2021

COMMUNITY BENEFIT REPORT/ PROGRESS ON 2020-2022 COMMUNITY HEALTH IMPROVEMENT PLAN

Providence

St. Joseph Hospital

Orange, California



To provide feedback on this CB Report or obtain a printed copy free of charge, please email Cecilia Bustamante-Pixa at Cecilia.Bustamante-Pixa@stjoe.org



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EXECUTIVE SUMMARY

Providence continues its Mission of service in Orange County through Providence St. Joseph Hospital. SJO is an acute-care hospital with 465 licensed beds, founded in 1929 and located in Orange, California. The hospital's service area is the entirety of Central Orange County, including 2,590,000 people.

Providence St. Joseph Hospital dedicates resources to improve the health and quality of life for the communities it serves, with special emphasis on the needs of the economically poor and vulnerable. In FY21, the hospital provided \$77,191,201 Community Benefit in response to unmet needs. For FY21, Providence St. Joseph Health had an unpaid cost of Medicare of \$54,838,660.

2020-2022 Providence St. Joseph Hospital Community Health Improvement Plan Priorities

As a result of the findings of our <u>2019 CHNA</u> and through a prioritization process aligned with our Mission, resources, and hospital strategic plan, Providence St. Joseph Hospital will focus on the following areas for its 2020-2022 Community Benefit efforts:

PRIORITY 1 MENTAL HEALTH

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.

2021 Accomplishments

Addressed challenges in redirecting patients with alcohol and substance use to the Be Well Campus. Implemented the MAT program in the Emergency Department in 2020. Each Mind Matters campaign addressed mental health issues pertaining to COVID-19.

PRIORITY 2 ACCESS TO CARE

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

2021 Accomplishments

La Amistad Federally Qualified Health Center (FQHC) was able to do virtual appointments in response to COVID-19.

La Amistad FQHC hired a bilingual OBGYN Provider.

Uninsured patients in the ER found a medical home in the FQHC

PRIORITY 3 HOMELESSNESS & 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.

2021 Accomplishments

OC United Way and OC People for Housing YIMBY trained housing champions.

Providence Community Investment provided a bridge loan to an affordable housing developer, Jamboree Housing to build in Central Orange County.

Homeless Navigator continues to round on patients experiencing homelessness after discharge.

Providence

At Providence, we use our voice to advocate for vulnerable populations and needed reforms in health care. We are also pursuing innovative ways to transform health care by keeping people healthy, and making our services more convenient, accessible and affordable for all. In an increasingly uncertain world, we are committed to high-quality, compassionate health care for everyone – regardless of coverage or ability to pay. We help people and communities benefit from the best health care model for the future – today.

Together, our 120,000 caregivers (all employees) serve in 52 hospitals, 1,085 clinics and a comprehensive range of health and social services across Alaska, California, Montana, New Mexico, Oregon, Texas and Washington.

Providence across five western states:

- Alaska
- Montana
- Oregon
- Northern California
- Southern California
- Washington

The Providence affiliate family includes:

- Covenant Health in West Texas
- Facey Medical Foundation in Los Angeles, CA.
- Hoag Memorial Hospital Presbyterian in Orange County, CA.
- Kadlec in Southeast Washington
- Pacific Medical Centers in Seattle, WA.
- Swedish Health Services in Seattle, WA.

As a comprehensive health care organization, we are serving more people, advancing best practices and continuing our more than 100-year tradition of serving the poor and vulnerable. Delivering services across seven states, Providence is committed to touching millions of more lives and enhancing the health of the American West to transform care for the next generation and beyond.

INTRODUCTION

Who We Are

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

Providence St. Joseph Hospital is an acute care hospital founded in 1929 and located in Orange, California. The hospital has 465 licensed beds, a staff of more than 3,100, and professional relationships with more than 1,000 local physicians. Major programs and services offered to the community include the following: cardiac care, stroke/neuro, orthopedics, rehabilitation, oncology, emergency medicine and obstetrics.

Our Commitment to Community

Providence St. Joseph Hospital dedicates resources to improve the health and quality of life for the communities we serve. During Fiscal Year 2021 (July 1, 2020 – June 30, 2021), Providence St. Joseph Hospital provided \$77,191,201 in Community Benefit¹ in response to unmet needs and to improve the health and well-being of those we serve in Central Orange County.

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:

¹ Per federal reporting and guidelines from the Catholic Health Association.

Figure 1. Best Practices for Centering Equity in the CHIP



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

Community Benefit Governance

Providence St. Joseph Hospital demonstrates organizational commitment to the community benefit process through the allocation of staff time, financial resources, participation and collaboration with community partners. The Director of Community Health Investment is responsible for coordinating implementation of State and Federal 501r requirements.

A charter approved in 2007 and revised in 2020 established the formation of the SJO Community Health Committee. The role of the Community Health 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 Health Committee is charged with developing policies and programs that address identified needs in the service area particularly for underserved populations, overseeing development and implementation of the Community Health Needs Assessment (CHNA) and Community Health Improvement Plan (CHIP), and overseeing and directing the Community Benefit (CB) activities.

The Community Health Committee has a minimum of eight members including three members of the Board of Trustees. Current membership includes 14 members of the Board of Trustees and 11 community members. A majority of members have knowledge and experience with the populations most likely to have disproportionate unmet health needs. The Community Health Committee generally meets quarterly.

Roles and Responsibilities

Senior Leadership

• Chief Executive and senior leaders including the hospital's Chief Mission Integration Officer, are directly accountable for CB performance.

Community Health Committee (CHC)

- CHC serves as an extension of trustees to provide direct oversight for all charitable program activities and ensure program alignment with "Advancing the State of the Art of Community Benefit" (ASACB) Five Core Principles. It includes diverse community stakeholders. Trustee members on CHC serve as 'board level champions.'
- The Committee provides recommendations to the Board of Trustees regarding budget, program targeting and program continuation or revision.

Community Health (CH) Department

- Manages CB efforts and coordination between CH and Finance departments on reporting and planning.
- Manage 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 health-related issues on a city, county or regional level.

Planning for the Uninsured and Underinsured

Our Mission is to provide quality care to all our patients, regardless of ability to pay. We believe that no one should delay seeking needed medical care because they lack health insurance. That is why Providence St. Joseph Hospital has a Financial Assistance Program (FAP) that provides free or discounted services to eligible patients.

One way Providence St. Joseph Hospital informs the public of FAP is by posting notices. Notices are posted in high volume inpatient and outpatient service areas. Notices are also posted at locations where a patient may pay their bill. Notices include contact information on how a patient can obtain more information on financial assistance as well as where to apply for assistance. These notices are posted in English and Spanish and any other languages that are representative of 5% or greater of patients in the hospital's service area. All patients who demonstrate lack of financial coverage by third party insurers are offered an opportunity to complete the Patient Financial Assistance Application and are offered information, assistance, and referral as appropriate to government sponsored programs for which they may be eligible. For information on our Financial Assistance Program click

https://www.providence.org/obp/ca. In FY21, Providence St. Joseph Hospital provided \$8,752,505.

Medi-Cal (Medicaid)

Providence St. Joseph Hospital provides access to the uninsured and underinsured by participating in Medicaid, also known as Medi-Cal in California. In FY21, Providence St. Joseph Hospital provided \$60,310,005 in Medicaid shortfall. The hospital received \$80,079,346 income from the Medi-Cal Hospital Quality Assurance Fee program. If it was not for the Hospital Quality Assurance Fee received, Unpaid cost of Medi-Cal would have been \$140,389,351.

OUR COMMUNITY

Description of Community Served

Providence St. Joseph Hospital's service area is Central Orange County and includes a population of approximately 2,590,000 people.

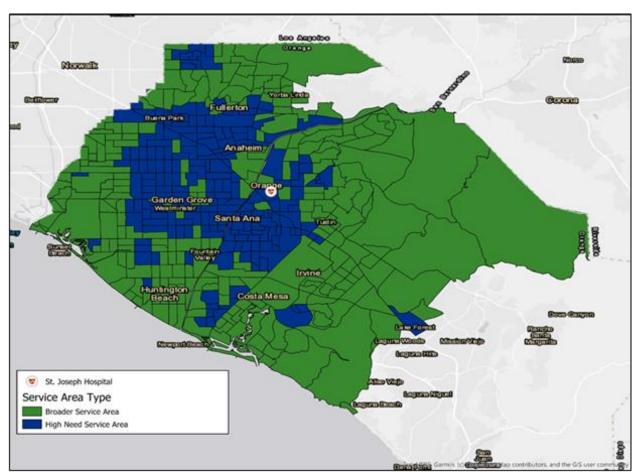


Figure 2. Providence St. Joseph Hospital's Total Service Area

Of the over 2,590,000 permanent residents of Central Orange County, roughly 47% live in the "high need" 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 across the county. For reference, in 2020, 200% FPL represents an annual household income of \$52,400 or less for a family of four. 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

Of the over 2,590,000 permanent residents in the total service area, the male-to-female distribution is roughly equal across geographies.

The high need service area has a higher percentage of people under 34 years of age, 61.5%, compared to 47.4% in the broader community.

POPULATION BY RACE AND ETHNICITY

Individuals identifying as Hispanic had a higher percentage living in high need service areas, 59.1% versus the broader service area, 19.9%. The same was noted for individuals identifying as "other" race, 28.5% versus 7.0%.

People identifying as Asian and white were less likely to live in high need census tracts. For Asians, 19.9% lived in high need service areas and 26.5% in the broader service area. For whites, 44% lived in high need service areas, and 58.9% in the broader community.

SOCIOECONOMIC INDICATORS

Table 1. Income Indicators for Orange County Service Area

Indicator	Broader Service Area	High Need Service Area	Orange County
Median Income Data Source: American Community Survey Year: 2019	\$101,892	\$60,065	\$88,453
Percent of Renter Households with Severe Housing Cost Burden Data Source: American Community Survey Year: Estimates based on 2013 – 2017 data	23.7%	32.2%	28.0%

The high need service area's median household income is approximately \$40,000 *less than* that of the broader service area, and \$28,000 *less than* the Orange County overall.

Severe housing cost burden is defined as households that spend 50% or more of their income on housing costs. A greater proportion of renter households are severely housing burdened in the high need service area (one out of every three households, 32.2%) in comparison to the broader service area (one out of every four households, 23.7%).

Full demographic and socioeconomic information for the service area can be found in the <u>2019 CHNA</u> for Providence St. Joseph Hospital.

COMMUNITY NEEDS AND ASSETS ASSESSMENT PROCESS AND RESULTS

Summary of Community Needs Assessment Process and Results

Improving the health of our communities is foundational to our Mission and deeply rooted in our heritage and purpose. Our Mission calls us to be steadfast in serving all, with a special focus on our most economically poor and vulnerable neighbors. This core belief drives the programs we build, investments we make, and strategies we implement.

Knowing where to focus our resources starts with our Community Health Needs Assessment (CHNA), an opportunity in which we engage the community every three years to help us identify and prioritize the most pressing needs, assets, and opportunities. The 2019 CHNA was approved by the SJO Community Health Committee on October 30, 2020.

Significant Community Health Needs Prioritized

Through a collaborative process engaging Community Health Committee members and the Director of Community Health Investment, the hospital worked from a list of the seventeen (17) health and social needs identified by data from the Orange County Health Improvement Partnership, 2019 Kaiser Permanente CHNA, 2019 University California, Irvine Medical Center CHNA, CalOptima Member Survey, morbidity and mortality data; and hospital-level data. Staff developed a point system to assign each of the seventeen (17) identified needs to gain perspective and develop a hierarchy of which top needs have the potential to offer the highest impact in the High Desert. Each need was listed, and assessed based on the following:

- Trend over time (Getting "Worse" or "Better")
- Impact on low-income or communities of color ("Very High" to "Very Low")
- Are "High Need Areas" worse off than state averages? ("Yes" or "No")
- Opportunity for Impact ("Low" to "Very High")
- Alignment with System Priorities ("Yes" or "No")
- Community Vital Signs Priority ("Yes" or "No")
- Attorney General Requirement ("Yes" or "No")

Based upon the scoring system and discussion, SJO's Community Health Committee identified the following priorities:

PRIORITY 1: MENTAL HEALTH

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.

PRIORITY 2: HEALTH CARE ACCESS

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.

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 continuing our Mission partnering with like-minded partners that count with the capacity and expertise to address the needs of Orange County Residents by funding other non-profits through our Care for the Poor program managed by Providence St. Joseph Hospital.

Furthermore, Providence St. Joseph Hospital will endorse local non-profit organization partners to apply for funding through the <u>St. Joseph Community Partnership Fund.</u> Organizations that receive funding provide specific services and resources to meet the identified needs of underserved communities throughout SJO'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, SJO 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. SJO donates
 unused food as part of our efforts to address food insecurity.
- Economic Issues: While SJO has not selected economic issues as a top priority, the majority of its
 community benefit programs are targeted to the low-income population. SJO partners with
 Orange County Community Action Partnership, the county anti-poverty agency on several
 initiatives as well as the Intersections Initiative of Central Orange County, a collaborative address
 workforce in low-income areas. SJO 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 SJO participates in local collaboratives that focus on the needs of at-risk youth with a goal to reduce gang involvement and crime.
- **Diabetes**: SJO 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 Director,
 Community Health Investment participates in the Santa Ana Early Learning Initiative which is addressing this issue.
- Environment/Climate: <u>Providence St. Joseph Health has committed to being carbon negative by 2030</u>. This effort will involve all hospital staff.
- Aging Population: While this is not one of the selected priorities, St. Joseph Hospital partners with the Southern California Council on Aging. Over the past two years, St. Joseph Hospital has funded a program that provides isolated, low-income older adults in central Orange County with social service resources and referrals, mental health services, and a volunteer visiting program.

COMMUNITY HEALTH IMPROVEMENT PLAN

Summary of Community Health Improvement Planning Process

Providence St. Joseph Hospital developed a three-year Community Health Improvement Plan (CHIP) to respond to these prioritized needs in collaboration with community partners, considering resources, community capacity, and core competencies.

The 2020- 2022 Community Health Improvement Plan (CHIP) process was impacted 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. 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.

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

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

2021 Accomplishments

COMMUNITY NEED ADDRESSED #1: MENTAL HEALTH & SUBTANCE USE

Initiative Name

Mental Health and Substance Use

Population Served

Communities living in central Orange County

Long-Term Goal(s)/ Vision

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.

Table 2. Strategies and Strategy Measures for Addressing Mental Health

Strate	By	Population Served	Strategy Measure	Baseline	FY21 Accomplishments
1.	Participate in the Be Well Clinical Campus Steering Committee and ensure strong referral protocols are in place to reduce inappropriate ED visits for mental health and substance use and to decrease ED length of stay.	Patients with mental health and substance use disorders	% reduction in ED visits for mental health and substance use	TBD	Be Well Campus opened in 2021.
2.	Implement MAT Program in Emergency Department	Patients with opioid disorder	# of patients receiving MAT services in ED	5	27
3.	Adapt Each Mind Matters Campaign/Promise to Talk in response to COVID-19	Low-income Latinas and their households and Vietnamese community	# of residents active on the EMM/PTT social media site	12,898 in FY20	24,729
4.	Implement Work2BeWell Program	Middle and High School Students	# of schools engaged in Work2Be Well in Central Orange County	0	Postponed to 2021-2022 School Year due to COVID-19
5.	Partner with mental health organizations to advocate for mental health legislation	Persons with mental illness and substance use	# of bills passed	TBD	

Evidence Based Sources

Preventing Drug Use among Children and Adolescents (In Brief) Prevention Principles

https://www.drugabuse.gov/publications/preventing-drug-use-among-children-adolescents/prevention-principles

https://theathenaforum.org/CSAPprinciples

Resource Commitment

\$250,000 to \$300,000 per year for Each Mind Matters, Work2Be Well, Chemical Dependency Counselor and other mental health strategies.

Key Community Partners

Be Well OC; St. Joseph Emergency Medical Group; St. Jude Medical Center, Mission Hospital; PSJH Work2Be Well; Westbound Communications; Orange County Mental Health; St. Jude Neighborhood Health Centers; Santa Ana Unified School District.

2021 Accomplishment

In FY21, the Director of Community Health Investment joined the Be Well Campus Steering Committee and an ad hoc work group focused on addressing challenges in redirecting patients with alcohol and substance use issues to the Be Well campus, which opened in early 2021.

The MAT program was fully implemented in the Hospital's Emergency Department in 2020, serving 27 patients. In FY21, the Chemical Addiction Specialist had 1,492 encounters with patients (ED and Inpatients).

Each Mind Matters campaign was adapted to address the mental health issues created by COVID-19 and pivoted to virtual communication. Preliminary discussions with the Santa Ana Unified School District regarding Work2 Be Well were initiated, but due to COVID-19 the implementation was postponed to the 21/22 school year.

In FY21, St. Joseph Hospital's Women's Services Postpartum Depression Program served 701_unique women and referred a total of 1,882 encounters/sessions.

COMMUNITY NEED ADDRESSED #2: ACCESS TO CARE

Initiative Name

Access to Care Health Care

Population Served

Uninsured and underinsured communities in Central Orange County.

Long-Term Goal(s)/ Vision

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

Table 3. Strategies and Strategy Measures for Addressing Access to Care

Strate	BY	Population Served	Strategy Measure	Baseline	FY21 Accomplishments
1.	Expand health services at La Amistad FQHC	Low-income Uninsured or Underinsured, Medi- Cal	% Increase in visits for primary, dental, vision & mental health	22,204	21,498
2.	Expand Obstetrics Program at La Amistad FQHC	Pregnant women who have Medi-Cal or are low-income	# patients receiving prenatal care visits at La Amistad FQHC	0	77
3.	Integrate virtual visits into clinic operations to reduce barriers to care	Uninsured or Underinsured with low- incomes		0	10,749
4.	Provide ED Navigator to prevent avoidable visits	ED and hospital Medi- Cal patients at St. Joseph Hospital		(~pre- COVID-19) 705	705
5.	Expand Transitional Care Clinic	Uninsured/Underinsured hospital patients who need post-hospital care outpatient visits		495	530
6.	Advocate to expand Medi-Cal to undocumented populations currently not covered	Undocumented immigrants	Passage of expansion of Medi-Cal eligibility for persons who are undocumented	0	1 expansion policy passed by State Legislature effective May 2022

Evidence Based Sources

County Health Rankings and Roadmap: Access to Care-Policies and Programs that Work

Resource Commitment

\$1.4 million in capital and operating support to SJNHC and \$1 million per year for all access initiatives in 2022 and 2023

Key Community Partners

St. Jude Neighborhood Health Centers

2021 Accomplishment

In FY21 COVID-19 required that La Amistad Health Center to pivot to virtual operations and as of the end of FY21 approximately 50% of clinic visits are still virtual. St. Jude Neighborhood Health Center (La Amistad) provided 21,498 primary care, dental, vision and mental health visits to the uninsured and underinsured population of Central Orange County. La Amistad hired a bilingual OBGYN to begin providing prenatal care onsite.

Transitional Care Clinic served approximately 495 patients discharged from the hospital. There is some missing data due to the conversion of electronic medical records (MediTech to Epic) in May 2021 for both hospital and La Amistad. AED Navigator served 705 individuals in the hospital's Emergency Center to access appropriate health coverage and resources. The hospital invested \$1,418,698 in FY21.

COMMUNITY NEED ADDRESSED #3: HOMELESSNESS AND AFFORDABLE HOUSING

Initiative Name

Homelessness and Housing

Population Served

Homeless population and low-income residents in Central Orange County

Long-Term Goal(s)/ Vision

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

Table 4. Strategies and Strategy Measures for Addressing Homelessness and Affordable Housing

Strategy	Population Served	Strategy Measure	Baseline	2021 Accomplishment
1. Train a minimum of 100 additiona housing champion in Central Orange County cities	s	# of housing champions trained in Central Orange County	151	81 Housing Champions from: Anaheim, Costa Mesa, Garden Grove, Huntington Beach, Irvine, Tustin, Orange, Santa Ana.
2. Engage with housing champion in local city housing element public element to promote stronger policies in the 2021- 2028 housing elements that will result in more affordable housing		# of cities with inclusionary housing ordinances and other strong policies promoting affordable housing in Central OC	0	3 cities (Santa Ana, Anaheim, and Irvine) have commitments to conducts studies and come back with recommendations to the City Council on inclusionary housing ordinances in the housing element.
3. Support the approval of affordable	Advocacy with Planning Commissions	# of affordable housing units built by 2023 in Central OC	0	Three projects totaling 183 units

housing projects in the pipeline so that at least 200 new units are built by 2023 in Central Orange County	and City Councils			opened in central OC in FY 21
4. Continue homeless navigation program and implement best practices identified in the region	Chronic homeless	Decrease in administrative/custodial days in homeless patient population	0	70 total days
5. Influence Cal Optima (Cal Aim Program clients) to add additional in lieu services to support the needs of persons experiencing homelessness that are being discharged from the hospital	Cal Optima members who are experiencing homelessness	# of in lieu services provided by Cal Optima for CalAim clients	0	TBD

Evidence Based Sources

Center for Evidenced Based Solutions on Homelessness: Chronic Homelessness www.evidenceonhomelessness.com

Evidence Based Interventions to Address Homelessness; Utah State Legislature Issue Brief 2018

Resource Commitment

\$405,000 is budgeted in 2021 and 2022 to support this effort and our partners, which include one homeless navigator and grants to partner organizations

Key Community Partners

The Kennedy Commission; United Way OC; YIMBY, Habitat for Humanity

2021 Accomplishment

In FY21, 231 housing champions were trained by our partners OC United Way and OC People for Housing, YIMBY and engaged in housing element work to promote stronger policies that will result in affordable housing.

The Homeless Navigator provided services to homeless patients (377 ED patients and 139 Inpatients). The greatest challenge has been identifying appropriate level of care post discharge which impacts the number of custodial days a homeless patients spend in the hospital. From January 2021 to June 2021, we had 70 custodial days for homeless patients. The most common discharge destinations were SNFs, recuperative care facilities, step-down units, County VPS, family/friend and shelters. A regional homeless care navigator work group has been convened to share best practices and collect common metrics. A total of \$551,438 was invested in the homeless and housing initiative in FY21 with 7,880 (3,663 from COGNOS) encounters.

Other Community Benefit Programs

Table 5. Other Community Benefit Programs in Response to Community Needs

	ive (Community d Addressed)	Program Name	Description	Population Served (Low Income, Vulnerable or Broader Community)	FY21 Accomplishments
1.	Access to Dental Services	La Amistad & Puente a la Salud Dental Services (SJNHC)	Provide fixed and mobile comprehensive dental services for adults and children	Low-income	2,137
2.	Access to Vision Services	Puente a la Salud Vision Services (SJNHC)	Provide mobile vision services for adults and children	Low-income	1,718
3.	Access to Health Screening	Taller San Jose Hope Builder Pre-employment Screening Program	Provide pre- employment screening and vaccines to teens and young adults	Low-income	N/A

4.	Transportation	Taxi Vouchers	Provide transportation support to ED indigent population	Low-income	840
5.	Postpartum Services	Post Partum Depression Comprehensive Services	Provide screening and treatment to women	Broader Community	1,882
6.	Postpartum Services	Mother/Baby Assessment Center	Provide physical and psycho-social assessment of mother and baby	Broader Community	3,248
7.	Food Insecurity	Meals on Wheels	Provide meals to seniors and disabled persons	Broader Community	6,469

FY21 COMMUNITY BENEFIT INVESTMENT

In FY21 Providence St. Joseph Hospital invested a total of \$77,191,201 in key community benefit programs. \$76,746,917 was invested in community health programs for the poor. \$8,752,505 in charity care was provided, \$60,310,005 in unpaid cost of Medi-Cal, including the Hospital Quality Assurance Fee Program, and \$444,284 in community benefits for the broader community. The hospital received \$80,079,346 income from the Medi-Cal Hospital Quality Assurance Fee program for FY21. If it was not for the Hospital Quality Assurance Fee received, Unpaid Cost of Medi-Cal would have been \$140,389,351. Providence St. Joseph 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.

FY2021 Providence St. Joseph Hospital (July 1, 2020-June 30, 2021)

CA Senate Bill (SB) 697 Categories	Community Benefit Program Categories	Net Benefit
Medical Care for Vulnerable Populations	Financial Assistance at cost	8,752,505
iviedical care for vullierable Populations		
	Unpaid cost of Medicaid	60,310,005
	Unpaid other govt. programs	
Other Benefits for Vulnerable Populations	Community Health Improvement Services	1,118,698
	Subsidized Health Services	4,919,043
	Cash and In-Kind Contributions	1,401,208
	Community Building	
	Community Benefit Operations	245,458
	Total Benefits for Vulnerable Populations	76,746,917
Other Benefits for the Broader Community Populations	Community Health Improvement Services	12,383
	Subsidized Health Services	0
	Cash and In-Kind Contributions	
	Community Building	162,721
	Community Benefit Operations	
Health Profession Education, Training and Research	Health Professions Education and Research	269,180
	Total Benefits for the Broader Community	444,284
	Total Community Benefit	77,191,201

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

In addition to the financial investments made by the hospital, there are non-quantifiable benefits that are provided by the organization. Going out into the community and being of service to those in need is part of the tradition of our founders and is carried out by our staff and physicians every day.

This was an unprecedented year due to the COVID-19 pandemic. It required many of our programs to pivot their work to provide services virtually. In addition, our Community Health Investment Team provided over 11,000 COVID vaccines in high-risk low-income communities at apartment complexes, mobile home parks, parks, schools, churches and community centers. The hospital provided over 100,000 COVID vaccines to community members at hospital sites.

In addition, hospital leaders serve on the Board of Directors and Advisory Committees of many non-profit organizations, including St. Jude Neighborhood Health Centers, The Cambodian Family Community Center, Community Health Initiative of Orange County, Santa Ana Early Learning Initiative, City of Garden Grove Collaborative, and United Cerebral Palsy of Orange County. In addition, the hospital participates on the County of Orange Health Care Agency Health Improvement Partnership and Co-Chairs the Health Promotion/Disease Prevention Workgroup.

2021 CB REPORT GOVERNANCE APPROVAL

This 2021 Community Benefit Report was adopted by the Community Health Committee of the hospital on October 5, 2021. The final report was made widely available by Jan. 28, 2021.

Ruben A. Smith

Chair, St. Joseph Hospital Community Health Committee

10/ 5/2021 Date

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Providence

At Providence, we use our voice to advocate for vulnerable populations and needed reforms in health care. We are also pursuing innovative ways to transform health care by keeping people healthy, and making our services more convenient, accessible and affordable for all. In an increasingly uncertain world, we are committed to high-quality, compassionate health care for everyone – regardless of coverage or ability to pay. We help people and communities benefit from the best health care model for the future – today.

Together, our 120,000 caregivers (all employees) serve in 52 hospitals, 1,085 clinics and a comprehensive range of health and social services across Alaska, California, Montana, New Mexico, Oregon, Texas and Washington.

Providence across five western states:

- Alaska
- <u>Montana</u>
- Oregon

- Northern California
- Southern California
- Washington

The Providence affiliate family includes:

- Covenant Health in West Texas
- Facey Medical Foundation in Los Angeles, CA.
- Hoag Memorial Hospital Presbyterian in Orange County, CA.
- Kadlec in Southeast Washington
- Pacific Medical Centers in Seattle, WA.
- Swedish Health Services in Seattle, WA.

As a comprehensive health care organization, we are serving more people, advancing best practices and continuing our more than 100-year tradition of serving the poor and vulnerable. Delivering services across seven states, Providence is committed to touching millions of more lives and enhancing the health of the American West to transform care for the next generation and beyond.