



### **MISSION HOSPITAL**

FY20 Community Benefit Report Progress on FY18-FY20 CB Plan/Implementation Strategies Report

> To provide feedback about this Community Benefit Report, email: <u>Christy.Cornwall@stjoe.org</u>

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#### **EXECUTIVE SUMMARY**

Mission Hospital has been meeting the health and quality of life needs of the local community nearly 50 years since it was founded in 1971. A member of Providence St. Joseph Health, the facility has 523 licensed beds. It serves the communities of Mission Viejo, Laguna Beach, Laguna Niguel, San Juan Capistrano, San Clemente, Rancho Santa Margarita, Lake Forest, Laguna Hills, Dana Point, Ladera Ranch Trabuco Canyon, Capistrano Beach and Aliso Viejo.

St. Joseph Health, Mission Hospital in Mission Viejo, the region's only designated trauma center offers 24-hour emergency care and specialized services for imaging, heart, stroke, maternity, and women's wellness needs. CHOC Children's at Mission Hospital in Mission Viejo is the only dedicated pediatric hospital in South Orange County. Mission Hospital Laguna Beach offers 24-hour emergency, intensive and medical-surgical care, as well as the South County's only behavioral health services, including hospital-based chemical and pain medication dependency treatment.

Community Benefit is the cornerstone of who we are as a ministry of the Sisters of St. Joseph of Orange. We serve the dear neighbor and provide much needed services to our most vulnerable communities through our programs such as financial assistance and initiatives that are specifically designed for our low-income residents. We also provide programs for the broader community to improve health and quality of life.

<u>Providence St. Joseph Health (PSJH)</u> is an organization created by Providence Health & Services and St. Joseph Health with the goal of improving the health of the communities it serves, especially those who are poor and vulnerable.

## **Community Benefit Investment**

In FY20, Mission Hospital invested a total of \$36,321,231 Community Benefit dollars that included Financial Assistance at cost, and other cost of care, in addition to strategic community investment addressing community need. For FY20, Mission Hospital had an unpaid cost of Medicare of \$35,775,724.

## FY18-FY20 CB Plan Priorities/Implementation Strategies

In FY20 the hospital implemented the following strategies addressing priorities as developed in its FY18-FY20 Community Benefit Implementation Plan.

Mental Health We work to improve the mental health of our most vulnerable residents through prevention and ensuring access to appropriate, affordable services as well as help to prevent substance use among youth. In FY20, we increased the number of adults receiving individual and group mental health services through our Family Resource Centers by 7% (530 individuals) from the prior year, providing 3,671 services to these individuals. Our stigma reduction campaign expanded to reach across Orange County and is now a regional program in partnership with St. Jude Medical Center and St. Joseph Hospital. This program continued to measure positive community change toward mental illness while collecting over 2,162 unique promises. Our youth substance use prevention efforts continued to impact local communities positively, and our two social media campaigns, Raising Healthy Teens and Strength in Numbers were selected as the 2019 Silver Award winners of the National Berreth Award by the National Public Health Information Coalition.

*Immigrant Support & Solidarity* Fear across our immigrant communities has grown considerably since 2017. As a result, many immigrants are afraid to participate in community events, access resources, including health services and engage with neighbors. We began efforts in 2018 to increase the number of low-income individuals that receive supportive services. In FY20, we provided immigration relief outreach, education, and services to 742 unduplicated clients, representing 5,770 encounters.

*Economic Mobility* Residents shared challenges in finding jobs that pay a living wage, particularly given the cost of living in South Orange County and the stress caused by living in or near poverty. In 2019, Mission Hospital implemented the COPE Health Scholars Program provides college students with an opportunity for clinical experience in assisting healthcare professionals' basic patient care to prepare for a career in healthcare. With the program reaching its 2<sup>nd</sup> anniversary, it is currently averaging 8 full time equivalent caregivers with 68 active students gaining experience in four clinical areas.

Due to the fast pace at which the community and health care industry change, Mission Hospital anticipates that implementation strategies may evolve and therefore, a flexible approach is best suited for the development of its response to the Mission Hospital Community Health Needs Assessment (CHNA). On an annual basis Mission Hospital evaluates its Community Benefit Plan, specifically its strategies and resources, and adjusts as needed to achieve its goals/outcome measures, and to adapt to changes in resource availability.

#### Responding to the COVID-19 Pandemic

Community Benefit Programs were disrupted by the SARS-COV-2 virus and COVID-19, which has impacted all of our communities. Our commitment first and foremost is to respond to the needs of our communities, particularly individuals who are disproportionately impacted by the economic and social effects of COVID-19. While this is a dynamic situation, we recognize the greatest needs of our communities will change in the coming months, and it is important that we

adapt our efforts to respond accordingly. We are committed to supporting, strengthening, and serving our communities in ways that align with our Mission, engage our expertise, and leverage our Community Benefit dollars in the most impactful ways.

#### PROVIDENCE ST. JOSEPH HEALTH

<u>Providence St. Joseph Health</u> is an organization created by Providence Health & Services and St. Joseph Health with the goal of improving the health of the communities it serves, especially those who are poor and vulnerable.

Together, our 120,000 caregivers (all employees) serve in 50 hospitals, 1,085 clinics and a comprehensive range of services across Alaska, California, Montana, New Mexico, Oregon, Texas and Washington. The Providence St. Joseph Health family includes: Providence Health & Services, St. Joseph Health, Covenant Health in West Texas, Facey Medical Foundation in Los Angeles, Hoag Memorial Presbyterian in Orange County, Calif., Kadlec in Southeast Washington, Pacific Medical Centers in Seattle, and Swedish Health Services in Seattle

Bringing these organizations together is a reflection of each of our unique missions, increasing access to health care and bringing quality, compassionate care to those we serve, with a focus on those most in need. By coming together, Providence St. Joseph Health has the potential to seek greater affordability, achieve outstanding and reliable clinical care, improve the patient experience and introduce new services where they are needed most.

#### It begins with heritage

The founders of both organizations were courageous women ahead of their time. The Sisters of Providence and the Sisters of St. Joseph of Orange brought health care and other social services to the American West. Now, as we face a different landscape – a changing health care environment – we draw on their spirit of faith, flexibility and fortitude to guide us through these transformative times.

#### **Providence Health & Services**

In 1856, Mother Joseph and four Sisters of Providence established hospitals, schools and orphanages across the Northwest. Over the years, other Catholic sisters transferred sponsorship of their ministries to Providence, including the Little Company of Mary, Dominicans and Charity of Leavenworth. Recently, Swedish Health Services, Kadlec Regional Medical Center and Pacific Medical Centers have joined Providence as secular partners with a common commitment to serving all members of the community. Today, Providence serves Alaska, California, Montana, Oregon and Washington.

#### St. Joseph Health

In 1912, a small group of Sisters of St. Joseph landed on the rugged shores of Eureka, Calif., to provide education and health care. The ministry later established roots in Orange, Calif., and expanded to serve Southern California, the California High Desert, Northern California and Texas. The health system established many key partnerships, including a merger between Lubbock Methodist Hospital System and St. Mary Hospital to form Covenant Health in Lubbock Texas. An affiliation was established with Hoag Health to increase access to services in Orange County, Calif.

#### MISSION, VISION, AND VALUES

#### **Our Mission**

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

#### Our Vision

Health for a Better World.

#### Our Values

Compassion

Dignity

*Iustice* 

Excellence

Integrity

#### INTRODUCTION - WHO WE ARE AND WHY WE EXIST

As a ministry founded by the Sisters of St. Joseph of Orange, Mission 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 Hospital is a state-of-the art, 523-bed acute care regional medical center in Mission Viejo, California. As one of the busiest designated adult and pediatric Level II Trauma Centers in the state of California, Mission Hospital provides a full range of specialty health care services with highly skilled teams treating a multitude of complex conditions. Services include a full range of expertise in cardiovascular, neuroscience and spine, orthopedics, cancer care, women's services, mental health and wellness, head and neck, and a variety of other specialty services.

Mission Hospital in Laguna Beach (MHLB) provides South Orange County coastal communities with 24-hour emergency and intensive care as well as medical-surgical/telemetry services, orthopedics, general and GI surgery. CHOC Children's at Mission Hospital is a 54-bed facility that is the area's only dedicated pediatric hospital.

Fully accredited by The Joint Commission and designated as a Magnet hospital by the American Nurses Credentialing Center for nursing excellence, Mission Hospital is highly recognized for its high quality of care, evidenced through a multitude of health care quality benchmarks. Mission Hospital is part of Providence St. Joseph Health, a not-for-profit provider of integrated health care. Together, we work to improve the quality of life in the communities we serve in the tradition of the Sisters of St. Joseph of Orange. For more information, visit <a href="https://www.Mission4Health.com">www.Mission4Health.com</a>.

#### **COMMUNITY BENEFIT INVESTMENT**

In FY20, Mission Hospital invested a total of \$36,321,231 Community Benefit dollars that included Financial Assistance at cost, and other cost of care, in addition to strategic community investment addressing community need. For FY20, Mission Hospital had an unpaid cost of Medicare of \$35,775,724.

#### ORGANIZATIONAL COMMITMENT

St. Joseph Health, Mission 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 lives of low-income individuals residing in local communities served by SJH Hospitals.

Up until 2019, Mission Hospital allocated 10 percent of its net income (net realized gains and losses) to the St. Joseph Health Community Partnership Fund. 75 percent of these contributions were used to support local hospital Care for the Poor Programs. 17.5 percent was used to support SJH Community Partnership Fund grant initiatives. The remaining 7.5 percent was designated toward reserves, which helped ensure the Fund's ability to sustain programs into the future that assist low-income and underserved populations. In 2020, Mission Hospital utilized Care for the Poor Fund reserves to support many of its community health programs. Mission 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

Mission Hospital further demonstrates organizational commitment to the community benefit process through the allocation of staff time, financial resources, participation and collaboration. The Chief Mission Integration Officer and the Director of Community Health Investment 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.

A charter approved in 2007 establishes the formulation of the Mission 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 governing 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 providing oversight to Community Benefit activities.

The Community Benefit Committee has a minimum of eight members including three members of the Board of Trustees. Current membership includes 3 members of the Board of Trustees and 8 community members. 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 six (6) times per year.

#### **Roles and Responsibilities**

#### Senior Leadership

• CEO and other senior leaders are directly accountable for CB performance.

#### Community Benefit Committee (CBC)

- CBC serves as an extension of trustees to provide direct oversight for all charitable program activities and ensure program alignment with Catholic Health Association's Five Core Principles for Community Benefit. It includes diverse community stakeholders. Trustee members on CBC serve as 'board level champions'.
- The committee provides recommendations to the Board of Trustees regarding budget, program targeting and program continuation or revision.

# PSJH Community Health Investment (CHI) Department supports Mission Hospital in the following roles:

- Manages CB efforts and coordination between CB and Finance departments on reporting and planning.
- Manages data collection, program tracking tools and evaluation.
- Develops specific outreach strategies to access identified Disproportionate Unmet Health Needs (DUHN) populations.
- Coordinates with clinical departments to reduce inappropriate ER utilization.
- Advocates for CB to senior leadership and invests in programs to reduce health disparities.

#### Local Community

- Partnership to implement and sustain collaborative activities.
- Formal links with community partners.
- Provide community input to identify community health issues.
- Engagement of local government officials in strategic planning and advocacy on healthrelated issues on a city, county, or regional level.

#### 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 Mission 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 FY20, Mission Hospital provided \$6,193,855 free and discounted care following a policy providing assistance to patients earning up to 500% of the federal poverty level. This resulted in 6,711 patients receiving free or discounted care.

For information on our Financial Assistance Program click: \_ https://www.providence.org/obp/ca/orange-county-and-high-desert

#### Medi-Cal (Medicaid)

St. Joseph Health, Mission Hospital provides access to the uninsured and underinsured by participating in Medicaid, also known as Medi-Cal in California. In FY20, Mission Hospital provided \$23,623,642 in Medicaid shortfall.

#### **COMMUNITY**

#### **Definition of Community Served**

Mission Hospital provides South Orange County communities with access to advanced care and advanced caring. The hospital's service area extends from the junction of the 405 and 5 freeways in the north, to Camp Pendleton in the south, Santa Ana Mountains in the east and the Pacific Ocean in the west. Our Hospital Total Service Area includes the cities of Aliso Viejo Capistrano Beach, Dana Point, Foothill Ranch Ladera Ranch, Laguna Beach, Laguna Hills, Laguna Niguel, Laguna Woods, Lake Forest, Mission Viejo, Rancho Santa Margarita, San Clemente and San Juan Capistrano, and Trabuco Canyon.

#### **Community Profile**

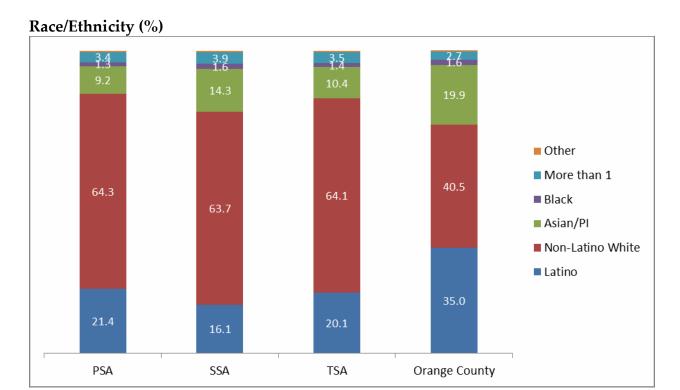
The table and graph below provide basic demographic and socioeconomic information about the Mission Hospital Service Area and how it compares to Orange County and the state of California. The Total Service Area (TSA) of Mission Hospital has just over 600,000 people, with a median household income of nearly \$100,000. There are older adults and more non-Latino Whites in the service area than in Orange County and California. Compared to the county and state, the service area, on average, is relatively prosperous, but the overall data hides pockets of poverty, which can be seen in the report section on Selected Health Indicators: Secondary Data.

Service Area Demographic Overview

Indicator	PSA	SSA	TSA	Orange County	California
Total Population	463,855	145,411	609,266	3,172,848	38,986,171
Under Age 18	22.3%	21.4%	22.1%	22.9%	23.6%
Age 65+	15.1%	18.2%	15.9%	13.5%	13.2%
Speak only English at home	75.6%	74.3%	75.3%	54.4%	56.2%
Do not speak English "very well"	8.8%	8.0%	8.6%	19.1%	16.9%
Median Household Income	\$100,234	\$94,271	\$98,814	\$78,612	\$62,554
Households below 100% of FPL	4.7%	3.7%	4.5%	9.2%	12.3%
Households below 200% FPL	13.0%	10.4%	12.4%	23.5%	29.8%
Children living below 100% FPL	8.5%	5.2%	7.7%	17.6%	22.7%
Older adults living below 100% FPL	6.6%	8.4%	7.1%	8.7%	10.2%

PSA = Primary Service Area – representing 70% of discharges from Mission Hospital

SSA = Secondary Service Area – representing 71% to 85% of all discharges TSA = Total Service Area – PSA and SSA combined



### **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 the 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% of discharges (excluding normal newborns)
- SSA: 71%-85% 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 Capistrano Beach, Dana Point, Ladera Ranch, Laguna Beach, Laguna Niguel, Lake Forest, Mission Viejo, Rancho Santa Margarita, San Clemente and San Juan Capistrano. The SSA is comprised of Aliso Viejo, Foothill Ranch, Laguna Hills, Laguna Woods, and Trabuco Canyon.

Table 1. Cities and ZIP codes

Cities/	ZIP Codes	PSA or SSA
Communities		
Capistrano Beach	92624	PSA
Dana Point	92629	PSA
Ladera Ranch	92694	PSA
Laguna Beach	92651	PSA
Laguna Niguel	92677	PSA
Lake Forest	92630	PSA
Mission Viejo	92691	PSA
Mission Viejo	92692	PSA
Rancho Santa	92688	PSA
Margarita		
San Clemente	92672	PSA
San Clemente	92673	PSA
San Juan	92675	PSA
Capistrano		
Aliso Viejo	92656	SSA
Foothill Ranch	92610	SSA
Laguna Hills	92653	SSA
Laguna Woods	92637	SSA
Trabuco Canyon	92679	SSA

Figure 1 (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.

15 hoag Orange County Riverside County 92677 MHLB Legend SJH Acute Care 92673 Cleme **PACIFIC** 92672 San Diego Kaiser OCEAN County MH Primary Service Area MH Secondary Service Area National Forest 0 1.25 2.5

Figure 1. Mission Hospital Total Service Area

Mission Hospital (MH) Hospital Total Service Area

Map represents Hospital Total Service Area (HTSA). The Primary Service Area (PSA) comprises 70% of total discharges (excluding normal newborns). The Secondary Service Area (SSA) comprises 71% - 85% of total discharges (excluding normal newborns). The HTSA combines the PSA and the SSA. Includes zip codes for continuity. Cities are placed in either PSA or SSA, but not both. MHLB = Mission Hospital Laguna Beach. Prepared by the St. Joseph Health Strategic Services Department, April 2016.

## Community Need Index (Zip Code Level) Based on National Need

The Community Need Index (CNI) was developed by Dignity Health (formerly known as Catholic Healthcare West (CHW)) and Truven Health Analytics. The Community Needs Index (CNI) identifies the severity of health disparity for every zip code in the United States and demonstrates the link between community need, access to care, and preventable hospitalizations.

CNI aggregates five socioeconomic indicators that contribute to health disparity (also known as barriers):

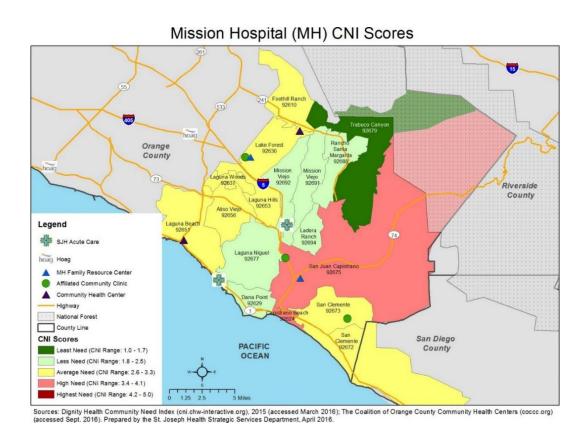
- Income Barriers (Elder poverty, child poverty and single parent poverty)
- Culture Barriers (non-Caucasian limited English);

- Educational Barriers (% population without HS diploma);
- Insurance Barriers (Insurance, unemployed and uninsured);
- Housing Barriers (Housing, renting percentage).

This objective measure is the combined effect of five socioeconomic barriers (income, culture, education, insurance and housing). A score of 1.0 indicates a zip code with the fewest socioeconomic barriers, while a score of 5.0 represents a zip code with the most socioeconomic barriers. Residents of communities with the highest CNI scores were shown to be twice as likely to experience preventable hospitalizations for manageable conditions such as ear infections, pneumonia or congestive heart failure compared to communities with the lowest CNI scores. (*Ref* (*Roth R*, *Barsi E.*, *Health Prog.* 2005 *Jul-Aug*; 86(4):32-8.) The CNI is used to a draw attention to areas that need additional investigation so that health policy and planning experts can more strategically allocate resources. For example, the ZIP code 92675 (San Juan Capistrano) on the CNI map scored 3.6, making it a High Need community.

Figure 2 (below) depicts the Community Need Index for the *hospital's geographic service area based on national need*. 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. Mission Hospital Community Need Index (Zip Code Level)

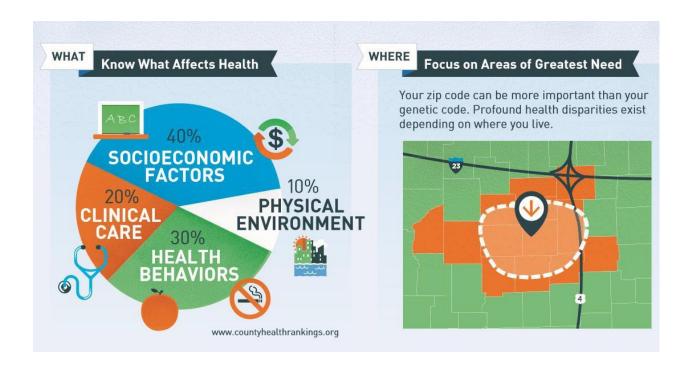


#### COMMUNITY NEEDS AND ASSETS ASSESSMENT PROCESS & RESULTS

#### Summary of Community Needs, Assets, Assessment Process and Results

The CHNA process was guided by the fundamental understanding that much of a person's health is determined by the conditions in which they live. In gathering information on the communities served by the hospital, we looked not only at the health conditions of the population, but also at socioeconomic factors, the physical environment, health behaviors, and the availability of clinical care. This framework, depicted in the graphic below from County Health Rankings and Roadmaps, focuses attention on the social determinants of health to learn more about opportunities for intervention that will help people become and stay healthy within their community.

In addition, we recognized that where people live tells us a lot about their health and health needs, and that there can be pockets within counties and cities where the conditions for supporting health are substantially worse than nearby areas. To the extent possible, we gathered secondary and primary data at the zip code level to show the disparities in health and the social determinants of health that occur within the hospital service area.



Examples of the types of information that was gathered, by health factor, are:

Socioeconomic Factors – income, poverty, education, and food insecurity

*Physical Environment* – crowded living situations, cost of rent relative to incomes, long commutes, and pollution burden

*Health Behaviors* – obesity, sugary drink consumption, physical exercise, smoking, and substance abuse

*Clinical Care* – uninsured, prenatal care, and the number of people per physician or mental health worker

In addition to these determinants of health, we also looked at the health outcomes of the people living in the service area, by zip code whenever possible. The health conditions that were examined included:

*Health Outcomes* – overall health condition, asthma, diabetes, heart disease, cancer, and mental health

#### **Community Partners:**

Mission Hospital partnered with the following community groups to host the Community Resident Focus Groups and Forums.

*The Olin Group* is a socially conscious consulting firm working across nonprofit, public, private, and philanthropic sectors to bring about community transformation. Based in Santa Ana, California, The Olin Group has 15 years of experience working on evaluation, planning, assessment, fundraising, communication, and other services for nonprofit organizations, and had previously supported the CHNA process of multiple hospitals in the St. Joseph Health system. The Olin Group served as the lead consultant in the CHNA process, coordinating the quantitative and qualitative data collection processes and assisting in the prioritization and selection of health needs.

Professional Research Consultants brings excellence to healthcare through custom market research. It remains the largest privately held market research firm dedicated solely to the healthcare industry. In addition to being a certified vendor for government-mandated Consumer Assessment of Healthcare Providers & Systems (CAHPS) surveys, PRC also provides custom research services that measure community perceptions, patient experience, physician alignment and employee engagement. PRC also conducts community health needs assessments in accordance with IRS guidelines. PRC was founded in 1980 and is headquartered in Omaha, Nebraska.

*Marco Forster Middle School, San Juan Capistrano*. Part of the Capistrano Unified School District, Marco Forster Middle School serves approximately 1,350 6<sup>th</sup> through 8<sup>th</sup>

grade students in the city of San Juan Capistrano. The middle school hosted two resident focus groups and a community forum.

#### Secondary Data/Publicly available data

Within the guiding health framework for the CHNA, publicly-available data was sought that would provide information about the communities and people within the Mission Hospital service area. In addition, comparison data was gathered to show how the service area communities are faring compared to the county or state. Indicators were chosen if they were widely accepted as valid and appropriate measures and would readily communicate the health needs of the service area. Preference was given to data that was obtained in the last 5 years and was available at the zip code level. The data sources used are highly regarded as reliable sources of data (e.g., ESRI Business Analyst Online, US Census Bureau American FactFinder, and California Health Interview Survey). In total, 81 indicators were selected to describe the health needs in the hospital's service area.

#### **Primary Data**

**Telephone Survey:** a telephone survey was conducted by Professional Research Consultants, Inc. (PRC) using a systematic, data driven approach to determining the health status and needs in designated high need areas. The information from this survey was used to inform decisions and guide efforts to improve community health and wellness. The telephone survey gathered a total of 1,703 interviews, a sample that is representative of the actual population demographics.

#### **Community Input**

A significant part of our needs assessment includes obtaining community input. We gathered direct feedback from residents using four major avenues: telephone surveys, stakeholder panel, resident focus groups and priority setting forums.

**Stakeholder Panel Interview:** The Olin Group facilitated a discussion with key informants representing a wide variety of service providers and leaders across our service area. A total of 14 community stakeholders brought their first-hand knowledge about residents' needs, services available, and current and emerging community health and quality of life issues.

**Resident Focus Groups:** 55 residents participated in focus groups in south Orange County. At each group, areas of needs gathered from primary and secondary resources were shared with participants to get their feedback and validate early findings. Residents identified any missing health and quality of life issues and discussed these issues according to their concerns.

Community Forums: Two forums were held during the needs assessment to allow community residents to share their perspectives on the initial health needs identified through other methods and discuss their importance from their perspective. These forums were facilitated by The Olin Group. After the significant health needs were presented and discussed, participants engaged in a cumulative voting process using dots to indicate their greatest concerns. Through this design, the forums served as something of a "capstone" to the community input.

#### Identification and Selection of Significant Health Needs

Communities with Disproportionate Unmet Health Needs (DUHN) are communities defined by zip codes where there is a higher prevalence or severity for a particular health concern than the general population within Mission Hospital's 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, <u>or</u> 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 significant health needs and community resources/assets.

Significant Health Need	Target Population	Geographic Area (City, Zip Code, County)	Community Resources (Name of Organization(s)
Access to Resources	Low-income adults	Capistrano Beach, 92624 Dana Point, 92629 Laguna Beach, 92651 Lake Forest,92630 Mission Viejo, 92692 San Clemente, 92672 San Juan Capistrano, 92675	<ul> <li>Camino Health Center</li> <li>Community and Senior Centers</li> <li>CHEC Family Resource Center</li> <li>Families Forward</li> <li>Family Assistance Ministry</li> <li>Helping Hands Worldwide</li> <li>Laguna Beach Community Clinic</li> <li>Laguna Food Pantry</li> <li>Laguna Resource Center</li> <li>Mission Basilica</li> <li>Our Fathers Table</li> <li>South County Outreach</li> <li>South Orange County Family Resource Center</li> <li>Women, Infant &amp; Children's Clinic (WIC)</li> </ul>
Dental Care	Low-income adult and children	Capistrano Beach, 92624 Lake Forest,92630 San Clemente, 92672 San Juan Capistrano, 92675	<ul> <li>Camino Health Center</li> <li>Laguna Beach Community Clinic</li> </ul>
Diabetes	Low-income adult	Capistrano Beach, 92624 Lake Forest,92630 San Clemente, 92672 San Juan Capistrano, 92675	<ul> <li>Camino Health Center</li> <li>Laguna Beach Community Clinic</li> </ul>
Economic Insecurity	Low-income adult and children	Capistrano Beach, 92624 Lake Forest,92630 San Clemente, 92672 San Juan Capistrano, 92675	<ul> <li>CHEC Family Resource Center</li> <li>Families Forward</li> <li>Family Assistance Ministry</li> <li>Mission Basilica</li> <li>South County Outreach</li> <li>South Orange County Family Resource Center</li> </ul>

Food and Nutrition	Low-income adult and children	Capistrano Beach, 92624 Lake Forest,92630 San Clemente, 92672 San Juan Capistrano, 92675	<ul> <li>CHEC Family Resource Center</li> <li>Ecology Center</li> <li>Families Forward</li> <li>Family Assistance Ministry</li> <li>Father Serra's Food Pantry, Mission Basilica</li> <li>Helping Hands Worldwide</li> <li>Laguna Food Pantry</li> <li>Second Harvest Food Bank</li> <li>South County Outreach</li> <li>South Orange County Family Resource Center</li> <li>Women, Infant &amp; Children's Clinic (WIC)</li> </ul>
Homelessness	Low-income adults, predominately single mothers and single men that are veterans	Capistrano Beach, 92624 Dana Point, 92629 Laguna Beach, 92651 Lake Forest,92630 Mission Viejo, 92692 San Clemente, 92672 San Juan Capistrano, 92675	<ul> <li>Alternative Sleeping Location (ASL Homeless Shelter)</li> <li>Camino Health Center</li> <li>Families Forward</li> <li>Family Assistance Ministry</li> <li>Friendship Shelter</li> <li>Helping Hands Worldwide</li> <li>Henderson House</li> <li>Laguna Beach Community Clinic</li> <li>Laguna Resource Center</li> <li>Our Fathers Table</li> <li>South County Outreach</li> <li>South Orange County Taskforce on Homelessness</li> </ul>
Housing Concerns	Low-income adult	Lake Forest,92630 San Clemente, 92672 San Juan Capistrano, 92675 Mission Viejo, 92692	<ul> <li>CHEC Family Resource Center</li> <li>Family Solutions</li> <li>Families Forward</li> <li>Friendship Shelter</li> <li>Habitat for Humanity</li> <li>South County Outreach</li> <li>South Orange County Family Resource Center</li> </ul>
Immigration Status	Low-income Hispanic adults	Lake Forest,92630 San Clemente, 92672 San Juan Capistrano, 92675	<ul> <li>Catholic Charities</li> <li>CHEC Family Resource Center</li> <li>CHIRLA</li> <li>Diocese of Orange County</li> <li>Legal Aid Society of OC</li> <li>Public Law Center</li> <li>South Orange County Family Resource Center</li> </ul>

Insurance and Cost of Care	Low-income adult	Lake Forest,92630 San Clemente, 92672 San Juan Capistrano, 92675	<ul> <li>Camino Health Center</li> <li>Coalition of Community Health Centers</li> <li>CHEC Family Resource Center</li> <li>Community Health Initiative of Orange County</li> <li>Family Assistance Ministry</li> <li>Families Forward</li> <li>South County Outreach</li> <li>South Orange County Family Resource Center</li> </ul>
Lack of Education	Low-income Hispanic adults and children	Capistrano Beach, 92624 Lake Forest,92630 San Clemente, 92672 San Juan Capistrano, 92675	<ul> <li>Boys &amp; Girls Club Chapters</li> <li>CREER, San Juan Capistrano</li> <li>Capistrano Unified School         District</li> <li>CHEC Family Resource Center</li> <li>Families Forward</li> <li>Saddleback College Adult         Education</li> <li>Saddleback Valley Unified School         District</li> <li>South County Outreach</li> <li>South Orange County Family         Resource Center</li> </ul>
Lack of Exercise	Low-income Hispanic adults	Capistrano Beach, 92624 Lake Forest,92630 San Clemente, 92672 San Juan Capistrano, 92675	<ul> <li>Boys &amp; Girls Club Chapters</li> <li>Local Parks &amp; Recreation Programs</li> <li>YMCA Chapters</li> </ul>
Language and Cultural Barriers	Low-income Hispanic adults	Capistrano Beach, 92624 Lake Forest,92630 San Clemente, 92672 San Juan Capistrano, 92675	<ul> <li>CHEC Family Resource Center</li> <li>Catholic Charities</li> <li>Diocese of Orange County</li> <li>Saddleback College Adult Education</li> <li>South Orange County Family Resource Center</li> </ul>

Mental Health	Low-income Hispanic adults	Capistrano Beach, 92624 Lake Forest,92630 San Clemente, 92672 San Juan Capistrano, 92675	<ul> <li>Camino Health Center</li> <li>CHEC Family Resource Center</li> <li>Child Guidance Center</li> <li>Mariposa Women's Center</li> <li>Omid Multicultural Institute for Development</li> <li>Seneca Family of Agencies</li> <li>South Orange County Family Resource Center</li> <li>Wellness and Prevention Center</li> <li>Wellness Center</li> <li>Western Youth Services</li> </ul>
Obesity	Low-income adults and children	Capistrano Beach, 92624 Lake Forest,92630 San Clemente, 92672 San Juan Capistrano, 92675	<ul> <li>Boys &amp; Girls Club Chapters</li> <li>Local Parks &amp; Recreation Programs</li> <li>YMCA Chapters</li> </ul>
Substance Abuse	Adults and young adults	Capistrano Beach, 92624 Lake Forest,92630 San Clemente, 92672 San Juan Capistrano, 92675	<ul> <li>AA Meetings</li> <li>Capistrano Unified School District</li> <li>Friendship Shelter</li> <li>Mission Hospital</li> <li>Wellness &amp; Prevention Center</li> </ul>

#### **Community Health Needs Prioritized**

#### List of Priority Health Needs

The matrix below shows the 15 health needs identified through the complete health needs assessment process, and their prioritized scores. The check marks indicate each source of input and if the listed issue was identified as a need by that input process.

Significant Health Need	Health Category	Total Rank Score	PRC Study	Community Data	Resident Focus Group (FG)	Non-profit/ Govt. Stakeholder FG	Community Forum
Mental Health	Health Outcome	47.7	✓	✓	✓	✓	✓
Housing Concerns	Physical Environment	42.2	✓	✓	✓	✓	✓
Substance Abuse	Health Behavior	41.9		✓	✓		✓
Access to Resources	Clinical Care	40.5	✓	✓	✓	✓	✓
Obesity	Health Behavior	40.0	✓	✓	✓	✓	✓
Insurance and Cost of Care	Clinical Care	39.7	✓	✓	✓	✓	✓
Food and Nutrition	Socioeconomic	39.5	✓	✓	✓	✓	✓
Diabetes	Health Outcome	39.1	✓	✓			✓
Lack of Education	Socioeconomic	39.0	✓	✓	✓		✓
Lack of Exercise	Health Behavior	38.1	✓	✓			✓
Homelessness	Socioeconomic	37.8	✓	✓	✓	✓	✓
Dental Care	Clinical Care	36.7	✓		✓		✓
Immigration Status	Socioeconomic	35.9			✓		✓
Economic Insecurity	Socioeconomic	35.9		✓	✓	✓	✓
Language + Cultural Barriers	Socioeconomic	34.1		✓	✓	✓	

Based on the combined results of the assessment process, Mission Hospital is addressing the following priority areas as part of its FY18-FY20 CB Plan/Implementation Strategy Report:

- Mental Health & Substance Use issues of stress, depression, anxiety, as well as more
  serious health conditions such as mental illness and Posttraumatic Stress Disorder are
  included here, as well as substance use issues around prescription medications, alcohol,
  marijuana and illegal substances. Mental Health & Substance Use was selected due to its
  prioritization as a top need, the clear importance the community placed on it, and its
  substantial impact on the health of many people in the service area.
- *Immigrant Support* Fear across our immigrant communities has grown considerably since 2016. As a result, many immigrants are afraid to participate in community events, access resources, including health services and engage with neighbors. Immigrant support received special priority given the clear importance of this issue to the

community. Mission Hospital wished to uphold the ministry's emphasis on the poor and vulnerable, and felt a responsibility to compassionately support and advocate for this population, as they often cannot do so themselves.

• *Economic Mobility* – because this is a root cause for several socioeconomic indicators, identifying methods to improve issues of poverty, employment or other economic concerns is a critical need in South Orange County. Economic Mobility is a priority to honor the opinions of many of the residents who attended the focus groups and forums and identified this as a key concern.

#### 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 and by funding other non-profits through our Care for the Poor program managed by the Mission Hospital

Furthermore, Mission 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 and resources to meet the identified needs of underserved communities throughout Mission Hospital service areas.

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

Access to Resources: Mission Hospital will continue to financially support Camino Health Center to provide primary care services to the low-income residents of South Orange County and depending on their expertise for service provision. We will maintain many of the programs currently in place through its Community Benefit program to continue providing access to care such as health insurance enrollment, preventive screenings, educational classes and medical transportation services.

**Dental Care**: Mission Hospital does not directly address dental needs as this is outside our scope of expertise; however, we will work in collaboration with Camino Health Center dental services, linking clients of the family resource centers to Camino services.

**Diabetes:** Camino Health Center is the primary medical provider for low-income residents and has identified this condition as one of their 16 areas of clinical focus. We will continue to work collaboratively with Camino to connect residents in need of medical services with their Center.

**Food and Nutrition:** Given other priorities raised during our most recent needs assessment, this issue became a lower priority compared to others.

**Homelessness:** Mission Hospital does not have the expertise to directly address homelessness; however we partner with several organizations that serve the homeless, including Family Assistance Ministry, Friendship Shelter and the Illumination Foundation.

Housing Concerns: We have concentrated on Affordable Homes for many years in South Orange County. Residents share that housing costs remain unaffordable. With the recent changes in Redevelopment Funds and the lack of local resources and collaborative efforts needed to focus on this issue, the committee felt our ministry resources could be better utilized in the other areas identified. We will continue to work with agencies who provide housing assistance such as Illumination Foundation, Friendship Shelter, and Family Assistance Ministry.

**Insurance and Cost of Care:** Given other priorities raised during our most recent needs assessment, this issue became a lower priority compared to others.

**Lack of Education:** Given other priorities raised during our most recent needs assessment, this issue became a lower priority compared to others.

**Lack of Exercise:** Given other priorities raised during our most recent needs assessment, this issue became a lower priority compared to others.

**Language and Cultural Barriers:** Mission Hospital may consider how to address barriers related to language and culture in the Immigration and Economic Stability initiatives.

**Obesity:** Given other priorities raised during our most recent needs assessment, this issue became a lower priority compared to others.

#### **COMMUNITY BENEFIT PLAN**

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

Mission Hospital worked with consultant Health Management Associates (HMA) on the Community Benefit Implementation Plan and finalized plans in November 2017. The process had the following components:

- Evidenced Based Research. HMA conducted industry-wide research to determine what efforts organizations and health systems similar to Mission Hospital and St. Joseph Health had made in the improving community health in the three identified priority areas.
- Resident Stakeholder Meetings. HMA conducted a series of interviews with identified community members and residents, identified and gathered by Mission Hospital, to better understand their experience, concerns, challenges, successes, and suggestions for improvement within the three priority areas.
- Strategy Stakeholder Workgroup. Upon completion of the resident interview series, HMA facilitated a strategic workgroup with key community stakeholders identified and gathered by Mission Hospital. This workgroup built consensus, alignment and buy-in on priority area goals, objectives and potential activities.

## Addressing the Needs of the Community: FY18 – FY20 Key Community Benefit Initiatives and Evaluation Plan FY20 Accomplishments

# Initiative/Community Need Being Addressed: Mental Health (including Substance Use Prevention)

# Goal (anticipated impact): Improve the Mental Health of the most vulnerable in South Orange County

Outcome Measure	Baseline	FY20	FY20 Results
		Target	
Reduce the percent of 9th graders who	2015/16 Baseline		
report using alcohol or other drugs within	LBHS: 21%	LBHS: 20.5%	LBHS: TBD
the last 30 day	CUSD: 21%	CUSD: 20.5%	CUSD: 11%

Strategy(ies)	Strategy Measure	FY17 Baseline	FY20 Target	FY20 Results
Engage community members to support one another, enhance their communities, and foster positive social-emotional development	Increase # of unique clients participating in groups that are therapeutic, psychoeducational, or supportive in nature	41	CY18 Target = 50 CY19 Target = 60 CY20 Target = 70	100 clients participated in groups.  This represented 649 encounters and an average of 6.5 visits per client.
	Increase # of promises made for mental health stigma reduction	1,744	3,000	2,162 Promises
	Increase percent of surveyed residents who report finding the community 'caring / sympathetic' to people with mental illness <sub>3</sub>	June 2016 69%	Results: FY17 = 85% FY18 = 73% FY19 = 83%	the next community assessment has been planned for late 2020.

Strategy(ies)	Strategy Measure	FY17	FY20	FY20 Results
		Baseline	Target	
Decrease social and emotional stress for individuals and families	Increase # new unique clients receiving mental health services at FRCs by 5%	328	CY18 Target = 344 CY19 Target = 361 CY20 Target = 376	463 new, unique clients received 3,022 encounters, an average of 6.5 visits per client
	Increase number of FRC clients in individual, couples or family therapy who meet treatment plan goals	151 clients (63%)	CY18 Target = 158 CY19 Target = 166 CY20 Target = 166	Of 133 adult and child clients who developed collaborative treatment plan goals, 26% met their goals at termination, and an additional 38% partially met their goals, totaling 64% showing documented progress. (51 Clients terminated abruptly due to COVID-19.)
	Increase number of adults whose PHQ-9 is >10 who improve their depression score by 5 points at conclusion of treatment	64 of 92 adults improved by 5 points (70%)	CY18 Target = 70 CY19 Target = 75 CY20 Target = 78 adults improved by 5 points	40 adults who started with a PHQ-9 score > 10 (average score 16.6) showed combined average drop of 10 points (average score at termination 6.8).  31 of those 40 improved by ≥ 5 points (78%).
Increase provider knowledge about mental health/ substance use	# of providers educated	Baseline: FY17 =0	CY18 Target = 10 CY19 Target = 15	35
Decrease rates of alcohol and other drug use by high school students	Decrease percentage of 9th and 11th graders who report using alcohol or other drugs	2015/16 Baseline LBHS: 9 <sup>th</sup> - 21%	Target  LBHS:  9th – 20.5%	2018/2019 LBHS (Not yet available)

Strategy(ies)	Strategy Measure	FY17 Baseline	FY20 Target	FY20 Results
	within the past 30 days (CHKS)	11 <sup>th</sup> – 45%  CUSD  9 <sup>th</sup> - 21%  11 <sup>th</sup> - 42%	11 <sup>th</sup> – 44% CUSD: 9 <sup>th</sup> – 20.5% 11 <sup>th</sup> – 41.0%	CUSD 9 <sup>th</sup> - 11% 11 <sup>th</sup> - 26%

<sup>&</sup>lt;sup>1</sup> Baseline data collected during Mission Hospital's 2016/17 Health Needs Assessment via the random telephone survey conducted by PRC.

Key Community Partners: Orange County Mental Health, Orange County Health Care Agency ADEPT Program, Orange County Sheriff's Department, Orange County Department of Education, Orange County Whole Person Care, City of Mission Viejo, Orange County Department of Child Support Services, Orange County United Way, Orange County – Family Self-Sufficiency Division, Human Options, Raise Foundation, Children's Bureau, Wellness & Prevention Center, NAMI, Camino Health Center, Laguna Beach Community Clinic, Share Our Selves, OMID, MECCA, Mariposa Women's Center, Capistrano Unified School District, Laguna Beach Unified School District, National Coalition for Alcohol and Drug Dependency - Orange County, Boys & Girls Club of Laguna Beach, Boys and Girls Clubs of Capistrano Valley, Wellness Center, Western Youth Services, Seneca Family of Agencies, Child Guidance Center, Families Forward, Pathways Community Services - Project RENEW, Orange County Asian and Pacific Islander Community Alliance, Children's Support & Parenting Program – OC, Waymakers, Second Harvest Food Bank, Help Me Grow OC, MOMs of Orange County, South County Outreach, UNIDOS, Friendship Shelter, Illumination Foundation, Our Father's Table, Families Assistance Ministries, Mercy House, Florence Sylvester Memorial Senior Center, CalOptima, Meals on Wheels, 2-1-1, Agewell Senior Services, Coalition for Humane Immigrant Rights, Coalition of Orange County Community Health Centers

Faith based organizations include Saddleback Church, Mission Basilica San Juan Capistrano, Santiago de la Compostela Catholic Church, St. Timothy Catholic Church, Our Lady of Fatima Catholic Church, St. Edward the Confessor Catholic Church, St. Kilian Catholic Church, Laguna Presbyterian Church, Church of Jesus Christ of Latter Day Saints in Laguna Beach.

Schools involved include Bernice Ayer Middle School, Capistrano Valley High School, Cordillera Elementary School, Laguna Beach High School, La Paz Intermediate School, Marco Forster Middle School, St. Margaret's Episcopal School, Montevideo Elementary School, San Clemente High School, Shorecliffs Middle School, Vista Del Mar Middle School, Wood Canyon Elementary School

<sup>&</sup>lt;sup>2</sup>LBHS = Laguna Beach High School

<sup>&</sup>lt;sup>3</sup> Includes English and Spanish speaking residents who agree and somewhat agree that the community is caring or sympathetic to people with mental illness.

**Resource Commitment:** \$1.1 million staff time and operational expenses for all mental health and substance use prevention services

#### **FY20 Accomplishments:**

A total of 563 individuals participated in mental health services; including psychoeducational and support groups; individual child and adult therapy, couples and family therapy; psychiatric evaluations and medication management; and case management services. This represent 3,671 encounters for services. To engage the community in services and to support our diverse clients, the mental health team offered a men's group, girl's self-esteem and adolescent boys' groups, Art for Healing, Skills for Life, and a parent support group.

In the Spring of 2020, the Mental Health Interns had to abruptly end their placements due to COVID-19, and many existing clients chose not to continue virtual services, making it difficult to obtain final PHQ-9 scores, to assess progress toward treatment plan goals, or to serve as many members of the community as we had forecasted. Staff moved all mental health services to telephone and virtual platforms; and offered frequent, brief mental health check-ins for clients who could not arrange privacy for full hour sessions.

Our mental health stigma reduction campaign, Promise to Talk (promisetotalk.org) expanded its reach across Orange County with St. Joseph and St. Jude hospitals offering the program to their respective communities. The program gathered 2,162 promises, conducted 3,000 encounters with the community and amassed nearly 6.7 Million impressions across Orange County. This nationally recognized program is affiliated with California's Each Mind Matters movement. The program success inspired St. Jude Medical Center and St. Joseph Hospital to expand the campaign within the region and supports nearly all of Orange County.

Youth substance use prevention program: During this fiscal year, we expanded our parent and youth social media campaigns to prevent youth substance use. The campaign has garnered over 10 million impressions (number of ad exposures), 20,000 encounters (number of clicks across all digital ads and social shares), and 15,000 visits to the Raising Healthy Teens webpage (raisinghealthyteens.org). Mission Hospital's substance use prevention campaigns, *Raising Healthy Teens* and *Strength in Numbers* were selected as the 2019 Silver Award winners of the National Berreth Award by the National Public Health Information Coalition. Over 100 parents and teens attended our popular 3-part Date Night series. Presenters shared effective communication strategies and important information about drugs, alcohol, and adolescent brain development. We supported 3 middle schools (2,800 students) to provide assemblies and parent

education nights focused on prevention, with an emphasis on electronic cigarettes and vaping. We have worked extensively with CUSD and LBUSD middle and high schools and are excited to see the rates at CUSD by nearly 50% from when we began this 3-year initiative. LBUSD has yet to receive their latest results due to COVID-19, but given the focus on this topic and efforts in the community, we are hopeful that the rates at LBUSD will see similar results.

## Addressing the Needs of the Community: FY18 – FY20 Key Community Benefit Initiatives and Evaluation Plan FY20 Accomplishments

## Initiative/Community Need Being Addressed: Immigrant Support and Solidarity

**Goal (anticipated impact):** Empower South Orange County low-income, limited English proficient (LEP) residents and their family members to reduce isolation and improve resiliency

Outcome Measure	Baseline	FY20 Target	FY20 Results
Increase scores of low income, LEP individuals' self-efficacy and self-esteem pre and post evaluation by 30%.	N/A	N/A	Data gathering was interrupted due to inability to conduct surveys during Covid- 19
Increase the # of SOC low income, LEP individuals that participate in strategic plan core activities (Civic engagement, Com organizing, Immigration Relief Services by 10% each year after implementation	N/A	415 unique individuals (Based on 6 months data. Program started in 01.2018) _1004 unique individuals; 3,747 encounters	742 unique individuals; 5,770 encounters

Strategy(ies)	Strategy Measure	FY17 Baseline	FY20 Target	FY20 Results
Promote inclusion, diversity and multiculturalism to strengthen positive community views of immigrants in South OC.	Number unique/unduplicated individuals participating in local efforts promoting inclusion, diversity and multiculturalism in South Orange County	N/A	283	161
Empower residents to reduce isolation and improve resiliency	Increase scores between Pre and Post Self- Efficacy and Self-Esteem evaluation (To be	N/A	N/A	COVID interrupted data collection

Strategy(ies)	Strategy Measure	FY17 Baseline	FY20 Target	FY20 Results
	developed)			
	Increase the # of residents engaged in activities.	N/A	119 unique individuals; 1815 encounter	1745 unique individuals; 2,012 encounters
Increase services to support the unique needs of low-income, LEP residents.	Increase the # of residents receiving services annually.	0	885 unique individuals; 3,566 encounters	992 unique individuals; 3,736 encounters
Increase access to culturally-appropriate services	Increase the # of providers receiving competencies training to serve low income, LEP residents	0	200 unique individuals. 354 encounters	256 unique individuals, 256 encounters

#### **Key Community Partners:**

Access California Services, Boys and Girls Club-Laguna Beach, Breakthrough SJC, Catholic Charities, Catholic Diocese of Orange: Office of Life, Justice & Peace, Coalition for Immigrant Rights (CHIRLA), Community Health Initiative OC (CHIOC), Community Legal Aid of Southern California Congregation of the Sisters of St. Joseph, Clergy & Laity United for Economic Justice (CLUE), Haitian Bridge Alliance, Interfaith Council of Greater Rancho Santa Margarita, Latino Health Access, Mission Basilica Immigration Ministry, OC Human Relations, OC Civic Engagement Table, OC Opportunity Initiative Funders Collaborative, OMID Multicultural Institute for Development, Orange County Community Foundation, OC Resilience, Our Savior's Lutheran Church, Public Law Center, St. Edward Church Social Justice Ministry, UNIDOS, Women for American Values and Ethics, World Relief

**Resource Commitment:** \$371,335, in staff time and operational expenses

#### **FY20 Accomplishments**

In FY20 we worked with faith based and community leaders in the promotion of inclusion, and positive community views of immigrants and other vulnerable groups in South OC. Events and activities reached to 161 unduplicated individuals (representing 246 encounters). We cofacilitated 9 Public Witness events in San Juan Capistrano to raise awareness of immigrant families' separation. 23 unduplicated individuals attended these events.

Efforts to empower residents focused on civic engagement and community organizing. We partnered with the Coalition for Humane Immigrant Rights (CHIRLA), The Orange County Civic Engagement Table, Latino Health Access and the Copes Scholars to implement phone banking and digital organizing practices around census (1,687 unduplicated individuals and 1,898 encounters and voting participation (86 unduplicated individuals and 149 encounters). We partnered with the Orange County Health Care Agency to provide the Resident Leadership Academy to 16 community leaders.

#### Regional Initiative/Community Need being Addressed: Economic Mobility

#### Goal (anticipated impact):

- Increase the number of residents participating in financial education and workforce development training programs by 10% from FY18 results (120 unique persons)
- Increase the support for homeless individuals seeking permanent long-term supportive housing

Outcome Measure	Baseline	FY20 Target	FY20 Results
Increase the number of residents participating in financial education and workforce development training programs by 10% from FY18 results	110	120	124
Increase the support for homeless individuals seeking permanent long-term supportive housing	n/a	n/a	22 individuals

Strategy (ies)	Strategy Measure	FY17 Baseline	FY20 Target	FY20 Results
Increase financial education opportunities for low-income residents	Increase the number of people completing financial education programs	0	30	56 unique individuals
Increase job and career skills training and development opportunities	Increase number of people completing job and career skills trainings and development programs	0	60	68 unique individuals
Support homeless individuals seeking permanent long-term supportive housing	The number of unique individuals who transition into bridge or permanent supportive housing (implemented through a partnership	n/a	n/a	Post-Hospitalization Program: Through our partnership with the Friendship Shelter, 22 individuals were provided transitional

with the Friendship	housing, meals and case
Shelter)	management support,
•	for a total of 1,689 days.
	7 of those individuals
	moved into independent
	living afterwards, and 1
	moved into permanent
	supportive housing with
	a housing voucher.
	_

**Key Community Partners:** Saddleback College- AESL/Career Development Dept. - Families and Communities Together-FACT program, Boys and Girls Club Laguna Beach - Homework Club, COPE Health Solutions, Pacific Mercantile Bank.

**Resource Commitment:** \$218,096 in staff time and operational expenses.

#### **FY20 Accomplishments:**

Mission Hospital continues to implement Project Mission, a partnership with Capistrano Unified School District's Adult Transitions Program. This program provided five adult learners with an opportunity to intern at Mission Hospital alongside mentors who guide them throughout their 9-month experience and provide coaching on essential job skills. *Project Mission* has been implemented over the last 12 years at Mission Hospital, with over 40 interns graduating the program. 100% of interns have obtained jobs after their graduation and several have obtained long-term employment at Mission Hospital. In addition, for the last 5 years, Mission Hospital has implemented the *St. Joseph Worker Program* in collaboration with the Sisters of St. Joseph. This program supports two recent college graduates who enter a 10-month formation and service-driven experience with the Sisters. The Workers are placed at Mission Hospital to provide community support for our most vulnerable residents in South Orange County. In FY120 two (2) Workers partnered with our team to support our Immigrant Support & Solidarity efforts as well as outreach with our Care Navigators and Nurse Navigator to increase access to health care services.

The COPE Health Scholar Program at Mission Hospital is a program providing participants the opportunity to experience clinical and administrative settings while assisting healthcare professionals' with basic patient care as well as becoming an integral part of the patient care team to prepare for a career in healthcare. The program requirements are at least 18 years old and accepted to, enrolled in, or graduated from an accredited college or university.

The program commitments are to attend at least one 4-hour shift per week to complete 280 hours by the end of the participant's length of stay in the program. With the program reaching its 2nd anniversary at Mission Hospital, we are currently averaging 10 full time equivalents (FTEs) (nearly 1,600 monthly hours) before the COVID-19 restrictions, in support for 8 clinical departments with 68 active students. Our program participants also have the opportunity to develop leadership skills by being involved in the COPE Health Scholar leadership team. Within the past year, 10 individuals fulfilled positions across all program operational branches such as Departments, Administration, Training and Enrollment, and Recruitment. These students are professionally mentored and provide additional program and hospital support via their contributions in operations and learning another side of the health care landscape in addition to their clinical experiences.

## Other Community Benefit Programs

Initiative/ Community Need Being Addressed:	Program Name	Description	Target Population (Low Income or Broader Community)	FY20 Accomplishments
Access to Care	Family	Two family resource	Low-income adults	Total Encounters:
Mental Health	Resource Centers	centers are managed in the community to provide	and children	31,399
Family Support Social Support	(FRCs)	access to social services for community members with limited resources. These centers are lifelines for many people in the community and serve a much-needed linkage to community programs. The following services are provided: mental health services, Skills for Life programs, health insurance access, parenting support & education, parent/child classes, family advocacy, information & resource services, Personal Empowerment Programs, financial counseling, education assistance and limited emergency assistance.		Partnerships continue with over 20 non-profit agencies, including newer relationships with: Boys and Girls Club of Laguna Beach, Child Guidance Center, Children Bureau, Community Legal Aid Society, Community Health Initiative of Orange County, Families Forward, Human Options, OC Credit Union, OCAPCIA, Public Law Center, Saddleback College, The Raise Foundation, The Coalitions of Community Health Centers

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Access to Health Care	Camino Health	Camino is a fully licensed,	Low-income adults	Camino Health Center
Health Care		community-based	and children	served 15,301
	Center	Federally Qualified Health Center (FQHC)		unduplicated patients
		providing affordable,		providing 50,864 visits
		quality primary medical,		across medical, dental,
		behavioral health, dental		and behavioral health
		care and WIC nutrition		services provided
		services. The center		through Camino's 3
		accommodates over		locations. Optometry
		102,000 visits annually at		services were added to
		its three fixed clinic site		the Lake Forest site in
		locations in Lake Forest,		2019 and evening
		San Clemente, and San		appointments are now
		Juan Capistrano. Mission		offered at all three
		Hospital is the sole		locations.
		corporate sponsor of		locations.
		Camino Health Center.		During the same period
				During the same period, Camino's Women, Infants,
				and Children (WIC)
				supplemental nutritional
				program conducted 51,349
				participant contacts. The
				health center continues to
				see new Medi-Cal patients,
				ending the year with an all-
				time high number of
				assigned members. The
				number of uninsured
				patients continues to grow
				as well, increasing by 10%
				percent in the last fiscal year.
				Camino continues to
				emphasize patient centered
				medical home practices and
				an integrated service
				delivery model. This year the
				health center enhanced its
				behavioral health program
				with the hiring of two case
				managers. The case
				managers have been
				essential to increasing
				Camino's same day access
				for behavioral health

		services.
		Camino received several
		supplemental grants from
		the U.S. Health Services and
		Resources Administration
		(HRSA). These grants were
		vital to the health center to
		prepare, prevent, and
		respond to COVID-19. While
		Camino's operations were
		impacted by COVID-19, the
		health center remained
		accessible as a vital source of
		care to the community
		during the pandemic through
		the addition of telehealth
		visits. The health center was
		also a leader of COVID-19
		testing by being one of the
		first clinics in the community
		offering testing and
		establishing outside tents for
		COVID-19 screening and
		testing.
		Camino was acknowledged
		as a Health Center Quality
		Leader by HRSA for its
		clinical quality performance
		in 2019. As a Health Center
		Quality Leader, Camino's
		overall clinical quality was
		among the top 20% of
		Federally Qualified Health
		Centers nationally.
		,

## Other Community Benefit Programs and Evaluation Plan (Continued)

A seess to III. It. C.	A 1- TT1:1	The Assess to III all C		The Committee
Access to Health Care	Access to Health Care Initiative	The Access to Health Care Initiative covers a wide		The Community
	Care miliative	array of programs and		Care Navigators
		services designed to help		engaged with 130
		residents gain access to		of the most
		education, screenings and		frequent visitors to
		other services to improve		our Emergency
		their health and quality of		Departments (ED),
		life. This initiative		who are uninsured
		includes:		or under-insured,
		merades.		many of whom are
		Case Management -		homeless. 1,932
		Provide intensive case		encounters were
		management through		provided for these
		Care Navigator model		clients. Engaged
		Community Care		clients averaged
		Navigator program		2.5 ED visits per
		that works with		quarter, compared
		individuals who need		to an average of
		ongoing support after a		6.3 visits for that
		hospitalization.		population in
				general, a 60%
		Outreach Enrollment	Low income	reduction.
		Retention and Utilization	adults	reduction.
		Model for coordinating		78% of these
		health care access for the		frequent visitors
		uninsured and newly		(n=102) were then
		insured		able to be
		Health Insurance and		discharged from
		social supportive		the Care
		services outreach,		Navigation
		enrolment, retention		program because
		and utilization		they received
		program.		services that
		A 1 11 - 1(1-		addressed their
		Access and Health		
		Promotion Programs		social/health care
		Nurse navigator     program corving low		needs.
		program serving low income communities		The percentage of
		Transportation		avoidable ED visits
		program for seniors		remained steady.
		and low income		Community Care
		individuals to the		Navigators attempted to
		Hospital, 3 federal		telephone each
		qualified health center		· ·
		quantica ficatur center		uninsured or

Other Community Benefit Programs	and Evaluation Plan (C	ontinued)
	sites and 2 family	underinsured visitor to
	resource centers in the	the ED to encourage
	service area	these clients to follow
	<ul> <li>Flu clinics</li> </ul>	the discharge plan
		recommended by the ED
		provider. 125 Clients
		were contacted and
		resources were offered
		as needed. Care
		Navigators offered
		information about
		insurance enrollment,
		and access to affordable
		or covered primary care
		and urgent care. They
		assisted in scheduling
		medical appointments,
		and provide other
		community resources to
		reduce future
		unnecessary visits to the
		ED.
		The <b>nurse navigator</b>
		program provided 3,552
		encounters with
		community members,
		and 7 flu clinics
		administered
		vaccinations for 462 low-
		income residents.
		Community nursing
		programs ranged from
		the "Dr. Teddy Bear"
		class to help young
		children reduce their
		anxiety when visiting the
		pediatrician's office, to
		work with seniors to
		reduce isolation and
		depression. The
		Community Nurse
		Navigator served as
		preceptor for 7 RN-BSN

Other Community Benefit Programs and Evaluation Plan (Continued)	
	first and second
	semester students for a
	total of 630 hours of
	training and community
	support services; and 56
	additional nursing
	students staffed our flu
	clinics.
	Nurse Navigators
	followed up with 98
	clients who were
	discharged from the
	Hospital who were at
	high risk of readmission
	or death within 30 days,
	and with clients who had
	received inpatient
	treatment for congestive
	heart failure, to assess
	needs, provide
	resources, and decrease
	their chances for
	readmission.
	Enrollment: 1,288 new
	enrollments and 683
	renewals in Medicaid
	and Covered California.
	Health insurance outreach, education and
	counseling efforts served
	3,573 individuals
	(encounters)
	(
	The <b>transportation</b>
	program provided 4,423
	rides to 195 unduplicated
	individuals

#### **FY20 COMMUNITY BENEFIT INVESTMENT**

In FY20 Mission Hospital invested a total of \$36.3 million in key community benefit programs. \$5.6 million was invested in community health programs for persons living in poverty. In addition, \$6.2 million in charity care was provided, \$23.6 million in unpaid cost of MediCal, including the Hospital Quality Assurance Fee Program, and nearly \$1 million in community benefits for the broader community. Mission Hospital applies a ratio of cost to charge to quantify financial assistance at cost, unreimbursed Medicaid, other means-tested government programs. The cost to charge ratio is aligned with the IRS Form 990, Schedule H Worksheet 2. Our community benefit program expenses are reported in alignment with the total cost incurred to run our programs, and we offset any restricted revenue received to arrive at our net community benefit expense.

# FY20 COMMUNITY BENEFIT INVESTMENT MISSION HOSPITAL

(ending June 30, 2020)

CA Senate Bill (SB) 697 Categories	Community Benefit Program & Services <sup>1</sup>	Net Benefit
Medical Care Services for Vulnerable <sup>2</sup> Populations	Financial Assistance Program (FAP) (Traditional Charity Care-at cost)	\$6,193,855
	Unpaid cost of Medicaid <sup>3</sup>	\$23,623,642
	Unpaid cost of other means-tested government programs	\$0
Other hand to far Walnesship		¢0
Other benefits for Vulnerable Populations	Community Benefit Operations	\$0
	Community Health Improvements Services	\$2,583,622
	Cash and in-kind contributions for community benefit	\$3,013,486
	Community Building	\$0
	Subsidized Health Services	\$0
Other benefits for the Broader Community	Total Community Benefit for the Vulnerable	\$35,414,605
	Community Benefit Operations	\$482,182
	Community Health Improvements Services	\$341,565
	Cash and in-kind contributions for community benefit	\$9,633
	Community Building	\$43,246
	Subsidized Health Services	\$0
Health Professions Education, Training and Health Research	Health Professions Education, Training & Health Research	\$30,000
	Total Community Benefit for the Broader Community	
	TOTAL COMMUNITY BENEFIT (excluding Medicare)	\$36,321,231
Medical Care Services for the Broader Community	Unpaid cost to Medicare <sup>4</sup> (not included in CB total)	\$35,775,724

<sup>&</sup>lt;sup>1</sup> Catholic Health Association-USA Community Benefit Content Categories, including Community Building.

<sup>&</sup>lt;sup>2</sup> CA SB697: "Vulnerable Populations" means any population that is exposed to medical or financial risk by virtue of being uninsured, underinsured, or eligible for Medicaid (referred to as Medi-Cal in California), Medicare, California Children's Services Program, or county indigent programs. We exclude Medicare as part of Community Benefit total and only include it below the line for SB697 reporting purposes.

<sup>&</sup>lt;sup>3</sup> Accounts for Hospital Fee. The pledge/grant (separate from the quality assurance fee) is reported in Cash and In-kind Contributions for other vulnerable populations.

<sup>&</sup>lt;sup>4</sup> 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-Financial Summary of Accomplishments**

#### Angel Program:

Angel Program: Every year, Mission Hospital coordinates the "adoption" of families during Back to School and the holiday season. In FY20, 127 students from the community received much needed school supplies during our Back-to-School Angel Program in August, and 96 families (representing 146 adults and 224 children) were generously provided with individualized gifts for the 2019 holiday season. 56 Hospital departments participated in this program, purchasing clothing and supplies, and donating gift cards for these families. We also continued close partnerships with several outside organizations who adopted families in need, including Camino Health Center; LaVine & Associates CPAs, Inc.; Mazzo Group; and Mission Heritage Medical Group.

#### Supporting Food Needs During the Holidays:

Mission Hospital donated 570 turkeys to local pre-selected charities, including food pantries, local faith communities, and homeless service providers.

#### St. Joseph Day Food & Clothing Drive:

As part of our celebration of St. Joseph, our Patron Saint, Mission Hospital hosts a food and clothing drive to help local non-profits who serve the vulnerable residents in South County. In March 2020, this tradition was interrupted due to the COVID-19 outbreak and Governor Orders to shelter-in-place. COVID-19 continues to impact our ability to gather food/clothing donations. We hope to continue this long-standing tradition in the near future.

<sup>&</sup>lt;sup>8</sup> Non-financial summary of accomplishments are referred to in CA Senate Bill 697 as non-quantifiable benefits.

## **Governance Approval**

This FY20 Community Benefit Report was approved at the November 10, 2020 meeting of the Mission Hospital Community Benefit Committee of the Community Ministry Board.

Chair's Signature confirming approval of the FY20 Community Benefit Annual Report

Todd E.	Compost
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Todd Lempert, MD

Chair, Community Benefit Committee

November 10, 2020

Date