

## **Adventist Health Lodi Memorial 2020 Community Health Implementation Strategy**



## Executive Summary

### Introduction & Purpose

Adventist Health Lodi Memorial is pleased to share its 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.

After a thorough review of the health status in our community through the community health needs assessment (CHNA), we identified areas that we could address using our resources, expertise and community partners. Through these actions and relationships, we aim to empower our community and fulfill our mission of “Living God’s love by inspiring health, wholeness and hope.”

The results of the CHNA guided this creation of this document and aided us in how we could best provide for our community and the vulnerable among us. This Implementation Strategy summarizes the plans for Adventist Health Lodi Memorial to develop and collaborate on community benefit programs that address prioritized health needs identified in its 2019 CHNA. Adventist Health Lodi Memorial has adopted the following priority areas for our community health investments.

#### Prioritized Health Needs – Planning to Address

- [Mental Health](#)
- [Economic Security](#)
- [Obesity/Healthy Eating and Active Living \(HEAL\)/Diabetes](#)

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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 Adventist Health Lodi Memorial service area and guide the hospital's planning efforts to address those needs.

The significant health needs were identified through an analysis of secondary data and community input. These health needs were prioritized according to the following criteria:

- It fits the definition of a “health need” as described above.
- It was confirmed by multiple data sources (i.e., identified in both secondary and primary data).
- Indicator(s) related to the health need performed poorly against a defined benchmark (e.g., state average).
- It was chosen as a community priority. Prioritization was based on the frequency with which key informants and focus groups mentioned the need. The final list included only those that at least three key informants and focus groups identified as a need.

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

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

## Adventist Health Lodi Memorial and Adventist Health

Adventist Health Lodi 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.

### 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 facilities Include:

- 21 hospitals with more than 3,284 beds
- More than 273 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 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 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 this two day-long event, 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 Health Communities Institute to further develop and refine their implementation strategy.

### Adventist Health Lodi Memorial Implementation Strategy

The implementation strategy outlined below summarizes the strategies and activities by Adventist Health Lodi Memorial to directly address the prioritized health needs. They include:

- **Health Need 1: Mental Health**
  - Applying for behavioral health grant, which if awarded will provide a behavioral health professional in the emergency department.
  - Child Abuse Prevention Council (CAPC) partnership to address patient ACEs
- **Health Need 2: Economic Security**
  - Partnership with HealthForce Partners
  - Support Healthy Lodi Initiative through our work with the American Heart Association
- **Health Need 3: Obesity/Healthy Eating and Active Living (HEAL)/Diabetes**
  - Free health education classes offered to the community
  - Help all ages get more physical activity, including programs that meet language/culture needs.

Under the health need of economic security, you will note, that AHLM is collaborating with partners to improve career pathways and prepare skilled workers to meet the demand of healthcare organizations. Additionally, we are trying to improve workplace health in our local businesses. When employees are healthy, absenteeism decreases, productivity increases, and both employer and employee benefit. These initiatives can be indirectly linked to homelessness. If we create opportunities for our students to succeed and prepare them to meet the needs of the workforce, and improve the health and well-being of our employers, then we are setting our community up for economic stability. Additionally, AHLM has donated funds to organizations such as Lodi House and the Salvation Army, two organizations that provide shelter and resources for individuals in need.

The Action Plan presented below outlines in detail the individual strategies and activities Adventist Health Lodi Memorial 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 Lodi Memorial 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 – NOT Planning to Address**

- Violence/Injury Prevention: Need is being addressed by others
- Access to Care – Need is being addressed by others
- Substance Abuse/Tobacco: Need is currently being addressed by others, however, if we are awarded the Behavioral Health Pilot Project grant, we will be able to address this need through hiring a Substance Use Navigator
- Asthma: AHLM does not have the resources necessary at this time to address this need
- Oral Health: Need is being addressed by others
- Climate and Health: Hospital does not have expertise to effectively address the need

## Adventist Health Lodi Memorial Implementation Strategy Action Plan

### PRIORITY HEALTH NEED: MENTAL HEALTH

### GOAL STATEMENT: IMPROVE TRAUMA INFORMED CARE BY CREATING AWARENESS OF TRAUMA AND PROVIDING OR CONNECTING OUR PATIENTS WITH THE PROPER RESOURCES TO ADDRESS TRAUMA.

**Mission Alignment: (Well-being of People; Well-being of Places; Equity)** Well being of people

**Strategy 1.1 Implement ACEs screenings with parents of newborns to create awareness of trauma and then connect patients to the proper resources**

**Strategy 1.2 Hire a substance use navigator in our emergency department**

Programs/ Activities	Process Measures	Results: Year 1	Short Term Outcomes	Results: Year 2	Medium Term Outcomes	Results: Year 3
Activity 1.1 Grant Application	Behavioral Health Pilot Project grant application through the Department of Health Care Services		Being awarded the grant  # of patients given buprenorphine in ED  # of patients who received buprenorphine Rx at discharge  # of patients who accepted referrals for ongoing MAT as outpatient  # of follow up appointments offered to patients within 72 hours		Hire a Substance Use Navigator with grant funds prior to July 1, 2021  # of patients that followed up with their MAT appointment in outpatient clinic within 30 days of having been discharged from the ED  # of post-ED visits for 3 months  # of total buprenorphine dose given in the ED	
Activity 1.2 ACE's Screenings	Potential partnership with Child Abuse Prevention Council (CAPC) to address Adverse Childhood		# of parents with newborns that get ACEs screening by AHLM clinic providers		# of parents with newborns that are referred to CAPC by AHLM clinic	

PRIORITY HEALTH NEED: MENTAL HEALTH						
	Experiences (ACEs) in parents with newborns				provider for follow-up	
<b>Source of Data:</b> <ul style="list-style-type: none"> <li>AHLM Clinics &amp; ED</li> </ul>						
<b>Target Population(s):</b> High risk, individuals with substance use disorders, and parents with newborns						
<b>Adventist Health Resources:</b> (financial, staff, supplies, in-kind etc.) <ul style="list-style-type: none"> <li>Financial, staff, supplies, in-kind,</li> </ul>						
<b>Collaboration Partners:</b> (place a "*" by the lead organization if other than Adventist Health) <ul style="list-style-type: none"> <li>Child Abuse Prevention Council, potentially the California Bridge Program if awarded the BHPP grant</li> </ul>						
<b>CBISA Category:</b> (A - Community Health Improvement; E - Cash and In-Kind; F - Community Building; G - Community Benefit Operations) F- Community Building						

**PRIORITY HEALTH NEED: ECONOMIC SECURITY**

**GOAL STATEMENT: IMPROVE THE ECONOMIC SECURITY IN OUR COUNTY BY IMPROVING CAREER OPPORTUNITIES FOR OUR RESIDENTS, INCREASING THE SUPPLY OF QUALIFIED WORKERS TO MEET THE NEEDS OF THE HEALTHCARE INDUSTRY, AND IMPROVE THE OVERALL HEALTH OF OUR LOCAL BUSINESSES.**

**Mission Alignment: (Well-being of People; Well-being of Places; Equity) Well-being of people, Equity**

**Strategy 1.1** AHLM has partnered with HealthForce Partners to improve career pathway opportunities for community residents and to increase the supply of skilled workers to meet the needs of a dynamic healthcare industry in the Northern San Joaquin Valley.

**Strategy 1.2** AHLM is also collaborating with the American Heart Association and the Lodi Chamber of Commerce’s Health Value Action Team to provide our local businesses with a nationally successful program, the Workplace Health Solutions. The program will offer local businesses a suite of science-based, evidence-informed tools and services to help build a workplace culture of health.

<b>Programs/ Activities</b>	<b>Process Measures</b>	<b>Results: Year 1</b>	<b>Short Term Outcomes</b>	<b>Results: Year 2</b>	<b>Medium Term Outcomes</b>	<b>Results: Year 3</b>
Activity 1.1 Participation in the HOPE pilot program	# of participants enrolled in the Helping Our People Elevate (HOPE) pilot program		# of participants that successfully complete the program		# employed in a new position	
Activity 1.2 Health Careers Academy	# of high school students that graduate from Health Careers Academy		# of students that enter the ADN program		# of ADN graduates that complete student externs at AHLM	
Activity 1.3 Partnership with American Health Association	# of employers recruited for the AHA’s Workplace Health Solutions		Train at least 10 champions, one from each organization		Self-assessed health state of organization  % Decrease in employee absenteeism	

**Source of Data:**

- AHLM, HealthForce Partners, the American Heart Association

**Target Population(s):**

- Incumbent workers, low income, local businesses

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

- Financial, staff

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

- HealthForce Partners, the American Heart Association, the Lodi Chamber of Commerce

**PRIORITY HEALTH NEED: ECONOMIC SECURITY**

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

Category B – Health Professions Education and F- Community Building

**PRIORITY HEALTH NEED: OBESITY/HEALTHY EATING AND ACTIVE LIVING (HEAL)/DIABETES**

**GOAL STATEMENT: INCREASE PHYSICAL ACTIVITY FOR ALL AGES AND ESTABLISH PROGRAMS IN HIGH RISK NEIGHBORHOODS**

**Mission Alignment: (Well-being of People; Well-being of Places; Equity) Well being of people, Well being of places**

**Strategy 1: Engage businesses and community organizations to improve facilities and offer programs for physical activity**

<b>Programs/ Activities</b>	<b>Process Measures</b>	<b>Results: Year 1</b>	<b>Short Term Outcomes</b>	<b>Results: Year 2</b>	<b>Medium Term Outcomes</b>	<b>Results: Year 3</b>
Activity 1.1 Convene a Summit in 2020 to encourage adoption of parks	Engage 40 partners  Survey at least 50 residents living near parks we plan to improve to assess their utilization and provide baseline data		# of partners who adopt a park  # of park improvements		Increase in park utilization. Park utilization will be evaluated by surveying residents living by improved parks to assess their use.	
Activity 1.2 Healthy nutrition education classes	# of classes # of participants		Increased awareness of healthy nutrition		Self-assessed healthier food choices	

**Source of Data:**

- Parks and Recreation; Participant surveys
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**Target Population(s):**

- Low income, high risk

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

- Financial, staff, supplies, in-kind
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**Collaboration Partners:** (place a "\*" by the lead organization if other than Adventist Health)

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

- Category A

In addition to the initiatives mentioned above, AHLM also plans to continue to participate in events, health fairs and sponsorships related to our health priorities.

The 2019 Community Health Needs Assessment (CHNA) addressed the top 10 priority needs in SJC. Obesity, healthy eating/active living and diabetes was defined as one of the top three most pressing priorities. As part of the CHNA county collaborative team, we distributed surveys to community members in both Spanish and English. The survey results indicated that the community wishes to address physical activity by helping all ages get more physical activity, including programs that meet language/culture needs.

At AHLM we want to continue our outreach efforts in the community by partnering with San Joaquin County Public Health Services to provide our Zumba/nutrition classes and continue working with our CHNA collaborative team to improve physical activity.

The CHNA collaborative team will work on partnering with city officials, parks and recreation, faith-based organizations, and any other interested parties to activate, beautify, and increase safety of parks, in what are considered priority neighborhoods as defined by the CHNA.

Furthermore, we plan on continuing our diabetes prevention and self-management education free of charge to our community members. These classes include Diabetes Among Friends and Healthy Choices.

Diabetes Among Friends is a four-week class series, which runs from 5:30-7:30 p.m.

Topics covered: Getting to Know Diabetes, Healthy Eating, Healthy Coping and Physical Activity, Diabetes Medications and Staying Healthy with Diabetes.

Healthy Choices meets once a month. Each class is designed to educate and provide the skills to support sustainable, health-improving behavior change. Our team of physicians, nurses, dietitians and health coaches offer lectures, interactive workshops and health coaching. Some of the topics will include:

- Tips to improve weight control
- Disease prevention and management including:
  - High blood pressure
  - High cholesterol
  - Diabetes
  - Heart disease
  - Healthy Cooking 101: cooking demonstrations, healthy meals, sweets and holiday recipes
  - Nutrition education, label reading and tips for eating out

- Stress management

Other efforts include blood pressure and blood glucose screenings. In 2019 blood glucose and blood pressure screenings were held at the Lodi Chamber of Commerce's Multi-cultural Bazaar and Walk For the Health of It events. The goal is to screen at these two events in 2020, and work on getting volunteers to screen at other community related events such as Festa Italiana, The Heart Walk, and the Stockton Walk to End Alzheimer's, which are events sponsored by AHLM.

AHLM will also continue to provide health education/disease prevention education to our community at events such as

- Festa Italiana
- Lodi Chamber's Multi-Cultural Bazaar
- AHA Heart Walk
- Stockton Walk to End Alzheimer's
- Walk for The Health of It
- Galt Market Health
- Nutrition, Health, & Safety Fair at Westwood Elementary School
- LUSD Nutrition
- Heritage Elementary School Community Event
- Dancing for Health

## Connecting Strategy and Community Health

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.

Community well-being is not just the overall health of a population but also includes the distribution of health equity. 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 community 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 care continuum

Adventist Health is on a bold journey to establish sustainable significance with a vibrant mission of living God's love by inspiring health, wholeness and hope. We will advocate for and lead change in healthcare and social policy to benefit the under privileged and the disenfranchised in the diverse communities to which we have been called.

Together we will create lasting impact in people's whole lives and affect profound improvement in the well-being of the entire community.