as placement was sought to provide him appropriate care and shelter. Many potential local and out of area SNF facilities refused to take him and so he was discharged to the medical respite unit until placement could be found. Statistics show that those left unsheltered for over five years have a 50% mortality rate, so our team did not give up. Eventually a SNF in Crescent city accepted the patient and OPCM provided patient transportation to the facility where he could live out the remainder of his days.

If OPCM and Street Medicine did not intervene with this patient when we did he could have died behind a dumpster. The community benefited by assisting in seeing this poor old man off the streets where he could go to a long-term facility to live out his days with dignity. It was the humane thing to do, no one should live or die behind a dumpster.

Priority Need - Childhood Obesity & Family Wellness

Within the Healthy Mendocino indicators for health, exercise, nutrition and weight, three are in the red for 2016 and 2017 data: 5th Grade Students who are at a Healthy Weight, 7th Grade Students who are Physically Fit, andAdults who are Obese. We believe this will take strategies within the school system as well as those that reach into families and certain populations such as the Hispanic and Native American populations.

In 2017, our work primarily involved support to local events that encouraged activity and those where health education and outreach could be done.

Intervention: Colors for Cancer Fun Run/Walk: A family fun event to educate and raise awareness concerning cancer.

  o Number of Community Members Served: 200

Intervention: Ukiah Unified School District Health Fair

  o Number of Community Members Served: 200

Intervention: Healthy Mendocino: Family Wellness & Childhood Obesity Team. AVUV is an active member of the Action team to help improve the quality of life in Mendocino.

  o Kids Triathlon – Swimming, Biking and Running for all levels of fitness to help fight childhood obesity in Mendocino County. Action item in 2017 to jump start a movement to make the
community healthier. The goal is to foster healthy eating and physical activity habit among families to create measurable change in the youth of Mendocino.

- Number of Community Members Served: 121

Intervention: **Healthy Food Expo**: Partnership with local grocery store to provide a mini health fair to educate the community on the healthy aspects of fresh fruit and vegetables through contests and prizes.

  - Number of Community Members Served: 40

Intervention: **Blue Zones**: Partnership with community to explore the broad lift of community health, ensuring that all the touch points in the life radius points to better health.

  - Number of Community Members Served: 500

Intervention: **Food with Friends**: Making the most of summer bounty from the garden. Sharing easy and healthy recipes. Staying hydrated during the summer months.

  - Number of Community Members Served: 30

**Partners**

- North Coast Opportunities for Caring Kitchen
- Instilling Goodness & Developing Virtues Schools
- Cancer Resources Centers of Mendocino County
- Yoga Mendocino
- New Trend Wireless
- Chili Smith Family Food
- Boys & Girls Club
- Ukiah Unified School District
- Healthy Mendocino
- Raley’s Supermarket
- North Coast Opportunities
- Ukiah Natural Foods Co-op
- City of Ukiah
- California Highway Patrol
What was the impact in 2017 for your priority area?

We believe it will take more to move the dial on these indicators. Work in 2018 will include further analysis and assessment giving rise to a well thought out approach that involves the most important community touchpoints in the life radius of children and families.

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**5th Grade Students who are at a Healthy Weight or Underweight**

<table>
<thead>
<tr>
<th>Percentage</th>
<th>CA Counties</th>
<th>CA Value (59.3%)</th>
<th>Prior Value (52.3%)</th>
<th>Trend</th>
</tr>
</thead>
<tbody>
<tr>
<td>52.4%</td>
<td></td>
<td></td>
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</tbody>
</table>

This indicator shows the percentage of 5th grade students who meet the Healthy Fitness Zone standards for Body Composition in the annual California Physical Fitness Test (PFT).

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**7th Grade Students who are Physically Fit**

<table>
<thead>
<tr>
<th>Percentage</th>
<th>CA Counties</th>
<th>CA Value (64.6%)</th>
<th>Prior Value (59.7%)</th>
<th>Trend</th>
</tr>
</thead>
<tbody>
<tr>
<td>56.7%</td>
<td></td>
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</tbody>
</table>

This indicator shows the percentage of 7th grade students that achieve the Healthy Fitness Zone for the aerobic capacity portion of the annual California Physical Fitness test.

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**9th Grade Students who are at a Healthy Weight or Underweight**

<table>
<thead>
<tr>
<th>Percentage</th>
<th>CA Counties</th>
<th>CA Value (62.8%)</th>
<th>Prior Value (56.6%)</th>
<th>Trend</th>
</tr>
</thead>
<tbody>
<tr>
<td>59.2%</td>
<td></td>
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</tbody>
</table>

This indicator shows the percentage of 9th grade students who meet the Healthy Fitness Zone standards for Body Composition in the annual California Physical Fitness Test (PFT).
Priority Need - Childhood Trauma

Childhood trauma is linked to chronic disease as well as mental health and substance abuse issues in the adult life. Those who work in the Family Court system as well as mental health note that there are generations of parents unable to parent effectively or even to attach normally due to their own childhoods where substance use and/or mental health negatively impacted their own childhood. Mendocino County has a high rate of children placed in foster care. Again, this complex problem will require long term initiatives to stop the cycle. Analysis of the problem and some key targeted initiatives are a focus moving into 2018.

Intervention: Street Medicine Outreach: To homeless or near homeless has often uncovered childhood trauma as well as at time post-traumatic stress disorders from the military or other experiences layered on top. The care management team has been able to have individual breakthroughs and successes with clients in
the course of their work described above. In addition, support has been given to community programs described below.

Intervention: **Community Resilience Model**: Support was given to the training on this model that equips those dealing with others who have undergone adverse childhood events to receive and carry their stories in a way that does not re-injure or keep the person stuck in their story; rather, helps them reframe and get unstuck from that story. This was rolled out initially in Ukiah and then expanded to some offerings on the Coast.

  o  Number of Community Members Served: 22

Intervention: **Apathy Effect Exhibit**: AHUV was a major sponsor of this exhibit that educated the community on human trafficking, and raising awareness to protect the vulnerable within the community, of which there are many. The exhibit was well received and will be brought back with further training and awareness drives in 2018.

  o  Number of Community Members Served: 312

Intervention: **Children’s Health Fair**: A free children’s health fair whose goal is to connect local families with community resources that can have a positive impact on the lives of their children and families. A bilingual event that includes screenings for diabetes, vision, hearing, and an emphasis on healthy eating with interactive

  o  Number of Community Members Served: 300

Intervention: **Health Careers Exploration Summer Institute**: A program designed to promote the advancement of health care workforce through quality education and service. AHUV partnered with Ukiah Unified School District to introduce local high school students to a career in the health care field. Students participated in a three-week course to observe the roles and responsibilities, scope of practice and educational requirement of 10 different hospital rotations.

  o  Number of Community Members Served: 10

**Partners**

- Savings Bank
- North Coast Opportunities
- Boys & Girls Club
- Redwood Community Services
- Alex Rorabaugh Center
- Tapestry
- Pomo Shriners Club
- Ukiah Unified School District High School

More targeted initiatives need to be in place to truly move the dial on adverse childhood events.
Other Community Benefits

Intervention: **Focus on Healing Programing**: A community service provided to any community member going through the cancer experience by bringing healing arts into the interventions and support for healing.

- Pet Therapy – animal assisted therapy available to assist patients, staff, visitors and the public with stress reduction and healing in addition to strokes survivors.
  - Number of Community Members served: 1,300
- Caring/Ceres Kitchen – provides nutritious meals to cancer patients and their families by provided food prepared by students and volunteers and delivered to homes weekly.
  - Number of Community Members served: 61

Intervention: **Organ Donation Registry**: The creation of an AHUV campaign to partner with local high school and community organizations to build up the organ donor bank for organ, eye and tissue donations.

- Number of Community Members Served: 830

Intervention: **Hosted Community Blood Drive**

- Number of Community Members Served: 45

Intervention: **Diabetes Education**: Monthly classes in English and Spanish are open to anyone in the community that has been diagnosed with Diabetes. Family members and support members are welcome to join. Attendees learn how to manage their diabetes and stay healthy. Education tables are also present at the Children’s Health Fair, Mendocino County Fair and Mendocino County Benefits Fair to provide free screenings.

- Number of Community Members Served: 1,765

**Partners**

- Ukiah Natural Foods
- Art Therapy Institute of the Redwoods
- Donor Network West
- Ukiah Unified School District High School
- Partner 4
- Blood Centers of the Pacific
Connecting Strategy and Community Health

As hospitals move toward population health management, community health interventions are a key element in achieving the overall goals of reducing the overall cost of health care, improving the health of the population, and improving access to affordable health services for the community both in outpatient and community settings. The key factor in improving quality and efficiency of the care hospitals provide is to include the larger community they serve as a part of their overall strategy.

Health systems must now step outside of the traditional roles of hospitals to begin to address the social, economic, and environmental conditions that contribute to poor health in the communities we serve. Bold leadership is required from our administrators, healthcare providers, and governing boards to meet the pressing health challenges we face as a nation. These challenges include a paradigm shift in how hospitals and health systems are positioning themselves and their strategies for success in a new payment environment. This will impact everyone in a community and will require shared responsibility among all stakeholders.

Population health is not just the overall health of a population but also includes the distribution of health. Overall health could be quite high if the majority of the population is relatively healthy—even though a minority of the population is much less healthy. Ideally such differences would be eliminated or at least substantially reduced.

Community health can serve as a strategic platform to improve the health outcomes of a defined group of people, concentrating on three correlated stages:
1) The distribution of specific health statuses and outcomes within a population;
2) Factors that cause the present outcomes distribution; and
3) Interventions that may modify the factors to improve health outcomes.

Improving population health requires effective initiatives to:
1) Increase the prevalence of evidence-based preventive health services and preventive health behaviors,
2) Improve care quality and patient safety and
3) Advance care coordination across the health care continuum.

Our mission as a health system is Living God’s love by inspiring health, wholeness and hope, we believe the best way to re-imagine our future business model with a major emphasis of community health is by working together with our community.