The depth of our roots, the reach of our branches

During this season of transformation, we pause to appreciate who we are in this precious, present moment. We are a ministry with roots that plunge deep into the soil, creating stability and sustainability. Our roots reflect the heritage of our foundresses and the faith that sustained them. Our roots run deep in the communities where our care centers are located and in the spiritual lives of our many co-workers who serve side by side.

From these roots have sprung ever-broadening branches of care. First with clinics and hospitals and now with physician practices, business centers, and ambulatory care sites of many types, the reach of our ministry has continued to expand to respond to the world around us. We reach to those who are vulnerable and those who are invisible or at risk; we reach into innovative technologies and ways of providing care.

“I knew, of course, that trees and plants had roots, stems, bark, branches and foliage that reached up toward the light. But I was coming to realize that the real magician was light itself.” – Edward Steichen, photographer

Our guiding light is the healing ministry of Jesus which both sustains and illuminates our mission. As we move into a possible new extension of this ministry, we again treasure the roots that allow us to take risks, the branches that will support our continued flowering, and the light that provides for our ongoing health.
Message from Elizabeth Keith, EVP Sponsorship and Mission Integration

Shaping new ministries to promote healthy communities

This past year has been full of possibility and progress – a reminder of the rich tradition that has sustained Dignity Health throughout our history. Our Catholic tradition is traced back two thousand years and is expressed daily in the compassionate touch of our caregivers, the thoughtful stewardship of our business leaders, and the committed work of every one of our partners in this healing ministry.

This may be the last Mission Integration Annual Report for Dignity Health as we now know it. At this moment, we are on the cusp of aligning the ministries of Dignity Health and Catholic Health Initiatives. A new combined ministry will be designed with transformational strategies to advance a newly articulated mission through healthy populations. It is an exciting moment in Catholic health care within the United States.

Mission Integration has been transforming itself in preparing for what might be. First, we have continued to strengthen our service area mission integration teams, relying on the Mission Integration Standards to inform operations in both our care and business centers. Second, we have given specific shape to Ministry Formation programs and broadened our capacity to assure that formation is available to all staff throughout the system. Third, we have expanded how Community Health collaborates with Population Health in supporting healthier communities, creating sustainability, and renovating the provision of health care.
Our transformation is designed to:

- create strong, innovative, and aligned mission integration operations
- shape the way we serve through individual formation and organizational change
- build healthy communities by addressing the social determinants of health and sustainability

This report will describe in more detail how we have achieved the goals set forth in last year’s annual report. The information is organized around our current Mission Integration Standards; you will read more about the organic growth of our work. This work is possible because of the heritage on which we stand. That heritage is both timeless and fully present to the times in which we find ourselves, inviting ever new expressions of faithfulness. It is deeply rooted in the healing ministry of Jesus and spreads to include ever-expanding groups of those for whom Jesus cared most explicitly. Whatever we are called to do in the future will only be possible because of the sustenance that comes from our past. It is only from our roots that we reach toward the heavens and spread upon the earth.

Peace and Blessings,

[Signature]
Organizational Identity

Our heritage roots us in clarity of purpose

So our future may blossom with compassion and humankindness
Mission Integration’s Structure

2018 GOAL  Continue mission integration organizational restructure guided by Horizon 2020 Acceleration principles and goals.

ACHIEVEMENT  Reviewed mission staffing in all eight service areas, filled vacancies according to a core and common set of job descriptions, and developed an integral approach to mission leadership that encompasses hospital, ambulatory, and business office settings and concerns.

Working closely with the leadership of our strategic plan - Horizon 2020 Acceleration - mission integration extended its operational focus by further developing a service area-based approach to mission leadership across the organization. Mission leaders within each service area began to meet as teams, become more agile in staffing across facilities, and developed service area awareness of mission and values operations, spiritual care, ethics, and community health needs and concerns. Mission leadership gaps in each area were assessed and addressed, including the appointment of a system mission leader to oversee ambulatory care and system office mission operations. While designed to maximize leadership efficiencies with an eye to cost-saving and stewardship, attention to the particular gifts and subject matter expertise of each mission leader guided customized development plans. As we approach the combined Dignity Health/Catholic Health Initiatives ministry on the near horizon, the knowledge of current mission leaders’ strengths and aspirations is an invaluable asset.

Ritual grounds the work of restructure.
Mission Integration Education

2018 GOAL  Dignity Health leaders will understand, articulate, and demonstrate through words and actions the mission, vision, and values of Dignity Health.

ACHIEVEMENT  Educated Dignity Health service area and care center leaders (directors and above), with materials co-developed by mission integration and ministry formation.

As its first system wide strategic effort, the mission integration operations leadership council, consisting of senior system mission leaders and the eight service area vice presidents of mission, crafted a common goal to provide high quality, succinct mission integration educational experience and materials for service area, hospital and non-acute care center leaders. Intended to help leaders understand, articulate, and demonstrate Dignity Health’s mission and core values, the hope is that leaders will grow in their ability to model our mission, vision, and values as they lead through communication, decision-making and interpersonal behaviors. Attendance at the sessions was tracked as a dimension of leadership expectations for 2018; 99% of facility leaders participated in this quarterly education.

PARTICIPANT RESPONSES TO “WHAT PART OF THE HISTORY AND IDENTITY SESSION DID YOU MOST RELATE TO?”

“Even though we have religious and community based facilities, all our work is done with the purpose of serving God’s call to serve those who are poor and needy.”

“Knowing what your ‘why’ is and how that impacts your role within the health care industry.”

“The empowerment of women to take on challenges and find creative solutions. To love everyone no matter their background, race, religion, or life choices.”

“The ‘roll up your sleeves and do the work’ diligence; belief in the greater good to do greater good.”

“Selfless delivery of mission and values.”
Deepening the Roots of Collaboration

Our value of collaboration is expressed in a variety of ways. From 1:1 consultations to multi-department strategic planning, our mission is embedded in how we work with one another. In the fall of 2017, we came together in a collaborative event called “In Pursuit of the One” and found common ground with our colleagues throughout our ministry.

The starting point for shared work was to look for the point of integration. Leaders from Patient Care Services, Innovation, Learning and Organizational Development, Community Health, and Performance Excellence identified that all of these departments were pursuing something singular and asked the questions, “What is each department’s One, and what is our shared One?” From this seed, collaboration between the departments expanded with staff at the event experiencing the synergy of different approaches to similar goals. We found many ways to work together.

There were abundant examples of how this event allowed for the weaving of our common purpose. Toward the conclusion of the event, the planners designed a unique way of summarizing and embodying the insights that had emerged. Participants entered a room throughout which were scattered musicians with instruments; we were instructed to sit amongst the artists. For the next hour, we discovered how, as a collections of individuals begin to work in rhythm with one another, subtle shifts and nuanced creativity emerge. In this context, leadership becomes fluid and shared, with innovation and stability arising as needed. The beauty of the music surrounding us was more than a shared reflective pause; it revealed the possibilities of working together.
Mission Integration Collaborations

2018 GOAL  Support clinical integration through employee and physician engagement, mission integration, well-being, and resilience strategies.

ACHIEVEMENT  Used results from the employee engagement survey’s mission index to develop a collaborative human resources dashboard that helped service area leaders measure the health of their local employee culture, and to craft a diversity, inclusion, and belonging assessment to evaluate gaps in employee experience in these areas.

Mission Integration continued to extend its collaboration with human resources to respond to employee engagement survey results and strengthen Dignity Health’s employee culture through measurement tools and employee growth offerings. An analysis of FY 2017 survey results continued to verify the positive impact of mission and values with respect to employee retention and patient experience. In an effort to equip leaders to further assess the health of their employee engagement between surveys, human resources developed a MyCulture dashboard that will help leaders assess the success of local employee engagement improvement efforts. For example, five mission index questions correlate to the organizational aspiration to “live our values and brand promise,” such that “employees demonstrate values and humankindness as whole people at work.”

A second key area was a focus on diversity, inclusion, and belonging, to respect the full range of differences that make us unique and the feeling that being our true selves is welcomed at work. This resulted in new, exploratory employee engagement questions that will inform a program in development and sponsored by Elizabeth Keith, Marvin O’Quinn, and Darryl Robinson.

THE NEW QUESTIONS ARE:

- I feel like I belong at Dignity Health
- I can be my true self at work
- People from all backgrounds have equal opportunities to succeed here
- When I speak up, my opinion is valued
- Dignity Health values diversity
- What is one thing Dignity Health could do to create a more inclusive culture?
Mission Integration Immigration

2018 GOAL In light of our mission and core values, and their source in Catholic social teaching, review the current status of health care-related immigration issues, and advance recommendations to provide an organizational framework of consistent policy and practice response.

ACHIEVEMENT Studied the current context of immigration enforcement and the increased intersection of immigration enforcement in health care settings, and developed policy and operational recommendations reaffirming Dignity Health’s commitment to provide care to patients and their families without regard to race, color, religion, national origin, citizenship or other protected characteristics.

A cross-functional task force sponsored and led by mission integration - with representation from advocacy and public policy, service area mission integration and formation, case management, continuum of care, patient safety, social work, legal, safety and security, human resources, and communications - studied, identified and prioritized pertinent health care-related immigration issues. The group developed a recommended system framework that provides a policy and practice approach for situations in which immigration and health care intersect. In particular, the group developed a leaders’ Immigration Toolkit.

IMMIGRATION TOOLKIT:

- Reassuring Our Communities of Mission and Values Commitment
- Mission Values Theological Foundation
- Public Policy & Advocacy Position
- Immigration Administrative Policy Template
- Patient transitions through the continuum of care, including patient financial assistance
- Employee, staff, and volunteer education and formation regarding Dignity Health’s immigration advocacy, policy and practice
- Security and Human Resources recommended practice for employee, staff and volunteer response to requests from public agencies related to employee records and/or immigration enforcement presence
- Communications – Talking Points and Frequently Asked Questions
- Legal Fact Sheet
- Recommendations regarding reinforcing a safe and welcoming culture of care for acute, non-acute and other community care settings
Ministry Formation Governance and Programming

2018 GOAL  Provide integral ministry formation offerings for employees and leaders.

ACHIEVEMENT  Completed initial construction of core and ongoing formation programs inclusive of all employees.

Ministry Formation continued constructing core and ongoing formation programs by establishing governance and creating basic educational modules for presentation throughout the enterprise. We began by establishing a Formation Advisory Council. The council is composed of 15 individuals who are key stakeholders in the system. They will advise, recommend and consult on all formation initiatives. Further, we created foundational formation materials through a collaboration with Mission Integration called the Mission Integration Series. The series consists of four modules that are presented to leaders at the Service Area leadership meeting and further cascaded down to facility directors and managers. These modules follow our Ministry Formation Framework.

MINISTRY FORMATION

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<tr>
<th>History and Identity</th>
<th>Spirituality and Meaning</th>
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<td>Community and Relationships</td>
<td>Ethics and Values</td>
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Executive Leadership Formation

**2018 GOAL** Integrate technology platforms into ministry formation content delivery and reflection.

**ACHIEVEMENT** Designed Executive Leadership Formation framework and tested interactive methodologies to support a full menu of formation offerings.

We experimented with an interactive book study process and explored ways of providing and archiving content on our internal electronic learning platform *MyJourney*. Other exciting program offerings planned during this year included Service Area Formation Champions, One Day Mission Immersion programs, and Foundations for New Leader modules.

We collaborated with a number of partners to stand up the Dignity Health Executive Leadership Formation program. As the year concluded, curriculum and planning was finalized for a fall launch of our program for executive formation in conjunction with professors from the University of San Francisco’s theology department. This new formation opportunity includes eight three-day retreat sessions over the span of 18 months. Our goal is to steep our executives in Catholic Social Teaching so that they may better operationalize our mission.
Our heritage roots us in meaning and hope

So our future may blossom in spirit
Spiritual Care Resilience and Well-being

2018 GOAL  Create and promote well-being and staff/physician resilience resources and programs.

ACHIEVEMENT  Collaborated through the newly established Resilience Steering Committee to initiate, test, survey, and spread well-being activities throughout the system.

Resilience and well-being for physicians and staff have become a broad national focus as the impacts of burn-out become increasingly evident. We continued to educate and support physicians and residents about resilience and well-being through presentations to Graduate Medical Education and Medical Staff groups. We advocate for an approach to resilience that considers the several layers of drivers (individual, team, organizational, national) and associated strategies for well-being.

Co-sponsored by Elizabeth Keith (Mission Integration) and Page West (Patient Care Services), we established a Dignity Health Resilience Steering Committee to promote staff and physician well-being throughout our ministry. The committee assessed what resilience activities are currently occurring, tested several evidence-based activities in pilot locations, and is creating an overall conceptual and governance structure to support ongoing resilience activities.

Enjoying a team well-being activity at a Phoenix community garden.
Palliative Care Services

2018 GOAL  Extend whole person care initiatives in Palliative and Spiritual Care Services across the care continuum.

ACHIEVEMENT  Created and piloted Palliative Care predictive algorithm; expanded innovative Spiritual Care ministries.

Innovation was active in both Palliative Care Services and Spiritual Care Services. We are reimagining and establishing care workflows to expand services to those facing advanced illness and to those in non-acute care locations.

Palliative Care Services collaborated with Dignity Health Insights (DHI) to create a way of identifying those who are likely to benefit from palliative care consultation. With the ability to analyze data from our own patient population, DHI created a predictive algorithm that looks for a select set of clinical clues located within a patient's electronic medical record and alerts the clinical team when a patient might benefit from a consultation. Pilot projects provided helpful learning to assure this innovative work will support our palliative care ministry.

Spiritual Care Services extended into a number of non-acute locations for care, innovating to provide services in an economically sustainable way. In Arizona, spiritual care services were extended into both long-term care and neighborhood (micro) hospitals. On California's Central Coast, we are developing a way to provide reimbursed Advance Directive education in our clinics. In the Bay Area, our chaplain clinical training program placed students in community locations of economic need to provide spiritual care to some of the most vulnerable amongst us. As health care moves into the community, spiritual care services is re-inventing itself to provide clinical care and staff support in both acute and non-acute settings.
Spirituality at Work – Reflective Pause

2018 GOAL  Further integrate the Reflective Pause dimension of Spirituality at Work throughout the ministry.

ACHIEVEMENT  Communicated the concept of Reflective Pause in national presentations and publications, brand marketing social media channels, and to broad internal audiences.

Reflective Pause

Of all dimensions of the Dignity Health understanding of spirituality at work, the reflective pause is the most difficult to operationalize. Attention to this aspect has borne fruit in the past with double digit increases in the Employee Engagement (EE) results for the question, “My workplace provides opportunity for reflective pause.” In 2018, reflective pause was again our focus with an EE result of .11 increase.

Taking time to pause received more external focus as well. In social media conversations and news media, interest in our reflective pause and the promotion of “take 2 minutes” grew. A professional journal published an examination of the prophetic impact of one form of the reflective pause, and the concept was presented in workshops and webinars. We collaborated with singer/songwriter Jewel as she supported staff and shared her reflections on the intersections between mindfulness and humankindness. Finally, we published the first edition of the weekly reflective pause resource titled: A Reflective Pause, with hopes for subsequent volumes of this home-grown collection.
Our heritage roots us in principle and right action

So our future may blossom with integrity
Ethics Discernment

2018 GOAL  Resource the use of values based discernment in new partnership decisions.

ACHIEVEMENT  Produced and provided to system leaders, education about Values Based Discernment (VBD), including a VBD Primer.

Having evaluated content for a Discernment Primer intended for leaders who had never used it before, in FY2018 the Primer was designed, produced and distributed to executive leaders. A second document was also developed in the form of a trifold brochure, giving examples of appropriate use of the process, both in new partnerships and for other weighty decisions, outlining essential steps and answering frequently asked questions. Both resources were shared at a gathering of the Executive Growth Leadership Team—seventy-five of the top executives charged with strategy and growth for the system. From this introduction, several leaders came forward to the mission department requesting help in using the process to evaluate potential partnerships. Because local and service area mission leaders are often involved in the development of new partnerships, that group also learned about the local resources available to them in their work. The VBD process and associated resources were introduced to all service area and facility leadership from director level above as a part of the Mission Integration Quarterly Education program.
New Partner Checklist

2018 GOAL Develop Mission Integration due diligence check list and process for new partnerships.

ACHIEVEMENT Developed a list of mission concerns for new partnerships as well as a process for including them in larger due diligence evaluations.

Before any new partnership is approved, it must be scrutinized for mission fit beyond general agreement with the Statement of Common Values. A simple one-page list of questions was developed by the Mission Integration department, including questions ranging from the history of the mission of the potential partner, to its practices of corporate citizenship and charity care. This list was communicated to the Strategic Growth Team. Mission Integration staff conduct interviews and write up reports to be included with the results of overall due diligence efforts.

“Our conversations with potential partners have been enriching on both sides. We have talked about respective founding stories, missions, and how we strive to engage employees in expressing one another’s values. My favorite part of the discussion is hearing how the partners express their commitment to broader social good. For instance, one primary care partner spoke at length about its goal of hiring from the community as a means to spur economic revitalization.”

-Rich Roth, Chief Strategic Innovation Officer
Community Health & the Common Good

Our heritage roots us in commitment to others and the common good

So our future may blossom with justice
Community Benefit Expense

2018 GOAL  Extend community health strategic goals by providing Community Benefit aligned with broader ministry objectives.

ACHIEVEMENT  Provided $1.4 billion in community benefit, plus $1.2 billion in unpaid costs of Medicare in FY 2017.

Community Health Needs Assessment Streamlining

2018 GOAL  Innovate to streamline community health needs assessments.

ACHIEVEMENT  Aligned all hospital Community Health Needs Assessments (CHNA) on the same three-year cycle, reduced contract costs, and introduced indicators and data tools for use across the enterprise.

Dignity Health took several steps in 2018 to produce more aligned, standardized and useful hospital Community Health Needs Assessments (CHNA). We migrated all hospitals to conduct their CHNAs on the same triennial cycle and provided sets of key demographic, health and social indicators, and data tools, to enhance consistency across our service areas. We worked pro-actively to reduce overall CHNA contract costs by $133,000 for FY 2018 and 2019.

FY 2017 COMMUNITY BENEFIT EXPENSE ($ in Thousands)
Community Health Diabetes Self-Management


ACHIEVEMENT  Expanded three diabetes prevention and self-management programs throughout Dignity Health with improved outreach to vulnerable populations.

Dignity Health continued to expand the evidence-based Diabetes Empowerment Education Program (DEEP) to vulnerable populations. Adopted as a pilot in FY 2017, DEEP is now delivered by community health teams at 20 of our hospitals. Data from the program’s first full year, serving 777 people in English, Spanish, and Hmong workshops, demonstrate:

Demographics: 63% of participants spoke a language other than English in their home; 76% identified as female; 47% had Medicare; 31% were on Medicaid or were uninsured; and 29% had less education than a high school diploma.

Results: 13% improvement in reported fruit and vegetable consumption; 65% improvement in exercise frequency; 38% increase in regular blood sugar testing; and a 12% improvement in confidence about asking physicians about their treatment plans.

In addition, Mercy Medical Center in Merced joined the St. Rose Hospitals in Nevada in delivering the Diabetes Prevention Program (DPP). The St. Rose program helped 75% of its participants achieve the goal of a minimum five percent weight loss. Thirteen locations continued to provide the Diabetes Self-Management Program (DSMP)—several as part of a Partners in Care Foundation and Blue Shield of California initiative to expand access to DSMP and its companion Chronic Disease Self-Management Program.
Coordinated Community Network Initiative

2018 GOAL  Implement innovative technology solution to include social determinants of health networks in care coordination.

ACHIEVEMENT  Coordinated Community Network Initiative™ (CCNI) implemented in 17 facilities throughout Dignity Health.

The Coordinated Community Network Initiative™ (CCNI) was launched by Dignity Health in 2016 as a pilot program in Nevada and then replicated at additional Dignity Health sites in 2017.

The CCNI is built around a network of community partners working together to coordinate communication, and implement processes for referral, to support vulnerable populations. A key element of the CCNI is a technology solution that streamlines the referral process and electronically links health care providers to organizations that provide direct services to their communities. Once the CCNI is launched at a site, Dignity Health establishes a Community Advisory Group that meets regularly to review utilization, discuss challenges, and decide how best to improve processes. This group is what makes the CCNI successful, sustainable, and measurable.

Patient reactions to community service referrals have been positive. One patient was referred to a community self-management workshop series and attended the program along with his wife. Together they completed the workshop series. During the sessions, he shared his knowledge and wisdom with others in the group. Linking patients to needed services at the time of discharge is a great way to continue care in the community.

“Community Health leaders are impressed with early results of the CCNI that indicate improved health, reduced hospitalizations, improved quality of life, and cost savings by linking patients to community resources such as transportation, shelter, food, and education. Hello humankindness!”

–Kathleen Dowler RN, MHA – Director Community Health for Chandler Regional and Mercy Gilbert Medical Centers
Social Innovation Partnership Grant Program

2018 GOAL  Further establish collaborative care networks to reduce readmission and improve chronic disease management for persons who frequently use health services.

ACHIEVEMENT Social Innovation Partnership Grants (SIPG) promoted cross-sector partnerships to develop and/or extend creative solutions to address prevention, social determinants of health, and health equity across vulnerable patient populations and communities.

“The key to coaching and learning a healthier lifestyle involves building trust. This person-centered program allows navigation of health choices through education, as well as empowerment in our community by engaging family and friends. We work together with community based organizations, and current and future clinical leaders. This program has all those components.”

–Sally Grove, Post-Acute Care Program Manager, Central Coast-Ventura Market

The goal of a SIPG is to foster long-term sustainability and systems change by nurturing community partnerships. The Caregivers Assisting the Elderly Program was awarded a SIPG with the aim to create a new model of service delivery for older adults who are medically fragile and who exhibit a propensity for anxiety and depression. These adults are partnered with pre-clinical students at St. John’s Hospitals on the Central Coast. Caregivers, the Camarillo Healthcare District, and California State University - Channel Islands created the “Health 492: Service Learning” course which matches students with an older adult patient of Dignity Health.

The program seeks to improve health outcomes and decrease unnecessary hospital readmissions while empowering future health care leaders to approach health in a holistic way. Students attend community-based meetings, hospital readmission meetings, and interact with physicians and staff to determine the best ways to care for older adults dealing with anxiety. To date, the patients have shown a decrease in emergency department visits and are more engaged in their communities. Many of the students stayed on as volunteers beyond the semester and reported reaching out to their grandparents to offer support. With the project’s popularity, additional course sections have been added for the 2018-2019 school year.
Human Trafficking

2018 GOAL  Extend anti-trafficking efforts across the health care field by sharing Dignity Health’s human trafficking programs with other health care agencies and training them on implementation.

ACHIEVEMENT  Provided assistance to hundreds of health care organizations across the country through virtual and in-person education and training.

When it comes to addressing human trafficking in our society, health care is an important part of the solution. Dignity Health was one of the first health care systems to implement a Human Trafficking Victim Response Program. We extended our reach across the nation to influence other health care systems to respond to the needs of victims of human trafficking in their care. Other groups regularly reach out to request Dignity Health’s guidance for their communities. This year Dignity Health published a Shared Learnings Manual and mentored more than 23 organizations. Dignity Health held the first annual Shared Learnings conference and a quarterly technical assistance call was launched to provide information, tools and answers to questions for 56 agencies. In addition, Dignity Health staff provided hundreds of presentations, publications, webinars and in-person trainings across the country. The momentum continues to build and a movement has been sparked to make sure that health care facilities are safe places for victims to come for help.

Dignity Health has become a leader in mobilizing the health care system to respond to human trafficking. Our work extended internationally this year with the first volunteer team of doctors and nurses traveling to India to provide human trafficking training to Indian health care providers and agencies.

*Dignity Health physicians and nurses provided key insights on human trafficking to medical teams in India.*
India Project – Impacting Human Trafficking Globally

A local community-based organization in India requested that Dignity Health come and provide training on medical care for survivors of human trafficking. When victims are recovered by the police in India, they are brought to the government hospital for a medical exam. The physicians and social workers who treat these patients gathered for two days of teaching by Dignity Health trainers who drew from their experience to share best practices in providing care. (See opposite page for photograph of group attending the gathering.)

Two physicians shared the importance of trauma-informed care and how to cultivate compassionate care among providers. Two forensic nurses covered information on collaborating with patients to correctly document abuse injuries in order for the evidence to be used for future prosecution. All the trainers provided insight on the experiences of human trafficking victims and there was a very empathetic response from those listening. The participants shared how they will use the training immediately in their own work and their plan to advocate for expanded services for victims.

In addition to the training for medical examiners, the team also provided a workshop at a rural hospital in Northeast India. This was the first of many trainings that are planned for a non-profit health care system that operates twenty charity hospitals across some of the most underserved areas of the country. The team educated local providers so they could appropriately respond to the victims of both labor trafficking and sex trafficking.

Finally, we provided a workshop presentation at the World Rural Health Conference, highlighting the need to address this concern in rural areas, which is where the majority of human trafficking victims originally come from.

Dignity Health has been asked to send additional teams to continue the work and support the Indian health care community in responding to the issue of human trafficking.
Last year was our first year volunteering at the L.A. River Clean-up. We organized a small group of California Hospital Medical Center employees to participate in the largest urban river clean-up in the United States. One of our employees brought two young teenage family members. She actually managed to get them out of bed for the 8:30 am meet-up at the Frog Spot by the river. They were groggy and grumpy and not at all happy. Our group spread out and spent the morning pulling massive amounts of plastic from the river banks. Bags, wrappers, straws. (Thank you Dignity Health for discontinuing the use of straws in our cafeterias!) Everything ends up in our rivers and we saw it all. It was hot. The clean-up was difficult because the trash was buried in the sand and wrapped around branches and brush. At the end of the morning, we came back together and the teenagers had made a complete turnaround in attitude. They were tired and hot, and yet still energized and glowing. They couldn’t stop talking about the morning. They had eyes wide open and were so engaged with what they had seen. I asked them if they would tell their friends about this experience. One of them said “I’m going to do more than that. I’m going to do my next report on it!”

For our upcoming L.A. River Clean-up, we’ve tripled the number of employees going. Many are bringing their family members. Friends of the L.A. River expect up to 10,000 volunteers to participate during the coming month.

– Kim Ray, Facilities Coordinator & Co-chair, Environmental Action Committee California Hospital Medical Center
Sustainability Dashboard

2018 GOAL  Advance sustainability through measurement tools driving socially responsible and economically beneficial performance.

ACHIEVEMENT  Created a system-wide, web-based sustainability dashboard to provide accurate and timely data related to energy consumption, water, waste, recycling, and food, allowing for informed operating decisions.

The Sustainability Dashboard, powered by Key Green Solutions, allows leaders to better manage our resources. By reviewing and comparing facility sustainability performance in areas that matter, we saw results. For example, our recycling rate was a solid 34%. Our healthy beverage rate was 51%. Compared to last year, our water consumption decreased by 1% and our energy consumption decreased by 3%. Dignity Health learned that making this data easily accessible to all employees is one way to educate and demonstrate that we care what our employees think as well as inspire them to be part of the solution.

Additionally, Dignity Health advanced the Chemical Footprint Project by demonstrating how chemical foot-printing can inform purchasing decisions in pediatrics. We accelerated the adoption of products and services that are safer, healthier, and that spark innovation in the supply chain, through our continued participation in Greenhealth Exchange. Recognized as a global leader in the movement towards climate-smart health care, Dignity Health qualified for the Climate Champion Awards as part of our participation in the 2020 Health Care Climate Challenge. The awards included: SILVER - Reduction (Energy), SILVER - Renewable Energy, GOLD - Climate Resiliency, and GOLD - Climate Leadership.
2018 GOAL Strengthen the operational effectiveness of sustainability goals within Dignity Health.

ACHIEVEMENT Identified functional leaders and subgroups in order to accelerate sustainability goals and develop vision statements for strategic areas.

The work of sustainability continued this year with a focus on incorporating systems thinking into our strategic plan. This enabled us to move the needle further and faster in creating a more sustainable organization. At a strategic deployment event facilitated by Practice Greenhealth and Healthcare Without Harm, linkages were created between individual employee efforts and the goals of the organization. Experienced leaders were chosen from various functional areas within our organization such as Communications, Human Resources, Ethics, Community Health, Advocacy, and clinical staff and ecology contacts. Subgroups were created to cascade goals in ten key areas of sustainability, into initiatives across the system. Through our work to realign ourselves with system and department visions, sustainability became ever more embedded into the fabric of Dignity Health. In 2018, fourteen Dignity Health hospitals received seventeen environmental excellence awards in recognition of their strong commitment to sustainability and their leadership in the local community and larger health care sector. Awardees were honored at the annual CleanMed conference.

“If there is one word that we should never tire of repeating, it is this: dialogue. We are called to promote a culture of dialogue by every possible means and thus to rebuild the fabric of society.”

–Pope Francis in his address upon being awarded the Charlemagne Prize
Shareholder Advocacy

2018 GOAL  Promote corporate responsibility through investments.

ACHIEVEMENT  Conducted 34 engagements with 21 companies on a range of issues that impact the health of individuals, communities, and our planet. Expanded Dignity Health’s work on health issues with a focus on safer chemicals through the Chemical Footprint Project and on addressing the opioid epidemic through the Investors for Opioid Accountability (IOA) coalition.

While maintaining a focus on climate change, our efforts expanded to address methane emissions, which have greater impacts on climate change than carbon emissions. This year Dignity Health returned to the table with manufacturers and retailers to highlight the need to promote the use of chemicals that are healthy for humans and the environment. Using the Chemical Footprint Project and the Mind the Store Campaign, these sectors are beginning to grapple with how they will eliminate unsafe chemicals in consumer products.

We participated in the development of a new effort to address the opioid epidemic. The Investors for Opioid Accountability (IOA) coalition is focused on the development of corporate policies to address the marketing/promotion of drugs that lead to opioid addiction. Dignity Health is a member of the coalition and participated in dialogues with distributors and producers regarding their methods to effectively monitor and manage health concerns and risks related to the opioid crisis in the U.S. Dignity Health will continue to promote a culture of dialogue to stimulate corporate change.

Bringing the strong threads of Dignity Health’s mission, values, and the principles of Catholic social teaching into investment decisions is a critical dimension of our investment program. In FY 2018, we worked to stimulate development of corporate policies and practices that:

- Address issues related to climate change
- Promote optimal nutrition and sustainable food production
- Advance corporate disclosure of the chemical content of products and adoption of less toxic alternatives
- Achieve access to quality, effective and affordable health care services and products as well as ensuring policies to address the opioid epidemic and drug pricing issues
- Ensure basic human rights for all people and deter exploitation related to forced labor, slavery, and sexual exploitation
Goals & Acknowledgments

Our heritage roots us in gratitude and vision

So our future may blossom with innovation
2019 Mission & Values Goal Alignment with Horizon 2020 Acceleration

Mission Integration’s goals continue to align with the Dignity Health strategic plan, Horizon 2020 Acceleration. With awareness that our goals may shift, in FY 2019 we plan to continue work furthering the six strategies of Horizon 2020. As always, we “will extend our mission, live out our values, and realize our vision.” The six strategies and their definitions are below, as well as FY 2019 Mission Integration goals designed to support successful implementation of the strategy.

QUALITY Implement changes and initiatives necessary to raise Dignity Health’s clinical quality, patient safety, and service measures to top decile performance nationally.

• Further establish sustainability initiatives that support a climate-smart organization leading toward greater public and planetary health. (Sustainability)

• Collaborate to implement emerging diversity, inclusion and belonging strategies fostering a just work environment. (Mission and Values)

COST Implement changes in Dignity Health’s clinical and administrative processes that lower Dignity Health’s costs below Medicare reimbursement levels.

• Further mission integration organizational restructure guided by Horizon 2020 Acceleration principles and goals. (Mission and Values)

• Promote corporate responsibility through investment advocacy. (Sustainability)

GROWTH Grow our healing ministry by expanding access and market share within existing service areas, entering new service areas, and significantly expanding our community based wellness, ambulatory, and non-acute services.

• Increase access to preventive resources and chronic disease management programs by developing internal and external networks of community resources and enhancing community partnerships. (Community Health)

• Enhance ambulatory spiritual care services with innovations in care delivery. (Spiritual Care)

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INTEGRATION Offer patients the full spectrum of care, from prevention to post-acute, through the development of health plan capacity, new partnerships, greater physician alignment, and Accountable Care Organizations. Through clinical integration, build new partnerships among physicians and our hospital systems, improve our outcomes on hospitals’ pay-for-performance measures, and establish a competitive advantage across our service areas.

- Strengthen new partnerships through broader implementation of mission due diligence process. (Ethics)
- Promote the importance of addressing health-related social needs in traditional and innovative ways to provide holistic care across the continuum for all patients. (Community Health)

CONNECTIVITY Develop industry-leading levels of electronic connectivity with and between our physicians, nurses and patients to achieve superior service experiences, higher quality outcomes, and more efficient care delivery and management.

- Leverage our Learning Management System (MyJourney) to impart Formation initiatives throughout the organization. (Ministry Formation)
- Advance communication and coordination among clinicians, patients, and community organizations to ensure that social factors determining health outcomes are addressed. (Community Health)

LEADERSHIP Strengthen Dignity Health as an organization through new investments in employees and physicians, a more active role in advocacy and public policy, continued development of a culture of innovation and collaboration, and a greater role for foundations in raising community funds to help build and maintain the programs, structures and systems necessary to maintain healthy communities.

- Launch a Senior Executive Formation Program to deepen the appreciation and application of our core values. (Ministry Formation)
- Expand community involvement in bio medical ethics by increasing community ethics fluency. (Ethics)
Perhaps nothing helps us make the movement from our little selves to a larger world [more] than remembering God in gratitude. Such a perspective puts God in view in all of life, not just in the moments we set aside for worship or spiritual disciplines. Not just in the moments when life seems easy.

— Henri Nouwen
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.