Adventist Health Howard Memorial

2018 Community Health Plan/Annual Update
## Table of Contents

Adventist Health Overview ...................................................................................................................................... 3

Letter from the President ........................................................................................................................................ 4

Hospital Identifying Information .......................................................................................................................... 5

Community Health Development Team ............................................................................................................... 6

Invitation to a Healthier Community ..................................................................................................................... 7

2018 Community Benefit Update ........................................................................................................................ 9

Connecting Strategy and Community Health ....................................................................................................... 17

Appendices ........................................................................................................................................................ 18
Adventist Health Overview

Adventist Health Howard Memorial is an affiliate of Adventist Health, a faith-based, nonprofit integrated health system serving more than 80 communities on the West Coast and Hawaii.

Adventist Health entities include:

- 20 hospitals with more than 3,200 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
- Compassionate and talented team of 35,000 associates, medical staff physicians, allied health professionals and 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.

OUR MISSION:
Living God’s love by inspiring health, wholeness and hope.
When we opened our new facility in October of 2015, we set in motion another chapter in our long history and tradition of exceptional care.

This new chapter of our story would not have been possible without the incredible support of our community we call home.

Today, just as our facility has grown in size, our impact and difference we make for our community have also grown as we bring primary and specialty care closer to home. We are ever more inspired to bring our community nothing but the best care and that means reaching beyond our walls every day to provide programs and services to make our friends and neighbors safer and healthier where they live. Our commitment to caring for the community is our passion, our duty and our privilege.

Caring for the children and families in our region means working with and within community to create healthier places to live. We recognize the importance of addressing the social determinants of health for the overall well-being of a community – where they live, learn, work and play. That’s why our comprehensive approach to improving community health is based on this premise -- supporting the efforts of agencies that share our health mission, and fostering partnerships and opportunities to connect members of our community with programs to meet their needs.

Our multi-pronged initiatives to improve community health include improving access to care by bringing in much-needed providers, offering a range of prevention and health improvement programs conducted by the hospitals with community partners, and investing in efforts that address social determinants of health.

We continue to strengthen these community partnerships and create new ones to achieve these goals. As we look back on the past 90 years of service to our community, we are excited and even more inspired to grow in our impact and be more strategic in our work to create a better, healthier community for Mendocino County and beyond.

Sincerely,

Jason Wells
President
Hospital Identifying Information

Adventist Health Howard Memorial
25-bed critical access hospital
1 Marcela Drive, Willits CA 95490

Contact: Jason Wells, President
(707)459-6801

Existing healthcare facilities that can respond to the health needs of the community:

- Adventist Health Howard Memorial Hospital, 1 Marcela Drive, Willits, CA 95490
- Adventist Health Medical Office, 3 Marcela Drive, Willits, CA 95490
- Howard Pharmacy, 3 Marcela Drive, Willits, CA 95490
- Adventist Health Ukiah Valley, 275 Hospital Drive, Ukiah, CA 95482
- Little Lake Health Center (ARCH), 45 Hazel St. Willits, CA 95490
- Baechtel Creek Medical Clinic, 1245 S. Main St. Willits, CA 95490
- Long Valley Health Center, 50 Branscomb Road, Lantonville, CA 95450
Community Health Development Team

Jason Wells
Chief Executive Officer

Judson Howe
Chief Financial Officer

Cici Winiger
Communications Manager & Community Outreach

CHNA/CHP contact:
Cici Winiger
Communications Manager & Community Outreach
1 Marcela Drive, Willits, CA 95490
Email: Cecilia.winiger@ah.org
Phone: 707.456.3591
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: https://www.adventisthealth.org/about-us/community-benefit/
Invitation to a Healthier Community

Fulfilling the Adventist Health 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 consider health behaviors and risks, the physical environment, the health system, and social determinants of health. Each component influences the next and through strategic and collective action improved health can be achieved.

The Community Health Implementation Strategy 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, Adventist Health Howard Memorial has adopted the following priority areas for our community health investments for 2017-2019:

Priority Area 1: Mental Health

Mental health needs and services are a significant concern in Mendocino County. Almost half (46%) of adults surveyed indicate that mental health issues are among the most important health issues facing our community. There are complex interactions among mental health, mental illness, the high poverty rate, unemployment and homelessness. Poor mental health can both result from and contribute to other poor health and social conditions. The barriers to accessing timely and appropriate mental health services contribute to crises that local emergency departments or law enforcement must address. Community members and providers indicate that mental health services are most likely to be used when they are in the local community, financially accessible and culturally relevant.

Priority Area 2: Childhood Obesity & Family Wellness

Taken together, childhood overweight, obesity and inadequate physical activity are a significant health concern in Mendocino County, where 41% of children are overweight (Community Health Status Assessment 2015). Childhood obesity can lead to diabetes and other serious chronic diseases, with consequences for both the quality and length of life and the cost of health care. Obese and overweight children and youth are more likely to become obese and overweight adults. This health need, with its emphasis on improving access to healthy, affordable foods and physical activity resources, represents a significant opportunity to invest in better health outcomes for Mendocino County’s children.
**Priority Area 3: Economic Development/Poverty**

Childhood trauma and adverse childhood experiences (ACEs) have a negative impact on the health, safety, and well-being of individuals and our community. They lead to harmful health behaviors and higher risk for serious health conditions in adulthood. Vision: All children will have the support and opportunity to grow up in stable and supportive families, and families will have access to support in times of crisis.

**Priority Area 4: Access to Care**

There is a continued national shortage of primary care physicians and health professionals nationwide and even more so for rural areas such as Willits. Our goal in this priority area is to recruit and bring primary and specialty care close to home which leads to better health outcomes and experience for our patients.

While not focusing and providing direct support, Adventist Health Howard Memorial will also provide support, as appropriate, to the following community-identified priority areas: 1) Housing, 2) Childhood Trauma

Adventist Health Howard Memorial approved the 2016 CHNA in September 2016 and made it publicly available on the Adventist Health Howard Memorial website in October 2016. Click here to view the 2016 Community Health Needs Assessment.
2018 Community Benefit Update

In 2016 Adventist Health Howard Memorial conducted a community health needs assessment and was followed by a 2017 Community Health Plan (Implementation Strategy) 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 1 – Mental Health

Intervention: Free 8-Week Depression & Anxiety Recovery Seminar. In collaboration with the Seventh-Day Adventist Church in Willits, the 8-week program was offered for free to community members dealing with depression and anxiety using the Nedley Depression and Anxiety Recovery Program. The evidence-based program taught participants positive thinking techniques, nutritional education, and much more to increase brain function, manage stress, live above loss, and achieve peak mental performance.

- Number of Community Members Served: 28

Intervention: Annual Prayer Breakfast is held annually in February, coinciding with the National Prayer Day in Washington. The goal of the prayer breakfast is to bring the community together, regardless of faith, in fellowship to pray for our local leaders, law enforcement, hospital workers and business community.

- Number of Community Members Served: 200

Intervention: SafeRx Coalition Mendocino - The relationship between opioid abuse and depression is bi-directional, meaning that suffering from one increases the risk of the other. Reducing opioid use is an important part of the strategy when it comes to mental health. That’s why in 2018, we partnered with community agencies as part of the Mendocino Safe Rx Coalition, an opioid reduction program. Safe Rx Mendocino takes a community approach to the safe management of prescription painkillers in our county thru prevention, education, treatment and collaboration. As part of this work, we worked closely to develop and implement medication prescribing guidelines, held drug-take back events and offered safe medication disposal and education to the community.

Number of Community Members Served: 1,200

Intervention: Medically Assisted Treatment Program for Addiction - The relationship between opioid abuse and depression is bi-directional, meaning that suffering from one increases the risk of the other. Reducing opioid use is an important part of the strategy when it comes to mental health. In 2018, we started offering a Suboxone program, at our Redwood Medical Clinic (primary care clinic) designed to help those recovering from opioid dependency. Thru the program, 30 patients received suboxone treatment while getting support and monitoring from a physician.

Number of Community Members Served: 30
Intervention: **Telepsychiatry Services at the Clinic** – There is a national shortage of psychiatrists and behavioral health professionals nationwide and the challenge is even worse in rural communities where patients have to travel far or wait very long to get treatment for mental health issues. To address this, we have started offering telepsychiatry services in our primary care clinic. Bridging the gap and making sure patients get the treatment they need for depression, bipolar issues, among others.

Number of Community Members Served: 27

**Partners**

- Seventh-Day Adventist Church- Willits
- Willits City Council
- Willits Chamber of Commerce
- Safe Rx Coalition Mendocino

**2018 Evaluation Impact**

### Health / Mental Health & Mental Disorders

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*http://www.healthymendocino.org/*

**Priority Need 2- Childhood Obesity & Family Wellness**

Intervention: **Morning Mile Program at Blosser Lane Elementary School** is a pilot program in collaboration with the Willits Unified School District. The Morning Mile is a national before school running/walking program...
originating in Florida designed to help tackle childhood obesity by giving kids the opportunity to be active every day. Every day, before school starts, students, parents and school staff, walk or run laps around school, measured for distance. Six laps around the loop is exactly a mile and students aim to get more than that. At the end of the school year, almost 60% of the 328 students have put in their miles. Students, staff and guests have combined almost 1,200 miles!

- Number of Community Members Served: 240

Program highlight – New before school exercise program aims to address childhood obesity

It’s a Friday morning at Blosser Lane Elementary School. Instead of the usual scene of children sitting around, waiting for the bell to ring, over 100 students are running and walking laps around the basketball court, all the while laughing and having fun. Students are indeed off to a healthy start by earning their “miles” thanks to a new before-school program called “Morning Mile” sponsored by Adventist Health Howard Memorial.

A running/walking program originating in Florida, Morning Mile is designed to help tackle childhood obesity by giving kids the opportunity to be active every day. The challenge of course being, how to motivate today’s youth to step away from the TV and go for an early morning walk.

But it’s easier than we think. “Music, socializing, and a little bit of competition, something to show for their effort, and to get moving, that’s all they want,” said Tiffany Klee, physical education teacher, who spearheaded the effort, along with Tina Tyler-O’Shea, Senior Program Specialist with the Mendocino County Health and Human Services Agency.

Blosser Lane Principal Nancy Runberg shares, “Anything to help us get students moving is a good thing. It really warms my heart to see so many kids, staff and community members participating. The other day, I saw kids rushing as the bus pulled up and they were so excited to get their laps in. It’s really a wonderful program. Besides the health benefits, it also allows them to release all that energy and get them ready to learn. It’s a win-win for both teachers and students, that’s for sure.”

Adventist Health Howard Memorial donated funds to get the program running. Jason Wells, president says, it’s exactly the kind of programs that the hospital is excited to support. “Childhood obesity is a growing problem and anything we can do to help address it, is a step in the right direction. And this ties perfectly with our mission of inspiring health in our communities. While we love taking care of kids when they’re sick, we would rather keep them healthy and well. Starting healthy habits while they’re young can set them up for a great future and better health outcomes for the community as whole. We hope more schools get on board and we will be happy to support them in any way we can,” he explains.

The statistics on childhood obesity—with nearly one in five school-age children in the U.S. being considered obese is pretty grim. In Mendocino County, 45 percent of children are obese. But there’s also hope: obesity is a preventable and curable disease and programs like the Morning Mile is a step towards prevention, especially right where the children spends time the most – in schools.
Intervention: **Lunch & Learn Program** at the Senior Center is a health education program in partnership with the Willits Senior Center. Seniors are one of the most vulnerable populations. They have very limited and fixed income and are often are not able to eat healthy meals. The Lunch and Learn program collaboration educates seniors and the greater community about health topics; staying well; drug interactions and fall prevention. A healthy lunch is served for free and is prepared and provided by the hospital, made with produce from our organic garden.

- Number of Community Members Served: 250

Intervention: **Cash donation to provide year-round salad bar for the Senior Center.** Seniors are one of the most vulnerable populations. They often live on limited and fixed income and are not always able to eat healthy. AH Howard Memorial Hospital provided salads for members of the Senior Center and members of the community who come to eat at the senior center during lunch hour. The Senior Center provides meals every day to seniors which includes the salad bar.

- Number of Meals Served: 100,000

Intervention: **Inspiring Wellness though the Commonwealth Garden and Roots Restaurant:** The Commonwealth Garden is a 5-acre garden with a 50+ tree orchard and a 3,000 sq. ft. greenhouse that grows produce for hospital patients and for use in Roots. Roots Restaurant is Howard Memorial’s new farm to fork restaurant which is open to staff, patients and their family members and the community.

Roots serves fresh and healthy meals, which in turn inspires conversations about healthy eating and wellness and serves as an example to community members that eating healthy does not have to be bland or expensive. Food offered is always affordable and always includes a vegetarian option. The restaurant design also lends itself to the message of wellness, with its open concept and community members can see exactly how their food is prepared to allow them to replicate the healthy recipes at home.

Roots serves 150+ meals a day, including staff and community members and has earned a reputation as one of the “best places to eat” in Willits.

Extra produce is donated to the Willits Senior Center and the Food Bank. In 2018, we donated 2,000 lbs. of produce to these two organizations.

- Number of Meals Served (excluding inpatient): 200,000

Intervention: **Financial support to various community organizations focusing on health and wellness.** The hospital also supports many organizations in the community to further our efforts to address childhood obesity and family wellness. In 2018, we donated $30,000 to the Healthy Mendocino Project. We also donated to various organizations to support sports and physical activity for the youth including, Mendocino Soccer Academy, and purchase of helmets for the Willits High School football team and donations to the Willits Food Bank and Community Services and the Daily Bread which provides meals and services to low-income and underserved population.
Number of Community Members Served: 5,000

Intervention: Participation in the Healthy Mendocino Project and the Childhood Obesity and Wellness (CHOW) Action Team which is a collaborative effort to bring together community agencies, schools and other organizations to find strategies to address the priorities set out in the 2016 CHNA. As part of this effort, the CHOW action team was formed, consisting of 15 representatives from community organizations which meet monthly to strategize ways to reduce the childhood obesity rates in the county.

Number of Community Members Served: 87,000

Intervention: Smoking Cessation program is a four-week program that uses a behavior modification approach that helps smokers develop a personal plan of action to assist in breaking the cycle of addiction and provides strategies to prevent relapse. The small group setting encourages participants to work on the process of quitting both individually and as part of a group.

- Number of Community Members Served: 70

Intervention: FREE Diabetes Support Group Meetings – this once a month seminar series offers participants and their family members education and strategies to manage their diabetes. Different topics focus on exercise, healthy eating, managing complications and more.

- Number of Community Members Served: 130

Intervention: FREE CPR/AED Classes and Epi-Pen Training for Willits Unified School District Staff – To improve health outcomes and prevent mortality from cardiac arrests, we offered free CPR training for community members in 2018. Taught by AHHM staff, the 3-hour class is accredited by American Heart Association and teaches adult and child CPR and AED use, infant CPR, and how to relieve choking in adults, children and infants. The hands-on course is for anyone with limited or no medical training who needs the certification as part of job requirements or for those who just want to learn how to save a life.

Responding to a need from the schools, AHHM staff also provided training to Willits Unified School District staff on responding to seizures, administering Epi-Pen and Glucagon to students to make sure students get the necessary help and medical response in a timely manner.

- Number of Community Members Served: 188

Partners

- Willits Unified School District
- Mendocino County Public Health
2018 Evaluation Impact

While metrics for 5th grade students at a healthy or under weight remained the same, Mendocino County saw an almost 1.5% increase in the number of 7th graders who were physically fit. This, along with a slight increase in metrics for 9th grade students at a healthy or under weight indicates a shift in overall health among our youth.

*http://www.healthymendocino.org/

Priority Need – Access to Care

Intervention: Free Health Screenings at various community events for early disease diagnosis and to improve access. Every year, AHHM participates in various community events and performs free health screenings to give access to healthcare services. We offered free blood pressure, diabetes and BMI screenings throughout the year.

- Number of Community Members Served: 5,000

Intervention: Back to School Fair and Free Sports Physicals – we held our first ever back to school fair to make sure children are healthy and have what they need to start the school year. We offered free screenings and other services including dental screening and fluoride application, vision screening, free haircuts and backpacks. To encourage physical activity and participation in sports and prevent injuries, we offered 350 free sports physicals. Often parents face a challenge in scheduling a timely appointment for their child’s sports physical due to a lack of providers and the costs involved to afford the exam. Physicians perform exams to verify the health of the child to play sports as well as the detection any underlying health issues which would preclude participation in sports.

- Number of Community Members Served: 650
Intervention: **Same day appointments to the community in the primary care clinic** This allows those who are unable to see their primary care physician access to medical care and improved patient experience. This allows for a less crowded Emergency Department.

- Number of Community Members Served: 1,500

**Program Highlight: Back to School Fair and Free Sports Physicals**

Besides shopping for new clothes, backpacks, and other supplies, parents and students have an ever more important item on the to do list before going back to school: the sports physical. To make it easy and convenient for parents and students to check it off the list, Adventist Health Howard Memorial (AHHM) is offering free sports physicals to all students in Mendocino County on July 21 and 28 from 8:00 a.m. to Noon.

A sports physical is required by California schools before a child can join in any school sports and is aimed problems that might pose a health hazard — such as a hernia, untreated asthma, an undiagnosed heart condition or concussion injury.

For local physician John Glyer, MD, these exams are also a chance to make sure students are generally healthy and don’t have underlying conditions that will prevent them from participating in sports.

“It’s important especially for those who are first time athletes. During these exams, we ask a lot of screening questions to help us identify potential health issues that may preclude kids from playing sports or make them more prone to accidents or injuries when they’re playing. And sometimes we discover conditions that would have never been diagnosed otherwise,” he explains.

“Aside from that, we want to ensure that they are safe and healthy so that they can have a great experience,” shares Glyer, a family medicine specialist, who has been caring for children and adults in the community for over 30 years.

Dr. Glyer cautions however, that while sports physicals meet all the requirements for participation in sports, they are not intended to replace annual, comprehensive physical exams. Annual exams are recommended for all children to ensure overall health.

Since the cost of getting ready for school can add up, Adventist Health Howard Memorial started offering free sports physicals five years ago, in line with its mission of inspiring health, wholeness and hope. Jason Wells, Adventist Health Howard Memorial president recognizes the importance of keeping children active and healthy and giving them the opportunity to excel in sports. He explains, “Childhood obesity is a significant challenge in Mendocino County and the Howard team is committed to being a part of the solution. We certainly don’t want the cost of a sports physical to be a barrier to anyone who desires an active lifestyle by playing sports.”

Along these lines, the hospital is also adding other free health screenings and services through a back to school fair to help give children a healthy start to the school year on July 21. The hospital has partnered with other
local organizations and businesses to offer free vision screening, dental education, diabetes screening, backpacks and free haircuts. Little Lake Health Center’s dental team and the Tooth Fairy will be educating children on how to take care of their teeth for overall health.

A team from local salon Mirror Mirror on the Wall and It Takes Two to Tangle will be providing free haircuts to all students. Judy Coughlin, who has been in business in Willits for 28 years, shares why she’s doing this for the community. “First impressions are big on the first day back to school. We want our children to stand tall and feel good about themselves and be ready to start the school year. For someone who’s going to school for the first time, it’s a much-needed confidence-booster!”

**Other Community Benefits**

Intervention: Economic Development Council Participation

- Number of Community Members Served: Population of Willits (5,000)

Intervention: Education in Healthcare including Physical Therapy, Nursing education.

- Number of Community Members Served: 300

Intervention: Training for Healthcare Professionals including PT/OT, Empathy, Medical Imaging Internship, Highschool Shadowing program, CEP & other training.

- Number of Community Members Served: 80

Intervention: Social Services Enrollment Assistance:

- Number of Community Members Served: 1600

Intervention: Use of Hospital Facilities for Community Groups:

- Number of Community Members Served: 300

Intervention: Workforce Development - Health Professional Recruitment for MUA’s, Physician Recruitment:

- Number of Community Members Served: Health service area 15,000 lives

**Partners**

- Mendocino Community College
- Partnership Health Plan of California
- Willits Chamber of Commerce
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 to Live God’s love by inspiring health, wholeness and health and 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.
Appendices

Glossary of terms

Medical Care Services (Charity Care and Un-reimbursed Medi-Cal and Other Means Tested Government Programs)

Free or discounted health services provided to persons who meet the organization’s criteria for financial assistance and are thereby deemed unable to pay for all or portion of the services. Charity Care does not include: a) bad debt or uncollectible charges that the hospital recorded as revenue but wrote-off due to failure to pay by patients, or the cost of providing care to such patients; b) the difference between the cost of care provided under Medicaid or other means-tested government programs, and the revenue derived there from; or c) contractual adjustments with any third-party payers. Clinical services are provided, despite a financial loss to the organization; measured after removing losses, and by cost associated with, Charity Care, Medicaid, and other means-tested government programs.

Community Health Improvement

Interventions carried out or supported and are subsidized by the health care organizations, for the express purpose of improving community health. Such services do not generate inpatient or outpatient bills, although there may be a nominal patient fee or sliding scale fee for these services. Community Health Improvement – These activities are carried out to improve community health, extend beyond patient care activities and are usually subsidized by the health care organization. Helps fund vital health improvement activities such as free and low-cost health screenings, community health education, support groups, and other community health initiatives targeting identified community needs.

Subsidized Health Services – Clinical and social services that meet an identified community need and are provided despite a financial loss. These services are provided because they meet an identified community need and if were not available in the area they would fall to the responsibility of government or another not-for-profit organization.

Financial and In-Kind Contributions – Contributions that include donations and the cost of hours donated by staff to the community while on the organization’s payroll, the indirect cost of space donated to tax-exempt companies (such as for meetings), and the financial value (generally measured at cost) of donated food, equipment, and supplies. Financial and in-kind contributions are given to community organizations committed to improving community health who are not affiliated with the health system.

Community Building Activities – Community-building activities include interventions the social determinants of health such as poverty, homelessness, and environmental problems.
Health Professions Education and Research

Educational programs that result in a degree, certificate, or training that is necessary to be licensed to practice as a health professional, as required by state law; or continuing education that is necessary to retain state license or certification by a board in the individual’s health profession specialty. It does not include education or training programs available exclusively to the organization’s employees and medical staff, or scholarships provided to those individuals. Costs for medical residents and interns may be included.

Any study or investigation in which the goal is to generate generalized knowledge made available to the public, such as underlying biological mechanisms of health and disease; natural processes or principles affecting health or illness; evaluation of safety and efficacy of interventions for disease such as clinical trials and studies of therapeutic protocols; laboratory-based studies; epidemiology, health outcomes and effectiveness; behavioral or sociological studies related to health, delivery of care, or prevention; studies related to changes in the health care delivery system; and communication of findings and observations (including publication in a medical journal)
Community Health Needs Assessment and Community Health Plan Coordination Policy

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**POLICY SUMMARY/INTENT:**

This policy is to clarify the general requirements, processes and procedures to be followed by each Adventist Health hospital. Adventist Health promotes effective, sustainable community benefit programming in support of our mission and tax-exempt status.

**DEFINITIONS**

1. **Community Health Needs Assessment (CHNA):** A CHNA is a dynamic and ongoing process that is undertaken to identify the health strengths and needs of the respective community of each Adventist Health hospital. The CHNA will include a two-document process, the first being a detailed document highlighting the health related data within each hospital community and the second document (Community Health Plan or CHP) containing the identified health priorities and action plans aimed at improving the identified needs and health status of that community.

   A CHNA relies on the collection and analysis of health data relevant to each hospital’s community, the identification of priorities and resultant objectives and the development of measurable action steps that will enable the objectives to be measured and tracked over time.

2. **Community Health Plan:** The CHP is the second component of the CHNA and represents the response to the data collection process and identified priority areas. For each health need, the CHP must either: a) describe how the hospital plans to meet the identified health need, or b) identify the health need as one the hospital does not intend to specifically address and provide an explanation as to why the hospital does not intend to address that health need.

3. **Community Benefit:** A community benefit is a program, activity or other intervention that provides treatment or promotes health and healing as a response to identified community needs and meets at least one of these objectives:

   - Improve access to health care services
   - Enhance the health of the community
   - Advance medical or health care knowledge
   - Relieve or reduce the burden of government or other community efforts
Community benefits include charity care and the unreimbursed costs of Medicaid and other means-tested government programs for the indigent, as well as health professions’ education, research, community health improvement, subsidized health services and cash and in-kind contributions for community benefit.

AFFECTED DEPARTMENTS/SERVICES:
Adventist Health hospitals

POLICY: COMPLIANCE – KEY ELEMENTS
PURPOSE:
The provision of community benefit is central to Adventist Health’s mission of service and compassion. Restoring and promoting the health and quality of life of those in the communities served, is a function of our mission “To share God’s love by providing physical, mental and spiritual healing.” The purpose of this policy is:

1. To establish a system to capture and report the costs of services provided to the underprivileged and broader community;
2. To clarify community benefit management roles;
3. To standardize planning and reporting procedures; and
4. To assure the effective coordination of community benefit planning and reporting in Adventist Health hospitals.

As a charitable organization, Adventist Health will, at all times, meet the requirements to qualify for federal income tax exemption under Internal Revenue Code (IRC) §501(c)(3). The purpose of this document is to:

1. Set forth Adventist Health’s policy on compliance with IRC §501(r) and the Patient Protection and Affordable Care Act with respect to CHNAs;
2. Set forth Adventist Health’s policy on compliance with California (SB 697), Oregon (HB 3290), Washington (HB 2431) and Hawaii State legislation on community benefit;
3. Ensure the standardization and institutionalization of Adventist Health’s community benefit practices with all Adventist Health hospitals; and
4. Describe the core principles that Adventist Health uses to ensure a strategic approach to community benefit program planning, implementation and evaluation.

A. General Requirements

1. Each licensed Adventist Health hospital will conduct a CHNA and adopt an implementation strategy to meet the community health needs identified through such assessment.
2. The Adventist Health Community Health Planning & Reporting Guidelines will be the standard for CHNAs and CHPs in all Adventist Health hospitals.
3. Accordingly, the CHNA and associated implementation strategy (also called the Community Health Plan) will initially be performed and completed in the calendar year ending December 31, 2013, with implementation to begin in 2014.
4. Thereafter, a CHNA and implementation strategy will be conducted and adopted within every succeeding three-year time period. Each successive three-year period will be known as the Assessment Period.
5. Adventist Health will comply with federal and state mandates in the reporting of community benefit costs and will provide a yearly report on system wide community benefit performance to board of directors. Adventist Health will issue and disseminate to diverse community stakeholders an annual web-based system wide report on its community benefit initiatives and performance.

6. The financial summary of the community benefit report will be approved by the hospital’s chief financial officer.
7. The Adventist Health budget & reimbursement department will monitor community benefit data gathering and reporting for Adventist Health hospitals.

B. Documentation of Public Community Health Needs Assessment (CHNA)

1. Adventist Health will implement the use of the Lyon Software CBISA™ product as a tool to uniformly track community benefit costs to be used for consistent state and federal reporting.

2. A written public record of the CHNA process and its outcomes will be created and made available to key stakeholders in the community and to the general public. The written public report must include:
   a. A description of the hospital’s community and how it was determined.
   b. The process and methods used to conduct the assessment.
   c. How the hospital took into account input from persons who represent the broad interests of the community served.
   d. All of the community health needs identified through the CHNA and their priorities, as well as a description of the process and criteria used in the prioritization.
   e. Existing health care facilities and other resources within the community available to meet the community health needs identified through the CHNA.

3. The CHNA and CHP will be submitted to the Adventist Health corporate office for approval by the board of directors. Each hospital will also review their CHNA and CHP with the local governing board. The Adventist Health government relations department will monitor hospital progress on the CHNA and CHP development and reporting. Helpful information (such as schedule deadlines) will be communicated to the hospitals’ community benefit managers, with copies of such materials sent to hospital CFOs to ensure effective communication. In addition, specific communications will occur with individual hospitals as required.

4. The CHNA and CHP will be made available to the public and must be posted on each hospital’s website so that it is readily accessible to the public. The CHNA must remain posted on the hospital’s website until two subsequent CHNA documents have been posted. Adventist Health hospitals may also provide copies of the CHNA to community groups who may be interested in the findings (e.g., county or state health departments, community organizations, etc.).
5. For California hospitals, the CHPs will be compiled and submitted to OSHPD by the Adventist Health government relations department. Hospitals in other states will submit their plans as required by their state.

6. Financial assistance policies for each hospital must be available on each hospital’s website and readily available to the public.

Corporate Initiated Policies: (For corporate office use)
References: Replaces Policy: AD-04-002-S
Author: Administration
Approved: SMT 12-9-2013, AH Board 12-16-2013
Review Date:
Revision Date:
Attachments:
Distribution: AHEC, CFOs, PCEs, Hospital VPs, Corporate AVPs and Director