



St. Joseph Hospital

**Fiscal Year 2017 COMMUNITY BENEFIT REPORT
PROGRESS ON FY15 - FY17 CB PLAN/IMPLEMENTATION STRATEGY REPORT**

St. Joseph Health 
St. Joseph Hospital

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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 138 licensed beds, and a campus that is approximately 11.5 acres in size. St. Joseph Hospital has a staff of more than 1150 and professional relationships with more than 140 local physicians. Major programs and services include cardiac care, critical care, diagnostic imaging, emergency medicine including a Level III Trauma designated hospital, which is the highest level emergency department in the area, cancer program and obstetrics including a Level II neonatal intensive care unit, as well as community-based programs and resource centers focused on prevention, health promotion 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 \$7,428,209 in community benefit in FY 2017 (FY17). For FY17, St. Joseph Hospital had an unpaid cost of Medicare of \$25,782,298.

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 FY17, 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 \$157,000 to 13 organizations that provide healthy food to individuals facing food insecurity (in partnership with Redwood Memorial Hospital)
 - For the past five years 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
 - 33 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
 - Continued to contract with bi-lingual Licensed Marriage and Family Therapist to provide free counseling services to low-income Spanish-speaking families; added contract with a licensed therapist to provide services to Willow Creek CRC
 - Granted \$131,000 to 12 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 by adding a full time social worker in the ED, and piloting patient discharge folders
 - Expanded access to medical respite services by opening Betty's House in January 2017 in partnership with the Betty Kwan Chinn Homeless Foundation

- 1,543 avoidable bed days in medical respite at our three locations: Healing Ring, Serenity Inn and Betty's House supported by Care Transitions; a 63% increase from FY16
- Upgraded documentation system for Care Transitions and Paso a Paso by investing in ActMD platform which features community-wide case management capabilities
- Participation in the Rx Safe Humboldt workgroup, Care Improvement meeting, Community Huddle, MDT (multi-disciplinary team) meetings hosted by Adult Protective Services and the long-term care alternatives meeting

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 97 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 including a Level III Trauma designated hospital, which is the highest level emergency department in the area, cancer program and obstetrics including a Level II neonatal intensive care unit, as well as community-based programs and resource centers focused on prevention, health promotion and community building. With over 1150 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 \$7,428,209 in community benefit in FY 2017 (FY17). For FY17, St. Joseph Hospital had an unpaid cost of Medicare of \$25,782,298.

ORGANIZATIONAL COMMITMENT

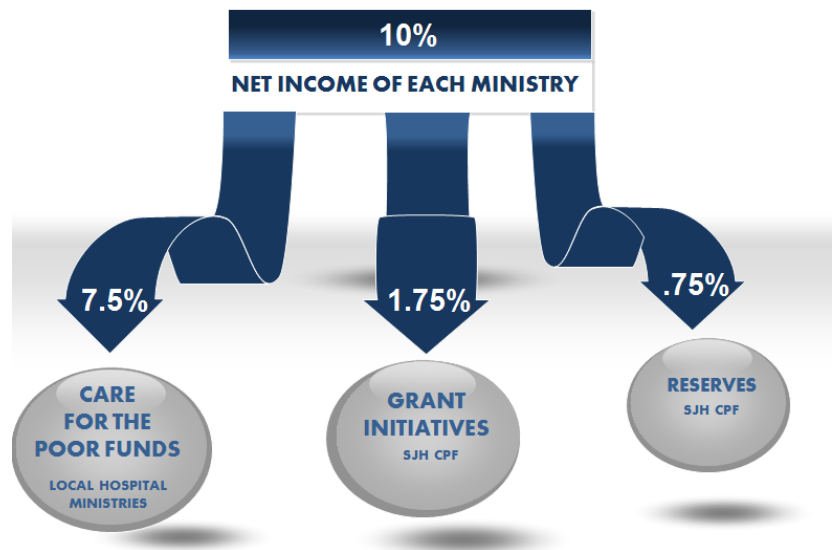
Community Benefit Governance Structure

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 FY17, St. Joseph Hospital, provided **\$1,454,144** free (charity care) and discounted care and **6,223 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 FY17, St. Joseph Hospital, provided \$771,034 in Medicaid shortfall.

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

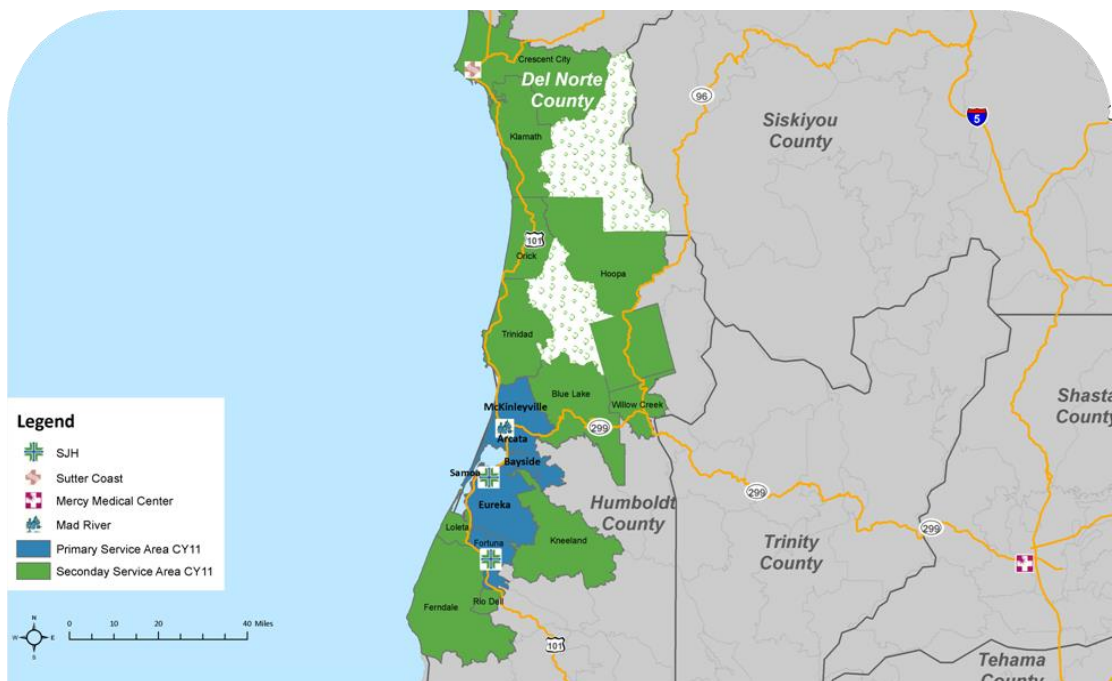
The community served by the Hospital is defined based on the geographic origins of the Hospital’s inpatients. The Hospital Total Service Area is comprised of both the Primary Service Area (PSA) as well as the Secondary Service Area (SSA) and is established based on the following criteria:

- 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 |

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 FY17 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 | FY17 Target | FY17 Result |
|--|--|--|---|
| Households reporting access to fresh produce using number of CalFresh beneficiaries as a proxy | August 2010 14,280 CalFresh beneficiaries | 5% increase from FY16 total beneficiaries (21,559) *FY15 total (20,655) | 20,610 CalFresh beneficiaries 4.4% decrease from FY16, did not meet target |

| Strategy(ies) | Strategy Measure | Baseline | FY17 Target | FY17 Result |
|---|---|----------|------------------|-------------|
| Community dinners/events featuring fresh produce and nutritious foods | <i>Number of dinners/events that feature fresh produce and nutritious foods</i> | 21 | 29 (FY16 result) | 33 |

| | | | | |
|--|---|---|--|---|
| hosted by CB programs | | | | |
| Support efforts related to sourcing of local foods | <i>Number of local food sourcing programs or projects supported</i> | 5 | <i>Add 5 more in FY17 (12 total in FY16)</i> | <i>8 new activities in FY17 for a total of 20</i> |

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, Loleta Elementary School, Humboldt Senior Resource Center, Wiyot Tribe, Klamath Trinity Resource Conservation District*

FY17 Accomplishments: In FY17, 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 experiencing food insecurity. 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. FY17 saw a decrease in total Humboldt County CalFresh recipients from FY16 totals. A likely explanation for this is overall economic improvement and lower unemployment rate than in years past.

The programs of the Community Benefit department hosted 33 events that featured free, nutritious foods and included fresh, local produce when available. From *Paso a Paso* fatherhood picnics and field trips to the local farmer’s markets to community BBQ’s in Blue Lake and Rio Dell to the *Cinco de Mayo* and Native American celebrations in Loleta, our programs brought community together around nourishing food, while celebrating culture and place and promoting mental wellness and social connectedness.

We also increased our partnerships with like-minded organizations supporting food security and local sourcing of foods. We granted \$157,000 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 continue the Farmer’s Market Voucher program for Supplemental Security Income (SSI) recipients who are disabled and have little or no income. This is the second year the voucher program has been offered to SSI recipients in Humboldt County; it allows vulnerable adults to purchase local, organic, and nutritious foods thus helping individuals maintain good health. For the seventh 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. Two other efforts St. Joseph Hospital funded in FY17, were the Humboldt Senior Resource Center's Home Delivered Meal Program for home-bound seniors; and the Willow Creek based Dream Quest Garden-to-Teen program which teaches young adults how to grow, harvest and prepare healthy foods while simultaneously providing job skills and a food handlers permit.

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 | FY17 Target | FY17 Result |
|--|----------|---|---|
| Number of MH/BH activities that improve access or enhance prevention of mental illness | 10 | Add 5 new in FY17 (20 total in FY16) | 12 new activities in FY17 for a total of 32 |

| Strategy(ies) | Strategy Measure | Baseline | FY17 Target | FY17 Result |
|---|---|----------|---|---|
| Reduce Stigma associated with mental illness | <i>Number of events or activities targeted at increasing awareness or reducing stigma</i> | 7 | <i>Add 4 new in FY17 12 in FY16</i> | <i>8 activities in FY17 for a total of 20</i> |
| 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 | \$100,000 (\$82,600 in FY16) | \$131,000 |

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, Changing Tides, Eel River Multi-Generational Center, Kunle Center, Fortuna Adventist Community Services, North Coast Substance Abuse Council, English Express, North Coast Health Information and Improvement Network, Alcohol and Drug Care Services

FY17 Accomplishments: Our stated goal and outcome measure changed to include prevention activities versus focus solely on access. We continued a strategy added last year 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 FY17. 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. In FY17 we continued to contract with a bi-lingual Licensed Marriage and Family Therapist to provide free counseling to low-income, uninsured Spanish speaking community and added a contract with a licensed therapist to travel to our Willow Creek Community Resource Center to help improve access to psychotherapy services. We also partnered with LatinoNet to support *Balie Terapia* which is a traditional Latino "dance therapy" class through providing funding and Paso a Paso staff time. We supported the grassroots English Express classes that teach English language learners in community-based settings in Eureka and Fortuna; students requested help learning English that will enable them to better communicate at medical appointments and parent-teacher conferences; students also took field trips to local museums and businesses to help students increase their comfort level in the community.

In FY17 St. Joseph Hospital was able to provide increased grant funding to organizations offering mental/behavioral health services or resources to vulnerable populations in our community. We supported 12 non-profit organizations with a total of \$131,000 in Care for the Poor grant dollars. Some examples of funded project are below:

- 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 wellness services to guests via a chaplain
- Redwood Teen Challenge for new furniture at their men's facility which expanded access
- 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
- Changing Tides to train and certify two licensed clinicians in the Theraplay modality
- Eel River Multi-Generational Center to expand the Step-Up program for at-risk youth to learn life and employment skills

Towards the end of FY17, St. Joseph Hospital applied for a received a \$1.6 million Mental Health and Wellness grant from Providence St. Joseph Health and the Well Being Trust. This grant will help create a Humboldt Accountable Community for Health (lead by NCHIIN, the

North Coast Health Information and Improvement Network) and also establish a new medical detox and treatment facility, Waterfront Recovery Services, located at the MAC building by Target in Eureka. Alcohol and Drug Care Services and Redwood Community Action Agency will run the facility which is owned by the City of Eureka.

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 | FY17 Target | FY17 Result |
|--|----------------------------|-------------|----------------------|
| Number of new or enhanced partnerships or services | 6 FY14 4 FY15 6 FY16 | 3 | 5 FY17 21 to date |

| Strategy(ies) | Strategy Measure | Baseline | FY17 Target | FY17 Result |
|--|--|--|--|---|
| Improve communication between the Emergency Department (ED) and Primary Care | <i>New communication tool or strategy</i> | ED Care Plans for high utilizers & phone calls to primary care physician to notify of patient overdose | Add 1 new tool/strategy | Social Worker embedded in the ED and Pilot ED discharge folders |
| Behavioral health outreach to skilled nursing facilities (BARTO) | <i>Expand access to behavioral health services; accept referrals from SNF on long-term residents</i> | N=30 | N=40 | N=54 |
| Expand SJH-HC Medical Respite services by partnering with The Betty Kwan Chinn Homeless Foundation | <i>Building renovations complete, formal partnership in place, and operations fully functioning</i> | Limited respite beds in Humboldt Co. (7 total); not accessible for those with mobility issues | Open 10 new medical respite beds at Betty's House; wheelchair accessible | Starting accepting patients in January 2017; 1,543 respite days in FY17, a 63% increase from FY16 |

Key Community Partners: *Redwood Memorial Hospital, Department of Health and Human Services, Open Door Community Health Centers, Humboldt Independent Practice Association, 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, ActMD, Humboldt Medical Group*

FY17 Accomplishments: Significant progress was made in FY17 around our priority area of Care Coordination and Referral. In past years we implemented ED care plans and ED phone calls to primary care physicians to notify of patient overdose, and in FY17, we embedded a social worker in the ED and created ED a discharge folder pilot project. Both tactics were successful and have been operationalized.

In FY 17 we expanded our Medical Respite program by partnering with the Betty Kwan Chinn Homeless Foundation. Building renovations on Betty's House were completed in December 2016 and we began accepting patients in January 2017. We maintained our two existing respite locations, Healing Ring and Serenity Inn, and learned that a variety of respite settings is a critical factor to our success; we are able to accommodate different populations with different needs which allows us to serve more people effectively. Respite bed days in FY17 totaled 1,543, a 63% increase from FY16. Short-term, intensive case management services for all homeless patients discharged to our respite locations is provided by SJH Care Transitions staff. This multi-disciplinary care team of nurse, social worker 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. Weekly meetings between Care Transitions staff and staff at Betty's House have been established to assure good communication and high quality care. In FY17, we also began accepting referrals to respite from Mad River Community Hospital.

In FY17 St. Joseph Hospital expanded our partnership with NCHIIN (North Coast Health Improvement and Information Network) around the ActMD project. We invested in a user agreement to access the ActMD platform for care coordination and as the primary electronic documentation system for Care Transitions and Paso a Paso. ActMD is a cloud-based, mobile, HIPPA compliant care coordination platform that will allow us to collaborate more effectively and report on data-driven outcomes. The goal is that ActMD will become a community-wide platform used across agencies to improve communication and care coordination for shared clients/patients.

Our service area is experiencing a shortage of primary care physicians and several community members who are newly insured, post ACA and Medi-Cal expansion, do not have a primary care physician. To help fill this gap, we expanded our partnership with Open Door

Community Health Centers to pilot an in-patient, post-discharge follow up clinic in Eureka. The goal is to meet the needs of patients being discharged from the hospital without a primary care physician who have immediate follow up needs following a hospitalization.

In FY17 we continued to participate in Community Huddles, MDT meetings (Multidisciplinary Team Meetings facilitated by Adult Protective Services), Care Improvement meetings and the Rx Safe Humboldt workgroup. In addition, St. Joseph Hospital leadership participated in the community-wide discussion around the ongoing long-term care needs in Humboldt. In FY17 Care Transitions began providing Partnership HealthPlan of California (PHC) with monthly respite utilization reports for their members. PHC is the managed Medi-Cal provider for 14 Northern CA counties including Humboldt County and they contributed to the expansion of medical respite beds at Betty's House. From December 2016 to June 2017, our respite program served 38 PHC members with 653 bed days in respite and intensive case management services by Care Transitions.

FY17 Other Community Benefit Program Accomplishments

| Initiative (community need being addressed): | Program | Description | FY17 Accomplishments |
|---|------------------------------------|--|--|
| 1. Access to Care | Transportation support | Free bus or taxi vouchers; gas cards | 1,176 transportation assistance provided to/from medical or health related appointments |
| 2. Access to Care | Health professionals education | Mentor and train health professionals | 725 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 | \$278,000 awarded to community partners in Care for the Poor Community Grants, in partnership with Redwood Memorial Hospital |
| 5. Access to Care | Healthy Kids Humboldt | Insurance enrollment and outreach, system navigation and tax preparation | 365 enrollments 6,425 outreach 60 families received free tax preparation with refunds totaling \$105,073. Average annual gross income per family \$25,000 |
| 6. Culturally appropriate Access to Care | Paso a Paso | Services for the Latino population (<i>provided entirely in Spanish</i>) | 99 free classes for Latino families 2 Fatherhood picnics 1 field trip to the Blueberry farm 2 field trips to farmer's markets 101 <i>Baile Terapia</i> (Dance Therapy) classes |

| Initiative (community need being addressed): | Program | Description | FY17 Accomplishments |
|--|--|---|---|
| 7. Care Coordination | Evergreen Lodge | Lodging and social work services for cancer patients | 483 cancer patients and their family stayed 3,194 nights at the lodge |
| 8. Care Coordination | Care Transitions | Medical Respite support for homeless patients post-discharge | 1520 days in medical respite care at Healing Ring, Serenity Inn, and Betty's Respite House |
| 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, Willow Creek and Rio Dell 402 participants 295 helmets handed out at events or donated to local schools |
| 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 | \$24,223 to 47 people |
| 11. Preventative Care | Free Flu Shots | Free flu shot clinics at the St. Joseph Health Community Resource Centers | 236 free 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 | Level III Trauma Designation |
| 13. Access to Care | Physician Recruitment | Recruitment of primary care and specialty physicians to medically underserved area and area with health professions shortage | 16 new physicians successfully recruited |

FY17 Community Benefit Investment

In FY17 St. Joseph Hospital invested a total of \$7,428,209 in key community benefit programs. Charity Care, which is free or discounted care as outlined by our Financial Assistance Policy (FAP), was \$1,454,144 and Medicaid shortfall was \$771,034.

FY17 COMMUNITY BENEFIT INVESTMENT

St. Joseph Hospital
(ending June 30, 2017)

| 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) | \$1,454,144 |
| | Unpaid cost of Medicaid ⁴ | \$771,034 |
| | Unpaid cost of other means-tested government programs | \$98,986 |
| | Total Community Benefit for the Vulnerable | |
| Other benefits for Vulnerable Populations | Community Benefit Operations | \$331,350 |
| | Community Health Improvements Services | \$2,245,135 |
| | Cash and in-kind contributions for community benefit | \$1,542,047 |
| | Community Building | \$1,418 |
| | Subsidized Health Services | \$0 |
| Other benefits for the Broader Community | Community Benefit Operations | \$0 |
| | Community Health Improvements Services | \$640,491 |
| | Cash and in-kind contributions for community benefit | \$154,380 |
| | Community Building | \$20,065 |
| | Subsidized Health Services | \$89,226 |
| Health Professions Education, Training and Health Research | Health Professions Education, Training & Health Research | \$79,933 |
| | Total Community Benefit for the Broader Community | |
| TOTAL COMMUNITY BENEFIT (excluding Medicare) | | \$7,428,209 |
| Medical Care Services for the Broader Community | Unpaid cost to Medicare ⁵ (not included in CB total) | \$25,782,298 |

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 SJH, 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 caregivers is dedicated to providing the best patient-centered health care available on the North Coast and volunteer in the community on a regular basis.

In FY17 St. Joseph Hospital launched two new programs for caregivers – a *Living the Legacy* formation opportunity and *Schwartz Rounds* which is a nationally recognized program to preserve and protect the human connection in health care. Caring for the caregiver and providing an excellent experience for every patient that needs our care are a central focus for St. Joseph Hospital. 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 caregivers spend countless hours volunteering in our community. From feeding the homeless with church and non-profit groups, to staffing medic services at musical events to organizing teams for Relay for Life, our caregivers consistently give back. Caregivers volunteer time to serve on non-profit community boards and they generously donate their hard-earned dollars towards efforts to assure stable health care access for future generations.

Community partnership is something we believe in and another non-financial benefit we provide the community. The Community Benefit department partners with local foundations and funders via the North Coast Grantmaking Partnership to jointly support local projects and programs. We partner with Food for People - our area's food bank – by participating in their annual Hunger Fighter Challenge during the holidays.

We organize a back-to-school supply drive for our area's children and a cold weather clothing drive for those in need. In FY17 we collected over 181 items of clothing including jackets, socks, rain ponchos and sturdy shoes. We donate excess hospital food to churches and food-security organization and in FY17 we donated medical supplies to support two international medical mission trips organized by our caregivers.

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 FY17 Community Benefit Report was approved at the October 25, 2017 meeting of the St. Joseph Hospital Community Benefit Committee of the Board of Trustees.

Becky Alarmon

Chair's Signature confirming approval of the FY17 Community Benefit Annual Report

10-25-17
Date