

## FY 13 Community Benefit Report



*Fiscal Year 2013 Community Benefit Report  
St. Joseph Health, St. Joseph Hospital Eureka*

**Fiscal Year 2013 COMMUNITY BENEFIT REPORT  
PROGRESS ON FY12 - FY14 CB PLAN/IMPLEMENTATION STRATEGY REPORT**

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<sup>1</sup> Non-financial summary of accomplishments are referred to in SB 697 as non-quantifiable benefits.

## EXECUTIVE SUMMARY

### ***Our Mission***

*To extend the healing ministry of Jesus in the tradition of the Sisters of St. Joseph of Orange by continually improving the health and quality of life of people in the communities we serve.*

### ***Our Vision***

*We bring people together to provide compassionate care, promote health improvement and create healthy communities.*

### ***Our Values***

*The four core values of St. Joseph Health -- Service, Excellence, Dignity and Justice -- are the guiding principles for all we do, shaping our interactions with those whom we are privileged to serve.*

## ***Who We Are and Why We Exist***

Following a difficult journey across the country, nine teaching Sisters arrived in Humboldt County in June of 1912 in response to a request from the Northern California Catholic Bishop. The Sisters arrived from La Grange, Illinois with a few coins remaining from the funds given to them for their journey and a strong commitment to educate the children of the area. The Sisters traveled by train and finally by steam ship, the only mode of transportation in and out of this rural isolated county at the time. They started a school in Eureka, the largest town in the area, in August of 1912, and began teaching the children. In 1918, they were approached by the county's leaders and asked to go into the homes and care for the families stricken by the flu epidemic. The only hospital had been closed by the doctors' who owned it when they had left the area to minister to World War I casualties and the entire area was lacking in health care. The Sisters responded quickly and went out into the community, caring for the sick in their own homes, and temporarily opening the shuttered hospital for patients who required an increased level of care. At the end of the epidemic, the civic leaders requested the Sisters continue to operate the hospital, and the Sisters then spent months preparing the abandoned facility to be permanently reopened. The Sisters commitment to health care started with the flu epidemic, continued with the opening of the hospital permanently in 1920 and continues today with their ongoing mission to bring people together to provide compassionate care, promote health improvement and create healthy communities.

St. Joseph Health, St. Joseph Hospital Eureka (SJE), the hospital opened by the Sisters in 1920, continues to address the health care needs of the area through the provision of a full service, acute care hospital. The hospital is one of the most advanced on the North Coast and opened a new patient tower in November of 2012 to further enhance care delivery. The services include full service emergency room care from Emergency Medicine Certified physicians, cardiac care through the Heart Institute, orthopedic and sports medicine, complex eye surgery, neurosurgery, a fully accredited Cancer Program, Women and Children's Services and the only neonatal intensive care unit on the North Coast. SJE provides the community with both an outpatient and inpatient imaging centers, as well as pain management.

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The General Hospital campus is located only a few blocks from the main SJE campus and provides the community a medical inpatient rehabilitation center, endoscopy services, occupational medicine, outpatient laboratory services, a sleep disorder clinic and outpatient rehabilitation services. The campus also houses many of the support services needed to provide care on the North Coast including revenue cycle services, Paso a Paso, the SJE Foundation, IT support and Healthy Kids Humboldt staff.

SJE provides health care for all residents of Humboldt County and parts of Del Norte, Trinity and Mendocino Counties, all three counties with high rates of citizens with disproportionate unmet health care needs. The SJE community benefit activities and priorities address the needs of the most isolated, underserved areas of these counties and the populations living in them. The activities include addressing the unmet mental health needs of the growing numbers of Latino families, addressing the continuing health access needs of the homeless and most vulnerable, providing food assistance and resources to families facing food insecurity and providing outreach and education on the value of health screening and early prevention activities.

#### *FY13 Community Benefit Investment*

St. Joseph Hospital Eureka provided \$23,433,568 in community benefit activities in FY13 and an additional \$19,471,652 for the unpaid cost of Medicare.

#### *Overview of Community Needs and Assets Assessment*

St. Joseph Health- St. Joseph Eureka partnered with St. Joseph Health, Redwood Memorial to complete a Community Health Needs and Assets Assessment (CHNA) in 2011. The CHNA followed the same process SJE and RMH had used in six (6) prior assessments, organizing and summarizing existing secondary documents and primary data collected from a broad spectrum of community resources and citizens. The four priority focus areas for the Community Benefit Plan were selected from the data collected after an evaluation by the full Community Benefit Committee. The CHNA highlighted the concern the community members had about food insecurity, about access to both medical and mental health resources for the Latino population and the large homeless population, and the difficulty citizens have accessing health education and resources in the outlying areas of the large geographic area served. The Community Benefit Committee reviewed the CHNA, received input from staff, reviewed the capacity of SJE to address the needs and selected these four topics for the focus areas. The other needs were evaluated by the Committee were not selected as focus areas for reasons that included other organizations were better suited to address the issue, other organizations had previously taken the lead to address the issue, SJE did not have the resources to adequately address the need or the issue was outside the scope of the ministry's mission.

## *Community Plan Priorities/Implementation Strategies*

The Community Needs and Asset Assessment of 2011 areas of focus chosen by the Community Benefit Committee are:

- **Access to education and health screenings:** The isolation of the region increases the need for health outreach activities that assure that all citizens of the county have the ability to receive needed education. By formalizing partnerships with Humboldt Medical Specialists, the American Cancer Society, and Evergreen Lodge, SJE will provide all newly diagnosed cancer patients with personalized books containing information specific to their disease process. Cancer screenings will be offered free of charge to the county residents through Humboldt Medical Specialists and community physicians, both during SJE's sponsored health fairs and in scheduled weekend clinics, with 100% who had abnormal screening results referred for follow up care. Education and information will be provided to the isolated regions of the service delivery area through outreach activities targeted to reach individual citizens through a variety of activities.
- **Food Insecurity:** Humboldt County has a high percentage of families that state they are food insecure and yet Humboldt has a far reaching network of food pantries. A survey was conducted in 2012 to determine why there continues to be the disconnect between the resources (the pantry network/Cal Fresh) and the families. SJE, partnering with RMH, commissioned a food survey through the California Center for Rural Policy in partnership with Food for People, the county wide network of food resources. The survey provided information to further understand how to improve access and increase the enrollment of families into the Cal Fresh programs.
- **Mental Health Access for the Latino Community:** There are few resources for mental health access in Humboldt County and no counseling resources for an individual that only speaks Spanish. The growing Latino population has suffered from the inability to address mental health needs and, SJE will increase the number of culturally and linguistically appropriate mental health and behavioral health resources. SJE is partnering with RMH and community organizations to address this community wide deficit.
- **Access to Care:** There continues to be a large homeless population in Humboldt County who seek the majority of their medical interventions from SJE's full service emergency room. The Care Transition Team, Humboldt State's California Center for Rural Policy, the Robert Wood Johnson Foundation, Open Door Community Health Centers, the Community Resource Centers, Healing Ring, and the Serenity Inn will partner to improve the care for this transient population. The partnership will provide shelter, medications, food and transportation to improve health by decreasing avoidable bed days and use of the emergency room for non-emergent health care needs.

## INTRODUCTION

### *Who We Are and Why We Exist*

St. Joseph Health, St. Joseph Hospital Eureka is a ministry of St. Joseph Health, Orange California and was the founding hospital in this larger system. Established in 1920, the hospital is in the 93rd year of health care provision for the most northern coast of California. The Sisters of St. Joseph of Orange arrived in the area in 1912 to educate the children and began their ministry to the sick during the 1918 flu epidemic. The epidemic brought attention to the lack of health care for the region and the Sisters responded by reopening the empty hospital in Eureka in 1920. The Sisters 101 years in the community is honored through the continuing of education of the children in the school they opened in August of 1912 and the continuing provision of quality health care at St. Joseph Hospital Eureka.

Today, St. Joseph Hospital Eureka cares for patients from Humboldt County and parts of Del Norte, Trinity and Mendocino counties through its full service acute care facility, employing nearly 1,000 individuals to do so. SJE strengthens its own ability to meet the needs of the people served by continually partnering with community organizations to address the mission of the Sisters of St. Joseph of Orange – go out into the community, listen to the needs of the people and address those needs. SJE meets that mission by providing health care in a region that has a very high rate of citizens with disproportionate unmet health care needs, and identifies the entire county and parts of the neighboring counties for community benefit activities, with a special focus on those that live in the more isolated regions.

- St. Joseph Hospital-Eureka has partnered with the American Cancer Society (ACS), the fully accredited SJE Cancer Program, St. Joseph Health - Redwood Memorial Hospital, Humboldt Medical Specialists, Humboldt State University California Center for Rural Policy and area physicians to **increase access to health education for the community**. SJE, through the ACS, provides each newly diagnosed cancer patient with a notebook individualized to address the patient's cancer diagnosis. The books are distributed by an oncology social worker who has an office at Evergreen Lodge. The Lodge provides housing for oncology patients who travel to SJE to receive treatment from the fully accredited Cancer Program. The Lodge was built in collaboration with the American Cancer Society, the College of the Redwoods building trades, the Southwest Rotary and SJE. The Lodge is a wonderful example of how multiple organizations can come together to meet a defined community need, the need to assist patients who did not have the resources to travel for their oncology treatment. The social worker, in fiscal year 2012, became more directly involved in the care of the oncology patients when her job duties were expanded to include evaluating the social/psycho needs of all cancer patients and assuring they were offered the resources to address these needs. As part of the team of resources available to the patient, the social worker sits on the Cancer

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Committee and attends the weekly cancer tumor boards, reporting needed educational needs to the Community Benefit Area Director.

St. Joseph Hospital – Eureka provides assistance to area physicians and Humboldt Medical Specialists to provide health screenings for community members. The screenings were held in 2012 at both Redwood Memorial and SJE's community wide health fairs and in scheduled clinics open to all community members. Humboldt Medical Specialists dermatology office sponsored a weekend screening where 39 patients were screened for skin cancers and all patients who had adverse results were referred for medical follow up. A SJE sponsored county wide health fair was held in February and 5,500 people attended, with screenings provided to 249 individuals for blood sugar, 135 for bone density, 100 for BMI and 348 for blood pressure. All those screened who had abnormal test results were referred to physicians for follow up care.

In collaboration with Humboldt State University's California Center for Rural Policy and the Robert Woods Johnson grant, SJE provided space for a six week patient focused education series, assisting patients to learn to take control of their medical needs. In addition, CCRP is the lead in the effort to increase the number of community members who receive colon cancer screenings.

- St. Joseph Hospital- Eureka partnered with St. Joseph Health, Redwood Memorial, the California Center for Rural Policy and Food for People (the area's food bank) to determine why a high percentage of single mothers report their children go to bed each night hungry. The survey respondents, 1,127 families, provided information to assist SJE, in partnership with RMH, in a community wide effort to **address the food insecurity** of the area. Food for People has a system of 15 food pantries, spread throughout Humboldt County, that provide access to food, yet parents, when surveyed, reported food insecurity is on the rise. Cal Fresh, California's food stamp program, is not used by 50% of the local families eligible to use them, and the survey respondents reported confusion about eligibility requirements and how to enroll. Findings from the survey also showed the heads of the household lack the knowledge of affordable food resources. The lack of knowledge equated to reported high levels of stress from a feeling of inadequacy to provide for their families and was leading to high level of depression in the surveyed families.

SJE strengthened their community partnerships to address this issue, becoming a part of a community wide effort to increase the use of Cal Fresh and increase the knowledge of families on how to access the available food resources. The Community Benefit Committee offered grants to community organizations for food, partnered with SJH's Community Funding Partnership for additional grant dollars to community food programs, partnered on a Cal Fresh outreach county wide grant, and used the Community Benefit Programs of both SJE and RMH to increase access through food pantries and Cal Fresh enrollments. These steps resulted in 294 families applying for Cal

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Fresh, 7,665 distributions of commodities and the provision of 1,261 weekend food back packs to the area's school children. In December of 2012, the Community Needs Network of the Community Benefit Committee (the subcommittee charged with allocating Care for the Poor funding) awarded grants to 7 local organizations that provide food services to the poor. The grants ranged from \$20,000 for Food for People to continue the Farm to Family produce distribution throughout the county to \$5,000 to Arcata House for food resources for Arcata's homeless population. In FY 13, Food for People's Free Produce markets were funded by the Community Needs Network grant and the markets provided 151,007 pounds of free produce to 3,333 low income homes with 10,379 individuals. The markets were held in the cities of Eureka and Fortuna, as well as the isolated communities of Garberville and Redway.

- St. Joseph Hospital Eureka partners with many local community organizations to address the needs of the growing Latino population. In partnership with RMH, SJE provides services to the population through the Paso a Paso and Healthy Kids Humboldt programs. These programs provide child birth education, doula support, parenting classes, breast feeding support and assistance in enrollment assistance for Cal Fresh, insurance and WIC. The ten staff members compose the largest group of Spanish speaking staff in the County and are often approached by other community organizations to assist in outreach activities to the population they serve.

The staff is often the only source of support for the families and for community organizations who are trying to work with them. To address the need, the staff has become available to respond beyond the scope of their written job duties. This includes listening to the frustration and anxiety from the families and the other organizations on the lack of **mental/behavioral health resources for those whose only language is Spanish**. The staff sought support from a Spanish speaking Catholic priest who became the only resource for mental health support for both the population and the staff that was overwhelmed in attempting to address the lack. The Community Benefit Committee saw the need in the CNHA and responded by including this area of focus in the planning of community benefit activities.

Telecommunication equipment was purchased through a grant with North Coast clinics Network and Open Door Community Health Centers and placed in the General Hospital campus to be used by Paso a Paso and Healthy Kids Humboldt. The staff was educated on how to use the equipment and conversations were begun with outside counseling resources to provide counseling via this communication equipment. The Community Needs Network awarded a second year of funding to Open Door Community Health Center with an \$18,000 grant for of a Spanish speaking counselor. SJE also funded an agreement with Sonoma County's Catholic Charities to provide immigration support to the families as another resource to decrease the anxiety concerning the issue.

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SJE provided funding to the Department of Public Health, Maternal and Child Services to translate a video on postpartum depression into Spanish. Maternal Child Services had received feedback from local care providers that postpartum depression was a growing concern for the population and there were no tools available in Spanish. Paso a Paso staff assisted with the translation of the video and in June of 2013, the final version was made available as a tool to assist the new mothers.

- St. Joseph Health- Eureka is often the source of all health care for the area's 5,000 County Medical Services Provider (CSMP) eligible citizens. Of the 3,300 county residents actively enrolled in CSMP, the applications reflect the majority of them are homeless. These homeless use SJE's emergency room as their primary source of medical care, and if they become inpatients, stay longer than housed individuals as they lack the ability to receive follow up care post discharge. To address this, SJE received a CSMP grant to hire a social worker and nurse team to provide case management to assist these patients with their discharge care needs.

The team required the resources to provide for the patients, including housing, medications and supplies. To address this, the Community Benefit Committee agreed to provide assistance through contracts with both the Serenity Inn and Healing Ring for beds, local pharmacies for medications and supplies, using internal Budget Philosophy operations dollars to pay for them. The program goal for FY 13 was to decrease the acute care bed days **by 190 and the actual decrease was 782**, an amazing 412% higher than expected decrease. The CSMP team is a partner in the work with the Care Transition Program, a program that is part of the county-wide Robert Woods Johnson Aligning Forces for Quality funding. Humboldt is one of only 14 RWJ programs in the United States and recently was notified that funding will continue for round four for services to this population. Partners in the work include the Independent Physician Association, California Center for Rural Policy and Open Door Community Health Centers. RMH's Community Resource Center coordinators also are strong partners, addressing the health care needs of the homeless prior to the need for emergency room or acute care.

The Care Management department of SJE began a project in FY 13, partnering with the local skilled nursing facilities to provide beds for homeless acute care patients who required a higher level of care than could be provided by the Serenity Inn or the Healing Ring. The partnership included hiring a nurse, also through Budget Philosophy dollars. The nurse provides case management to the patients during the acute care stay and follows them to the skilled nursing facility to continue case management until discharge. This case management was a necessary component of the high level of support the patients needed, support the local skilled nursing facilities did not have the capacity to provide. Prior to this project, the skilled nursing facilities denied these high need patients a bed in the facilities for fear their individual needs could not be met. In FY 13, 41 patients were served and the team estimates a saving of 81 acute care bed days.

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The Alcohol and Drug Care Services provides the only detox beds for individuals in the community and was in danger of closing for one month, due to lack of funding prior to beginning of the new fiscal year. SJE's Community Benefit department utilized funds set aside for the work with the homeless to provide a grant to assure no loss of this vital service for the month.

### *Community Benefit Governance and Management Structure*

St. Joseph Hospital, Eureka has a Board of Trustees that appoints a Community Benefit Committee (CBC) to guide the planning, development, implementation and evaluation of community benefit activities. The CBC is chaired by a Trustee and contains members of St. Joseph Health, Eureka executive management team, community benefit staff, a representative from the hospital's finance department, representatives from community organizations and community citizens. The CBC has Board approved by-laws, charter and policies defining their work. The Board of Trustees receives monthly or quarterly written reports on Community Benefit activities and programs, a yearly presentation from the Area Director of Community Benefit and verbal reports after each meeting by the CBC Trustee Chair. The Chair carries forward to the full board recommendations for programs, initiatives and funding that have been approved by the full CBC at their meetings.

The Vice President of Mission Integration is a member of the Community Benefit Committee and is the liaison between the CBC and the executive management team. The Vice President of Mission Integration provides the committee with management support and assures the Community Benefit Plan is in alignment with the strategic goals of St. Joseph Health. The Area Director of Community Benefit and the Care Transition Manager are members of the CBC and are active members of the Area Management Team, a team that reviews and supports the St. Joseph Health strategic plan.

## *PLANNING FOR THE UNINSURED AND UNDERINSURED*

### *Patient Financial Assistance Program*

We believe no one should delay seeking needed medical care because they lack health insurance. That is why St. Joseph Health, Eureka has a **Patient Financial Assistance Program (FAP)** that provides free or discounted services to eligible patients. In FY13, St. Joseph Health-Eureka provided \$2,056,060 in charity care.

One way St. Joseph Health, Eureka 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

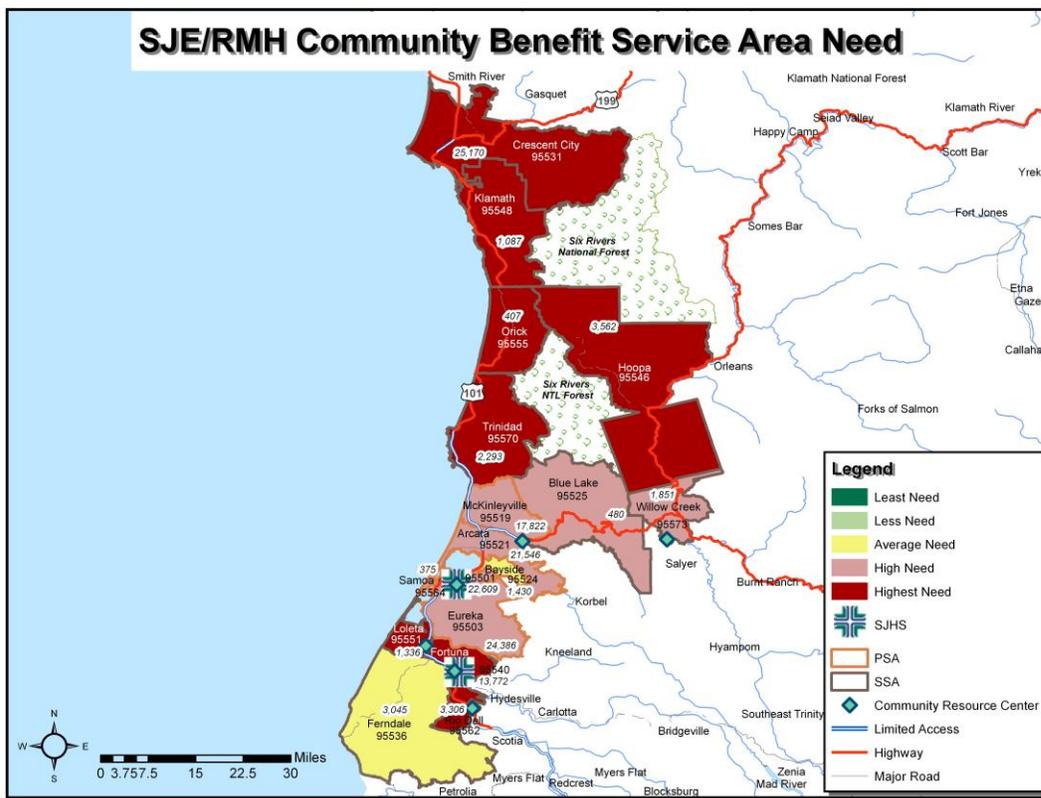
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and any other languages that are representative of 5% or greater of patients in the hospital's service area. All patients who demonstrate lack of financial coverage by third party insurers are offered an opportunity to complete the Patient Financial Assistance application and are offered information, assistance, and referral as appropriate to government sponsored programs for which they may be eligible.

**COMMUNITY**

*Defining the Community*

Humboldt County has an estimated population of 134,827 citizens living in an area of 3,568 square miles. There are only 38 individuals living per square mile in comparison to the average of 239 throughout all of California. The geography of the county includes 80% of all land set aside for forestlands, protected redwood forests and recreational State and Federal park lands. The remaining 20% of available land is spread over the entire region, showing the potential isolation of many of the 134,827 residents from routine support services. Eureka, the county seat has almost 20% of the entire population with 26,961 citizens. With Eureka, the total population of the other cities Arcata (17,248) and Fortuna (11,836) and the unincorporated community of McKinleyville (15,177) along Highway 101 in the Humboldt Bay region have over 53% of the total population for the county.



## **COMMUNITY NEEDS ASSESSMENT PROCESS AND RESULTS**

### ***Summary of Community Needs Assessment Process and Results***

St. Joseph Health, Eureka partnered with St. Joseph Health, Redwood Memorial to complete a Community Need Health Assessment (CNHA) in 2011. The CHNA followed the same process used in six (6) prior assessments, organizing and summarizing secondary documents and primary data collected from a broad spectrum of community resources and citizens.

It is important to understand the isolation of Humboldt's unincorporated communities when reviewing the priority areas selected for focus by the SJE CBC. The data collected for the CHNA is one resource for the selection but an understanding of the weather conditions, the road conditions, the poverty rates of the area and the isolation of many of the smaller unincorporated regions is another important resource. The region has levels of very high unemployment and areas of low, with the unemployment rate for April 2012 at 8.4% for the entire county. Ferndale (1,372) to the south has the lowest rate and Rio Dell (3,250) has the highest, making it important that outreach activities be focused on the communities with the higher need. Fuel prices in California average \$3.89 per gallon in April of 2012 and for Humboldt County, the average was \$4.13. With the adverse road conditions in the more isolated regions added to the high poverty rates, low income residents have difficulty traveling to the Humboldt Bay region where the majority of all health care services are delivered. There is little or no public transportation and residents that can afford to purchase a car often cannot afford insurance or fuel for it. The US Census Bureau reports that 18.4% of all Humboldt County citizens are living below the poverty line, an increase of 4% from the same time last year. The median household income is \$40,376 compared to the State median of \$61,632 and with unemployment, high fuel prices and extreme isolation, transportation is a constant financial drain on all area residents.

For children living in poverty, the variation from community to community is even more telling. In 2010, there was a county wide 52.6% rate for free and reduced lunches in the area's schools. The numbers vary from school to school, with two schools within Eureka City limits as an example having a 33% (Washington Elementary School) and only two miles away, a 79% (Alice Birney Elementary School) rate. In the more outlying areas served by SJE, Trinity Valley Schools in eastern Willow Creek have an 85% rate. The children's needs fluctuate from community to community as do the resources needed to address them.

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The secondary service areas of Del Norte, Mendocino and Trinity counties have high rates of poverty and unemployment, putting a strain on SJE as the only full service acute care hospital available to fully address the health care needs. The US Census Bureau notes the poverty rate for Del Norte County is 22%, for Trinity County 17.6% and for Mendocino County 17.8%. The data for free and reduced lunches show that 69.7% of all Del Norte Unified School District students are eligible, 61% of the students in Trinity County and 69.4% in the Mendocino County school district.

The assets of Humboldt and the surrounding counties are reviewed as part of the CHNA process and when setting community benefit activities, as SJE realizes that no one entity can address far reaching issues without community relying on community strengths. Partnerships are one of the primary strengths of the entire SJE region with partnerships crossing county borders and partners coming together to address community needs. These partnerships include the California Endowment, Robert Woods Johnson, the Independent Physicians Association, California Center for Rural Policy, the Food Policy Council, Open Door Community Health Centers, county and small local school districts, St. Joseph Health – Redwood Memorial Hospital, American Cancer Society, the Humboldt Area Foundation, the Wild Rivers Foundation – the list can go on and on with names of organizations that come together to address the health care needs of the counties SJE serves. SJE believes these partnerships provide the additional support needed to address the identified community needs.

St. Joseph Health, Eureka anticipates that implementation strategies may change and therefore, a flexible approach is best suited for the development of its response to the St. Joseph Health, Eureka CHNA. For example, certain community health needs may become more pronounced and require changes to the initiatives identified St. Joseph Health, Eureka in the enclosed CB Plan/Implementation Strategy.

*Identification and Selection of DUHN Communities*

Communities with Disproportionate Unmet Health Needs (DUHN) are communities defined by zip codes and census tracts where there is a higher prevalence or severity for a particular health concern than the general population within our ministry service area.

### DUHN<sup>2</sup> Group and Key Community Needs and Assets Summary Table

DUHN Population Group or Community	Key Community Needs	Key Community Assets
Low income individuals who do not have access to appropriate housing and community based health care	Access to community based health care	Strong coordination between organizations and systems working to address needs
Hispanic population of Humboldt County	Access to culturally appropriate mental and behavioral health resources	Strong connection to church, clinic network, school and hospitals
Households with incomes below the federal poverty level with children living in the home	Access to affordable, nutritious food	County-wide community and program support through Food for People, local food pantries and Cal Fresh outreach project of the California Center for Rural Policy
Low income geographically isolated individuals without coverage for prevention and treatment services	Access to information and education on prevention and treatment	Effective prevention and treatment community partnerships

### Priority Community Health Needs

St. Joseph Health, Eureka prioritized the following four issues from the CHNA to be addressed through Community Benefit Activities for FY13: Access to Care (reduction of inappropriate readmits to SJE, for patients of the St. Joseph Care Transition Team and Eureka Community Resource Center), Mental Health resources for the Latino Community (build a mental/behavioral health service infrastructure for the low income Latino populations of Humboldt County), Food Security in Humboldt County (improve the food security of low income singles women with children under the age of 18) and Access to Education and Health Screenings (increase access to cancer preventative awareness and treatment services),

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<sup>2</sup> “Communities with DUHN generally meet one of two criteria: *either* there is a high prevalence or severity for a particular health concern to be addressed by a program, or there is evidence that community residents are faced with multiple health problems and have limited access to timely, high quality health care (Advancing the State of the Art in Community Benefit (ASACB) User’s Guide for Excellence and Accountability, 2004).”

“Communities” may be neighborhoods or population groups. *For more information, please refer to Appendix 1: DUHN Population Criteria.*

## **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 continue our Mission through community benefit program and by funding other non-profits through our Care for the Poor Program managed by St. Joseph Health, Eureka.

Furthermore, St. Joseph Health, Eureka will endorse local non-profit organization partners to apply for funding through the [St. Joseph Health, Community Partnership Fund](#). Organizations that receive funding provide specific services, and resources to meet the identified needs of underserved communities through St. Joseph Health communities.

The following community health needs identified in the ministry CHNA will not be addressed and an explanation is provided below:

**Infrastructure:** The needs of the isolated regions for improved roads and highways are outside the scope of SJE and are being addressed by the County of Humboldt. This is also true for the high fuel costs of the region.

**Employment:** The high unemployment rate for careers beyond the tourist industry is being addressed by local Chambers of Commerce, Humboldt State University and College of the Redwoods and is an issue outside the Mission of SJE.

## ***COMMUNITY BENEFIT PLANNING PROCESS***

### ***Summary of Community Benefit Planning Process***

The four priority focus areas for the Community Benefit Plan were selected from the data collected after an evaluation by the full CB Committee. The CB Committee reviewed the CHNA, received input from staff, reviewed the capacity of St. Joseph Hospital to address the needs and selected four topics for the focus areas. The CB Committee heard the concern of community members about food insecurity, about access to both medical and mental health resources for the Latino population and the large homeless population, and the difficulty citizens have accessing health screening and education resources in the outlying areas of the large geographic area served. Therefore, these were the four priority areas of focus chosen by the CB Committee.

## St. Joseph Health-Eureka

### FY12 – FY14 Community Benefit Plan/Implementation Strategies and Evaluation Plan

### FY13 Accomplishments

The SJE Community Benefit priority initiatives are as follows: Access to Care, Access to Education and Health Screenings, Mental Health resources for the Latino community and Food Security in Humboldt County. Below is a summary of the initiatives and the FY13 accomplishments.

**Initiative:** Access to Care

**Description:** St. Joseph Health, Eureka is partnering with community organizations to address the rate of inappropriate readmits to SJE for patients of the Care Transition Team and the Eureka Community Resource Center.

**Key Community Partners:** The partners in this effort include, yet are not limited to, SJH, Redwood Memorial Hospital, Serenity Inn, North Coast Clinics Network, Open Door Community Health Centers, Homeless Court, Eureka Rescue Mission, St. Vincent de Paul, and the Healing Ring.

**Goal (Anticipated Impact<sup>3</sup>):** Reduce inappropriate readmits to SJE for patients of the Care Transition Team and the Eureka Community Resource Center.

**Target Population (Scope):** Homeless persons of the communities served by Care Transition and the Eureka Community Resource Center

**How will we measure success? Outcome Measure (Evaluation Plan<sup>4</sup>):**

Increase of avoidable bed days for patients of the Care Transition Team and the Eureka Community Resource Center.

**Three-Year Target:** 200 avoidable bed days over the three year period

**Strategy 1:** Number of pre-acute options available in Humboldt County

**Strategy Measure 1:** Number of pre-acute options

- Goal of 20 total pre-acute options available in the community in FY13. Pre-acute care options for the homeless include case management, medication, transportation, food, shelter and/or a medical home that would keep them from having to return to the hospital through ED and UC to get service. Goal met.

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<sup>3</sup> **Anticipated Impact** is equivalent to **Goal**. Language is used for clarity with regard to IRS Proposed Rule (2013)

<sup>4</sup> **Evaluation Plan** is equivalent to **Outcome Measure**. Language is used for clarity with regard to IRS Proposed Rule (2013)

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**Initiative:** Access to Care (Continued)

**Strategy 2:** Increased use of Care Transition Program support services for high users

**Strategy Measure 2:** Number of patients who receive services from Care Transitions

- Goal of 80 patients enrolled in the Care Transitions in FY13. Goal was exceeded with 89 patients enrolled in this program.

**Strategy 3:** Increase capacity for safe residential options for high users of services

**Strategy Measure 3:** Number of residential beds available to high users

- Goal is to have 10 beds in residential facilities in FY13. Goal was exceeded with 11 bed options in the community.

**FY13 Accomplishments:**

The Robert Wood Johnson grant provided additional funding in FY 13 to hire and place a nurse in the emergency room. The grant, labeled Super Utilizer, includes strengthening the Care Transition Team's ability to evaluate patients for case management support immediately at the point of access. The process also strengthened the commitment between SJE and Open Door Community Health Centers to identify the patients who truly were existing Open Door patients from those who required a primary care provider. Open Door and the Care Transition Team began to hold face to face case meetings to assure that the patient was receiving the coordinated care required to address their health issues and assist the patients without follow up care to receive it.

SJE funded a new case manager to follow the patients from the hospital into a skilled nursing facility bed. The case manager was required for specific patients who required the follow up only available at the skilled nursing level, yet no care facility would accept them. There have been times when patients who required IV therapy at home, yet had no home, remained in the hospital for long periods of time simply to receive one or two infusions per day. The care facilities were concerned about the level of mental health needs of the population and discharge planning follow up once the patient recovered enough to return 'home'. The skilled facilities did have the staffing level or expertise to address the patient needs. The case manager has an expertise in psychiatric follow up and a psychiatrist is also available for higher levels of intervention. The original agreement was to provide this level of care to only one skilled nursing facility and it was determined the patient and the facilities benefited more if the arrangement covered multiple ones. From the idea that SJE would purchase one bed in a skilled nursing facility has grown a program where all local facilities share the responsibility to provide care for this higher need patient, with 41 patients spending 4,046 SNF days not available to them prior to the program's inception.

*FY13 Community Benefit Report – Revised 8.2015*

**Initiative:** Access to Care (Continued)

### **FY13 Accomplishments:**

The Care Transition Team and the SJH-RMH Community Resource Center have worked together with the community to decrease the number of acute care bed usage **by 782 in FY13**. This far exceeds the target set three years ago when it was believed that only **190 bed** days could be saved in fiscal year 13. The program has been so successful that in FY13, staff previously funded through grant dollars is funded completely by the hospital itself and the hospital administration places a high level of respect and support for the outcomes generated for the targeted population served.

## **FY12 – FY14 Community Benefit Plan/Implementation Strategies**

### **FY13 Accomplishments**

**Initiative:** Access to Education and Health Screenings

**Description:** SJE is committing time and resources to increase the access to cancer preventative awareness and treatment services for all residents of the defined service areas.

**Key Community Partners:** The partners in this work includes, not limited to, American Cancer Society, Physicians, Humboldt Medical Specialists, SJE Regional Cancer Program, Paso a Paso, St. Joseph Health-Redwood Memorial Hospital, Community Resource Centers, Evergreen Lodge, Public Health, Latino Net, Breast Health Project, California Center for Rural Policy, Redwoods Community Action Agency

**Goal (Anticipated Impact<sup>5</sup>):** Increase access to cancer preventative awareness and treatment services

**Target Population (Scope):** Low income geographically isolated individuals without coverage for prevention and treatment services

**How will we measure success? Outcome Measure (Evaluation Plan<sup>6</sup>):** Number of prevention education activities and free screenings offered to low income

**Three-Year Target:** 6 partnerships established and 26 training events occurred

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<sup>5</sup> **Anticipated Impact** is equivalent to **Goal**. Language is used for clarity with regard to IRS Proposed Rule (2013)

<sup>6</sup> **Evaluation Plan** is equivalent to **Outcome Measure**. Language is used for clarity with regard to IRS Proposed Rule (2013)

*FY13 Community Benefit Report – Revised 8.2015*

**Initiative:** Access to Education and Health Screenings (Continued)

**Strategy 1:** Develop partnerships

**Strategy Measure 1:** Number of partnerships developed

- Goal for FY13 was to add one additional partnership. A formal partnership was finalized with Humboldt State University's California Center for Rural Policy to join forces with their Aligning Forces work to bring an increase to colon cancer screenings to all areas of the county. Goal met.

**Strategy 2:** Provide education to the community on the importance of cancer screenings and early detection

**Strategy Measure 2:** Number of education events or access points

- Goal for FY13 was to add information on cancer screening and early detection to the Aligning Forces website site. Goal met.

**Strategy 3:** Provide resources to patients/families on cancer prevention/screenings

**Strategy Measure 3:** Number of resources provided

- Goal for FY13 was to provide four resources to the community. Two health fairs provided free cancer screening; a social worker was hired for the Cancer program to work with patients and meet their needs; free mole check provided by Dr. Dana at his office; and head and neck cancer screening made available at the Arcata farmer's market. Goal met.

**Strategy 4:** Referrals to doctors for abnormal results

**Strategy Measure 4:** Number of people referred to treatment

- Goal for FY13 was 100% referral of abnormal results to physician for follow up. Goal met.

**FY13 Accomplishments:**

The Bay Shore Mall Community Health Fair was held in FY 13 after a one year cancellation. In February of 2013, over 5,000 people came to the Bay Shore Mall to receive health information and obtain screenings. The screenings included access to low cost lab draw coupons for patients who are uninsured and were unable to obtain labs ordered by their physicians. The attendees were able to receive blood sugar testing, mole checks, blood pressure and bone density screenings, as well as health information from 91 educational stations, including 39 from SJE/RMH, 38 from community non-profits and 14 from local for profit partners whose mission is to assist patient health care. For rural Humboldt County, the health fair is often the only event that provides low income patients and families ease of access to multiple community resources and screenings.

*FY13 Community Benefit Report – Revised 8.2015*

**Initiative:** Access to Education and Health Screenings (Continued)

### **FY13 Accomplishments:**

The area physicians began to provide screening clinics on weekends as well as ‘Walks with the Doc’. The screenings enabled individuals to have skin/mole screenings at no cost with 100% of those with abnormal results referred immediately to the physician for follow up care. The walks brought individual patients into an environment that allowed them increased comfort with the physicians, the ability to ask individual questions and the information they needed to obtain care for health related concerns.

SJE collaborated with the Arcata Farmer’s Market to provide head and neck examinations as community education and prevention during Oral, Head and Neck Cancer Awareness Week. The event was held in conjunction with the weekly Saturday market and 53 individuals received written information and 22 individuals had head and neck exams completed. All that had abnormal results were referred for follow up services by the two doctors and one nurse practitioner who provided the screenings.

SJE continues their relationship with the American Cancer Society for access to directed patient information for those patients that are newly diagnosed with cancer. The ACS provides individual books with information on the specific diagnosis to the Oncology Social Worker who hands these books out to the patients when meeting them for follow up needs. The Social Worker hours were increased from .2 to .6 FTE to assure that the patients had access to the social, emotional support services needed to begin to adjust to the new diagnosis.

## **FY12 – FY14 Community Benefit Plan/Implementation Strategies**

### **FY13 Accomplishments**

**Initiative:** Mental Health resources for Latino community

**Description:** SJE is partnering with community organizations within the service area to develop and deliver mental and behavioral health services to the Latino community

**Key Community Partners:** Latino Net, North Coast Clinics Network, Open Door Community Health Center, Paso a Paso, Public Health, SJH-Redwood Memorial Hospital, Loleta Community Resource Center, Humboldt Area Foundation, Redwood Community Action Agency, Healthy Kids Humboldt, Catholic Charities of Sonoma County, Sacred Heart Church

**Goal (Anticipated Impact<sup>7</sup>):** Build a mental/behavioral health service infrastructure for the low income Latino population of Humboldt County

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<sup>7</sup> **Anticipated Impact** is equivalent to **Goal**. Language is used for clarity with regard to IRS Proposed Rule (2013)

*FY13 Community Benefit Report – Revised 8.2015*

**Initiative:** Mental Health resources for Latino community (Continued)

**Target Population (Scope):** The low income Latino population of Humboldt County

**How will we measure success? Outcome Measure (Evaluation Plan<sup>8</sup>):** Increase the number of culturally and linguistically appropriate mental and behavioral health resources available for the low income Humboldt County Latino populations

**Three-Year Target:** 6 culturally and linguistically appropriate resources available in the community

**Strategy 1:** Partner with Mobile Medical Office for increased training of promotoras on mental and behavioral health interventions

**Strategy Measure 1:** Number of trained promotoras

- FY13 goal was to train four additional promotoras. All six of the Paso a Paso staff and the two Healthy Kids Humboldt staff have been trained. Goal exceeded.

**Strategy 2:** Provide telehealth for mental/behavioral health access for the Latino population

**Strategy Measure 2:** Tele-health connectivity to Spanish speaking mental and behavioral counselors

- FY13 goal was to have Telehealth equipment at four SJH-HC locations. Equipment installed at Eureka, Loleta and Willow Creek Community Resource Centers and also at the General Hospital Campus of Paso a Paso. Goal met.

**Strategy 3:** Provide education on the use of the equipment

**Strategy Measure 3:** Participants will show increased awareness of mental and behavioral health services available in the community

- FY13 goal was to have at least two trainings on use of the equipment and how to access mental health resources. Open Door provided individual trainings to our staff on three different occasions. Goal exceeded.

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<sup>8</sup> **Evaluation Plan** is equivalent to **Outcome Measure**. Language is used for clarity with regard to IRS Proposed Rule (2013)

*FY13 Community Benefit Report – Revised 8.2015*

**Initiative:** Mental Health resources for Latino community (Continued)

**FY13 Accomplishments:**

SJE partnered with the North Coast Clinic Network to obtain tele-health equipment and with Open Door Community Health Center for training. The partnership resulted in tele-health equipment for the SJE General Hospital campus being placed for the staffs of Paso a Paso and Healthy Kids Humboldt to use for their Spanish speaking clients. The staff met with Open Door IT staff to learn how to utilize the equipment and was provided access to all services Open Door offers through their own widely acclaimed tele-health network of service providers.

The SJE Area Director of Community Benefit met with Open Door to begin to develop access to University of Southern California (USC) Spanish speaking counselors for the growing Latino population. The SJE area is now served by one Spanish speaking counselor with Care for the Poor funding from SJE to Open Door to provide this service through the Federally Qualified Clinic. By developing the relationship with USC, SJE will strengthen the tele-health mental health resources for the population and increase access to other health care needs the population requires without the added burden for families to drive the 600 miles to USC itself.

The formal partnership with Catholic Charities of Sonoma County brought an increase in immigration support to the Latino families with various processes tested for the population served. After a year of testing the ability of the Latino families to access the immigration support through set appointments, additional efforts will be the focus in FY 14 to further streamline the process for the families. The stress of immigration issues is reported by staff working with the families to be one of the primary sources of the mental and behavioral health issues in the homes.

**FY12 – FY14 Community Benefit Plan/Implementation Strategies****FY13 Accomplishments**

**Initiative:** Food Security in Humboldt County

**Description:** Single parents in Humboldt County report that their children go to bed hungry, yet the schools and the local food pantries focus heavily on enabling the families to easily obtain needed food. SJE is focusing efforts to increase the awareness of resources for the families to assure all area children are provided nutritious food.

**Key Community Partners:** SJE partners with SJH-RMH, California Center for Rural Policy, Food for People, community food pantries, WIC, Community Resource Centers, Humboldt Food Policy Council, Humboldt Communities for Activities and Nutrition, Healthy Kids Humboldt, Humboldt County Office of Education, schools, Boys and Girls Club, Public Health and the Department of Health and Human Services to address food security.

**Initiative:** Food Security in Humboldt County (Continued)

**Goal (Anticipated Impact<sup>9</sup>):** Improve the food security of low income single women with children under the age of 18

**Target Population (Scope):** Single women with children under the age of 18

**How will we measure success? Outcome Measure (Evaluation Plan<sup>10</sup>):**

Percent of low income single mothers with children under the age of 18 reporting food insecurity out of total mothers reporting.

**Three-Year Target:** Reduce from 60% to 54% of single mothers with children reporting food insecurity

**Strategy 1:** Coordination among with target population

**Strategy Measure 1:** # of coordination activities

- Goal for FY13 was to add two partnerships to the original working group. We added partnerships with schools in the communities of Rio Dell, Willow Creek, Loleta and Blue Lake to add or enhance a community garden. Goal exceeded.

**Strategy 2:** Develop plan for improved use of services to decrease food insecurity

**Strategy Measure 2:** Plan written

- Goal for FY13 was to apply for CalFresh funding and articulate in that application a plan for decreasing food insecurity via increased outreach and enrollment of target population in CalFresh. Goal met.

**Strategy 3:** Implement plan

**Strategy Measure 3:** Implementation delivery of plan steps

- Goal for FY13 was to evaluate the success of three implementation steps. Use of the bicycle blender, a community dinner in Blue Lake and the Willow Creek food pantry were all evaluated in this fiscal year. Goal met.

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<sup>9</sup> **Anticipated Impact** is equivalent to **Goal**. Language is used for clarity with regard to IRS Proposed Rule (2013)

<sup>10</sup> **Evaluation Plan** is equivalent to **Outcome Measure**. Language is used for clarity with regard to IRS Proposed Rule (2013)

*FY13 Community Benefit Report – Revised 8.2015***Initiative:** Food Security in Humboldt County (Continued)**FY13 Accomplishments:**

SJE joined a coordinated effort led by the Humboldt County Department of Health and Human Services to increase the access to Cal Fresh for all those eligible for this service. Humboldt County received a multi-year grant to increase the Cal Fresh dollars used by families to improve access to healthy food for the family and to increase dollars that are generated by Cal Fresh expenditures. The campaign has been labeled by community partner, Food for People, as 'Bring a Million to Humboldt'. California statistics show that if all people in Humboldt County that are eligible to receive Cal Fresh use them an additional one million dollars in food revenue will be generated. Humboldt County has many small family owned farms that bring fresh, nutritious food resources to the multiple countywide Farmer's Markets and these farmers accept Cal Fresh dollars. If the dollars are increased by one million, the family farms benefit and the circle of bringing high quality, locally grown food to the tables of area families increases as well.

SJE provided Care for the Poor funding in FY 13 to seven (7) local organizations to increase access to food resources. The largest grant was given to Food for People to increase the access to fruits and vegetables for low income families who utilize the food pantries. Food for People purchased the fruits and vegetables from family farms and had special events where the fruits and vegetables were dispensed in a Farmers Market type venue. The events were held at the main Food for People site in Eureka and at sites in the more isolated regions of the county. Food for People also received SJE funding for the dollar per dollar match provided to seniors at the Farmers Markets. Food for People's senior program matches each dollar the low income seniors spend at the markets with an additional dollar to purchase more locally grown items.

## Other Community Benefit Programs and Evaluation Plan

**Program:** Physician Trauma Services

**Description:** 24 hour access for trauma services

**Key Community Partners:** Emergency Medical Providers, Humboldt Medical Specialists, primary physician offices, Open Door Community Health Center, St. Joseph Health- Redwood Memorial Hospital, St. Joseph Health- Santa Rosa Memorial Hospital, Healing Ring, Serenity Inn, Independent Physician Association, St. Vincent de Paul, Department of Health and Human Services

**Goal (Anticipated Impact<sup>11</sup>):** There will be an increased access to care for all individuals requiring trauma services

**Target Population (Scope):** Uninsured/underinsured patients of the emergency room

**How will we measure success? Outcome Measure (Evaluation Plan<sup>12</sup>):** Avoidable bed days for target population

### FY13 Accomplishments:

There were 38,479 patients seen in the emergency room during fiscal year 2013, with 51% or 19,552 uninsured or underinsured. These underinsured patients had approximately 39,104 encounters with medical personnel during their visit for trauma services.

To increase the access to care for the patients seen who are the most vulnerable, St. Joseph Health – Eureka has added a case management position to the array of services offered to the patients during their visit to the emergency room. The case manager follows the well documented, successful process of the Care Transition team of meeting with the patient, providing the support services needed to assist the patient to meet the goal of decreasing avoidable bed days. These services include contacting or arranging a primary medical home, short term housing assistance, access to discharge medications and ongoing support and potential short term stay in a skilled nursing facility for medical necessity.

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<sup>11</sup> **Anticipated Impact** is equivalent to **Goal**. Language is used for clarity with regard to IRS Proposed Rule (2013)

<sup>12</sup> **Evaluation Plan** is equivalent to **Outcome Measure**. Language is used for clarity with regard to IRS Proposed Rule (2013)

## **Other Community Benefit Programs and Evaluation Plan**

**Program:** Physician recruitment

**Description:** Recruitment of physicians to serve the community

**Key Community Partners:** St. Joseph Health – Redwood Memorial, Independent Physician Association, primary care physician practices, Humboldt Medical Specialists, Open Door Community Health Centers, Humboldt Del Norte Medical Society

**Goal (Anticipated Impact<sup>13</sup>):** Access to care

**Target Population (Scope):** Humboldt and Del Norte broader communities

**How will we measure success? Outcome Measure (Evaluation Plan<sup>14</sup>):**

Physician availability

**FY13 Accomplishments:** There were a total of ten physicians recruited for the Humboldt County area with SJE partnering with St. Joseph Health – Redwood Memorial on this initiative. The two hospitals work closely together to insure that the medically underserved area that encompasses the primary and secondary regions served by the two ministries are well served by appropriate medical professionals. The aging of the area's physicians and impending retirement of both specialists and primary care physicians make the recruitment a priority to assure that quality health care continues to be available on the North Coast.

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<sup>13</sup> **Anticipated Impact** is equivalent to **Goal**. Language is used for clarity with regard to IRS Proposed Rule (2013)

<sup>14</sup> **Evaluation Plan** is equivalent to **Outcome Measure**. Language is used for clarity with regard to IRS Proposed Rule (2013)

## Other Community Benefit Programs and Evaluation Plan

**Program:** Nursing intern programs for health careers

**Description:** St. Joseph Health – Eureka provides clinical training hours for nursing students

**Key Community Partners:** College of the Redwoods, area high schools, Independent Physician Association, Humboldt County Office of Education, Humboldt State University, Redwood Community Action Agency, Department of Health and Human Services

**Goal (Anticipated Impact<sup>15</sup>):** Access to health education

**Target Population (Scope):** Health education interns for rural Humboldt Del Norte counties

**How will we measure success? Outcome Measure (Evaluation Plan<sup>16</sup>):** Available internships at St. Joseph Health - Eureka

### FY13 Accomplishments:

Staff from St. Joseph Health – Eureka provided one on one mentoring to 209 health career students in fiscal year 2013. The mentoring occurred over 12,930 hours.

St. Joseph Health – Eureka is partnering with College of the Redwoods to assure that nursing students continue to have access to health education in the rural areas. Humboldt State University no longer provides a nursing degree, leaving College of the Redwoods the only available avenue for students to receive the nursing degree. With a strengthening of the partnership with College of the Redwoods, SJE is assuring the availability of students to complete their clinical rotations and become practicing nurses.

Clinical rotations were offered to the students in the acute care areas of the hospital, the rehabilitation unit, the lab, the imaging center and with Care Transitions. SJE also offers internships for allied professionals through Humboldt State University and these internships include social workers, physical therapists and occupational therapists.

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<sup>15</sup> **Anticipated Impact** is equivalent to **Goal**. Language is used for clarity with regard to IRS Proposed Rule (2013)

<sup>16</sup> **Evaluation Plan** is equivalent to **Outcome Measure**. Language is used for clarity with regard to IRS Proposed Rule (2013)

## Other Community Benefit Programs and Evaluation Plan

**Program:** Physician services

**Description:** Access to care for all inpatients of SJE

**Key Community Partners:** SJE Hospitalists, primary physician offices, Humboldt Medical Specialists, emergency medical transporters, North Coast Clinics Network, Open Door Community Health Center, Independent Physician Association, Humboldt Del Norte Medical Society, Humboldt Medical Specialists

**Goal (Anticipated Impact<sup>17</sup>):** Access to Care

**Target Population (Scope):** Uninsured/underinsured in patient population

**How will we measure success? Outcome Measure (Evaluation Plan<sup>18</sup>):**

Avoidable bed days for the uninsured/underinsured

### FY13 Accomplishments:

There were 2,012 low income patients seen by the SJE hospitalists program in fiscal year 2013, 32% of the in patients seen by this group of physicians. The Hospitalist program provided 6,036 encounters for this group of patients.

The lack of primary care physicians continues to increase the need for the Hospitalist program for this low income population. The population comes to the emergency room for care and when hospitalized, have no primary medical provider for ongoing needs. The Care Transition Team and Community Resource Centers are partnering with the discharge planning department to assist the patients in locating a medical home to decrease their reliance on acute inpatient care to meet their ongoing medical needs. The Hospitalists are partnering with these efforts to enhance the patient's ability to be seen and assigned to a medical home. Open Door Community Health Centers is an ongoing partner in these efforts, providing Care Transition access to their medical record to allow tracking of patients of the Centers and proper follow up to address medical needs.

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<sup>17</sup> **Anticipated Impact** is equivalent to **Goal**. Language is used for clarity with regard to IRS Proposed Rule (2013)

<sup>18</sup> **Evaluation Plan** is equivalent to **Outcome Measure**. Language is used for clarity with regard to IRS Proposed Rule (2013)

## FY13 Community Benefit Report – Revised 8.2015

## FY13 Community Benefit Investment

## FY13 COMMUNITY BENEFIT INVESTMENT

St. Joseph Hospital, Eureka

(ending June 30, 2013)

CA Senate Bill (SB) 697 Categories	Community Benefit Program & Services <sup>19</sup>	Net Benefit
<b>Medical Care Services for Vulnerable<sup>20</sup> Populations</b>	Financial Assistance Program (FAP) (Charity Care-at cost)	\$2,056,060
	Unpaid cost of Medicaid <sup>21</sup>	\$11,753,010
	Unpaid cost of other means-tested government programs	\$5,003,623
<b>Other benefits for Vulnerable Populations</b>	Community Benefit Operations	\$162,258
	Community Health Improvements Services	\$756,025
	Cash and in-kind contributions for community benefit	\$467,419
	Community Building	\$505,437
	Subsidized Health Services	\$1,636,498
<b>Other benefits for the Broader Community</b>	Community Benefit Operations	0
	Community Health Improvements Services	\$118,911
	Cash and in-kind contributions for community benefit	\$99,874
	Community Building	\$155,301
	Subsidized Health Services	0
<b>Health Professions Education, Training and Health Research</b>	Health Professions Education, Training & Health Research	\$719,152
<b>TOTAL COMMUNITY BENEFIT (excluding Medicare)</b>		<b>\$23,433,568</b>
<b>Medical Care Services for the Broader Community</b>	Unpaid cost to Medicare <i>(not included in CB total)</i> <sup>22</sup>	\$19,471,652

<sup>19</sup> Catholic Health Association-USA Community Benefit Content Categories, including Community Building.

<sup>20</sup> CA SB697: "Vulnerable Populations" means any population that is exposed to medical or financial risk by virtue of being uninsured, underinsured, or eligible for Medicaid, Medicare, California Children's Services Program, or county indigent programs. For SJHS, we exclude Medicare as part of Community Benefit total and only include it below the line for SB697 reporting purposes.

<sup>21</sup> Accounts for Hospital Fee. The pledge/grant (separate from the quality assurance fee) is reported in Cash and In-kind Contributions for other vulnerable populations.

<sup>22</sup> Unpaid cost of Medicare is calculated using our cost accounting system. In Schedule H, we use the Medicare cost report.

## **Telling Our Community Benefit Story: Non-Financial<sup>23</sup> Summary of Accomplishments**

The employees of St. Joseph Health-Eureka are the greatest non-financial asset the organization provides for the community. The employees are dedicated to providing the best health care available on the North Coast and to volunteering in their own community to support the area's citizens. SJE has employees who coach, who sponsor and support activities for all ages, who volunteer on the boards of non-profits, who dedicate time and energy to their schools and to their churches. These employees daily provide a community benefit for their own individual communities throughout Humboldt County.

SJE provides a daily donation of food to Betty's Blue Angels. Each evening volunteers led by Betty Chinn prepare food for the homeless. The SJE donation increases the organizational capacity to deliver meals to the homeless encampments and 'hang outs' throughout the county. The meals also provide an important nutritional resource to the Care Transition Team patients of the Healing Ring and the Serenity Inn, two stops on the daily delivery route. How many meals and how many people served is a difficult number to capture and yet it is known that this meal supplements the noon time meal provided by SJE's partner, St. Vincent de Paul dining facility.

Almost 50% of all patients seen at SJE in FY 13 are underinsured and lack adequate funds to meet their health care needs. There are donations in place to assist these patients with travel vouchers, gas cards, meals, housing and medications, beds at the Healing Ring and the Serenity Inn and/or meal tickets for food in the SJE cafeteria. The needs of the area are constant and SJE is adaptable in how and when to address them.

SJE is the primary resource for quality health care in Humboldt County – and the primary partner to non-profit organizations who daily work to meet all the needs for the population we share.

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<sup>23</sup> Non-financial summary of accomplishments are referred to in SB 697 as non-quantifiable benefits.