Adventist Health Sonora
2022 Community Health Plan

The following Implementation Strategy serves as the 2020 – 2022 Community Health Plan for Adventist Health Sonora and is respectfully submitted to the Office of Statewide Health Planning and Development on May 19, 2023 reporting on 2022 results.
Executive Summary

Introduction & Purpose
Adventist Health Sonora 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 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 the 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 Sonora to develop and collaborate on community-benefit programs that address prioritized health needs identified in its 2019 CHNA. Adventist Health Sonora has adopted the following priority areas for our community health investments.

Prioritized Health Needs – Planning to Address

1. Health Priority #1: Access to Health Care
2. Health Priority #2: Mental and Behavioral Health
3. Health Priority #3: Housing and Homelessness
   1. The County of Tuolumne has taken the lead in providing initiatives, services and resources in addressing this community need; therefore, Adventist Health Sonora is no longer planning to address this directly. However, AHSR will continue to provide support and resources as appropriate.
4. Health Priority #4: Chronic Disease

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 Sonora’s service area and guide the 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 a set of criteria that included primary and secondary data sources. 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 Calaveras and Tuolumne counties are included. A significant portion of the data for this assessment was collected through a custom report generated through CARES Engagement Network CHNA (https://engagementnetwork.org/assessment/). Other sources include California Department of Public Health, County Health Rankings & Roadmaps, and California Environmental Protection Agency’s Office of Environmental Health Hazard Assessment. 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 Sonora worked 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. On August 26, 2019, HC2 Strategies, Inc. facilitated a strategy meeting with the 2019 Community Health Needs Assessment Steering Committee to review the results of the CHNA and determine the top four priority needs that the Adventist Health Sonora will address over the next three years. To aid in determining the priority health needs, the 2019 Community Health Needs Assessment Steering Committee agreed on the criteria considered when deciding. 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 Adventist Health Sonora CHNA report at the following link:

https://www.adventisthealth.org/about-us/community-benefit/
Adventist Health Sonora and Adventist Health

Adventist Health Sonora 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 Includes:

- 23 hospitals with more than 3,393 beds
- 370 clinics (hospital-based, rural health and physician clinics)
- 14 home care agencies and eight hospice agencies
- 3 retirement centers & 1 continuing care retirement community
- A workforce of 37,000 including medical staff physicians, allied health professionals and support services

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 21 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 Health Communities Institute to further develop and refine their implementation strategy.

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

1. **Health Need 1: Access to Health Care**
   - Screenings and School-Based Sports Physicals
   - Tuolumne County Health Fair
   - Life Hope Centers
   - Physician Recruiting

2. **Health Need 2: Mental and Behavioral Health**
   - Opioid Safety Coalition
   - Addiction Therapy Clinic
   - Prescription Drug Take-Back Days
   - Drug Store Project
   - Mental Health First Aid (MHFA) Trainings
   - TeenWorks Mentoring
   - Spiritual Roads

3. **Health Need 3: Housing and Homelessness**
   - (See Narrative)

4. **Health Need 4: Chronic Disease**
   - Freedom from Smoking Classes
   - Better Breathers Club
   - Pulmonary Rehabilitation Phase 3
   - Heart Walk
   - Ladies Night Out

The Action Plan presented below outlines in detail the individual strategies and activities Adventist Health Sonora 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 Sonora 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 a specific plan to address the following significant health needs identified in the 2019 CHNA.

**Significant Health Needs – NOT Planning to Address**

1. Poverty: Adventist Health Sonora will not be addressing poverty directly as many aspects of poverty will be addressed in our current CHNA priorities.
COVID 19 Considerations

The COVID-19 global pandemic has caused extraordinary challenges for Adventist Health hospitals and healthcare 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 healthcare 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 to 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.

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

1. Began offering more virtual healthcare visits to keep community members safe and healthy
2. 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
3. Was part of a community-wide effort by the local health system to vaccinate eligible community members to help stop the spread of the virus

Additionally, Adventist Health Sonora took the following steps:

1. Worked within CDPH and CDC guidelines to create processes for screening staff, patients and visitors and also developed ways for families to stay connected with their loved ones who were being treated in our facilities.
2. Provided outpatient monoclonal antibody treatments for COVID-positive patients at our infusion center, using dedicated entrances and spaces to keep non-COVID patients safe.
3. Established processes for regularly testing staff and providing COVID tests for inpatients, surgery patients and symptomatic community members.
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 hospitals. Overwhelmingly, we see issues related to health risk behaviors, mental health and chronic illnesses throughout the communities we serve. That is why we have focused our work around addressing behavior and the systems preventing our communities from achieving optimal health.

In 2020, Adventist Health acquired Blue Zones as a step toward reaching our solution. By partnering with Blue Zones, we will be able to gain ground in shifting the balance from healthcare—treating people once they are ill—to transformative health and wholeness—changing the way communities live, work and play.

Across the globe lie blue zones areas—places where people are living vibrant, active lives well into their hundreds at an astonishing rate—and with higher rates of well-being. Attaining optimal well-being means that our physical, emotional, and social health is thriving. Blue Zones Project works with communities to make sustainable changes to their environment, policies, and social networks to support healthy behaviors. Instead of a focus on individual behavior change, it is an upstream solution focused on making healthy options easy in all the places people spend most of their time. Blue Zones Project is committed to measurably improving the well-being of community residents and through their proven programs, tools and resources, utilizes rigorous metrics to inform strategies and track progress throughout the life of the project. This includes well-being data, community-wide metrics, sector-level progress and outcome metrics, transforming community well-being by making changes to environment, policy, worksites and social networks that create healthy and equitable opportunities for all.

On April 9, 2022, Sonora Adventist Health proudly launched Blue Zones Project Tuolumne County (BZPTC). The BZPTC team wakes up each morning focused on partnering and collaborating with community leaders and organizations active in the sectors of built environment, education, economic and workforce development, mental and physical well-being, policy and public health. Together the BZPTC team and sector leaders develop a community Blueprint that strategically aligns and leverages the actions and resources of the sectors where we live, learn, work and play to help advance the efforts around the community's biggest Social Determinant of Health challenges while connecting them to Health-Related Social Needs organizations.

Equity is a strategic priority woven throughout the Blueprint and programs. Policies and initiatives are developed in a way that honors the local culture that is focused on reaching out to all populations. Each year BZPTC sector leads come together to evaluate and update the Blueprint to ensure community alignment.
# Adventist Health Sonora Implementation Strategy Action Plan

## PRIORITY HEALTH NEED: ACCESS TO CARE

## GOAL STATEMENT: INCREASE ACCESS TO LOCAL HEALTH CARE THROUGH AN INCREASED NUMBER OF PROVIDERS AND REMOVING BARRIERS TO MEDICAL CARE.

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

## Strategy 1: Increase number of access points to medical services and social services

<table>
<thead>
<tr>
<th>Programs/Activities</th>
<th>Process Measures</th>
<th>Results: Year 1</th>
<th>Short Term Outcomes</th>
<th>Results: Year 2</th>
<th>Medium Term Outcomes</th>
<th>Results: Year 3</th>
</tr>
</thead>
<tbody>
<tr>
<td>Retiring: Physician Recruiting</td>
<td>% growth of net new primary care physicians</td>
<td>Previous report available upon request</td>
<td>Increase in primary care visits</td>
<td>Previous report available upon request</td>
<td>Ratio of physicians to population</td>
<td>See narrative below</td>
</tr>
<tr>
<td>New: Community Info Center</td>
<td>Define populations served</td>
<td>Vulnerable populations</td>
<td>Secure location Funding Staffing Marketing</td>
<td>Partnered with First 5 Tuolumne County to launch Unite Us</td>
<td># Individuals connected with: AH services Behavioral/ mental health services Benefits</td>
<td>See narrative below</td>
</tr>
<tr>
<td>New: COVID CLINICS</td>
<td># of individuals vaccinated</td>
<td>9,700 does administered</td>
<td></td>
<td></td>
<td></td>
<td>See narrative below</td>
</tr>
<tr>
<td>New: Project HOPE</td>
<td># of qualifying community partner referrals</td>
<td>Vulnerable populations</td>
<td>Create online referral form Engage recipients in sharing story of success Follow up call for status update</td>
<td>Previous report available upon request</td>
<td>% of graduates who let us share their story</td>
<td>See narrative below</td>
</tr>
</tbody>
</table>

**Source of Data:**
- AH Sonora, Tuolumne County Transportation and Discover Life Adventist Church

**Target Population(s):**
PRIORITY HEALTH NEED: ACCESS TO CARE

- Broader community; vulnerable populations

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

Collaboration Partners: (place a “*” by the lead organization if other than Adventist Health)
- Schools Life Hope Centers, County of Tuolumne

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

Strategy Results 2022:
School sports resumed in 2022; however, due to restrictions on gathering sizes, sports physicals did not resume. Events such as the Tuolumne County Health Fair and Life Hope Centers were not held in 2022 due to gathering size restrictions and staffing shortages. Vaccination clinics were only offered by Tuolumne County Public Health due to the decrease in demand.

Project HOPE (which stands for Health, Outreach, Prevention and Education) is a charitable fund administered by AHS’s Community Well-being Department. Due to the pandemic, Project HOPE’s outreach component has grown in scope to assist community members facing financial hardship. Project HOPE has provided applicants with payment of medical bills, purchases of medical equipment, transportation and lodging for patients, and other health-supporting assistance. In 2022, over 50 individuals were provided various forms as assistance.

In 2022, 8 providers were onboarded. Providers were added into the following areas: gastroenterology surgery, physical medicine & rehabilitation, primary care, urology, orthopedics, and OBGYN.

In 2022, the community felt that a resource center in person would not be as helpful as a digital system that could be accessed by people anywhere. The work to expand the Unite Us platform, support Area 12 Agency on Aging’s update of their resource website (https://adrcofthemotherlode.myresourcedirectory.com), and the development of a new resource guide in partnership with Public Health became the focus in 2022.
# Implementation Strategy 11

## PRIORITY HEALTH NEED: MENTAL AND BEHAVIORAL HEALTH

## GOAL STATEMENT: INCREASE ACCESS TO CLASSES AND CARE PERTAINING TO MENTAL AND BEHAVIORAL HEALTH

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

### Strategy 1: Raise awareness of substance misuse and increase efforts in mental health screening creating more opportunities for healthful choices

**Programs/Activities** | **Process Measures** | **Results: Year 1** | **Short Term Outcomes** | **Results: Year 2** | **Medium Term Outcomes** | **Results: Year 3** |
--- | --- | --- | --- | --- | --- | --- |
Retiring: Opioid Safety Coalition | # meetings | Previous report available upon request | Decrease prescriptions of opioids | Launch of Red Feather Opioid Coalition | Reduction in OD deaths | See narrative |
On hold: Drug Store Project | # 8th grade students attending | Previous report available upon request | Increase in knowledge of risky behaviors through survey | Previous report available upon request | Reduction in teen smoking and drug use or decrease in ED drug-related visits for children under 18 | 400 students participated. See narrative |
New: ACEs Pilot Program | Establish workgroup and site teams Readiness assessment for alignment Readiness assessment for resources | Gaps Analysis for network of care | Previous report available upon request | # of child referrals # of child screenings | See narrative |

### Source of Data:
YES! Partnerships, Tuolumne County Superintendent of Schools, Tuolumne County Sheriff’s Office, Tuolumne County Public Health, TeenWorks Mentoring

### Target Population(s):
Broader community

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

### Collaboration Partners:
(place a “*” by the lead organization if other than Adventist Health)
YES! Partnerships, Tuolumne County Public Health, TeenWorks Mentoring, Tuolumne County Superintendent of Schools

Implementation Strategy 11
**Strategy Results 2022:**

The Red Feather Opioid Coalition under the leadership of Monica Lewis of the Mathiesen Memorial Health Clinic continued in 2022. The organization met 10 times throughout the year and presented a comprehensive review of opioid use in Tuolumne County for the first time. Additionally, Narcan training for all public and private school staff was held, and free Narcan was provided to school sites who requested.

The Drug Store Project, an anti-substance abuse program aimed at seventh graders, was held in October 2022. All public schools participated and over 400 students attended.

The ACEs Pilot Program continues as part of AHS’s strategy to improve access to mental and behavioral health. AHS pediatricians screen children for adverse childhood experiences (ACEs), resulting in a score that can prompt referrals to mental and behavioral health care and other support services for children and their families. Expansion opportunities included onboarding a new Director who has extensive experience in ACEs. A new data analysis collection tool was developed to accurately track the number of referrals and the types of services provided.

Prescription Drug Take-back Days are ongoing. In 2022, hosted by the U.S. Drug Enforcement Administration, events were held April 30, 2022, and October 29, 2022. Additionally, AHS has a drug take-back containers in its pharmacies.

Tuolumne County Behavioral Health has continued with a Mobile Triage Response, to divert individuals in mental health crisis form going to the hospital emergency department to obtain outpatient services and provide brief case management and outreach to at-risk youth and adults such as homeless persons. Additionally, the school system has implemented a mental health services referral system that allows for a continuum of services.

AHS continues to sponsor TeenWorks Mentoring, a program that provides faith-based mentoring to at-risk youth, and Spiritual Roads, a faith-based recovery program.
## Implementation Strategy 13

**PRIORITY HEALTH NEED:** Housing and Homelessness

**GOAL STATEMENT:** INCREASE ACCESS TO SHELTERS, TINY HOMES, AND AFFORDABLE HOUSING THROUGH STRATEGIC PARTNERSHIPS

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

**Strategy 1:** Partner with county and local programs to have a greater impact on creating access to shelter and housing.

<table>
<thead>
<tr>
<th>Programs/Activities</th>
<th>Process Measures</th>
<th>Results: Year 1</th>
<th>Short Term Outcomes</th>
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<th>Medium Term Outcomes</th>
<th>Results: Year 3</th>
</tr>
</thead>
<tbody>
<tr>
<td>Resiliency Village Project</td>
<td>Partner with County and Resiliency Village. # partners #meetings</td>
<td>Previous report available upon request</td>
<td>Establishment of a subcommittee for the building out of tiny homes #meetings of subcommittee</td>
<td>Previous report available upon request</td>
<td>Building of first tiny home</td>
<td>See narrative</td>
</tr>
<tr>
<td>Move to narrative</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Camp Hope Project</td>
<td>Sponsor Give Someone A Chance to provide clean water. # socks #field kits #hygiene kits</td>
<td>Previous report available upon request</td>
<td># of homeless referrals to social services</td>
<td>Previous report available upon request</td>
<td>Decrease in PIT homeless count</td>
<td>See narrative</td>
</tr>
<tr>
<td>Add to narrative</td>
<td></td>
<td></td>
<td></td>
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</tr>
</tbody>
</table>

**Source of Data:**
Give Someone A Chance, Resiliency Village, Tuolumne County Sheriff’s Office, Tuolumne County Public Health

**Target Population(s):**
Vulnerable Population

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

**Collaboration Partners:** (place a “*” by the lead organization if other than Adventist Health)
Give Someone A Chance, Resiliency Village, Tuolumne County Sheriff’s Office, Tuolumne County Public Health

**CBISA Category:** (A - Community Health Improvement; E - Cash and In-Kind; F - Community Building; G - Community Benefit Operations)
A,E,F,G
Strategy Results 2022:
Adventist Health Foundation representatives were invited to serve on the County of Tuolumne Homeless Committee as advisory members to discuss the need for more affordable housing for families and vulnerable populations in the community. The County of Tuolumne has secured several funding sources to address the needs of unhoused individuals and families including Homeless Housing, Assistance and Prevention (HAPP) funds. These funds can be used in conjunction with other affordable housing financing to build an affordable housing rental complex in Tuolumne County.

Adventist Health supports efforts to increase the amount of affordable rental housing for families in the community and owns an approximately 6.7-acre vacant parcel at the intersection of Greenley Road and Cabezut Road, APN 044-420-037, that is close to services and amenities. The project has been approved by the Tuolumne Board of Supervisors and studies are being completed.

Housing and Homelessness: The County of Tuolumne has taken the lead in providing initiatives, services and resources in addressing this community need; therefore, Adventist Health is no longer planning to address this directly. However, Adventist Health Sonora will continue to provide support and resources as appropriate. Camp Hope, a homeless camp on private property that was the safe place for many homeless residents, has been deemed a hazardous waste site and is no longer functioning. The Tuolumne County government helped with efforts to relocated individuals. AHS supported and will continue to support these individuals with Give Everyone a Chance shower bus, Refuge Recovery, and ATCAA Housing resources.

Resiliency Village: Resiliency Village has served over 15 individuals and families since opening their doors with a continuous occupancy of 10 which is the maximum including families. This project provides a safe living environment with multiple wrap service providers including behavioral health, adult education, job assistance, and substance use disorder counseling. AHS was able to support the expansion of the house by funding construction to add 3 additional bedrooms and a wheelchair accessible bathroom.

Resiliency Village continues to manage the Room Key Program, which has maintained housing in Twain Harte and Columbia which are areas with little to no affordable housing.
**Priority Health Need: Chronic Disease**

**Goal Statement:** Reduce incidences of chronic disease through education

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

**Strategy 1:** Increase support for local education addressing smoking, diabetes, asthma and cancer.

<table>
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</tr>
</thead>
<tbody>
<tr>
<td>Retired due to COVID: Freedom from Smoking Classes</td>
<td># of classes # of participants Paused due to COVID</td>
<td>Previous report available upon request</td>
<td>Increase in knowledge based on survey</td>
<td>Previous report available upon request</td>
<td>Decrease hospital readmissions for smoking-related respiratory illness</td>
<td>See narrative</td>
</tr>
<tr>
<td>Retired due to COVID: Better Breathers Club</td>
<td># of classes # of participants Paused due to COVID</td>
<td>Previous report available upon request</td>
<td>Increase in knowledge based on survey</td>
<td>Previous report available upon request</td>
<td>Decrease hospital readmissions for chronic lung disease. (Decrease ED visits for uncontrolled asthma)</td>
<td>See narrative below</td>
</tr>
<tr>
<td>Retired due to COVID: Ladies Night Out</td>
<td>Partner with local businesses to raise awareness for women’s health Paused due to COVID</td>
<td>Previous report available upon request</td>
<td>Increase knowledge of breast cancer symptoms and behaviors</td>
<td>Previous report available upon request</td>
<td>Increase participation for mammogram screenings for women over 40</td>
<td>Over 400 participants attended - See narrative</td>
</tr>
<tr>
<td>Blue Zones</td>
<td>% Readiness assessment completion # Roadshow attendees % Implementation of Blue Zones roadmap</td>
<td>Blueprint development Hire BZ positions</td>
<td>Previous report available upon request</td>
<td>Implementation of Blueprint</td>
<td>See narrative</td>
<td></td>
</tr>
</tbody>
</table>

**Source of Data:**
Tuolumne County Public Health, Adventist Health Sonora, American Red Cross

**Target Population(s):**
Broader community

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

**Collaboration Partners:** (place a “*” by the lead organization if other than Adventist Health)
Diana J. White Cancer Center, American Red Cross
**Priorit Health Need: Chronic Disease**

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

A, E, F, G

**Strategy Results 2022:**

Chronic-disease-related activities were scheduled to start in January 2023. Freedom from Smoking classes were scheduled to restart in January 2023 while the Better Breathers Club was retired due to lack of interest.

The Heart Health walk took place in February 2022 and the first Annual Turkey Trot to highlight diabetes awareness took place in November 2022.

Ladies Night Out took place in October 2022 and over 400 participants attended. AHS used the event to launch the online mammogram scheduling platform.

Pulmonary Rehab Phase 3 is ongoing and there has been an increase in the number of community fitness classes offered at the Living Well Fitness Center including the addition of weekend and evening classes.

The Blue Zones Project in Tuolumne County has grown exponentially in 2022. The Blue Zone Project Tuolumne County kickoff event in April 2022 included 31 community partners and over 1,200 participants. The project has helped create walking moais (groups) in Twain Harte, Tuolumne, Sonora, Columbia, and East Sonora. In 2022, over 80 engagements have been held including cooking demonstrations that provide healthy, inexpensive meal preparation for a variety of partners including senior living facilities, restaurants, and grocery stores. Adventist Health Sonora and Blue Zones were involved in the first walking event in November at Jamestown Elementary (Jimtown Walk) where 150 participants walked and were provided nutrition counseling, blood testing, and other services to promote healthy living. Blue Zone Project also supported Red Ribbon Week which provided tobacco awareness and education through healthy alternatives to tobacco use, to 1,158 students in grades 5th through 8th. In December, the first non-smoking area was designated at the Christmas Parade with the support of Sonora City Council and local businesses.