



Dignity Health®

Sequoia Hospital

Redwood City, California

2025 Community Health Needs Assessment

Executive Summary



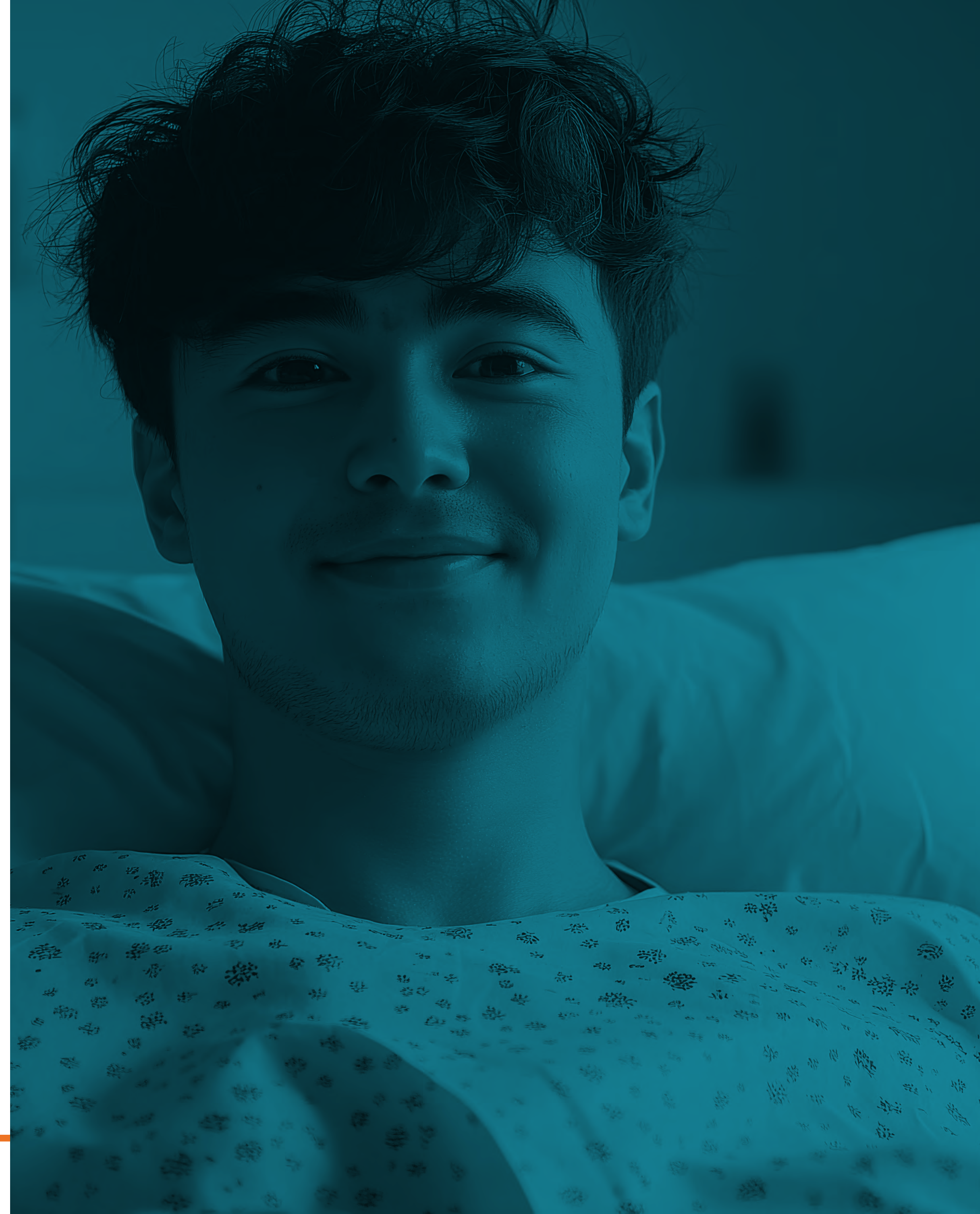
Purpose Statement

The purpose of this Community Health Needs Assessment (CHNA) is to identify and prioritize significant health needs of the community served by Sequoia Hospital. The priorities identified in this report help to guide the hospital's community health improvement programs and community benefit activities, as well as its collaborative efforts with other organizations that share a mission to improve health. This report meets requirements of the Patient Protection and Affordable Care Act that not-for-profit hospitals conduct a CHNA at least once every three years.

The full CHNA report can be accessed at
www.dignityhealth.org/bayarea/locations/sequoia/about-us/community-benefits.

CommonSpirit Health Commitment and Mission Statement

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



Community Definition

Dignity Health Sequoia Hospital is located at 170 Alameda de las Pulgas, Redwood City, California, 94062.

SAN MATEO COUNTY



CITIES IN THE SEQUOIA SERVICE AREA

Atherton

Belmont

Burlingame

Half Moon Bay

La Honda

Menlo Park

East Palo Alto/Palo Alto

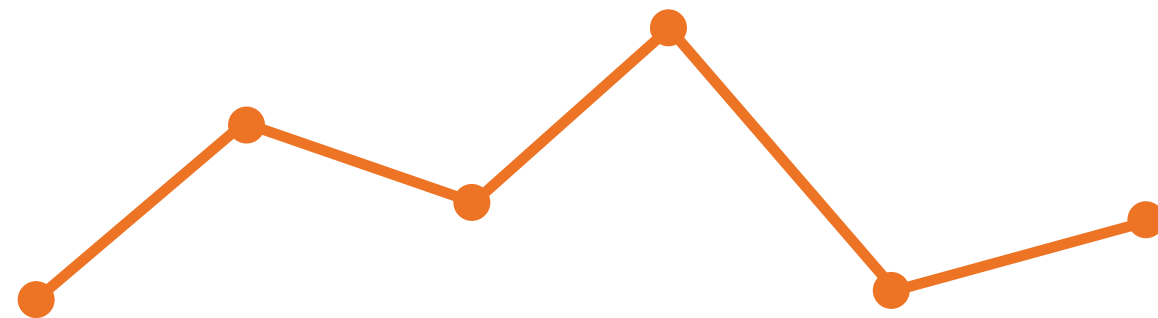
Portola Valley

Redwood City

San Carlos

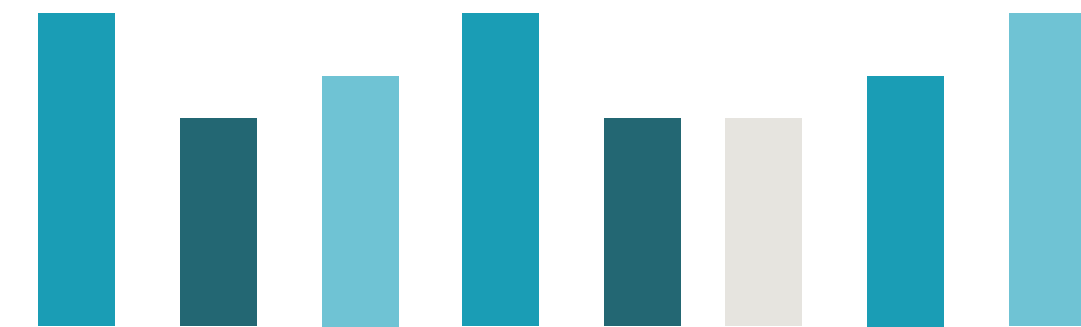
San Mateo

Assessment Process and Methods



SECONDARY DATA COLLECTION

Secondary data were collected from local, county, and state sources to analyze community demographics, health determinants, access to care, birth characteristics, leading causes of death, diseases, health behaviors, mental health, substance use, and preventive practices. Where available, data are presented in the context of San Mateo County and California. Data tables include indicators, geographic areas, measurements, comparisons, sources, and links. The analysis highlights health disparities and benchmarks findings against Healthy People 2030 objectives, a national initiative to improve public health.



PRIMARY DATA COLLECTION

Sequoia Hospital conducted interviews and surveys to assess community health needs, barriers to care, and available resources.

INTERVIEWS:

Twenty-three stakeholder interviews were conducted in October and November 2024 with leaders serving medically underserved, low-income, and minority populations in San Mateo County.

SURVEYS:

A community survey was distributed electronically via SurveyMonkey in English and Spanish from November 11, 2024, to February 4, 2025, collecting 175 responses. Surveys were shared at hospital sites, community organizations, and through social media. A written introduction explained the voluntary and anonymous nature of participation.

Significant Health Needs

Significant health needs were identified from an analysis of the primary and secondary data sources.

ACCESS TO CARE
CHRONIC DISEASES (Alzheimer's, cancer, diabetes, heart, lung, stroke, Parkinson's)
HOUSING AND HOMELESSNESS
MENTAL HEALTH
OVERWEIGHT AND OBESITY
PREVENTIVE PRACTICES (screenings, vaccines, injury prevention)
SUBSTANCE USE
TUBERCULOSIS

Prioritized Significant Health Needs

Access to health care, chronic diseases, housing and homelessness, mental health, overweight and obesity, and preventive practices were ranked as the top priority needs in the service area.



1

**ACCESS TO
HEALTH CARE**



2

**CHRONIC
DISEASES**



3

**HOUSING AND
HOMELESSNESS**



4

**MENTAL
HEALTH**



5

**OVERWEIGHT
AND OBESITY**



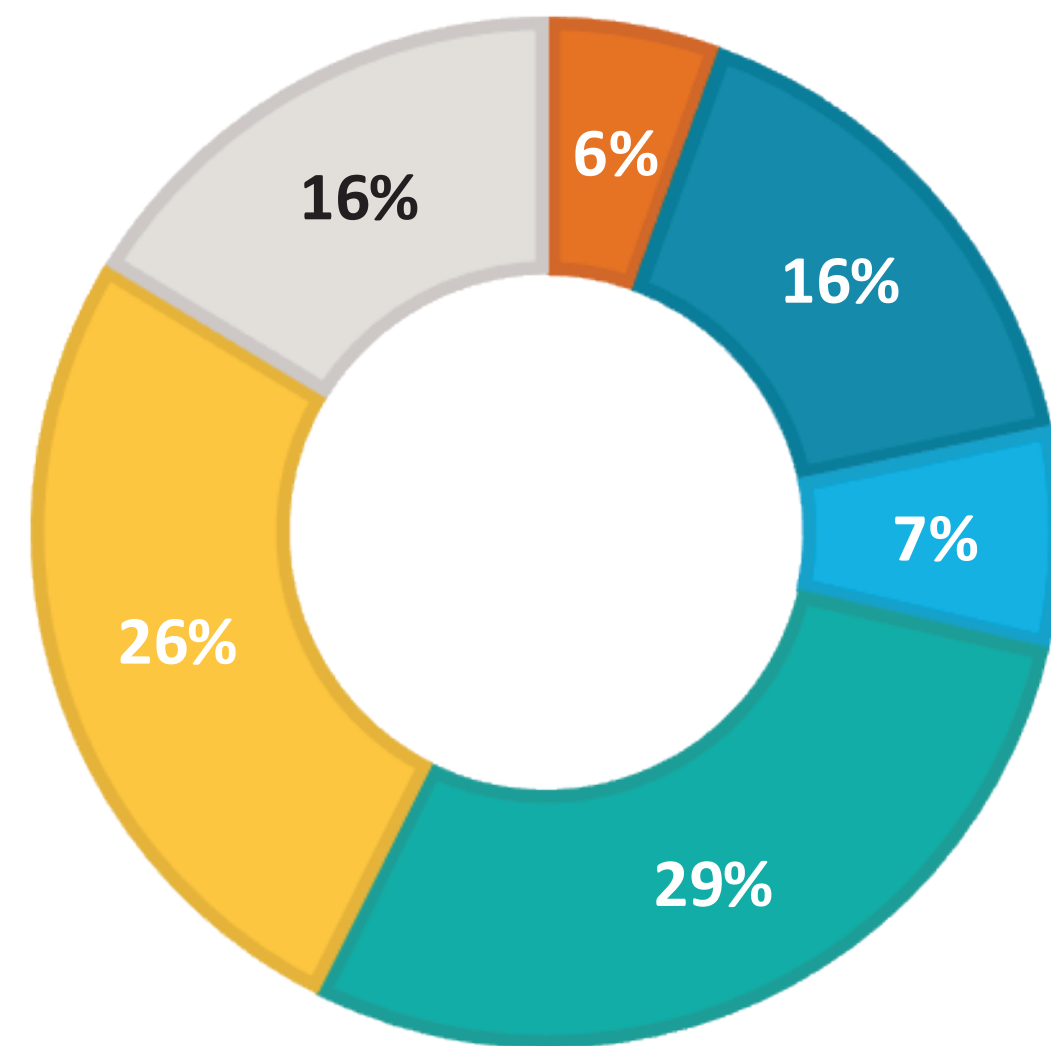
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**PREVENTIVE
PRACTICES**

Community Demographics

The population of the Sequoia Hospital service area is 524,799. From 2017 to 2022, the population decreased by 1.2%. During this same time period the population of the county decreased by 1.2% and the state grew by 1.0%.

AGE OF SEQUOIA SERVICE AREA



■ Age 0-4 ■ Age 5-17 ■ Age 18-24 ■ Age 25-44
■ Age 45-64 ■ Age 65+

RACE AND ETHNICITY OF SEQUOIA SERVICE AREA



White
44.7%



Asian
23.7%



Hispanic or Latino
22.2%



Multiracial
5.2%



Black or African
American
2.2%



Native HI or
Pacific Islander
1.0%



Other
0.7%

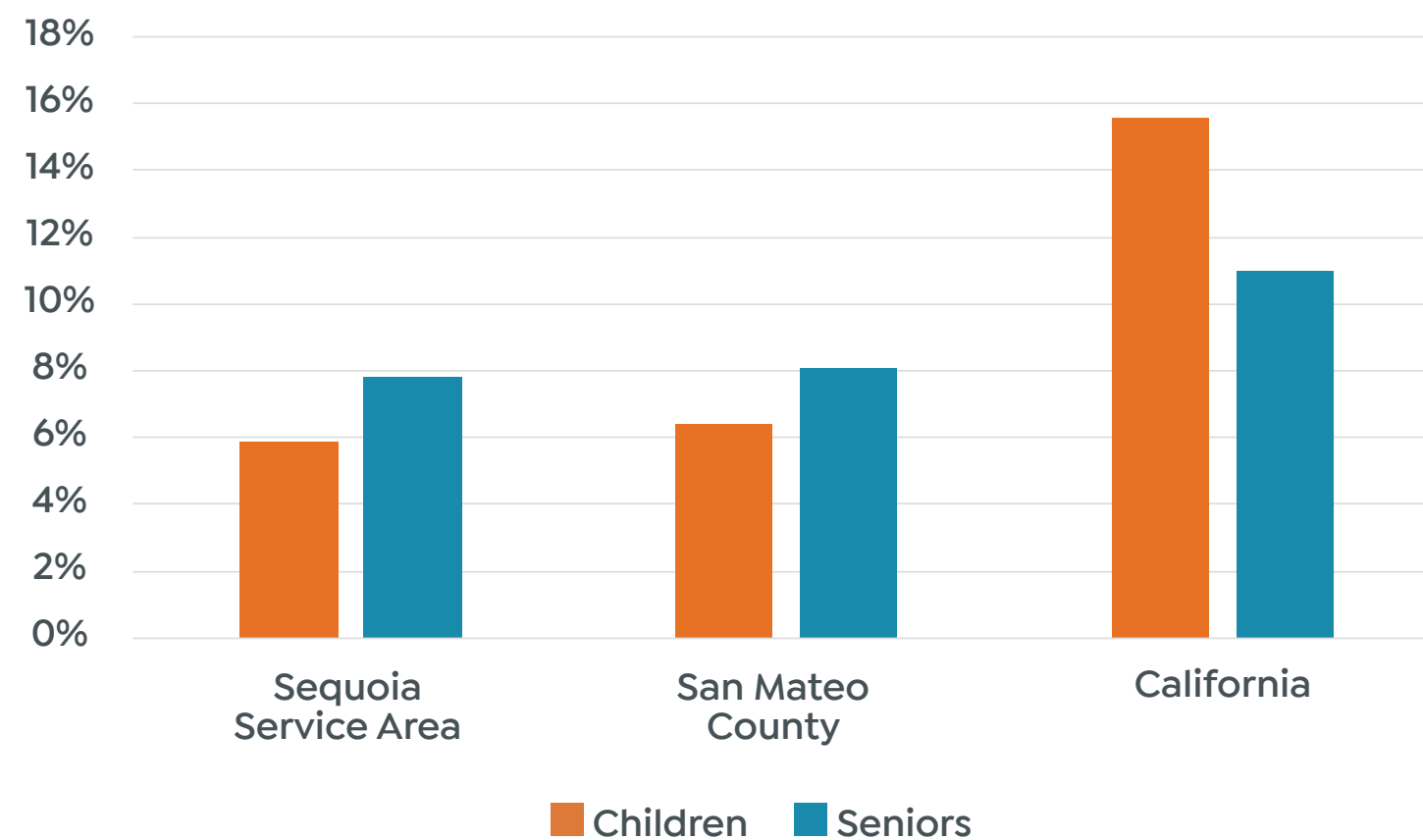


American Indian
or AK Native
0.1%

Social Determinants of Health

POVERTY

For 2022, the federal poverty level (FPL) for one person was \$14,880 and for a family of four it was \$29,678. 6.1% of service area residents live at or below 100% of the FPL and 13.9% are at 200% of FPL or below, which are lower than county and state rates.



MEDIAN HOUSEHOLD INCOME



The weighted average of the median household income in the service area exceeds **\$177,626** which is **higher than the county median of \$149,907**

HOMELESSNESS

Homeless Population in Sequoia Service Area Cities

582

SHELTERED

1,092

UNSHELTERED

134

TRANSITIONAL
HOUSING

TOTAL = 1,808

FOOD INSECURITY

	SAN MATEO COUNTY	PERCENT OF POPULATION
Total population experienced food insecurity during the year 2022	63,940	8.5%
Children, under age 18, experienced food insecurity during the year 2022	10,600	7.1%

EDUCATIONAL ATTAINMENT



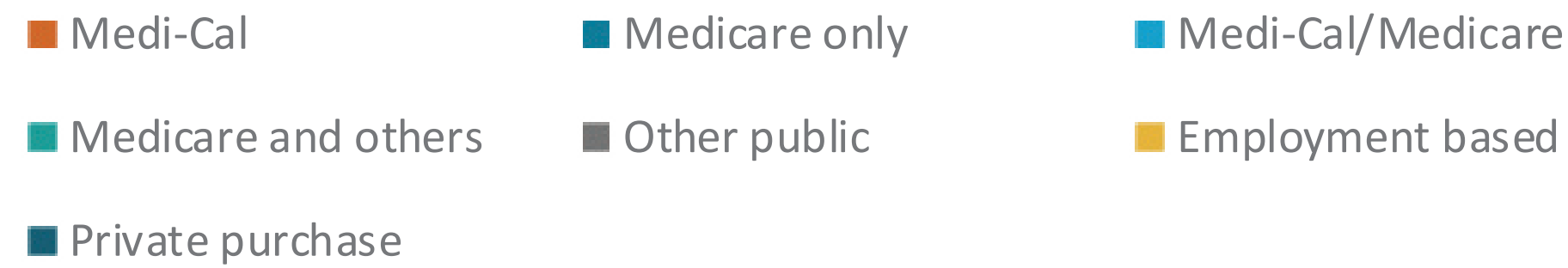
Educational attainment is a key driver of health. In the hospital service area,

8% of adults, 25 and older, lack a high school diploma, which is lower than the county (9.4%) and state (15.6%) rates.

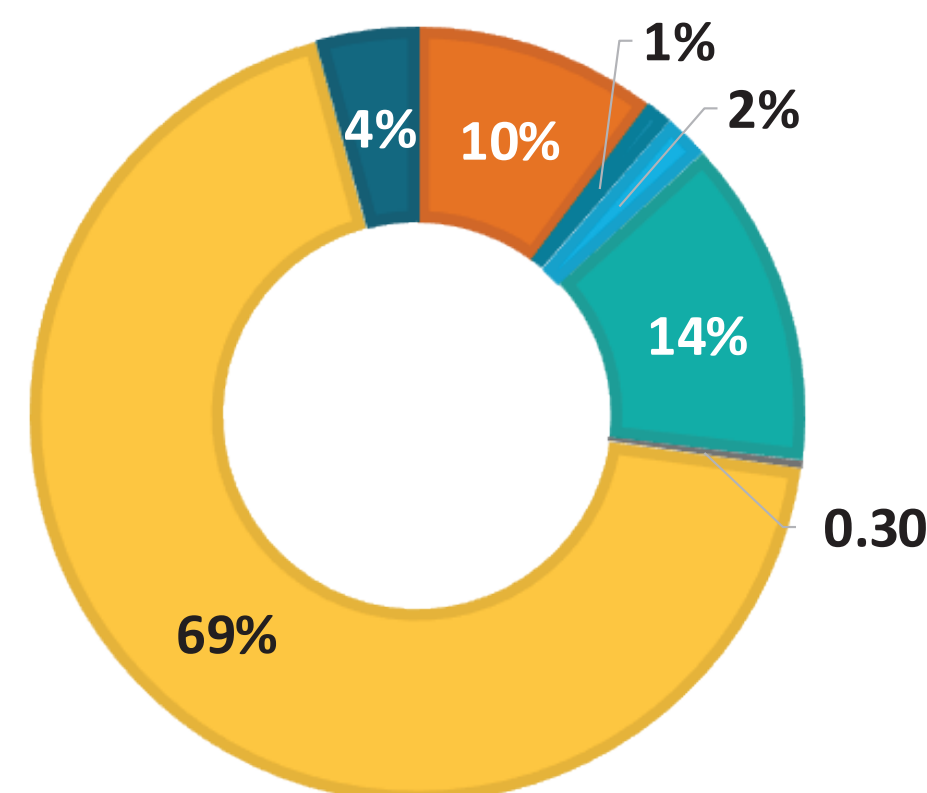
Health Care Access

Health insurance coverage is considered a key component to ensure access to health care. 96.6% of the civilian, non-institutionalized population in the service area has health insurance.

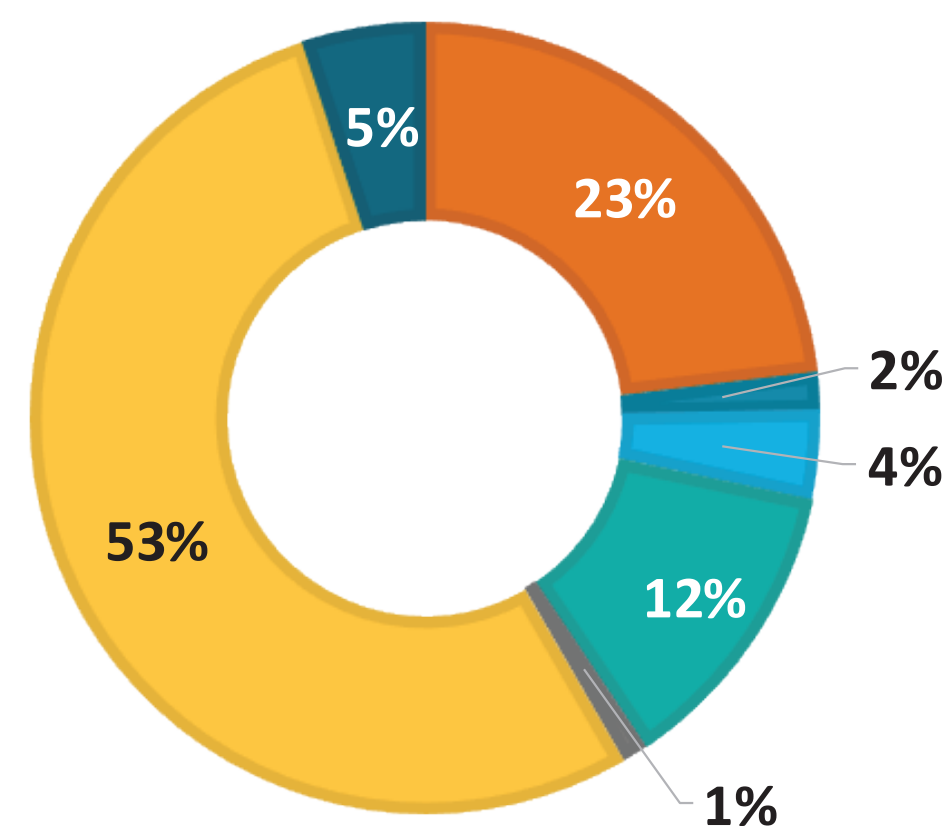
INSURANCE COVERAGE BY TYPE



SAN MATEO COUNTY

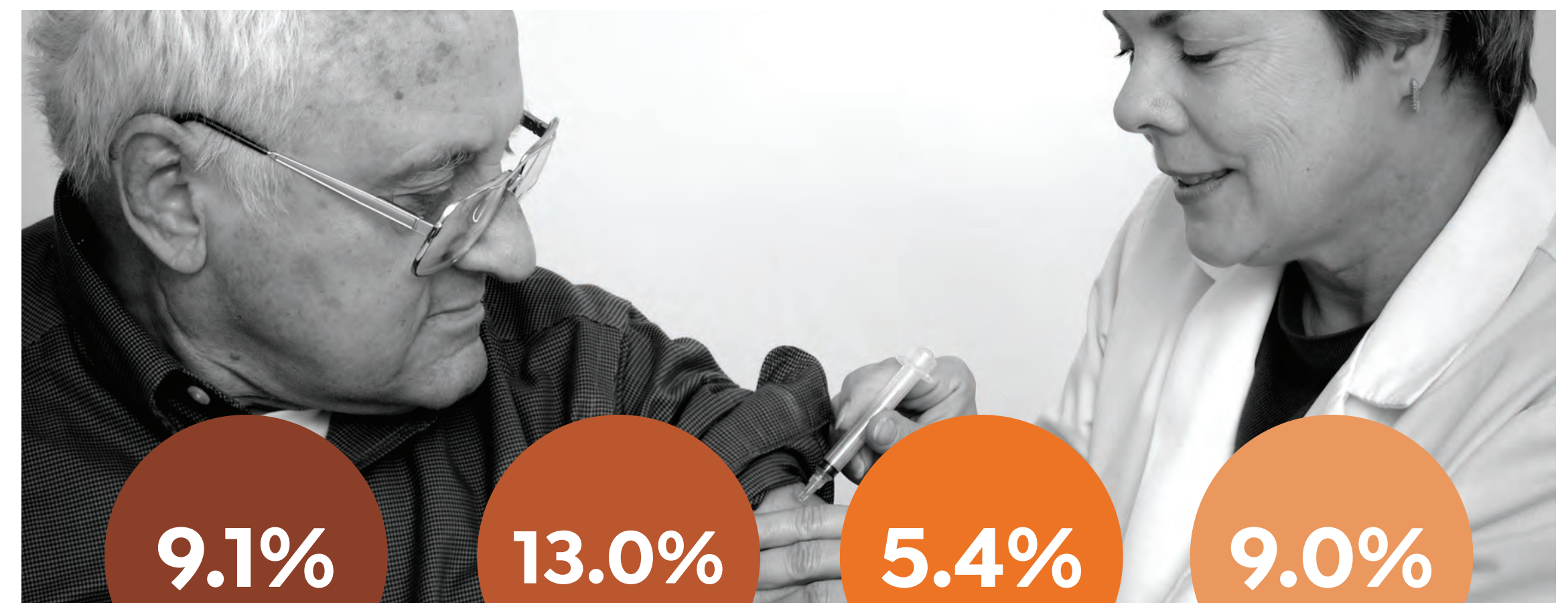


CALIFORNIA



DIFFICULTY ACCESSING CARE

San Mateo County



9.1%

Reported
difficulty finding
primary care

13.0%

Reported
difficulty finding
specialist care

5.4%

Primary care
doctor not
accepting their
insurance

9.0%

Specialist not
accepting their
insurance

Birth Characteristics

From 2018 to 2022, births in the service area averaged
5,734 births per year.

TEEN BIRTH RATE

Teen births in the service area occurred at an average annual rate of 1.7% of total births. This rate is **higher** than the county rate but **lower** than the state rate.

INFANT MORTALITY

The infant mortality rate, defined as deaths to infants under 1 year of age, was **lower** in San Mateo County than in the state.

PRENATAL CARE

Among pregnant women in the service area, 6.3% entered prenatal care late after the first trimester or not at all, which is **lower** than the state rate.
93.7% of women entered prenatal care on time.

TOP FIVE CAUSES
OF DEATH

- 1

CANCER
- 2

HEART
DISEASE
- 3

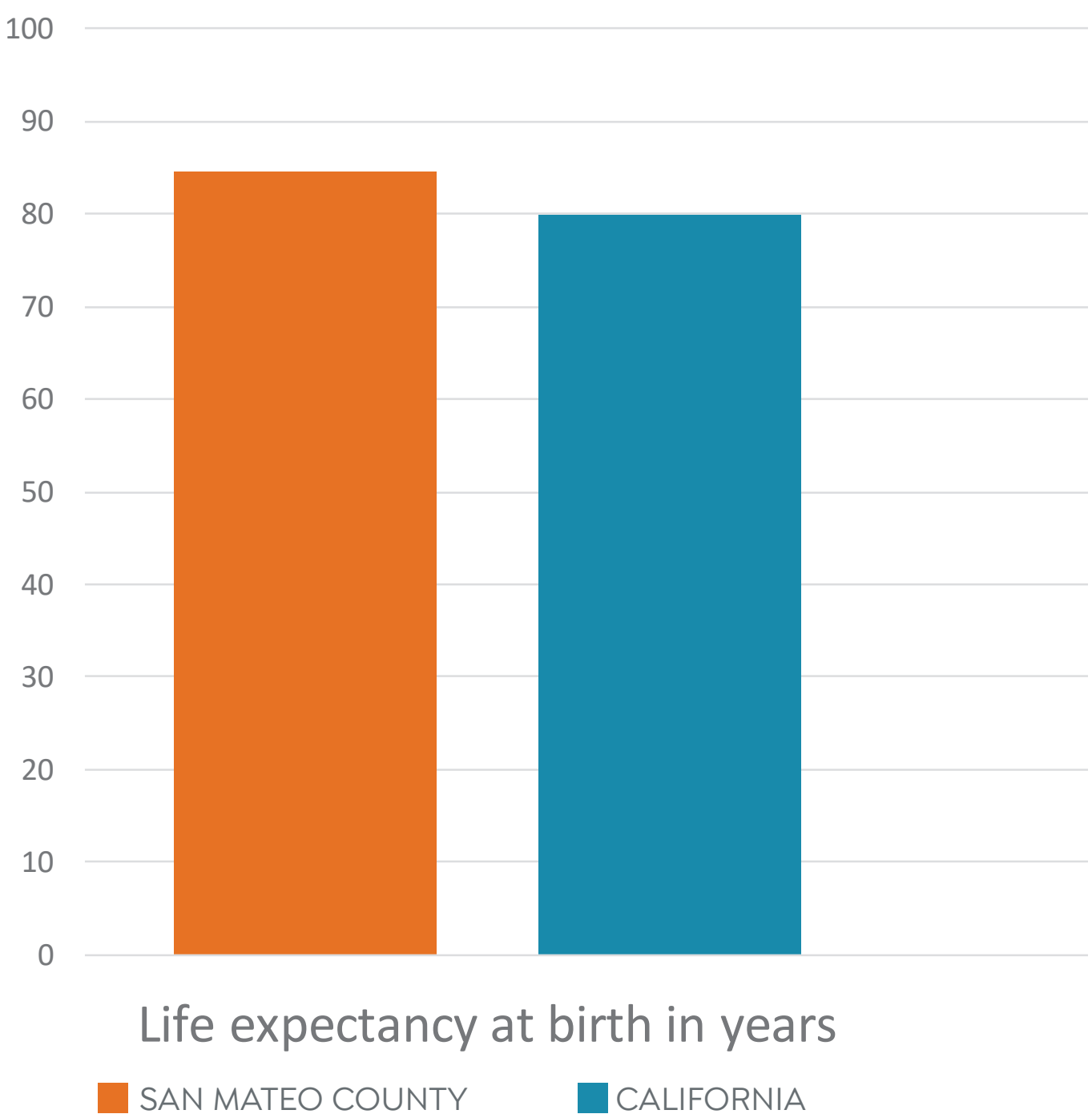
ALZHEIMER'S
DISEASE
- 4

STROKE
- 5

UNINTENTIONAL
INJURIES

Leading
Causes of Death

YEARS OF LIFE EXPECTANCY



Acute and Chronic Disease

TOP FIVE FORMS OF CANCER, RATES PER 100,000 PERSONS



**LUNG AND
BRONCHUS**

19.3



PROSTATE

17.7



BREAST

15.5



PANCREAS

10.0



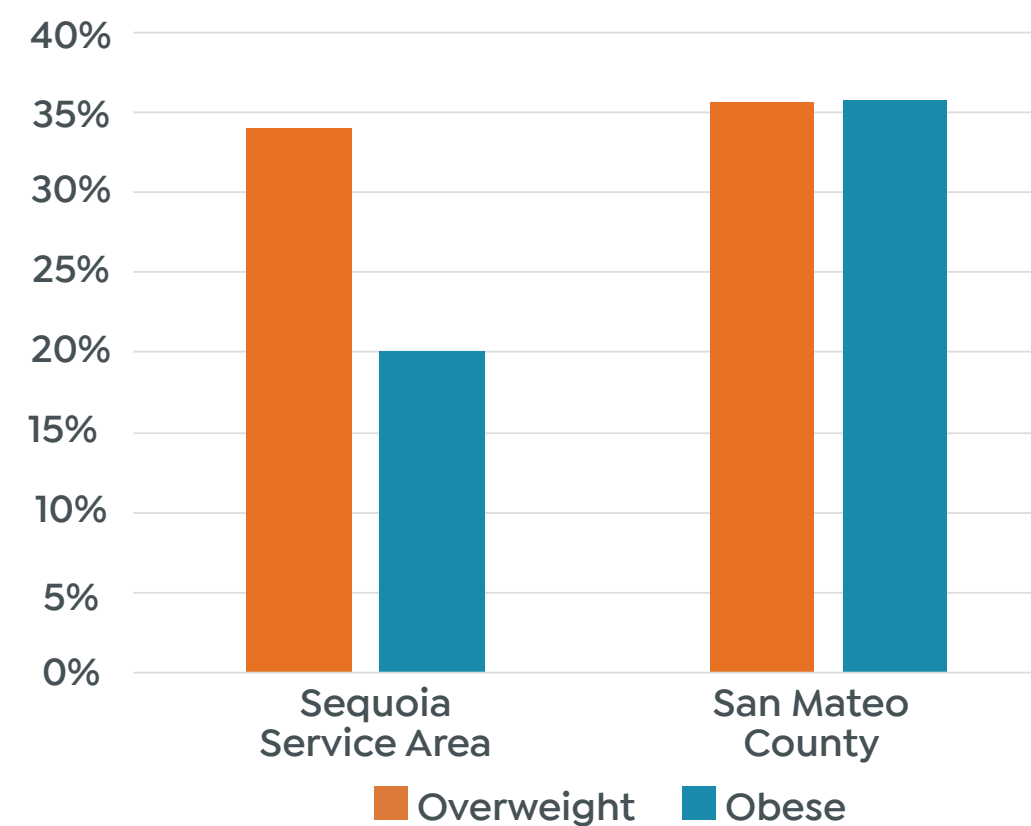
**COLON &
RECTUM**

8.6

Adult population diagnosed with chronic diseases	Sequoia Service Area	California
DIABETES	8.4% ↓	11.6%
ASTHMA	8.1% ↓	8.8%
HEART DISEASE	4.2% ↑	3.2%
HIGH BLOOD PRESSURE	25.6% ↓	27.9%
CHOLESTEROL	33.5% ↓	33.8%

Health Behaviors

OVERWEIGHT AND OBESITY



SEXUALLY TRANSMITTED INFECTIONS

Sexually Transmitted Infection Rates, per 100,000 Persons

	SAN MATEO COUNTY	CALIFORNIA
Chlamydia	310.2 ↓	484.7
Gonorrhea	104.9 ↓	230.9
Primary & secondary syphilis	8.7 ↓	22.3
Early latent syphilis	10.6 ↓	21.7

PHYSICAL ACTIVITY & EXERCISE



99% of service area adults report adequate access to exercise opportunities compared to 94% of California residents.

15.5% of service area adults report not participating in any aerobic activity within the past week.

Frequent Mental Distress is defined as 14 or more bad mental health days in the last month. In the service area, the rate of mental distress was 12.3% of adults.

Mental Health

MENTAL HEALTH INDICATORS

	SAN MATEO COUNTY	CALIFORNIA
Adults who had serious psychological distress during past year	11.9% ↓	15.2%
Adults taken prescription medicine at least 2 weeks for emotional/mental health issue in past year	10.7% ↓	11.5%
Adults: family life impairment during the past year	23.2% ↓	24.1%
Adults: social life impairment during the past year	23.2% ↓	24.2%
Adults: household chore impairment during the past year	22.5% ↓	23.8%
Adults: work impairment during the past year	23.2% ↓	24.6%
Teens who had serious psychological distress during past year	46.9% ↑	31.1%

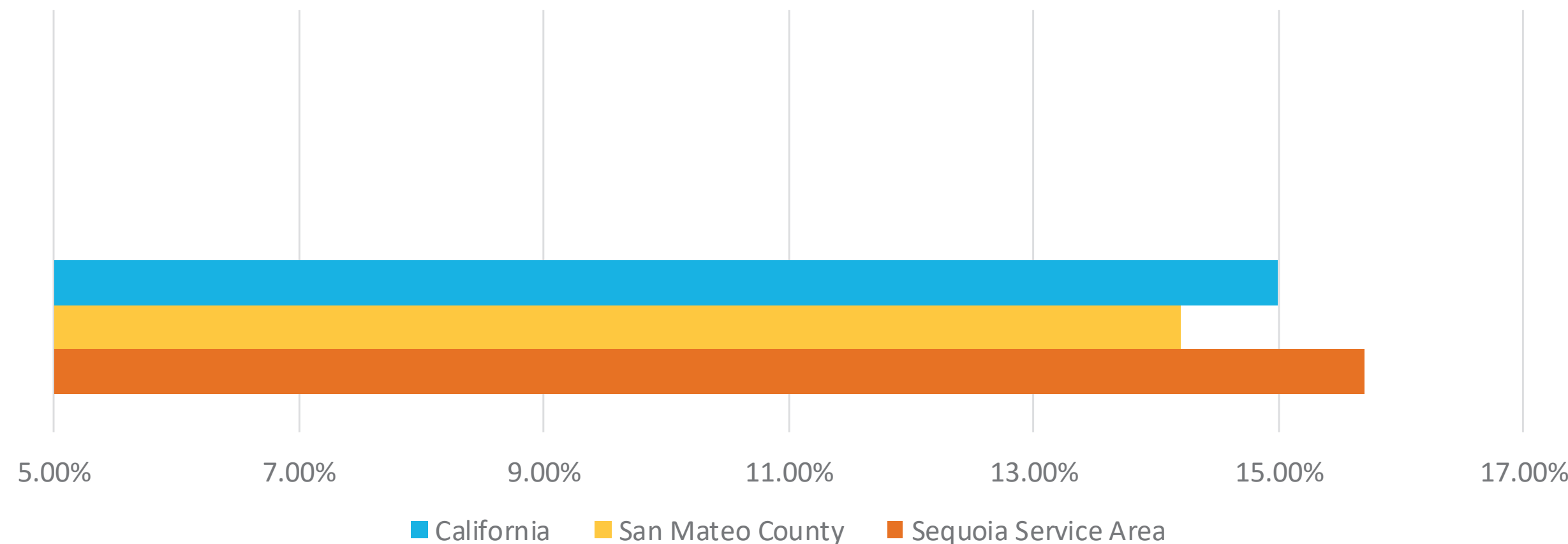
Substance Use

CIGARETTE SMOKING



The Healthy People 2030 objective for cigarette smoking among adults is 6.1%. In San Mateo County, **3.3% of adults smoke cigarettes**, which is lower than the state rate of 6.1%.

BINGE DRINKING (ADULTS, PREVIOUS 30 DAYS)



OPIOID USE (PER 100,000 PERSONS)

ER visits for opioid overdose

19.3

SAN MATEO
COUNTY

51.3

CALIFORNIA

Preventive Practices



FLU VACCINE

51.2% of adults in the service area received a flu shot, which falls below the Healthy People 2030 objective for 70% of all adults, 18 and older, to receive a flu shot.



MAMMOGRAMS

The Healthy People 2030 objective for mammograms is for 80.3% of women, between the ages of 50 and 74, to have a mammogram in the past two years. In San Mateo County, 72.5% of women had obtained mammograms in the prior two years, which did not meet this objective.



PAP SMEARS

The Healthy People 2030 objective is for 79.2% of women, ages 21 to 65, to have a Pap smear in the past three years. With 82.1% of women, ages 21 to 65, having had a cervical cancer screening in the prior three years, San Mateo County exceeds this objective.

Impact of Actions Taken

ACCESS TO HEALTH CARE

Addressing Disparities in Health Care and the Digital Divide
Charitable Cash and In-Kind Donations
Community Health Improvement Grants Program
Financial Assistance
Health Professions Education Program
Operation Access Partnership
San Mateo County Navigation Center (Dental)
Sequoia Community Care
Workforce Development Program

HOUSING AND HOMELESSNESS

Charitable Cash and In-Kind Donations
Community Health Improvement Grants
Discharge Planning for Persons Experiencing Homelessness
San Mateo County Navigation Center (Dental)

HEALTHY LIFESTYLES

(Chronic Diseases and Preventive Practices)
Art Faro Food Grant Program
Charitable Cash and In-Kind Donations
Community Health Improvement Grants program
Community Space Sharing Program
Diabetes Empowerment Education Program (D.E.E.P.)
LiveWell Program
Matter of Balance
Sequoia Health Equity Partnership

MENTAL HEALTH

Charitable Cash and In-Kind Donations
Community Health Improvement Grants
Community Space Sharing Program
New Parents Support Group

Citations

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Community Demographics

Source: U.S. Census Bureau, American Community Survey, 2018-2022.

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Poverty/Household Income/Educational Attainment

Source: U.S. Census Bureau, American Community Survey, 2018-2022.

Food Insecurity

Source: Feeding America, 2022.

Homelessness

Source: San Mateo County Human Services Agency (HAS), 2022 One Day Homeless Count.

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Insurance Coverage

Source: U.S. Census Bureau, American Community Survey, 2018-2022.

Difficulty Accessing Care

Source: California Health Interview Survey, 2020-2022.

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Teen Births/Prenatal Care

Source: Calculated by Gary Bess Associates using California Dept. of Public Health Master Birth Files and U.S. Census Bureau American Community Survey, 5-Year Average 2018-2022, Table B01001. County and state data are from Centers for Disease Control and Prevention, National Center for Health Statistics on CDC WONDER Online Database, released December 2023.

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Infant Mortality

Source: Calculated by Gary Bess Associates using California Dept. of Public Health Master Birth Files and U.S. Census Bureau American Community Survey, 5-Year Average 2018-2022, Table B01001. County and state data are from Centers for Disease Control and Prevention, National Center for Health Statistics on CDC WONDER Online Database, released December 2023.

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Leading Causes of Death

Source: Gary Bess Associates, calculated from CA Dept of Public Health Master Death Files 2018-2022. County and state data are estimated using U.S. CDC National Center for Health Statistics, Underlying Cause of Death 2018-2022 on CDC WONDER Online Database released May 2024, and 2015-2020 historic age-adjusted rates. -- Values of 2 or less are withheld per HIPAA guidelines.

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Cancer Incidence Rates

Source: California Cancer Registry, Cal*Explorer-CA Cancer Data tool, 2017-2021.

Chronic Disease Incidence

Source: PolicyMap, utilizing the CDC's Behavioral Risk Factor Surveillance System (BRFSS), 2021 data.

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Overweight and Obesity

Source: PolicyMap, utilizing the CDC's Behavioral Risk Factor Surveillance System (BRFSS), 2021 data.

PAGE 14 CONT.

Exercise

Source: California Health Interview Survey, 2018-2020.

Sexually Transmitted Infections

Source: California Department of Public Health, STD Control Branch, 2021 STD Surveillance Report.

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Mental Health

Source: California Health Interview Survey, 2020-2022.

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Cigarette Smoking

Source: California Health Interview Survey, 2020-2022.

Binge Drinking

Source: PolicyMap, utilizing the CDC's Behavioral Risk Factor Surveillance System (BRFSS), 2021 data.

Opioid Use

Source: California Office of Statewide Health Planning and Development, via CA Department of Public Health, California Opioid Overdose Surveillance Dashboard, 2024; data from 2022.

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Flu Vaccines

Source: U.S. Centers for Disease Control (CDC), FluVaxView Interactive!, 2021 survey year (for county), 2021-2022 season.

Mammograms

Source: PolicyMap, utilizing the CDC's Behavioral Risk Factor Surveillance System (BRFSS), 2020 data.

Pap Smears

Source: PolicyMap, utilizing the CDC's Behavioral Risk Factor Surveillance System (BRFSS), 2020 data.