



St. Joseph Hospital

**Fiscal Year 2016 COMMUNITY BENEFIT REPORT
PROGRESS ON FY15 - FY17 CB PLAN/IMPLEMENTATION STRATEGY REPORT**

St. Joseph Health 
St. Joseph Hospital

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¹ 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.

INTRODUCTION

Who We Are and Why We Exist

St. Joseph Health, St. Joseph Hospital is an acute-care hospital founded in 1920 by the Sisters of St. Joseph of Orange and is located at Eureka, California. The facility has 146 licensed beds, and a campus that is approximately 11.5 acres in size. St. Joseph Hospital has a staff of 1311 and professional relationships with more than 143 local physicians. Major programs and services include cardiac care, critical care, diagnostic imaging, emergency medicine, cancer program, rehabilitation services and obstetrics including a Level II neonatal intensive care unit, as well as community-based programs and resource centers focused on prevention, outreach, care coordination and community building.

St. Joseph Hospital provides healthcare for all residents of Humboldt County, parts of Del Norte, Trinity and Mendocino Counties; all of which have high rates of citizens with disproportionate unmet health needs. The community benefit activities and priorities address the needs of the most isolated, underserved areas of these counties and the populations living in them.

Community Benefit Investment

St. Joseph Hospital invested \$11,271,329 in community benefit activities in FY 2016 (FY16); however, total community benefit was (\$502,190) after accounting for Medicaid reimbursement from the California hospital quality assurance fee. St. Joseph Hospital provided an additional \$17,663,040 for the unpaid cost to Medicare.

Overview of Community Health Needs and Assets Assessment

St. Joseph Hospital completed a needs assessment in 2014 in partnership with the Humboldt County Department of Health and Human Services, Public Health Branch, and Redwood Memorial Hospital.

This Community Health Needs Assessment was developed to organize and summarize primary data and existing secondary data collected from a broad spectrum of community resources and citizens of Humboldt County. The ultimate goal of the needs assessment is to provide a tool (a meta-analysis) for the community that shows the priority areas of concern across the continuum of delivery systems.

Community input was provided in a multitude of ways, including six regional focus groups done in collaboration with Public Health and Redwood Memorial Hospital during September and October 2013. Residents in geographically diverse communities of Humboldt County were asked to provide feedback on current needs in their community. Additionally, an adjunct focus group was done with the local *Promotores de Salud* (Community Health Workers) to learn about health needs specific to the Latino population in Humboldt County. Also at this time, FIRST 5 HUMBOLDT was conducting their annual survey of program participants and agreed to include questions on nutrition and food security. More than forty assessments, reports, and documents were used for this meta-analysis of community need. Nearly all of these reports included community input in the form of questionnaires, interviews, focus groups or town hall meetings.

Community Plan Priorities/Implementation Strategies

In FY16, St. Joseph Hospital made substantial progress on our three Community Benefit priorities. Below is a brief list of accomplishments in each of the three areas:

- **Nutrition, Healthy Food and Food Security**
 - Granted \$121,000 to 13 organizations that provide healthy food to individuals facing food insecurity (in partnership with Redwood Memorial Hospital)
 - 4.4% increase in CalFresh beneficiaries since June 2015 - St. Joseph Hospital has participated in the county-wide effort to increase enrollment in CalFresh in order to increase access to fresh produce and nutritious foods for low income families and individuals
 - 29 free community dinners/events featuring fresh produce and nutritious foods hosted by St. Joseph and Redwood Memorial hospitals' Community Benefit programs
- **Mental and Behavior Health Services**
 - Increased participation in May is Mental Health Awareness Month with the goal of increasing awareness of and reducing stigma associated with mental illness
 - Contracted with bi-lingual Licensed Marriage and Family Therapist to provide free counseling services to Spanish-speaking families
 - Granted \$82,600 to six organizations offering mental/behavioral health services or resources (in partnership with Redwood Memorial Hospital)
- **Care Coordination and Referral**
 - Improved communication between ED and Primary Care around notification of overdose
 - 945 avoidable bed days in medical respite at our Healing Ring & Serenity Inn locations supported by Care Transitions

- Expand medical respite services by opening Project Nightingale in partnership with the Betty Kwan Chinn Homeless Foundation and Catholic Charities
- Partner with other healthcare entities to advance the collaborative goals of the NCHIIN project
- Participation in the Rx Safe Humboldt workgroup and the Advanced Care planning Coalition
- 3.3% 30-day readmission rate for patients served by the Behavioral Health Outreach RN who supports high acuity BH discharges to skilled nursing facilities

INTRODUCTION

Who We Are and Why We Exist

As a ministry founded by the Sisters of St. Joseph of Orange, St. Joseph Hospital lives out the tradition and vision of community engagement set out hundreds of years ago. The Sisters of St. Joseph of Orange trace their roots back to 17th century France and the unique vision of a Jesuit Priest named Jean-Pierre Medaille. Father Medaille sought to organize an order of religious women who, rather than remaining cloistered in a convent, ventured out into the community to seek out “the Dear Neighbors” and minister to their needs.

The congregation managed to survive the turbulence of the French Revolution and eventually expanded not only throughout France but throughout the world. In 1912, a small group of the Sisters of St. Joseph traveled to Eureka, California, at the invitation of the local Bishop, to establish a school. A few years later, the great influenza epidemic of 1918 caused the sisters to temporarily set aside their education efforts to care for the ill. They realized immediately that the small community desperately needed a hospital. Through bold faith, foresight and flexibility, in 1920, the Sisters opened the 28 bed St. Joseph Hospital Eureka and the first St. Joseph Health ministry.

Mission, Vision and Values and Strategic Direction

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.

St. Joseph Hospital has been meeting the health and quality of life needs of the local community for over 96 years. Serving the communities of the North Coast, St. Joseph Hospital is an acute care hospital that provides quality care in the areas of cardiac care, critical care, diagnostic imaging, emergency medicine, cancer program, rehabilitation services, and obstetrics including a Level II neonatal intensive care unit, as well as community-based programs and resource centers focused on prevention, outreach, care coordination and community building. With over 1311 employees committed to realizing the mission, St. Joseph Hospital is one of the largest employers in the region.

Strategic Direction

As we move into the future, St. Joseph Hospital is committed to furthering our mission and vision while transforming healthcare to a system that is health-promoting and preventive, accountable in its inevitable rationing decisions, integrated across a balanced network of care and financed according to its ability to pay. To make this a reality, over the next several years St. Joseph Health and St. Joseph Hospital are strategically focused on two key areas to which the Community Benefit Plan strongly align: population health management and network of care.

Community Benefit Investment

St. Joseph Hospital invested \$11,271,329 in community benefit activities in FY 2016 (FY16); however, total community benefit was (\$502,190) after accounting for Medicaid reimbursement from the California hospital quality assurance fee. St. Joseph Hospital provided an additional \$17,663,040 for the unpaid cost to Medicare.

ORGANIZATIONAL COMMITMENT

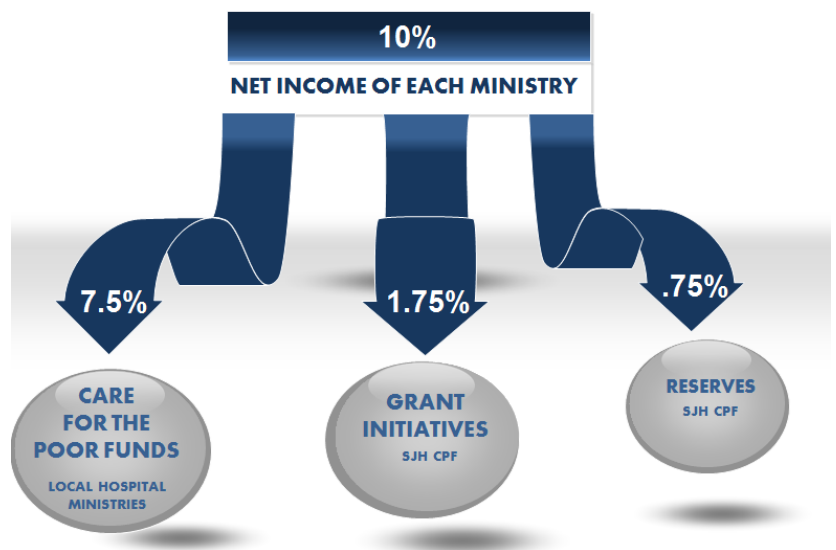
Community Benefit Governance Structure

St. Joseph Hospital dedicates resources to improve the health and quality of life for the communities it serves, with special emphasis on the needs of the economically poor and underserved.

In 1986, St. Joseph Health created the St. Joseph Health Community Partnership Fund (SJH CPF) (formerly known as the St. Joseph Health System Foundation) to improve the health of low-income individuals residing in local communities served by SJH hospitals.

Each year St. Joseph Hospital allocates 10% of its net income (excluding unrealized gains and losses) to the St. Joseph Health Community Partnership Fund. (See Figure 1). 7.5% of the contributions are used to support local hospital Care for the Poor programs. 1.75% is used to support SJH Community Partnership Fund grant initiatives. The remaining .75% is designated toward reserves, which helps ensure the Fund's ability to sustain programs into the future that assist low-income and underserved populations.

Figure 1. Fund distribution



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

Community Benefit Governance and Management Structure

St. Joseph Hospital further demonstrates organizational commitment to the community benefit process through the allocation of staff time, financial resources, participation and collaboration. The Vice President of Mission Integration and Area Director of Community Benefit are responsible for coordinating implementation of California Senate Bill 697 provisions and Federal 501r requirements as well as providing the opportunity for community leaders and internal hospital Executive Management Team members, physicians and other staff to work together in planning and implementing the Community Benefit Plan.

The Community Benefit (CB) Management Team provides orientation for all new Hospital employees on Community Benefit programs and activities, including opportunities for community participation.

A charter approved in 2007 establishes the formulation of the St. Joseph Hospital Community Benefit Committee. The role of the Community Benefit Committee is to support the Board of Trustees in overseeing community benefit issues. The Committee acts in accordance with a Board-approved charter. The Community Benefit Committee is charged with developing policies and programs that address identified needs in the service area particularly for underserved populations, overseeing development and implementation of the Community Health Needs Assessment and Community Benefit Plan/Implementation Strategy Reports, and overseeing and directing the Community Benefit activities.

The Community Benefit Committee has a minimum of eight members including three members of the Board of Trustees. Current membership includes four members of the Board of Trustees and eight community members/ hospital leaders. A majority of members have knowledge and experience with the populations most likely to have disproportionate unmet health needs. The Community Benefit Committee generally meets every other month.

PLANNING FOR THE UNINSURED AND UNDERINSURED

Patient Financial Assistance Program

The St. Joseph Health (SJH) Financial Assistance Program helps to make our health care services available to everyone in our community needing emergent or medically necessary care. This includes people who do not have health insurance and are unable to pay their hospital bill, as well as patients who do have insurance but are unable to pay the portion of their bill that

insurance does not cover. In some cases, eligible patients will not be required to pay for services; in others, they may be asked to make partial payment.

At St. Joseph Hospital, our commitment is to provide quality care to all our patients, regardless of their ability to pay. We believe that no one should delay seeking needed medical care because they lack health insurance or are worried about their ability to pay for their care. This is why we have a **Financial Assistance Program** for eligible patients. In FY16, St. Joseph Hospital provided **\$1,350,131** free (charity care) and discounted care and **5,724 encounters**.

For information on our Financial Assistance Program click [here](#).

Medi-Cal (Medicaid)

St. Joseph Hospital provides access to the uninsured and underinsured by participating in Medicaid, also known as Medi-Cal in California. In FY16, St. Joseph Hospital, provided \$5,628,404 in Medicaid shortfall with 38,331 Medicaid participants served; however, total Medicaid shortfall was (\$6,145,115) after accounting for Medicaid reimbursement from the California hospital quality assurance fee.

COMMUNITY

Defining the Community

St. Joseph Hospital provides North Coast communities with access to advanced care and advanced caring. The hospital is located on the far north coast in Humboldt County - one of the largest counties in California by geography, covering 3,568 square miles. The county is densely forested, mountainous and rural with nearly 1.5 million acres of combined public and private forests. A large portion - 680,000 acres – of redwood forests are protected or strictly conserved. The county is the southern gateway to the Pacific Northwest and is surrounded by Del Norte County to the north, Trinity County to the east, Mendocino County to the south and the Pacific Ocean on the west. The county was established in May of 1853 and derives its name from Humboldt Bay, discovered by a sea otter hunting party in 1806 and rediscovered in 1849, and the state's second largest natural bay.

The county has a population of 136,375 or 38.2 people per square mile. Neighboring, Trinity County, population 13,526 has only 4.3 people per square mile (covering 3,179 square miles). California averages 239.1 residents per square mile and classifies rural counties as up to 52 residents per square mile. Humboldt County is classified as a rural county and Trinity County is considered frontier, based on this people per square mile average.

Seven percent of Humboldt County households are living below the federal poverty level, which is higher than both the state and national level. In some pockets of Humboldt County, more than a quarter of households are living in poverty. The region's economically poor

residents have been severely impacted by the recession and the elimination of programs and services that local governments are no longer able to fund. The growing gap in needed services has placed at risk the health of thousands of underserved individuals and families.

Health insurance options for local residents have increased with MediCal expansion and opening of the State health insurance exchange, Covered California. However, the county lacks providers to care for the regions' newly insured. Humboldt County is designated as a Health Professional Shortage Area and a Medically Underserved Area. Attracting and retaining primary care and specialty physicians as well as other health professionals is an ongoing challenge for this rural community.

Access to affordable healthcare and basic needs has elevated to a critical level for people living in Humboldt County. To respond effectively requires collaborative problem solving at the community level. Nonprofit health providers – large and small – must work together to leverage resources and maximize health assets in innovative ways to restore what has been lost, enhance what still exists and ensure sustainable health programs and services are available over the long-term to populations that need them the most. Community-based collaboration has been a priority for Humboldt County nonprofit organizations, and will continue to drive this hospital's community benefit efforts in the future.

Hospital Total Service Area

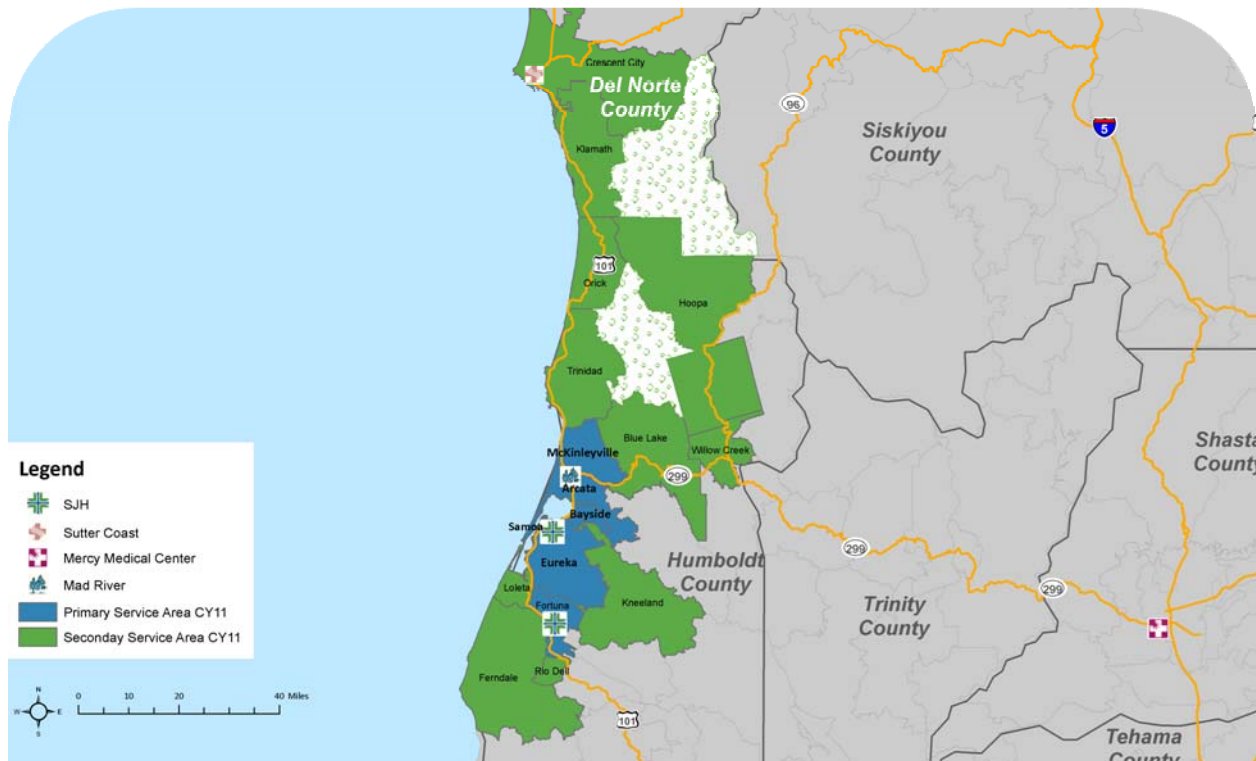
The community served by the Hospital is defined based on the geographic origins of the Hospital's inpatients. The Hospital Total Service Area is comprised of both the Primary Service Area (PSA) as well as the Secondary Service Area (SSA) and is established based on the following criteria:

- PSA: 70 percent of discharges (excluding normal newborns)
- SSA: 71 percent-85 percent of discharges (draw rates per ZIP code are considered and PSA/SSA are modified accordingly)
- Includes ZIP codes for continuity
- Natural boundaries are considered (i.e., freeways, mountain ranges, etc.)
- Cities are placed in PSA or SSA, but not both

The Primary Service Area ("PSA") is the geographic area from which the majority of the Hospital's patients originate. The Secondary Service Area ("SSA") is where an additional population of the Hospital's inpatients reside. The PSA is comprised of Eureka, Arcata, McKinleyville, Bayside, Samoa and Fortuna. The SSA includes Trinidad, Blue Lake and Northern Humboldt County, Klamath and Crescent City as well as Ferndale, Rio Dell, Loleta and Kneeland.

Figure 2 (below) depicts the Hospital's PSA and SSA. It also shows the location of the Hospital as well as the other hospitals in the area that are a part of St. Joseph Health.

Figure 2. St. Joseph Hospital Total Service Area



COMMUNITY HEALTH NEEDS AND ASSETS ASSESSMENT PROCESS AND RESULTS

Summary of Community Needs Assessment Process and Results

St. Joseph Hospital completed a needs assessment in 2014 in partnership with the Humboldt County Department of Health and Human Services, Public Health Branch and Redwood Memorial Hospital.

This Community Health Needs Assessment (CHNA) was developed to organize and summarize primary data and existing secondary data collected from a broad spectrum of community resources and citizens of Humboldt County. The ultimate goal of the needs assessment is to provide a tool (a meta-analysis) for the community that shows the priority areas of concern across the continuum of delivery systems. How do local non-profits determine their priorities? What are the priorities? What do the citizens of Humboldt County say are the most compelling needs they have each day?

Community input was provided in a multitude of ways, including six regional focus groups done in collaboration with Public Health during September and October 2013. Residents in geographically diverse communities of Humboldt County were asked to provide feedback on current needs in their community. Additionally, an adjunct focus group was done with the

local *Promotores de Salud* (Community Health Workers) group to learn about health needs specific to the Latino population in Humboldt County. Also at this time, FIRST 5 HUMBOLDT was conducting their annual survey of program participants and agreed to include questions on nutrition and food security. More than forty assessments, reports, and documents were used for this meta-analysis of community need. Nearly all of these reports included community input in the form of questionnaires, interviews, focus groups or town hall meetings.

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

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 activity, or there is evidence that community residents are faced with multiple health problems and have limited access to timely, high quality health care.

The following table lists the DUHN communities/groups and identified community needs and assets.

DUHN Group and Key Community Needs and Assets Summary Table

DUHN Population Group or Community	Key Community Needs	Key Community Assets
Households with income below the federal poverty level	Access to affordable, nutritious foods	Strong county-wide collaboration around food through Food for People’s local pantry network, CalFresh outreach efforts, the Food Policy Council and other community-based organizations
Hispanic population of Humboldt County	Access to culturally and linguistically appropriate mental and behavioral health services; reduce stigma associated with these illnesses	Strong connection to church, schools and willing to access services once trust is established
Low income and geographically isolated individuals	Access to health care and community-based services, with focus on prevention	Willingness among organizations to work together to address systems and network of care

Aging, low income population	Needing advanced care and lack of adequate family support and resources	Several organizations/ programs focused on needs of low income seniors: Hospice of Humboldt, Humboldt Senior Resource Center, Area 1 Agency on Aging, Palliative Care
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PRIORITY COMMUNITY HEALTH NEEDS

The list below summarizes the prioritized community health needs identified through the FY14 Community Health Needs Assessment Process:

1. Nutrition/Healthy Food/Food Security
2. Active Communities, Families & Socialization
3. Care Coordination & Referral
4. Mental/Behavioral Health Services
5. Access to Health Care (with Focus on Prevention)

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 programs such as Care Transitions, Paso a Paso, Healthy Kids Humboldt, Evergreen Lodge and our five Community Resource Centers; and by funding other non-profits through our *Care for the Poor Community Grant Program* managed by the Community Benefit department at St. Joseph Hospital.

Furthermore, St. Joseph Health, St. Joseph Hospital 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, 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:

Motor Vehicle Safety: The Hospital does not directly address motor vehicle and pedestrian safety; however we partner with several organizations that address this issue, including the Department of Health and Human Services, Redwood Community Action Agency and city and county government.

Affordable Housing: The Hospital does not directly address the availability of affordable housing – for lease or purchase – in the county; however this is an issue being addressed by several organizations, including local Chambers of Commerce, city and county government, the Humboldt Housing and Homeless Coalition, DANCO, Housing Humboldt and the Veterans Association.

In addition, St. Joseph Hospital will collaborate with several local organizations that address aforementioned community needs, to coordinate care and referral and address these unmet needs.

COMMUNITY BENEFIT PLANNING PROCESS

Summary of Community Benefit Planning Process

The FY15-17 CB Plan was developed in response to findings from the FY14 Community Health Needs Assessment and is guided by the following five core principles:

- **Disproportionate Unmet Health-Related Needs:** Seek to accommodate the needs of communities with disproportionate unmet health-related needs.
- **Primary Prevention:** Address the underlying causes of persistent health problem.
- **Seamless Continuum of Care:** Emphasize evidence-based approaches by establishing operational links between clinical services and community health improvement activities.
- **Build Community Capacity:** Target charitable resources to mobilize and build the capacity of existing community assets.
- **Collaborative Governance:** Engage diverse community stakeholders in the selection, design, implementation, and evaluation of program activities.

The priority setting process was done after thorough evaluation of all primary and secondary information. A focus was placed on what community members identified as important in their community and the seriousness of the issue identified. Additionally, prioritization of “up-stream” activities was done to have the greatest impact (for example, instead of focusing on individual risk behaviors and education, attention was given to society and environment conditions). Also taken into consideration were the following criteria:

- Congruency and relevance to the St. Joseph Health mission and vision
- Congruence with St. Joseph Hospital strategic direction
- Size of the issue
- Community capacity to address the issue
- Organizational capacity to address the issue
- Feasibility of addressing the issue in relation to time, financial constraints, resources, etc.
- Potential community and stakeholder engagement in efforts and
- Potential for sustainability of efforts

Based on review of prioritized significant health needs and a thoughtful priority setting process, St. Joseph Hospital will address the following priority areas as part of its FY15-17 CB Plan:

1. Nutrition, Healthy Food and Food Security
2. Mental and Behavior Health Services
3. Care Coordination and Referral

ST. JOSEPH HOSPITAL

FY15 – FY17 Community Benefit Plan/Implementation Strategies and Evaluation Plan

FY16 Accomplishments

In FY15-FY17 St. Joseph Hospital prioritized three areas of significant health need in response to the community health needs assessment. They are 1) Nutrition, Healthy Food and Food Security, 2) Mental and Behavioral Health Services, and 3) Care Coordination and Referral. Below, each priority area is summarized and FY16 accomplishments reported.

Nutrition, Healthy Food and Food Security

Initiative (community need being addressed): FY14 CHNA shows a large number households and individuals unable to afford nutritious foods, especially fruits and vegetables, or lack access to fresh produce due to geographic isolation.

Goal (anticipated impact): Increase access to affordable and nutritious foods – with emphasis on fresh produce – throughout the county for low income families.

Outcome Measure	Baseline	FY16 Target	FY16 Result
Households reporting access to fresh produce using number of CalFresh beneficiaries as a proxy	August 2010 14,280 CalFresh beneficiaries	5% increase from FY15 total beneficiaries (20,655)	21,559 CalFresh beneficiaries 4.4% increase from FY15

Strategy(ies)	Strategy Measure	Baseline	FY16 Target	FY16 Result
Community dinners/events featuring fresh produce and nutritious foods hosted by CB programs	<i>Number of dinners/events that feature fresh produce and nutritious foods</i>	21	25	29

Collaborate with the Humboldt Food Policy Council to host a local Food Summit	<i>Occurrence of Food Summit in 2016</i>	N/A	<i>Food Summit in 2016</i>	<i>SJH was a sponsor of the February 27, 2016 Food Summit</i>
Support efforts related to sourcing of local foods	<i>Number of local food sourcing programs or projects supported</i>	5	7	12

Key Community Partners: *Redwood Memorial Hospital, Department of Health and Human Services, Food for People, Community Alliance with Family Farmers, Humboldt Food Policy Council, Humboldt County Office of Education, North Coast Growers Association, Humboldt Network of Family Resource Centers, Locally Delicious, Shakefork Community Farm, Humboldt Senior Resource Center, St. Vincent de Paul, Betty Kwan Chinn Foundation, Eureka Rescue Mission, Redwood Community Action Agency, California Center for Rural Policy, North Coast Community Garden Collaborative, North Coast Co-op, Humboldt State University*

FY16 Accomplishments: One of our strategies changed in FY16. We prioritized planning and hosting a Food Summit in partnership with Humboldt Food Policy Council members over work to identify and address produce deserts (in FY17 we plan to re-engage with the produce desert work). In FY16, all the St. Joseph Hospital Community Benefit programs continued to actively outreach, screen and enroll individuals and families eligible for CalFresh in order to increase access to fresh produce and nutritious foods for low income families and individuals. Several of our programs also worked to increase communication with clients receiving CalFresh benefits to assist with retention. Our efforts were part of the county-wide increase in CalFresh beneficiaries, an initiative led by the Department of Health and Human Services.

The programs of the Community Benefit department hosted 29 events that featured free, nutritious foods and included fresh, local produce when available. From *Paso a Paso* field trips to a blueberry farm and local farmer’s markets to community BBQ’s in Blue Lake and Rio Dell to the *Cinco de Mayo* celebration in Loleta, our programs brought community together around nourishing food, while celebrating culture and place.

We also increased our partnerships with like-minded organizations supporting food security and local sourcing of foods. We granted \$121,000 to 13 food security organizations through our annual Care for the Poor Community Grants, one of whom was the North Coast Growers Association (NCGA), who used our grant of \$10,000 to launch a Farmer’s Market Voucher program for Supplemental Security Income (SSI) recipients who are disabled and have little or no income. This voucher program allows SSI recipients to purchase local, organic, and nutritious foods thus helping vulnerable individuals maintain good health. For the sixth consecutive year, St. Joseph Hospital supported the Locally Delicious Farmer’s Fund with a \$5,000 grant. This fund paid 13 local farmers up front – at the time when expenses are highest – to

grow organic produce for the local food bank, Food for People (10,927 pounds in 2016). Two other efforts St. Joseph Hospital funded in FY16, were the Humboldt County Office of Education's Farm to School work which aims to increase the amount of locally grown foods school children eat; and the Klamath Trinity Resource Conservation District's *Kin-Ta-Te* Community Garden which uses sustainable gardening practices as a mechanism to connect at-risk youth with culture and healthy behaviors.

Mental and Behavioral Health Services

Initiative (community need being addressed): FY14 CHNA shows a high need for appropriate mental and behavioral health services throughout Humboldt County.

Goal (anticipated impact): Increase activities that improve access to affordable mental and/or behavioral health (MH/BH) services, or enhance prevention efforts, especially in outlying areas and for diverse populations.

Outcome Measure	Baseline	FY16 Target	FY16 Result
Number of MH/BH activities that improve access or enhance prevention of mental illness	10	12	20

Strategy(ies)	Strategy Measure	Baseline	FY16 Target	FY16 Result
Reduce Stigma associated with mental illness	<i>Number of events or activities targeted at increasing awareness or reducing stigma</i>	7	9	12
Support community based counseling for Spanish speakers	<i>Number of community based counseling options for Spanish speakers</i>	2	2	2
Provide grant funding to organizations offering MH/BH services or resources	<i>Care for the Poor dollars granted for mental health and behavioral health projects</i>	\$45,000	\$60,000	\$82,600

Key Community Partners: Redwood Memorial Hospital, Department of Health and Human Services, Open Door Community Health Centers, Eureka Rescue Mission, Redwood Teen Challenge, Arcata House Partnership, CASA of Humboldt, Redwood Community Action Agency, LatinoNet, CASA of Humboldt, Humboldt Area Center for Harm Reduction, Boys & Girls Club, North Coast Grant Making Partnership

FY16 Accomplishments: Our stated goal and outcome measure changed to include prevention activities versus focus solely on access; and we dropped our strategy of participating in the BH Integration planning grant due to this work being discontinued by the host agency. We added a strategy to dedicate Care for the Poor funding to MH/BH services and resources. Both St. Joseph and Redwood Memorial hospitals

had a significant role in May is Mental Health Awareness month in FY16. We hosted outreach tables at both hospitals; handed out 2,000 green ribbons - the symbol of California's *Each Mind Matters* campaign - participated in the mental health walk and hosted stigma reduction events at our Community Resource Centers. We also supported the Out of the Darkness Suicide Prevention walk and wrote an article for the St. Joseph Health Matters magazine in order to raise awareness and reduce the stigma associated with mental illness. In FY16 we continued to see a lack of linguistically and culturally appropriate mental health services for Spanish-speaking community members. To help remedy this shortage, we contracted with a bi-lingual Licensed Marriage and Family Therapist to provide free counseling to the Spanish speaking community. We also supported a capacity building grant to a local psychotherapy practice that provides court-ordered domestic violence and child abuse prevention therapy. Because of the St. Joseph Hospital funding (in partnership with McLean Foundation and Union Labor Health Foundation) a Spanish-speaking therapist will become certified to provide court-ordered batterers' intervention therapy.

A new strategy for St. Joseph Hospital in FY16 was to provide increased grant funding to organizations offering mental/behavioral health services or resources to vulnerable populations in our community. We supported six non-profit organizations with a total of \$82,600 in Care for the Poor grant dollars. Our funding allowed the following:

- Arcata House Partnership to hire a part-time case manager to work with chronically homeless
- The Rescue Mission to continue to offer spiritual and mental health services to guests via a chaplain
- Redwood Teen Challenge for their new women's facility and expanded addiction treatment services
- CASA of Humboldt to help train new advocates to support foster children
- Humboldt Area Center for Harm Reduction to prevent overdose by distributing Naloxone and improve health among those battling drug addiction
- Boys & Girls Club for ACE's (Adverse Childhood Experiences) training for youth mentors and staff

St. Joseph hospital is proud of our FY16 efforts to improve services offered that promote mental health and wellness as well as reduce stigma and increase access to appropriate mental/behavioral health care.

Care Coordination and Referral

Initiative (community need being addressed): FY14 CHNA shows a large need for increased coordination of services across the continuum of care in order to achieve the triple aim of improving the patient experience, improving the health of populations, and reducing the overall costs of care.

Goal (anticipated impact): Increase the number of community-based partnerships or services that expand or enhance the continuum of care to meet the changing needs of the community.

Outcome Measure	Baseline	FY16 Target	FY16 Result
Number of new or enhanced partnerships or services	6 FY14 4 FY15	3	6 FY16 16 to date

Strategy(ies)	Strategy Measure	Baseline	FY16 Target	FY16 Result
Improve communication between the Emergency Department (ED) and Primary Care	<i>New communication tool or strategy</i>	ED Care Plans for High Utilizers	Add 1 new tool/strategy	ED phone calls to Primary Care to notify of patient overdose
Behavioral health outreach to skilled nursing facilities (BARTO)	<i>30-day readmission rates for enrolled patients</i>	6.7% (N=30)	<10%	3.3% (N=30)
Expand SJH-HC Medical Respite services by partnering with The Betty Kwan Chinn Homeless Foundation and Catholic Charities to bring Project Nightingale in Humboldt	<i>Building renovations complete, formal partnership in place, and operations fully functioning</i>	No Nightingale in Humboldt County	Building renovations complete	As of June 30, 2016 75% of building renovations are complete; on track for September 2016 opening

Key Community Partners: Redwood Memorial Hospital, Department of Health and Human Services, Open Door Community Health Centers, Humboldt Independent Practice Association, Local Skilled Nursing Facilities, California Center for Rural Policy, Resolution Care, Partnership Health Plan of California, Redwood Community Action Agency, Betty Kwan Chinn Homeless Foundation, Alcohol and Drug Care Services, North Coast Health Improvement and Information Network

FY16 Accomplishments: Significant progress was made in FY16 around our priority area of Care Coordination and Referral. We broadened our ED hot-spotting strategy to encompass overall communication from the ED to Primary Care, specifically around ED utilization and discharge instructions. In past years we implemented ED care plans, and in FY16, found there was a gap in communication between the ED and primary care around notification of overdoses. Our ED now makes a phone call to the primary care physician when their patient was treated for overdose.

We also added a strategy to expand our Medical Respite program by partnering with the Betty Kwan Chinn Homeless Foundation and Catholic Charities to open a Project Nightingale in Humboldt. Building renovations are progressing and we are on track to open in late September 2016. In FY16 our current Medical Respite program (Healing Ring & Serenity Inn) totaled 945 avoidable bed days in respite care. The St. Joseph Health Care Transitions program provides short-term, intensive case management for all homeless patients discharged to our respite program. This multi-disciplinary care team of RN, MSW and health coach provides wrap-around and patient-centered care and services to assure follow up with primary or specialty care and that social supports are in place. Care Transitions also established a new partnership with the MAC (Multiple Assistance Center) in FY16 to provide housing support services with longer-term case management for appropriate patients.

In FY16 St. Joseph Hospital continued to partner closely with the Independent Practice Association and Open Door Community Health Centers on the NCHIIN (North Coast Health Improvement and Information Network) project. Through NCHIIN, information about hospital admissions, discharges and transfers – as well as notification of ED encounters – is communicated electronically to primary care in a way that safeguards patients' privacy and confidentiality. Another key care coordination activity conducted by Care Transitions in FY16 was chart review to assure accuracy and completion of the primary care physician field upon admission. This field must be completed correctly in order for critical information to flow between electronic health records in multiple settings.

In FY16 we continued to participate in Community Huddles, Care Improvement meetings and the Chronic Pain workgroup (now called Rx Safe Humboldt) and also joined the Advanced Care Planning Coalition. We supported the purchase of medication disposal bins at pharmacies across the County with a grant of \$7,932 to the IPA and worked to establish Suboxone protocols for in-patient settings that are in line with out-patient protocols. And finally, our Eureka Community Resource Center partnered with DHHS Social Services to create an extensive, county-wise resource list/database.

Our Behavioral Assessment Response Team Outreach (BARTO) nurse position increased to full time and we added a full time Behavioral Health Specialist that covers the ED. These positions work closely with our Psychiatrist and Psych RN within the hospital and continue to support high acuity BH discharges to local skilled nursing facilities. In FY16 Care Transitions partnered closely with our BARTO team to refine work flows across the continuum of care, improve documentation at SNF, and assure appropriate confidentiality measures are in place. In FY16 the readmission rate for BARTO patients was 3.3%.

FY16 Other Community Benefit Program Accomplishments

In addition to the preceding priority areas, St. Joseph Hospital (in partnership with Redwood Memorial Hospital) provided other community benefit programs responsive to the health needs identified in the 2014 CHNA. Community Benefit programs listed below only includes additional Community Services for the Low-income and Broader Community that have not been previously covered in this report.

Initiative (community need being addressed):	Program	Description	FY16 Accomplishments
1. Access to Care	Transportation support	Free bus or taxi vouchers; gas cards	1,518 transportation assistance provided to/from medical or health related appointments
2. Access to Care	Health professionals education	Mentor and train health professionals	6,588 hours spent training student nurses, social work interns, physical therapy and occupational therapy interns, and pharmacy interns
3. Social cohesion	Support groups	Facilitate support groups on various topics	70 support groups offered to the public, free of charge (includes Stroke, Cancer, Breastfeeding, <i>Madre y Madre</i> , Latino Fathers)
4. Nutrition/Food Security, Mental/Behavioral Health Services and Care Coordination	Care for the Poor Community Grants	Funds awarded to local non-profits in the SJE CB Priorities areas of nutrition/food security, mental/behavioral health services and care coordination and referral	\$200,000 awarded to community partners in Care for the Poor Community Grants, in partnership with Redwood Memorial Hospital

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FY16 COMMUNITY BENEFIT REPORT

Initiative (community need being addressed):	Program	Description	FY16 Accomplishments
5. Access to Care	Healthy Kids Humboldt	Insurance enrollment and outreach, system navigation and tax preparation	712 enrollments 3,409 outreach 64 families received free tax preparation with refunds totaling \$131,290. Average annual gross income per family \$25,023
6. Culturally appropriate Access to Care	Paso a Paso	Services for the Latino population <i>(provided entirely in Spanish)</i>	101 free classes for Latino families 2 Fatherhood picnics 1 field trip to the Blueberry farm 2 field trips to farmer's markets 102 <i>Baile Terapia</i> (Dance Therapy) classes
7. Care Coordination	Evergreen Lodge	Lodging and social work services for cancer patients	431 cancer patients and their family stayed 3,065 nights at the lodge
8. Care Coordination	Care Transitions	Medical Respite support for homeless patients post-discharge	945 days in medical respite care at Healing Ring and Serenity Inn
9. Safety and Prevention	Bicycle Safety Events	Host four bicycle safety events at Community Resource Centers in partnership with Kohl's Cares	Bicycle Safety events in Blue Lake, Loleta and Rio Dell 169 helmets handed out 70 bike inspections 257 participants

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FY16 COMMUNITY BENEFIT REPORT*

Initiative (community need being addressed):	Program	Description	FY16 Accomplishments
10. Housing	Community Benefit Housing Support	Support homeless and low-income community members obtain or retain housing; includes paying for housing deposits, limited rent assistance, or housing related costs	\$8,053 to 24 people
11. Preventative Care	Free Screenings & Flu Shots	Free community-based health screenings with appropriate referral and free flu shot clinics at the St. Joseph Health Community Resource Centers	2,451 free screenings/flu shots
12. Access to Acute Care	Hospital Operations	Improvements to or expansions of key acute care service lines at St. Joseph and Redwood Memorial Hospitals	STEMI designation (SJE) Cancer Program with new 3D Mammography machine
13. Access to Care	Physician Recruitment	Recruitment of primary care and specialty physicians to medically underserved area and area with health professions shortage	7 new physicians successfully recruited

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FY16 COMMUNITY BENEFIT REPORT

FY16 Community Benefit Investment

In FY16 St. Joseph Hospital invested a total of \$692,000 (\$1,047,000 total when combined with Redwood Memorial Hospital) Care for the Poor dollars in key community benefit programs. Charity Care, which is free or discounted care as outlined by our Financial Assistance Policy (FAP), was \$1,350,131 and Medicaid shortfall was \$5,628,404 however, when hospital fee was accounted for it was (\$6,145,115).

FY16 COMMUNITY BENEFIT INVESTMENT

St. Joseph Hospital
(ending June 30, 2016)

CA Senate Bill (SB) 697 Categories	Community Benefit Program & Services ²	Net Benefit
Medical Care Services for Vulnerable³ Populations	Financial Assistance Program (FAP) (Traditional Charity Care-at cost)	\$1,350,131
	Unpaid cost of Medicaid ⁴	(\$6,145,115)
	Unpaid cost of other means-tested government programs	\$93,750
Other benefits for Vulnerable Populations	Community Benefit Operations	\$293,285
	Community Health Improvements Services	\$1,114,956
	Cash and in-kind contributions for community benefit	\$1,239,732
	Community Building	\$86,468
	Subsidized Health Services	\$396,915
Total Community Benefit for the Vulnerable		(\$1,569,878)
Other benefits for the Broader Community	Community Benefit Operations	\$0
	Community Health Improvements Services	\$321,531
	Cash and in-kind contributions for community benefit	\$241,509
	Community Building	\$6,975
	Subsidized Health Services	\$59,705
Health Professions Education, Training and Health Research	Health Professions Education, Training & Health Research	\$437,968
Total Community Benefit for the Broader Community		\$1,067,688
TOTAL COMMUNITY BENEFIT (excluding Medicare)		(\$502,190)
Medical Care Services for the Broader Community	Unpaid cost to Medicare ⁵ <i>(not included in CB total)</i>	\$17,663,040

² Catholic Health Association-USA Community Benefit Content Categories, including Community Building.

³ 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 (referred to as Medi-Cal in California), 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.

⁴ 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.

⁵ Unpaid cost of Medicare is calculated using our cost accounting system. In IRS Form 990, Schedule H, we use the Medicare cost report.

Telling Our Community Benefit Story: Non-Financial⁶ Summary of Accomplishments

The employees, volunteers and physicians of St. Joseph Hospital are the greatest non-financial asset the organization provides for the community. Our team of care givers is dedicated to providing the best patient-centered health care available on the North Coast and volunteer in their own community on a regular basis.

In FY16 all St. Joseph Hospital employees participated in patient experience workshops and are continually looking for innovative ways to better serve and care for our patients. From quiet hours to friendly greetings, St. Joseph Hospital employees, volunteers and physicians embrace our vision outcomes of perfect care, sacred encounters and healthy communities.

Our care givers spend countless hours volunteering in our community. From feeding the homeless with church and non-profit groups, to staffing medic services at musical events and the Tour of the Unknown Coast to organizing teams for Relay for Life, our care givers consistently give back. Care givers volunteer time to serve on non-profit community boards and they generously donate their hard-earned dollars towards efforts to assure sound organizational infrastructure for future generations.

Community partnership is something we believe in and another non-financial benefit we provide the community. The Community Benefit department partners with other 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 participating in their annual Hunger Fighter Challenge during the holidays. Last year, our hospitals collected 11,280 pounds of non-perishable food and over \$5,000 and were the winners of this friendly community competition.

We organize a back-to-school supply drive for our area's children and a cold weather clothing drive for the needy and homeless. In FY16 we collected over 182 items of clothing including jackets, socks, rain ponchos and sturdy shoes. We donate excess hospital food to churches and food-security organization and in FY16 we donated toiletries and other supplies to the victims of wild fires. Additionally, at the request of our Public Health Department, our Community Resource Center in Willow Creek served as a clean air breathing station when particulate levels reached hazardous levels due to smoke from wild fires.

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.

⁶ Non-financial summary of accomplishments are referred to in CA Senate Bill 697 as non-quantifiable benefits.

Governance Approval

This FY16 Community Benefit Report was approved at the October 14, 2016 meeting of the St. Joseph Hospital Community Benefit Committee of the Board of Trustees.

Becky A. Hanson

Chair's Signature confirming approval of the FY16 Community Benefit Annual Report

10-14-16

Date