Adventist Health Howard Memorial

2019 Community Plan Update/Annual Report
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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 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.

OUR VISION:
Adventist Health will be a recognized leader in mission focus, quality care and fiscal strength.
Letter from the President

Dear Friends and Colleagues,

Mendocino County has a long tradition of exceptional care and community support that continues today with Adventist Health Howard Memorial. We are proud to bring primary and specialty care closer to home for the residents of Mendocino County. We are 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 our community partners 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 you 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 programs, both new and ongoing, are designed improve community health including improving access to care by bringing in much-needed providers, offering a range of prevention and health improvement programs conducted by our 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 reflect on the past years of service to our community, we are excited and continually inspired to grow in our impact and be more strategic in our work to create a better, healthier community for Mendocino County and beyond.

Warmly,

Jason Wells
President, Adventist Health Ukiah Valley
Hospital Identifying Information

Number of Beds: 25
Critical Access Hospital
Mailing Address: 1 Marcela Drive, Willits CA 95490
Contact Information: 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
- Ukiah Valley Rural Health Centers, with locations in Ukiah, Fort Bragg and Lakeport
- Little Lake Health Center (Mendocino Community Health Centers), 45 Hazel Street, Willits, CA 95490
- Bechtel Creek Medical Clinic, 1245 South Main Street, Willits, CA 95490
- Consolidated Tribal Health, 6991 North State Street, Ukiah, CA 95482
- Long Valley Health Center, 50 Branscomb Road, Laytonville, CA 95454
Community Health Development Team

Jason Wells
President

Judson Howe
Chief Financial Officer

Roseanne Ibarra
Director of Community Integration

CHNA/CHP contact:
Roseanne Ibarra
Director of Community Integration
275 Hospital Drive, Ukiah, CA 95482
Email: ibarrar02@ah.org
Phone: 707.467.5260
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 Adventist Health’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 consider 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 with 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, Frank R. Howard Memorial Hospital has adopted the following priority areas for our community health investments for 2017-2019:

- Childhood Obesity and Family Wellness
- Mental Health
- Economic Development/Poverty
- Access to Care

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.
2019 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 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 - Childhood Obesity and Family Wellness**

**Intervention:** Healthy Mendocino: Family Wellness & Childhood Obesity Team

AVHM is an active member of the Family Wellness & Childhood Obesity Action Team with the goal to help improve the quality of life in Mendocino County for children and families. During 2019, the Team supported a program called Morning Mile at grammar schools in Ukiah and Willits.

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: 300

**Intervention:** Inspiring Wellness though the Commonwealth Garden and Roots Restaurant: The Commonwealth Garden is a 5-acre organic 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 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 2019, we donated 2,000 lbs. of produce to these two organizations.

- Number of Meals Served (excluding inpatient): 200,000
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: 143

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 2019. 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: 30

Intervention: **Complete Health Improvement Program (CHIP):**

Based on principle of the Lifestyle Medicine Institute, CHIP is a 9-week program which uses videos and live sessions to help participants create goals and achieve better health and wellness. Offered free to the community and staff, the program is aimed at helping participants lose weight, lower their A1C, lower blood pressure and find more enjoyment in life.

- Number of Community Members Served: 91

**Partners**

- Healthy Mendocino’s Family Wellness and Childhood Obesity Action Team
- Blosser Lane Elementary School
- Willits Unified School District
- Willits Senior Center
- Willits Food Bank
2019 Evaluation Metrics

Health / Exercise, Nutrition, & Weight

<table>
<thead>
<tr>
<th>Metric</th>
<th>Value</th>
<th>Compared To</th>
</tr>
</thead>
<tbody>
<tr>
<td>5th Grade Students who are at a Healthy Weight or Underweight</td>
<td>58.2%</td>
<td>CA Counties</td>
</tr>
<tr>
<td></td>
<td></td>
<td>CA Value (55.7%)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Prior Value (52.7%)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Trend</td>
</tr>
<tr>
<td>7th Grade Students who are Physically Fit</td>
<td>57.5%</td>
<td>CA Counties</td>
</tr>
<tr>
<td></td>
<td></td>
<td>CA Value (64.9%)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Prior Value (58.4%)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Trend</td>
</tr>
<tr>
<td>9th Grade Students who are at a Healthy Weight or Underweight</td>
<td>58.5%</td>
<td>CA Counties</td>
</tr>
<tr>
<td></td>
<td></td>
<td>CA Value (62.2%)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Prior Value (58.1%)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Trend</td>
</tr>
</tbody>
</table>

http://www.healthymendocino.org/

Priority Need - Mental Health

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 2019, 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: 150

Intervention: Medication-Assisted Treatment Program for Addiction – Combines behavioral therapy and medications to treat substance use disorders. In 2018, we started offering a Suboxone program, designed to help those recovering from opioid dependency. This program is available in the AHHM Emergency Department, inpatient and at Adventist Redwood Clinic, our California Bridge Clinic.

- Number of Community Members Served: 150

Intervention: QPR Workshops

Working with a contract facilitator, Adventist Health Howard Memorial sponsored community and staff workshops to teach the principles of Question, Persuade, Refer (QPR). The QPR mission is to reduce suicidal behaviors and save lives by providing innovative, practical and proven suicide prevention training. Partnering with Mendocino County Public Health, AHHM also provided space for “Train the Trainer” sessions which
allowed partner agencies and community members to teach workshops to new employees and others interested in learning the principles of QPR.

- Number of Community Members Served with QPR Workshops: 34

**Partners**

- Safe Rx Coalition Mendocino

**2019 Evaluation Metrics**

<table>
<thead>
<tr>
<th>Health / Mental Health &amp; Mental Disorders</th>
<th>Value</th>
<th>Compared To</th>
</tr>
</thead>
<tbody>
<tr>
<td>Adults Needing and Receiving Behavioral Health Care Services</td>
<td>54.1%</td>
<td>CA Counties (50.2%) = Trend</td>
</tr>
<tr>
<td>Adults with Likely Serious Psychological Distress</td>
<td>9.5%</td>
<td>CA Counties (6.1%) = Prior Value (4.4%)</td>
</tr>
<tr>
<td>Age-Adjusted Death Rate due to Suicide</td>
<td>21.3</td>
<td>CA Counties (10.4) = Prior Value (13.4)</td>
</tr>
<tr>
<td>Depression: Medicare Population</td>
<td>15.7%</td>
<td>CA Counties (15.9%) = U.S. Counties (17.9%)</td>
</tr>
<tr>
<td>Frequent Mental Distress</td>
<td>12.9%</td>
<td>CA Counties (15.9%) = Prior Value (12.4%)</td>
</tr>
</tbody>
</table>

*http://www.healthymendocino.org/

**Priority Need - Economic Development/Poverty**

**Intervention: Mendocino College Physical Therapy Assistant Program**

Based on the need for qualified physical therapy assistants, Adventist Health Physical Therapy team joined an advisory council at Mendocino College to explore the creation of a new program to meet this need. The Physical Therapy Assistant (PTA) Program is designed to prepare graduates to meet the requirements to
practice as a physical therapist assistant in a variety of health care settings. The program is a total of 68 credit-hours, including general education requirements, and can be completed in five semesters.

There are five public and eight private schools in California that offer accredited PTA programs. Only one of these schools, Sacramento City College, is in the Northern region of California. This program will provide access to this health care career path.

The self-sufficiency wage for Mendocino County in 2018 was $11.56/hour for one adult and $24.78/hour for one adult and one child of infant age. The average wage for this area of study is $27.77/hour, which exceeds the self-sufficiency wages for Mendocino County. This suggest that PTA jobs would provide an adequate salary to support a household.

Partners

• Mendocino College

2019 Evaluation Metrics

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# OUR MISSION:
Living God's love by inspiring health, wholeness and hope.

<table>
<thead>
<tr>
<th>Category</th>
<th>Percentage</th>
<th>CA Counties</th>
<th>U.S. Counties</th>
<th>CA Value</th>
<th>U.S. Value</th>
<th>Prior Value</th>
</tr>
</thead>
<tbody>
<tr>
<td>Food Insecure Children Likely Ineligible for Assistance</td>
<td>19%</td>
<td>CA Counties</td>
<td>U.S. Counties</td>
<td>CA Value</td>
<td>U.S. Value</td>
<td>Prior Value</td>
</tr>
<tr>
<td>Food Insecurity Rate</td>
<td>13.6%</td>
<td>CA Counties</td>
<td>U.S. Counties</td>
<td>CA Value</td>
<td>U.S. Value</td>
<td>Prior Value</td>
</tr>
<tr>
<td>Households Receiving SNAP with Children</td>
<td>58.5%</td>
<td>CA Counties</td>
<td>U.S. Counties</td>
<td>CA Value</td>
<td>U.S. Value</td>
<td>Prior Value</td>
</tr>
<tr>
<td>Households that are Above the Asset Limited, Income Constrained, Employed (ALICE) Threshold</td>
<td>45.0%</td>
<td>CA Counties</td>
<td>CA Value</td>
<td>(11%)</td>
<td>(14%)</td>
<td>(14%)</td>
</tr>
<tr>
<td>Households that are Asset Limited, Income Constrained, Employed (ALICE)</td>
<td>35.5%</td>
<td>CA Counties</td>
<td>CA Value</td>
<td>(36%)</td>
<td>(36%)</td>
<td>(36%)</td>
</tr>
<tr>
<td>Households that are Below the Federal Poverty Level</td>
<td>19.4%</td>
<td>CA Counties</td>
<td>CA Value</td>
<td>(12%)</td>
<td>(12%)</td>
<td>(12%)</td>
</tr>
<tr>
<td>Households with Cash Public Assistance Income</td>
<td>3.4%</td>
<td>CA Counties</td>
<td>U.S. Counties</td>
<td>CA Value</td>
<td>U.S. Value</td>
<td>Prior Value</td>
</tr>
<tr>
<td>Households with Children Receiving SNAP (Count)</td>
<td>2,284</td>
<td>Households</td>
<td>CA Value</td>
<td>(3.1%)</td>
<td>(3.1%)</td>
<td>(3.1%)</td>
</tr>
<tr>
<td>Low Income and Low Access to a Grocery Store</td>
<td>6.8%</td>
<td>CA Counties</td>
<td>U.S. Counties</td>
<td>CA Value</td>
<td>U.S. Value</td>
<td>Prior Value</td>
</tr>
<tr>
<td>People Living 100% Above Poverty Level</td>
<td>58.6%</td>
<td>CA Counties</td>
<td>U.S. Counties</td>
<td>CA Value</td>
<td>U.S. Value</td>
<td>Prior Value</td>
</tr>
<tr>
<td>People Living Below Poverty Level</td>
<td>18.5%</td>
<td>CA Counties</td>
<td>U.S. Counties</td>
<td>CA Value</td>
<td>U.S. Value</td>
<td>Prior Value</td>
</tr>
<tr>
<td>Persons with Disability Living in Poverty (5-year)</td>
<td>28.4%</td>
<td>CA Counties</td>
<td>U.S. Counties</td>
<td>CA Value</td>
<td>U.S. Value</td>
<td>Prior Value</td>
</tr>
<tr>
<td>Students Eligible for the Free Lunch Program</td>
<td>65.8%</td>
<td>CA Counties</td>
<td>U.S. Counties</td>
<td>CA Value</td>
<td>U.S. Value</td>
<td>Prior Value</td>
</tr>
</tbody>
</table>

*http://www.healthymendocino.org/*
Priority Need – Access to Care

Intervention: **Free Mammogram Screenings** for early disease diagnosis and to improve access. AHHM offered free mammogram screenings and breast health education during Ladies Night Out events and targeted to Native American population to provide access to critical health screenings.

- Number of Community Members Served: **72**

Intervention: **Back to School Fair and Free Sports Physicals** – Hosted 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, blood sugar screenings, free haircuts and backpacks. To encourage physical activity and participation in sports and prevent injuries, we offered 398 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: **865**

Partners –

- **Willits Unified School District**

2019 Evaluation Metrics

Health / Access to Health Services

**County: Mendocino**

<table>
<thead>
<tr>
<th>Health Indicators</th>
<th>Value (2015-2016)</th>
<th>Compared To</th>
</tr>
</thead>
<tbody>
<tr>
<td>Adults Delayed or had Difficulty Obtaining Care</td>
<td>20.0%</td>
<td>CA Counties (19.3%)</td>
</tr>
<tr>
<td>Adults with Health Insurance: 18-64</td>
<td>85.3%</td>
<td>CA Counties (2014-2015)</td>
</tr>
<tr>
<td>Adults with Private Health Insurance</td>
<td>63.4%</td>
<td>CA Counties</td>
</tr>
</tbody>
</table>

[ADVENTISTHEALTH:INTERNAL]
**OUR MISSION:**
Living God's love by inspiring health, wholeness and hope.

<table>
<thead>
<tr>
<th>Category</th>
<th>2019 Data</th>
<th>CA Counties</th>
<th>CA Value (96.9%)</th>
<th>CA Trend</th>
<th>US Value (94.8%)</th>
<th>US Trend</th>
<th>US Value (96.5%)</th>
<th>US Trend</th>
<th>HP 2020 Target (100.0%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Children with Health Insurance</td>
<td>96.4%</td>
<td>CA Counties</td>
<td>CA Value (96.9%)</td>
<td>CA Trend</td>
<td>US Value (94.8%)</td>
<td>US Trend</td>
<td>US Value (96.5%)</td>
<td>US Trend</td>
<td>HP 2020 Target (100.0%)</td>
</tr>
<tr>
<td>Children with Health Insurance: 0-17</td>
<td>95.9%</td>
<td>CA Counties</td>
<td>CA Value (97.1%)</td>
<td>CA Trend</td>
<td>US Value (96.5%)</td>
<td>US Trend</td>
<td>US Value (96.5%)</td>
<td>US Trend</td>
<td>HP 2020 Target (100.0%)</td>
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<tr>
<td>Medicare Healthcare Costs</td>
<td>$7,003</td>
<td>CA Counties</td>
<td>CA Value ($9,100)</td>
<td>CA Trend</td>
<td>US Value ($9,729)</td>
<td>US Trend</td>
<td>US Value ($9,713)</td>
<td>US Trend</td>
<td>HP 2020 Target (100.0%)</td>
</tr>
<tr>
<td>Non-Physician Primary Care Provider Rate</td>
<td>103</td>
<td>CA Counties</td>
<td>CA Value (43)</td>
<td>CA Trend</td>
<td>US Value (88 in 2016)</td>
<td>US Trend</td>
<td>US Value (88 in 2016)</td>
<td>US Trend</td>
<td>HP 2020 Target (4.2%)</td>
</tr>
<tr>
<td>People Delayed or had Difficulty Obtaining Care</td>
<td>13.0% (2017-2018)</td>
<td>CA Counties</td>
<td>CA Value (10.6%)</td>
<td>CA Trend</td>
<td>Prior Value (12.4%)</td>
<td>Trend</td>
<td>HP 2020 Target (4.2%)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Persons with Private Health Insurance Only</td>
<td>34.3% (2016)</td>
<td>CA Counties</td>
<td>CA Value (54.4%)</td>
<td>CA Trend</td>
<td>US Value (69.5%)</td>
<td>US Trend</td>
<td>US Value (69.5%)</td>
<td>US Trend</td>
<td>Trend</td>
</tr>
<tr>
<td>Persons with Public Health Insurance Only</td>
<td>43.2% (2016)</td>
<td>CA Counties</td>
<td>CA Value (29.9%)</td>
<td>CA Trend</td>
<td>US Value (23.8%)</td>
<td>US Trend</td>
<td>US Value (23.8%)</td>
<td>US Trend</td>
<td>Trend</td>
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<tr>
<td>Primary Care Provider Rate</td>
<td>90</td>
<td>CA Counties</td>
<td>CA Value (78)</td>
<td>CA Trend</td>
<td>US Value (78 in 2016)</td>
<td>US Trend</td>
<td>US Value (78 in 2016)</td>
<td>US Trend</td>
<td>Trend</td>
</tr>
</tbody>
</table>

* [http://www.healthymendocino.org/](http://www.healthymendocino.org/)
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 most 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.
Community Benefit

Our community benefit work is rooted deep within our mission, with a recent recommitment of deep community engagement within each of our ministries.

We have also incorporated our community benefit work to be an extension of our care continuum. Our strategic investments in our community are focused on a more planned, proactive approach to community health. The basic issue of good stewardship is making optimal use of limited charitable funds. Defaulting to charity care in our emergency rooms for the most vulnerable is not consistent with our mission. An upstream and more proactive and strategic allocation of resources enables us to help low-income populations avoid preventable pain and suffering; in turn allowing the reallocation of funds to serve an increasing number of people experiencing health disparities.