Dignity Health Arizona General Hospital Laveen

2022 Community Health Implementation Strategy

Adopted October 2022





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At-a-Glance Summary

Community Served



Dignity Health Arizona General Hospital Laveen (AGHL) is located in Maricopa County, the fourth most populous county in the United States. Maricopa County encompasses 9,224 square miles, includes 27 cities and towns, as well as the whole or part of five sovereign American Indian reservations and it is home to more than 1.3 million Hispanic/Latino individuals; 302,042 African Americans; 233,328 Asian Americans; and 124,128 American Indians. Laveen village is primarily served by AGHL. Laveen has experienced exponential growth and continues to be a diverse community with a population of 47,958 residents in 2019.

During FY20 the primary service area (PSA) for Arizona General Hospital Laveen includes the following top five zip codes that were in the top 75% of patient encounters at AGHL: 85339, 85041, 85301, 85033, and 85338. The target population in the Implementation Strategy plan are the "Broader Community," those "Living in Poverty" and the "Most Vulnerable Population," including persons with disabilities, racial, cultural and ethnic minorities; this corresponds with federal community benefit reporting requirements.

Significant Community Health Needs Being Addressed

The significant community health needs the hospital is helping to address and that form the basis of this document were identified in the hospital's most recent Community Health Needs Assessment (CHNA). Needs being addressed by strategies and programs are:

- Behavioral & Mental Health/ Suicide
- Substance Abuse
- Cancer
- Chronic Disease/ Diabetes/ Cardiovascular Disease/ Obesity/ Oral Health
- Injury Prevention
- Access to Care/ Immunization
- Housing/ Homelessness
- Violence Prevention/ Human Trafficking
- Equity
- Nutrition/ Food Access/ Exercise

Strategies and Programs to Address Needs



Arizona General Hospital Laveen, intends to partner with Mercy Gilbert and Chandler Regional Medical Center to take several actions and to dedicate resources to these needs, including:

Behavioral & Mental Health /Suicide

- Continue to provide access to behavioral health services with national patient safety initiative Zero Suicide.
- Conduct perinatal depression screening during prenatal visit, while inpatient for delivery and at postpartum visit.
- Appoint a certified Community Health Worker (CHW) to coordinate services and referrals to community-based organizations with focus on closed loop referral process.

Substance Abuse

• Identify opportunities to address alcohol and substance abuse and increase support for services focused on vulnerable populations.

Cancer

- Explore opportunities to partner with the MGMC and CRMC cancer clinics nurse navigator.
- Identifying opportunities to partner with the American Cancer Society of Arizona (ACSAz) and provide cancer prevention and early detection programs to the hospital, while overcoming cancer patient transportation needs by utilizing the ACSAz grant funding provided to Dignity Health.

Chronic Disease / Diabetes / Cardiovascular Disease / Obesity / Oral Health

- Support the integration of critical care dental hygienists as part of the ICU teams at MGMC and CRMC.
- Continue to support the growth of the ACTIVATE program services provided to vulnerable patients.
- Increase awareness of the no cost Dignity Health Healthier Living programs offered in English and Spanish instruction.
- Explore local community-based organizations (CBO) programs dedicated to trauma informed nutrition initiatives.
- Collaborate efforts with the hospital's WomenHeart health support group.

Injury Prevention

 Explore opportunities to promote trauma informed programs practices within the care coordination department and community health education and outreach.

Access to Care/Immunization

- Connect the hospital faith community nurse to the immunization program.
- Partner with local CBOs to provide a Dignity Health immunization clinic day.

Housing / Homelessness

- Partner with Maricopa County Affordable Housing Projects.
- Participate in community coalitions exploring opportunities to increase safe, affordable workforce housing in the hospital's primary service area.

Violence Prevention/ Human Trafficking

- Provide funding to CBOs delivering Human Trafficking education and training to local schools, hospitals, care centers, resources centers, etc..
- Explore opportunities to promote trauma informed programs practices within the care coordination department.
- Quarterly department participation in CSH and Dignity Health Human Trafficking Task Force meetings/trainings.

Equity /Health, Social & Racial Equity

- Lead and participate in CommonSpirit Health's (CSH) collective commitment to health equity.
- Support advancing WomenHeart programs for equal access to quality care and provides information and resources to help women take charge of their heart health.
- Participate in Arizona's Health Information Exchange (HIE) to increase social needs screenings for early identification of patients with limited access to care.

Nutrition/ Food Access / Exercise

- Provide financial and in-kind support for local (CBO) efforts to expand healthy food access to low-income residents, such as exploration of Double Up Food Bucks Program.
- Collaborate with a local food bank and the hospital nutrition services to create a food prescription program pilot.
- Collaborate with local CBO to spread awareness of health benefits by participating in Yoga of the Heart and Mommy Fit Camp.

Anticipated Impact



Behavioral & Mental Health/Suicide

- Increase the capacity of health care workers and community organizations who are able to identify behavioral health needs and connect people with services.
- Improve continuum of care models to ensure access and utilization of mental health services.

Substance Abuse

• Increase resilience and support recovery of families affected by substance abuse.

Cancer

- Increased cancer screenings for early detection and health care intervention.
- Improvements in health insurance coverage enrollment and process.
- Increased in healthcare system navigation with utilization of patient navigators.

Chronic Disease/ Diabetes/ Cardiovascular Disease / Obesity/ Oral Health

- Management of chronic conditions.
- Increase disease prevention and health promotion education.
- Increased oral care practices across hospital service lines.

Injury Prevention

• Reduction of patient emergency department visits.

Access to Care/Immunization

 Lowered readmissions and improved use of preventive care due to improved collaboration across healthcare providers and community-based support services.

Housing/ Homelessness

- Reduced percentage of patient readmission to the emergency department by continuing collaborations with local CBO medical clinics for routine health services and needs.
- Continue to collaborate with the ACTIVATE program to resource for the low income, vulnerable patients at time of discharge.

Violence Prevention/ Human Trafficking

• Reduced the percentage of victims who delay obtaining resources and services. Increases the awareness of resources and services offered.

Equity

- Increased education, information and awareness of social, health and racial equity throughout service lines.
- Escalated healthcare system and social needs navigation with utilization of community health workers and promotoras.

• Strengthened women's heart health advocacy, community education and patient support.

Nutrition/ Food Access / Exercise

• Reduction in mortalities and morbidities and an improvement in overall health and well-being of our communities.

Planned Collaboration



AGHL intends to partner with several community-based organizations, Dignity Health Chandler Regional Medical Center and Mercy Gilbert Medical Center to provide connected care to Mesa and the surrounding service area. A full list of partners can be located at

https://www.dignityhealth.org/arizona/locations/chandlerregional/about-us/community-benefit-outreach/benefits-reports

This document is publicly available online at the hospital's website. Written comments on this report can be submitted to the Arizona General Hospital Laveen's Department of Community Health Integration, by e-mail jane.hanson@commonspirit.org to or by phone to (480) 410-4523.

Our Hospital and the Community Served

About the Hospital

Dignity Health Arizona General Hospital Laveen is a part of CommonSpirit Health, one of the largest nonprofit health systems in the U.S., with more than 1,000 care sites in 21 states coast to coast, serving 20 million patients in big cities and small towns across America.

Dignity Health Arizona General Hospital Laveen is a member of Dignity Health, which is a part of CommonSpirit Health. Arizona General Hospital is an acute care hospital in Laveen, Arizona. Spanning 39,000-square-feet, the hospital features 16 inpatient rooms, two state-of-the-art operating rooms for inpatient and outpatient surgical procedures, an emergency department, high complexity laboratory and a full radiology suite offering the latest digital technologies. The hospital is capable of inpatient and outpatient surgical procedures as well as, provide 24/7 access to emergency medical care. At our hospital, you'll find prompt evaluation and treatment by a board-certified physician plus on-site digital X-ray, CT scanner and ultrasound.

Our Mission

The hospital's dedication to assessing significant community health needs and helping to address them in conjunction with the community is in keeping with its mission. As CommonSpirit Health, we make the healing presence of God known in our world by improving the health of the people we serve, especially those who are vulnerable, while we advance social justice for all.

Financial Assistance for Medically Necessary Care

It is the policy of CommonSpirit Health to provide, without discrimination, emergency medical care and medically necessary care in CommonSpirit hospital facilities to all patients, without regard to a patient's financial ability to pay. This hospital has a financial assistance policy that describes the assistance

provided to patients for whom it would be a financial hardship to fully pay the expected out-of-pocket expenses for such care, and who meet the eligibility criteria for such assistance. The financial assistance policy, a plain language summary and related materials are available in multiple languages on the hospital's website.

Description of the Community Served

Dignity Health defines the community served by a hospital as those individuals residing within its Primary and Secondary Service Areas. For this report, the focus will be on the Primary Service Area (PSA) of AGHL. The Primary Service Area includes all residents in a defined geographic area surrounding the hospital and does not exclude low-income or underserved populations. According to the Community Need Index (CNI), a proprietary tool developed by Dignity Health, the primary service area includes both moderate and high-risk areas with significant socio-economic barriers. Zip code areas with the top three highest needs include 85035 Maryvale (Phoenix), 85040 Phoenix and 85051 North Phoenix.

Maricopa County is the fourth most populous county in the United States. Based on 2019 American Community Survey ACS five-year estimates, Maricopa County has an estimated population of over 4.3 million and growing, home to well over half of Arizona's residents. Maricopa County encompasses 9,224 square miles, includes 27 cities and towns, as well as the whole or part of five sovereign American Indian reservations.

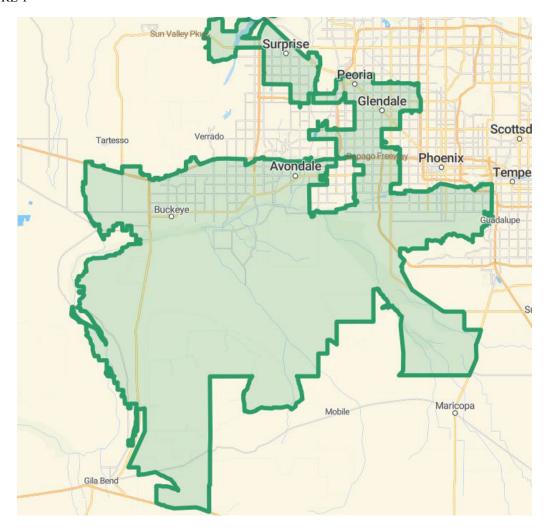


During FY20 the primary service area (PSA) for Arizona General Hospital Laveen includes the following top five zip codes that were in the top 75% of patient encounters at AGHL: 85339, 85041, 85301, 85033 and 85338.

AGHL primarily serves Laveen village for acute care services. Arizona General Hospital is an acute care hospital in Laveen, Arizona. Spanning 39,000-square-feet, the hospital features 16 inpatient rooms, two state-of-the-art operating rooms for inpatient and outpatient surgical procedures, an emergency department, high complexity laboratory and a full radiology suite offering the latest digital technologies. The hospital is capable of inpatient and outpatient surgical procedures as well as, provide 24/7 access to emergency medical care. At our hospital, you'll find prompt evaluation and treatment by a board-certified physician plus on-site digital X-ray, CT scanner and ultrasound.

Figure 1 displays the PSAs serviced by AGHL. For this report, the focus will be on the primary service area of AGHL. The primary service area for AGHL includes the zip codes making up the top 75% of the total patient cases.

FIGURE 1



Laveen's population in 2019 was 47,958 and Laveen Village is made up of predominantly Caucasian/White individuals (53.2%), followed by Latino/Hispanic (40.7%), Black/African American (18.6%), American Indian/Alaska Native (6.8%), Asian (5.7%), and Native Hawaiian and Other Pacific Islander (0.2%). In 2019, the median household income in Laveen Village was \$78,510 with 13.9% living in poverty. The educational attainment in 2019 for Laveen Village were as follows: less than high school graduate (13.6%), high school graduate (28.1%), some college/associate's degree (33.0%) and bachelor's degree (17.0%).

Primary Care Area (PCA) Statistical Profiles are revised annually and provide detailed information on the demographics, health resources, hospital utilization, and health status indicators in defined geographic areas throughout Arizona. According to the Arizona Department of Health Services (ADHS), the Laveen Village PCA has been federally designated as a Medically Underserved Area.

TABLE 1

	AGHL PSA	MARICOPA COUNTY	ARIZONA
Population: estimated 2019	946,688	4,328,810	7,050,299
Gender	2.13/222	.,,	1,000,000
Male	45.4%	49.4%	49.7%
Female	46.6%	50.6%	50.3%
Age			
• 0-9 yrs	16.2%	13.0%	12.6%
• 10-19 yrs	16.1%	13.8%	13.4%
• 20-34 yrs	22.4%	21.3%	20.6%
• 35-64 yrs	35.1%	37.2%	36.3%
• 65-74 yrs	6.3%	13.1%	15.2%
• 75+ yrs	4.0%	1.7%	1.9%
Race			
White	*68.2%	*77.6%	*77.2%
 Asian/Pacific Islander 	*2.9%	*4.2%	*3.3%
Black/African American	*9.6%	*5.6%	*4.5%
 American Indian/Alaska Native 	*2.1%	*2.0%	*4.5%
 Other/Unknown 	*13.4%	*6.7%	*6.5%
Ethnicity			
 Hispanic 	*53.0%	*31.0%	*31.3%
Median Income	\$54,546	\$64,468	\$58,945
Uninsured	13.7%	10.6%	10.4%
Unemployment	6.6%	5.0%	5.9%
No HS Diploma	22.3%	12.3%	12.9%
% of Population 5+ non- English speaking	41.1%	27.0%	27.1%
Renters	*37.8%	*37.8%	*35.6%
CNI Score	4.4	3.4	-
Medically Underserved Area	Yes	-	-

^{*}Source: PolicyMap; Census ACS 2019 5-Year Estimates

Table 1 provides the specific age, sex, race/ethnicity distribution and data on key socio-economic drivers of health status of the population in the AGHL's primary service area compared to Maricopa County and the state of Arizona.

Maricopa County is ethnically and culturally diverse, as it is home to more than 1.3 million Hispanic/Latino individuals; 302,042 African Americans; 233,328 Asian Americans; and 124,128 American Indians. According to the U.S. Census Bureau, 15% percent of the population does not have a high school diploma, 14% are living below the federal poverty level and over 456,584 are uninsured. Laveen village is primarily served by AGHL. Laveen has experienced exponential growth and continues to be a diverse community with a population of 47,958 residents in 2019.

Health needs were identified through the combined analysis of primary and secondary data with four rounds of community input. Primary data sources include the 2019 and 2021 community surveys and

focus groups. Secondary data sources include health and social indicators from local, state, and sources that encompass health outcomes, economic factors, health behaviors, physical environment, and health care. AGHL partnered with MCDPH to recruit members of diverse communities to take the surveys and participate in focus groups. Focus groups included representatives of minority and underserved populations who identified community concerns and assets. Resources potentially available to address identified needs include services and programs available through hospitals, government agencies, and community based-organizations.

Primary Care Area (PCA) Statistical Profiles are revised annually and provide detailed information on the demographics, health resources, hospital utilization, and health status indicators in defined geographic areas throughout Arizona. According to the Health Resources and Services Administration (HRSA), the Chandler PCA has been federally designated as a Medically Underserved Area. Medically Underserved Areas are areas or populations designed by HRSA as having too few primary care providers, high infant mortality, high poverty or a high elderly population.

Community Assessment and Significant Needs

The health issues that form the basis of the hospital's community health implementation strategy and programs were identified in the most recent CHNA report, which was adopted in May 2022. The CHNA contains several key elements, including:

- Description of the assessed community served by the hospital;
- Description of assessment processes and methods;
- Presentation of data, information and findings, including significant community health needs;
- Community resources potentially available to help address identified needs; and
- Discussion of impacts of actions taken by the hospital since the preceding CHNA.



Additional detail about the needs assessment process and findings can be found in the CHNA report, which is publicly available on the hospital's website or upon request from the hospital, using the contact information in the At-a-Glance Summary.

Significant Health Needs

The CHNA identified the significant needs in the table below, which also indicates which needs the hospital intends to address. Identified needs may include specific health conditions, behaviors and health care services, and also health-related social needs that have an impact on health and well-being.

Significant Health Need	Description	Intend to Address?
Mental Health and Suicide	Mental Health includes emotional, psychological, and social well-being, and affects how individuals think, feel, and act. Suicide and suicide attempts cause serious emotional, physical and economic impacts.	\searrow
Substance Use	Substance Use is caused by multiple factors, including genetic vulnerability, environmental stressors, social pressures, individual personality characteristics, and psychiatric problems.	\supset
Cancer	Cancer is a large group of diseases that can start in almost any organ or tissue of the body when abnormal cells grow beyond their usual boundaries to invade adjoining parts of the body and/or spread to other organs.	abla
Chronic Diseases/ Diabetes/ Cardiovascular Disease/ Obesity/ Oral Health	Chronic Diseases are defined broadly as conditions that last 1 year or more and require ongoing medical attention or limit activities of daily living or both. Diabetes is a chronic, metabolic disease characterized by elevated levels of blood glucose (or blood sugar). Cardiovascular Disease is a class of diseases that affect the heart or blood vessels. Obesity is a complex health issue resulting from a combination of causes and individual factors such as behavior and genetics. Oral Health, Oral Diseases ranging from dental cavities to oral cancers.	
Injury Prevention	Injury Prevention is activities to prevent, ameliorate, treat, and/or reduce injury-related disability and death.	\checkmark
Access to Care/ Immunization	Access to Care means having the timely use of personal health services to achieve the best health outcomes. Access to health care consists of four components; coverage, services, timeliness, and workforce. Immunization is a key component of primary health care and is critical to the prevention and control of infectious diseases.	\supset
Housing / Homelessness	Homelessness / Housing social determinant of health due to the range of ways in which a lack of housing, or poor-quality housing.	\vee
Domestic Violence Human Trafficking	Domestic Violence is abuse or aggression that occurs in family relationships Human Trafficking is a crime that involves exploiting a person for labor, services, or commercial sex.	Ŋ
Racial Equity/ Health Equity/ Social Equity	Racial Equity is the systemic fair treatment of all races that produces equitable opportunities and outcomes for all people. Health Equity means that "everyone has a fair and	Y

Significant Health Need	Description	Intend to Address?
	just opportunity to be healthier. This requires removing obstacles to health such as poverty, discrimination, and their consequences, including powerlessness and lack of access to good jobs with fair pay, quality education and housing, safe environments, and health care". Social Equity refers to all people experiencing impartiality, fairness, and justice in their daily lives. Social equity takes into account systemic inequalities to ensure everyone in a community has access to the same opportunities and outcomes.	
Nutrition/ Exercise/ Food Access/	Nutrition, the process of providing or obtaining the food necessary for health and growth. Food Access is an important element of food security, which is having constant access to adequate nutritious food to support healthy eating patterns. Exercise is proven to help prevent and manage noncommunicable diseases such as heart disease, stroke, diabetes, and several cancers. It also can improve physical/mental health, quality of life and well-being.	

2022 Implementation Strategy

This section presents strategies and program activities the hospital intends to deliver, fund or collaborate with others on to address significant community health needs over the next three years, including resources for and anticipated impacts of these activities.

Planned activities are consistent with current significant needs and the hospital's mission and capabilities. The hospital may amend the plan as circumstances warrant, such as changes in community needs or resources to address them.

Creating the Implementation Strategy

The hospital is dedicated to improving community health and delivering community benefits with the engagement of its management team, board, clinicians and staff, and in collaboration with community partners.

Hospital and health system participants included: CommonSpirit Health Community Health Department, Dignity Health East Valley; Community Health, Executive Leadership, Mission Integration, Trauma Services, Maternal Child Health, Care Coordination, Center for Transitional Care and Emergency Departments, Arizona General Hospitals Mesa and Laveen, Director External Affairs and Dignity Health

Foundation - East Valley. The hospital's community health programs involve departments beyond Community Health and Mission in their planning and operation.

Community input or contributions to this implementation strategy included: Dignity Health Arizona

General Community Hospital Board, Community Health Committee (CHC) and Community Grants Committee comprised of members in the community and Dignity Health, community leaders, community educators, program managers from local nonprofit's, Maricopa County Department of Public Health, previously grant funded East Valley and Phoenix Communities of Care and current grantee recipients, East Valley Resource Coalition, FSL and other stakeholders in the service area.



The programs and initiatives described here were selected on the basis of priority as they relate to one or more of

the following principles: focus on disproportionate unmet health-related needs; emphasize prevention including activities that address the social determinants of health; build community capacity; demonstrate collaboration; and contribute to a seamless continuum of care. The strategies identified that address significant needs are achievable through the hospital's capacity to meet the need, available resources, existing hospital services, and collaborative partnerships.

The health needs prioritization process began with an initial review and analysis of primary and secondary data sources. Primary sources included data that was derived from the 2019 and 2021 community survey and focus group sessions. Secondary sources included data that was derived from County inpatient hospitalization, emergency department, and death rates to assemble 12 total health indicators. Compiled primary and secondary data sources were presented at three meetings with the CHC. Data presentations were interactive, embedding virtual polling and breakout sessions which opened an opportunity for the community to share their voices into the refinement and prioritization process of significant health needs for AGHL.

During these meetings the following were examples to aid in consideration of significant health need; trends in data, the population impacted (making special consideration to disparities and vulnerable populations), existing partnerships, available resources, the hospital's level of expertise, existing initiatives (or lack thereof), potential for impact, and the community's interest in the hospital engaging in that health area.

All feedback received from CHC meetings was compiled and evaluated through a health equity lens, which led to the prioritization of ten significant health needs, several of which included multiple sub-priorities. This process can be reviewed in more detail in the CHNA posted at https://www.dignityhealth.org/about-us/community-health/community-health-programs-and-reports/community-health-needs-assessments

Community Health Strategic Objectives

The hospital believes that program activities to help address significant community health needs should reflect a strategic use of resources and engagement of participants both inside and outside of the health care delivery system.

CommonSpirit Health has established four core strategic objectives for community health improvement activities. These objectives help to ensure that our program activities overall address strategic aims while meeting locally-identified needs.



Create robust alignment with multiple departments and programmatic integration with relevant strategic initiatives to optimize system resources for advancing community health.



Scale initiatives that complement conventional care to be proactive and community-centered, and strengthen the connection between clinical care and social health.



Work with community members and agency partners to strengthen the capacity and resiliency of local ecosystems of health, public health, and social services.



Partner, invest in and catalyze the expansion of evidence-based programs and innovative solutions that improve community health and well-being.

Strategies and Program Activities by Health Need

Health Need: Menta	al Health / Suicide					
Anticipated Impact (Goal) Increase in number of individuals who feel confident they can identify signs of mental health crisis and respond appropriately with resources.						
			Strategic	Objectives		
Strategy or Program	Summary Description	Alignment & Integration	Clinical - Community Linkages	Capacity for Equitable Communities	Innovation & Impact	
DH Heaven's Hummingbirds Support Group	MCH Perinatal Bereavement Services care for parents from hospital to home, with trained & certified facilitators grief support.	✓	V	✓	✓	
DH Zero Suicide Initiative	A toolkit with training and utilization of practical framework for hostpial-wide transformation toward safer suicide care.	✓	V	✓	\checkmark	
DH Pregnancy & Postpartum Support Group (PPSG) / Let's Talk	PPSG is a peer based support group that provides a safe, judgment-free place to connect other moms experiencing similar challenges. Let's Talk is a closed perinatal therapeutic group led by a licensed therapist specializing in perinatal mental health. This free group meets for two hours per week for six weeks with the same group of moms.	V	V	Ø	V	
Planned Resources	Resources potentially available to address identified needs include services and programs available through hospitals, government agencies, and community-based organizations.					
Planned Collaborators	AGHL partners with various hospital departments to provide connected care to the Maricopa County community. Arizona General Hospital Laveen's grants and investment programs provide funding to qualifying nonprofits in the local community, resulting in an expanded capacity to address health and social priorities.					



Health Need: Substance Use

Anticipated Impact (Goal)	Provide relevant and timely care for those in need of substance abuse	e recovery.				
			Strategic Objectives			
Strategy or Program	Summary Description	Alignment & Integration	Clinical - Community Linkages	Capacity for Equitable Communities	Innovation & Impact	
Youth Mental Health Coalition	Evidence-based and evidence-informed programming includes culturally inclusive prevention that educates youth.	V		V		
Mesa Prevention Alliance	Empowering Mesa community members' health & substance use awareness through education, advocacy and connection.	Ŋ		\checkmark		
Hushabye Nursery - Peer Support	Peer Support Program, recognizes people with lived/living substance use disorder (SUD) and can provide participants first-hand knowledge of systemic barriers & meaningful coaching work in the area of resilience/coping skills as a means to address and overcome the challenge.	V	N			
Planned Resources	Resources potentially available to address identified needs include services and programs available through hospitals, government agencies, and community-based organizations.					
Planned Collaborators	AGHL partners with various hospital departments to provide connected care to the Maricopa County community. Arizona General Hospital Laveen's grants and investment programs provide funding to qualifying nonprofits in the local community, resulting in an expanded capacity to address health and social priorities.					



Health Need: Cancer

Anticipated Impact (Goal)	Improve education and awareness leading to increased prevention practices and access to resources and support.				
			Strategic	Objectives	
Strategy or Program	Summary Description	Alignment & Integration	Clinical - Community Linkages	Capacity for Equitable Communities	Innovation & Impact
Amanda Hope Rainbow Angels (AHRA)	Supports needs of families impacted by childhood cancer & other life-threatening illnesses through Comfort and Care counseling.	\checkmark		\checkmark	
American Cancer Society / Desert Cancer Foundation Az.	Provides cancer education, screenings, and secures treatment resources and transportation for the uninsured and underinsured.	\checkmark		\checkmark	
DH Cancer Care Clinic	Newly diagnosed cancer patients and their families and/or caregivers receive support to manage appointments, record keeping and communication between providers.	V	\checkmark	V	✓
Planned Resources	Resources potentially available to address identified needs include services and programs available through hospitals, government agencies, and community-based organizations.				
Planned Collaborators	community. Arizona General Hospital Laveen's grants and investme	AGHL partners with various hospital departments to provide connected care to the Maricopa County ommunity. Arizona General Hospital Laveen's grants and investment programs provide funding to qualifying onprofits in the local community, resulting in an expanded capacity to address health and social priorities.			



Health Need: Chronic Diseases/ Diabetes/ Cardiovascular Disease (CVD)/ Obesity/ Oral Health

Anticipated Impact (Goal)	Increase in primary care and clinic use for care of chronic conditions, increase in education prevention efforts.					
			Strategic Objectives			
Strategy or Program	Summary Description	Alignment & Integration	Clinical - Community Linkages	Capacity for Equitable Communities	Innovation & Impact	
DH Yoga of the Heart / WomenHeart Health Support Group	Breathing exercises and meditation, scientifically proven to lower blood pressure, lower blood cholesterol and blood glucose levels, as well as heart rate. WomenHeart Program advocates for equal access to quality care and provides information and resources to help women take charge of their heart health.	V	V	V	✓	
DH Healthier Living Program	Dignity Health's Healthier Living programs instructed in English /Spanish serve participants with chronic conditions and pain, diabetes or fall risk, to self-manage their conditions at no cost.	V		V	V	
DH Chandler Children's Medical and Dental Clinics / First Teeth First (FTF) Program	Dental clinic provides dental exams, dental cleanings, fluoride varnish treatments and oral health education. Medical clinic provides care, well visits, education and resources. Both clinics serve youth 18 and under, currently uninsured. CRMC FTF provides dental screenings, for expecting moms and fluoride varnish and oral health education for kids ages 0-5 in the community, child care centers and medical offices.	V	V	V	abla	
Planned Resources	Resources potentially available to address identified needs include services and programs available through hospitals, government agencies, and community-based organizations.					
Planned Collaborators	community. Arizona General Hospital Laveen's grants and investme	GHL partners with various hospital departments to provide connected care to the Maricopa County ommunity. Arizona General Hospital Laveen's grants and investment programs provide funding to qualifying conprofits in the local community, resulting in an expanded capacity to address health and social priorities.				



Health Need: Injury Prevention

Anticipated Impact (Goal)	CRMC Trauma Injury Prevention and Outreach Education programs increase; survivability & capacity to treat severe hemorrhaging from incidents and teach fall prevention to vulnerable communities & educate the public on the dangers of distracted / impaired driving.					
			Strategic	Objectives		
Strategy or Program	Summary Description	Alignment & Integration	Clinical - Community Linkages	Capacity for Equitable Communities	Innovation & Impact	
DH Stop the Bleed / D4: Dignity Doesn't Drive Distracted	Nationally recognized courses teach hemorrhage control to aid in saving lives. The driving simulation curriculum teaches the dangers of distracted/impaired driving.	V	V	N	V	
DH Matter of Balance program/ Walk with a Doc program	Evidence-based group intervention to reduce fear of falling & increase activity levels for senior citizens. A community based education program incorporates a physician from CRMC to keep the participants active & mobile to limit the risk of falls and injury.	V	V	N	V	
DH Car Seat Clinic and Car Seat donation	Car seat clinics provide education inspection for safe installation. New seats are donated/recommended when need is identified	\checkmark	∀	✓	\checkmark	
Planned Resources	Resources potentially available to address identified needs include services and programs available through hospitals, government agencies, and community-based organizations.					
Planned Collaborators	AGHL partners with various hospital departments to provide connected care to the Maricopa County community. Arizona General Hospital Laveen's grants and investment programs provide funding to qualifying conprofits in the local community, resulting in an expanded capacity to address health and social priorities.					



Health Need: Access to Care / Immunization

Anticipated Impact (Goal)	Increase the patient's ability to continue to receive the care they need within their community. Promote health equity for all across all priorities and significant health needs. To help maintain childhood immunization rates in our community and administer vaccinations to children and adults with emphasis on medically underserved communities and families while providing education and awareness on the importance of immunizations.					
			Strategic	Objectives		
Strategy or Program	Summary Description	Alignment & Integration	Clinical - Community Linkages	Capacity for Equitable Communities	Innovation & Impact	
DH Children's and Adult's Vaccine Program	Provides no cost immunizations for people who are un/underinsured, AHCCCS, American Indian or Alaskan Native. Free clinics are at the Chandler CARE & Gilbert Heritage Center and mobile sites/events throughout the East Valley service areas.	\searrow	\searrow	\searrow	\checkmark	
DH East Valley Community Health Outreach	Based on the significant health/social needs identified in the CHNA programs with a variety of support/resource services to address the social and economic needs of patients.	\searrow	Ŋ	K	\searrow	
DH FSL, ACTIVATE / DH Community Health Worker (CHW)	ACTIVATE, is a patient enrolled program to access medication education for patient and family and follow-up time of discharge. CHW is a patient navigator/link between health/social services and the community to facilitate access to services and improve the quality & cultural competence of service delivery.	V	V	\triangleright	V	
Planned Resources	Resources potentially available to address identified needs include services and programs available through hospitals, government agencies, and community-based organizations.					
Planned Collaborators	community. Arizona General Hospital Laveen's grants and investme	AGHL partners with various hospital departments to provide connected care to the Maricopa County community. Arizona General Hospital Laveen's grants and investment programs provide funding to qualifying nonprofits in the local community, resulting in an expanded capacity to address health and social priorities.				



Health Need: Housing / Homelessness

Anticipated Impact (Goal)	Through internal processes, key stakeholders and partnership with CBOs to create an increased awareness of resources, increase in accessing/connection of workforce development and housing resources connection to community-based services.					
			Strategic	Objectives		
Strategy or Program	Summary Description	Alignment & Integration	Clinical - Community Linkages	Capacity for Equitable Communities	Innovation & Impact	
DH Homeless Initiative / Taxi Vouchers	Care Coordination, Emergency departments and MCH providing clothing, transportation and referrals to needed social services.	\checkmark	\checkmark		V	
Maricopa County Board of Supervisors	Maricopa County will fund the acquisition and rehabilitation of four rental units with a primary focus within the 85201, 85210, 85202, 85203, and 85204 zip codes. The targeted housing units will feature two or three bedrooms, within the City of Mesa.	▽		V	\triangleright	
One Small Step: Clothing Cabin	Connects homeless clients with access to care; mental health resources through case manager. It operates out of Gilbert: Serves all of East Valley. Provides free quality clothing for men, women and children. Back to work program and services; mailbox, storage lockers, laundry, personal hygiene.	V		V		
Planned Resources	Resources potentially available to address identified needs include services and programs available through hospitals, government agencies, and community-based organizations.					
Planned Collaborators	AGHL partners with various hospital departments to provide connect community. Arizona General Hospital Laveen's grants and investme nonprofits in the local community, resulting in an expanded capacity	nt program	ns provide f	unding to qu		



Health Need: Violence / Domestic Violence / Human Trafficking

Anticipated Impact (Goal)	Increase healthcare workforce education to provide trauma informed care for victims of violence and prevent future violence.						
			Strategic Objectives				
Strategy or Program	Summary Description	Alignment & Integration	Clinical - Community Linkages	Capacity for Equitable Communities	Innovation & Impact		
DH Healthy Families Program	License medical social worker screens charts of new high risk mothers of newborns to refer for child abuse prevention programs in the community and provides parenting resources for parents.	\searrow	V	\supset			
DH Human Trafficking Taskforce	Provide health care professionals with tools on how to identify and appropriately assist patients whose health, safety, and well-being may be affected by trafficking or other types of violence.	\searrow	Ŋ		K		
CeCe's Hope Center Community of Care	The collaboration; CeCe's Hope, Project25, Faithful City and Horses Help educate the community about sex trafficking, train law enforcement, identify victims and connect them to services.			\searrow			
Planned Resources	Resources potentially available to address identified needs include services and programs available through hospitals, government agencies, and community-based organizations.						
Planned Collaborators	community. Arizona General Hospital Laveen's grants and investme	AGHL partners with various hospital departments to provide connected care to the Maricopa County ommunity. Arizona General Hospital Laveen's grants and investment programs provide funding to qualifying conprofits in the local community, resulting in an expanded capacity to address health and social priorities.					



Health Need: Equity/ Racial Equity/ Health Equity/ Social Equity

Anticipated Impact (Goal)	Improve access to care and promote health equity for all across all prioritized significant health needs.							
		Strategic Objectives						
Strategy or Program	Summary Description	Alignment & Integration	Clinical - Community Linkages	Capacity for Equitable Communities	Innovation & Impact			
DH WomenHeart Health Support Group	Dedicated to advancing women's heart health through advocacy, community education and patient support. WomenHeart advocates for equal access to quality care and provides information and resources to help women take charge of their heart health.	V	V		V			
DH/CSH Connected Community Network (CCN)	This network uses a trusted community convener, together with a technology platform for referrals and coordination, to connect multiple health plans with community-based organizations providing a range of social services.	V	✓	abla				
DH/SCH Financial Assistance Policy	Providing financial assistance to persons who have health care needs and are uninsured, underinsured, ineligible for a government program, or otherwise unable to pay.	V						
Planned Resources	Resources potentially available to address identified needs include services and programs available through hospitals, government agencies, and community-based organizations.							
Planned Collaborators	AGHL partners with various hospital departments to provide connected care to the Maricopa County community. Arizona General Hospital Laveen's grants and investment programs provide funding to qualifying nonprofits in the local community, resulting in an expanded capacity to address health and social priorities.							



Health Need: Nutrition/ Food Access / Exercise

Anticipated Impact (Goal)	Support community efforts to address nutrition, food access, and exercise through effective service referrals, resource navigation and Community Health department outreach programs.							
		Strategic Objectives						
Strategy or Program	Summary Description	Alignment & Integration	Clinical - Community Linkages	Capacity for Equitable Communities	Innovation & Impact			
Mission of Mercy of AZ	Uninsured and underinsured patients with diabetes will be able to receive comprehensive care via regular medical exams, prescription medications, diabetes education, monitoring of the key indicators of diabetes, and increased access to fresh produce.	V	V	V	\searrow			
DH Mommy Fit Camp	A low to moderate paced exercise class for moms during pregnancy and postpartum. Exercise can be modified to each individual fitness level. Virtual classes are offered.	V			K			
DH Healthy Eating, Active Living HEAL	A seven month program that focuses on making sustainable healthy lifestyle changes. It addresses the key community needs of nutrition, exercise and obesity. Virtual classes are offered.	V			\triangleright			
Planned Resources	Resources potentially available to address identified needs include services and programs available through hospitals, government agencies, and community-based organizations.							
Planned Collaborators	AGHL partners with various hospital departments to provide connected care to the Maricopa County community. Arizona General Hospital Laveen's grants and investment programs provide funding to qualifying nonprofits in the local community, resulting in an expanded capacity to address health and social priorities.							