

Adventist Health Simi Valley 2020 Community Health Plan



Our community responded to the pandemic with an outpouring of kindness and support.

The following Implementation Strategy serves as the 2020 – 2022 Community Health Plan for Adventist Health Simi Valley and is respectfully submitted to the Office of Statewide Health Planning and Development on May 28, 2021 reporting on 2020 results.

President's Message



Jennifer L. Swenson

Twenty-twenty was a year of intense challenge. It exposed our societal weaknesses and exposed the gaps we have in community health and well-being. It is now early 2021 and I believe this year will bring us more opportunities for innovation and growth as we strive to fulfill our mission, *Living God's love by inspiring health, wholeness and hope*; a mission statement I am proud to embrace.

As healthcare providers, 2020 was a time for us to step up to a dynamic challenge with ever-changing clinical protocols. We worked closely with public health and our community partners. The support we experienced from our community was, and continues to be, heartwarming. Today, over 550,000 Americans have passed away from Covid-19. This new disease was the third leading cause of death in 2020, coming in after cardiovascular disease and cancer. Covid-19 will need to be evaluated for its long-term impact on longevity, equity and overall well-being.

Our 2020 update to our Community Health Improvement Strategy demonstrates how using data and applying focus can help us develop meaningful and appropriate interventions. AHSV is fortunate to be supported by our parent company, Adventist Health, and to be working collaboratively with an extensive network in Ventura County. I am looking forward to how Adventist Health Simi Valley will continue our growth in planning and successfully completing programs that bring wholeness and well-being for all into reality.

Blessings,
Jennifer L. Swenson, President
Adventist Health Simi Valley

Executive Summary

Introduction & Purpose

Adventist Health Simi Valley is pleased to share our Community Health Implementation Strategy. This follows the development of its 2019 Community Health Needs Assessment (CHNA) in accordance with requirements in the Affordable Care Act and IRS 990 Schedule H requirements and approved by the Adventist Health Board of Directors on October 17, 2019.

Collaborative CHNA and CHIS 2019-2022

In 2019, AHSV became a chartered member of a collaboration in Ventura County, in order to create a robust CHNA. Chartered members include:

- Adventist Health Simi Valley
- Camarillo Health Care District
- Clinicas Del Camino Real, Inc.
- Community Memorial Hospital and Health System
- Ojai Valley Community Hospital
- St. John's Regional Medical Center, Dignity Health
- St. John's Pleasant Valley Hospital, Dignity Health
- Ventura County Health Care Agency Community Health Center
- Ventura County Public Health

The Ventura County Community Health Needs Assessment Collaboration (VCCHNA) produced a comprehensive CHNA in 2019. It references over 200 data sources and surveyed more than 5,000 Ventura County residents. The resulting CHNA is available here:

http://www.healthmattersinvc.org/content/sites/ventura/chnas/Ventura_CHNA_2019.pdf.

After completing the CHNA, the collaborative refreshed our charter, becoming the Ventura County Community Health Improvement Collaborative (VCCHIC). Together we published a joint CHIS which is published here:

http://www.healthmattersinvc.org/content/sites/ventura/Implementation_Strategies/PH_CHIS_Booklet_02-27-20_web.pdf

Although delayed by the unexpected challenges of 2020, AHSV and our collaborative partners are moving plans forward. During 2020 resources allocated to move our priorities forward were redirected to attend to the crisis of Covid-19. However, VCCHIC remained focused and intact. In addition to the VCCHIC 2019 CHIS plan, AHSV has other ongoing programs included at the end of this summary.

This Implementation Strategy summarizes plans for Adventist Health Simi Valley and where applicable, collaborative partners, to develop community benefit programs that address prioritized health needs identified in its 2019 CHNA.

VCCHIC Prioritized Health Needs – Planning to Address

- Health Priority #1: Aligning Cross-Sectoral Partnerships for Population Health Impact
- Health Priority #2: Improve Access to Health Services
- Health Priority #3: Address Social Needs through a Food Access Intervention
- Health Priority #4: Improve the Health and Wellbeing of Older Adults

Adventist Health Simi Valley – Local priority areas derived from previous CHNA/CHIS cycles

- Youth
- Seniors
- Access to Care & Equity
- Heart Health
- Cancer
- Substance Use & Behavioral Health

About Adventist Health Simi Valley

AHSV has 144 licensed acute inpatient beds, operates with a medical staff of 270 physicians, 945 associates and 200 volunteers. Built in 1965 and led by dedicated community physicians, the hospital has grown with it's community over the past 55 years. The population of Simi Valley is now over 125,000 but in 1965 it was closer to 30,000. To keep up with the growth, Adventist Health, AHSV and community donors have invested millions of dollars to expand the hospital. These expansions have resulted in more services and a variety of quality distinctions.

Currently, AHSV is recognized as:

- Leapfrog Grade A – Spring 2019 Hospital Safety Score
- American Heart Association Gold Plus Quality Award
- American Heart Association Target Stroke Elite Plus Honor Roll
- American Heart Association Target Type 2 Diabetes Honor Roll
- American Heart Association Lifeline STEMI Receiving Center Silver Quality Award
- Accredited Chest Pain Center with Primary PCI and Resuscitation
- Well Workplace Gold Award
- HomeCare Elite Award 2010-2019
- Blue Cross/Blue Shield Center of Distinction for total joints and spine

- Baby Friendly Designation

Volume Data in 2019

- Admissions: 7,555
- Deliveries: 472
- ER Visits: 36,992
- Surgeries: 3,307

AHSV is growing quickly as we expand our medical staff, add new technology and invest in strategies that are designed to bring well being closer to home. Access to care in this community continues to be our highest need. When we keep our community members closer to home for their medical needs it is beneficial to our entire community.

About Adventist Health

Vision

Adventist Health will be a recognized leader in mission focus, quality care and fiscal strength.

Mission Statement

Living God's love by inspiring health, wholeness and hope.

Adventist Health Includes:

- 23 hospitals with more than 3,600 beds
- 290 clinics (hospital-based, rural health and physician clinics)
- 15 home care agencies and eight hospice agencies
- Three retirement centers & one continuing care retirement community
- A workforce of 37,000 including associated, 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 all 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 healthcare 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.

Summary of Adventist Health Implementation Strategies

Implementation Strategy Design Process

Stakeholders from the 19 hospital facilities in the Adventist Health System were invited to participate in a Mission Integration Summit on September 26 and 27, 2019. During these two day-long events, participants were introduced to the 2019 Adventist Health Implementation Strategy Template. After the summit, each hospital was invited to participate in a series of technical assistance calls and consultation sessions with representatives from Adventist Health Community Integration and Conduent Healthy Communities Institute to further develop and refine their implementation strategy.

Ventura County Community Health Improvement Collaborative

Implementation Strategy Design Process

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, we hope you imagine a healthier region and work with us to find solutions across a broad range of sectors to create communities that define the well-being of people.

The purpose of the CHNA was to offer a comprehensive understanding of the health needs in Ventura County at large and specifically in Adventist Health Simi Valley’s service area. The findings guide our hospital’s planning efforts to address those needs. The CHNA and CHIS are adopted at the executive level, leadership departments, community board, mission sub-committee and an internal multi-disciplinary committee. The goal of these activities is to place the CHNA and CHIS at the center of our strategic focus.

The significant health needs were identified through an analysis of secondary data and community input. These health needs were prioritized according to a set of criteria that included severity, change over time, resources available to address the need and community readiness to support action on behalf of any health need. Secondary sources include publicly available state and nationally recognized data sources available at the zip code, county and state level. Health indicators for social and economic factors, health system, public health and prevention, and physical environment are incorporated. The top leading causes of death as well as conditions of morbidity that illustrate the communicable and chronic disease burden across Los Angeles County is included.

Data for this assessment was collected through US Bureau of Census, Nielsen Claritas, California Disease Control and Prevention, California Department of Education, United States Department of Health and Human Services, California Office of Statewide Health Planning and Development, California Department of Public Health, County Health Rankings & Roadmaps, Los Angeles Homeless Service Authority, American Heart Association, National Cancer Institute, Centers for Disease Control, World Health Organization. When feasible, health metrics have been further compared to estimates for the state or national benchmarks, such as the Healthy People 2020 objectives.

Adventist Health Simi Valley worked, in collaboration, to identify relevant key informants and topical focus groups to gather more insightful data and aid in describing the community. Key informants and focus groups were purposefully chosen to represent medically under-served, low-income, or minority populations in our community, to better direct our investments and form partnerships. The criteria listed recognize the need for a combination of information types (e.g., health indicators and primary data) as well as consideration of issues such as practicality, feasibility, and mission alignment.

For further information about the process to identify and prioritize significant health needs, please refer to the Adventist Health Simi Valley CHNA report at the following link:

<https://www.adventisthealth.org/about-us/community-benefit/>

Adventist Health Simi Valley and the Ventura County Community Health Improvement Collaborative (VCCHIC)

Implementation Strategy – 2019-2022

The implementation strategy outlined below summarizes the strategies and activities by Adventist Health Simi Valley in collaboration with VCCHIC to directly address the prioritized health needs. They include:

- **Health Need : Aligning Cross-Sectoral Partnerships for Population Health Impact**
 - Governance Structure
 - Cross Sector Prevention Model
 - Develop Financing Plan
 - Explore Data Sharing
 - Develop Performance Management and Evaluation

- **Health Need : Improve Access to Health Services**
 - Asset Mapping
 - SDoH Screening Tool Selection
 - Screening High Risk/High Need Clients
 - Workflow Modification
 - Training on Screenings and Services
 - Facilitate Community Information Exchange and Referral Platform funding

- **Health Need : Address Social Needs through Food Access Intervention**
 - Select Uniform Screening Tool
 - Develop Business Agreements with Food Access Organizations
 - Referrals for Dietary and Nutritional Counseling
 - Preventative Health Screenings
 - Develop Tailored Care Plan
 - Connect to Federal and State Food Programs

- **Health Need : Improve the Health and Wellbeing of Older Adults**
 - Caregiver Assessments and Care Planning
 - Community Partner Identification
 - Education for Caregivers
 - Integration of Caregivers into Health Systems
 - Participate in the Master Plan on Aging

The Action Plan presented below outlines in detail the individual strategies and activities Adventist Health Simi Valley will implement to address the health needs identified through the CHNA process. The following components are outlined in detail in the tables below: 1) actions the hospital intends to take to address the health needs identified in the CHNA, 2) the anticipated impact of these actions as reflected in the Process and Outcomes measures for each activity, 3) the resources the hospital plans to commit to each strategy, and 4) any planned collaboration to support the work outlined.

No hospital can address all the health needs identified in its community. Adventist Health Simi Valley is committed to serving the community by adhering to its mission, and using its skills, expertise and resources to provide a range of community benefit programs. This Implementation Strategy does not include specific plan to address the following significant health needs identified in the 2019 CHNA.

Significant Health Needs – VCCHIC NOT Planning to Address

- Reduce the Impact of Behavioral Health Issues
- Reduce the Burden of Chronic Disease

These prioritized health needs per the findings of our 2019 CHNA were not selected to be addressed by the collaborative because the VCCHIC has identified other community stakeholders who actively leading programs to address these needs, including but not limited to Ventura County Behavioral Health. The VCCHIC is committed to working on building infrastructure that will help us formalize our ability to fundraise and expand the impact of working collectively. The VCCHIC is committed to building upstream programs that are known to prevent at-risk populations from succumbing to behavioral health conditions and drivers of chronic disease.

The VCCHIC is committed to serving our communities and the county at large through our mission statement and the mission statements of all participating members. The VCCHIC partners bring our strengths, resources and expertise to design interventions that will have long-term, measurable and beneficial results. The VCCHIC is also committed to providing support and connectivity to other community partners not included in the charter but identified as experts in their areas of operation.

COVID 19 Considerations

The COVID-19 global pandemic has caused extraordinary challenges for Adventist Health hospitals and health care systems across the world including keeping front line workers safe, shortages of protective equipment, limited ICU bed space and developing testing protocols. They have also focused on helping patients and families deal with the isolation needed to stop the spread of the virus, and more recently vaccine roll out efforts.

Adventist Health, like other health care systems, had to pivot its focus to meet the most urgent healthcare needs of its community during the pandemic, as well as reassess the ability to continue with some community health strategies due public health guidelines for social distancing. Adjustments have been made to continue community health improvement efforts as possible, while ensuring the health and safety of those participating. The Strategy Action Plan Grids on the following pages reflect updated activities for each strategy.

In FY20, Adventist Health as a system took the following actions in response to the needs created or exacerbated by COVID-19:

- Adventist Health as a system directed “Community Strength Fund grants” to each hospital to support community partners’ immediate response to COVID-19
- Adventist Health as a system directed “Community Integration Catalyst” funds to each hospital to support internal new or expanded community wellbeing programming and innovation as an immediate response to COVID-19
- Began offering more virtual health care visits to keep community members safe and healthy
- Developed an online symptom tracker to help community members determine if they may have COVID-19 or some other flu type illness and what steps to take
- Partnered with MaskUp, a collaboration of 100 leading health systems representing thousands of hospitals across the U.S. joining to create messages for the betterment of the communities they serve
- Was part of a communitywide effort by the local health system to vaccinate eligible community members to help stop the spread of the virus

Adventist Health Simi Valley took these additional actions:

- Provided PPE, hand sanitizers and food items for Simi Valley Post Office and Moorpark
- Provided PPE for The Free Clinic of Simi Valley
- Provided Rapid Response Funding to Foster Youth programs and Senior/Caregiver Support programs
- Provided PPE and supplies for clients, staff and volunteers with Senior Center of Simi Valley
- Provided education materials for clients of the Senior Center of Simi Valley
- Set up donation center to facilitate donations from the public
- Distributed excess donations to community partners

How Covid-19 and the global pandemic impacted AHSV:

- Cancelled all elective and outpatient procedures
- Remote working for all associates and departments that could feasibly do so
- Students, volunteers, Cope health scholars suspended

- Activated Incident Command – Code Triage
- Immediate volume decrease through early portion of pandemic with a surge in patient volume in Q4
- Activated labor pool
- Disaster tents set up
- Mobile morgue
- Surge capacity created
- Covid-19 screening for physicians and associates
- PPE supplies and utilization
- Patient room adaptations
- Visitor policy restrictions
- Suspension of music therapy and pet therapy
- Suspension of concierge valet parking
- Unparallel financial losses
- Staff burnout and caregiver fatigue

Covid – 19 Impact on Ventura County Community Health Improvement Collaborative:

- Suspended meetings
- Virtualized meetings
- Diverted resources from the partners away from joint project to the operational needs of their sponsoring company
- Lack of overall population health resources and epidemiology support for the county

VCCHIC CHIS 2020 Outcomes

Prioritized Need #1: Aligning Cross-Sectoral Partnerships for Population Health Impact

Key Strategies

Strategy 1: Build Governance Structure

- 1.1 Develop common priorities and objectives
- 1.2 Coordinate Overarching goals and efforts
- 1.3 Define stakeholders, roles and responsibilities
- 1.4 Formalize project scope and structure

Accomplished in 2020

- Completed and signed charter
- Roster of partner organizations
- Committees for each priority area
- Sub-committees for in-depth project work

Strategy 2: Cross Sector Prevention Model

2.1 Combined Community Health Assessments

Accomplished in 2020

- CHNA 2019 adoption and promotion
 - Printed copies distributed to internal and stakeholders
 - Presented to Simi Valley City Council
 - Presented to CBO partners
- Stakeholder Asset Mapping

Strategy 3: Develop Financing Plan

3.1 Identify initial capital and innovative long-term funding streams

Accomplished in 2020

- Applied for RWJF grant
- Backbone organization exploratory meetings
- Working with HASC and CLC for backbone development in 2021

Strategy 4: Explore Data Sharing Strategy

4.1 Consider data availability and explore methods for health information exchange (HIE)

Accomplished in 2020

- Gold Coast Health Plan signed with Manifest MedEx
- Adventist Health signed with Manifest MedEx
- Other partners are in process

Strategy 5: Develop Performance Management Evaluation

5.1 Create performance feedback loops

Accomplished in 2020

- Delayed due to Covid – 19

Prioritized Need #2: Improve Access to Health Services

Key Activities

- 1.1 Identify non-traditional partners through asset mapping exercises
- 1.2 Identification of appropriate SDoH screening tool

- 1.3 SDoH Screen tool deployment
- 1.4 Workflow modifications as needed per provider practices and CBOs needs
- 1.5 Staff training on screening and service referrals
- 1.6 Facilitate Community Information Exchange (CIE)

Accomplished in 2020

- Facilitated multiple CIE meetings
- Identification of non-traditional partners
- SDoH tool selection
- Adventist Health Physicians Network utilization of SDoH screening questions

Prioritized Need #3: Address Social Needs through a Food Access Intervention

Key Activities

- 1.1 Select uniform screening tool for providers, practices and hospitals
- 1.2 Business agreement template for screening partnerships
- 1.3 Client referral program
- 1.4 Clinical dietary counseling referrals for chronic disease and prevention
- 1.5 Clinical care plan template for tailored care plans
- 1.6 Connect screening and referrals to federal and state food assistance programs, CBO resources

Accomplished in 2020

- Identified and selected Hunger Vital Signs screening tool
- Other activities postponed due to Covid-19

Prioritized Need #4: Improve the Health and Well-being of Older Adults

Key Activities

- 1.1 Caregiver Assessments and Care Planning
- 1.2 Community Partner Identification
- 1.3 Education for Caregivers
- 1.4 Integration into Health Systems

Accomplished in 2020

- VCCF Caregiver Support Program Grant awardees include AHSV, Dignity Health St. John's and Community Memorial Hospital & Health System
- Secured California State University Channel Islands to provide academic evaluation of outcomes
- AHSV launched caregiver support program

- Participated in collaborative committee meetings
- Funded Powerful Tools for Caregivers within collaborative
- Program severely impacted by Covid-19

Adventist Health Simi Valley

Community Specific CHIS Outcomes

Focus on Youth:

- Empathy training programs at SVUSD and MPUSD
- Personal trainers at Simi Valley and Moorpark high schools
- Healthy Kids Fun Zones – Cancelled indefinitely due to Covid-19
- Every 15 Minutes Host Location – Cancelled indefinitely due to Covid-19
- Foster Youth Symposium – Postponed due to Covid-19
- Human Trafficking Exhibit and Education – Hosted exhibit and community event in January 2020; remaining activities planned were suspended due to Covid-19
- Family Education Classes: Childbirth, breastfeeding, siblings
- Simi Valley Education Foundation Enhancement Grant Funding
- Moorpark Education Foundation Program Grant Funding
- Boys & Girls Club of Simi Valley and Moorpark Funding of Food Access Program

Focus on Seniors:

- Caregiver support program
- Senior Center collaborations
- Senior Concerns collaborations
- Disaster readiness for isolated seniors
- Parks & Recreations collaborations

Focus on Heart Health

- American Heart & Stroke Association Partnership
 - Go Red for Women
 - Heart Walk
 - Wellness Block Parties
- Blood pressure awareness campaign
- Heart disease prevention education
- 2-step CPR training

Focus on Substance Use and Mental Health

- Applied for a CalBridge grant and received the award for \$100,000 to begin a Substance Use Navigator program. Program begins in 2021.
- Participation in Ventura County Behavioral Health mental health task force – suspended due to Covid-19

Focus on Cancer

- Support groups – cancelled due to Covid-19
- Cancer care navigation program
- Festival of Trees – grants for local cancer patients

Focus on Access to Care and Equity

- Clinical support for The Free Clinic of Simi Valley
- Homeless recuperative care funding
- Simi Valley homeless task force participation

Adventist Health Simi Valley Implementation Strategy Action Plan

**PRIORITY HEALTH NEED:
ALIGNING CROSS-SECTORAL PARTNERSHIPS FOR POPULATION HEALTH IMPACT**

GOAL STATEMENT: TO DEVELOP A SUSTAINABLE COLLABORATIVE STRUCTURE OF HOSPITAL AND COMMUNITY PARTNERSHIP FOR LONG TERM IMPLEMENTATION OF CHOSEN COMMUNITY HEALTH AND POPULATIONS HEALTH STRATEGIES.

Mission Alignment: Well-being of People

Strategy 4: Health Information Exchange in Ventura County

Programs/Activities	Process Measures	Results: Year 1	Short Term Measures	Results: Year 2	Medium Term Measures	Results: Year 3
Data Sharing	Capacity Evaluate and recommend vendor for health information exchange (HIE) Operational criteria; IT security	Manifest MedEx selected; Adopted by AH, GCHP and VCPH	Adopted by Gold Coast Health plan and Adventist Health Simi Valley		EHR workflows	

Source of Data:

- Data sharing readiness assessment of partners; Report on current initiatives already in progress; EHR workflows; Data-sharing agreements

Target Population(s):

- Ventura County at large; high-risk hospital utilizers

Adventist Health Resources: (financial, staff, supplies, in-kind etc.)

- AHSV IT and CWB staff; AH IT and Cerner staff; Education and implementation teams

Collaboration Partners: (place a "*" by the lead organization if other than Adventist Health)

- VCCHIC members

CBISA Category: (A - Community Health Improvement; E - Cash and In-Kind; F - Community Building; G - Community Benefit Operations)

A – Community Health Improvement

Strategy Results 2020:

Despite the significant impact of Covid-19 on the efforts of the VCCHIC, we were able to accomplish getting Manifest MedEx selected as our HIE provider. Gold Coast Health Plan, Ventura County Public Health and Adventist Health all signed the agreement and are working independently to get their interoperability functionality established. Other VCCHIC partners are in the process of evaluating Manifest MedEX. The HIE has to go through each organizations IT/Security clearance process and also go through various executive approvals. We anticipate the functionality of the HIE to improve how the health care providers, including clinics and physician offices, can better manage the care of their shared patients. We appreciate the Hospital Association of Southern California for advocating for this project.

PRIORITY HEALTH NEED: ALIGNING CROSS-SECTORAL PARTNERSHIPS FOR POPULATION HEALTH IMPACT

GOAL STATEMENT: TO DEVELOP A SUSTAINABLE COLLABORATIVE STRUCTURE OF HOSPITAL AND COMMUNITY PARTNERSHIPS FOR LONG TERM IMPLEMENTATION OF CHOSEN COMMUNITY HEALTH AND POPULATION HEALTH STRATEGIES

Mission Alignment: Well-Being

Strategy 1: Build Governance Structure

Programs/Activities	Process Measures	Results: Year 1	Short Term Measures	Results: Year 2	Medium Term Measures	Results: Year 3
Develop common priorities and objectives	Written Mission, Vision and Goals statement	Revised and adopted Charter; CHIS goals	Support for the VCCHIC structure from each participating organization		Memoranda of Understanding (MOU) agreements	

Source of Data:

- Chartered partner reports; Meeting minutes; County action plans; VCPH

Target Population(s):

- Ventura County at large; high-risk populations; high utilizers

Adventist Health Resources: (financial, staff, supplies, in-kind etc.)

- CWB director involvement; AHSV executive oversight; AH compliance reviews;

Collaboration Partners: (place a "*" by the lead organization if other than Adventist Health)

- All VCCHIC partners

CBISA Category: (A - Community Health Improvement; E - Cash and In-Kind; F - Community Building; G - Community Benefit Operations)

- A – Community Health Improvement**

Strategy Results 2020:

The VCCHIC had a 10-month interruption in our cadence of monthly group meetings and bi-monthly Sub-committee meetings due to Covid-19. VCPH and each hospital organization had to redirect staff and resources to address the impact of the pandemic on our local communities.

PRIORITY HEALTH NEED: IMPROVE ACCESS TO HEALTH SERVICES

GOAL STATEMENT: To improve access to health services by addressing social needs of high risk/high need clients to reduce presentable emergency room and hospital utilization.

Mission Alignment: Well-being of People

Strategy 1: From 2019 to 2022, VCCHIC will build a Community Information Exchange (CIE) which can be adopted by participated hospitals and other community-based organization to increase intra- and inter-agency referrals and tracking of high risk/high need clients.

Programs /Activities	Process Measures	Results: Year 1	Short Term Measures	Results: Year 2	Medium Term Measures	Results: Year 3
Identify non-traditional partners through assets mapping and exercises	Number of partners; number of populations covered; number of census tracts covered	Participated in numerous demonstrations of UniteUs; Exploring 211 options	Curate interested and committed partners; Create governance for CIE; Complete partnership agreements		Governance structure finalized; funding sources identified; platform selected; contracts completed	

Target Population(s):

- Ventura County at large; at-risk populations; high utilizers

Adventist Health Resources: (financial, staff, supplies, in-kind etc.)
 AHSV CWB director time; AHSV executive and compliance time and reviews; AH oversight

Collaboration Partners: (place a "*" by the lead organization if other than Adventist Health)

- All VCCHIC partners; non-chartered and non-traditional care partners

CBISA Category: (A - Community Health Improvement; E - Cash and In-Kind; F - Community Building; G - Community Benefit Operations)

- A- Community Health Improvement

Strategy Results 2020:

Though delayed by impact of the pandemic, the VCCHIC was able to convene multiple virtual meetings in Q3 and Q4 of 2020 to evaluate the functionality of UniteUs as a CIE platform. The collaborative had not finalized our position on the CIE platform at the end of 2020. The collaborative has escalated this project due to a funding opportunity and expect to make significant progress in 2021.

PRIORITY HEALTH NEED: ADDRESS SOCIAL NEEDS THROUGH A FOOD ACCESS INTERVENTION

GOAL STATEMENT: To address food insecurity and reduce hospitalizations and health care costs in medically-complex populations by increasing access to appropriate nutrition.

Mission Alignment: Well-being of People

Strategy 1: From 2019 to 2022, the VCCHIC will reduce food insecurity by 2% from baseline (pre-Covid 19 data) by screening for food insecurity at provider practices and hospitals and referring high need/high risk clients to food and nutrition access programs, resources and professionals.

Programs/ Activities	Process Measures	Results: Year 1	Short Term Measures	Results: Year 2	Medium Term Measures	Results: Year 3
Select a uniform screening tool	Number of food insecure clients identified; Number of referrals	Hunger Vital Signs screening tool selected	Reduced stigma, increased connections to food resources		Reduced stigma, Increased connectivity to food and nutrition resources and education services	
Develop Business Agreements with food access organization	Number of identified partners and agreements executed;	Food distribution organization listed; schedule of COVID-19 response drive through pantries	Number of partnerships signed on to the referral resources website and collateral pieces; Number of participating organizations		Closed loop referrals and outcomes	

Source of Data:

- VCCHIC partners

Target Population(s):

- Ventura County at large; high-risk populations; high-utilizers

Adventist Health Resources: (financial, staff, supplies, in-kind etc.)

- AHSV CWB director time; AHSV clinical workflow; AHSV education

Collaboration Partners: (place a "*" by the lead organization if other than Adventist Health)

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CBISA Category: (A - Community Health Improvement; E - Cash and In-Kind; F - Community Building; G - Community Benefit Operations)

- Community Health Improvement

Strategy Results 2020:

This portion of our CHIS is delayed due to Covid-19 but we made progress on the selection of the screening tool and will address our need to adjust our metrics to include the new landscape and data points after Covid-19.

PRIORITY HEALTH NEED: IMPROVE THE HEALTH AND WELLBING OF OLDER ADULTS

GOAL STATEMENT: TO IMPLEMENT A MULTIPLE HOSPITAL-BASED INTERVENTION WITH THE ASSISTANCE OF CBOS THAT WILL ESTABLISH A CONTINUUM OF CARE AND REDUCE READMISSIONS FOR HIGH-RISK MEDICARE BENEFICIARIES

Mission Alignment: Well-being of People

Strategy 1: From 2019-2022, VCCHIC will implement a Community Based Care Transition Program per Section 3026 of the Affordable Care Act to support medically fragile 65+ year old adults and their caregiver after an acute care hospitalization to reduce hospital re-admissions and improve the provision of value-based services.

Programs/A ctivities	Process Measures	Results: Year 1	Short Term Measures	Results: Year 2	Medium Term Measures	Results: Year 3
Caregiver and Patient Navigation	Caregiver Assessments	Number of caregivers contacted by navigator. Number of caregivers enrolled in the program	Increased confidence and score on Zarit Burden Scale; Improve care outcomes for patient		Caregiver integration into care continuum; caregivers equipped for medically complex care in the home; reduction in hospital overutilization	
Caregiver Support Program	Community partners identified	Creation of network of community partners	Develop feedback loop for completed referrals; create committee for managing program creation, alignment and outcomes		Caregiver Navigator Program Database	

Source of Data:

Partner hospitals navigation programs; CSUCI validator; Zarit Burden Scale survey results; other measures

Target Population(s): Medicare; High-risk caregiver burnout candidates

Adventist Health Resources: (financial, staff, supplies, in-kind etc.)

AHSV CWB director time; Caregiver support program staff; education materials; enrollment supplies; caregiver gifts; funding of Powerful Tools for Caregivers

Collaboration Partners: (place a "*" by the lead organization if other than Adventist Health)
 VCCHIC; HASC; VCCF; Dignity St. John's; Community Memorial Health System; California State University Channel Islands

CBISA Category: (A - Community Health Improvement; E - Cash and In-Kind; F - Community Building; G - Community Benefit Operations)

- **A – Community Health Improvement**

Strategy Results 2020:

AHSV hired a care transition's nurse to build the care transitions team that includes the caregiver support navigator. The program was severely impacted when Covid-19 caused the hospital to restrict all visitation and eliminate any non-clinically necessary in person visits with care management and care navigators. The dramatic impact of our response to the pandemic has delayed our program but we have hired staff to the care transitions program and will develop a new workplan for 2021 with adjusted metrics based on the impact of the pandemic. This program is more needed than ever.

At-Risk Populations:

Adventist Health Simi Valley + Community Partners During Covid-19

The global pandemic put all community events, in-person education programs, support groups, workshops, seminars and other community building activities on hold. As a result, AHSV redirected resources intended for these activities to supporting our CBO partners with financial grants to help them pivot from events to emergency operations within the community. Here are some examples:

- Distributed over 500,000 pieces of PPE to the Simi Valley Post Office, Moorpark Post Office, Free Clinic of Simi Valley, Samaritan Center of Simi Valley, Simi Valley Unified School District and Moorpark Unified School District. The Simi Valley Chamber of Commerce partnered with AHSV to distribute KN95 masks to the community free of charge, helping our business and families.
- Provided rapid response funds, PPE, sanitizers and education materials to Simi Valley Senior Center and Senior Concerns, our community partners who provided food and household items to seniors.
- Invested in foster youth non-profit organizations to provide cash for immediate relief of urgently needed items for
- Kicked off 2020 with a Human Trafficking awareness event and exhibit.
- Continued our work with the Safe Harbor program providing a free location for services in East Ventura County.

The Adventist Health + Blue Zones Solution

Our desire to improve community well-being grew out of not only our mission at Adventist Health – to live God’s love by inspiring health, wholeness and hope – but also by the sheer need as seen across our system of 23 hospitals. Overwhelmingly, we see diseases of despair including suicide, substance abuse, mental health and chronic illnesses plaguing the communities in which we have a significant presence in. That is why we have focused our work around addressing behavior and the systems keeping the most vulnerable people in cycles of poverty and high utilization.

In an effort to heal these communities, we have strategically invested in our communities by partnering with national leaders in community well-being. We believe the power of community transformation lies in the hands of the community. Our solution for transformation is to create a sustainable model of well-being that measurably impacts the well-being of people, well-being of places and equity.

2020 saw the acquisition of Blue Zones by Adventist Health as the first step toward reaching that goal. By partnering with Blue Zones, we are able to gain ground in shifting the balance from healthcare – treating people once they are ill – to transformative well-being- changing the way communities live, work and play. Blue Zones widens our impact from only reaching our hospitals’ communities in four states to a global mission practice.

Community Benefit & Economic Value for Prior Year

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.

The economic value of all community benefit is reported at cost. Patient financial assistance (charity care) reported here is as reported to the Office of Statewide Health Planning and Development in Hospital Annual Financial Disclosure Reports, as required by Assembly Bill 204. The community benefit of Charity Care, Medicaid and other means-tested programs is calculated using a cost-to-charge ratio to determine costs, minus revenue received for providing that care. Other net community benefit expenses are calculated using a cost accounting methodology. Restricted offsetting revenue for a given activity, where applicable, is subtracted from total expenses to determine net benefit in dollars.