

Providence Saint John's Health Center

2021 Update to the Community Benefit Plan



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PREFACE

In accordance with Senate Bill 697, Community Benefit Legislation, Providence Saint John's Health Center submits this Community Benefit Plan for 2021. Senate Bill 697 requires a not-for profit hospital in California to complete the following activities:

- Review and reaffirm its mission statement to ensure that its policies integrate and reflect the public interest in meeting its responsibilities as a not-for-profit organization
- Complete a community needs assessment every three years, evaluating the health needs of the community served by the hospital.
- File a community benefit update annually, documenting activities that the hospital has undertaken to address community needs within its mission and financial capacity; and to the extent practicable, assign and report the economic value of community benefit provided in furtherance of its plan.

A Santa Monica Community Access Plan annual implementation report is also included, as specified by the City of Santa Monica Development Agreement. This requires that Providence Saint John's Health Center assign and report the cost of programs and services provided by the Health Center according to a five item framework that includes:

- Cash and in-kind support of the Santa Monica-Malibu Unified School District
- Cash and in-kind support of local non-profit organizations
- Medical and mental health services provided based on referrals from local non-profit organizations
- Medical and mental health services provided based on referrals from the Santa Monica-Malibu Unified School District
- Community services available to the general community that promote health education and preventive services

PROVIDENCE SAINT JOHN'S HEALTH CENTER: A BRIEF INTRODUCTION

For 80 years, Providence Saint John's Health Center has offered a range of health care programs and services unparalleled on the Westside of Los Angeles. Providence Saint John's was acquired by Providence Health and Services in March 2014. The Mission of the Sisters of Charity of Leavenworth, who established the hospital, matches very closely with the Sisters of Providence making for a smooth transition with the change in ownership. In 2016, Providence Health and Services combined with St. Joseph Health to form Providence St. Joseph Health (Providence).

In addition to primary care, Providence Saint John's has built a reputation as a leading provider of specialty care by responding to the needs of our patients and community. Providence Saint John's houses many premier programs, including:

Child and Family Development Center: The Center provides a comprehensive range of culturally sensitive and linguistically responsive mental health, outreach, developmental and educational services. Services are offered to children, adolescents, and their families at the Center, school sites, homes and other locations in the community in English and Spanish. The Center is recognized as a community mental health center by the L.A. County Department of Mental Health.

Emergency Care: Providence Saint John's 24-hour Emergency Department is a crucial facility for the Westside. Care is provided by board-certified attending physicians and Emergency Department nurses certified in advanced life support and pediatric life support.

Maternal and Child Health: Our Obstetrics program includes Labor, Delivery and Recovery suites, Mother-Baby couplet care unit, Neonatal Intensive Care Unit, Lactation services and a support program for breastfeeding mothers.

Cancer: Providence Saint John's Health Center cancer treatment program is approved by the American College of Surgeons Commission on Cancer. The Saint John's Cancer Institute at Providence Saint John's Health Center is a cancer research institute dedicated to the understanding and curing of cancer. Institute highlights include one of the largest melanoma centers in the U.S., a top ranked breast center, a surgical oncology fellowship program and one of the largest specimen repositories in the U.S.

Cardiac Care: Providence Saint John's program includes a wide range of diagnostic and therapeutic cardiac services, including leadership in transfusion-free medicine and bloodless cardiac surgery, percutaneous coronary interventions, ablations and traditional cardiac surgeries.

Orthopedics: Specializing in joint and spinal surgery, Providence Saint John's has been recognized as a top 100 orthopedics specialty hospital for hip replacements. Providence Saint John's provides leadership in the anterior approach to hip replacements.

SECTION 1: EXECUTIVE SUMMARY

Mission, Core Values and Foundational Beliefs

Providence Saint John's Health Center mission statement, the core values of Providence St. Joseph Health, and the foundational beliefs of the Catholic Health Association guide our commitment to improving the health of individuals and the communities we serve, especially those who are poor and vulnerable. The Mission permeates the everyday life of Providence Saint John's.

Definition of Community

For community benefit planning purposes, Providence Saint John's Health Center defines its service area to include the cities and neighborhood areas surrounding the Health Center, and the addresses of patients using the hospital's services. The service area is identified as Service Planning Area (SPA) 5 which includes communities such as Santa Monica, Malibu, Pacific Palisades, Venice, Marina del Rey, Mar Vista, Playa Vista, Westwood, Brentwood, and parts of West Los Angeles.

Identifying and Prioritizing Community Needs

Providence Saint John's conducts a Community Health Needs Assessment every three years, per SB697, and uses this assessment as the basis for identifying health needs. PSJHC updated the needs assessment in 2019 using data from governmental and private agencies as well as consultation from the leaders of local non-profit agencies and feedback from local residents. The entire Community Health Needs Assessment is posted on the Providence website at: <https://www.providence.org/about/annual-report/chna-and-chip-reports>

Community Benefit Plan Activities

We seek to grow a healthier community by partnering and collaborating with residents and organizations in our community. Programs and services provided by the Health Center in calendar year 2021 to address community health needs include the following:

- Child and Family Development Center programs, providing outpatient mental health services for children and families, persons who are deaf and/or hard of hearing, persons with developmental disabilities, individuals and families affected by child abuse; therapeutic preschool, school-based mental health outreach to at-risk youth, community-based therapy services for youth, and community outreach.
- Financial and in-kind support of local nonprofit organizations focused on serving vulnerable persons.
- Dedicated program providing linkage to supportive care and shelter to emergency department patients experiencing homelessness discharged from the hospital.
- Collaboration in increasing the access to care for low and moderate income Westside area individuals and families
- Training and deploying a workforce of Community Health Workers to address social determinants of health in underserved populations
- Charity care for patients without the ability to pay for necessary treatment.
- Education and internship programs for nurses, physicians, psychologists, social workers, and allied health professionals.

Economic Value of Community Benefit Provided

During calendar year 2021, the economic value of community benefit provided by Providence Saint John's Health Center is estimated at \$48,902,107 (includes Charity Care, Medi-Cal Shortfall and Community Benefit Services) with an additional \$71,929,059 in Medicare shortfall. Furthermore, the Providence Saint John's Health Center Affiliation Fund provided \$900,000 in separate grant funding to local non-profit agencies that provide programs addressing needs such as access to health care and mental health services, homeless services, wellness programs, and health education to residents in Saint John's Health Center's service area.

SECTION 2: MISSION, CORE VALUES AND FOUNDATIONAL BELIEFS

Providence Saint John's Health Center Mission Statement and the Core Values of Providence St. Joseph Health guide our organization's commitment to creating a healthier community and permeate the everyday life of the organization. The Mission Statement and Core Values are as follows:

Providence Saint John's Health Center Mission Statement

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.

Providence Saint John's Health Center Core Values

Compassion

- We reach out to people in need and give comfort as Jesus did
- We nurture the spiritual, physical and emotional well-being of one another and those we serve
- Through our healing presence, we accompany those who suffer.

Dignity

- We value, encourage and celebrate the gifts in one another.
- We respect the inherent dignity and worth of every individual.
- We recognize each interaction as a sacred encounter.

Justice

- We foster a culture that promotes unity and reconciliation.
- We strive to care wisely for our people, our resources and our earth.
- We stand in solidarity with the most vulnerable, working to remove the causes of oppression and promoting justice for all.

Excellence

- We set the highest standards for ourselves and our ministry
- Through transformation and innovation, we strive to improve the health and quality of life in our communities.
- We commit to compassionate, safe and reliable practices for the care of all.

Integrity

- We hold ourselves accountable to do the right thing for the right reasons.
- We speak truthfully and courageously with generosity and respect.
- We pursue authenticity with humility and simplicity.

Catholic Health Association Foundational Beliefs

Providence Saint John's Health Center's community benefit programs are rooted in the Catholic Health Association core set of beliefs:

- Those living in poverty and at the margins of society have a moral priority for services.
- Not-for-profit health care has a responsibility to work to improve health in communities by focusing on prevention
- Community members and organizations should be actively involved in health care community benefit programs
- Demonstrating the value of community service is imperative

- Integrate community benefit programs throughout the organization
- Leadership commitment leads to successful community benefit programs

SECTION 3: DEFINITION AND DESCRIPTION OF OUR COMMUNITY

For this annual update report, we have continued to use the boundaries and descriptive demographic data of the Providence Saint John’s Health Center community defined in the 2019 Community Health Needs Assessment (CHNA).

Definition of Community

Providence Saint John’s Health Center defined its “community” to include the following cities and neighborhood areas (ZIP codes are shown in parentheses):

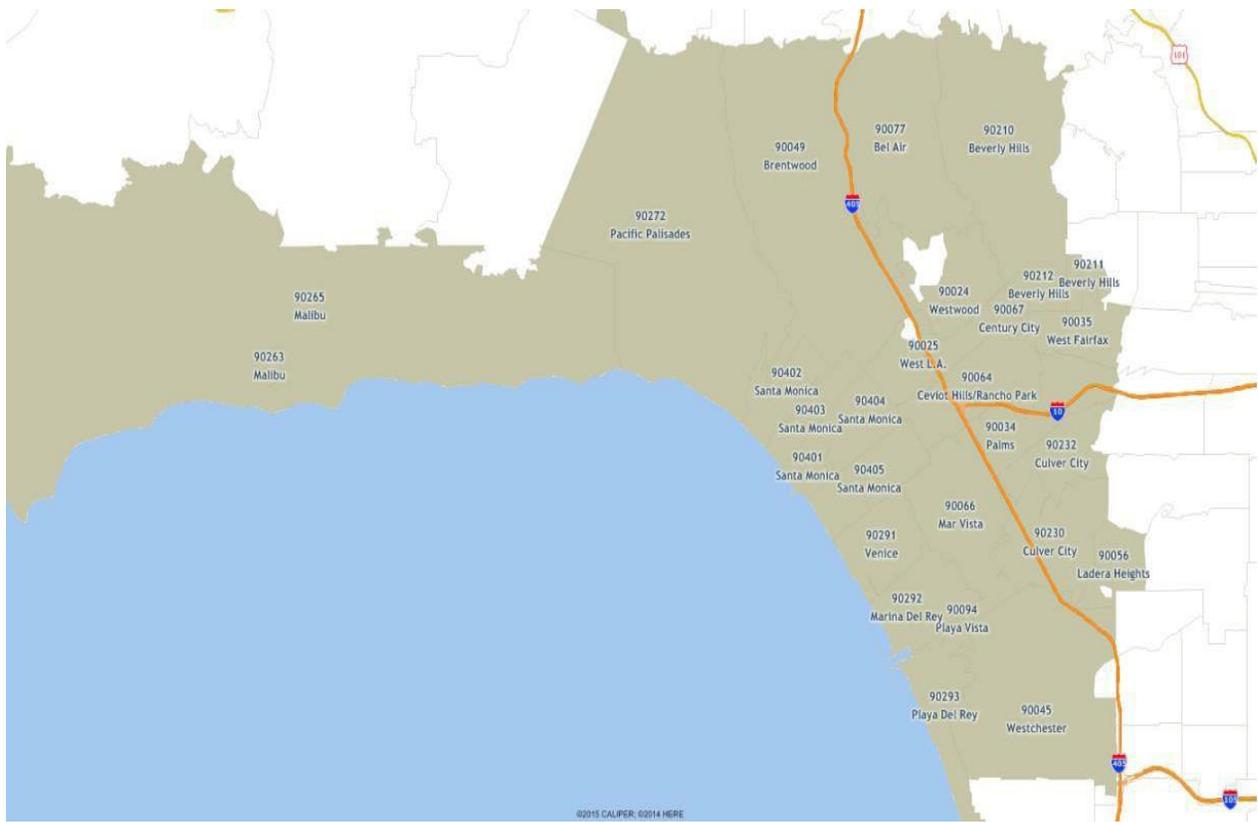
- Bel Air (90077)
- Beverly Hills (90210, 90211, 90212)
- Brentwood (90049)
- Century City (90067)
- Cheviot Hills/Rancho Park (90064)
- Culver City (90230, 90232)
- Ladera Heights (90056)
- Malibu (90263, 90265)
- Mar Vista (90066)
- Marina del Rey (90292)
- Pacific Palisades (90272)
- Palms (90034)
- Playa del Rey (90293)
- Playa Vista (90094)
- Santa Monica (90401, 90402, 90403, 90404, and 90405)
- Venice (90291)
- West Fairfax (90035)
- West Los Angeles (90025, 90073)
- Westchester (90045)
- Westwood (90024, 90095)

Providence Saint John’s Health Center is located in ZIP code 90404, in the City of Santa Monica. Four other hospitals are physically located in the Health Center’s service area (ZIP code location of each hospital shown in parenthesis):

- UCLA Santa Monica Medical Center, Santa Monica (90404)
- UCLA Ronald Regan Medical Center, Westwood (90095)
- Kaiser Permanente – West Los Angeles Medical Center (90034)
- Cedars Sinai Marina Del Rey Hospital (90292)

In addition, other area hospitals used by residents of the service area include Cedars-Sinai Medical Center (Los Angeles) and Centinela Hospital Medical Center (Inglewood).

FIGURE 3.1: MAP OF SAINT JOHN’S HEALTH CENTER SERVICE AREA



Description of Our Community

The service area defined for the Providence Saint John’s Health Center includes the ZIP codes located within Service Planning Area (SPA) 5 of Los Angeles County. The planning area includes the communities located on the west side of the county (referred to as “the Westside” locally, and in this report), and represents the area where a significant portion (over 70%) of the patients served by the hospital resides. SPA 5 was used as the target geographic area for this CHNA since it closely matched where a majority of PSJHC’s patients reside. Using the SPA definition also helped with the collection of data from the L.A. County Department of Public Health and other government agencies that use these boundaries when conducting studies. The area includes 20 distinct communities and 30 ZIP codes.

For the 2019 CHNA, in alignment with our Mission to pay special attention to the poor and vulnerable, we utilized the California Healthy Places Index developed by the Public Health Alliance of Southern California to identify 18 specific “high need” census tracts within SPA 5. These 18 census tracts, outlined in yellow in Figure 3.2, scored lower than other California census tracts across a composite of 25 community conditions that predict life expectancy.

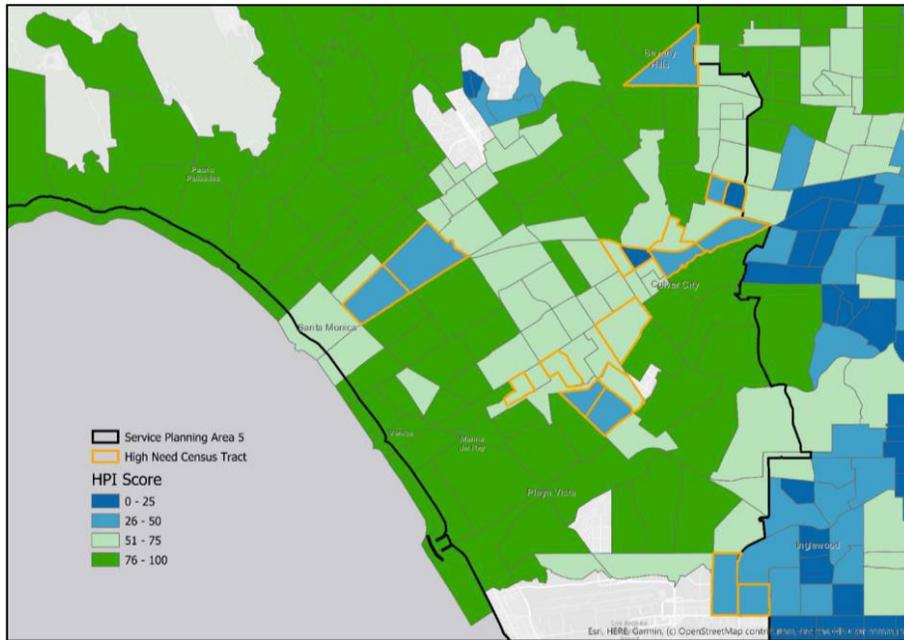


Figure 3.2 Healthy Places Index Map: High Need Census Tracts in SPA 5

Demographics:

- The total population of the PSJHC service area in 2019 is 682,449 persons, which represents a 5.1% increase from the 2010 population, or an additional 32,662 residents living in the area.
- The PSJHC service area is notably older, on average, than the total population of the state of California. Adults 60 years of age and older make up 20.5% of the total service area population, which exceeds the state of California at 14.3% of the population. Children under the age of 19 comprise 17.6% of the population. This is notable, given that in the state of California, children under the age of 18 make up 22.7% of the population.
- Among the SPA 5 residents, 66.8% were White, 14.5% were Asian/Pacific Islander/Hawaiian, 0.4% were Alaska Native or American Indian, 6.0% were African American or Black, and 5.7% were of two or more races. Approximately 17.1% of the residents identify as Latino.
- In 2019, the median household income of the area varied significantly from a low of \$65,417 in Palms to \$200,001 in Bel Air. Although the Westside contains many affluent communities, there are areas within SPA 5 with a higher portion of low-income households. Approximately 23.0 % of the population has annual incomes below 200% of the Federal Poverty Level, compared to 39.6 % in Los Angeles County as a whole.
- The census tracts with relatively higher concentrations of families living below 200% Federal Poverty Level (FPL) are located along the 10 and 405 freeways, around the UCLA and VA campuses, into Mid-City and adjacent to Inglewood.

SECTION 4: COMMUNITY BENEFIT PLANNING PROCESS

The 2021 Community Benefit Update is linked to the 2019 Community Health Needs Assessment and 2020-2022 Community Health Improvement Plan, which is posted on Providence Saint John's website at: <https://www.providence.org/about/annual-report/chna-and-chip-reports>

Providence Saint John's conducts assessments every three years, and the results are used as the basis of our community benefit planning. As part of this needs assessment process, both qualitative data and quantitative data were used to identify significant community health needs.

Qualitative Data

Providence Saint John's Health Center recognizes the value in having community members and community stakeholders share their perspectives during the CHNA process. As the people who live and work on the Westside, they have first-hand knowledge of the needs and strengths of their community and their opinions help to shape our future direction.

Providence Saint John's Health Center conducted listening sessions with community members and interviews with community stakeholders, including LA County Department of Public Health, as part of their collection of primary data. These elements of qualitative data, or data in the form of words instead of numbers, provide additional context and depth to the CHNA that may not be fully captured by quantitative data alone.

Providence Saint John's Health Center worked in collaboration with the Cedars Sinai Medical Center (Los Angeles, CA), Kaiser Permanente Medical Center (West Los Angeles, CA), and UCLA Health System (Westwood, CA) to collect and analyze the information. Together, the four hospital systems collaborated on several components of the CHNA including:

- Developing a list of key community stakeholders/leaders to be included in the telephone interviews
- Compiling the list of questions to be used in the telephone interviews to identify the key community needs and contributing factors

Quantitative Data

Secondary data collection included the review of demographic, insurance, mortality, morbidity, mental health, economic and social determinant data from multiple sources. The secondary data sources included the following: the U.S. Census, Los Angeles Homeless Services Authority, Think Health L.A. Database, Community Commons Database, California Health Interview Survey Dataset, L.A. County Department of Public Health, and California Department of Public Health. Truven Analytics/ Dignity Health provided Community Need Index data and the City of Santa Monica provided community specific data.

Additionally, primary quantitative data were collected from PSJHC's electronic health record system to review avoidable Emergency Department use and potentially avoidable inpatient admissions.

SECTION 5: PRIORITY COMMUNITY NEEDS

Once the information and data were collected and analyzed by staff members, the following nine key areas, listed below in alphabetical order, were identified as significant health needs:

- Access to Health Care
- Behavioral Health
- Chronic Diseases
- Early Childhood Development
- Economic Insecurity
- Food Insecurity
- Homelessness and Housing Instability
- Oral Health Care
- Services for Seniors

These needs were then discussed and prioritized by a Community Health Needs Assessment Oversight Committee.

Prioritization Process and Criteria

The 2019 CHNA process included a prioritization process involving a facilitated group session that engaged the 2019 Community Health Needs Assessment Oversight Committee representing key community stakeholders (Appendix A). Providence Saint John's staff provided committee members with data packets related to each of the nine health needs identified above. For each identified health need, committee participants were asked to rate the severity of the identified health need, change over time, availability of community resources/assets and community readiness to implement/support programs to address the health need. These criteria formed the initial impressions of committee members. This survey was then followed by a review of the data assembled for each identified health need by Providence Saint John's staff.

Then in smaller groups, committee members considered the data while discussing and identifying key issues or considerations that were shared with the larger group. During the breakout session, the Committee was divided into three separate groups. The nine health needs identified in the CHNA were split into three sections (three needs per section) and committee members rotated from one section to the next answering the following questions about each need:

- How does this need impact the work of your organization and the clients you serve?
- What are other service gaps?
- What role can Providence Saint John's Health Center play in addressing this need?

As a final summary of the discussion, each of the participants was given three dots, or "votes" to assign to the identified topics, resulting in a set of prioritized health needs.

Health Needs in Order of Priority

The significant health needs were then ranked based on score of severity, change over time, resources in the community and Saint John's ability to respond. The ranking also took into account the stakeholder votes following group dialogue. Results were as follows:

- 1) Homelessness and Housing Instability
- 2) Behavioral Health
- 3) Economic Insecurity
- 4) Access to Health Care
- 5) Services for Seniors
- 6) Early Childhood Development
- 7) Food Insecurity
- 8) Chronic Diseases
- 9) Oral Health

SECTION 6: COMMUNITY HEALTH IMPROVEMENT PLAN AND MEASURABLE OBJECTIVES

As a result of the findings of our 2019 Community Health Needs Assessment (CHNA) and through a prioritization process aligned with our Mission, resources, and hospital strategic plan, Providence Saint John's Health Center is focusing on the following areas for its 2020-2022 Community Benefit efforts:

Initiative 1: Strengthen Infrastructure of Continuum of Care for Patients Experiencing Homelessness

As a hospital that sees a significant number of patients experiencing homelessness that come in through our emergency departments for care, we will partner with our local homeless service providers to strengthen the ability to connect these patients experiencing homelessness to the rapidly changing environment of resources in LA County. In addition to facilitating better handoffs and coordination of care, we will focus on the gap of available recuperative care/interim shelter beds for patients experiencing homelessness that are not sick enough to be admitted into a hospital but need a temporary place to heal that is safer than being discharged to their previous unhoused situation.

Initiative 2: Improve Access to Health Care Services

We will continue to provide financial and in-kind support to community clinics and nonprofit organizations that improve health care access to underserved and vulnerable populations. These populations include people experiencing homelessness, those who are uninsured, and low-income households (Medi-Cal). Furthermore, in light of the recent Coronavirus Disease 2019 (COVID-19) pandemic, we will also place an emphasis on alleviating the strain on local healthcare resources from infectious diseases such as flu and COVID-19 by increasing the availability of testing and immunizations in the community.

Initiative 3: Improve Access to Behavioral Health and Reduce Stigma

PSJHC has had a longstanding commitment to improving access to behavioral health through the Child and Family Development Center (CFDC). CFDC has been providing on-site and community-based treatment services for children, adolescents and their families since 1952 and we will continue to improve access to behavioral health by providing these programs. In addition to providing treatment and early intervention services, CFDC will focus on capacity building for local organizations with trainings on trauma-informed care. To promote awareness of mental health and reduce stigma about mental illness, PSJHC will also provide mental health education and prevention trainings directly to community members.

Initiative 4: Train and Deploy A Workforce of Community Health Workers to Address Social Determinants of Health in Underserved Populations

Providence has a long history in employing Community Health Workers (CHWs) in a diverse breadth of roles in programs that address social determinants of health. These roles typically have fallen into three categories: case management, health education, and assistance with enrollment into public benefits (i.e. Medicaid/Medi-Cal and SNAP/CalFresh). These jobs create an entry point for people to work in the health care industry while allowing Providence to effectively provide culturally competent care within specific underserved communities. In addition to continuing our own employment model of CHWs, we will partner with Charles Drew University to develop and implement a CHW Academy. This CHW Academy will provide formal training and facilitate paid internships for CHWs at PSJHC and other health care organizations who have an interest in incorporating a CHW workforce in their organizations.

Responding to the COVID-19 Pandemic

The 2020 Community Health Improvement Planning (CHIP) process was disrupted by the SARS-CoV-2 virus and COVID-19, which has impacted all of our communities. This CHIP was initially designed to address the needs identified and prioritized through the 2019 CHNA, though COVID-19 has had substantial impacts on the magnitude of each of these community needs. These impacts are likely to exacerbate some of the needs identified, and cause others to rise in level of priority. While this is a dynamic situation, we recognize the greatest needs of our community will change throughout this 2020-2022 strategic planning cycle, and it is important that we adapt our efforts to respond accordingly. Additionally, the data projections included were crafted based on data collection and project forecasting done prior to the COVID-19 pandemic, so may be modified as we understand adjusted resources and priorities within our communities in the aftermath of the pandemic.

The following tables provide a summary of the four strategic initiatives and progress towards measurable objectives in 2021:

STRATEGY 1: STRENGTHEN INFRASTRUCTURE OF CONTINUUM OF CARE FOR PATIENTS EXPERIENCING HOMELESSNESS

Community need addressed: Homelessness and Housing Instability, Economic Insecurity

Goal: Improve the ability to care for patients experiencing homelessness or at risk of being homeless

Strategy 1: Strengthen Infrastructure of Continuum of Care for Patients Experiencing Homelessness

Scope (Target Population)	Strategies	Strategy Measure	Progress in 2020	Progress in 2021	Comments
<i>Uninsured and underinsured populations in low-income communities</i>	CHW Homeless Navigators: Hospital emergency department-based Community Health Workers that assist patients experiencing homelessness with discharge to shelter or homeless service providers	Number of patients screened for homelessness	<ul style="list-style-type: none"> • 353 patients screened for homelessness • 21 patients linked to homeless service providers • 63 patients discharged to temporary/permanent housing 	<ul style="list-style-type: none"> • 548 patients screened for homelessness • 84 patients linked to homeless service providers • 48 patients discharged to temporary/permanent housing 	
		Number of patients linked to homeless services provider			
		Number of patients discharged to temporary/permanent housing			
	Provide or facilitate funding to homeless service providers: Bring financial support to local organizations either through awarding grants or by facilitating grant awards from external funders	Funding directed towards local homeless service providers	<ul style="list-style-type: none"> • \$150,000 in grants awarded by PSJHC to local homeless service providers • \$307,000 in grants awarded by Saint John's Health Center Foundation to local homeless service providers 	<ul style="list-style-type: none"> • \$150,000 in grants awarded by PSJHC to local homeless service providers • \$312,000 in grants awarded by Saint John's Health Center Foundation to local homeless service providers 	
Recuperative Care: Improve the infrastructure of available recuperative care/interim shelter for patients experiencing homelessness that are not medically stable enough to be discharged back to the streets	Identify target population, interventions, and partners to support L.A. Service Area housing initiative	Support policies to increase temporary housing as a pathway to permanent supportive housing	<ul style="list-style-type: none"> • Providence participated in the UniHealth Foundation's Recuperative Care Advisory Group to develop recommendations for strengthening the infrastructure of recuperative care in Los Angeles County 	<ul style="list-style-type: none"> • Partnerships with recuperative care agencies were strengthened, particularly with National Health Foundation. \$42,940 of expenses were covered by Providence to support 14 PSJHC patients experiencing homelessness who were transferred to recuperative care post-discharge. 	The UniHealth Foundation report can be downloaded here: https://unihealthfoundation.org/recuperative-care-in-los-angeles-county/

STRATEGY 2: IMPROVE ACCESS TO HEALTH CARE SERVICES

Community need addressed: Access to Health Care, Homelessness and Housing Instability, Economic Insecurity

Goal: Improve access to quality health care services for vulnerable populations

Strategy 2: Improve Access to Health Care Services					
Scope (Target Population)	Strategies	Strategic Measure	Progress in 2020	Progress in 2021	Comments
<i>Uninsured and underinsured populations in low-income communities</i>	Provide/facilitate funding and in-kind support for access to care to local community agencies	Funding directed towards access to health care programs	<ul style="list-style-type: none"> • \$275,000 in grants awarded from PSJHC to local organizations for access to care • \$108,503 of in-kind lab and diagnostic services provided to local FQHCs • \$75,000 in grants awarded from Saint John's Health Center Foundation to local organizations for access to care 	<ul style="list-style-type: none"> • \$275,000 in grants awarded from PSJHC to local organizations for access to care • \$136,662 of in-kind lab and diagnostic services provided to local FQHCs • \$79,000 in grants awarded from Saint John's Health Center Foundation to local organizations for access to care 	
	Increase availability of testing and vaccinations for COVID-19 and the Flu	Number of flu shots provided <hr/> Number of COVID-19 testing locations established	<ul style="list-style-type: none"> • No progress on these objectives for 2020. Objectives will be modified to adapt to the changing needs for COVID-19 vaccinations. 	<ul style="list-style-type: none"> • 10,068 doses of vaccine administered to community members (Jan 2021 through March 2022) 	In response to the availability of COVID-19 vaccines for the public, PSJHC offered free vaccination clinics at the hospital for community members.

STRATEGY 3: IMPROVE ACCESS TO BEHAVIORAL HEALTH AND REDUCE STIGMA

Community need addressed: Behavioral Health, Early Childhood Development

Goal: Increase access to quality mental health services, especially for low-income populations, increased awareness of trauma informed care, increased availability of maternal mental health programs and child abuse programs

Strategy 3: Improve Access to Behavioral Health and Reduce Stigma					
Scope (Target Population)	Strategies	Strategy Measure	Progress in 2020	Progress in 2021	Comments
<p><i>Direct services - Children and families who are underinsured or uninsured and have difficult accessing quality mental health services, as well as those who depend on public assistance and state-funded medical insurance</i></p> <p><i>Community outreach services - Community partners such as local schools who work with children from the above marginalized population</i></p>	Child and Family Development Center: Address Birth Trauma	Number of clients referred to Post-Partum Support Groups	<ul style="list-style-type: none"> Progress was paused on this objective in 2020 due to impact of the COVID-19 pandemic. Efforts to restart this programming will resume when staffing and operations stabilize at our referring partners. 	<ul style="list-style-type: none"> CFDC attempted to start postpartum support groups for our population, but it was determined that our clients struggled with engaging in the process therefore the postpartum support group did not come to fruition. Although we were unable to provide the postpartum support groups, we provided Warm Line services to 20 families. The Warm Line is for families who have newborns who are at risk for postpartum mental health disorders. Case management and a warm hand off to services is provided. 40 pre/peri natal support groups in the community. 	<ul style="list-style-type: none"> For 2022, strategic measures have been revised to the following due to programming changes: <ol style="list-style-type: none"> total # of pre/perinatal and post-partum support groups offered # of families linked to Warm Line Services (active case management and linkage to services for patients at risk for post-partum mental health disorders) Removing Bringing Baby Home referrals as a strategy due to transition of services to telehealth adapting to COVID-19
		Number of clients referred to the Perinatal Support Meetings			
		Number of clients referred to Bringing Baby Home group			
	Child and Family Development Center: Capacity building for local organizations through trauma informed trainings	Number of in-service trainings provided to schools	<ul style="list-style-type: none"> 14 in service trainings to school staff 4 in service trainings to after school staff 	<ul style="list-style-type: none"> 10 trauma informed trainings at schools to teachers and parents 8 trauma informed trainings at community centers/after school organizations 	
		Number of in-service trainings provided to after school care facilities			
	Child and Family Development Center: Provide programs that support the social emotional functioning of young children	Conduct a trauma informed parenting group	<ul style="list-style-type: none"> Seven parent support groups conducted. Each group had between 8-10 sessions. Three mental health education events at local libraries Infant massage services suspended in 2020 due to COVID-19 and not being in person. 	<ul style="list-style-type: none"> Provided 10 parenting groups in the community Local libraries were closed in 2021 for in person meetings. Provided 6 mental health education seminars at local preschools instead. 	For 2022, strategic measures have been revised to the following due to programming changes made after COVID-19 pandemic. <ol style="list-style-type: none"> # of children provided Mental Health Services in SMMUSD Preschool Classrooms # of educational meetings to SMMUSD Preschool Program parents # of mental health educational events at local libraries/community orgs
		Provide mental health education at local libraries			
		Provide Infant Massage groups in the community			

STRATEGY 4: TRAIN AND DEPLOY A WORKFORCE OF COMMUNITY HEALTH WORKERS TO ADDRESS SOCIAL DETERMINANTS OF HEALTH IN UNDERSERVED POPULATIONS

Community need addressed: Behavioral Health, Economic Insecurity, Food Insecurity, Chronic Diseases, Services for Seniors

Goal: Increase # of Community Health Workers employed in health care settings in roles that address social determinants of health, reduce food insecurity, reduce # of people eligible but unenrolled in CalFresh/SNAP benefits

Strategy 4: Train and Deploy a Workforce of Community Health Workers to Address Social Determinants of Health in Underserved Populations					
Scope (Target Population)	Strategies	Strategy Measure	Progress in 2020	Progress in 2021	Comments
<i>Workforce development for employees without a college degree, to provide services for residents of low-income neighborhoods, especially Spanish-speaking communities</i>	CalFresh Enrollment Assistance: CHWs provide outreach and one-on-one application assistance with CalFresh applications	Number of people enrolled in CalFresh	•6 people enrolled in CalFresh	<ul style="list-style-type: none"> • 15 CalFresh applications assisted • 5 confirmed CalFresh enrollments 	
	Health Education and Prevention Classes: Health Educators and CHWs paired together teach free community-based courses in English and Spanish on nutrition, mental health awareness, and coping skills	Number of participants in FEAST	<ul style="list-style-type: none"> • 40 people participated in FEAST • 28 people trained in MHFA • 33 people participated in CHAT 	<ul style="list-style-type: none"> • 30 people participated in FEAST • 192 people trained in MHFA • 42 people participated in CHAT 	
		Number of people trained in Mental Health First Aid (MHFA)			
		Number of participants in Creating Healthier Attitudes Today			
CHW Academy: In collaboration with Charles Drew University, develop an academy for Community Health Workers that focus on integration into health care organizations	Number of CHW students who complete program	<ul style="list-style-type: none"> •Recruitment and curriculum design for CHW Academy was completed in 2020. Go-live of the first cohorts training was postponed to January of 2021 as adaptations were needed to teach the course online. First cohort in 2021 has 13 Community Health Workers enrolled. 	<ul style="list-style-type: none"> •11 of the 13 CHW interns from cohort 1 completed their six-month internships. Five of these CHW interns were placed at healthcare locations in the Saint John's service area. A second cohort of 16 CHW interns began in August and is scheduled to graduate in February 2022. 		

SECTION 7: COMMUNITY BENEFIT PROGRAMS AND SERVICES

This section includes a description of noteworthy programs and services provided by Providence Saint John's Health Center in 2021 that support the Community Benefit Plan Strategies and Metrics described above in Section 6.

HOMELESS CARE COORDINATORS

The Homeless Care Coordination Program was started by Providence Saint John's Health Center in 2016, in response to a growing number of homeless patients seeking care from the hospital. Two community health workers have been placed in the PSJHC emergency department with a specific focus on serving patients experiencing homelessness. These two CHWs work alongside PSJHC Emergency Department Social Workers to facilitate warm handoffs of homeless patients to Case Managers from local homeless service providers such as The People Concern and St. Joseph Center. In addition, they identify openings at interim shelters and assist with navigating these patients to temporary housing after discharge from PSJHC.

CHILD AND FAMILY DEVELOPMENT CENTER

Perinatal Wellness Program

Bilingual perinatal and infant mental health specialist visit families weekly in their homes to provide individual, dyadic, couple, and/or family therapy. Ongoing weekly perinatal support groups are offered to reduce isolation and promote social engagement. The goals of our intensive home visiting program are to:

- Improve the family's coping skills
- Reduce the family's feelings of stress and isolation
- Promote bonding and a secure attachment between babies and their caregivers
- Ensure that families get the support they need

Families and Schools Together (FAST)

Families and Schools Together (FAST) is a school and community-based mental health team that works with students ages 6 to 18. Students are referred to FAST by teachers, school counselors and staff within specific community sites. Because FAST provides treatment on-site at the school, clinicians are able to consult and collaborate with school personnel in order to obtain a greater understanding of the students' needs. In addition, FAST team members can provide teacher consultations to assist teachers in making appropriate accommodations for students in the classroom. Services are provided in English and Spanish on-site at the schools and in the community by a team of clinical social workers, marriage and family therapists and psychologists. Services include:

- Individual and family therapy
- Psychiatric consultation (M.D.)
- Case management
- Teacher consultations
- Parent education topic workshops
- In-service trainings to school and after-school programming staff

Therapeutic Preschool and Day Treatment

Established in 1992 and nationally recognized, the Therapeutic Preschool Day Treatment Program at Providence Saint John's Child and Family Development Center has been helping children ages 2 ½ through 5 years old who require an intensive treatment program to reach their full potential.

The Therapeutic Preschool provides a safe, nurturing environment for children who require early intervention due to neurological, behavioral and/or psychological disturbances. Children likely to benefit from such intervention may suffer from prenatal substance exposure, oppositional behavior, attention deficit/hyperactivity disorder, depression/anxiety, post-traumatic stress disorder, child abuse and neglect and/or reactive attachment disorder.

COMMUNITY HEALTH EDUCATION

Community Health Workers, paired with a Health Educator, provide multiple trainings to the community utilizing curriculum designed improve preventive health and mental health awareness, knowledge, and skills. Notable classes include Food, Education, Access, Support, Together (FEAST), Mental Health First Aid, and Creating Healthier Attitudes Today (CHAT). FEAST is an evidence-based, 16-week nutrition education curriculum that addresses food insecurity. Mental Health First Aid is an evidence based, public education program managed and operated by the National Council for Behavioral Health and aimed at improving participants' knowledge of, and modify their attitudes and perceptions about, mental health disorders and related issues. CHAT is a community-based mental health education program for adults. The 6-week course teaches culturally relevant coping skills that include stress management, resilience, effective communication, self-esteem enhancement, anger management, and emotional intelligence.

CHW ACADEMY

Providence has partnered with Charles R. Drew University School of Medicine and Science (CDU) to develop an innovative and unique training program with holistic and evidence-based standards called the Community Health Worker Academy (CHW Academy). The CHW Academy is a paid \$15/hour, 6-month (26 weeks) training opportunity for individuals who want to pursue a career as a CHW in a healthcare organization such as hospitals or community clinics. The CHW Academy consists of two full-time (40 hours/week) training parts: 1) CDU CHW Academy 5-week Core Training and 2) Twenty-one weeks (5 months) clinical training at a CHW Academy Internship Site (hospitals or clinics across Los Angeles) along with continuing education in care management topics led by CDU and ongoing support.

SECTION 8: ECONOMIC VALUE OF COMMUNITY BENEFIT

PSJHC Community Benefit activities are classified into three broad expenditure categories consistent with standards established by the Catholic Health Association¹: Charity Care, Community Benefit Services, and Unpaid Costs of Medi-Cal. During calendar year 2021, the total economic value of community benefit provided by Providence Saint John's Health Center is estimated at \$48,902,107 (includes Charity Care, Community Benefit Services, and Unpaid Costs of Medi-Cal) with an additional \$71,929,059 in Medicare shortfall². Furthermore, the Providence Saint John's Health Center Affiliation Fund provided \$900,000 in separate grant funding to non-profit agencies serving communities in the Providence Saint John's service area.

Table 8.1 summarizes the unreimbursed costs of these community benefits according to the framework specifically identified by Senate Bill 697:

- Medical care services
- Other services for vulnerable populations (Poor and underserved; seniors, children and youth)
- Other services for the broader community
- Health research, education, and training programs

Table 8.2 provides a detailed listing of the economic value of Community Benefit Services provided by Providence Saint John's Health Center in addition to the number of persons served.

Table 8.3 identifies nonprofit agencies which were awarded grants by the Saint John's Health Center Affiliation Fund, which provided \$748,000 in 2018-19, \$957,000 in 2019-20, \$948,000 in 2020-21, and \$900,000 in 2021-22.

¹ *A Guide for Planning and Reporting Community Benefit, 2015 Edition with 2017 Update*, Catholic Health Association of the United States, St Louis, MO, 2015

² OSHPD issued guidance in 2006, notifying hospitals to report Medicare shortfall. Medicare shortfall is not included in our publicly reported total community benefit expense.

TABLE 8.1 ECONOMIC VALUE OF COMMUNITY BENEFIT PROVIDED BY PROVIDENCE SAINT JOHN'S HEALTH CENTER JANUARY 1, 2021 THROUGH DECEMBER 31, 2021

Senate Bill 697 Category	Programs and services Included	Expense
Medical Care	Unpaid cost of Medicare program	\$71,929,059
	Charity Care	\$2,545,458
	Subsidized Health Services: Child and Family Development Center (CFDC) and Cleft Palate Clinic	\$7,742,344
	Unpaid cost of Medi-Cal program	\$36,578,616
Other Services for Vulnerable Populations	Grants to agencies that serve persons living in poverty, grants for services to local schools, seniors and children, cost of Community Benefit program	\$1,514,294
Health Research, Education and Training Programs	Support for health research, nursing and other education programs	\$521,395
	TOTAL—not including Medicare	\$48,902,107
	Medicare	\$71,929,059
	Total including Medicare	\$120,831,166

Source: Providence Saint John's Health Center Finance and other coordinating departments.

TABLE 8.2 ECONOMIC VALUE OF COMMUNITY BENEFIT SERVICES

Providence St. John's Health Center
Detailed Listing of Community Benefit Services
Reporting Period: January 1, 2021 - December 31, 2021

Category	Total Expense	Net Revenue	Net Expense	Persons Served
A. Community Health Improvement Services				
Community Health Programs	1,001,712	374,118	627,594	1,467
CHW Academy	86,949	49,314	37,635	5
Mental Health Promotion	119,209	47,126	72,083	51
Post-Discharge for Medically Indigent (including Psych Patients)	65,287	-	65,287	107
Total A	1,273,157	470,558	802,599	1,630
B. Health Professions Education				
Cleft Palate Symposium	-	-	-	-
Preceptorships	521,395	-	521,395	249
Total B	521,395	-	521,395	249
C. Subsidized Health Services				
CFDC Special Projects	710,375	297,272	413,103	40
CFDC SVC Child & Family Mental Health Services	6,723,729	3,524,847	3,198,882	501
CFDC SVC Child Abuse Prevention & Treatment Services	377,129	240,322	136,807	79
CFDC SVC Child/Youth Development	1,277,163	393,429	883,734	196
CFDC SVC Partnership for Families Services- prop10 First 5 LA Grant	1,075,834	493,428	582,406	25
CFDC SVC Therapeutic Pre-School/Intensive Day Treatment	1,153,428	383,253	770,175	17
Cleft Palate Center Clinic	837,867	291,175	546,692	57
Total C	12,155,525	5,623,726	6,531,799	915

(cont. on next page)

Providence St. John's Health Center (cont.)
Detailed Listing of Community Benefit Services
Reporting Period: January 1, 2021 - December 31, 2021

Category	Total Expense	Net Revenue	Net Expense	Persons Served
E. Cash and In-Kind Contributions				
Free Diagnostic and Therapeutic Services to FQHC Clinics	136,662	-	136,662	1,269
OPCC/The People Concern	150,000	-	150,000	23
Saint Anne's Catholic School	50,000	-	50,000	157
Venice Family Clinic	175,000	-	175,000	79
Westside Family Health Center	50,000	-	50,000	82
Total E	561,662	-	561,662	1,610
F. Community Building Activities				
CFDC SVC Infant, Toddler & Pre-School Program Services	1,580,858	370,313	1,210,545	67
Total F	1,580,858	370,313	1,210,545	67
G. Community Benefit Operations				
Community Benefit Operations	150,033	-	150,033	-
Total G	150,033	-	150,033	-
TOTAL COMMUNITY BENEFIT SERVICES	16,242,630	6,464,597	9,778,033	4,471

TABLE 8.3 ECONOMIC VALUE OF COMMUNITY BENEFIT PROVIDED BY PROVIDENCE SAINT JOHN'S AFFILIATION FUND

Grants to Non-Profit Agencies in Saint John's Service Area from Affiliation Fund	2019-20	2020-21	2021-22
Bandini Foundation	\$27,000	\$0	\$25,000
Boys and Girls Club of Santa Monica	\$30,000	\$30,000	\$30,000
Catholic Big Brothers Big Sisters	\$25,000	\$25,000	\$25,000
Catholic Charities of Los Angeles, Inc.	\$50,000	\$50,000	\$50,000
CLARE/MATRIX	\$100,000	\$100,000	\$100,000
Claris Health	\$25,000	\$25,000	\$25,000
Didi Hirsch	\$100,000	\$100,000	\$0
OPICA	\$23,000	\$0	\$20,000
Pacific Palisades Task Force on Homelessness	\$0	\$50,000	\$75,000
Safe Parking LA	\$68,000	\$65,000	\$45,000
Safe Place for Youth	\$42,000	\$42,000	\$42,000
Saint Monica Catholic Schools	\$50,000	\$0	\$30,000
Santa Monica Family YMCA	\$6,000	\$11,000	\$21,000
Santa Monica Education Foundation	\$50,000	\$50,000	\$50,000
The People Concern	\$50,000	\$100,000	\$100,000
UCLA Health Sound Body Sound Mind Foundation	\$90,000	\$0	\$0
UCLA VA Family Resource and Well-Being Center	\$96,000	\$100,000	\$100,000
Vision to Learn	\$50,000	\$0	\$12,000
Westside Food Bank	\$75,000	\$200,000	\$100,000
Wise & Healthy Aging	\$0	\$0	\$50,000
TOTAL CASH TO NON-PROFIT AGENCIES	\$957,000	\$948,000	\$900,000

SECTION 9: SANTA MONICA COMMUNITY ACCESS PLAN

During 2021, the economic value of community programs and services provided by Providence Saint John's Health Center based on the five categories identified in the Community Access Plan is estimated at \$18,670,456. In addition, the Saint John's Health Center Affiliation Fund provided cash grants to nonprofits that serve the Santa Monica community in the amount of \$585,000.

Table 9.1 summarizes the unreimbursed costs of these programs and services according to the framework specified in the Santa Monica Development Agreement:

- In-kind and cash support to the Santa Monica-Malibu Unified School District (SM-MUSD)
- In-kind and cash support to local non-profit agencies that serve Santa Monica residents
- Charitable medical and mental health services provided to patients that are clients of and directly referred by local non-profit organizations and residents of Santa Monica
- Charitable medical and mental health services provided to patients that are students and directly referred by the SM-MUSD
- Free community services available to the general Santa Monica community that promote health education and preventive health services

Table 9.2 summarizes the recipient organization or program provided by PSJHC; description of the program/service; the Community Access Plan Category where unreimbursed costs are reported; number served in 2021; and the estimated percentage of Santa Monica residents/organizations served by the program/service. It should be noted that due to differences in reporting for the Community Benefit Plan under SB 697, federal IRS requirements and the Santa Monica Community Access Plan, some programs/services we have used our best efforts to estimate the information required by the Santa Monica Community Access Plan. In general, these reporting differences include: the percent of the unpaid cost of Medi-Cal patients who do not report a Santa Monica address, the unpaid cost of Medicare, education and training of health professionals for schools outside of Santa Monica. It should also be noted that this report uses net expense reported using changes mandated by federal rules authorized by the 2007 Affordable Care Act (ACA). The ACA states that, effective 2014, community benefit expense is offset by restricted grants and endowments. This applies to Child and Family Development Center program costs, which received grants and endowment funds.

TABLE 9.1: ESTIMATED ECONOMIC VALUE OF PROGRAMS/SERVICES PROVIDED TO SANTA MONICA RESIDENTS AND NON-PROFITS JANUARY 1, 2021 THROUGH DECEMBER 31, 2021

Development Agreement category	Reported costs attributed to the City of Santa Monica	January 1 through December 31, 2021
Cash support to the Santa Monica-Malibu Unified School District	N/A	T= \$0
Cash grants and support to local non-profit organizations. List of grants reported in Appendix B ^a	Grants and Financial Support: \$425,000	T= \$425,000
Cost of charitable medical and mental health services provided to patients based on referrals from local non-profit organizations ^b	Traditional Charity \$745,820 Medi-Cal \$13,490,194 CFDC \$2,914,814 Cleft Palate Clinic \$28,773 Lab & Radiology services \$136,662 Medications \$3,895 Post-acute care – homeless \$42,940	T= \$17,363,098
Cost of charitable medical and mental health services provided to patients referred by SM- MUSD to Saint John’s CFDC ^c	At Risk Youth & Children’s Services \$413,103	T= \$413,103
Community services available to the general Santa Monica community that promote health education and preventive health services ^d	SM based nursing & health profession interns \$521,395	T= \$521,395
	GRAND TOTAL	\$18,670,456

Source: Providence Saint John’s Health Center coordinating departments.

a) Includes cash grants to all agencies listed in Appendix B

b) Includes charity care at cost, Medi-Cal shortfall and recuperative care post discharge expense for residents of Santa Monica

c) Includes the unreimbursed costs of Saint John’s Child & Family Development Center At-Risk-Youth services.

d) Includes educational classes available to Santa Monica residents, and hospital-based training and education of nursing and other health professional students either attending colleges and schools in Santa Monica or students and/or interns living in Santa Monica

TABLE 9.2: 2021 SERVICES AND PROGRAMMING PROVIDED FOR SMCAP

Program/ Organization	Description	Category of Community Support	2021 - Number of patients and/or services	Percent based in Santa Monica
Venice Family Clinic	Provide operating support for Homeless Health Care program	Cash support to local non-profit organizations	79 patients served	100%
The People Concern (formerly OPCC)	Provide operating support for Wellness Beds program	Cash support to local non-profit organizations	23 persons served	100%
Westside Family Health Center	Provide operating support grant for prenatal and pediatric services	Cash support to local non-profit organizations	82 patients served	100%
Venice Family Clinic and Westside Family Health Center	Free imaging and lab services for VFC and WFHC patients	In-kind support to local non-profit Organizations	1,269 patients	100%
Medication Assistance for PSJHC patients	Free prescriptions provided for patients who cannot afford their medication	Cost of Charitable Medical & Mental Health services	50 persons	100%
PSJHC Child and Family Development Center	Outpatient mental health for children and families	Cost of Charitable Medical & Mental Health services	541 clients served, 166 live in SM	31%
	Outpatient mental health for families with children age 0-5		70 clients, 27 live in SM	39%
	Therapeutic preschool (intensive day treatment)		17 children served; 5 live in SM	29%
	Outpatient mental health services for individuals and families impacted by child abuse	Cost of Charitable Medical & Mental Health services	79 clients, 1 live in SM	1%
	Outpatient mental health services for at-risk children, youth and their families, in collaboration with the City of Santa Monica and SM-MUSD	Cost of Charitable Medical & Mental Health services	261 persons served, 217 live in SM	83%
PSJHC Health Professions Education	Cost of health professionals education and internship as training site for nursing and other health professionals	Community Services available to the general Santa Monica community that promote health education	118 students trained with approximately 106 based in Santa Monica	90%

TABLE 9.3: ADDITIONAL BENEFIT PROVIDED BY SAINT JOHN’S AFFILIATION FUND

In addition to the community benefits detailed in Table 9.1 and Appendix B, Saint John’s Health Center Affiliation Fund provided cash grants to local non-profit agencies that provide programs addressing needs such as access to health care and mental health services, homeless services, wellness programs, and health education to residents in Saint John's Health Center's service area. The cash grants given to nonprofits that specifically make an impact to residents in the Santa Monica community include:

Agency / Nonprofit	2019-20 Cash Grant	2020-21 Cash Grant	2021-22 Cash Grant
Boys and Girls Club of Santa Monica	\$30,000	\$30,000	\$30,000
Catholic Charities of Los Angeles, Inc.	\$50,000	\$50,000	\$50,000
CLARE/MATRIX	\$100,000	\$100,000	\$100,000
Saint Monica Catholic Schools	\$50,000	\$0	\$30,000
Safe Place for Youth	\$42,000	\$42,000	\$42,000
Santa Monica Family YMCA	\$6,000	\$11,000	\$21,000
Santa Monica Education Foundation	\$50,000	\$50,000	\$50,000
The People Concern	\$50,000	\$100,000	\$100,000
Vision to Learn	\$50,000	\$0	\$12,000
Westside Food Bank	\$75,000	\$200,000	\$100,000
Wise & Healthy Aging	\$0	\$0	\$50,000
TOTAL	\$503,000	\$583,000	\$585,000

APPENDIX A: 2019 COMMUNITY HEALTH NEEDS ASSESSMENT OVERSIGHT COMMITTEE

Providence Saint John’s Community Health Needs Assessment Oversight Committee was an ad hoc committee of the Saint John’s board and provided consultation to the 2019 Community Health Needs Assessment. This group was composed of 50% community stakeholders (incorporating the City’s required members under the Development Agreement) and 50% Providence employees or affiliate entities and chaired by a Member of the Saint John’s Community Ministry Board.

Organization	Representative	Title
Venice Family Clinic	Liz Forer	Chief Executive Officer
The People Concern	John Maceri	Chief Executive Officer
City of Santa Monica	Setareh Yavari	Manager, Human Services Division
WISE and Healthy Aging	Grace Cheng Braun	President and CEO
Santa Monica School District	Susan Samarge-Powell	Director, Child Development Services
Los Angeles County Department of Public Health	Jan King	Area Health Officer, SPA 5 (West) and SPA 6 (South)
Santa Monica College	Michael Tuitasi	Vice President, Student Affairs
Santa Monica College	Susan Fila	Director of Health and Wellbeing
Westside Coalition	Darci Navi	Director
City of Santa Monica	Nat Trives	Former Mayor
Providence Saint John's Health Center	Carlie Galloway	Lead Clinical Social Worker
	Paul Makareweicz	Director, Mission Integration
	Bob Frank	Director, Food & Nutrition Services
	Ruth Canas	Executive Director, Child and Family Development Center
	Wendy Merritt	Director, Foundation Relations
	Russ Kino	Physician
	Giancarlo Lyle-Edrosolo	Chief Nursing Officer
	Randy Roisman	Chief Financial Officer
RAND Corporation	Iao Katagiri, Committee Chair	Senior Advisor, Community Relations
Providence Saint John’s Health Center		Board Secretary for Community Ministry Board

APPENDIX B: PSJHC'S CROSS-YEAR COMPARISON CAP PLAN ACTUALS

Line		2019	2020	2021
1	Actuals provided in annual report			
2	In-kind & cash support to SM residents	13,898,478	19,285,913	17,788,098
3	In-kind & cash support to SMMUSD	538,449	301,640	413,103
4	Charitable mental & medical services Unreimbursed costs for services to SM residents	13,294,679	18,860,913	17,363,098
5	Charitable mental & medical services to SMMUSD students	538,449	301,640	413,103
6	Free health education, training, support groups to the community	427,570	520,650	469,256
7	TOTAL	14,864,497	20,108,203	18,670,456
8	Minimum amount required per the Development Agreement	1,000,686	1,015,697	1,030,932
9	Detail of Actuals: In-kind and Cash			
10	Support to Santa Monica Residents: In-kind	13,294,679	18,860,913	17,363,098
11	Support to Santa Monica Residents: Cash	603,799	425,000	425,000
12	Support to SMMUSD: In-kind	538,449	301,640	413,103
13	Support to SMMUSD: Cash	-	-	0
14	Total Cash (includes SM-MUSD)	603,799	425,000	425,000
15	Total In-kind (includes SM-MUSD)	13,833,128	19,162,553	17,776,201
16	Cash Gifts to Santa Monica Non-Profit Agencies (In-Kind NOT included)			
17	Venice Family Clinic Total (Nurse Practitioner clinic and Respite Program Support)	175,000	175,000	175,000
18	SMMUSD Total (School Nursing)	*	*	0
19	OPCC Total (Respite Wellness Program)	150,000	150,000	150,000
20	Westside Family Health Center (Peds & OB Care)	50,000	50,000	50,000
21	St Joseph Center (Bread and Roses and Case Mgt)	50,000	-	0
22	Pico Youth & Family Center (Violence Reduction Program)	-	-	0
23	WISE & Healthy Aging (Seniors at Risk)	83,799	-	0
24	St Anne School (School Nurse/Health Program)	50,000	50,000	50,000
25	Upward Bound Hose Annual Total (Case Mgt.)	-	-	0
26	Boys & Girls Clubs of Santa Monica	*	*	0
27	Santa Monica College Foundation	-	-	0
28	Step Up On Second	-	-	0
29	Westside Coalition	-	-	0
30	Safe Place for Youth	*	*	0
31	Meals on Wheels West	45,000	**	0
32	Achievable Foundation Clinic	-	-	0
33	Santa Monica Family YMCA	*	*	0
34	TOTAL CASH TO SM AGENCIES - SHOULD MATCH Line 14	603,799	425,000	425,000
	<p>* Saint John's Affiliation Fund provided cash grants to these nonprofits that serve the Santa Monica community. See Table 9.4. ** Providence's Saint Joseph Community Partnership Fund provided \$30,000 cash grants to Meals on Wheels West in 2020.</p>			

APPENDIX C: MULTI-YEAR COMPARISON OF PROVIDENCE SAINT JOHN'S COMMUNITY ACCESS PLAN TO DEVELOPMENT AGREEMENT REQUIREMENT

The Community Access Plan is that part of the 1997 Development Agreement that applies to the Community Benefit provided by Providence Saint John's Health Center. Providence Saint John's computes the Community Benefit reported to the State that apply only to residents/nonprofits of the City of Santa Monica, and the homeless.

The 1997 Development Agreement established a schedule of the estimated value, at cost, of community benefit provided to residents of Santa Monica. We take those community benefit reported to the State of California, per SB697, and report to the City only those benefit provided to Santa Monica residents/nonprofits, and to the homeless. The initial 1998 requirement was \$732,000 and increases by 1.5% each year. Listed below are the community benefit requirements from 2014 to 2021 and those costs provided by Providence Saint John's Health Center to Santa Monica residents:

Year	Required (1.5% increase per year)	Provided
2014	\$928,897	\$5,876,605
2015	\$942,831	\$19,288,094
2016	\$956,973	\$15,509,910
2017	\$971,328	\$11,881,891
2018	\$985,898	\$15,711,841
2019	\$1,000,686	\$14,864,497
2020	\$1,015,697	\$20,108,203
2021	\$1,030,932	\$18,670,456

Providence Saint John's fully complies with the spirit and intent of the Development Agreement.