



Dignity Health Glendale Memorial Hospital

Community Health Implementation Strategy 2017– 2019

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EXECUTIVE SUMMARY

Glendale Memorial Hospital and Health Center (GMHHC) is located in Glendale, California within the county of Los Angeles and serves the greater Glendale community. The total population within the GMHHC service area is 552,535, making up 5.5% of Los Angeles County's population. GMHHC is a 334-bed acute care community hospital offering primary service lines in heart, cancer, orthopedics, women's health, colorectal disease, emergency medicine, and diagnostic imaging services. GMHHC was founded in 1926 as Physicians and Surgeons Hospital by six Glendale community members who had a vision to expand health care services to the residents of south Glendale. The hospital started with 47 beds.

The significant community health needs that form the basis of this report and plan were identified in the hospital's most recent Community Health Needs Assessment (CHNA), which is publicly available at the GMHHC website: "Who We Are—Serving the Community" section of <http://www.dignityhealth.org/glendalememorial>. Additional detail about identified needs, data collected, community input obtained, and prioritization methods used can be found in the CHNA report.

The significant community health needs identified are:

- | | |
|---------------------------|-------------------------------------|
| 1. Mental Health | 6. Cancer |
| 2. Obesity/Overweight | 7. Stroke |
| 3. Substance Abuse | 8. Communicable/Infectious Diseases |
| 4. Diabetes | 9. Sexual Health / STDs |
| 5. Cardiovascular Disease | |

In FY 2017-2019, Glendale Memorial Hospital and Health Center will take numerous actions to help address identified needs. Below are some of our planned community benefit activities:

- Community Grants Program
- 50+ Senior Services
- Breastfeeding Resource Center
- Health Fairs
- Diabetes and Nutrition Program
- Glendale Healthier Community Coalition
- Health Professions Education

This Implementation Strategy was approved by the hospital's community board on November 14, 2017. It is publicly available at GMHHC's website: "Who We Are—Serving the Community" section of <http://www.dignityhealth.org/glendalememorial> and is available upon request. The hospital also shares a summary of this report with the Glendale Healthier Community Coalition.

Written comments on this report can be submitted to Dignity Health Glendale Memorial Hospital and Health Center, c/o Director of Mission Integration, 1420 S. Central Ave., Glendale, CA 91204 or by e-mail to Cassie.McCarty@dignityhealth.org.

MISSION, VISION AND VALUES

Glendale Memorial Hospital and Health Center is a part of Dignity Health, a non-profit health care system made up of more than 60,000 caregivers and staff who deliver excellent care to diverse communities in 21 states. Headquartered in San Francisco, Dignity Health is the fifth largest health system in the nation.

At Dignity Health, we unleash the healing power of humanity through the work we do every day, in hospitals, in other care sites and the community.

Our Mission

We are committed to furthering the healing ministry of Jesus. We dedicate our resources to:

- Delivering compassionate, high-quality, affordable health services;
- Serving and advocating for our sisters and brothers who are poor and disenfranchised; and
- Partnering with others in the community to improve the quality of life.

Our Vision

A vibrant, national health care system known for service, chosen for clinical excellence, standing in partnership with patients, employees, and physicians to improve the health of all communities served.

Our Values

Dignity Health is committed to providing high-quality, affordable healthcare to the communities we serve. Above all else we value:

Dignity - Respecting the inherent value and worth of each person.

Collaboration - Working together with people who support common values and vision to achieve shared goals.

Justice - Advocating for social change and acting in ways that promote respect for all persons.

Stewardship - Cultivating the resources entrusted to us to promote healing and wholeness.

Excellence - Exceeding expectations through teamwork and innovation.

OUR HOSPITAL AND OUR COMMITMENT

Founded in 1926, Glendale Memorial Hospital and Health Center is located at 1420 S. Central Ave., Glendale, CA, 91204. It became a member of Dignity Health in 1998. The facility is an acute care hospital with 334 licensed beds. The hospital resides within the county of Los Angeles and serves the city of Glendale and the surrounding communities of La Crescenta, La Canada/Flintridge, portions of Burbank and northern sections of the greater Los Angeles metropolitan area. During FY17, GMHHC celebrated its ninety-first year of providing quality healthcare. GMHHC has a staff of 1100 employees and we have more than 525 physicians on our Medical Staff. In addition, we have a large team of active volunteers. On any given month, 120 volunteers provide services and support for our hospital, patients, and families. Glendale Memorial Hospital and Health Center Service Lines include:

Heart Center

- Non-invasive Diagnostic Services
- Invasive Interventional Procedures
- Surgical Services
- Vascular Services
- Chest Pain Center
- Cardiac Research Studies
- Cardiac Fitness Center
- Chronic Disease Management Program

Colorectal Surgery Institute

- Screening Services
- Surgical Procedures
- Research and Clinical Trials

Orthopedic and Spine Services

- Surgery of Cervical, Thoracic and Lumbar
- Non-surgical Treatment Options
- Joint replacement and construction
- Foot and ankle repair
- Fracture repair
- Hand and wrist surgery
- Physical and sports medicine and rehabilitation for trauma
- Shoulder and elbow procedures

Cancer Center Services

- Cancer prevention and treatment
- Research and Clinical Trials

Women's Health Services

- Labor & Delivery
- Newborn intensive Care Unit (Level 3)
- Outpatient Perinatal Services

- Breastfeeding Resource Center
- State-approved Prenatal Diagnostic Center

Behavioral Health Unit

Acute Rehabilitation Unit

Minimally Invasive Surgical Services

Emergency Services

Joint Commission Certified Primary Stroke Program

Center for Wound Healing and Hyperbaric Medicine

Rooted in Dignity Health’s mission, vision and values, Glendale Memorial Hospital and Health Center is dedicated to improving community health and delivering community benefit with the engagement of its management team, Community Board, and Mission Council. The council, hospital executive leadership, Community Board, and Dignity Health review community benefit plans and program updates. The board and council are composed of community members who provide stewardship and direction for the hospital as a community resource.

Our hospital leadership is comprised of our Hospital President/CEO, Senior Leadership Team, and our Community Board. The Community Board is made of up to 15 individuals who represent the communities in which we serve. Board representation includes Medical Staff members, community-based organization leaders, and hospital staff. This Board reviews and approves the annual Community Benefit Report and Plan as well as our triennial Community Health Needs Assessment. By assessing community health needs, identified needs of the GMHHC Medical Staff and national trends in healthcare delivery, the Community Board assists the Hospital President and Senior Leadership Team in developing the strategic direction of GMHHC consistent with the needs of the community. In addition, they monitor the implementation of its goals and strategic initiatives. See Appendix A for a roster of FY 2017 Community Board members.

The Director of Mission Integration is the key staff member dedicated to planning and carrying out the community benefit program and tracking. The Director serves on the Executive Board of the Glendale Healthier Community Coalition and engages local not-for-profits through the coalition projects, Community Grants program, and other key projects and events.

GMHHC’s community benefit program includes financial assistance provided to those who are unable to pay the cost of medically necessary care, unreimbursed costs of Medicaid, subsidized health services that meet a community need, and community health improvement services, and health professions education. Our community benefit also includes monetary grants we provide to not-for-profit organizations that are working together to improve health on significant needs identified in our Community Health Needs Assessment. Many of these programs and initiatives are described in this report.

DESCRIPTION OF THE COMMUNITY SERVED

Glendale Memorial Hospital and Health Center serves the city of Glendale and the surrounding communities of La Crescenta, La Canada/Flintridge, portions of Burbank and northern sections of the greater Los Angeles metropolitan area. Dignity Health hospitals define the community they serve as the geographic area served by the hospital. GMHHC has a primary and secondary service area. Our primary service area is the basis for our Community Health Needs Assessment. A summary description of the community is below, and additional details can be found in the CHNA report online.

GMHHC's primary service is the following 17 ZIP Codes:

- Glendale (91201, 91202, 91203, 91204, 91205, 91206, 91207, 91208)
- La Crescenta (91214)
- Los Angeles
 - Hollywood: 90026, 90029
 - Los Feliz: 90027
 - Griffith Park: 90039
 - Eagle Rock: 90041
 - Highland Park: 90042
 - Glassell Park: 90065
- Tujunga 91042

GMHHC's secondary service area includes the following additional 12 ZIP Codes:

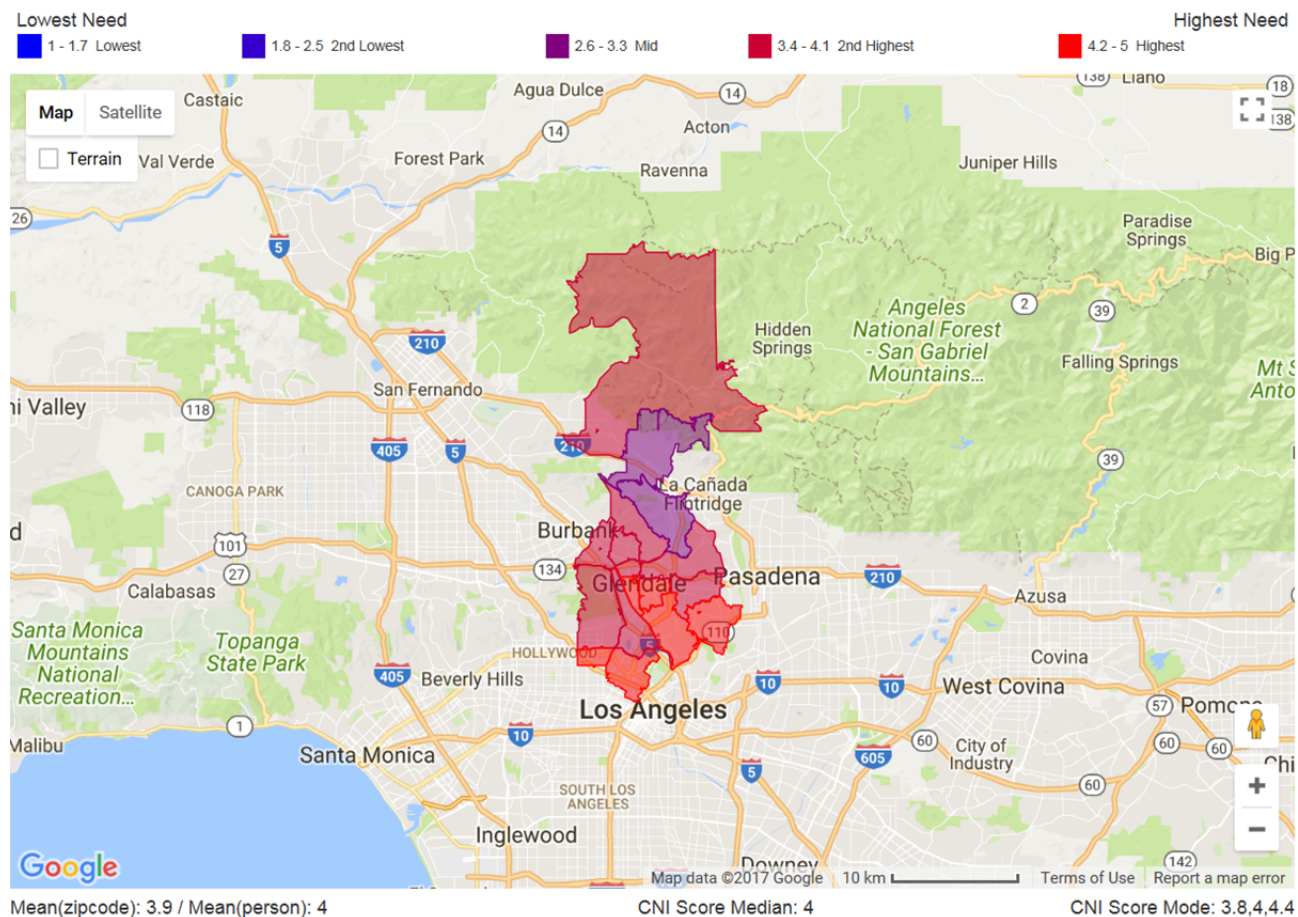
- Burbank (91501, 91502, 91504)
- Los Angeles (90004, 90028, 90031, 90032, 90038)
- North Hollywood (91605, 91606)
- Sunland (91040)
- Sun Valley (91352)

Demographics of the primary service area are from Truven Health Analytics data:

- Population for primary service area: 564,110
- Race
 - White - Non-Hispanic: 42.7%
 - Black/African American - Non-Hispanic: 1.9%
 - Hispanic or Latino: 36.4%
 - Asian/Pacific Islander: 16.2%
 - All others: 2.8%
- Total Hispanic and Race: 100%
- Median Income: \$57,327
- Unemployment: 6.6%
- No High School Diploma: 19.6%
- Medicaid Population*: 34.7%
- Uninsured: 7.6%
- CNI Score: 4.0
- Other hospitals serving the area: Glendale Adventist Medical Center and USC-Keck Verdugo Hills Hospital

- Medically Underserved Area: Yes

* Does not include individuals dually-eligible for Medicaid and Medicare.



Zip Code	CNI Score	Population	City	County	State
90026	4.6	70166	Los Angeles	Los Angeles	California
90027	4	46858	Los Angeles	Los Angeles	California
90029	4.8	39065	Los Angeles	Los Angeles	California
90039	3.8	29183	Los Angeles	Los Angeles	California
90041	3.6	28587	Los Angeles	Los Angeles	California
90042	4.4	65473	Los Angeles	Los Angeles	California
90065	4.2	48059	Los Angeles	Los Angeles	California
91042	4	29042	Tujunga	Los Angeles	California
91201	3.8	23406	Glendale	Los Angeles	California
91202	3.8	24133	Glendale	Los Angeles	California
91203	4	14235	Glendale	Los Angeles	California
91204	4.4	17413	Glendale	Los Angeles	California
91205	4.4	39273	Glendale	Los Angeles	California
91206	3.6	33636	Glendale	Los Angeles	California
91207	3.4	10668	Glendale	Los Angeles	California
91208	2.8	16897	Glendale	Los Angeles	California
91214	2.6	31298	La Crescenta	Los Angeles	California

One tool used to assess health need is the Community Need Index (CNI) created and made publicly available by Dignity Health and Truven Health Analytics. The CNI analyzes data at the zip code level on five factors known to contribute or be barriers to health care access: income, culture/language, education, housing status, and insurance coverage. Scores from 1.0 (lowest barriers) to 5.0 (highest barriers) for each factor are averaged to calculate a CNI score for each zip code in the community. Research has shown that communities with the highest CNI scores experience twice the rate of hospital admissions for ambulatory care sensitive conditions as those with the lowest scores.

IMPLEMENTATION STRATEGY DEVELOPMENT PROCESS

The hospital engages in multiple activities to conduct its community benefit and community health improvement planning process. These include, but are not limited to: conducting a Community Health Needs Assessment with community input at least every three years; using five core principles to guide planning and program decisions; measuring and tracking program indicators and impact; and engaging the Mission Council and other stakeholders in the development of an annual community benefit plan and triennial Implementation Strategy.

Community Health Needs Assessment Process

Our Community Health Needs Assessment is conducted triennially. The most recent CHNA was adopted in November 2016.

For our CHNA, the three Glendale hospitals—Glendale Memorial Hospital and Health Center, Glendale Adventist Medical Center, and USC-Keck Verdugo Hills Hospital—collaborated with the Glendale Healthier Community Coalition, as they have in the past, to work with the Center for Nonprofit Management consulting team in conducting the CHNA.

The CHNA included the collection of over 300 data indicators (secondary data) that helped illustrate the health states of the community. Secondary data were collected from a wide range of local, county, state and national sources to present demographics, mortality, morbidity, health behaviors, clinical care, social and economic factors, and physical environment. These categories are based on the Mobilizing Action Toward Community Health (MATCH) framework, which illustrates the interrelationships among the elements of health and their relationship to each other: social and economic factors, health behaviors, clinical care, physical environmental, and health outcomes. Data available at the ZIP Code level were compiled for the hospital's service area. When not available by ZIP Code, then the data for the appropriate representative portion of the SPA was utilized.

Primary data was also collected. Two community focus groups were held on Tuesday April 5 and Thursday April 7, 2016 and were attended by a total of 48 people, including health care professionals, social service providers, city and public health officials, members from the local police department and other community leaders. Participants were invited by the Glendale Hospital Collaborative, leveraging its extensive networks and relationships within the greater Glendale area and the Glendale Healthier Community Coalition. These stakeholders represented a broad range of geographic, public health, and population interest, in compliance with the ACA. Details on community input and participants can be found in the CHNA report online.

The goal of this component of the CHNA was to identify broad health outcomes and drivers (which, combined are health needs), as well as assets and gaps in resources, through the perceptions and knowledge of varied and multiple stakeholders. To begin to gain a sense for the perceived severity of each health need in the community, participants were asked to rate health outcomes and health drivers in terms of level of severity.

Finally, to help identify health needs, two requirements needed to be met: 1) a health need had to be mentioned in the primary data collection more than once and 2) a secondary data indicator associated

with the need had to perform poorly against a designated benchmark (county averages, state averages, or Healthy People 2020 goals). Once a health need met both requirements, it was designated as an identified health need.

The CHNA is shared with the City of Glendale, Glendale Healthier Community Coalition, and other local government agencies. The CHNA is located on the hospital's website: "Who We Are—Serving the Community" section, <http://www.dignityhealth.org/glendalememorial> and on the Dignity Health website at www.DignityHealth.org.

CHNA Significant Health Needs

Once a list of health needs was developed, a process was completed to prioritize those health needs. A total of 34 community stakeholders convened May 24, 2016 for a Prioritization Forum with the goal of ranking the identified health needs. Many of the forum participants had also attended the focus groups. Participants met in small groups and also participated in a large group discussion for the purposes of reviewing secondary data and data from the focus groups. To capture all groups' observations, each group was given a worksheet to provide input on: geographic areas impacted, specific populations, organizations and programs in the community and gaps in resources. After a large group discussion on their observations, participants were given the opportunity to provide input via voting and completing a survey. They were asked to score each health need based on the following criteria:

- Severity of the health need in the community
- Change over time (improved or gotten worse)
- Availability of community resources
- Community readiness to address the health need

Those who were not able to attend the forum had the opportunity to complete the survey online if they were not able to attend the Prioritization Forum. A total of 33 participants completed the survey in person and 13 online, for a total of 46. The results of the dot-voting process and scores from the surveys were combined to develop a Prioritized Health Needs list.

The following list of nine prioritized health needs from the above-described process:

1. Mental Health

In 2015, adults experienced an average 2.6 unhealthy days resulting from poor mental health – this is similar to that reported for the county (2.3). Psychological distress, anxiety and depression are prevalent within 7.3% to 9.9% of the population in the service area – these percentages are within the range of the County. Two thirds of the population reported receiving adequate social and emotional support (64.0%) in the service area.

2. Obesity/Overweight

In 2011, approximately one in three adults (35.5%) was overweight and one in five adults (20.8%) was obese in the service area – these are both similar to the percentages observed in the County (35.9%, and 23.5%, respectively). A slightly lower percentage of children (ages 0 to 11) were overweight in the service area (12.7%) relative to the County (13.3%); however, more than half (52.0%) of teens (ages 12 to 18) were overweight or obese: this trend is similar to the county (54.8%).

3. Substance Abuse

In 2015, half (55.0%) of adults (18+ years old) in the GMHHC service area reported drinking alcohol at least once in the past month, while 16.2% of adults reported engaging in binge drinking in the past month. In 2015, the percentage of adults who reported misusing prescription drugs in the GMHHC service area (5.7%) was slightly higher than in Los Angeles County (5.5%), as was the percentage of adults who reported using marijuana in the past year (13.4% in the service area, relative to the County). In the service area, 14.5% of teens reported ever trying marijuana, cocaine, sniffing glue or using other drugs.

4. Diabetes

In 2011, 10.2% of adults (over the age of 18) in the GMHHC service area had been diagnosed with diabetes, a similar percentage to Los Angeles County (9.8%). Over two-thirds (69.2%) of the diabetic population had met with their medical provider to develop a diabetes care plan, almost 10% less than in Los Angeles County (77.8%). Diabetes diagnoses in the service area have increased the service area from 9.0% in 2011 to 10.2% in 2015. The hospitalization rate resulting from uncontrolled diabetes in the service area (13.7 per 100,000) was five points higher than that for California (8.6). In Glendale ZIP codes 91201 and 91204, the rate was more than twice the California rate (at 22.6 and 19.4, respectively). This was also the case in 90027—Los Feliz (19.3).

5. Cardiovascular Disease

In 2014, the percentage of the population in the GMHHC service area diagnosed with heart disease (3.3%) was smaller than in Los Angeles County (5.7%). Of those in the GMHHC service area with heart disease, more than half (58.7%) received assistance from a care provider to manage their disease, while an even larger percentage of the population in SPA 4—Metro (61.5%) received assistance from a care provider. In 2012, the hospitalization rate resulting from heart failure was much higher (430.4 per 100,000) persons in the GMHHC service area when compared to California (366.6). The highest heart failure hospitalization rates were reported in Glendale, ZIP codes 91205 (678.1), and 91204 (634.0).

6. Cancer

Of all cancer-related surgeries performed, the top performed at GMMHC are breast (30.5%), colon (29.7%) and rectum (both at 20.3%). Breast cancer and colon cancer are also the top two surgeries performed in Los Angeles County and the state. In 2012, a total of 859 people died from cancer in the GMHHC service area, which represented a quarter (25.3%) of all deaths. This percentage is slightly higher than that reported for and California (23.7%).

7. Stroke

In 2012, the prevalence of strokes experienced by the GMHHC population over the age of 65 (6.4%) was slightly lower than in Los Angeles County (7.1%). In 2012, the stroke mortality rate per 10,000 adults in the GMHHC service area (4.2) was moderately higher than in Los Angeles County (3.5). Several ZIP codes contained much higher rates, including La Crescenta 91214 (6.9), Glendale 91204 (6.5), and Los Feliz (4.9).

8. Communicable/Infectious Diseases

In 2013, the prevalence of Hepatitis B per 100,000 adults in the GMHHC service area (0.5) was slightly similar to that in Los Angeles County (0.6). In total, 16.4% of Hepatitis B cases in Los Angeles County were estimated to have occurred within the GMHHC service area. A total of 662 new Tuberculosis

cases were registered in 2013 in the County. Of those cases, 18.0% are estimated to have emerged in the service area.

9. Sexual Health / STDs

In 2012, the percentage of the population who had more than one sexual partner in the past 12 months was slightly lower in the GMHHC service area (12.8%) than in Los Angeles County (13.2%), but higher than the rest of California (11.3%). A slightly lower percentage of the GMHHC service area population (70.8%) has ever been tested for HIV relative to Los Angeles County (72.9%), and a nearly equal percentage to that of California (70.6%). The rate of chlamydia incidence in the GMHHC service area (474.9) was significantly lower than Los Angeles County (512.9), with SPA 4-Metro (587.7) having rates higher than that of the county. The prevalence of gonorrhea per 100,000 in the GMHHC service area (142.8) was higher than in Los Angeles County (103.4). The rate of HIV hospitalizations per 100,000 people in the GMHHC service area (15.6) was higher than the rate for the state of California (11.0). Within the service area however, ZIP codes such as Los Feliz 90027, East Hollywood 90029 and Atwater Village 90039 had much higher rates (55.4, 44.0 and 35.1) than the rest of the GMHHC service area.

Drivers of health, such as those listed below, are linked with and impact the health of community members. For this reason, drivers were also considered during the health need identification and prioritization process. The following list includes drivers identified in prioritized order:

1. Homelessness and Housing
2. Substance Abuse
3. Poverty
4. Access to Health Care
5. Dental Care
6. Violence/Injury/Safety
7. Preventive Wellness
8. Geriatric Support
9. Transportation

Creating the Implementation Strategy

As a matter of Dignity Health policy, the hospital's community health and community benefit programs are guided by five core principles. All of our initiatives relate to one or more of these principles:

- Focus on Disproportionate Unmet Health-Related Needs
- Emphasize Prevention
- Contribute to a Seamless Continuum of Care
- Build Community Capacity
- Demonstrate Collaboration

In developing the hospital's Community Benefit Plan, the process includes two objectives: 1) The determination of hospital programs and resources that will have the greatest impact on addressing community need; and 2) The identification of potential community partners that have goals and missions aligned with GMHHC and that address identified needs in the CHNA.

To promote effective, sustainable community benefit programming in support of Dignity Health's mission, the Director of Mission, along with members of the Senior Leadership Team and Mission Council (community members are represented in this council), reviewed existing community benefit programs to ensure alignment with information identified in the CHNA.

There are several criteria used to identify community partners and programs that share a spirit of collaboration with GMHHC. The criteria include but are not limited to: resources (i.e. staffing, supplies, and financial assistance), desired outcome, measurable outcome, community needs, and community benefit. Other non-quantifiable factors are considered when selecting a program, such as the benefits of social interaction, support groups, and the overall improvement of community residents.

Several of the health issues identified in the CHNA are addressed in various hospital programs. Note that not all community needs are directly addressed by GMHHC, primarily due to limited resources or an adequate number of community resources currently existing to address those needs. Specifically, this includes the prioritized health need "Sexual Health / STDs."

2017-2019 IMPLEMENTATION STRATEGY

This section presents strategies and program activities the hospital intends to deliver, fund or collaborate with others to address significant community health needs over the next three years. It summarizes planned activities with statements on anticipated impacts, planned collaboration, and patient financial assistance to address access. Program Digests provide detail on select programs' goals, measurable objectives, expenses and other information.

The strategy and plan specifies planned activities consistent with the hospital's mission and capabilities. The hospital may amend the plan as circumstances warrant. For instance, changes in significant community health needs or in community assets and resources directed to those needs may merit refocusing the hospital's limited resources to best serve the community.

Strategy and Program Plan Summary

Health Need: Mental Health			
Strategy or Activity	Summary Description	Active FY17	Planned FY18-19
Behavioral Health Unit	GMMHC continues to strengthen and develop our in-patient mental health services.	☒	☒
Support for veterans and their families	Community grant to Wellness Works. This project provides mental health care to veterans with PTSD, TBI (Traumatic Brain Injury), and/or MST (Military Sexual Trauma), and provides Community Resilience Model (CRM) Training, which enhances a peer-support, self-care model as well as training community members to help provide resiliency techniques to the larger community.	☒	☒
Support for chronically homeless individuals	Community grant to Ascencia. This project provides permanent supportive housing for homeless individuals, which includes providing support for their physical and mental health.	☒	☒
Support for youth	Community grant to Glendale Parks and Open Space Foundation. This project provides physical and mental well-being activities for elementary school children in an underserved population of Glendale.	☒	☒
Support for situationally homeless families	Community grant to Family Promise of the Verdugos. This project will provide support for parents and children as they obtain housing, jobs, and maintain schooling. This will include support for the families for overall mental well-being.	☒	☒
Breastfeeding Resource Center	Our hospital's Breastfeeding Resource Center provides free support to new moms and their infants in the community through group and 1:1 support in English and Spanish. Breastfeeding is linked to a lower risk of post-partum depression.	☒	☒
Anticipated Impact: The hospital's initiatives to address Mental Health are anticipated to result in increased support for the mental well-being of a variety of populations inside and outside of our hospital.			

Health Need: Obesity/Overweight			
Strategy or Activity	Summary Description	Active FY17	Planned FY18-19
Support for seniors	Our hospital offered seniors in our community a walking program called Walk-A-Diles to promote exercise and healthy lifestyles three times a week.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Support for seniors	Our hospital will host weekly Strength Training and Shoa Chi/Yoga Classes to promote exercise and healthy lifestyles.	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Education and screenings for the community	GMHHC participates in community and business sponsored health fairs in the greater Glendale area. We provide information, education and screenings at these events, including BMI screenings.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Support for youth	Community grant to Glendale Parks and Open Space Foundation. This project provides physical and mental well-being activities for elementary school children in an underserved population of Glendale. This includes BMI screenings before and after to measure progress of weight loss.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Anticipated Impact: The hospital's initiatives to address Obesity/Overweight are anticipated to result in increased education and improved fitness for youth and seniors in our community.			

Health Need: Substance Abuse			
Strategy or Activity	Summary Description	Active FY17	Planned FY18-19
Support for chronically homeless individuals	Community grant to Ascencia. This project provides permanent supportive housing for homeless individuals, which includes providing support and education for clients who abuse substances.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Anticipated Impact: The hospital's initiatives to address Substance Abuse are anticipated to result in increased education and healing for those who struggle with substance abuse in our community.			

Health Need: Diabetes			
Strategy or Activity	Summary Description	Active FY17	Planned FY18-19
Disease management education for patients	Our hospital offers an outpatient Diabetes and Nutrition Program (diabetes self-management course) that entails 4 sessions of 2 hour classes over 4 weeks. We offer this course in English and Spanish.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Education for the community	GMHHC participates in community and business sponsored health fairs in the greater Glendale area. We provide information and education regarding diabetes at these events.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

Breastfeeding Resource Center	Our hospital's Breastfeeding Resource Center provides free group and 1:1 support to new moms and their infants in the community in English and Spanish. The short-term and long-term benefits of breastfeeding for mother and child are well documented (e.g., for mother—breastfeeding linked to a lower risk of these types of health problems: Type 2 diabetes, breast cancer, cervical cancer, and post-partum depression; for baby—breastfeeding linked to lower risk of Type 1 & 2 Diabetes, childhood leukemia, lower respiratory infections, asthma, and obesity).	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Support for chronically homeless	Community grant to Ascencia. This project provides permanent supportive housing for homeless individuals, which includes providing support and education for clients with diabetes.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Anticipated Impact: The hospital's initiatives to address Diabetes are anticipated to result in increased education, disease management, and lower risk of diabetes in various populations in our community.			

Health Need: Cardiovascular Disease			
Strategy or Activity	Summary Description	Active FY17	Planned FY18-19
Support for seniors	Our hospital offered seniors in our community a walking program called Walk-A-Diles to promote exercise and healthy lifestyles three times a week.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Support for seniors	Our hospital will host weekly Strength Training and Shoa Chi/Yoga Classes to promote exercise and healthy lifestyles.	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Education for the community	GMHHC participates in community and business sponsored health fairs in the greater Glendale area. We provide information, education, and screenings at these events, in particular carotid screenings.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Support for chronically homeless	Community grant to Ascencia. This project provides permanent supportive housing for homeless individuals, which includes providing support and education for clients with cardiovascular disease.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Anticipated Impact: The hospital's initiatives to address Cardiovascular Disease are anticipated to result in increased education and disease management for various populations in our community.			

Health Need: Cancer			
Strategy or Activity	Summary Description	Active FY17	Planned FY18-19
Support for seniors	Our hospital provided a lecture regarding colorectal cancer and how to steps to avoid this type of cancer through diet.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Support for seniors	Our hospital will provide a lecture on cancer (topic TBD).	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Anticipated Impact: Anticipated Impact: The hospital's initiative to address Cancer is anticipated to result in increased education and awareness for seniors in our community.			

Health Need: Stroke			
Strategy or Activity	Summary Description	Active FY17	Planned FY18-19
Disease management education for patients	Our hospital offers a program to provide assistance in disease management for our patients through continued education and a Stroke Support Group.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Anticipated Impact: The hospital's initiative to address Stroke are anticipated to result in increased education and disease management for various populations in our community.			

Health Need: Communicable/Infectious Diseases			
Strategy or Activity	Summary Description	Active FY17	Planned FY18-19
Support for seniors	Our hospital provided a lecture to seniors regarding possible sources of infection in healthcare and ways to prevent them.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Anticipated Impact: The hospital's initiative to address Communicable/Infectious Diseases are anticipated to result in increased education and awareness for seniors in our community.			

Anticipated Impact

The anticipated impacts of the hospital's activities on significant health needs are summarized above, and for select program initiatives are stated in the Program Digests on the following pages. Overall, the hospital anticipates that actions taken to address significant health needs will: improve health knowledge, behaviors, and status; increase access to needed and beneficial care; and help create conditions that support good health. The hospital is committed to measuring and evaluating key initiatives. The hospital creates and makes public an annual Community Benefit Report and Plan, and evaluates impact and sets priorities for its community health program in triennial Community Health Needs Assessments.

Planned Collaboration

GMHHC will partner with the Glendale Healthier Community Coalition (GHCC), as well as the lead organizations that have been awarded community grants and their partnering organizations. Most of the organizations participating in our community grant program are also members of the Glendale Healthier Community Coalition. In addition, we will continue to partner with local city leaders through our work with the GHCC.

Financial Assistance for Medically Necessary Care

Glendale Memorial Hospital and Health Center delivers compassionate, high quality, affordable health care and advocates for members of our community who are poor and disenfranchised. In furtherance of this mission, the hospital provides financial assistance to eligible patients who do not have the capacity to pay for medically necessary health care services, and who otherwise may not be able to receive these services. A plain language summary of the hospital's Financial Assistance Policy is in Appendix C.

The hospital notifies and informs patients and members of the community about the Financial Assistance Policy in ways reasonably calculated to reach people who are most likely to require patient financial assistance. These include:

- providing a paper copy of the plain language summary of the Policy to patients as part of the intake or discharge process;
- providing patients a conspicuous written notice about the Policy at the time of billing;
- posting notices and providing brochures about the financial assistance program in hospital locations visible to the public, including the emergency department and urgent care areas, admissions office and patient financial services office;
- making the Financial Assistance Policy, Financial Assistance Application, and plain language summary of the Policy widely available on the hospital's web site;
- making paper copies of these documents available upon request and without charge, both by mail and in public locations of the hospital; and
- providing these written and online materials in appropriate languages.

Program Digests

The following pages include Program Digests describing key programs and initiatives that address one or more significant health needs in the most recent CHNA report. The digests include program descriptions and intervention actions, statements of which health needs are being addressed, any planned collaboration, and program goals and measurable objectives.

50+ Senior Services	
Significant Health Needs Addressed	<input type="checkbox"/> Mental Health <input checked="" type="checkbox"/> Obesity/Overweight <input type="checkbox"/> Substance Abuse <input type="checkbox"/> Diabetes <input checked="" type="checkbox"/> Cardiovascular Disease <input checked="" type="checkbox"/> Cancer <input type="checkbox"/> Stroke <input checked="" type="checkbox"/> Communicable/Infectious Diseases <input type="checkbox"/> Sexual Health / STDs
Core Principles Addressed	<input type="checkbox"/> Focus on Disproportionate Unmet Health-Related Needs <input checked="" type="checkbox"/> Emphasize Prevention <input type="checkbox"/> Contribute to a Seamless Continuum of Care <input type="checkbox"/> Build Community Capacity <input type="checkbox"/> Demonstrate Collaboration
Program Description	<p>The major components of our hospital's senior services are comprised of the 50+ membership program which offers:</p> <ul style="list-style-type: none"> • Education <ul style="list-style-type: none"> ○ Free monthly health related education lectures specifically targeted for seniors ○ AARP Mature Driving Class • Promotion of physical, mental, and social well-being through exercise classes.

Community Benefit Category	A1—Community Health Education
Planned Actions for 2017 - 2019	
Program Goal / Anticipated Impact	Increase health awareness and screenings for seniors in our community.
Measurable Objective(s) with Indicator(s)	Increase membership and promote new Strength Balance/Shao Chi exercise class.
Intervention Actions for Achieving Goal	Schedule monthly senior lectures, schedule weekly exercise class, attend 4 health fairs to provide education and screenings
Planned Collaboration	Community Health Manager to continue collaborating with local senior centers.

Health Fairs	
Significant Health Needs Addressed	<input type="checkbox"/> Mental Health <input checked="" type="checkbox"/> Obesity/Overweight <input type="checkbox"/> Substance Abuse <input checked="" type="checkbox"/> Diabetes <input checked="" type="checkbox"/> Cardiovascular Disease <input type="checkbox"/> Cancer <input type="checkbox"/> Stroke <input type="checkbox"/> Communicable/Infectious Diseases <input type="checkbox"/> Sexual Health / STDs
Core Principles Addressed	<input type="checkbox"/> Focus on Disproportionate Unmet Health-Related Needs <input checked="" type="checkbox"/> Emphasize Prevention <input type="checkbox"/> Contribute to a Seamless Continuum of Care <input type="checkbox"/> Build Community Capacity <input checked="" type="checkbox"/> Demonstrate Collaboration
Program Description	GMHHC participates in community and business sponsored health fairs in the greater Glendale area. We provide information, education and screenings at these events.
Community Benefit Category	A1—Community Health Education
Planned Actions for 2017 - 2019	
Program Goal / Anticipated Impact	Continue providing access to screenings and health-related education for community members in the greater Glendale area.
Measurable Objective(s) with Indicator(s)	Attend 4 health fairs.
Intervention Actions for Achieving Goal	Provide information, education and screenings
Planned Collaboration	Our Manager of Community Health will collaborate with community organizations and businesses.

Community Grants	
Significant Health Needs Addressed	<input checked="" type="checkbox"/> Mental Health <input checked="" type="checkbox"/> Obesity/Overweight <input checked="" type="checkbox"/> Substance Abuse

	<ul style="list-style-type: none"> ✓ Diabetes ✓ Cardiovascular Disease □ Cancer □ Stroke □ Communicable/Infectious Diseases □ Sexual Health / STDs
Core Principles Addressed	<ul style="list-style-type: none"> ✓ Focus on Disproportionate Unmet Health-Related Needs ✓ Emphasize Prevention ✓ Contribute to a Seamless Continuum of Care ✓ Build Community Capacity ✓ Demonstrate Collaboration
Program Description	The objective of Dignity Health Community Grants Program is to award grants to nonprofit (501c (3) organizations (excluding hospitals) whose Accountable Care Community proposal responds to the Dignity Health Glendale Memorial Hospital's strategic priorities identified in the most recent Community Health Needs Assessment and the community benefit plan. In addition, programs will be evaluated for the five Dignity Health Community Benefit Principles of serving disenfranchised populations with unmet health needs, primary prevention, seamless continuum of care, community capacity building, and collaborative governance. Dignity Health grants funds are to be used to provide services to underserved populations.
Community Benefit Category	E2—Grants
Planned Actions for 2017 - 2019	
Program Goal / Anticipated Impact	Increase education, disease management, prevention, and well-being of community members.
Measurable Objective(s) with Indicator(s)	<ul style="list-style-type: none"> • 60% reduction in ED visits by housed patients (chronically homeless) connected to a Health Home/Primary Care. • 90% or more situationally homeless families move back into sustainable housing. • 75% of students in afterschool program will lose weight. • Oral Health Literacy raised for Teachers, case managers, caregivers, parents, and students/children (2080 individuals impacted) • Increase in financial literacy /economic empowerment among veterans.
Intervention Actions for Achieving Goal	<ul style="list-style-type: none"> • Provide permanent supportive housing for 10 chronically homeless individuals. • Provide case management to situationally homeless families. • Provide fitness activities and nutrition education to youth. • Provide oral health screenings and interventions to youth. • Provide financial literacy classes to veterans.
Planned Collaboration	Glendale Memorial will provide grant funding and collaborate with the following lead applicants: Ascencia, Family Promise of the Verdugos, Glendale Parks & Open Space Foundation, Kids' Community Dental Clinic and Wellness Works.

Breastfeeding Resource Center	
Significant Health Needs Addressed	<ul style="list-style-type: none"> ✓ Mental Health ❑ Obesity/Overweight ❑ Substance Abuse ✓ Diabetes ❑ Cardiovascular Disease ❑ Cancer ❑ Stroke ❑ Communicable/Infectious Diseases ❑ Sexual Health / STDs
Core Principles Addressed	<ul style="list-style-type: none"> ❑ Focus on Disproportionate Unmet Health-Related Needs ✓ Emphasize Prevention ❑ Contribute to a Seamless Continuum of Care ❑ Build Community Capacity ❑ Demonstrate Collaboration
Program Description	<p>GMHHC's Breastfeeding Resource Center has trained certified lactation educators to assist new mothers with breastfeeding needs and assess the mother/baby dyad to ensure that the baby is breastfeeding effectively. All women in the community are invited to participate, whether or not their baby was delivered at GMHHC. In particular, many low-income women have limited or no access to breastfeeding support and education, and we want to make our resources available to them. The short-term and long-term benefits of breastfeeding for mother and child are well documented (e.g., for mother—breastfeeding linked to a lower risk of these types of health problems: Type 2 diabetes, breast cancer, cervical cancer, and post-partum depression; for baby—breastfeeding linked to lower risk of Type 1 & 2 Diabetes, childhood leukemia, lower respiratory infections, asthma, and obesity). We encourage the mother to follow up with the Breastfeeding Resource Center after 48-72 hours after hospital discharge to decrease NICU admission for hyperbilirubinemia /jaundice or dehydration. The Breastfeeding Resource Center and follow-up provides: three breastfeeding consultations up to the baby's 6 weeks of discharge. The visit includes outpatient one on one lactation consultation and follow up if necessary to support breastfeeding and nursing mothers in the community, including weekly breastfeeding support group meetings ("Nursing Mothers Circle") and telephone support.</p>
Community Benefit Category	A1—Community Health Education
Planned Actions for 2017 - 2019	
Program Goal / Anticipated Impact	<ul style="list-style-type: none"> • Continue to market our free Breastfeeding support group and classes. • Increase numbers of pregnant women attending the BF classes. • Nurture a free Spanish-speaking weekly support group. • Community awareness that Breastfeeding Consultations and Breast pump purchase assistance is now available through most Health Insurance Plans. • Market our free hot line, classes and support group to surrounding clinics in the community.
Measurable Objective(s) with Indicator(s)	<ul style="list-style-type: none"> • Track patients satisfaction with overall breastfeeding support and education provided.

	<ul style="list-style-type: none"> Track number of mothers attending the Breastfeeding Support Group and monitor their overall satisfaction with the services provided.
Intervention Actions for Achieving Goal	<p>Continuing</p> <ul style="list-style-type: none"> Free weekly support group. Free Breastfeeding Hot line. Free Breastfeeding Classes in English and Spanish. Free Lactation Support in the hospital.
Planned Collaboration	Working with Director of Breastfeeding Promotion at WIC, she has generously donated time to visit physician offices to give free Breastfeeding Education to their staff. In addition, work with City of Glendale to promote Breastfeeding Resource Center through resource pamphlets.

APPENDIX A: COMMUNITY BOARD

John Cabrera, MD
Hospital physician

Greg Fish
Chief, Glendale Fire Department

Robert Gall, MD (*Board Chair*)
Hospital physician

Silva A. Gasparian, PharmD
Pharmacist, Memorial Medical Pharmacy

Vince Hambright
President/COO, Rockport Healthcare Services

Jacob Lee
COO/General Counsel, HYI

Patrick Liddell, Esq
Attorney at Law, Melby & Anderson LLP

Jack Ivie (FY17) / Julie Sprengal (FY18-19) (*ex officio*)
CEO/President

Rob Mikitarian
President, Burbank Home Health Care

Carl Povilaitis
Deputy Chief, Glendale Police Department

Frank Quintero
Former City of Glendale Mayor

Randy Roberts, MD
Hospital Chief of Staff

Teresa Swida, DO
Hospital physician

Petar Vukasin, MD
Hospital physician

Roberto Zarate
Owner, Tinto Restaurant

APPENDIX B: OTHER PROGRAMS AND NON-QUANTIFIABLE BENEFITS

The hospital delivers a number of community programs and non-quantifiable benefits in addition to those described elsewhere in this report. Like those programs and initiatives, the ones below are a reflection of the hospital's mission and its commitment to improving community health and well-being.

GMHHC is proud to support Health Professions Education through our clinical rotations for ultrasound and X-ray students which provided training for over 375 students in our community in FY17. We will continue to provide these clinical rotations in our on-going efforts to build community capacity.

GMHHC also provides leadership and support to a key organization which supports a healthier Glendale community. The Glendale Healthier Community Coalition (GHCC), comprised of key community leaders representing local community agencies and Glendale's hospitals, was created by Glendale's three hospitals and has now successfully worked on many high-profile community-wide projects for more than 20 years (since 1994). These include the birth of Glendale Healthy Kids; the city's Quality of Life Indicators; and healthcare projects serving the homeless, as well as collaborating every three years on the comprehensive Community Health Needs Assessment. As an indication of GMHHC's commitment to the GHCC, the Director of Mission Integration serves on the Executive Board of the GHCC. In FY17, GMHHC continued to support the efforts of the coalition, in particular its collective impact initiative, "We Own the Health of Our Community" which began the fall of 2015. This collective impact initiative focused on our fourth greatest health need identified in our 2016 CHNA—diabetes—by bringing together the coalition members, as well as the Chamber of Commerce and city officials, and inviting 100 employers in Glendale to improve the health of those who live and work in Glendale. Working together on a collective impact initiative means we can accomplish goals that none of us can achieve alone. For FY18, the collective impact initiative will change its focus to mental health, substance abuse, and homeless, identified in our 2016 CHNA as health outcomes and/or health drivers.

The collective impact initiative includes the following goals:

- Add to/modify/affirm each organization's Mission, Vision, Values statement so as to reflect our commitment to the health of our employees/membership/customers, and which reflects participating in the "We Own the Health of Our Community" initiative;
- Add to/modify/affirm organizational goals and objectives to reflect participating in the initiative;
- Add to/ modify/affirm job description functions of key leaders/staff to support the initiative;
- Report/ share information with our community about action plans that we develop to support the initiative;
- Nominate other organizations for participation in the initiative; and
- Participate, when requested, in responding to public relations communications and media inquiries in support of the "We Own the Health of Our Community" initiative.

APPENDIX C: FINANCIAL ASSISTANCE POLICY SUMMARY

Dignity Health's Financial Assistance Policy describes the financial assistance programs available to uninsured or under-insured patients who meet certain income requirements to help pay for medically necessary hospital services provided by Dignity Health. An uninsured patient is someone who does not have health coverage, whether through private insurance or a government program, and who does not have the right to be reimbursed by anyone else for their hospital bills. An underinsured patient is someone who has health coverage, but who has large hospital bills that are not fully covered by their insurance.

Free Care

- If you are uninsured or underinsured with a family income of up to 200% of the Federal Poverty Level you may be eligible to receive hospital services at no cost to you.

Discounted Care

- If you are uninsured or underinsured with an annual family income between 200-350% of the Federal Poverty level, you may be eligible to have your bills for hospital services reduced to the highest amount reasonably expected to be paid by a government payer, which is usually the amount that Medicare would pay for the same services.
- If you are uninsured or underinsured with an annual family income between 350-500% of the Federal Poverty level you may be eligible to have your bills for hospital services reduced to the Amount Generally Billed, which is an amount set under federal law that reflects the amount that would have been paid to the hospital by private health insurers and Medicare (including co-pays and deductibles) for the medically necessary services.

If you are eligible for financial assistance under our Financial Assistance Policy you will not be required to pay more than the Amount Generally Billed described above. If you qualify, you may also request an interest-free extended payment plan. You will never be required to make advance payment or other payment arrangements in order to receive emergency services.

Free copies of the hospital's Financial Assistance Policy and financial assistance application forms are available online at your hospital's website listed below or at the hospital Admitting areas located near the main entrance. (Follow the signs to "Admitting" or "Registration"). Copies of these documents can also be mailed to you upon request if you call Patient Financial Services at the telephone number listed below for your hospital.

Traducción disponible: You may also obtain Spanish and other language translations of these documents at your hospital's website, in your hospital's Admitting area, or by calling your hospital's telephone number.

Dignity Health Financial Counselors are available to answer questions, provide information about our Financial Assistance Policy and help guide you through the financial assistance application process. Our staff is located in the hospital's Admitting area and can be reached at the telephone number listed below:

Financial Counseling: 818-502-2305

Patient Financial Services: 888-488-7667

www.dignityhealth.org/glendalememorial/paymenthelp