

# COMMUNITY HEALTH IMPROVEMENT PLAN 2020 - 2022

## St. Jude Medical Center



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To provide feedback about this CHIP or obtain a printed copy free of charge, please email Barry Ross at [Barry.Ross@StJoe.org](mailto:Barry.Ross@StJoe.org)



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# EXECUTIVE SUMMARY

Providence St. Joseph Health (PSJH) continues its Mission of service in Orange County through St. Jude Medical Center, St. Joseph Hospital of Orange, and Mission Hospital. St. Jude Medical Center is an acute-care hospital with 320 licensed beds, founded in 1957 and located in Fullerton, California. The hospital's service area includes a population of 1,733,665 people and spans parts of Orange, Los Angeles, and San Bernardino Counties.

PSJH—Orange County hospitals dedicate resources to improve the health and quality of life for the communities they serve, with special emphasis on the needs of the economically poor and vulnerable. During 2019, the region provided a combined \$113,383,246 in Community Benefit in response to unmet needs.

St. Jude Medical Center conducts a Community Health Needs Assessment (CHNA) in the communities it serves every three years to better understand the health-related needs and strengths. The results of the CHNA are used to guide and inform efforts to better address the needs of the community. Through a mixed-methods approach using quantitative and qualitative data, the CHNA process relied on several sources of information to identify community needs. Across Orange County, information collected includes community data-level from the Orange County Health Improvement Partnership; 2019 Kaiser Permanente CHNA; 2019 University of California, Irvine Medical Center CHNA; CalOptima Member Survey; state and national public health data; and hospital utilization data.

## Community Health Improvement Plan Priorities

As a result of the findings of the [2019 Community Health Needs Assessment \(CHNA\)](#) and through a prioritization process aligned with our Mission, resources, and hospital strategic plan, St. Jude Medical Center will focus on the following areas for its 2020-2022 Community Benefit efforts:

### PRIORITY 1: MENTAL HEALTH

Creating awareness and services addressing mental health along with substance use.

### PRIORITY 2: ACCESS TO CARE

Increasing health care access as well as other resources for areas that have the biggest challenges.

### PRIORITY 3: HOMELESSNESS AND HOUSING

Social determinants of health, like housing, have a substantial impact on health behaviors and health outcomes. Addressing housing instability, housing affordability, and preventing homelessness will improve health in the communities we serve.

### PRIORITY 4: HEALTH EQUITY AND RACIAL DISPARITIES

The need for increased health equity and the presence of racial disparities are key priorities to address.

As we develop the Community Health Improvement Plan (CHIP), we will integrate prevention and addressing racial disparities as a cornerstone of each of these priority areas.

# INTRODUCTION

## 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 — Justice — Excellence — Integrity

## Who We Are

St. Jude Medical Center is an acute-care hospital founded in 1957 and located in Fullerton, California. The hospital has 320 licensed beds, all of which are currently available, and a campus that is approximately 40 acres in size. St. Jude Medical Center has a staff of 2,527 caregivers and professional relationships with 615 local physicians and 83 independent allied health professionals. Major programs and services offered to the community include cardiac care, stroke care and neurology, orthopedics, rehabilitation, oncology, emergency medicine, and obstetrics.

## Our Commitment to Community

PSJH—Orange County hospitals dedicate resources to improve the health and quality of life for the communities they serve, with special emphasis on the needs of the economically poor and vulnerable. During 2019, the region provided a combined \$113,383,246 in Community Benefit<sup>1</sup> in response to unmet needs.

Other healthcare providers in the region include AHMC Healthcare, Anaheim Global Medical Center, Children’s Hospital of Orange County, Corona Regional Medical Center, Hoag Hospitals, Kaiser Permanente Orange County, KPC Healthcare, Inc., Orange Coast Medical Center, PIH Health, Placentia-Linda Hospital, Prime Healthcare, Tenet Healthcare, University of California, Irvine Medical Center, West

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<sup>1</sup> A community benefit is an initiative, program or activity that provides treatment or promotes health and healing as a response to identified community needs and meets at least one of the following community benefit objectives: a. Improves access to health services; b. Enhances public health; c. Advances increased general knowledge; and/or d. Relieves government burden to improve health. Note: Community benefit includes both services to the economically poor and broader community. To be reported as a community benefit initiative or program, community need must be demonstrated. Community need can be demonstrated through the following: 1) community health needs assessment developed by the ministry or in partnership with other community organizations; 2) documentation that demonstrates community need and/or a request from a public agency or community group was the basis for initiating or continuing the activity or program; 3) or the involvement of unrelated, collaborative tax-exempt or government organizations as partners in the community benefit initiative or program.

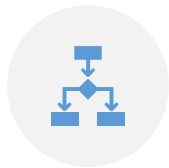
Anaheim Medical Center are neighboring hospitals. Affiliated Community Clinics in the region are Camino Health Center, and St. Jude Neighborhood Health Centers.

PSJH—Orange County hospitals further demonstrate organizational commitment to the Community Health Needs Assessment (CHNA) through the allocation of staff time, financial resources, participation, and collaboration to address community identified needs. The Regional Director, Community Health Investment for Southern California - PSJH and the Community Health Investment Directors are responsible for ensuring the compliance of Federal 501r requirements. They also provide the opportunity for community leaders and internal hospital leadership, physicians, and others to work together in planning and implementing the resulting Community Health Improvement Plan (CHIP).

## Health Equity

At Providence St. Joseph Health, we acknowledge that all people do not have equal opportunities and access to living their fullest, healthiest lives due to systems of oppression and inequities. We are committed to ensuring health equity for all by addressing the underlying causes of racial and economic inequities and health disparities. Our Vision is “Health for a Better World,” and to achieve that we believe we must address not only the clinical care factors that determine a person’s length and quality of life, but also the social and economic factors, the physical environment, and the health behaviors that all play an active role in determining health outcomes.

To ensure that equity is foundational to our CHIP, we have developed an equity framework that outlines the best practices that each of our hospital will implement when completing a CHIP. These practices include, but are not limited to the following:



Address root causes of inequities by utilizing evidence-based and leading practices



Explicitly state goal of reducing health disparities and social inequities



Reflect our values of justice and dignity



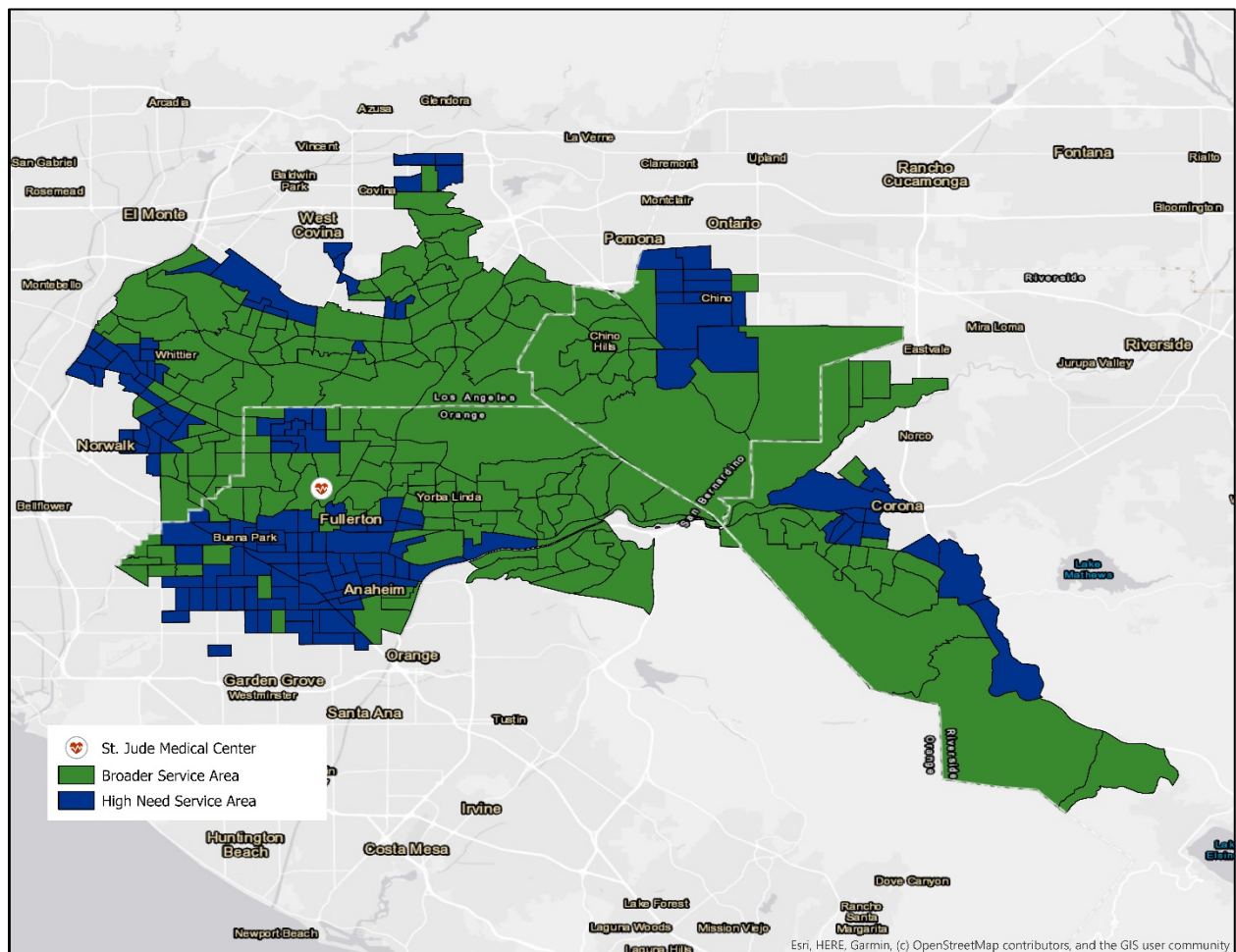
Leverage community strengths

# OUR COMMUNITY

## Description of Community Served

The community served by St. Jude Medical Center is based upon geographic access and other hospitals in the area, as well as patient ZIP Codes. St. Jude Medical Center’s Community Benefit Committee determined it will focus its investments in the high need areas of Orange County because there are other non-profit hospitals serving the secondary areas outside of the county.

**Figure 1. St. Jude Medical Center's Total Service Area**



Of the over 1,700,000 permanent residents in the total service area, roughly 45% live in the high need service area, defined by lower life expectancy at birth, lower high school graduation rates, and more households at or below 200% FPL compared to census tracts in the total service area. These households are more likely to regularly make spending tradeoffs regarding utilities, rent, groceries, medicine, and other basic expenses.

## Community Demographics

### POPULATION AND AGE DEMOGRAPHICS

People under the age of 35 are more likely to live in the high need service area, while those aged 55 to 64 are less likely. The ratio of males-to-females is roughly proportional across the geographies.

### POPULATION BY RACE AND ETHNICITY—ST. JUDE MEDICAL CENTER

Individuals who identify as Hispanic and “other” race are substantially more likely to live in high need census tracts. People identifying as Asian are less likely to live in high need census tracts.

### SOCIOECONOMIC INDICATORS

**Table 1. Socioeconomic Indicators for St. Jude Medical Center Service Area**

Indicator	Broader Service Area	High Need Service Area	Total Service Area	Orange County	Los Angeles County	San Bernardino County
<b>Median Household Income</b> Data Source: American Community Survey Year: 2019	\$103,210	\$63,059	\$84,552	\$88,453	\$66,297	\$60,761
<b>Percent of Renter Households with Severe Housing Cost Burden</b> Data Source: American Community Survey Year: Estimates based on 2013 – 2017 data	24.0%	30.8%	28.1%	28.0%	30.1%	28.7%

The median household income for the total service area for St. Jude Medical Center is about \$4,000 lower than Orange County overall. There is over a \$40,000 difference in median income between the broader service area and the high need service area.

Severe housing cost burden is defined as households that spend 50% or more of their income on housing costs. The total service area and Orange County have roughly the same percentage of renter households that are severely housing cost burdened (28%).

In the high need service area, 31% of renter households are severely housing cost burdened. Within the total service area there are census tracts in which over 30% of households are experiencing severe housing cost burden.

**Full demographic and socioeconomic information for the service area can be found in the [2019 CHNA for St. Jude Medical Center](#).**

# COMMUNITY NEEDS AND ASSETS ASSESSMENT PROCESS AND RESULTS

## Significant Community Health Needs Prioritized

The list below summarizes the rank ordered significant health needs identified through the Community Health Needs Assessment process:

### PRIORITY 1: MENTAL HEALTH

Creating awareness and services addressing mental health along with substance use.

### PRIORITY 2: ACCESS TO CARE

Increasing health care access as well as other resources for areas that have the biggest challenges.

### PRIORITY 3: HOMELESSNESS AND HOUSING

Social determinants of health, like housing, have a substantial impact on health behaviors and health outcomes. Addressing housing instability, housing affordability, and preventing homelessness will improve health in the communities we serve.

### PRIORITY 4: HEALTH EQUITY AND RACIAL DISPARITIES

The need for increased health equity and the presence of racial disparities are key priorities to address.

As we develop the Community Health Improvement Plan (CHIP), we will integrate prevention and addressing racial disparities as a cornerstone of each of these priority areas.

## Needs Beyond the Hospital's Service Program

No hospital facility can address all the health needs present in its community. We are committed to continue our Mission by partnering with other organizations who may meet the needs beyond our programs and by funding other non-profits through our Care for the Poor program managed by the St. Jude Medical Center.

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

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

**Obesity/Food Insecurity/Nutrition:** While not identified as a priority in the CHNA, St. Jude Medical Center will continue to support the Move More, Eat Healthy Initiative as part of the health equity/racial



disparities priority. This initiative also addresses food insecurity and nutrition. St. Jude Medical Center donates unused food as part of our efforts to address food insecurity.

**Economic Issues:** While St. Jude Medical Center has not selected economic issues as a top priority, the majority of its community benefit programs are targeted to the low-income population. St. Jude Medical Center partners with Orange County Community Action Partnership, the county anti-poverty agency on several initiatives. St. Jude Medical Center has a policy of a just living wage and in that way serves as a role model for other organizations in the community.

**Safety:** The declining crime rate has not made this a priority, but St. Jude Medical Center actively participates in five local city collaboratives that focus on the needs of at-risk youth with a goal to reduce gang involvement and crime. In addition, St. Jude Medical Center partners with the Center for Healthy Neighborhoods and Habitat for Humanity, who have a priority on safety issues.

**Diabetes:** St. Jude Medical Center will continue to work with the OC Health Improvement Partnership which is addressing diabetes in Orange County.

**Early Childhood Development:** While this did not make the top priorities, the Regional Director, Community Health Investment serves as co-chair of Early Childhood OC, which is addressing this issue.

**Environment/Climate:** [Providence St. Joseph Health has committed to being carbon negative by 2030.](#) This effort will involve all hospital staff. The Regional Director, Community Health Investment has been appointed to the System Environmental Justice Work Group.

**Ageing Population:** While this is not one of the selected priorities, St. Jude Medical Center has one of the only hospital- based Senior Services departments in Orange County. This department provides a home assistance volunteer program, non-emergency medical transportation, late life depression programs, chronic disease management programs and information and referral. St. Jude Medical Center also serves as the sponsor of Caregiver Resource Center OC, which provides support to family caregivers who care for a loved one.

# COMMUNITY HEALTH IMPROVEMENT PLAN

## Summary of Community Health Improvement Planning Process

The Community Health Needs Assessment (CHNA) process is based on the understanding that health and wellness are influenced by factors within our communities, not only within medical facilities. In gathering information on the communities served by the hospital(s), we looked not only at the health conditions of the population, but also at socioeconomic factors, the physical environment, and health behaviors. Additionally, we utilized input from key stakeholders and community members to provide additional context to the quantitative data through qualitative data in the form of interviews and listening sessions from partner organizations. As often as possible, equity is at the forefront of our conversations and presentation of the data, which often have biases based on collection methodology.

In addition, we recognize that there are often geographic areas where the conditions for supporting health are substantially poorer than nearby areas. Whenever possible and reliable, data is reported at the ZIP code or census block group level. These smaller geographic areas allow us to better understand the neighborhood level needs of our communities and better address disparities within and across communities.

We reviewed data from the American Community Survey and local public health authorities. In addition, we include hospital utilization data to identify disparities in utilization by income and insurance, geography, and race/ethnicity when reliably collected ([see page 20 of the 2019 CHNA](#)).

The CHIP process integrated the community input received from over 50 stakeholders at a regional housing/homeless forum, input from the Board of St. Jude Neighborhood Health Centers related to their plans and builds on our mental health partnerships.

The 2020-2022 Community Health Improvement Plan (CHIP) process was disrupted by the SARS-CoV-2 virus and COVID-19, which has impacted all of our communities. While we have focused on crisis response, it has required a significant re-direction of resources and reduced community engagement in the CHIP process.

This CHIP is currently designed to address the needs identified and prioritized through the 2019 CHNA, though COVID-19 will have substantial impacts on our 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 in the coming months, and it is important that we adapt our efforts to respond accordingly. This CHIP will be updated in 2021 to better document the impact of and our response to COVID-19 in our community. We are committed to supporting, strengthening, and serving our community in ways that align with our Mission, engage our expertise, and leverage our Community Benefit dollars in the most impactful ways.

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

# Addressing the Needs of the Community: 2020- 2022 Key Community Benefit Initiatives and Evaluation Plan

## PRIORITY #1: HOMELESSNESS AND AFFORDABLE HOUSING

### *Community Need Addressed*

Increase in homelessness and the lack of affordable housing

### *Goal (Anticipated Impact)*

Reduce chronic homelessness, increase the number of affordable housing units and strengthen affordable housing policies in the 2021-2028 housing elements

### *Outcome Measures*

- Reduce chronic homelessness by 2022 as measured by the rate of individuals experiencing chronic homelessness in the Annual Point in Time Count
- Increase affordable housing units by at least 200 in North Orange County by 2022
- Strengthen affordable housing policies in the 2021-2028 housing elements in at least 3 target North Orange County cities by 2022.

**Table 2. Strategies for Addressing Homelessness and Affordable Housing**

Strategy	Target Population
<b>1. Train a minimum of 100 housing champions in North Orange County cities.</b>	Residents, particularly those with low incomes
<b>2. Engage with housing champions in local city housing element public element to promote stronger policies in the 2021-2028 housing elements that will result in more affordable housing.</b>	Resident engagement with Planning and City Council
<b>3. Support the approval of affordable housing projects in the pipeline so that at least 200 new units are built by 2022 in North Orange County.</b>	Advocacy with Planning Commissions and City Councils
<b>4. Continue homeless care navigation program and implement best practices identified in the region.</b>	People experiencing chronic homelessness

### *Planned Collaboration*

Collaborative partners include the Kennedy Commission; United Way OC; YIMBY, Habitat for Humanity, Fullerton Tri-Parish Council

### *Resource Commitment*

\$559,000 is budgeted in 2021 and 2022 to support this effort and our partners, which include two homeless community care navigators and grants to partner organizations.

## PRIORITY #2: MENTAL HEALTH AND SUBSTANCE USE DISORDERS

### *Community Need Addressed*

Mental health and substance use disorders

### *Goal (Anticipated Impact)*

Improved system to access mental health and substance use services to ensure that patients receive care at the appropriate level of care and not in the Emergency Department, reduced mental health stigma in the community and increase in resources for youth.

### *Outcome Measures*

- # of Emergency Department visits for mental health and substance use disorders
- # of Emergency Department patients referred for Medication Assisted Treatment (MAT)
- # of schools and students participating in [Work2BeWell](#) program
- # of residents who are active on [Each Mind Matters](#) social media

**Table 3. Strategies for Addressing Mental Health and Substance Use Disorders**

<b>Strategy</b>	<b>Target Population</b>
<b>1. Participate in the Be Well Clinical Campus Steering Committee and ensure strong referral protocols are in place</b>	Patients with mental health and substance use disorders
<b>2. Implement MAT program in Emergency Department</b>	Patients with opioid use disorder
<b>3. Adapt the Each Mind Matters Campaign/Promise to Talk in response to COVID-19</b>	Latinas with low incomes and their household members
<b>4. Implement Work2BeWell program</b>	Middle and high school students

### *Planned Collaboration*

Be Well OC; NAMI, St. Jude Emergency Medical Group; St. Joseph Hospital; Mission Hospital; PSJH Work2BeWell; Westbound Communications

### *Resource Commitment*

\$450,000 for a Chemical Dependency Counselor and to support Each Mind Matters, Work2BeWell and other mental health strategies

### PRIORITY #3: ACCESS TO CARE AND CARE NAVIGATION

#### *Community Need Addressed*

Lack of access to primary care, dental care, mental health care and difficulties in navigating services

#### *Goal (Anticipated Impact)*

Increase the number of primary care, dental care and mental health visits to the uninsured and underinsured in Orange County

#### *Outcome Measure*

Number of primary care, dental and mental health visits provided by [St. Jude Neighborhood Health Centers](#) in North Orange County

**Table 4. Strategies for Addressing Access to Care**

<b>Strategy</b>	<b>Target Population</b>
<b>1. Open the Ponderosa Park site in 2021</b>	People who are uninsured or underinsured and have low incomes
<b>2. Open the Manchester site in 2022</b>	People who are uninsured or underinsured and have low incomes
<b>3. Assess the integration of virtual visits into clinic operations as a way to reduce barriers to care</b>	People who are uninsured or underinsured and have low incomes

#### *Planned Collaboration*

St. Jude Neighborhood Health Centers; Jamboree Housing; City of Anaheim

#### *Resource Commitment*

\$1.5 million in 2020 in capital and operating support, \$3 million in capital and operating support in 2021 and \$1.5 million in operating subsidy in 2022

**PRIORITY #4: HEALTH EQUITY/RACE DISPARITIES**

*Community Need Addressed*

Disparities in health outcomes by race/ethnicity and lack of health equity

*Goal (Anticipated Impact)*

Reduce one health disparity selected by the regional Health Equity initiative from a community perspective

*Outcome Measure*

Reduction in the rate of the selected health disparity by 2022

**Table 5. Strategies for Addressing Health Equity and Race Disparities**

<b>Strategy</b>	<b>Target Population</b>
<b>1. Develop a plan to reduce the selected health disparity in 2021</b>	Black, Brown, Indigenous, and People of Color (BBIPOC) with low incomes
<b>2. Implement the plan developed by the regional Health Equity initiative to reduce the selected health disparity in 2021</b>	BBIPOC with low incomes

*Planned Collaboration*

PSJH Health Equity Work Group

*Resource Commitment*

\$250,000 per year in 2021 and 2022

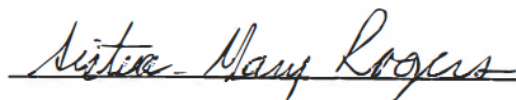
## Other Community Benefit Programs and Evaluation Plan

**Table 6. Other Community Benefit Programs in Response to Community Needs**

Initiative (Community Need Addressed)	Program Name	Description	Target Population
1. Obesity Prevention	<a href="#">Move More, Eat Healthy</a>	Policy, system and environmental change to reduce obesity	North Orange County neighborhoods with low incomes
2. COVID-19	Disaster Response	Emergency, mid-term and long-term response to the effects of COVID -19	North Orange County communities with low incomes
3. Depression and needs of frail seniors	Senior Services	Late life depression, in-home volunteer support and chronic disease management for low income elderly	North Orange County older adults with low incomes
4. Medication, DME, Transportation and Recuperative Care	Uninsured Patient Discharge Needs	Provide support to assist indigent patients with medication, transportation, recuperative care and other needs	Uninsured patients of St. Jude Medical Center
5. Health care navigation	Medicaid Playbook	Care coordination for Medi-Cal patients	ED and hospital Medi-Cal patients at St. Jude Medical Center and affiliated physicians and clinics

## 2020- 2022 CHIP GOVERNANCE APPROVAL

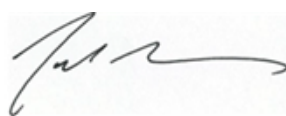
This Community Health Improvement Plan was adopted by the Community Benefit Committee of the hospital on December 6, 2020. The final report was made widely available by December 28, 2020.



12/6/2020

Sr. Mary Rogers  
Chair, St. Jude Medical Center Community Benefit Committee

Date



12/14/2020

Joel Gilbertson  
Executive Vice President, Community Partnerships  
Providence St. Joseph Health

Date

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To request a paper copy without charge, provide feedback about the CHNA or CHIP Reports, or any additional inquiries, please email [CHI@providence.org](mailto:CHI@providence.org).