

# 2022

COMMUNITY BENEFIT REPORT/

PROGRESS ON 2020-2022 COMMUNITY HEALTH IMPROVEMENT PLAN

# Redwood Memorial Hospital

Fortuna, California



Pictured with permission: Mother Avyonne with son Theo at Paso a Paso event

To provide feedback on this CB report or obtain a printed copy free of charge, please email Martha Shanahan at [Martha.Shanahan@stjoe.org](mailto:Martha.Shanahan@stjoe.org)



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# EXECUTIVE SUMMARY

Providence continues its Mission of service in Humboldt County through Redwood Memorial Hospital and St. Joseph Hospital, Eureka. Redwood Memorial Hospital is a critical access hospital with 35 licensed beds, 25 of which are currently available, founded in 1957 and located in Fortuna, California. Redwood Memorial Hospital's service area is the entirety of Humboldt County, including 134,707 people.

Redwood Memorial Hospital and St. Joseph Hospital, Eureka dedicate resources to improve the health and quality of life for the communities in Humboldt County, with special emphasis on the needs of the economically poor and vulnerable. In FY22, the hospitals collectively provided \$36,853,161 in Community Benefit in response to unmet needs.

## 2020-2022 Redwood Memorial Hospital Community Health Improvement Plan Priorities

As a result of the findings of our [2019 CHNA](#) and through a prioritization process aligned with our Mission, resources, and hospital strategic plan, Redwood Memorial Hospital will focus on the following areas for its 2021-2023 Community Benefit efforts:

### PRIORITY 1: MENTAL HEALTH AND SUBSTANCE USE SERVICES

Mental health and substance use are interconnected with many other community needs, including the following: child abuse/neglect, economic insecurity, a lack of opportunities, racism, and discrimination. Residents of Humboldt County experience barriers to accessing needed behavioral health services due to a lack of inpatient care, insufficient psychiatrists and counselors, cost of care, stigma, and transportation.

#### 2022 Accomplishments

Accomplishments in the areas of increasing capacity and reducing barriers to care include:

- Funding to support the creation of the Sorrel Leaf Healing Center, a youth crisis and residential treatment center
- Funding to support Behavioral Health Integration at Open Door Community Health Centers in the Eel River Valley
- Support for harm reduction efforts county-wide
- Continuation of CARE Network social work navigator to prevent substance misuse during pregnancy
- Continued support of the Paso a Paso program that works to support Spanish-speaking people during the peri-natal period, a primary prevention strategy
- Contract with Humanidad to provide group and individual therapy in Spanish to Paso a Paso clients in need

### PRIORITY 2: HOMELESSNESS / LACK OF SAFE, AFFORDABLE HOUSING

The lack of affordable, safe housing stock in Humboldt County contributes to individuals with low incomes living unhoused or in overcrowded and unhealthy living conditions. In Humboldt County, there

is a lack of available housing along the entire spectrum, particularly permanent-supportive housing. Housing discrimination, a lack of services for people experiencing homelessness, and a lack of support services for people once they are housed also contribute to the housing challenges.

### 2022 Accomplishments

In 2022 we built on our work to increase safe and affordable housing stock and expand supportive services and policies that prevent homelessness. Accomplishments include:

- Continued support of Onyx Apartments, a permanent supportive housing (PSH) program for families
- Investment in the Providence Mother Bernard House, a motel conversion to PSH and temporary shelter program during construction (DANCO Builders) that is supported by our CARE Network team
- The Intersections initiative with Westside Community Improvement Association around Housing Equity
- Medical Respite with Betty Chinn
- Support for Betty Chinn's PG&E trailer program

### PRIORITY 3: RACISM AND DISCRIMINATION

Racism and historical trauma prevent Black, Brown, Indigenous, and People of Color (BBIPOC) from receiving high-quality, respectful, and responsive health care services and negatively effects mental health. Racism and discrimination contribute to economic insecurity, housing instability, and inequitable educational opportunities.

### 2022 Accomplishments

We continued to support equitable access to COVID-19 vaccine as well as expanding on efforts in 2021 to build relationships and increase trust with the Native American communities we serve.

Accomplishments include:

- Better Birthing Human Centered Design team supported by With/In Collaborative tested and implemented a culturally responsive birth plan.
- Advocated for AB 2176 which resulted in a change to state law increasing the time families have to name their newborn from 10 to 21 days; this no longer conflicts with sacred Native American ceremonial practices
- Funding for culturally responsive and equitable food access to Spanish speaking families during the COVID-19 epidemic
- Paso a Paso Health Equity Specialist
- Funded several non-profits that were working to prevent the spread of COVID-19 among Latinx, Indigenous and Homeless populations, as well as increase access to COVID-19 vaccination.

## PRIORITY 4: ACCESS TO HEALTH CARE

There is an overall lack of primary care providers and specialists within Humboldt County. Transportation especially, but also cost of care and hours of appointments, are barriers to care. There is a lack of culturally responsive and linguistically appropriate care for Latino/a and Native American communities, as well as a lack of respectful and competent services for transgender youth.

### 2022 Accomplishments

The CARE Network Program continued its work to engage with individuals with unique needs. They recorded 1,712 medical respite bed days for people experiencing homelessness in 2022. They also provided social worker support to Providence Primary Care, a Substance Use Navigator embedded in the Emergency Room, and a Perinatal Care Navigator working across healthcare settings and social service agencies.

The Paso a Paso program continued their healthcare navigation support by helping patients apply for financial assistance for needed medical procedures and continued to work closely with FQHC Open Door to support patients gaining access to primary medical care. The five Community Resource Centers logged 106,960 encounters in 2022, helping community members with the social determinants of health.

## Providence

At Providence, we use our voice to advocate for vulnerable populations and needed reforms in health care. We are also pursuing innovative ways to transform health care by keeping people healthy, and making our services more convenient, accessible and affordable for all. In an increasingly uncertain world, we are committed to high-quality, compassionate health care for everyone – regardless of coverage or ability to pay. We help people and communities benefit from the best health care model for the future – today.

Together, our 120,000 caregivers (all employees) serve in 52 hospitals, 1,085 clinics and a comprehensive range of health and social services across Alaska, California, Montana, New Mexico, Oregon, Texas and Washington.

Providence across five western states:

- [Alaska](#)
- [Montana](#)
- [Oregon](#)
- [Northern California](#)
- [Southern California](#)
- [Washington](#)

The Providence affiliate family includes:

- [Covenant Health in West Texas](#)
- [Facey Medical Foundation in Los Angeles, CA.](#)
- [Hoag Memorial Hospital Presbyterian in Orange County, CA.](#)
- [Kadlec in Southeast Washington](#)

- [Pacific Medical Centers in Seattle, WA.](#)
- [Swedish Health Services in Seattle, WA.](#)

As a comprehensive health care organization, we are serving more people, advancing best practices and continuing our more than 100-year tradition of serving the poor and vulnerable. Delivering services across seven states, Providence is committed to touching millions of more lives and enhancing the health of the American West to transform care for the next generation and beyond.

# INTRODUCTION

## Who We Are

**Our Mission** As expressions of God’s healing love, witnessed through the ministry of Jesus, we are steadfast in serving all, especially those who are poor and vulnerable.

**Our Vision** Health for a Better World.

**Our Values** Compassion — Dignity — Justice — Excellence — Integrity

Redwood Memorial Hospital is a critical access hospital founded in 1957 and located in Fortuna, California. The hospital has 35 licensed beds, 25 of which are currently available, and a campus that is approximately 5.8 acres in size. Redwood Memorial Hospital has a staff of approximately 215 and professional relationships with more than 230 local physicians. Major programs and services offered to the community include emergency care, critical care, outpatient rehabilitation and surgery.

Redwood Memorial hospital offers a variety of community-based programs that meet the needs of vulnerable populations and focus on health equity, primary prevention, health promotion, and community building.

## Our Commitment to Community

Redwood Memorial Hospital dedicates resources to improve the health and quality of life for the communities we serve. During the most recent fiscal year, our Humboldt County hospitals, Redwood Memorial and St. Joseph, provided \$36,853,161 in Community Benefit<sup>1</sup> in response to unmet needs and to improve the health and well-being of those we serve in Humboldt County.

## Health Equity

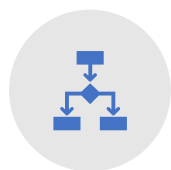
At Providence, we acknowledge that all people do not have equal opportunities and access to living their fullest, healthiest lives due to systems of oppression and inequities. We are committed to ensuring health equity for all by addressing the underlying causes of racial and economic inequities and health disparities. Our Vision is “Health for a Better World,” and to achieve that we believe we must address not only the clinical care factors that determine a person’s length and quality of life, but also the social and economic factors, the physical environment, and the health behaviors that all play an active role in determining health outcomes.

To ensure that equity is foundational to our CHIP, we have developed an equity framework that outlines the best practices that each of our hospital will implement when completing a CHIP. These practices include, but are not limited to the following:

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<sup>1</sup> Per federal reporting and guidelines from the Catholic Health Association.

**Figure 1. Best Practices for Centering Equity in the CHIP**



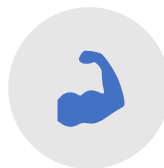
Address root causes of inequities by utilizing evidence-based and leading practices



Explicitly state goal of reducing health disparities and social inequities



Reflect our values of justice and dignity



Leverage community strengths

## Community Benefit Governance

Redwood Memorial Hospital demonstrates organizational commitment to the community benefit process through the allocation of staff time, financial resources, participation and collaboration with community partners. The Northern California Regional Director of Community Health Investment and the local Humboldt County Director of Community Health Investment are responsible for coordinating implementation of State and Federal 501r requirements.

The Community Benefit Committee (CBC) is the board appointed oversight committee of the Community Health Investment department at Redwood Memorial Hospital. The CBC is composed of Providence Redwood Memorial Hospital community board members, internal Providence stakeholders and staff (Chief Executive or designee, mission leader, community health leaders) and external community stakeholders representing subject matter experts and community constituencies (i.e., faith based, FQHC's, mental health, homeless services, education, and Public Health). The Community Benefit Committee reviewed the data collected in the 2020 Community Health Needs Assessment process to identify and prioritize the top health-related needs in Humboldt County for this 2021-2023 CHIP. The committee also oversees and governs budget, investments, program continuation or discontinuation, populations of focus and community-wide engagement.

## Planning for the Uninsured and Underinsured

Our Mission is to provide quality care to all our patients, regardless of ability to pay. We believe that no one should delay seeking needed medical care because they lack health insurance. That is why Redwood Memorial Hospital has a Financial Assistance Program (FAP) that provides free or discounted services to eligible patients.

One way Redwood Memorial Hospital informs the public of FAP is by posting notices. Notices are posted in high volume inpatient and outpatient service areas. Notices are also posted at locations where a



patient may pay their bill. Notices include contact information on how a patient can obtain more information on financial assistance as well as where to apply for assistance. These notices are posted in English and Spanish and any other languages that are representative of 5% or greater of patients in the hospital's service area. All patients who demonstrate lack of financial coverage by third party insurers are offered an opportunity to complete the Patient Financial Assistance Application and are offered information, assistance, and referral as appropriate to government sponsored programs for which they may be eligible. For information on our Financial Assistance Program go to:

<https://www.stjosephhealth.org/patients-visitors/billing-payment/>.

## Medi-Cal (Medicaid)

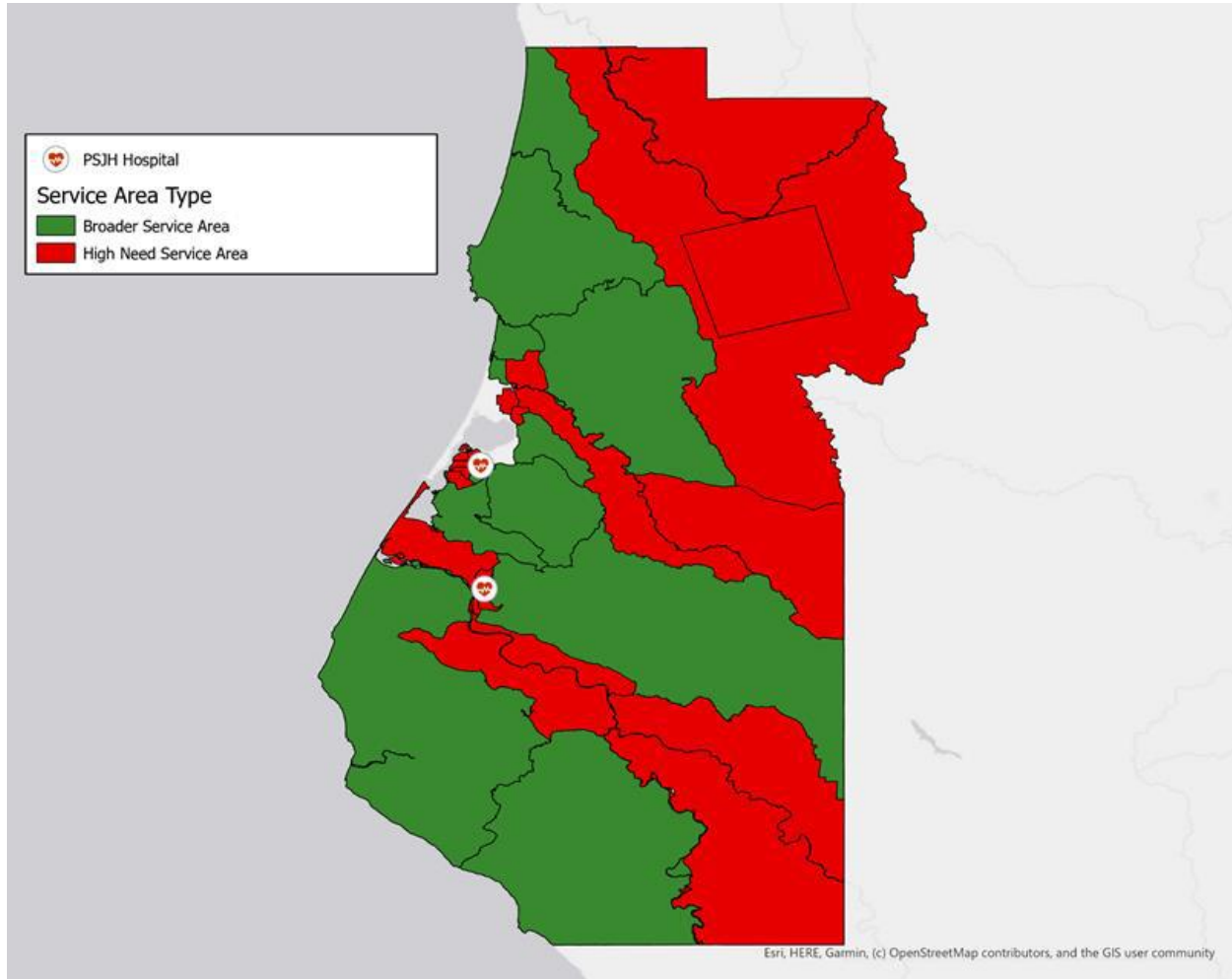
Redwood Memorial Hospital provides access to the uninsured and underinsured by participating in Medicaid, also known as Medi-Cal in California. In FY22, Redwood Memorial Hospital provided \$3,480,765 in the Unpaid cost of Medi-Cal.

# OUR COMMUNITY

## Description of Community Served

Redwood Memorial Hospital’s service area is Humboldt County and includes a population of approximately 135,000 people.

**Figure 1. Humboldt Service Area**



Of the over 134,000 permanent residents of Humboldt County, roughly 59% live in the “high need” area, defined by lower life expectancy at birth, lower high school graduation rates, and more households at or below 200% FPL compared to census tracts across the county. For reference, in 2020, 200% FPL represents an annual household income of \$52,400 or less for a family of four. These households are more likely to regularly make spending tradeoffs regarding utilities, rent, groceries, medicine, and other basic expenses.

## Community Demographics

### POPULATION AND AGE DEMOGRAPHICS

For the most part, the age distribution is roughly proportional across Humboldt County geographies, with those aged between 18 and 34 slightly more likely to live in a high need area, likely young families and those in and around college towns. Those aged 65-84 are less likely to live in a high need area, perhaps due in part to secondary and/or vacation homes.

The male-to-female ratio is approximately equal across geographies.

Approximately 9% of residents of Humboldt County are veterans, nearly double the state level of 5%.

### POPULATION BY RACE AND ETHNICITY

Those who self-identify as Hispanic are slightly more likely to live in a high need area compared to their non-Hispanic peers. The American Indian population is much more likely to live in a high need area, as are those who identify as “other race.”

### SOCIOECONOMIC INDICATORS

**Table 1. Income Indicators for Humboldt County Service Area**

| Indicator  | Broader Service Area | High Need Service Area | Humboldt County |
|--|----------------------|------------------------|-----------------|
| <b>Median Income</b><br>Data Source: American Community Survey<br>Year: 2019   | \$53,762             | \$37,484               | \$44,119        |
| <b>Percent of Renter Households with Severe Housing Cost Burden</b><br>Data Source: American Community Survey<br>Year: Estimates based on 2013 – 2017 data | 28.6%                | 31.3%                  | 30.5%           |

The median income in the high need service area is about \$6,600 lower than Humboldt County. There is about a \$16,000 difference in median income between the broader service area and the high need service area.

Severe housing cost burden is defined as households that are spending 50% or more of their income on housing costs. On average, approximately 30% of households in Humboldt County are severely housing cost burdened. In the high need service area, 31% of renter households are severely housing cost burdened. Within the total service area, there are census tracts in which 40% to 56% of households are experiencing severe housing cost burden.

Full demographic and socioeconomic information for the service area can be found in the [2019 CHNA for Redwood Memorial Hospital](#).

# COMMUNITY NEEDS AND ASSETS ASSESSMENT PROCESS AND RESULTS

## Summary of Community Needs Assessment Process and Results

The Community Health Needs Assessment (CHNA) process is based on the understanding that health and wellness are influenced by factors within our communities, not only within medical facilities. In gathering information on the communities served by the hospital, we looked not only at the health conditions of the population, but also at socioeconomic factors, the physical environment, and health behaviors. Additionally, we invited key stakeholders and community members to provide additional context to the quantitative data through qualitative data in the form of interviews and listening sessions. As often as possible, equity is at the forefront of our conversations and presentation of the data, which often have biases based on collection methodology.

## Significant Community Health Needs Prioritized

The list below summarizes the rank ordered significant health needs identified through the 2020 Community Health Needs Assessment process:

### PRIORITY 1: MENTAL HEALTH & SUBSTANCE USE SERVICES

Mental health and substance use are recognized as being interconnected with several other community needs, with a history of trauma, child abuse/neglect, poverty, and a lack of opportunities as contributors to both mental health challenges and substance use disorders. Experiences with racism and discrimination also contribute to behavioral health needs. There is a lack of mental health and substance use services in the community; specifically, local inpatient care for adults and youth with a serious mental illness as well as follow-up care for patients once discharged, and general support for families (new parents, infants, and early development). There are insufficient psychiatrists and counselors to meet the community need, especially providers for youth, people who are uninsured, and/or Spanish-speaking residents, as well as insufficient harm reduction services (safe and legal injection sites and syringe exchange programs). Barriers to addressing these behavioral health needs include stigma, cost of care, transportation to services within and outside of the community, and a lack of continuity of care due to provider turnover.

### PRIORITY 2: HOMELESSNESS / LACK OF SAFE, AFFORDABLE HOUSING

The lack of affordable, safe housing stock in Humboldt County contributes to individuals with low incomes living unhoused or in overcrowded and unhealthy living conditions. Housing is recognized as being foundational to one's health; people who are stably housed are better able to care for their physical and mental health and remain employed. There is a lack of available housing along the entire spectrum: shelters, supportive housing, family-friendly transitional housing, permanent-supportive housing, and low- and very low-income housing. There is also a lack of services for people experiencing homelessness, such as showers and adult day centers, as well as support services for people once they are housed. Housing stability and affordability for young people and mixed status families is of particular concern. Housing discrimination contributes to Black, Brown, Indigenous, and People of Color (BBIPOC) having more difficulty accessing good-quality, affordable housing.

### PRIORITY 3: RACISM AND DISCRIMINATION

Racism and historical trauma prevent BBIPOC from receiving high-quality, respectful, and responsive health care services. The recent history of forced sterilization of Native American people and experimentation on Black people has contributed to distrust of health care. Stakeholders noted a "corrosive effect" of racism on the mental health of BBIPOC, particularly Native American communities in Humboldt County. The unjust treatment of Latino/a workers by employers and discriminatory housing practices prevent BBIPOC from accessing good-quality, affordable housing. Racism is evident in education, with BBIPOC students, particularly Native students, not receiving appropriate special education services and being disproportionately and unfairly disciplined. Stakeholders also shared experiences of racism in legal systems.

### PRIORITY 4: ACCESS TO HEALTH CARE

There is an overall lack of primary care providers and specialists within Humboldt County. Transportation to care is a consistent barrier for many, but especially older adults, people with disabilities, and those living in rural areas. Reliable public transportation within the county is a challenge, as well as travel to services outside the county, specifically traveling from the hills of Humboldt into Eureka where most services are located. Cost of care is a major barrier for people who are uninsured or underinsured, especially mixed status households. Appointments during work hours and difficulty navigating the health care system are also barriers. There is a lack of culturally responsive and linguistically appropriate care for Latino/a and Native American communities, as well as a lack of respectful and competent services for transgender youth.

## Needs Beyond the Hospital's Service Program

No hospital facility can address all of the health needs present in its community. We are committed to continuing our Mission through partnership grants with the North Coast Grantmaking Partnership, in-kind participation in community collaboratives and community health improvement efforts.

While Redwood Memorial Hospital will employ strategies to address each of the four significant health needs that were prioritized during the CHNA process, partnerships with community organizations and government agencies are critical for achieving the established goals.

Redwood Memorial Hospital will collaborate with Open Door Community Health Centers, the Public Health Department, LatinoNet, Centro del Pueblo, Local Tribes, Cal Poly Humboldt, the Humboldt Network of Family Resource Centers and local philanthropy and others to address the community needs and coordinate care and referrals to address unmet needs.

# COMMUNITY HEALTH IMPROVEMENT PLAN

## Summary of Community Health Improvement Planning Process

The 2020-2022 Community Health Improvement Plan (CHIP) process was impacted by the SARS-CoV-2 virus and COVID-19, which has impacted all of our communities. While we have focused on crisis response, it has required a significant re-direction of resources and reduced community engagement in the CHIP process.

This CHIP is currently designed to address the needs identified and prioritized through the 2019 CHNA, though COVID-19 will have substantial impacts on our community needs. These impacts are likely to exacerbate some of the needs identified, and cause others to rise in level of priority. While this is a dynamic situation, we recognize the greatest needs of our community will change in the coming months, and it is important that we adapt our efforts to respond accordingly. We are committed to supporting, strengthening, and serving our community in ways that align with our Mission, engage our expertise, and leverage our Community Benefit dollars in the most impactful ways.

Redwood Memorial Hospital's CHIP involves a comprehensive approach lead by the Community Health Investment Program Director and Senior Program Coordinator. This process includes both internal and external stakeholders and subject matter experts. Coordinating within the organization and in our community is critical in leveraging the will and the resources required to improve community health. As part of the comprehensive approach, existing initiatives of Redwood Memorial Hospital's community benefit investments are reviewed to ensure alignment with 2019 CHNA priorities. The board appointed Community Benefit Committee is engaged throughout the process beginning with the development and approval of the CHNA, followed by CHIP development, review, feedback then final CHIP review and approval.

Redwood Memorial Hospital anticipates that implementation strategies may change and therefore, a flexible approach is best suited for the development of its response to the CHNA. For example, certain community health needs may become more pronounced and require changes to the initiatives identified by Redwood Memorial Hospital in the enclosed CHIP.

## Addressing the Needs of the Community: 2020-2022 Key Community Benefit Initiatives and Evaluation Plan

### 2022 Accomplishments

#### COMMUNITY NEED ADDRESSED #1: MENTAL HEALTH & SUBSTANCE USE SERVICES

##### *Long-Term Goal(s)/ Vision*

To reduce substance use disorders (SUD) and mental health conditions through evidence-based and community-led prevention, treatment, and recovery support services that are equitable, high-quality, culturally responsive, and linguistically appropriate, especially for populations with low incomes.

**Table 2. Strategies for Addressing Mental Health & Substance Use Services**

| Strategy   | Population Served       | FY22 Accomplishments  |
|--|-------------------------|---|
| 1. Increase capacity and reduce barriers to address mild-moderate mental health & substance use services.        | Broader community       | Funding for Sorrel Leaf Healing Center<br>Funding to support Behavioral Health integration at Open Door in the Eel River Valley<br>Support for harm reduction efforts county-wide<br>CARE Network program<br>Community Resource Centers |
| 2. Increase capacity and reduce barriers to provide bilingual/bicultural mental health & substance use services. | Latino/a & undocumented | Contract with Humanidad to provide psychotherapy to Paso a Paso clients<br>Paso a Paso program  |
| 3. Advocate for increased access to mental health and substance use care with focused community-based solutions. | Broader community       | Collaborate with Providence Government Affairs<br>Support Humboldt Community Health Trust<br>Support Community Information Exchange (CIE)   |

*Evidence Based Sources and Community Wisdom*

Redwood Memorial Hospital believes in working upstream to prevent behavioral health concerns as well as responding to immediate needs for crisis interventions. This CHIP includes both primary prevention and crisis intervention strategies and pulls from the following sources:

- [SAMHSA - Substance Abuse and Mental Health Services Administration](#)
- [Mental Health & Resilience Support for Teens and Adults \(work2bewell.org\)](#)
- [Home | Prevention Institute](#)
- [Community Health Workers \(Promotores\) | Minority Health | CDC](#)
- [Board of Behavioral Sciences \(BBS\) \(ca.gov\)](#)
- [Home | NAMI: National Alliance on Mental Illness](#)
- [Our Team — Warrior Institute \(thewarriorinstitute.org\)](#)
- [Social Cohesion | Healthy People 2020](#)

### Resource Commitment

Redwood Memorial Hospital will commit staff time across the Community Health Investment programs including Paso a Paso, CARE Network and Community Resource Centers, provide grants to local partners and facilitate funding from various health system sources. In partnership with the Providence Government and Public Affairs division, local CHI leaders will advocate for increased access to mental health and substance use care with focused community-based solutions.

### Key Community Partners

Redwood Memorial Hospital values cross-sector collaboration and believes that non-profit organizations, schools, private business and government must work together to solve community-level problems. We plan to collaborate with the following organizations to address this need:

- Waterfront Recovery Services
- Open Door Community Health Centers
- United Indian Health Services
- County of Humboldt, Department of Health and Human Services
- North Coast Health Improvement and Information Network
- First 5 Humboldt
- Cal Poly Humboldt
- College of the Redwoods
- Humboldt Network of Family Resource Centers
- Work 2 Be Well
- Local school districts

## COMMUNITY NEED ADDRESSED #2: HOMELESSNESS / LACK OF SAFE, AFFORDABLE HOUSING

### Long-Term Goal(s)/ Vision

A sufficient supply of safe, affordable housing units to ensure that all people in the community have access to a healthy place to live that meets their needs.

**Table 3. Strategies for Addressing Homelessness / lack of safe, affordable housing**

| Strategy   | Population Served  | FY22 Accomplishments  |
|--|--|---|
| 1. Leverage investments to increase safe and affordable housing stock. | BBIPOC, homeless & those experiencing health disparities | Onyx Supportive Housing for families<br>Providence Mother Bernard House<br>Intersections with Westside Community Improvement Association (WCIA) |
| 2. Leverage resources through partnerships to                          | BBIPOC, homeless & those                                 | Medical respite with Betty Chinn  |



|  |                                 |  |
|--|---------------------------------|--|
| expand supportive services.  | experiencing health disparities | Community Resource Centers supportive services to prevent homelessness and provide services to those experiencing homelessness<br><br>CARE Network intensive community based case management + new shelter program at the Humboldt Inn |
| 3. Support policies that prevent homelessness and increase access to affordable housing. | At-risk populations             | Collaborate with Providence Government Affairs on funding for affordable housing and supportive services   |

*Evidence Based Sources and Community Wisdom*

- [Housing is Health | Providence](#)
- [National Institute for Medical Respite Care \(nimrc.org\)](#)
- [National Health Care for the Homeless Council | Quality. Access. Justice. Community \(nhchc.org\)](#)
- [Reduce poverty by improving housing stability | Urban Institute](#)
- [Housing Instability | Healthy People 2020](#)

*Resource Commitment*

Redwood Memorial Hospital will commit staff time from its Community Health Investment department as well as grants and restricted funding. Approximately \$3,500,000 in Care for the Poor reserve funds are earmarked for reducing housing instability and homelessness in Humboldt County between 2021 and 2025.

Providence Supportive Housing Division will lead the Providence Mother Bernard House project to convert a motel, the Humboldt Inn, into permanent supportive housing for chronically homeless individuals; and the Real Estate and Strategic Operations Division is available to assist with decisions around investments in housing units. Additionally, and in partnership with the Providence Government and Public Affairs division, local CHI leaders will support policies that prevent homelessness and increase access to affordable housing.

*Key Community Partners*

Redwood Memorial Hospital values cross-sector collaboration and believes that non-profit organizations, private business, education and government must work together to solve community-level problems. We plan to collaborate with the following organizations to address this need:

- County of Humboldt, Department of Health and Human Services
- Humboldt Housing and Homeless Coalition
- St. Vincent de Paul
- Eureka Rescue Mission

- The Betty Kwan Chinn Homeless Foundation
- Arcata House Partnership
- Redwood Community Action Agency
- Centro del Pueblo
- LatinoNet
- Open Door Community Health Centers
- Humboldt Area Foundation
- Redwood Region Economic Development Commission
- Westside Community Improvement Association
- Cal Poly Humboldt
- College of the Redwoods

### COMMUNITY NEED ADDRESSED #3: RACISM AND DISCRIMINATION

#### *Long-Term Goal(s)/ Vision*

To actively work to eliminate social inequities and forms of oppression in our communities, ensuring all people have the opportunities and access to living their fullest, healthiest lives. We will be a community partner in undoing institutional racism that prevents our community members from feeling safe, respected, and heard when accessing health services.

**Table 4. Strategies for Addressing Racism and Discrimination**

| Strategy  | Population Served  | FY22 Accomplishments  |
|---|--|---|
| 1. Advance Health Equity Strategies                                     | Native Americans and Latino/a                                      | Better Birthing Human Centered Design team supported by With/In Collaborative; Goal: Build trust with Native birthing people<br>AB 2176 signed into law<br>New, culturally responsive birth plan for Indigenous patients<br>Funding for Culturally responsive and equitable food access to Spanish speaking families during the COVID-19 epidemic<br>Paso a Paso Health Equity Specialist |
| 2. Partner with Public Health, FQHC, and others for Covid-19 prevention | Latino/a individuals and families, those experiencing homelessness | Paso a Paso community partnerships to increase access to COVID-19 vaccine<br>Community Resource Centers as vaccine clinic sites   |

|  |                                      |   |
|--|--------------------------------------|---|
| and equitable access to vaccine.                                       |                                      | CARE Network care coordination for homeless individuals at-risk for COVID |
| 3. Advocate for policies that address social and economic disparities. | Those experiencing health inequities | Collaborate with Providence Government Affairs                            |

*Evidence Based Sources and Community Wisdom*

- [Institute for Human Centered Design](#)
- [Home - NBEC \(birthequity.org\)](#)
- [Conceptualising cultural safety at an Indigenous-focused midwifery practice in Toronto, Canada: qualitative interviews with Indigenous and non-Indigenous clients | BMJ Open](#)
- [Dr. Cutcha Risling Baldy – Indigenous Voices for Decolonized Futures - YouTube](#)
- [Center for Social Innovation | Stanford Graduate School of Business](#)
- [Home | Prevention Institute](#)
- [Food Sovereignty Lab & Cultural Workshop Space | Native American Studies \(humboldt.edu\)](#)

*Resource Commitment*

Redwood Memorial Hospital will commit staff time from its Community Health Investment department, provide grants to local partners, and help leverage resources from the Providence Health Equity Initiative. In partnership with the Providence Government and Public Affairs division, local CHI leaders will advocate for policies that address social and economic disparities.

*Key Community Partners*

Redwood Memorial Hospital values cross-sector collaboration and believes that non-profit organizations, private business and government must work together to solve community-level problems. We plan to collaborate with the following organizations to address this need:

- Centro del Pueblo
- LatinoNet
- True North
- United Indian Health Services
- K’ima:w Medical Center
- Local Tribal Communities
- Two Feathers Native American Family Services
- With/In Collaborative
- St. Vincent de Paul
- Eureka Rescue Mission
- The Betty Kwan Chinn Homeless Foundation
- Arcata House Partnership

- Food for People
- Open Door Community Health Centers
- Public Health Department
- Humboldt Area Foundation

## COMMUNITY NEED ADDRESSED #4: ACCESS TO HEALTH CARE

### *Long-Term Goal(s)*

To improve access to culturally responsive health care and preventive resource for people with low incomes and those uninsured by deploying programs to assist with navigating the health care system. This will ease the way for people to access the appropriate level of care at the right time.

**Table 5. Strategies for Addressing Access to Health Care**

| <b>Strategy</b>  | <b>Population Served</b>                             | <b>FY22 Accomplishments</b>  |
|--|--|--|
| 1. Engage high-risk individuals with CARE Network complex care management teams.   | Co-occurring socioeconomic and complex medical needs | 1,712 medical respite bed days for people experiencing homelessness<br>Social worker support to Providence Primary Care<br>Substance Use Navigator embedded in the Emergency Room<br>Perinatal Care Navigator working across health settings and social service agencies |
| 2. Increase capacity for health care services through partnership with FQHC  | Un- and underinsured individuals and families        | Support for Open Door in the Eel River Valley and for the Family Practice Residency Program  |
| 3. Provide SDOH support and linkage to health services for low-income community members through the Community Resource Centers | Low-income community members                         | 106,960 encounters at five Community Resource Centers  |
| 4. Collaborate with partners to support a local health careers workforce pipeline  | Broader community                                    | Support the Family Practice Residency Program at SJE and Open Door<br>Support for RN to BSN program at Cal Poly Humboldt<br>Support for Health Careers Exploration Summer Institute (HESI) Program   |

|   |   |  |
|---|---|--|
| 5. Support and increase capacity for healthcare navigation programs | Un- and underinsured individuals and families | Spanish-speaking CHW provide navigation and support applying for financial assistance<br><br>Operation Access expands to Humboldt County |
|---|---|--|

*Evidence Based Sources and Community Wisdom*

- [Listening to the Voices of Californians - California Health Care Foundation \(chcf.org\)](https://www.chcf.org/)
- [Health Equity | IHI - Institute for Healthcare Improvement](https://www.healthequity.org/)
- [Health Equity | CDC](https://www.cdc.gov/health-equity/)

*Resource Commitment*

Redwood Memorial Hospital will commit staff time from its Community Health Investment department as well as grants and restricted funding to help fill gaps in the community. We will also utilize Providence Government and Public Affairs to advocate for improvements in access to care when appropriate and partner with Providence Medical Group on initiatives that support vulnerable patient populations.

*Key Community Partners*

Redwood Memorial Hospital values cross-sector collaboration and believes that non-profit organizations, private business and government must work together to solve community-level problems. We plan to collaborate with the following organizations to address this need:

- Open Door Community Health Centers
- United Indian Health Services
- K’ima:w Medical Center
- North Coast Health Improvement and Information Network
- Cal Poly Humboldt
- College of the Redwoods
- Humboldt County Office of Education
- Humboldt Area Foundation
- Operation Access

## Other Community Benefit Programs and Evaluation Plan

**Table 6. Other Community Benefit Programs in Response to Community Needs**

| <b>Initiative (Community Need Addressed)</b> | <b>Program Name</b>  | <b>Description</b>  | <b>Population Served (Low Income, Vulnerable or Broader Community)</b> |
|--|--|---|--|
| 1. Access to Care                            | Health Professions Education                               | Various hospital departments dedicate staff time and resources to train interns; includes Pharmacy, PT, OT, Social Work and Nursing | Broader Community  |
| 2. Access to Care                            | Health-Careers Exploration Summer Institute (HESI Program) | Summer program for high school students that allows them to explore various health careers  | Broader Community  |
| 3. Access to Care                            | RN to BSN program  | Redwood Memorial Hospital is a key partner working with Cal Poly Humboldt and CR in advancing nursing education on the North Coast  | Broader Community  |

# FY22 COMMUNITY BENEFIT INVESTMENT

In FY22 Redwood Memorial Hospital invested a total of \$6,758,105 in key community benefit programs. \$1,812,415 was invested in community health programs for the poor. In addition, \$1,262,231 in charity care was provided, \$542 in unpaid cost of other government programs, and \$202,152 in community benefits for the broader community. Additionally, the hospital provided \$3,480,765 in the Unpaid Cost of Medicaid. Redwood Memorial Hospital applies a ratio of cost to charge to quantify financial assistance at cost, unreimbursed Medicaid, other means-tested government programs. The cost to charge ratio is aligned with the IRS Form 990, Schedule H Worksheet 2. Our community benefit program expenses are reported in alignment with the total cost incurred to run our programs, and we offset any restricted revenue received to arrive at our net community benefit expense.

FY2022 Redwood Memorial Hospital  
(July 1, 2021-June 30, 2022)

| CA Senate Bill (SB) 697 Categories                          | Community Benefit Program Categories             | Net Benefit      |
|---|--|------------------|
| <b>Medical Care for Vulnerable Populations</b>              | Financial Assistance at cost                     | 1,262,231        |
|   | Unpaid cost of Medicaid                          | 3,480,765        |
|   | Unpaid other govt. programs                      | 542              |
| <b>Other Benefits for Vulnerable Populations</b>            | Community Health Improvement Services            | 874,554          |
|   | Subsidized Health Services                       | 0                |
|   | Cash and In-Kind Contributions                   | 899,022          |
|   | Community Building                               | 0                |
|   | Community Benefit Operations                     | 38,839           |
|   | <b>Total Benefits for Vulnerable Populations</b> | <b>6,555,953</b> |
| <b>Other Benefits for the Broader Community Populations</b> | Community Health Improvement Services            | 22,587           |
|   | Subsidized Health Services                       | 0                |
|   | Cash and In-Kind Contributions                   | 0                |
|   | Community Building                               | 0                |
|   | Community Benefit Operations                     | 179,565          |
| <b>Health Profession Education, Training and Research</b>   | Health Professions Education and Research        | 0                |
|   | <b>Total Benefits for the Broader Community</b>  | <b>202,152</b>   |
|   | <b>Total Community Benefit</b>                   | <b>6,758,105</b> |
| <b>Medical Care Services for the Broader Community</b>      | <b>Total Medicare shortfall</b>                  | <b>1,298,819</b> |

## Telling Our Community Benefit Story: Non-Financial Summary of Accomplishments

The employees, volunteers and physicians of Redwood Memorial Hospital are the greatest non-financial asset the organization provides for the community. Our team of caregivers provides the best patient-centered health care available on the North Coast and volunteer in the community on a regular basis.

In 2022 Redwood Memorial Hospital was awarded the U.S. News & World Report High Performing Hospitals for Pneumonia. And Healthgrades recognized Redwood Memorial as a 2022 Five-Star Recipient for Sepsis.

These prestigious awards would not be possible if not for our caring and committed caregivers who provide excellent patient care and bring their skills and expertise to our hospital and the rural North Coast of California every day. Caring for the caregiver and providing an excellent experience for every patient that needs care is a central focus for Redwood Memorial Hospital. From quiet hours to friendly greetings, Redwood Memorial Hospital employees, volunteers and physicians embrace our vision outcomes of perfect care, sacred encounters and healthy communities.

Our caregivers spend countless hours volunteering in our community. From feeding the homeless with church and non-profit groups, to organizing teams for Alzheimer's and Autism Awareness, as well as the Out of the Darkness Suicide prevention walk, our caregivers consistently give back. Caregivers volunteer time to serve on non-profit community boards and they generously donate their hard-earned dollars towards efforts to assure stable health care access for future generations.

Community partnership is something we believe in and another non-financial benefit we provide the community. The Community Health Investment department partners with local foundations and funders via the North Coast Grantmaking Partnership to jointly support local projects and programs. We partner with Food for People - our area's food bank – by co-hosting food pantries at our Community Resource Centers in four micro-communities in outlying areas of Humboldt County – Loleta, Rio Dell, Blue Lake and Willow Creek. We also donate excess hospital food to churches and food-security organizations.

It is this selflessness and philanthropic spirit that binds this rural and isolated community together and enables us to care for the Dear Neighbor without distinction, just as our founding Sisters have done since 1912.



## 2022 CB REPORT GOVERNANCE APPROVAL

This 2022 Community Benefit Report was adopted by the Community Benefit Committee of the hospital on November 29, 2022. The final report was made widely available by November 30, 2022.

*Becky Giacomini*

11/29/2022

Becky Giacomini

Date

Chair, St. Joseph and Redwood Memorial Hospital Community Benefit Committee

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