



## Memorial Hospital

# 2013 Community Health Needs Assessment & Implementation Strategy

# 2013 Memorial Hospital Community Health Needs Assessment Summary:

An assessment of Kern County conducted jointly by Delano Regional Medical Center, Dignity Health (Mercy and Memorial Hospitals), Kaiser Permanente, and San Joaquin Community Hospital.

During 2012/2013, a community health needs assessment (CHNA) was conducted by Delano Regional Medical Center, Dignity Health (Mercy and Memorial Hospitals), Kaiser Permanente, and San Joaquin Community Hospital for the 851,710 residents of Kern County, California. Kern County includes its county seat, Bakersfield, a city of 352,428 residents located in the midst of agriculture and petroleum extraction in the California Central Valley. The complete Community Health Needs Assessment can be accessed from [www.HealthyKern.org](http://www.HealthyKern.org).

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## Description of Community Served by the Hospitals

Kern County includes both urban and rural areas. The county's economy is heavily linked to agriculture and petroleum extraction. There is also strong aviation, space, and military presence such as Edwards Air Force Base and China Lake Naval Air Weapons Station. Kern County has less per capita income (\$20,100) and median household income (\$47,089) compared to California (\$29,188, \$60,883, respectively) and United States (\$27,334, \$51,914 respectively). Kern had a higher poverty rate (20.6%) compared to the state of California (13.7%) and the United States (13.8%) between 2006 and 2010. Data and a map detailing current demographics, including income levels, age, race/ethnicity, and educational attainment for the city and surrounding counties with a comparison to state and national information is included in **Attachment A**.

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## Who was Involved in Assessment

The assessment process was initiated by the Kern Community Benefit Collaborative in July 2012. A Collaborative of key community leaders representing a cross-section of the community was assembled to help guide the process. In Kern County, the not-for-profit hospitals have a long history of working together to actively engage in a number of practices that aim to improve the health of the community. These practices, commonly known as community benefit, are programs and services intended to improve access for disadvantaged groups or to address important health care matters for a defined population. The Collaborative is comprised of Delano Regional Medical Center, Dignity Health (Mercy and Memorial Hospitals), Kaiser Permanente, and San Joaquin Community Hospital. To complete the needs assessment, the Collaborative utilized information from [www.HealthyKern.org](http://www.HealthyKern.org) and retained the services of the Healthy Communities Institute and Strategy Solutions, Inc. to assist with the process.

The Healthy Communities Institute (HCI) offers a web-based dashboard system that allows data to be easily visualized and comprehended by its users. This allows community stakeholders to understand the variety of data, and take concrete action to improve target areas of interest. HCI has over 100 implementations of its dashboard for clients in 40+ states. The HCI mission is to improve the health, environmental sustainability and economic vitality of cities, counties and communities worldwide. The company is rooted in work started in 2002 in concert with the Healthy Cities Movement at the University of California at Berkeley. HCI staff members are experts in managing and presenting data with extensive experience in data visualization and data mapping. Additional information about Healthy Communities Institute can be found at: [www.HealthyCommunitiesInstitute.com](http://www.HealthyCommunitiesInstitute.com).

Strategy Solutions, Inc., a research and planning firm with the mission to create healthy communities was retained to assist with data collection and facilitation of the process. Founded in 1998, Strategy Solutions has extensive experience in providing solutions for workforce development organizations and enhancing growth in community organizations, non-profit organizations, health care systems, and government entities.

The Kern County Community Benefit Collaborative along with representatives from Healthy Communities Institute and Strategy Solutions made up the Steering Committee. The Steering Committee met numerous times over the course of the process to provide guidance on the components of the Kern County Community Health Needs Assessment. **Attachment B** lists the Kern Community Benefit Collaborative members and all those who attended planning meetings during 2012.

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## How the Assessment was Conducted

The community health needs assessment (CHNA) and planning process is a significant step toward meeting the goal and mission of Healthy Kern County to improve the health of the region. This initiative brought the hospitals, public health and other community leaders together in a collaborative approach to:

- Engage local stakeholders
- Generate knowledge that will lead to collaborative action
- Identify data that would be useful for policy and advocacy work
- Assess community needs and assets
- Develop a community dissemination plan
- Provide on-going tracking and monitoring

The community health needs assessment process develops a system that is better able to meet the needs of our communities while avoiding duplicative efforts and achieving economies of scale. This process supports the commitment of community agencies working together to achieve healthier communities. The Steering Committee met several times over the course of the project, both through conference calls as well as face to face meetings.

### Qualitative and Quantitative Data Collection

In an effort to examine the health related needs of the residents of Kern County, the Steering Committee and consulting team employed both qualitative and quantitative data collection and analysis methods. In addition, both primary and secondary data were collected.

The Steering Committee determined at the beginning of the study that the data collected would be defined by hypothesized needs within the following categories:

- Access to Quality Health Care
- Chronic Disease
- Healthy Environment
- Healthy Mothers, Babies and Children
- Infectious Disease
- Mental Health and Substance Abuse
- Physical Activity and Nutrition
- Injury

The Kern County Community Benefit Collaborative members and the consulting team made significant efforts to ensure that all areas of the county, all socio-demographic groups and all underrepresented populations were included in the study. This was accomplished by conducting a community wide survey that was distributed via the Internet and paper. To understand the needs of key demographic groups, the Steering Committee identified stakeholders that represented various subgroups and under-represented populations in the community/region. In addition, the process included public health participation and input, both through extensive use of [HealthyKern.org](http://HealthyKern.org) data, as well as through participation of health department professionals in the data review and prioritization process.

The first step for conducting the community needs assessment was a comprehensive collection and review of secondary health and quality of life data. The data was collected and analyzed through the use of [HealthyKern.org](http://HealthyKern.org), a web-based community health data platform developed by Health Communities Institute. HealthyKern.org provides a dashboard of **over 140** community indicators from over 20 sources, covering over 20 topics in the areas

of health, health determinants, and quality of life. The dashboard utilizes a color-coding methodology where the colored gauge provides a visual representation of how Kern County is doing in comparison to other communities. The three-colored gauge represents the distribution of values from the reporting regions (e.g. counties in the state) ordered from those doing the best to those doing the worst (sometimes lower values are better and in other cases higher values are better). From that distribution, the green represents the top 50th percentile, the yellow represents the bottom 25th to 50th percentile, and the red represents the "worst" quartile. The data is primarily derived from public state and national secondary data sources. Hospitalization inpatient and emergency visit information is derived from the California Office of Statewide Health Planning and Development.

### **Analyzing Secondary Data: First Steps to Identifying Community Needs**

In order to determine community needs, each of the 140+ indicators on HealthyKern.org were analyzed on the following criteria: (1) How does Kern County perform compared to other counties in the state or nation, (2) Does Kern County meet national Healthy People 2020 goals, (3) Was there an apparent "health disparity," and (4) Does historic data show that Kern County is trending in a negative direction?

A disparity was defined as a sub-population (e.g.: females, seniors, African Americans) performing 50% or worse compared to the county overall. Hence, if the indicator was in the yellow or red (meaning in the worst performing half of US or California counties), did not meet the Healthy People 2020 national goal, signaled a health disparity, or was trending poorly, it was identified as a community need. After initial analysis, over **80%** of the 140+ indicators met at least one criteria of need, spanning almost all of the 20 health and quality of life topic areas. This indicated that Kern County has a multitude of needs and many opportunities for improvement.

### **Primary Data Collection**

The primary data collected to support the needs assessment process included:

- A total of 27 individual stakeholder interviews were conducted by Strategy Solutions staff via the telephone with community leaders who represent diverse audiences and interests. Project Steering Committee member's brainstormed list of community stakeholders that represented various interest groups and underrepresented populations. Steering Committee members contacted stakeholders (via email or phone) to ask them to participate in the study. Strategy Solutions staff contacted stakeholders and scheduled individual interviews.
- A mixed methodology (paper/internet) Kern County Needs Assessment Survey conducted by a community network organization with approximately 200 respondents.
- A Community Survey was conducted by Strategy Solutions via paper and viral Internet distribution that achieved a total of 970 respondents that are verified residents of Kern County. The survey was launched on September 5, 2012 and was available online until October 31, 2012. The survey was published in both English and Spanish. The survey link was distributed via email and other media outreach efforts. Paper surveys were made available at a variety of local medical facilities, outreach events and Family Resource Centers throughout the county.

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## **Health Needs Identified**

Given the great number of community needs that arose from the initial assessment, it was necessary to 'tighten' the criteria in order to focus in on the highest needs indicators. In order for an indicator to be considered "high community need," it had to meet one of the following criteria: (1) be in the "red" or (2) be in the "yellow" on the [HealthyKern.org](http://HealthyKern.org) list of indicators and not meet the Healthy People 2020 goal.

The refined criteria limited our focus to approximately 50 indicators spanning eight health and five quality of life areas of high need. The indicator topic areas are outlined in the table below.

### Areas of High Need

<i>Health: Cancer</i> <i>Health: Diabetes</i> <i>Health: Exercise, Nutrition, &amp; Weight</i> <i>Health: Heart Disease &amp; Stroke</i> <i>Health: Immunization &amp; Infectious Diseases</i> <i>Health: Maternal, Fetal &amp; Infant Health</i> <i>Health: Substance Abuse &amp; Lifestyle</i> <i>Health: Access to Health Services</i>	<i>Quality of Life: Economy</i> <i>Quality of Life: Education</i> <i>Quality of Life: Environment</i> <i>Quality of Life: Public Safety</i> <i>Quality of Life: Social Environment</i>
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For each topic area, racial/ethnic information as well as historic data, as available, were further explored. Preventable hospital utilization data/indicators were examined separately and used to support key findings. Two additional high need health topic areas were hence added (*Respiratory Conditions* and *Injury*) because Kern County showed high hospital utilization for asthma, chronic obstructive pulmonary disease (COPD), and falls.

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### Community Assets Identified

The assessment identified a number of strong community assets (**Attachment C**), including existing health care facilities and resources within the community that are available to respond to the health needs of the community. The community resources are categorized into several major areas including Federally Qualified Health Centers, Hospitals, Ambulatory Surgery Centers, Community Mental Health Centers, Comprehensive Outpatient Rehab Facilities, End Stage Renal Disease Facilities, Home Health Agencies, Hospice Facilities, Outpatient Physical Therapy/Speech Therapy Facilities, Skilled Nursing Facilities, X-Ray Facilities and Rural Health Clinics.

In addition to identifying community need, the collaborative also identified community assets and promising practices available in Kern County that respond to the needs. By virtue of their frequent contact with residents of Kern County's most disadvantaged communities, employees of Mercy and Memorial Hospitals' Department of Special Needs and Community Outreach are familiar with the community assets available to address health and human service issues that affect the residents.

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### Summaries: Assessments and Priorities

After review of the data, a list of needs and issues were identified from the conclusions derived from the data. On November 16, 2012, the Kern County Community Health Needs Assessment Steering Committee held two meetings with community, public health and health system leaders to review the needs and issues identified in the Community Health Needs Assessment Process and to prioritize the issues in order to identify potential intervention strategies and an action plan. The sessions were held at San Joaquin Community Hospital in Bakersfield. A total of 62 participants completed the prioritization exercise.

After the presentation of the data, every participant rated each of the issues that were identified in the data collection process on a 1 to 10 scale for each criterion using the OptionFinder audience response polling system. In order to determine the highest priority for the hospitals/health systems, the average ratings for the Leadership, Public Health and Impact criteria were added together and rank ordered, high to low. The results were then "matched" with the average score on the Role criterion. The results from the prioritization meeting can be found in **Attachment D**.

## **Next Steps**

Collaborative members agreed that each hospital would develop their individual action plans addressing the issues that each felt were top priority for them, based on the results of the study. The community health assessment will be made widely available to the public and an action plan will be developed that identifies how the assessment findings are being implemented in a strategic plan. Progress will be charted over the next three years and reported in the next community health needs assessment document. The Collaborative is committed to conducting another comprehensive needs assessment in three years.

The Community Benefit Collaborative will widely distribute the 2012-2013 Health Needs Assessment through a variety of venues. The assessment summary will be available on the websites of Delano Regional Medical Center, Dignity Health (Mercy and Memorial Hospitals), Kaiser Permanente, and San Joaquin Community Hospital. A copy can also be obtained by contacting the administrative offices of any of the three organizations.

# 2013 Memorial Hospital Implementation Strategy

## For FY2012 – 2014 Summary

Memorial Hospital was created to meet the needs of our community, and has grown from a small local facility to a large regional acute hospital serving all of Kern County. Memorial Hospital is a member of Dignity Health, formerly Catholic Healthcare West (CHW)<sup>1</sup>, the largest not-for-profit health care provider in California.

Today, Memorial has 418 general acute care beds, nearly 50 intensive care and cardiovascular recovery units, 13 state-of-the-art surgical suites, a full-service Emergency Department with a Joint Commission Certified Stroke Center and the Chest Pain Center. In addition, we offer newly expanded birthing suites, a family care center, and The Lauren Small Children’s Medical Center that includes a 31-bed Neonatal Intensive Care Unit, a 20-bed Pediatric Unit, and an 8-bed PICU. The hospital also has a full complement of diagnostic laboratory and imaging services, and an outpatient surgery center.

Caring for the community beyond the hospital walls led to the founding of the Department of Special Needs and Community Outreach in 1991. In response to identified unmet health-related needs in the community, today the department operates more than 59 programs in Bakersfield, Arvin, Shafter, McFarland, Delano, Lake Isabella, Ridgecrest, Taft, Tehachapi, and other outlying communities in Kern County where there is limited access to health care and related services.

With 27 employees and an annual budget of \$2,352,000, the department’s programs target low-income, uninsured, or underinsured individuals, as well as Kern County citizens with unmet health needs, including migrant farm workers and other disenfranchised populations. The department frequently collaborates with more than 80 public, private, and nonprofit organizations. The three Dignity Health hospitals in Bakersfield (Mercy Hospital Downtown, Mercy Hospital Southwest, and Memorial Hospital) are the largest providers of health services in the Southern San Joaquin Valley serving a diverse population of urban and rural residents. Combining resources, Mercy and Memorial Hospitals respond to identified unmet health-related needs throughout Kern County in a unified way through three Outreach Centers:

### Outreach Centers -

#### **Learning Center**

631 E. California Avenue, Bakersfield, CA 93307, (661) 325-2995

#### **Outreach Center**

1627 Virginia Avenue “C”, Bakersfield, CA 93307, (661) 323-7964

#### **Community Wellness Center**

2634 G Street, Bakersfield, CA 93301, (661) 861-0852

The Learning Center and the Outreach Center are located in economically depressed neighborhoods of southeast Bakersfield. The Community Wellness Center is located in the center of downtown Bakersfield. These centers serve as strategic hubs of our community outreach efforts. In collaboration with other community service agencies, the centers provide referral services, food, clothing, shelter, education, and health screenings to the most vulnerable and needy residents of the community. Our three outreach centers employ a total of 20 people and utilize an average of 140 volunteers each month.

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<sup>1</sup> For more information on the name change, please visit [www.dignityhealth.org](http://www.dignityhealth.org)

## Target Areas and Populations

Memorial Hospital serves all of Kern County, including Bakersfield (the county seat) and outlying rural communities such as Taft, Tehachapi, and Lake Isabella. We further define the community served through the Community Need Index (CNI) map for the hospital (**Attachment E**). The county covers more than 8,100 square miles, geographically making it the third largest county in the state. The landscape is diverse, ranging from high desert to mountains to vast expanses of rich agricultural flatlands.

Kern County consistently ranks among the top five most productive agricultural counties in the United States and is one of the nation's leading petroleum-producing counties. Agriculture is the third largest industry in the county and accounts for 14.1 percent of total employment. Seasonal and cyclical fluctuations in employment in the agriculture and petroleum industries drive Kern County's unemployment rate consistently well above the state average.

Many of Bakersfield's poorest residents are concentrated in the city's southeast quadrant, the site of two of our community outreach centers. The population is largely African American and Hispanic/Latino, with a high concentration of limited-English speaking individuals (many undocumented), elevated youth gang activity, and a high unemployment rate. These neighborhoods include seedy motels that house a transient homeless population, including many families with children.

Most of these residents have not received health services or assistance because of poverty, chronic substance abuse, language barriers, lack of transportation, a strong mistrust of established institutions, and lack of knowledge and understanding about accessing and using available services. For many low-income individuals and families living in the outlying rural communities of Kern County, geographic isolation heightens these barriers to health care and other services.

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## How the Implementation Strategy Was Developed

Memorial Hospital's Implementation Strategy was developed based on the findings and priorities established by the 2012-2013 Kern County Community Health Needs Assessment and review of the hospital's existing community benefit activities.

Each year employees of the Department of Special Needs and Community Outreach present progress reports to the Community Benefit Committee. The Community Benefit Committee assists the Department of Special Needs and Community Outreach in prioritizing programs that are in line with the hospital's strategic plan. Committee members include representatives of the hospital Executive Management Team, the business community, social service agencies, community volunteers, board members, and employees. This group meets four times annually to help ensure that our outreach services respond to identified community needs and are effectively working to improve the overall health status of the community. During 2012, the Committee concentrated on program expansions and service quality. The Committee, as well as management and executive employees of all three Dignity Health hospitals, provide input and, as a result, make adjustments to programs, services, and the Community Benefit Plan. The Plan is then submitted to the hospital boards for final approval.

Other stakeholders involved in the selection of priorities are those organizations with which our hospitals cosponsor community benefit programs and outreach activities. Some include the Kern County Public Health Services Department, Greater Bakersfield Legal Assistance, Clinica Sierra Vista, United Way of Kern County, Community Action Partnership of Kern, Kern Family Health Care, Kern Partnership of Wellness, Kern County Department of Human Services, National Health Services, Kern County Network for Children, First 5 Kern and Stop the Violence.



Each initiative in the Community Benefit Plan for Memorial Hospital relates directly to one or more needs identified in the Community Assessment. Other factors considered in selecting priorities for programs include:

- Size of the problem
- Severity of the problem
- Resources required and available
- Sustainability
- Availability of appropriate collaborators
- Efforts by other organizations

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## Major Needs and How Priorities Were Established

With support from Healthy Communities Institute and Strategy Solutions, members of the Community Benefit Collaborative undertook a structured approach to review public health data and conduct interviews of city and county residents and public health officials. This assessment resulted in a list of 40 health needs which were discussed at a community prioritization meeting.

Community Benefit Collaborative members came to agreement on a set of criteria that they would use to evaluate the list of 40 health needs identified through the assessment process. In order to determine community needs, each of the 140+ indicators on HealthyKern.org were analyzed on the following criteria: (1) How does Kern County perform compared to other counties in the state or nation, (2) Does Kern County meet national Healthy People 2020 goals, (3) Was there an apparent “health disparity,” and (4) Does historic data show that Kern County is trending in a negative direction?

The prioritization process identified 10 priority issues for the community:

1. Heart Disease and Stroke
2. Cancer
3. Diabetes
4. Preventative Screenings
5. Cancer Screenings
6. Access to Health Care
7. Low Birth Weight/Infant Mortality/pre-term birth (prenatal care & breastfeeding)
8. Asthma
9. Women's Health Screenings
10. Sexually Transmitted Diseases (STDs)

The Kern County Community Benefit Collaborative members and the consulting team made significant efforts to ensure that all areas of the county, all socio-demographic groups and all underrepresented populations were included in the study. This was accomplished by conducting a community wide survey that was distributed in paper form and via the Internet. To understand the needs of key demographic groups, the Steering Committee identified stakeholders that represented various subgroups and under-represented populations in the community/region. In addition, the process included public health participation and input, both through extensive use of HealthyKern.org data, as well as through participation of health department professionals in the data review and prioritization process.

Memorial Hospital’s review of current community benefit programs found that the hospital is meeting existing community needs through provision of charity care and Medicaid and Medicare services; currently has a

Homemaker Care Training Program for individuals transitioning from unemployment into the workforce and Homework Club for underserved children. These activities were determined to be additional priorities for the hospital's implementation strategy.

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## **Description of What Memorial Hospital Will Do to Address Community Needs**

Memorial Hospital responds to identified health issues through the following programs.

- Community Wellness Program (community health screening clinics; in-home health consultations, education, and monitoring; health education classes/seminars; and referrals to other local health care and social service agencies)
- Children's Health Initiative (access to health care insurance for low-income children age 0 – 18 years and the establishment of a medical and dental health care home for all children in Kern County)
- EMPOWERMENT - Chronic Disease Self-Management and Diabetes Self-Management Programs (provide patients who have chronic diseases with the knowledge, tools and motivation needed to become proactive in their health)
- Prescription Program (purchases necessary medications in emergency situations for patients who cannot afford to purchase their medications)

Whenever possible, priority is given to the southeast Bakersfield neighborhoods where we have an established presence by virtue of our two outreach Centers: Learning Center and Outreach Center. These neighborhoods contain a high concentration of vulnerable population groups, including children, seniors, limited-English-speaking individuals, and low-income families.

Programs offered through these centers respond to the identified needs in the county-wide assessment. They provide health education, access to preventative health screenings, and health care insurance for low-income children. These programs help provide community members the knowledge, tools and motivation needed to become proactive in their health. In addition, the centers are the hubs for many programs that provide basic support services to families in Bakersfield's most economically depressed areas. Programs include health screenings, meal and nutrition services, clothing, counseling, transportation, family support, and enrollment in low or no-cost health insurance programs. Our newest Center – The Community Wellness Center in downtown Bakersfield – gives us the opportunity to expand our preventative health care services in another underserved area of Bakersfield.

Because of our health education component and the depth of the collaboration with other local organizations, our community benefit programs help to contain the growth of community health care costs. For example, our Community Wellness Program raises awareness of risk factors such as high cholesterol, high blood pressure, and obesity. This program helps people develop and maintain a healthy lifestyle. As a result, individuals will be better qualified to self-manage their health and thus avoid costly visits to Emergency Rooms. Additionally, our programs are structured to share resources and expertise with partner organizations. In short, our community benefit programs do not just apply a band-aid to unmet health-related needs, but are designed to improve health outcomes through changes in each individual situation and through the capacity of our community to respond to unmet health-related needs.

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## Action Plans

### 1. **Chronic Disease: Heart Disease and Stroke**

Mercy and Memorial Hospital's Chronic Disease Self-Management Program provides patients who have a chronic disease with the knowledge, tools and motivation needed to become proactive in their health.

### 2. **Chronic Disease: Cancer/Cancer Screenings**

Mercy and Memorial Hospitals are active members of the Kern Comprehensive Cancer Awareness Partnership (KCCAP), a voluntary body of community agencies, organizations and community members working together to further cancer prevention, detection, treatment and survivorship throughout Kern County. The Learning Center of Mercy and Memorial Hospitals also offers its clients help with completing the Cancer Detection Program: "Every Woman Counts" screening enrollment form and gives each client a list of providers in Kern County.

### 3. **Chronic Disease: Diabetes**

Mercy and Memorial Hospital's Diabetes Self-Management Program (licensed through Stanford School of Medicine) provides patients who have diabetes with the knowledge, tools and motivation needed to become proactive in their health.

### 4. **Healthy Mothers, Babies, Children: Low Birth Weight/Infant Mortality/pre-term birth**

The Children's Health Initiative of Kern County increases access to health insurance and health care for children, and promotes the use of medical/dental homes for all Kern County children. (*\*Also under Access to Health Care*)

### 5. **Access: Preventative Screenings**

Mercy and Memorial Hospital's Community Wellness Program provides comprehensive health screenings held at various locations throughout Kern County. The screenings are held once per month at each location. The screenings consist of checking blood glucose levels, cholesterol, blood pressure and body composition to residents that do not have access to health care.

### 6. **Access: Access to Health Care**

The Children's Health Initiative of Kern County increases access to health insurance and health care for children, and promotes the use of medical/dental homes for all Kern County children.

Mercy and Memorial Hospital's Community Wellness Program offers flu vaccinations to the community prior to the flu season free of charge.

The Prescription Program purchases necessary medications in emergency situations for patients who must have the medications for their health but do not have the money to purchase them.

### 7. **Chronic Disease: Obesity**

Mercy and Memorial Hospital's Community Wellness Program provides in-home health education and monitoring, community health screening clinics, health education classes, and referrals to other local health care and social service resources. More specifically, the hospitals' Healthy Kids in Healthy Homes program addresses the issue of childhood obesity through a series of seminars for children and their parents. The program provides information on the topics of nutrition, exercise and lifestyle changes that begin in the home.

## Next Steps for Priorities

Memorial Hospital employees of the Department of Special Needs and Community Outreach in conjunction with the Hospital's Community Benefit Committee will:

1. Develop specific measurable annual goals and objectives for each top priority issue.
2. Engage in discussions to ensure the community benefit programs of Memorial Hospital are making an impact with quality responses to the health needs in the community.
3. Develop detailed work plans that will build community impact and sustainability.
4. Discuss and approve our participation in community programs responding to the following needs:
  - a. Low birth weight
  - b. Infant mortality
  - c. Asthma
  - d. Sexually transmitted diseases

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## Priority Needs Not Being Addressed and the Reasons

We do not have formal Community Benefit Programs to address the issues of low birth weight, infant mortality, and asthma (identified as top issues in Kern County). These issues are addressed in the community by entities and organizations other than our three hospitals.

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## Approval

This report was prepared for the May 2013 meeting of the Governing Board.

Board of Directors for Memorial Hospital Approval:



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Thomas W. Smith, Board Chair

Date

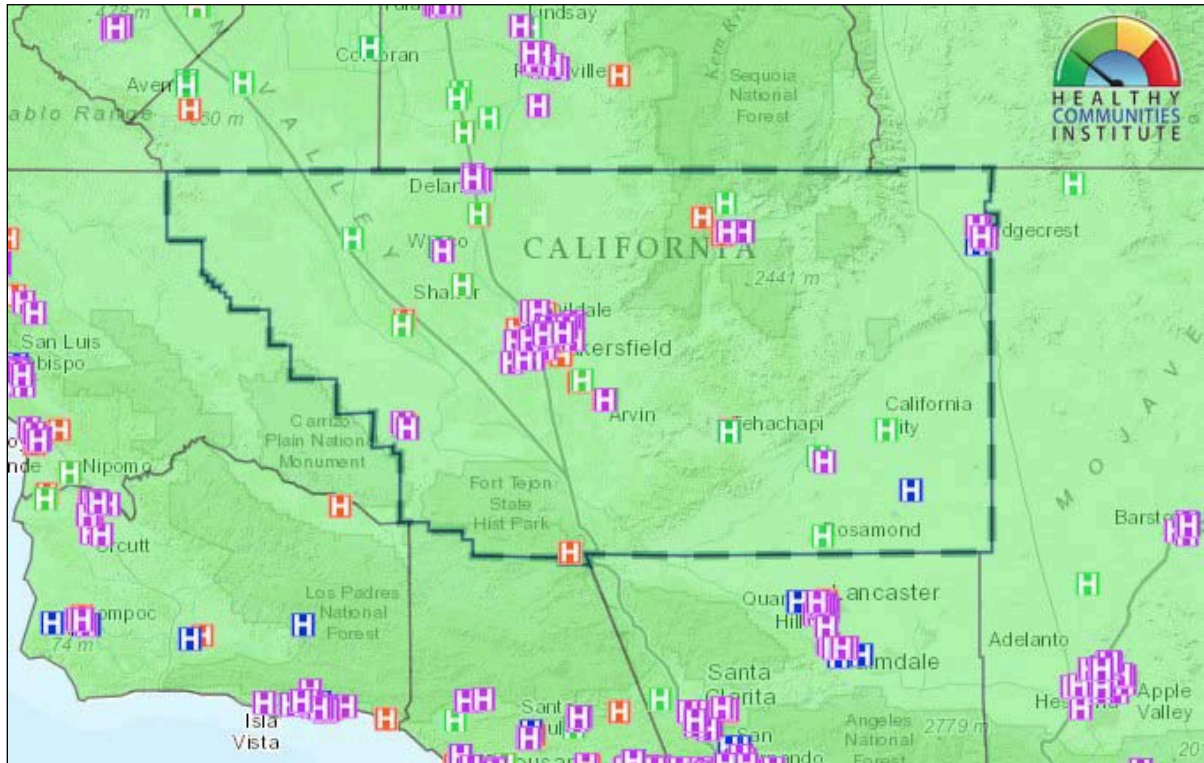
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5/22/2013

## Demographics

The service area defined by the Kern County boundary, will serve as “unit of analysis” for the CHNA and purposes of this report. In 2011, the population of Kern County was 851,710 persons, or 2.3% of California’s population. The county land is 5.2% of California’s land area. **Figure 6** shows the map of Kern County.

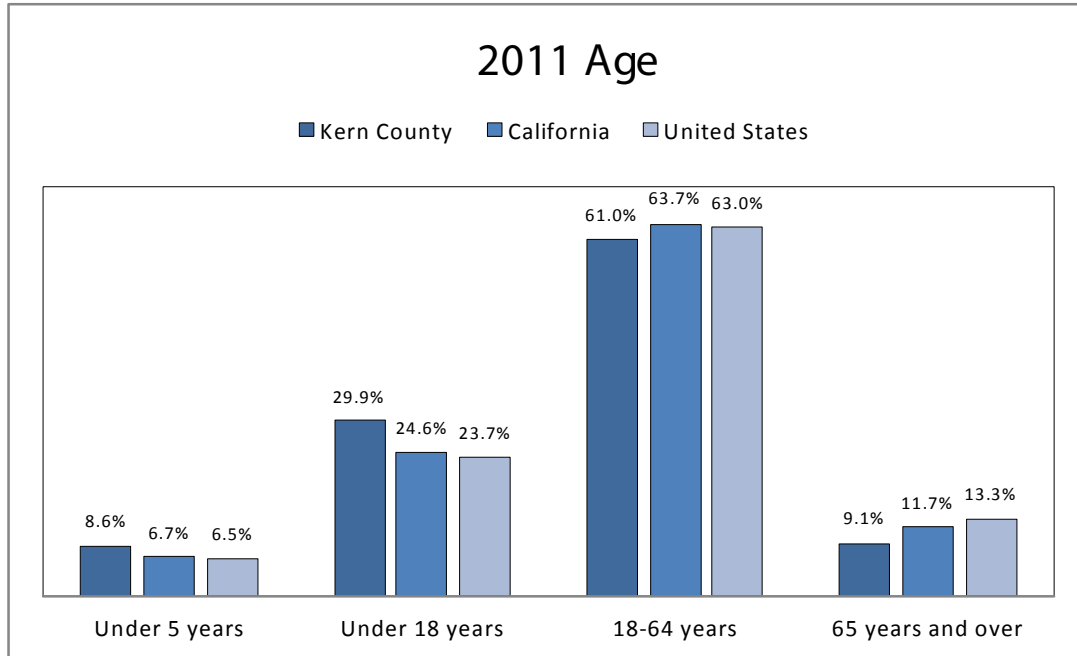
**Figure 6: Kern County, California**



## Age

**Figures 7 and 8** display the age breakdown of Kern County. There are more youth under 18 years of age (29.9%) compared to the state percentage (24.6%) and United States percentage (23.7%). There are also a higher percentage of persons under the age of 5 (8.6%) as compared to California and the United States.

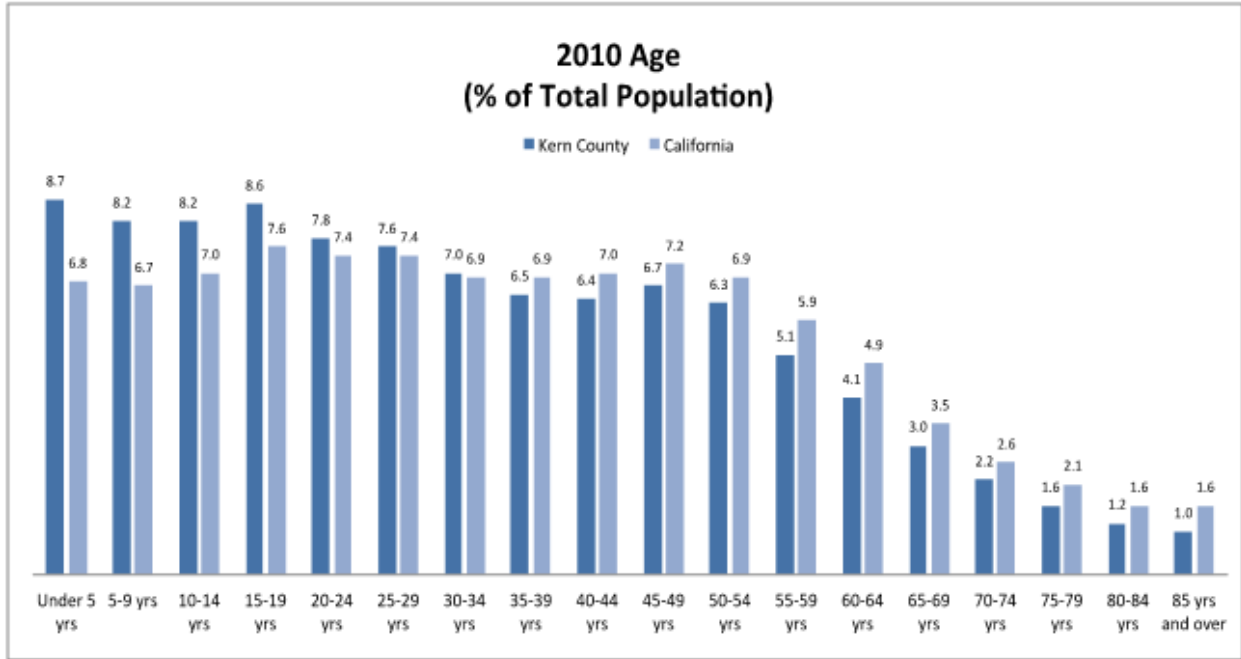
**Figure 7: Age of Kern County Population 2011**



**Figure 8** displays the breakdown in more detail as it relates to Kern County and the State of California. Kern County population is younger than the state. There is a higher proportion of people in Kern County in all age groups under 18 compared to California.

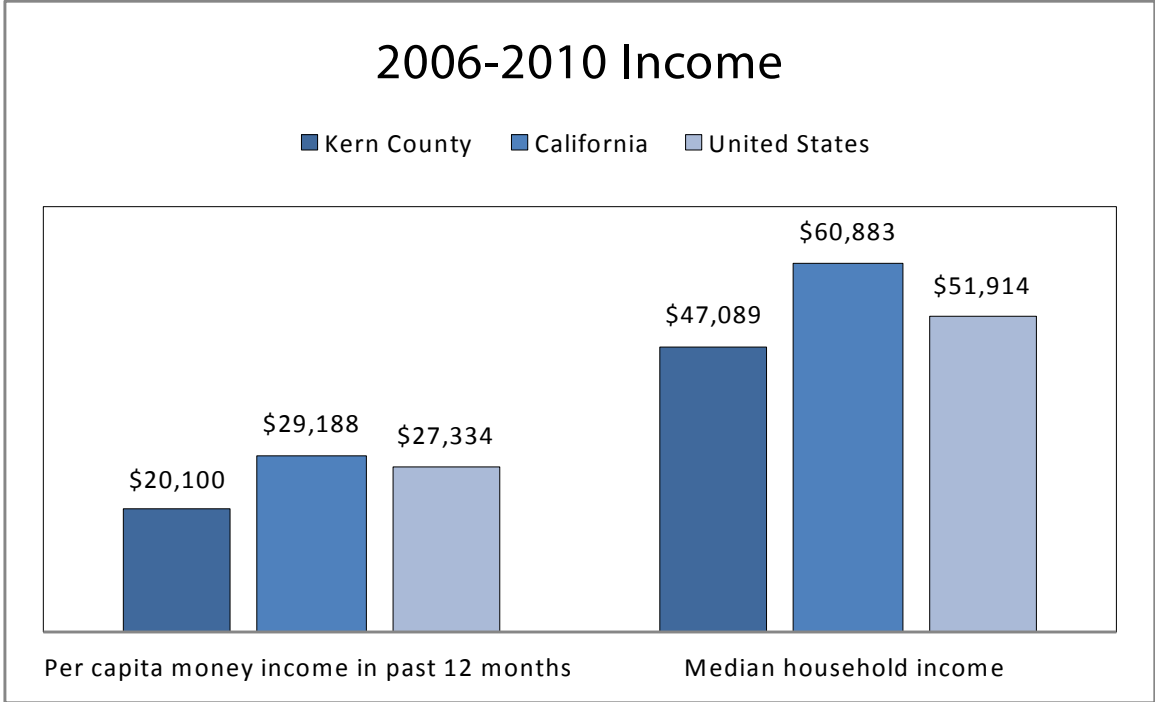
**Figure 8: Age by Percent of Total Population 2010**

Income



**Figure 9** displays per capita income in Kern County, the state of California and the United States comparatively. Kern County has less per capita income (\$20,100) and median household income (\$47,089) compared to California (\$29,188, \$60,883, respectively) and United States (\$27,334, \$51,914 respectively).

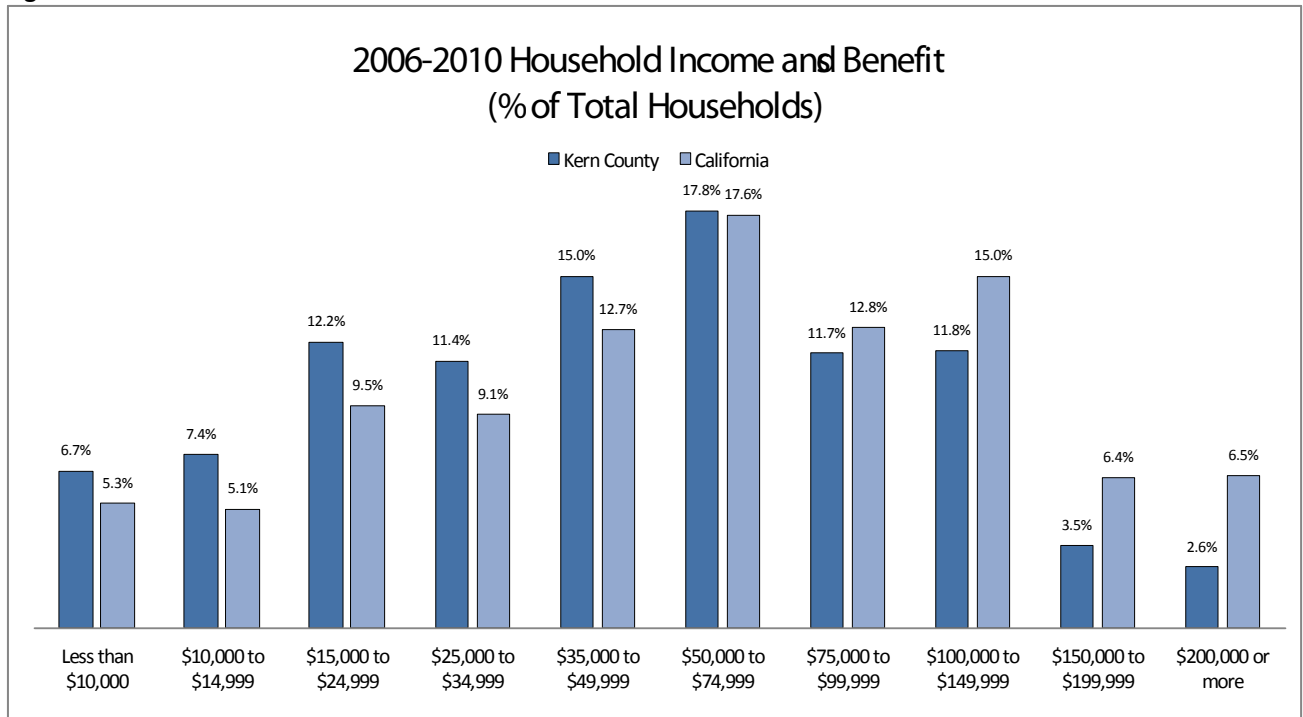
**Figure 9: 2006-2011 Per Capita and Household Income Comparison**





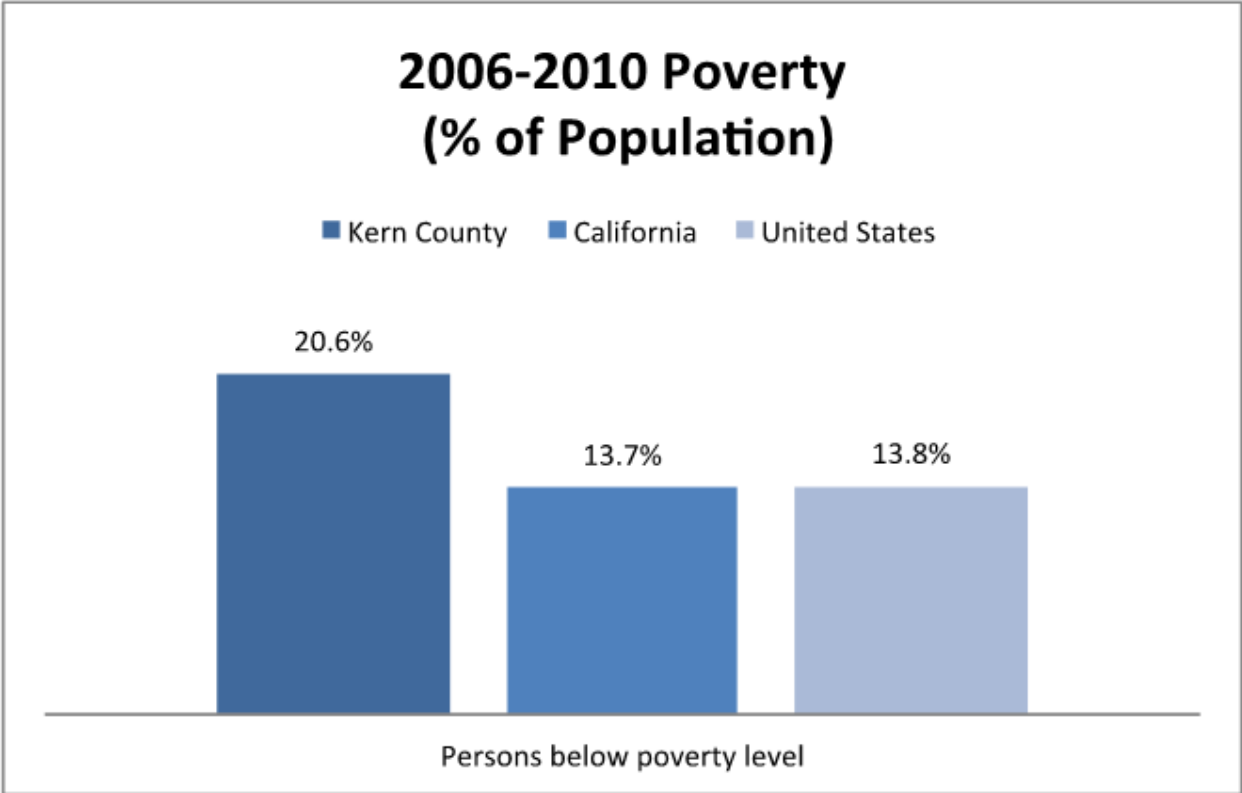
**Figure 10** shows that a greater proportion of Kern county households (52.7%) have an income under \$50,000 as compared to California overall (41.7%).

**Figure 10: 2006-2010 Household Income and Benefits**



**Figure 11** compares poverty rates of Kern County, California and the United States. Kern has a higher poverty rate (20.6%) compared to the state of California (13.7%) and the United States (13.8%)..

**Figure 11: 2006-2010 Poverty as a Percentage of Population**



## Race/Ethnicity

**Figure 12** summarizes race and ethnicity. The majority of the population of Kern identify themselves as white (83.0%). Those that identify as black make up 6.3%, similar to California at 6.6% but below the United States at a rate of 13.1%. Asians make up smaller proportion of the community (4.7%) compared to California (13.6%), but similar to the United States (5.0%).

**Figure 12: 2011 Race/Ethnicity**

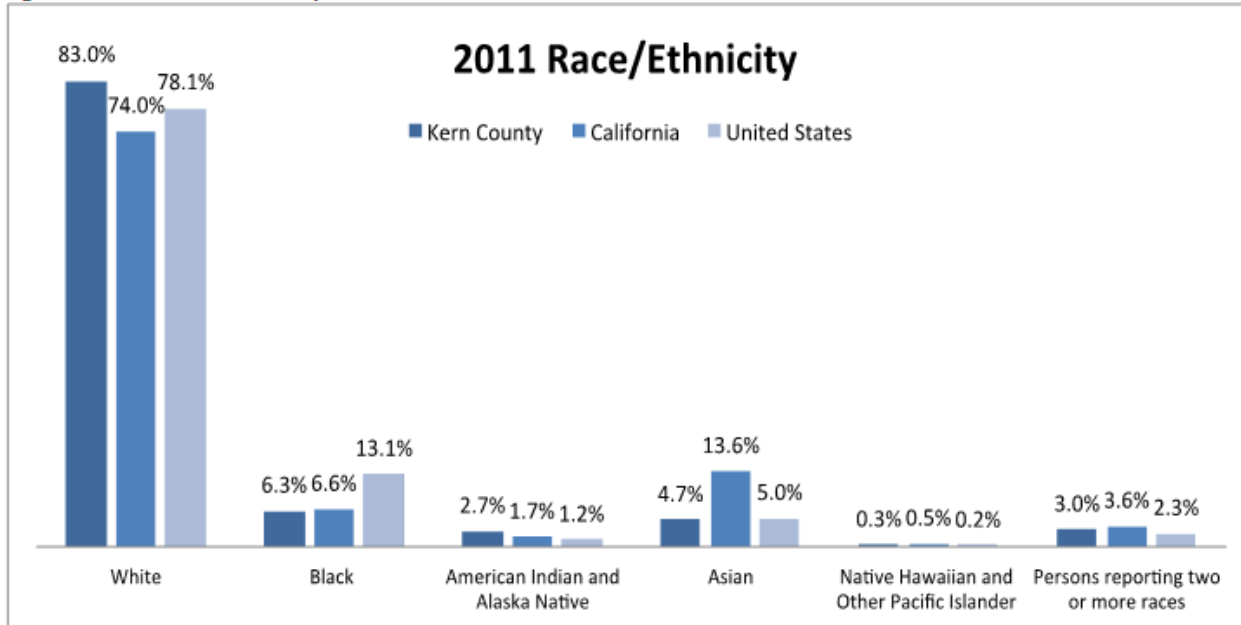
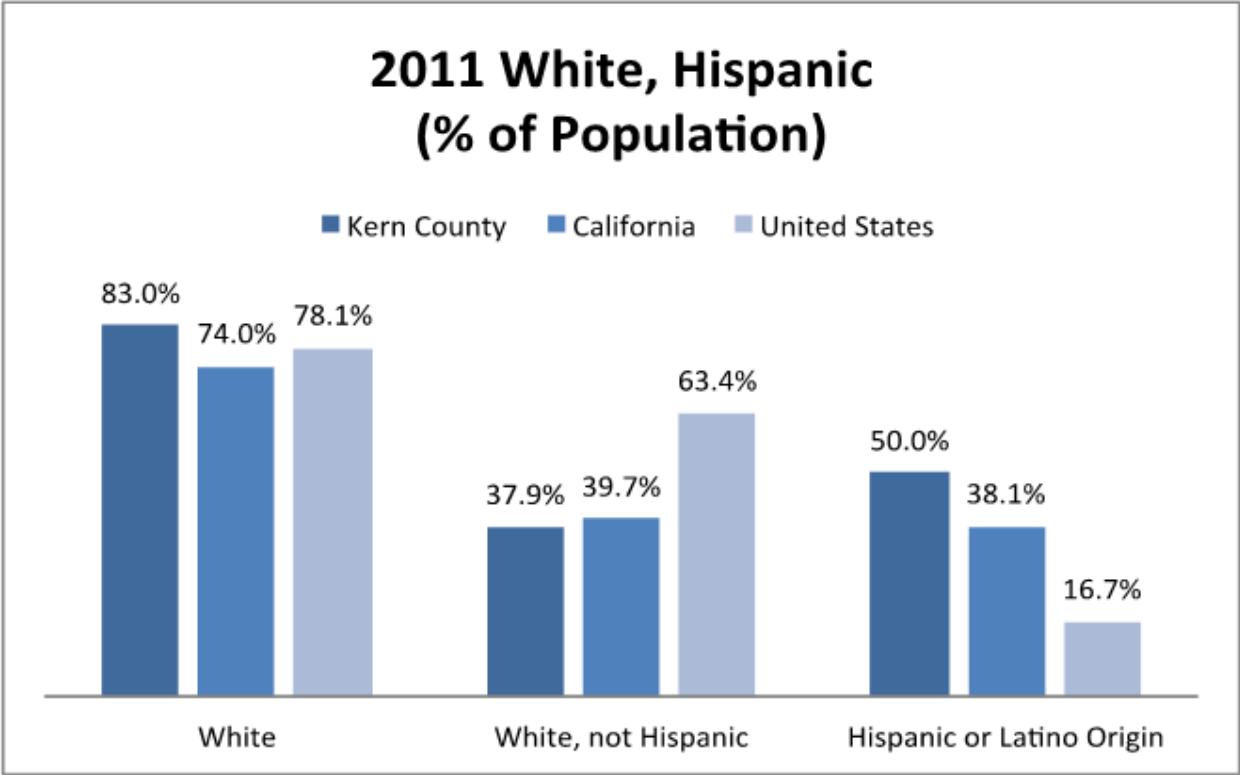


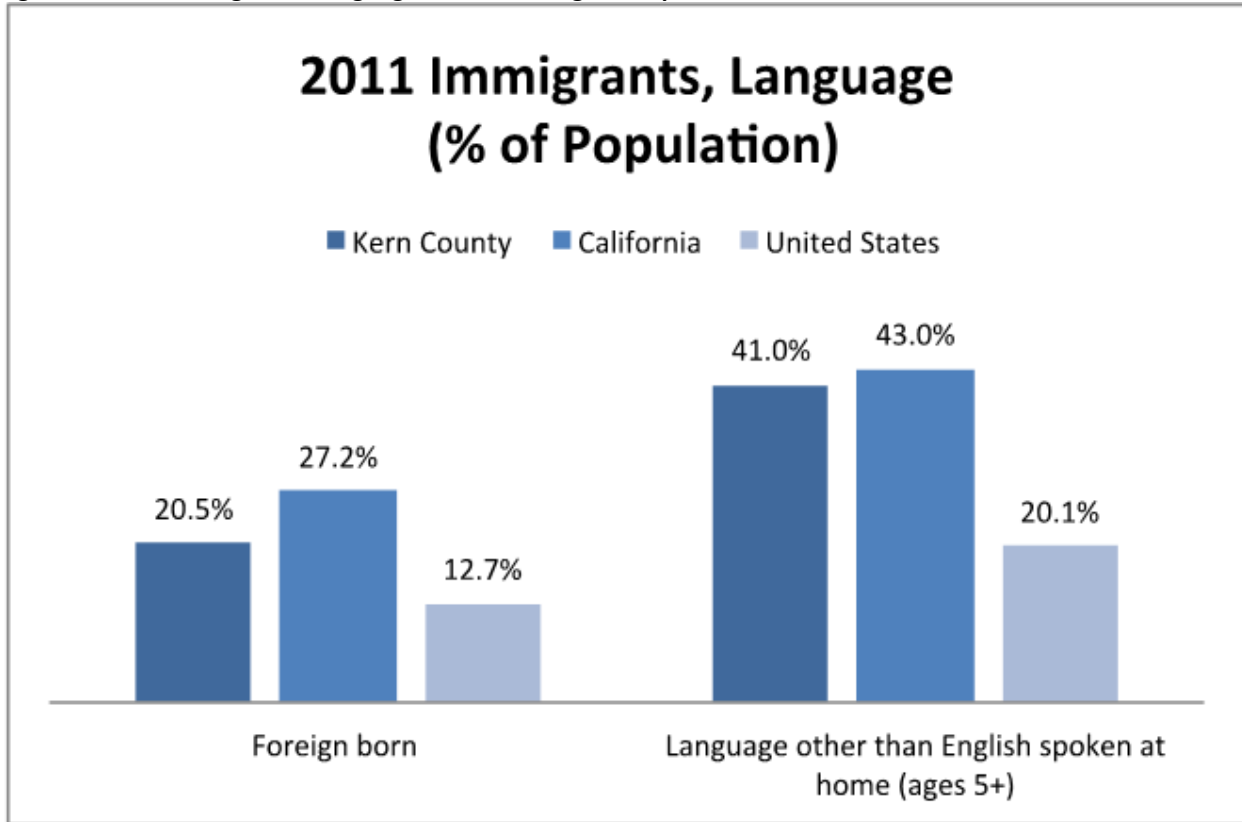
Figure 13 shows that Hispanics/Latinos make up a large proportion of the community (50%) compared to California (38.1%) and the United States (16.7%).

Figure 13: 2011 White, Hispanic as a Percentage of Population



**Figure 14** shows that there are fewer foreign born individuals (20.5%) compared to the state overall (27.2%) but greater than the US overall (12.7%). There is a high proportion of individuals 5 years or older who speak a language other than English at home (41%). This rate is similar to California (43%), but higher than United States (20.1%).

**Figure 14: 2011 Immigrants, Language as a Percentage of Population**



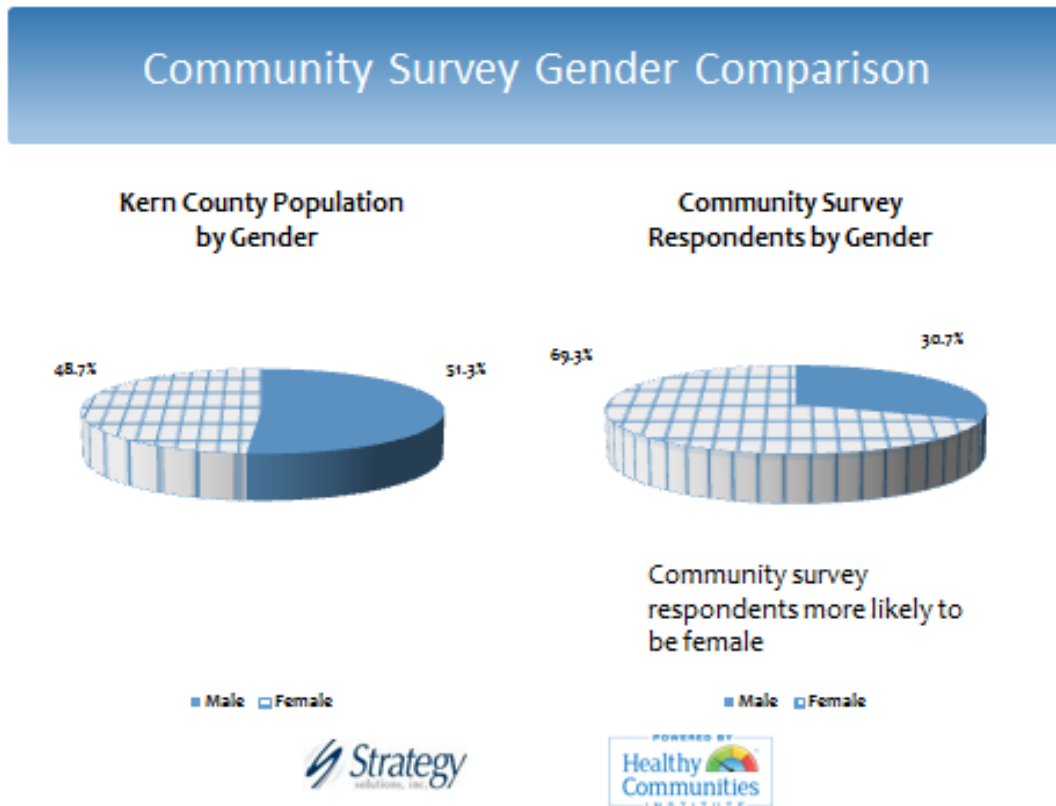
In summary, the key demographic findings of Kern County include:

- High proportion of youth
- High percentages of poverty
- Low per capita and household income levels
- High percentage of Hispanic/Latino persons
- High percentage of population that speaks a language other than English at home

## Community Survey Demographics

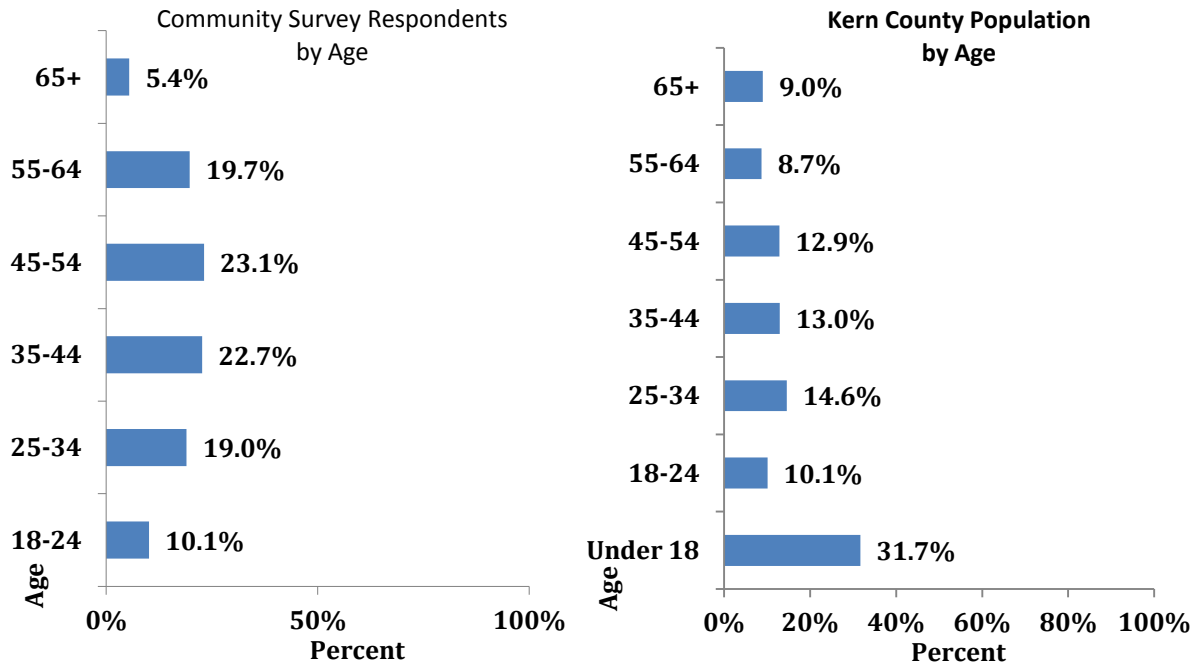
The Community Survey had a total of 970 respondents that were verified as residents of Kern County. **Figure 15** displays the Kern County population breakdown by Gender as compared to the community survey respondents by gender. 51.3% of the Kern County population is male while 30.7% of survey respondents are male. The Community survey respondents are more likely to be female.

**Figure 15: Gender Comparison**



**Figure 16** shows the breakdown of community survey respondents by age as compared to the Kern County population by age. 31.7% of the Kern County population is under the age of 18. All survey respondents were age 18 or older. 10.1% of survey respondents and 10.1% of the Kern County population are ages 18-24.

**Figure 16: Age Comparison**



**Figure 17** shows that a majority (54.9%) of survey respondents selected that they were married and 20.8% identified as never being married. This proportion was similar to the percentage (47.0%) of the Kern County population that is married.

**Figure 17: Marital Status**

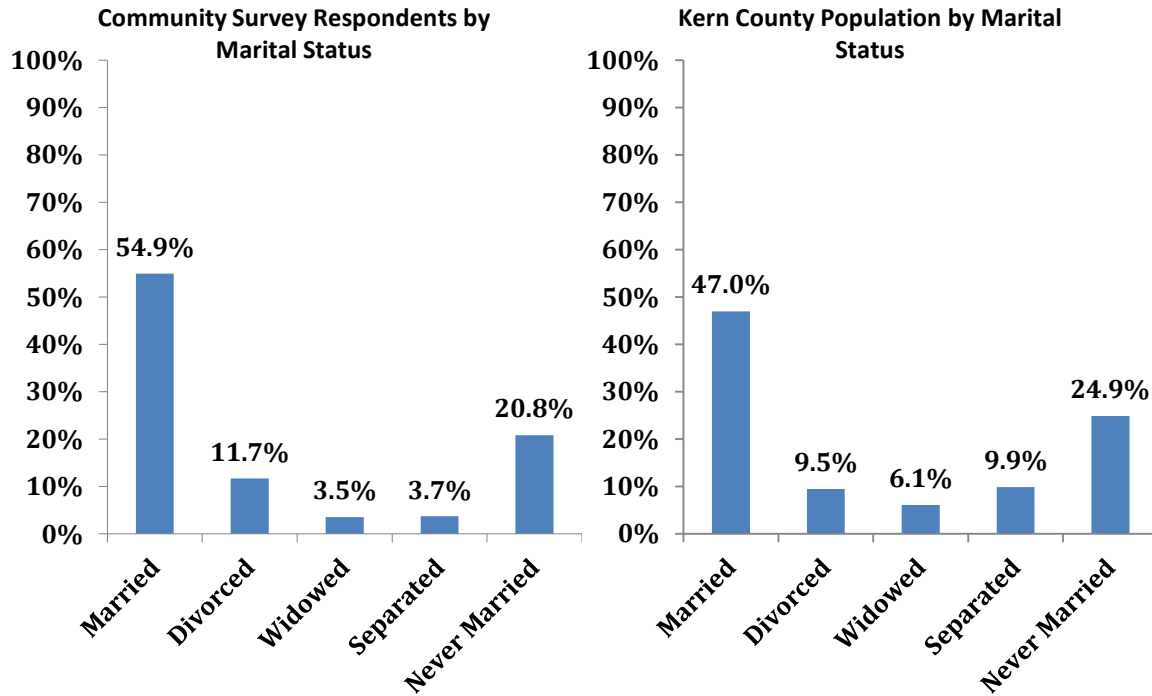




Figure 18 displays the employment status of community survey respondents as compared to the Kern County population. Survey respondents are more likely to be employed than county residents overall.

Figure 18: Employment Status

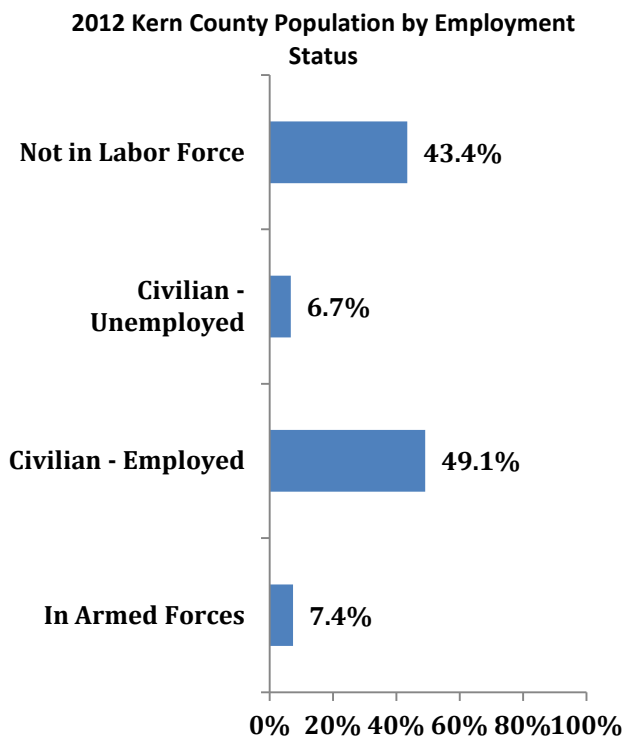
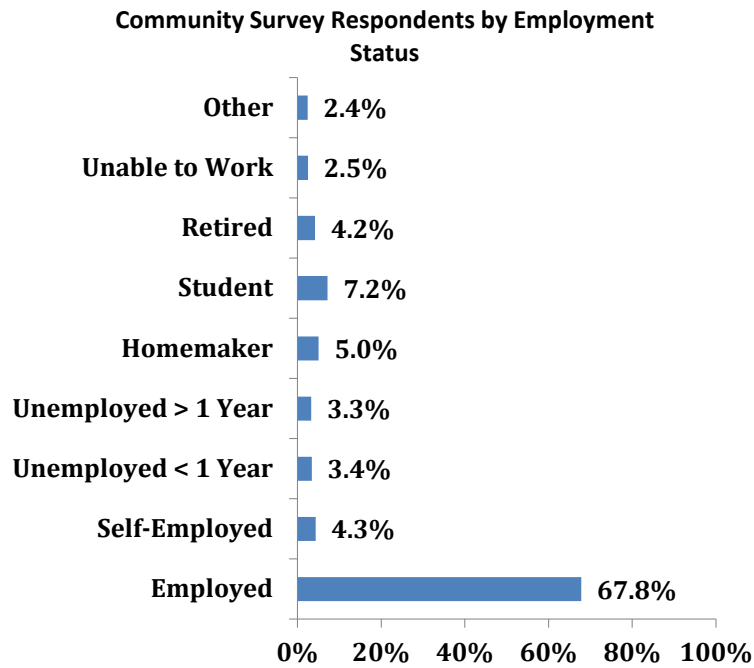
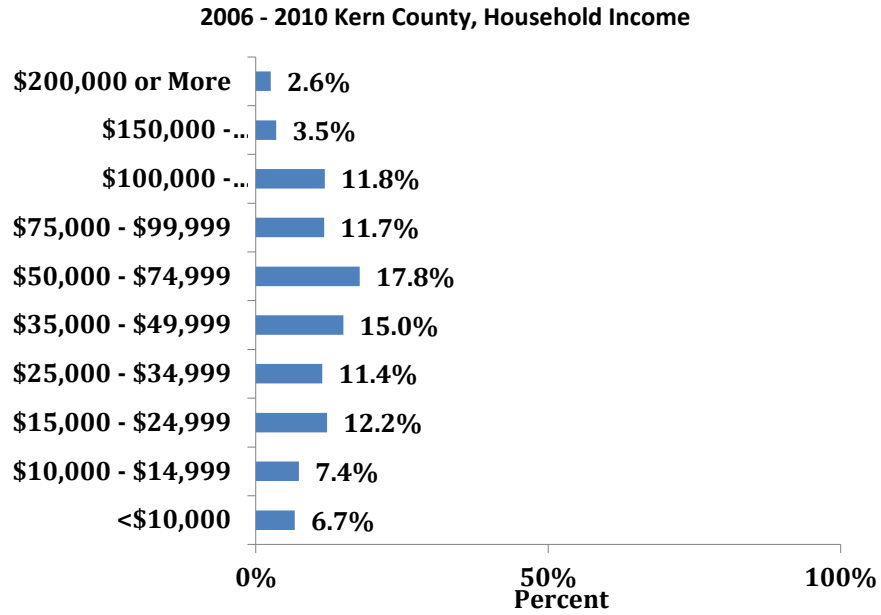


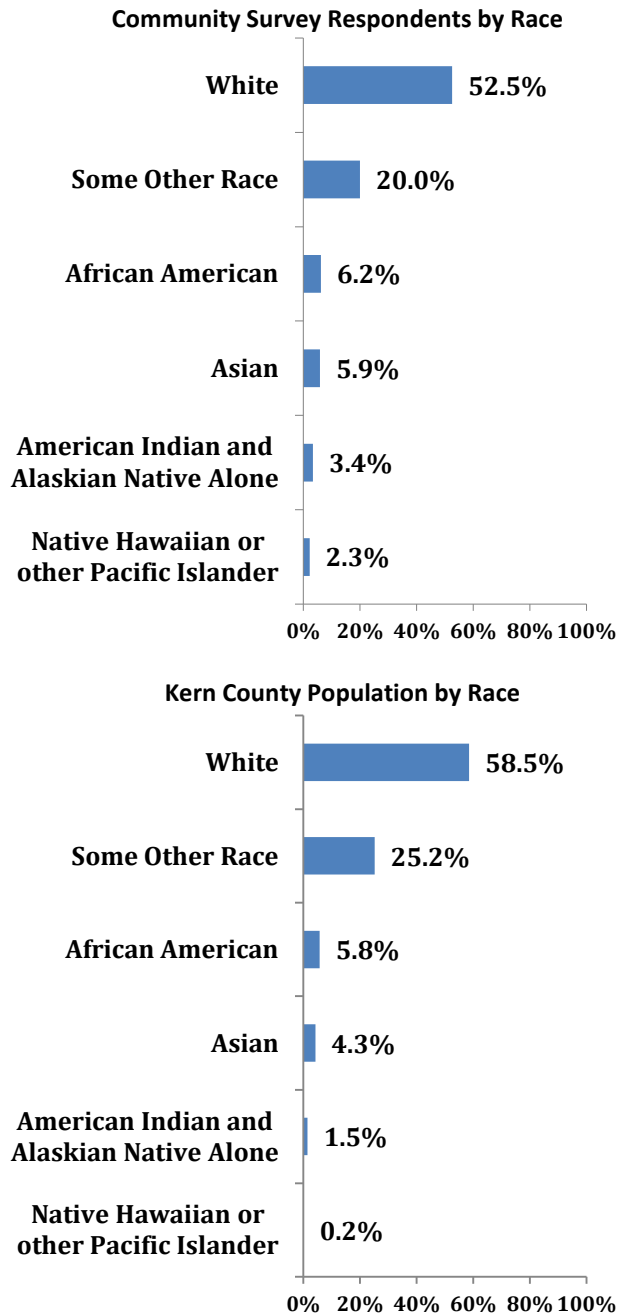
Figure 19 shows that the highest percentage (14.7%) of survey respondents is in the \$50,000-\$74,999 income range. Similarly, the highest percentage of Kern County household incomes falls within this range (17.8%).

Figure 19: Survey Respondent and Kern County Household Income



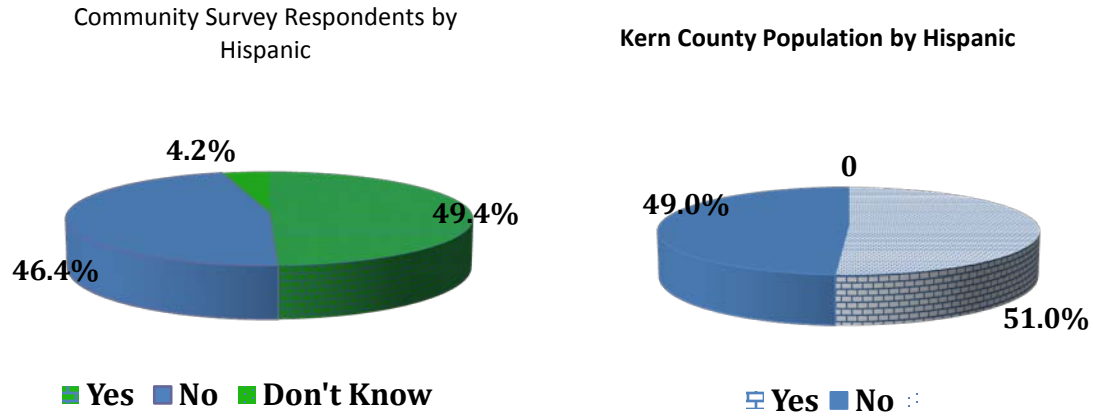
**Figure 20** shows that the highest percentage of survey respondents (52.5%) and the population of Kern County (58.5%) identify his/her race as white. A similar percentage of survey respondents (20.0%) identified themselves as some other race, which is comparable to the actual Kern County population (25.2%).

**Figure 20: Survey Respondents and Population by Race**



**Figure 21** shows that 51.0% of the Kern County population identifies as Hispanic while 49.4% of community survey respondents identified as Hispanic. This compares to the actual population that identifies themselves as Hispanic.

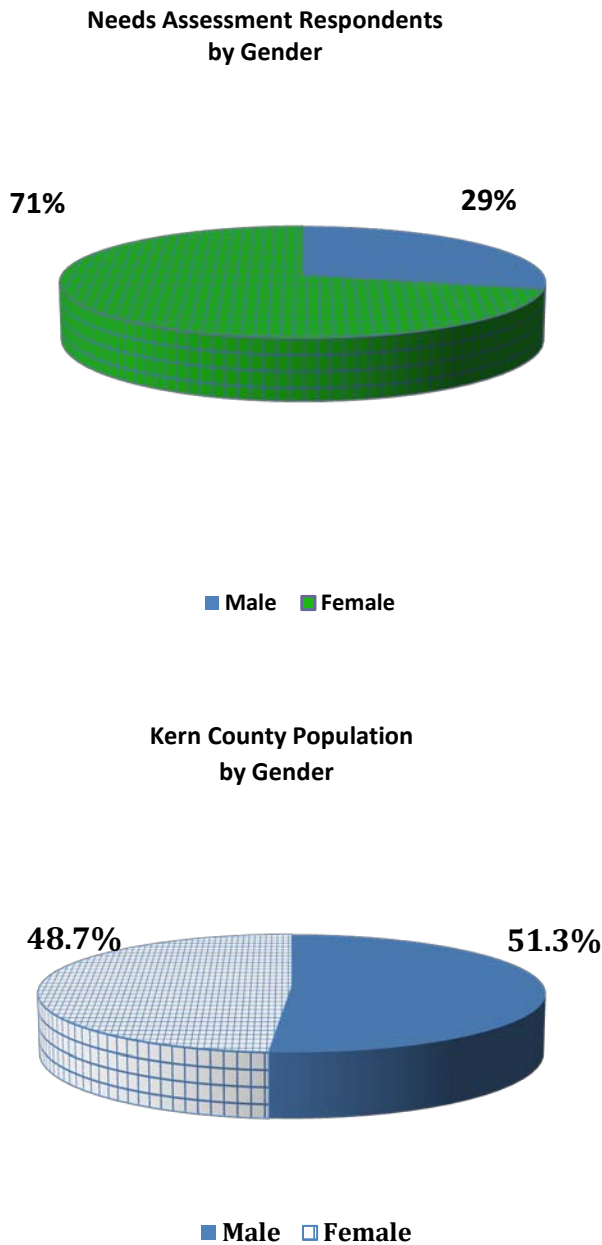
**Figure 21: Hispanic Comparison of Survey Respondents and Kern County Population**



## County Needs Assessment Demographics

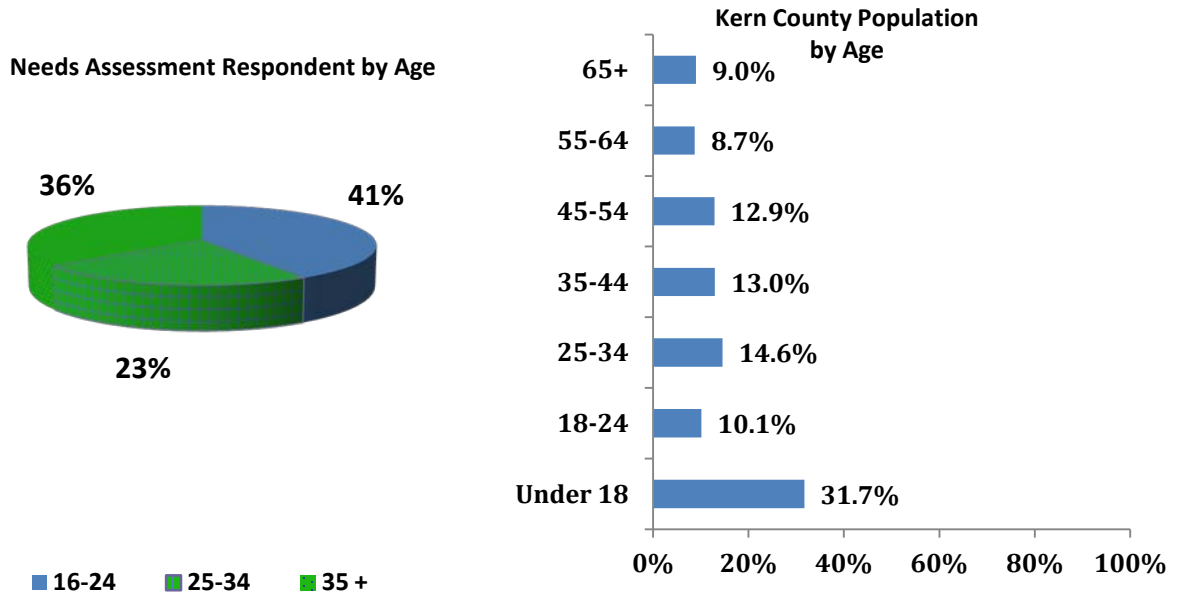
**Figure 22** displays the gender comparison of respondents of the County Needs Assessment and the Kern County population. Only 29% of County Needs Assessment respondents are male as compared to 51.3% of the population. County Needs Assessment respondents are more likely to be female.

**Figure 22: Needs Assessment Gender Comparison**



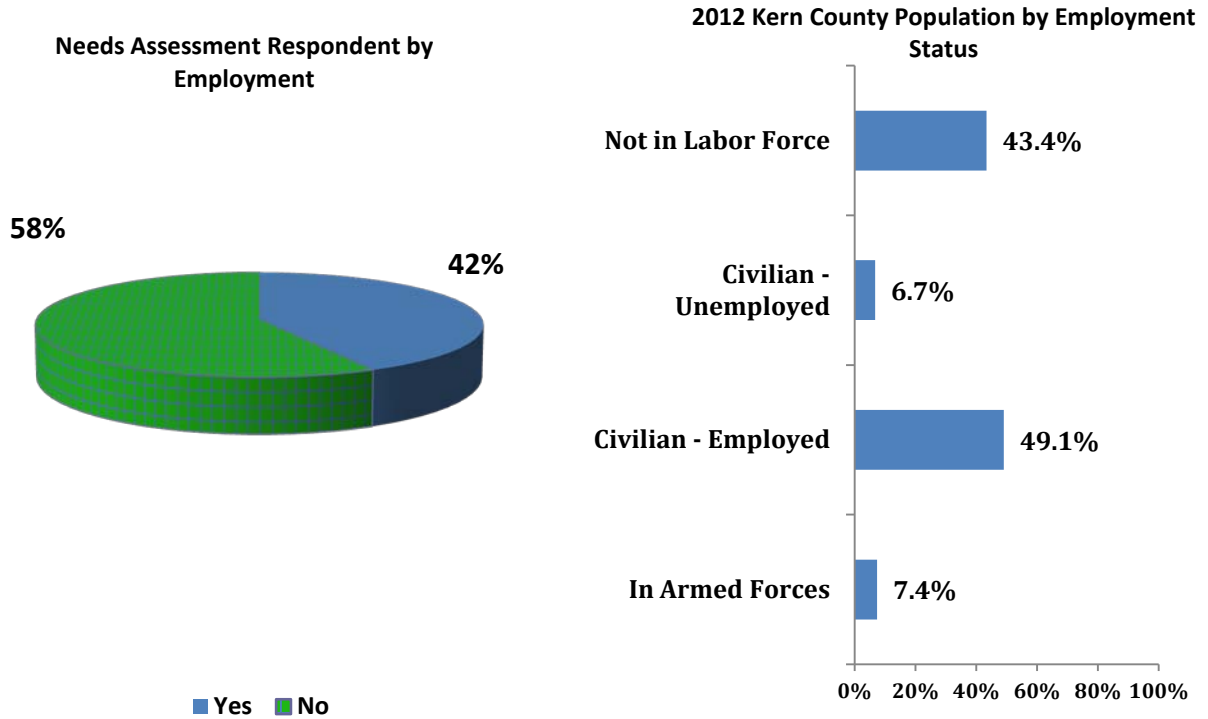
**Figure 23** displays the age comparison of needs assessment respondents and the Kern County population. The highest of the Kern County population (31.7%) is under the age of 18. The highest percentage (41%) of needs assessment respondents were between the ages of 16 -24.

**Figure 23: Needs Assessment Age Comparison**



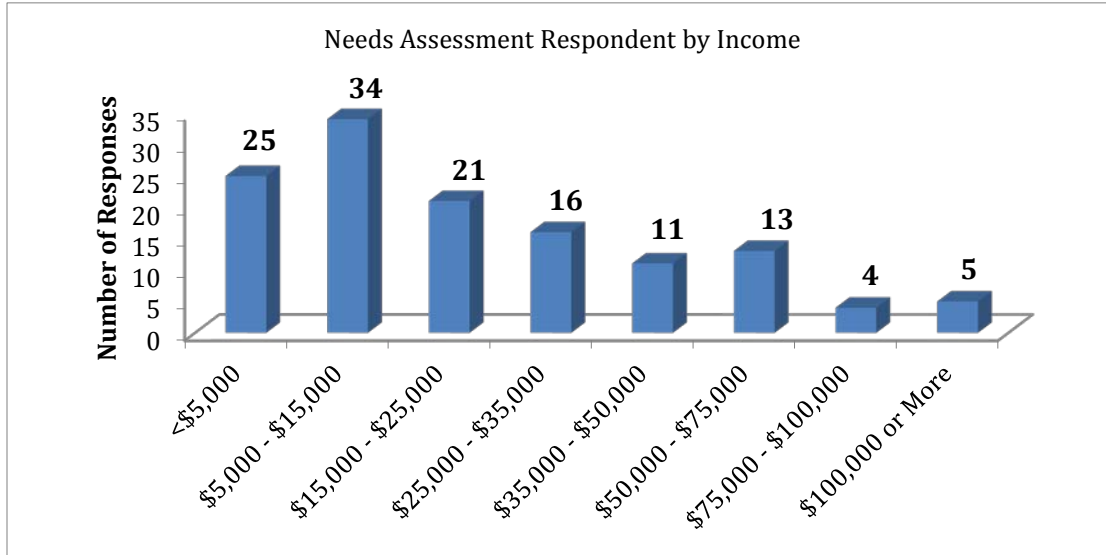
**Figure 24** shows the employment status of needs assessment respondents. Almost half (42%) of respondents are employed and comparatively, 49.1% of the Kern County population identify as employed. The majority (58%) of County Needs Assessment respondents are not employed.

**Figure 24: Needs Assessment Employment Comparison**

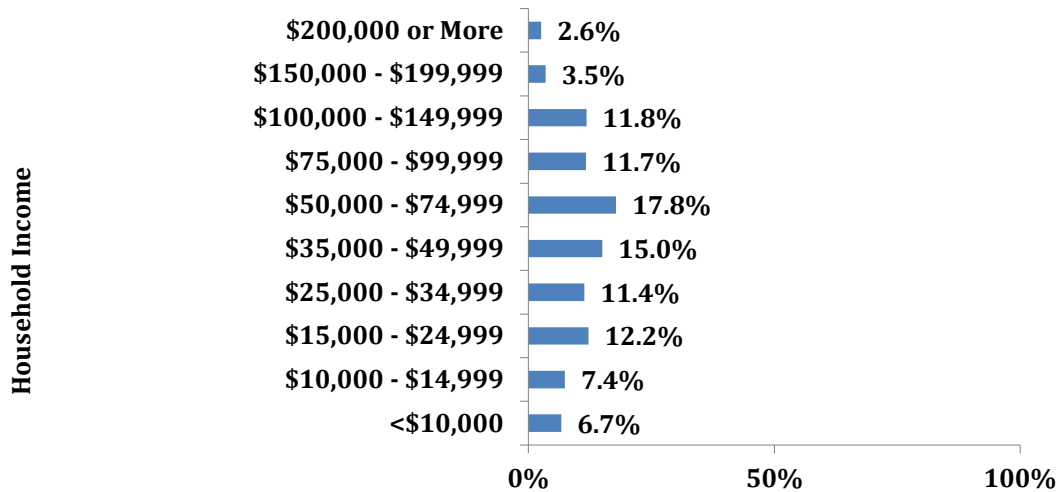


**Figure 25 and Figure 26** show the income comparison of the Needs Assessment respondents and the Kern County population. The highest number of the Needs Assessment respondents (34) reported earning \$5,000-\$15,000 annually while the highest percentage (17.8%) of Kern County households reported earning \$50,000-\$74,999 between 2006 and 2011. Needs assessment respondents are more likely to be low income than the county overall.

**Figure 25: Needs Assessment Respondent by Income**



**Figure 26: Kern County Household Income 2006-2010**





**Figure 27** shows a comparison of needs assessment respondents by race with the Kern County overall. The majority (72%) of needs assessment respondents identify as Hispanic while the majority of the Kern County population identifies as white (58.5%). Needs assessment respondents are more likely to be Hispanic.

**Figure 27: Needs Assessment Respondents by Race**

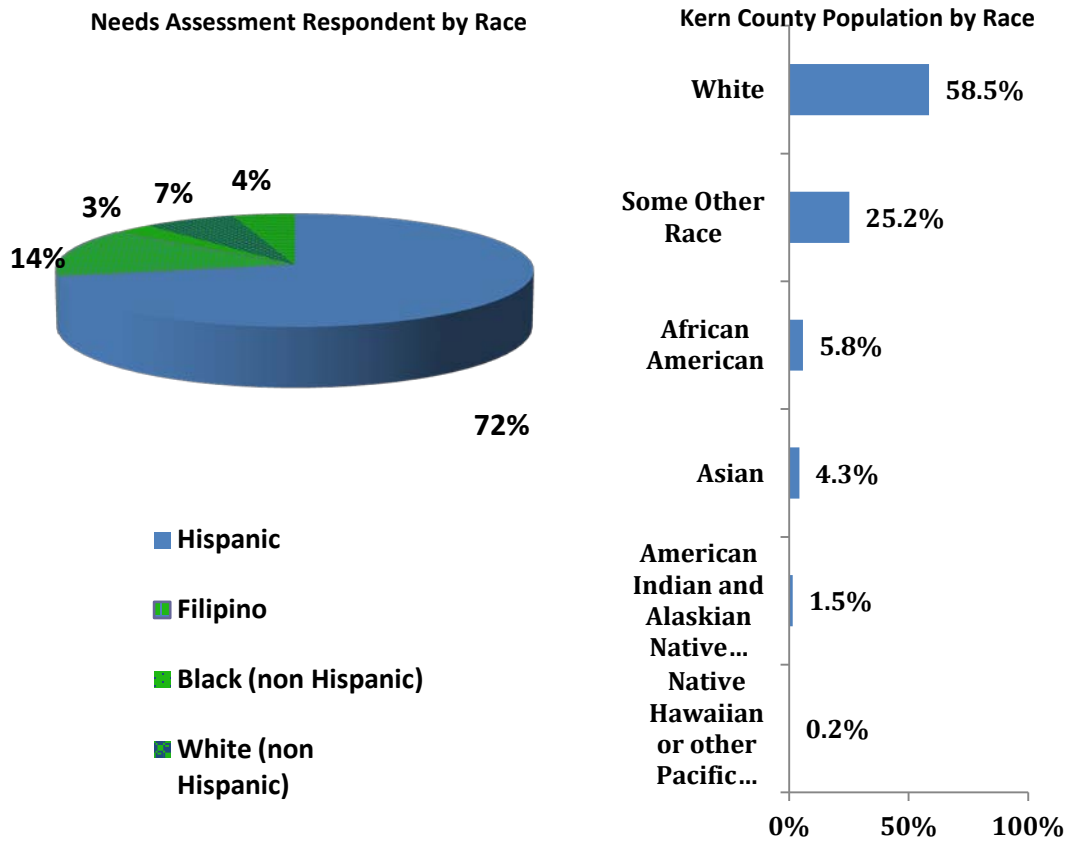
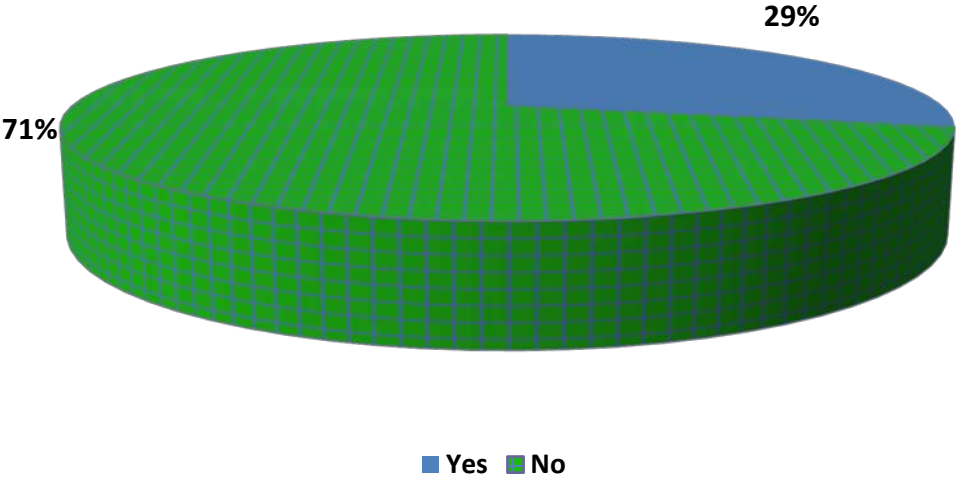


Figure 28 shows the percentage of needs assessment respondents who reported receiving AFDC, Food Stamps or SSI. Over a quarter (29%) of respondents reported receiving this assistance.

Figure 28: Needs Assessment Respondents Receiving Assistance



## Planning Participants

The Kern Community Benefit Collaborative members involved in the process included:

**Debbie Hull, Regional Director, Dignity Health – Mercy and Memorial Hospitals**  
**Felicia Barraza, Community Benefit CBISA Coordinator, Dignity Health – Mercy and Memorial Hospitals**  
**Jimmy Phillips, Senior Marketing Coordinator, Adventist Health – San Joaquin Community Hospital**  
**Jarrold McNaughton, Vice President, Adventist Health – San Joaquin Community Hospital**  
**Kristin Weber, Senior Community Benefit Specialist, Kaiser Permanente**  
**Kathie Wright, Director of Marketing, Delano Regional Medical Center**

The Healthy Communities Institute staff involved in this process included:

**Yelena Nedelko Meisel, MPH**, Director of Consulting Services, served as Research Manager and principal author of the secondary data analysis.  
**Will Douglas, BA**, Manager of Client Services, served as Project Manager for the Kern County CHNA and Account Manager for HealthyKern.org.  
**Ashley Carreira, MPH**, Project Coordinator, assisted with project coordination.  
**Rebecca Yae, BA**, Research Assistant, served as contributing editor to the secondary data analysis narrative.

The Strategy Solutions, Inc., consulting team that was involved in the project included:

**Debra Thompson, BS, MBA, President**, served as the Project Director and facilitated the Steering Committee meetings and prioritization process and conducted stakeholder interviews.  
**Jacqui Lanagan, BA, MS, Director of Nonprofit and Community Services**, designed and analyzed the community survey and conducted stakeholder interviews.  
**Erin Slattengren, BS, MPA, Consultant**, provided qualitative data analysis and drafted the final report.  
**Diane Peters, Project Coordinator**, provided logistics and scheduling coordination for the stakeholders and data entry for the community survey.  
**Melissa Rossi, Director of Operations**, provided editing and final report coordination support.  
**Connie Barringer, Project Coordinator**, provided data analysis support for the community survey and presentation support.  
**Laurel Swartz, Project Coordinator**, provided scheduling for and completed stakeholder interviews.  
**Ryan Shalek, BA, MA, Project Coordinator**, provided coordination assistance for writing the final report.  
**Aaron Loncki, Project Coordinator** provided report development and graphic design support.

## Community Assets

The following are existing health care facilities and resources within the community that are available to respond to the health needs of the community. The community resources are categorized into several major areas including Federal Qualified Health Centers, Hospitals, Ambulatory Surgery Centers, Community Mental Health Centers, Comprehensive Outpatient Rehab Facilities, End Stage Renal Disease Facilities, Home Health Agencies, Hospice Facilities, Outpatient Physical Therapy/Speech Therapy Facilities, Skilled Nursing Facilities, X-Ray Facilities and Rural Health Clinics.

This information is collected through the Centers for Medicare & Medicaid Services (CMS) Regional Offices. Please see <http://www.cms.gov/Research-Statistics-Data-and-Systems/Files-for-Order/NonIdentifiableDataFiles/ProviderofServicesFile.html> for more information.

TITLE	ADDRESS
<b>FEDERALLY QUALIFIED HEALTH CENTER</b>	
34TH STREET COMMUNITY HEALTH CENTER	2000 PHYSICIANS BOULEVARD BAKERSFIELD CA 93301
AMERICAN INDIAN COUNCIL OF CENTRAL CA	2210 CHESTER AVE, SUITE A BAKERSFIELD CA 93301
ARVIN COMMUNITY HEALTH CENTER	1305 BEAR MOUNTAIN BOULEVARD ARVIN CA 93203
BUTTONWILLOW HEALTH CENTER	277 E FRONT ST, PO BOX 917 BUTTONWILLOW CA 93206
CALIFORNIA AVENUE COMMUNITY HEALTH COMMUNITY HEALTH CENTER	601 CALIFORNIA AVENUE BAKERSFIELD CA 93304 3550 Q STREET, SUITE 304 BAKERSFIELD CA 93301
DELANO COMMUNITY HEALTH CENTER	1508 GARCES HIGHWAY DELANO CA 93215
DELANO FAMILY DENTAL & WOMEN'S HEALTH CENTER	1215 JEFFERSON STREET DELANO CA 93215
DELANO FAMILY MEDICAL CENTER	1001 MAIN STREET DELANO CA 93215
EAST BAKERSFIELD COMMUNITY HLTH CENTER	815 LAKEVIEW AVENUE BAKERSFIELD CA 93307
FRAZIER MOUNTAIN COMMUNITY HEALTH CTR	3545 MT PINOS, PO BOX 207 FRAZIER PARK CA 93225
JOY CARINO KIMPO WOMEN'S HEALTH CENTER	320 JAMES STREET SHAFER CA 93263
KERN RIVER HEALTH CENTER	67 EVANS ROAD, PO BOX 1062 WOFFORD HEIGHTS CA 93285
KERN VALLEY MEDICAL CENTER	6310 LAKE ISABELLA BLVD LAKE ISABELLA CA 93240
LAMONT COMMUNITY HEALTH CENTER	8787 HALL ROAD, BOX 457 LAMONT CA 93241
MCFARLAND COMMUNITY HEALTH CENTER	217 KERN AVENUE MC FARLAND CA 93250
NORTH OF THE RIVER COMMUNITY HEALTH CENTER	2525 NORTH CHESTER AVENUE BAKERSFIELD CA 93308
OILDALE COMMUNITY HEALTH CENTER	525 ROBERTS LANE BAKERSFIELD CA 93308
RIDGECREST COMMUNITY HEALTH CENTER	900 NORTH HERITAGE DRIVE, BUILDING E RIDGECREST CA 93555
ROSEDALE COMMUNITY HEALTH CENTER	3409 CALLOWAY, SUITE 300 BAKERSFIELD CA 93312
SHAFER COMMUNITY HEALTH	PO BOX 917 BUTTONWILLOW CA 93206
SOUTH BAKERSFIELD COMMUNITY HEALTH CENTER	2400 WIBLE ROAD, SUITE 14 BAKERSFIELD CA 93309
TAFT COMMUNITY MEDICAL AND DENTAL CENTER	1100 4TH STREET TAFT CA 93268
TEHACHAPI COMMUNITY MEDICAL & DENTAL CENTER	161 NORTH MILL STREET TEHACHAPI CA 93561
WASCO MEDICAL/DENTAL CENTER	2101 7TH STREET BLDGS A-F WASCO CA 93280
<b>HOSPITALS</b>	
US AIR FORCE HOSP	EDWARDS AFB EDWARDS CA 93523

US NAVAL HOSP	U S NAVAL ORDNANCE TEST STATION CHINA LAKE CA 93555
<b>PSYCHIATRIC</b>	
MEMORIAL CENTER	5201 WHITE LANE BAKERSFIELD CA 93309
MEMORIAL CENTER FOR BEHAVIORAL HEALTH	3600 SAN DIMAS STREET BAKERSFIELD CA 93301
<b>REHABILITATION</b>	
HEALTHSOUTH BAKERSFIELD REHAB HOSPITAL	5001 COMMERCE DRIVE BAKERSFIELD CA 93309
<b>SHORT TERM</b>	
BAKERSFIELD HEART HOSPITAL	3001 SILLECT AVENUE BAKERSFIELD CA 93308
DELANO REGIONAL MEDICAL CENTER	1401 GARCES HIGHWAY DELANO CA 93215
GOOD SAMARITAN HOSPITAL	901 OLIVE DRIVE BAKERSFIELD CA 93308
KERN MEDICAL CENTER	1700 MOUNT VERNON AVENUE BAKERSFIELD CA 93306
KERN VALLEY HEALTHCARE DISTRICT	6412 LAUREL AVE LAKE ISABELLA CA 93240
MEMORIAL HOSPITAL	420 34TH ST BOX 1888 BAKERSFIELD CA 93301
MERCY HOSPITAL DOWNTOWN	2215 TRUXTUN AVENUE BAKERSFIELD CA 93301
MERCY HOSPITAL SOUTHWEST	400 OLD RIVER ROAD BAKERSFIELD CA 93311
NORTH KERN HOSPITAL	2101 7TH ST WASCO CA 93280
RIDGECREST REGIONAL HOSPITAL	1081 NORTH CHINA LAKE BLVD RIDGECREST CA 93555
SAN JOAQUIN COMMUNITY HOSPITAL	2615 CHESTER AVENUE BAKERSFIELD CA 93301
TEHACHAPI HOSPITAL	115 WEST E STREET TEHACHAPI CA 93561
<b>AMBULATORY SURGICAL CENTER</b>	
ADVANCED ENDOSCOPY CENTER	3737 SAN DIMAS STREET, SUITE 102A BAKERSFIELD CA 93301
ALLIANCE SURGERY CENTER LP	2525 EYE STREET, SUITE A BAKERSFIELD CA 93301
APPLE SURGERY CENTER, INC	9870 BRIMHALL ROAD, SUITE 200 BAKERSFIELD CA 93312
BAHAMAS SURGERY CENTER, LLC	2400 BAHAMAS DRIVE, SUITE 100 BAKERSFIELD CA 93309
BAKERSFIELD ENDOSCOPY CENTER	1408 COMMERCIAL WAY BAKERSFIELD CA 93309
BAKERSFIELD SURGERY CENTER	2120 19TH STREET BAKERSFIELD CA 93301
CBCC PAIN MEDICINE & SURGERY CENTER, INC	6501 TRUXTUN AVENUE, SUITE 190 BAKERSFIELD CA 93309
CHINA LAKE SURGERY CENTER, LLC	1111 NORTH CHINA LAKE BLVD, NO 2A RIDGECREST CA 93555
EMPIRE SURGERY CENTER	4101 EMPIRE DRIVE, SUITE 130 BAKERSFIELD CA 93309
GOLDEN EMPIRE SURGICAL CENTER	1519 GARCES HIGHWAY, SUITE 103 DELANO CA 93215
GOLDEN STATE EYE CENTER	1001 TOWER WAY BAKERSFIELD CA 93307
HEALING ARTS SURGERY CENTER	2700 F STREET, SUITE 101 BAKERSFIELD CA 93301
MILLENNIUM SURGERY CENTER, INC	9300 STOCKDALE HIGHWAY, SUITE 200 BAKERSFIELD CA 93311
NORTHWEST SURGERY CENTER, INC	8325 BRIMHALL ROAD, SUITE 101 BAKERSFIELD CA 93312
PACIFIC COAST SURGICAL CENTER #7, LLC	1519 GARCES HIGHWAY SUITE 101 DELANO CA 93215
PACIFIC DENTAL SURGERY CENTER	820 34TH STREET SUITE 201 BAKERSFIELD CA 93301
PAIN MEDICINE CENTER OF BAKERSFIELD	2120 19TH STREET BAKERSFIELD CA 93301
PHYSICIANS PLAZA SURGICAL CTR	6000 PHYSICIANS BLVD BAKERSFIELD CA 93301
RIVERLAKES SURGERY CENTER LLC	7508 MEANY AVENUE, SUITE B BAKERSFIELD CA 93308
SOUTHWEST SURGICAL CENTER	201 NEW STINE ROAD SUITE 130 BAKERSFIELD CA 93309
STOCKDALE SURGERY CENTER, LLC	9802 STOCKDALE HIGHWAY, SUITE 104 BAKERSFIELD CA 93311
SURGICARE SURGERY CENTER	4850 COMMERCE DRIVE, SUITE 200 BAKERSFIELD CA 93309
TEHACHAPI SURGERY CENTER, INC	20960 SAGE LANE TEHACHAPI CA 93561

TRUXTUN SURGERY CENTER, INC	4260 TRUXTUN AVENUE SUITE 120 BAKERSFIELD CA 93309
<b>COMMUNITY MENTAL HEALTH CENTER</b>	
KERN COUNTY MENTAL HEALTH DEPARTMENT	2151 COLLEGE AVE BAKERSFIELD CA 93306
<b>COMPREHENSIVE OUTPATIENT REHAB FACILITY</b>	
BAKERSFIELD THERAPY CENTER	6001-C TRUXTUN AVENUE, SUITE 380 BAKERSFIELD CA 93309
KERN REHAB, INC	7420 DISTRICT BOULEVARD, SUITE B BAKERSFIELD CA 93313
LIFE LINE THERAPY	1902 B STREET, SUITE B BAKERSFIELD CA 93301
<b>END STAGE RENAL DISEASE FACILITY</b>	
BAKERSFIELD BRIMHALL DIALYSIS	8501 BRIMHALL ROAD, BLD 500 BAKERSFIELD CA 93311
BAKERSFIELD DIALYSIS CENTER	5143 OFFICE PARK DRIVE BAKERSFIELD CA 93309
BIOMEDICAL COMMUNITY DIALYSIS CTR	2431 F STREET BAKERSFIELD CA 93301
DELANO DIALYSIS	905 MAIN STREET DELANO CA 93215
FRESENIUS MEDICAL CARE OF BAKERSFIELD	8625 LIBERTY PARK SUITE 102 BAKERSFIELD CA 93311
INDIAN WELLS VALLEY	212 SOUTH RICHMOND ROAD RIDGECREST CA 93555
MERCY HOSPITAL ESRD	2215 TRUXTUN AVENUE BAKERSFIELD CA 93302
NORTHEAST DIALYSIS	3761 MALL VIEW ROAD BAKERSFIELD CA 93306
PEGASUS DIALYSIS, LLC	3101 PEGASUS DRIVE SUITE 100 BAKERSFIELD CA 93308
WHITE LANE DIALYSIS	7701 WHITE LANE, SUITE D BAKERSFIELD CA 93309
<b>HOME HEALTH AGENCY</b>	
ADVENTIST HEALTH HOME CARE SERVICES - BAKERSFIELD	2800 K STREET, SUITE A BAKERSFIELD CA 93301
AMERICAN HEALTH ASSOCIATES INC	930 OAK STREET BAKERSFIELD CA 93304
BAKERSFIELD HOME HEALTH	4300 STINE ROAD, SUITE 700 BAKERSFIELD CA 93313
BEVERLY HOME HLTH AGENCY	3601 SAN DIMAS BAKERSFIELD CA 93301
CAL MED HOME CARE	4300 STINE ROAD SUITE 890 BAKERSFIELD CA 93313
CAL-MED HOME CARE, INC	4300 STINE ROAD SUITE 890 BAKERSFIELD CA 93313
CASHA RESOURCE HOME HEALTH SERVICE INC	200 NEW STINE RAOD SUITE 110 BAKERSFIELD CA 93309
DEPENDABLE HOME HEALTH, INC	1223 SABOVICH STREET, NO 79 MOJAVE CA 93501
GIFTED ARMS HOME HEALTHCARE SERVICES	1701 WESTWIND DRIVE, SUITE 106 BAKERSFIELD CA 93301
HOFFMAN SPECIALIZED HOMECARE	1013 COLUMBUS STREET BAKERSFIELD CA 93305
IN-HOME HEALTH SOLUTIONS PHARMACY, INC	1607 SOUTH H STREET BAKERSFIELD CA 93304
KERN MEDICAL CENTER IN-HOME CARE	1111 COLUMBUS AVENUE, SUITE 2000 BAKERSFIELD CA 93305
KERN VALLEY HOSP HHA	12304 MT MESA ROAD PO BOX 1628 LAKE ISABELLA CA 93240
KERN VALLEY HOSP HOME HEALTH AGENCY	6500 DOGWOOD, RT 1, BOX 152 LAKE ISABELLA CA 93240
M B HEALTH SERVICES	250 E TULARE AVE SHAFTER CA 93263
MAXIM HEALTHCARE SERVICES, INC	5100 CALIFORNIA AVENUE, SUITE 110 BAKERSFIELD CA 93309
MERCY-MEMORIAL HOME HEALTH	1600 D STREET, SUITE 202 BAKERSFIELD CA 93301
OPTIMAL HOME HEALTH	1315 BOUGHTON DR BAKERSFIELD CA 93308
REGIONAL HEALTH SERVICES	1205 GARCES HIGHWAY, STE 302 DELANO CA 93215
RIDGECREST REGIONAL HOSPITAL HOME HEALTH AGENCY	1653 TRIANGLE DRIVE RIDGECREST CA 93555
SANDERSON'S HOME HEALTH AGENCY	720 NORTH NORMA STREET, SUITE E RIDGECREST CA 93555
ST JOHN'S HOME HEALTH CARE CENTER	4800 STOCKDALE HIGHWAY, SUITE 209 BAKERSFIELD CA 93309
VALLEY CARE HHA INC	1201 JEFFERSON, STE 2 DELANO CA 93215

VALLEY CARE HHA INC BRANCH	208 GOODMAN ST BAKERSFIELD CA 93305
VISITING NURSE SERVICE INC	1701 WESTWIND DRIVE SUITE 122 BAKERSFIELD CA 93301
WEST SIDE DISTRICT HOSPITAL HOME HLTH	110 EAST NORTH STREET TAFT CA 93268

**HOSPICE**

KERN HOSPICE	4300 STINE ROAD, SUITE 720 BAKERSFIELD CA 93313
ODYSSEY HEALTHCARE OF BAKERSFIELD	5001 E COMMERCENTER DRIVE, SUITE 140 BAKERSFIELD CA 93309
OPTIMAL HOSPICE CARE	1675 CHESTER AVENUE, SUITE 401 BAKERSFIELD CA 93301
PROCARE HOSPICE BAKERSFIELD	1400 EASTON DRIVE #121 BAKERSFIELD CA 93309
RIDGECREST REGIONAL HOSPICE	1653 TRIANGLE DRIVE, SUITE B RIDGECREST CA 93555

**OUTPATIENT PHYSICAL THERAPY/SPEECH PATHOLOGY**

ALLCARE THERAPY SERVICE	330 EAST RIDGECREST BLVD SUITE D RIDGECREST CA 93555
ASSOCIATED REHAB THERAPISTS	2630 F ST BAKERSFIELD CA 93301
EASTON AND MORAN PHYSICAL THERAPY INC	2301 F STREET BAKERSFIELD CA 93301
GLINN & GIORDANO PHYSICAL THER	501 40TH ST, BLDG A BAKERSFIELD CA 93381
HERITAGE PHYSICAL THERAPY	540 PERDEW, SUITE C RIDGECREST CA 93555
INNOVATIVE SENIOR CARE AT GLENWOOD GARDENS	350 CALLOWAY DRIVE BAKERSFIELD CA 93312
LAKE VIEW REHAB CTR	13 SYCMORE DRIVE WOFFORD HEIGHTS CA 93285
REHAB AND WELLNESS CTR OF BAKERSFIELD	2920 F STREET, SUITE A-2 BAKERSFIELD CA 93301
SOUTHCOAST REHAB ASSOCIATES	3535 SAN DIMAS, NO 6 BAKERSFIELD CA 93301
SOUTHCOAST REHABILITATION ASSOCIATES	1800 WESTWIND #107 (PRIMARY SITE) BAKERSFIELD CA 93309
WESTCHESTER REHABILITATION AGENCY	1731 27TH ST BAKERSFIELD CA 93301

**NURSING/SKILLED NURSING/INTERMEDIATE CARE FACILITY-MENTALLY RETARDED**

**TITLE 18 ONLY**

HEALTHSOUTH BAKERSFLD REHAB HSP DP/SNF	5001 COMMERCE DRIVE BAKERSFIELD CA 93309
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**TITLE 18/19**

BAKERSFIELD CONV HOSP	730 34TH ST BAKERSFIELD CA 93301
BAKERSFIELD HEALTHCARE CENTER	730 34TH STREET BAKERSFIELD CA 93301
BROWNING MANOR CONVALESCENT HOSPITAL	729 BROWNING ROAD DELANO CA 93215
CORINTHIAN GARDENS HEALTH CARE CENTER	1611 HEIGHT STREET BAKERSFIELD CA 93305
DELANO DISTRICT SKILLED NURSING FACILITY	1509 TOKAY STREET DELANO CA 93215
DELANO REGIONAL MEDICAL CENTER	1401 GARCES HWY DELANO CA 93215
EMMANUEL CONV - SAN JOAQUIN	1611 HEIGHT STREET BAKERSFIELD CA 93309
EVERGREEN ARVIN HEALTHCARE	323 CAMPUS DRIVE ARVIN CA 93203
EVERGREEN BAKERSFIELD POST ACUTE CARE	6212 TUDOR WAY BAKERSFIELD CA 93306
GLENWOOD GARDENS SNF	350 CALLOWAY DRIVE, BUILDING C BAKERSFIELD CA 93312
GOLDEN LIVINGCENTER - BAKERSFIELD	3601 SAN DIMAS BAKERSFIELD CA 93301
GOLDEN LIVINGCENTER - SHAFTER	140 EAST TULARE AVENUE SHAFTER CA 93263
GOLDEN STATE MANOR CONVALESCENT HOSP	730 34TH ST BAKERSFIELD CA 93301
HILLTOP CONV HOSP	1601 HEIGHT ST BAKERSFIELD CA 93305
KERN VALLEY HEALTHCARE DISTRICT DP SNF	6412 LAUREL AVE LAKE ISABELLA CA 93240
MANOR LODGE CONV HOSP	2607 MT VERNON AVE BAKERSFIELD CA 93306

PARKVIEW JULIAN CONVALESCENT	1801 JULIAN AVENUE BAKERSFIELD CA 93304
PARKVIEW REAL CONV HOSP	329 N REAL RD BAKERSFIELD CA 93309
RIDGECREST HEALTHCARE CENTER	1131 N. CHINA LAKE BLVD. RIDGECREST CA 93555
ROSEWOOD HEALTH FACILITY	1401 NEW STINE ROAD BAKERSFIELD CA 93309
SAN JOAQUIN COMM HOSP D P SNF	2615 EYE STREET BAKERSFIELD CA 93303
THE REHABILITATION CENTER OF BAKERSFIELD	2211 MOUNT VERNON AVENUE BAKERSFIELD CA 93306
VALLEY CONV HOSP	1205 8TH ST BAKERSFIELD CA 93304
WEST SIDE DISTRICT HOSP & NURSING HOME	111 WEST ASH STREET TAFT CA 93268
<b>TITLE 19 ONLY</b>	
ALTAVILLE III	6800 COLUMBIA LANE BAKERSFIELD CA 93309
ALTAVILLE VII ICF-DD-N	4304 CHARTER OAK BAKERSFIELD CA 93309
BETHESDA LUTHERAN COMMUNITIES-CHARLEVILLE	5704 CHARLEVILLE LANE BAKERSFIELD CA 93312
BETHESDA LUTHERAN COMMUNITIES-LAKE SUPERIOR	9613 LAKE SUPERIOR DRIVE BAKERSFIELD CA 93312
BETHESDA LUTHERAN COMMUNITIES-PERRIS	4513 PERRIS WAY BAKERSFIELD CA 93309
CRESTWOOD MANOR	6600 EUCALYPTUS DRIVE BAKERSFIELD CA 93306
GOLDEN HARVEST - HEWLETTE	504 HEWLETTE BAKERSFIELD CA 93309
GOLDEN HARVEST ICF/DDN/HALIFAX	5614 HALIFAX BAKERSFIELD CA 93309
GOLDEN HARVEST-DAGGETT	5801 DAGGETT BAKERSFIELD CA 93309
GRIFFITH PLACE	1371 GRIFFITH AVENUE WASCO CA 93280
JUDE GIBEAULT GROUP HOME	151 N BRADY AVE RIDGECREST CA 93555
KELLY & SCOTT'S CARE HOME	2212 5TH DRIVE DELANO CA 93215
KELLY & SCOTT'S CARE HOME INC #2	1324 5TH PLACE DELANO CA 93215
KERN CARE CENTER	6600 EUCALYPTUS DRIVE BAKERSFIELD CA 93306
LOYD'S LIBERTY HOMES, INC-CHARTER OAK	4304 CHARTER OAK BAKERSFIELD CA 93311
LOYD'S LIBERTY HOMES, INC-COLONY OAK	3301 COLONY OAK STREET BAKERSFIELD CA 93311
LOYD'S LIBERTY HOMES, INC-DAGGETT HOME	5801 DAGGETT AVENUE BAKERSFIELD CA 93309
LOYD'S LIBERTY HOMES, INC-HALIFAX	5614 HALIFAX STREET BAKERSFIELD CA 93309
LOYD'S LIBERTY HOMES, INC-HEWLETT HOME	504 HEWLETT STREET BAKERSFIELD CA 93309
LOYD'S LIBERTY HOMES, INC-HOLLY OAK	9605 HOLLY OAK DRIVE BAKERSFIELD CA 93311
LOYD'S LIBERTY HOMES, INC-KROLL WAY	7604 KROLL WAY BAKERSFIELD CA 93309
LOYD'S LIBERTY HOMES, INC-NEWPORT HOME	2518 NEWPORT LANE BAKERSFIELD CA 93309
LOYD'S LIBERTY HOMES, INC-PANORAMA HOME	3701 PANORAMA DRIVE BAKERSFIELD CA 93306
LOYD'S LIBERTY HOMES, INC-WOODLAKE HOME	4315 WOODLAKE AVENUE BAKERSFIELD CA 93309
LOYD'S LIBERTY HOMES-ALTAVILLE	7200 ALTAVILLE LANE BAKERSFIELD CA 93309
LOYD'S LIBERTY HOMES-CASWELL	6505 CASWELL AVENUE BAKERSFIELD CA 93309
LOYD'S LIBERTY HOMES-COLUMBIA	6800 COLUMBIA LANE BAKERSFIELD CA 93309
LOYD'S LIBERTY HOMES-IRONWOOD	4508 IRONWOOD WAY BAKERSFIELD CA 93306
LOYD'S LIBERTY HOMES-JOELYLE	304 JOELYLE STREET BAKERSFIELD CA 93312
LOYD'S LIBERTY HOMES-MADRID	4009 MADRID BAKERSFIELD CA 93309
MANOR LODGE CONV HOSP	2607 MT VERNON AVE BAKERSFIELD CA 93306
NICHOLAS HOME	7014 SHIRLEY LANE BAKERSFIELD CA 93307
PARKVIEW JULIAN CONVALESCENT HOSPITAL	1801 JULIAN AVENUE BAKERSFIELD CA 93304



POSITIVE DIRECTIONS #1	838 20TH AVENUE DELANO CA 93215
POSITIVE DIRECTIONS #2	2017 19TH AVENUE DELANO CA 93215
POSITIVE DIRECTIONS #3	2224 QUINCY STREET DELANO CA 93215
POSITIVE DIRECTIONS #5	417 ALHAMBRA STREET DELANO CA 93215
POSITIVE DIRECTIONS #6	816 3RD STREET MC FARLAND CA 93250
POSITIVE DIRECTIONS #8	1755 MAIN STREET DELANO CA 93215
POSITIVE DIRECTIONS, INC #4	1031 KALA LOOP MC FARLAND CA 93250
POSITIVE LIFESTYLES #1	422 BALBOA DRIVE DELANO CA 93215
POSITIVE LIFESTYLES #2	302 BALBOA DRIVE DELANO CA 93215
RIVERSIDE COTTAGE	1131 S \H\" ST BAKERSFIELD CA 93304"
SAN MIGUEL HOME	4613 SAN MIGUEL WAY BAKERSFIELD CA 93306
SHADY MANOR CONVALESCENT HOSPITAL	2901 SOUTH H STREET BAKERSFIELD CA 93304
TOWN AND COUNTRY ICF	5741 E TEXAS ST BAKERSFIELD CA 93307
VILLA TERRACE NURSING HOME	721 8TH STREET BAKERSFIELD CA 93304
WHITE LANE HOME	3917 WHITE LANE BAKERSFIELD CA 93309

#### **X-RAY (PORTABLE X-RAY SUPPLIER)**

FIL-AM MOBILE RADIOLOGY, LLC	341 NORWALK STREET DELANO CA 93215
JAMES F NICHOLS, M D	1914 TRUXTUN AVENUE BAKERSFIELD CA 93301
SUK YUN KWON	5728 MEDIO LUNA BAKERSFIELD CA 93306

#### **RURAL HEALTH CLINICS**

ARTURO Z ABALOS MD INC	1004 14TH AVENUE DELANO CA 93215
ARVIN MEDICAL CLINIC	146 NORTH HILL STREET ARVIN CA 93203
BEVERLY MEDICAL CENTER II	1415 ROSAMOND BLVD SUITE 24 ROSAMOND CA 93560
BEVERLY MEDICAL CENTER, INC	9300 NORTH LOOP BLVD, STE B CALIF CITY CA 93505
BUTTONWILLOW HEALTH CENTER	277 EAST FRONT STREET BUTTONWILLOW CA 93206
CAL CITY CLINIC	9350 NORTH LOOP BLVD CALIFORNIA CITY CA 93505
CLINIC OF SIERRA VISTA	8787 HALL ROAD LAMONT CA 93241
COMMUNITY HEALTH CENTER	62016 PASO ROBLES HIGHWAY LOST HILLS CA 93249
DELANO PEDIATRIC GROUP	325 LEXINGTON STREET DELANO CA 93215
DELANO REGIONAL MEDICAL CENTER RURAL HEALTH CLINIC	2300 7TH STREET WASCO CA 93280
DELANO WOMEN'S MEDICAL CLINIC	1201 JEFFERSON STREET DELANO CA 93215
FIRST VALLEY MEDICAL GROUP	1535 NORTH CHINA LAKE BLVD SUITE A RIDGECREST CA 93555
KAIN KUMAR MD, INC	16914 HIGHWAY 14 MOJAVE CA 93501
KERN RIVER HEALTH CENTER	67 EVANS ROAD WOFFORD HEIGHTS CA 93285
KERN VALLEY HEALTHCARE DIST RHC	4300 BIRCH AVENUE LAKE ISABELLA CA 93240
KERN VLLY HEALTHCARE DIST RHC #1	6412 LAUREL AVENUE LAKE ISABELLA CA 93240
MCFARLAND SINGH MEDICAL CLINIC INC	733 3RD STREET MC FARLAND CA 93250
MERCY WESTSIDE WELLNESS CENTER	100 EAST NORTH STREET TAFT CA 93268
RIDGECREST REGIONAL HOSPITAL RURAL HEALTH CLINIC	1111 NORTH CHINA LAKE BOULEVARD, SUITE 190 RIDGECREST CA 93555
SAGE COMMUNITY HEALTH CENTER	1041 NORTH CHINA LAKE BLVD RIDGECREST CA 93555
SHAFTER RURAL HEALTH CARE CLINIC	406 JAMES STREET SHAFTER CA 93263
TAFT RURAL MEDICAL GROUP, INC	501 6TH STREET TAFT CA 93268

TEHACHAPI FAMILY HEALTH CENTER	115 WEST E STREET TEHACHAPI CA 93561
TEHACHAPI FAMILY HEALTH CENTER - MOJAVE	2041 BELSHAW STREET MOJAVE CA 93501
TEHACHAPI FAMILY HEALTH CENTER-CALIFORNIA CITY	9350 NORTH LOOP BOULEVARD CALIF CITY CA 93505
VALLEY FAMILY MEDICAL CARE	333 SOUTH 10TH STREET TAFT CA 93268
WASCO MEDICAL CENTER	741 PALM AVENUE WASCO CA 93280

## Prioritization Process

On November 16, 2012, Healthy Kern County Community Needs Assessment Collaborative held two meetings to review the needs and issues identified in the Community Needs Assessment Process and to prioritize the issues in order for each of the individual hospital members to identify potential intervention strategies and an action plan. In advance of the meeting, the members of the Steering Committee identified 4 criteria by which the community needs and issues would be evaluated. The criteria are listed in **the table below**.

### Prioritization Criteria

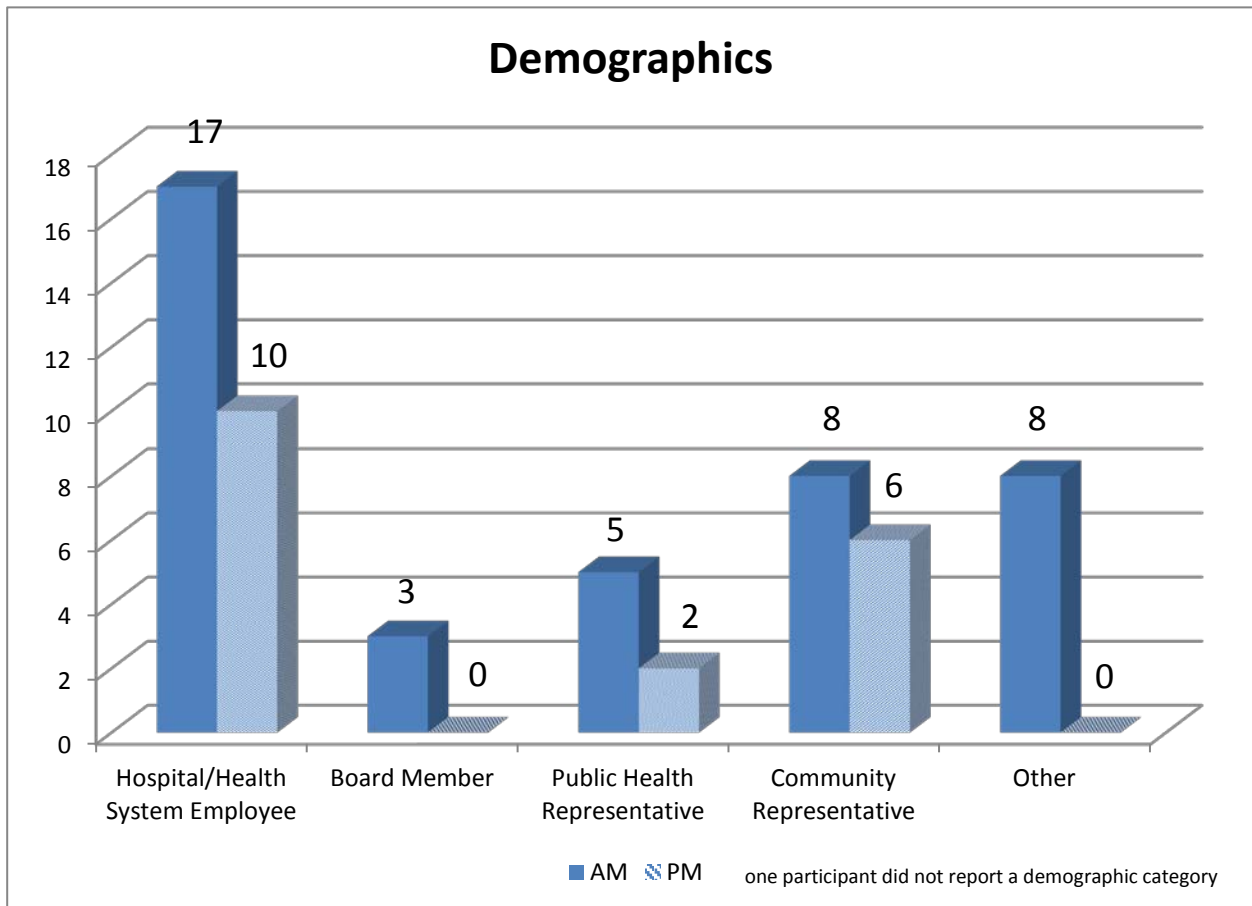
Item	Definition	Scoring		
		Low (1)	Medium	High (10)
1. Accountable Entity/Role	The extent to which the issue is an important priority to address in this action planning effort for either the health system or the community	This is an important priority for the community to address	This is important but is not for this action planning effort	This is an important priority for the health system(s)
2. Leadership /System Resources Available	Leadership is present and available among the organizations that might be involved; the extent to which the system is already in place and functioning to address the issue/ problem	There is no champion now and it would be hard to find/ designate one; no system in place to address the issue	Leadership/system is in place but could be improved	Committed leadership in place; system is in place and functioning well
3. Importance to the public health system	This would include any priority or intervention that is mandated by the state and/or is an integral component to the public health system	Not mandated; not an essential component of public health	Not mandated but somewhat important to public health	Mandated and is an essential component of the public health system
4. Impact on other health outcomes	The extent to which the issue impacts health outcomes and/or is a driver of other conditions	Little impact on health outcomes or other conditions	Some impact on health outcomes or other conditions	Great impact on health outcomes and other conditions

A total of 62 participants completed the prioritization exercise, 42 in the morning session and 20 in the afternoon session. The participants included:

Name	Organization
Deborah Steagall	211 Kern/Community Action Partnership of Kern
B. Kate Eucce	ADAKC- Alzheimer's Disease Assoc. of Kern County, Inc.
Jeremy Oliver	Aging & Adult Services
Socorro V. Carrillo	American Cancer Society
Debbie Wood	Bakersfield City School District
Rafael Lopez	Call to Action- Kern Public Health
Colleen McGauley	CASA
Bill Phelps	Clinica Sierra Vista
Ben Rutherford	Community Action Partnership of Kern
Grace Coan	Community Action Partnership of Kern
Patricia Mallard	Community Action Partnership of Kern
Linda Hinojosa	Community Connections Center/ Delano Union School District
Carol Hatton	Continuum Senior Care Management
Judy Pedro	CSUB Nursing
Ken Dyar	Delano Union School District
Debbie Hull	Dignity Health - Mercy and Memorial Hospitals
Felicia Barraza	Dignity Health - Mercy and Memorial Hospitals
Jan Hefner	Dignity Health - Mercy and Memorial Hospitals
Josefina Robles	Dignity Health - Mercy and Memorial Hospitals
Scott Thygerson	Dignity Health - Mercy and Memorial Hospitals
Tillie Perez	Dignity Health - Mercy and Memorial Hospitals
Darold Butler	Dignity Health Outpatient Lab
Tee Daniels	Garden Pathways
Daniel Harrison	Harrison Marketing & Advertising
Juli Coulthurst, MPH	Health Net - State Health Programs
Dan McReynolds	Kaiser Permanente
Danielle Davis	Kaiser Permanente
David Womack	Kaiser Permanente
Gloria Redden	Kaiser Permanente
Leslie Golich	Kaiser Permanente
Megan Boynton	Kern Community Foundation
Dena Murphy	Kern County Department of Human Services
Pam Holiwell	Kern County Department of Human Services
Claudia Jonah, MD	Kern County Department of Public Health Services
Flor del Hoyo	Kern County Department of Public Health Services
Helena Chung	Kern County Department of Public Health Services
Lucinda Wasson	Kern County Department of Public Health Services
Mariel Mehdipour	Kern County Department of Public Health Services
Raj Brar	Kern County Department of Public Health Services
Nona Tolentino	Kern County Long Term Care Ombudsman Program
Tom Corson	Kern County Network for Children
Isabel Silva	Kern Health Systems
Jennifer Wood-Slayton	Lamont Weedpatch Family Resource Center
Kimberly Kotrla	National Multiple Sclerosis Society

Name	Organization
Geri Spencer	New Spirit Women's Group
Adam Theesen	San Joaquin Community Hospital
Angie Almdares	San Joaquin Community Hospital
Bess Hannigan	San Joaquin Community Hospital
Bonnie Quinones	San Joaquin Community Hospital
Christina Arackiam	San Joaquin Community Hospital
Cora Frigillana	San Joaquin Community Hospital
Jarrold McNaughton	San Joaquin Community Hospital
Jimmy Phillips	San Joaquin Community Hospital
Joseph Nicomedes	San Joaquin Community Hospital
Judy Joyce	San Joaquin Community Hospital
Kevin Burton	San Joaquin Community Hospital
Sandra De La Rosa	San Joaquin Community Hospital
Schola Kabeya	San Joaquin Community Hospital
Joanne Border	St. Vincent de Paul Center
Zaena Araneta	Stop the Violence
Danielle Gallegos	Sunview Vineyards of California, Inc.
Morgan Clayton	Tel-Tec Security Systems, Inc.
Sue Whitmore	

The breakdown of participants by demographic category was as follows:



After the presentation of the data, each group rated every issue that was identified in the data collection process on a 1 to 10 scale for the criterion using the OptionFinder audience response polling system. In order to determine the highest priority for the hospitals/health systems, the average ratings for the Leadership, Public Health and Impact criteria were added together and rank ordered, high to low. The results were then “matched” with the average score on the Role criterion. The top 6 priorities with Role average scores of 8 or higher (indicating high priority for the hospitals/health systems) are shaded in blue. Other top priorities with Role average scores of 7 or higher are shaded in Green.

The top priorities for the health systems that were identified included the Chronic Disease related issues of Heart Disease and Stroke, Cancer and Diabetes, the Preventative Screenings related to these conditions and overall Access to Healthcare. Low Birth Weight/Infant Mortality and Asthma were identified as top priority issues for the community overall to tackle.

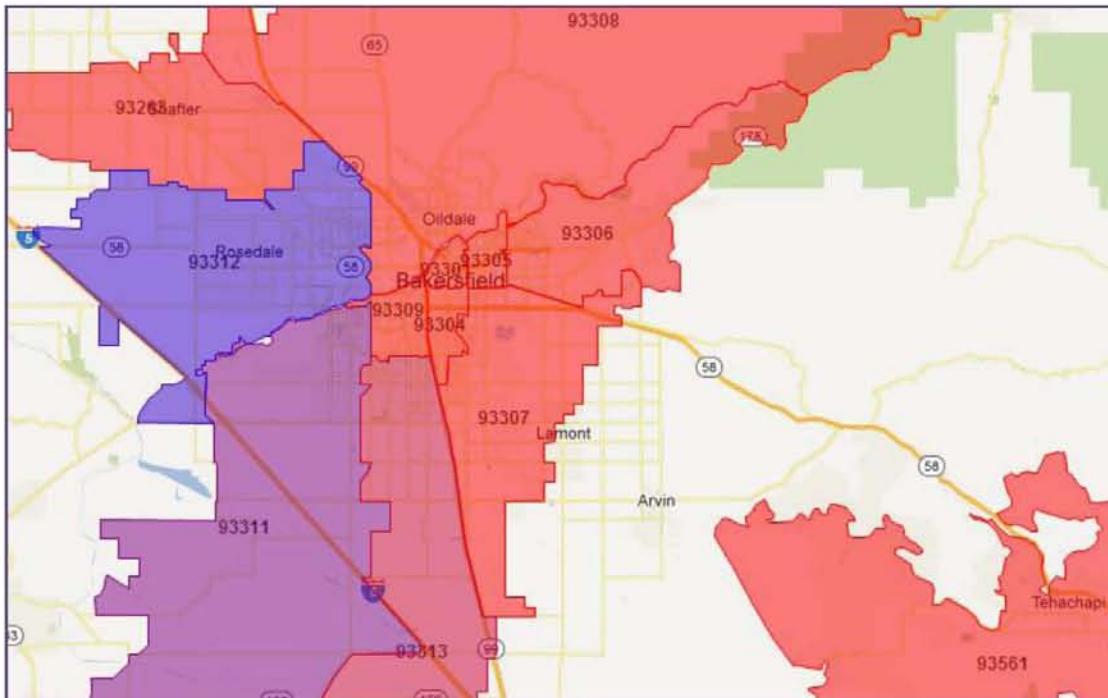
The overall results were as follows:

	Overall Results	Role	Summary Total	Leadership	Public Health	Impact
	2A-Healthy Mothers, Babies, Children: Childhood Immunizations	6.9	24.7	6.7	9.2	8.8
1	L-Chronic Disease: Heart Disease & Stroke	9	24.2	6	8.5	9.7
2	J-Chronic Disease: Cancer	8.8	24.1	6.6	8.3	9.2
3	K-Chronic Disease: Diabetes	8.5	23.4	4.9	8.8	9.7
7	V-Healthy Mothers, Babies, Children: Low Birth Weight/Infant Mortality/pre-term birth (prenatal care & breastfeeding)	7.6	23	5.6	8.5	8.9
4	F-Access: Preventative Screenings	8.4	22.7	5.1	8.5	9.1
5	O-Chronic Disease: Cancer Screenings	8.2	22.6	5.5	8.2	8.9
6	A-Access: Access to Health Care	8.4	22.3	5.1	7.8	9.4
	N-Chronic Disease: Obesity	6	22.2	3.9	8.5	9.8
8	M-Chronic Disease: Asthma	7	21.6	4.7	8.4	8.5
9	Y-Healthy Mothers, Babies, Children: Women's Health Screenings	7.1	21.6	4.9	8.1	8.6
10	S-Infectious Disease: STDs	4.9	20.9	4.8	8.6	7.5
	U-Infectious Diseases: Valley Fever/West Nile Virus	6.6	20.9	4.8	8.3	7.8
	X-Healthy Mothers, Babies, Children: Child Abuse	2.5	20.8	5.2	7.7	7.9
	2D-Mental Health and Substance Abuse: Tobacco Use	3.8	20.8	4.5	7.6	8.7
	B-Access: Access to Mental Health Services	5.5	20.7	4.4	7.8	8.5
	2G-Healthy Environment: Air Quality	2.8	20.7	4.6	7.1	9
	T-Infectious Diseases: Hepatitis C	6	20.3	4.2	8.4	7.7
	C-Access: Insurance Coverage	4.5	20.2	4.2	6.7	9.3
	R-Infectious Disease: Adult Immunizations	7.2	20.1	4.7	8.1	7.3
	2K-Healthy Environment: Water Quality	2.8	20	4.6	7.1	8.3
	H-Access: Services for the disabled and handicapped	4.4	19.8	4.4	7.9	7.5
	2C-Mental Health and Substance Abuse: Drug Abuse	3.3	19.8	4.2	7.1	8.5
	2N-Access: Services seniors/elderly	4.8	19.7	4.9	7	7.8
	W-Healthy Mothers, Babies, Children: Births to Teens	4.8	19.6	4.2	7.8	7.6

	Overall Results	Role	Summary Total	Leadership	Public Health	Impact
	Q-Physical Activity and Nutrition: Access to Healthy Foods	2.4	18.7	3.3	6.6	8.8
	2B-Mental Health and Substance Abuse: Alcohol Abuse	3.1	18.7	4	6.5	8.2
	D-Access: Health care for migrant workers	5.6	18.2	3.7	6.6	7.9
	P-Physical Activity and Nutrition: Exercise/Recreational Facilities	2.5	18.2	3.9	5.7	8.6
	2M-Injury: Domestic Violence	2.6	18.1	5.1	6.3	6.7
	2F-Healthy Environment: Poverty	2.5	17.4	2.8	6.1	8.5
	E-Access: Access to Dental Care	4.6	17.3	3.3	6.5	7.5
	2E-Mental Health and Substance Abuse: Dementia	5	17	3.1	6.5	7.4
	2H-Healthy Environment: Educational Proficiency	2.5	16.7	4.7	5	7
	2I-Healthy Environment: Violence	2.2	16.7	4.4	5.4	6.9
	2L-Injury: Fractures and Falls	6.7	16.6	3.3	6.4	6.9
	Z-Healthy Mothers, Babies, Children: Parenting	2.4	16.5	3.8	5.5	7.2
	I-Access: Cultural Awareness	4.2	15.8	3.3	6.2	6.3
	G-Access: Transportation	3.1	15.5	3	5.4	7.1
	2J-Healthy Environment: Housing	2.3	14.6	4.4	4.3	5.9

## Community Needs Index (CNI)

### Bakersfield Memorial Hospital



■ 1 - 1.7 Lowest    
 ■ 1.8 - 2.5 2nd Lowest    
 ■ 2.6 - 3.3 Mid    
 ■ 3.4 - 4.1 2nd Highest    
 ■ 4.2 - 5 Highest

<b>Zip Code</b>	<b>CNI Score</b>	<b>Population</b>	<b>City</b>	<b>County</b>	<b>State</b>
93263	5	19511	Shafter	Kern	California
93301	5	13818	Bakersfield	Kern	California
93304	5	50472	Bakersfield	Kern	California
93305	5	36313	Bakersfield	Kern	California
93306	4.8	60756	Bakersfield	Kern	California
93307	5	73563	Kern County	Kern	California
93308	4.6	49283	Oildale	Kern	California
93309	4.2	63712	Bakersfield	Kern	California
93311	3	42067	Kern County	Kern	California
93312	1.8	61080	Rosedale	Kern	California
93313	3.4	42771	Kern County	Kern	California
93561	4.2	31537	Bear Valley Springs	Kern	California

CNI Score Median: 4.7