Mercy Medical Center Mt. Shasta 2019 Community Health Implementation Strategy

Adopted October 2019





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At-a-Glance Summary

Community Served



Mercy Medical Center Mt. Shasta serves a core service area population of approximately 17,110 residents. Siskiyou County is a rural county with the residents spread out over approximately 6,347 square miles. Due to the rural nature of the county, access to care is a consistent barrier for the many residents who are medically underserved and low-income and minority populations. The following zip codes make up the core service area for Mercy Medical Center Mt. Shasta: 96025, 96057, 96067, and 96094.

Significant Community Health Needs Being Addressed

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



- Access to Care
- Maternal and Child Health
- Mental Health

Strategies and Programs to Address Needs

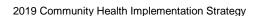
The hospital intends to take several actions and to dedicate resources to these needs, including:

- Bereavement Support Groups
- Circle of Healing weekend retreat, for cancer patients
- Community Health Screenings
- Community Health Education
- Community Grants
- Diabetes Fair community event for health professionals and community members
- Hope and Healing Support Group, for parents with early infant loss
- Involvement of nutritionist in public schools
- Lactation Counseling Services
- Mercy Mt. Shasta Auxiliary Free Transportation Service
- Provide cash and in-kind donations to local non-profit organizations
- Senior Health Fairs with glucose and BP screening, Ask-A-Pharmacist, Flu vaccinations
- The "Sisters Emergency Fund" dedicated to provide non-medical emergency assistance to patients and family members in need

Anticipated Impact



Overall the hospital anticipates that actions taken to address the identified significant health needs will: improve health knowledge, behaviors, and status; increase access to care; and help create conditions that support overall good health. The hospital is committed to monitoring key initiatives to assess and improve impact.





The hospital works closely with key partners to deliver programs. Mercy Medical Center Mt. Shasta Community Health staff serve on many community coalitions and boards and the collective impact of these groups are vital to our community.

This document is publicly available online at, https://www.dignityhealth.org/north-state/locations/mercy-mtshasta/about-us/community-benefit.

Written comments on this report can be submitted to the Mercy Medical Center Mt. Shasta's Community Health Office, 914 Pine Street, Mt. Shasta, CA 96067 or by e-mail to alexis.ross@dignityhealth.org.

Our Hospital and the Community Served

About Mercy Medical Center Mt. Shasta

Mercy Medical Center Mt. Shasta is a member of Dignity Health, which is a part of CommonSpirit Health.

Mercy Medical Center Mt. Shasta is a non-profit health care facility designated a 25-bed Critical Access Hospital, accredited by The Joint Commission, and a member of the American Hospital Association. The Hospital is located off of California Interstate 5 in Mt. Shasta and the facility's campus is 14 acres in size located at the base of Mount Shasta. In addition to the acute care hospital, Mercy Medical Center Mt. Shasta also operates three Rural Health Clinics: Mercy Mt. Shasta Community Clinic, Mercy Lake Shastina Community Clinic and the Dignity Health Pine Street Clinic. With more than 250 skilled professionals and support staff, approximately 45 active doctors, and more than 80 dedicated volunteers, Mercy Mt. Shasta has been consistently named in the Top 100 Critical Access Hospitals by the National Rural Health Association.

Our Mission

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

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

Financial Assistance for Medically Necessary Care

Mercy Medical Center Mt. Shasta delivers compassionate, high quality, affordable health care and advocates for members of our community who are poor and disenfranchised. In furtherance of this mission, the hospital provides financial assistance to eligible patients who do not have the capacity to pay for medically necessary health care services, and who otherwise may not be able to receive these services. The financial assistance policy and a plain language summary and other materials are on the hospital's web site.

Description of the Community Served

Siskiyou County, California is located in the Northern-most region of California on the California-Oregon border with numerous mountain ranges dividing the county. Yreka, the largest town and the county seat, is located along the I-5 corridor along with the second largest town of Mount Shasta. Two critical access hospitals, Fairchild Medical Center in Yreka and Mercy Medical Center Mt. Shasta in Mt. Shasta, serve the county.

Siskiyou County is home to approximately 45,000 people and is a geographically large county covering 6,347 square miles, making the population density approximately seven people per square mile. As is the case for many rural counties, access to care is a consistent barrier for many residents, particularly for underserved, at-risk populations who live in geographically isolated communities.



Mercy Medical Center Mt. Shasta serves a core service area (CSA) comprised mostly of four zip codes in Southern Siskiyou County. Dignity Health hospitals define service areas as the geographic area served by the hospital based on a percentage of hospital discharges and is also used in various other departments of the system and hospital, including strategy and planning. A summary description of the community's demographic indicators using © 2018 IBM Watson Health Analytics is listed below, and additional details can be found in the CHNA report online.

Total Population: 17,110Hispanic or Latino: 11.7%

• Race: 78.5% White, 2.2% Black/African American, 2.6% Asian/Pacific Islander, 5.1% All Others

• Median Income: \$45.505

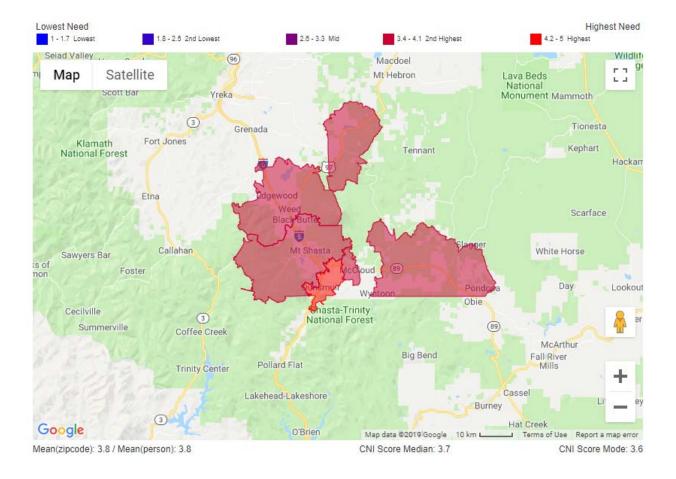
Uninsured: 12.4%
Unemployment: 5.5%
No HS Diploma: 7.7%
CNI Score Median: 3.7
Medicaid Population: 34.9%
Other Area Hospitals: 1

• Medically Underserved Areas or Populations: Yes

Community Need Index

One tool used to assess health need is the Community Need Index (CNI) created and made publicly available by Dignity Health and IBM Watson Health. The CNI analyzes data at the zip code level on five factors known to contribute or be barriers to health care access: income, culture/language, education, housing status, and insurance coverage.

Scores from 1.0 (lowest barriers) to 5.0 (highest barriers) for each factor are averaged to calculate a CNI score for each zip code in the community. Research has shown that communities with the highest CNI scores experience twice the rate of hospital admissions for ambulatory care sensitive conditions as those with the lowest scores.



Community Assessment and Significant Needs

The hospital engages in multiple activities to conduct its community health improvement planning process. These include, but are not limited, to conducting a Community Health Needs Assessment with community input at least every three years, identifying collaborating community stakeholder organizations, describing anticipated impacts of program activities and measuring program indicators.

Community Health Needs Assessment

The health issues that form the basis of the hospital's community health implementation strategy and programs were identified in the most recent CHNA report, which was adopted in June, 2019. The CHNA contains several key elements, including:

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

Additional detail about the needs assessment process and findings can be found in the CHNA report, which is publicly available at http://www.dignityhealth.org/cm/content/pages/community-benefit-reports.asp or upon request at the hospital's Community Health office.

Significant Health Needs

The community health needs assessment identified the following significant community health needs:

• Access to Care

Accessing adequate health care is a challenge in rural communities across the state. Issues accessing care have been noted in all communities within Siskiyou County and in nearly all health disciplines, including primary care, specialty care, dental, and mental health. Physician recruitment and retention is especially difficult for rural areas. With rural areas payer mix being less ideal along with a smaller population to support the physician's practice, shortages are a continuous challenge.

• Maternal and Child Health

In a county health profile report published by the Family Health Outcomes Project in 2018, many maternal and child health issues were brought to light. Among the most concerning statistics were a high infant mortality rate, high domestic violence call rate, child abuse and neglect, and childhood food insecurity rate.

Mental Health

Access to mental health services is extremely difficult and has many barriers to entry. A severe shortage of mental health providers leaves those in need with long wait times for appointments and lack of treatment options. With the majority of mental health and behavioral health services being located in the county seat of Yreka, transportation to appointments also presents a

significant barrier for those who live in other communities within the county. Long distances through the mountainous terrain limit public transportation options, when available, and cost limits accessibility for low-income individuals.

Significant Needs the Hospital Does Not Intend to Address

The hospital intends to take actions to address all of the prioritized significant health needs in the CHNA report, both through its own programs and services and with community partners. Lists and descriptions of those planned actions are included in this report.

2019 Implementation Strategy

This section presents strategies and program activities the hospital intends to deliver, fund or collaborate with others to address significant community health needs over the next three years. It summarizes planned activities with statements on anticipated impacts and planned collaboration. Program Digests provide additional detail on select programs.

This report specifies planned activities consistent with the hospital's mission and capabilities. The hospital may amend the plan as circumstances warrant. For instance, changes in significant community

health needs or in community assets and resources directed to those needs may merit refocusing the hospital's limited resources to best serve the community.

The anticipated impacts of the hospital's activities on significant health needs are summarized below, and for select program initiatives are stated in Program Digests. Overall, the hospital anticipates that actions taken to address significant health needs will: improve health knowledge, behaviors, and status; increase access to needed and beneficial care; and help create conditions that support good health.



The hospital works to evaluate

impact and sets priorities for its community health programs in triennial Community Health Needs Assessments.

Creating the Implementation Strategy

Mercy Medical Center Mt. Shasta is dedicated to improving community health and delivering community benefit with the engagement of its management team, board, clinicians and staff, and in collaboration with community partners.

A broad approach with multi-disciplinary teams is taken when planning and developing initiatives to address priority health issues. During the initiative inception phase, Community Health Staff



engages a core internal team that may include clinical staff, care coordinators and social workers, members of leadership teams at both the service area and local levels from Mission Integration, IT, Legal, Administration, Strategy, and Finance. These core teams help shape initiatives, provide internal perspective on issues, and help define appropriate processes, procedures and methodologies for measuring outcomes. In addition to internal core teams, Mercy Medical Center Mt. Shasta also widens the scope of program design and elicits design input, feedback, recommendations, and concerns from the following groups:

- North State Community Board
- Mercy Medical Center Mt. Shasta Advisory Council
- Local Area Community Grant Committee

Strategy by Health Need

The tables below present strategies and program activities the hospital intends to deliver to help address significant health needs identified in the CHNA report.

They are organized by health need and include statements of the strategies' anticipated impact and any planned collaboration with other organizations in our community.

| Health Need | d: Access to Care |
|------------------------------|--|
| Strategy or Program Name | Summary Description |
| Health Screening | Free Mammogram Program (Ultrasound and MRI) |
| Transportation Assistance | Van service, taxi vouchers or bus tokens provided to patients who need assistance with access to our facilities. |

| Enhance access to Primary and Specialty Care | Continue to work with community stakeholders to review the 2019 Community Health Needs Assessment and identify the key issues to maximize the quality of ongoing health initiatives. |
|--|--|
| Health Education | Diabetes Educator and community presentations |
| Patient Financial Assistance | Provide financial assistance to eligible patients who do not have the capacity to pay for medically necessary health care services, and who otherwise may not be able to receive these services. |

Impact: Improving health care services includes increasing access to and use of evidence-based preventive services. Through prevention efforts and improvements in accessing health care services community members will have better health outcomes, fewer disparities, and lower costs.

Collaboration: Mercy Medical Center Mt. Shasta will continue to partner with other local organizations that respond to the health needs of our community. Community-based collaborations have been a priority in past years and the hospital will continue to drive community benefit efforts in the future.



Health Need: Maternal and Child Health

| Strategy or Program Name | Summary Description |
|-----------------------------|--|
| Prenatal Health | Lactation Counseling Services Prenatal Breastfeeding Classes Child Birth Classes |
| Community Collaboration | Collaboration with First Five Book Program in Rural Health Clinic Setting |
| Community Collaboration | Partnerships with Great Northern Services Free Summer Lunch Program for children ages 18 and under |

Impact: Improvements in maternal, infant and child health

Collaboration: Mercy Medical Center Mt. Shasta will continue to partner with other local organizations that respond to the health needs of our community. Community-based collaborations have been a priority in past years and the hospital will continue to drive community benefit efforts in the future.



Health Need: Mental Health

| Strategy or Program Name | Summary Description |
|---|--|
| Tele-Psychiatry | Psychiatrists are able to provide early evaluation and psychiatric intervention via remote consultations with patients, improving access to timely quality care. Access is available to both the ED and inpatient setting. |
| Co-Occurring Substance Disorder Treatment Program | Suboxone clinic with x-waiver physicians |
| Mental Health Specialist | Clinical Psychologist in Rural Health Clinic |
| Mental Health Task Force | Continue to partner and meet quarterly with Professional Mental Health Countywide task force to develop best practices with known local resources |
| Community Health Education | Bereavement/Grief Support Group |
| Behavioral Evaluation Services | Coordinate behavioral health evaluations with Siskiyou County Behavioral Health Department to assess patient needs and risks and to provide referrals 24-hours daily, 365 days per year to anyone who presents at the hospital Emergency Departments. These services are provided regardless of the individual's ability to pay or eligibility for care at our facility. |

Impact: The hospital's initiatives to address mental/behavioral health and co-occurring substance abuse have anticipated results in: increasing the community's knowledge of common mental health issues and how to deal with them, empowering the community to understand prescription drug abuse, and support projects that will impact the community's access to mental/behavioral health services.

Collaboration: Mercy Medical Center Mt. Shasta will continue to partner with other local organizations that respond to the health needs of our community. Community-based collaborations have been a priority in past years and the hospital will continue to drive community benefit efforts in the future.

Program Digests

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

| Access to Care | |
|---|---|
| Significant Health Needs Addressed | ✓ Access to Care□ Maternal and Child Health□ Mental Health |
| Program Description | Improvement in access to health care services and use of evidence-based preventive services. |
| Community Benefit Category | A – Community Health Improvement Services |
| Planned Actions for 201 | 9 - 2021 |
| Program Goal / Anticipated Impact | Through prevention efforts and improvements in accessing health care services community members will have better health outcomes, fewer disparities, and lower costs. |
| Measurable Objective(s) with Indicator(s) | Leverage community resources and create alignment among partners to increase community capacity and additional access to healthcare services |
| Intervention Actions for Achieving Goal | Offer Free Mammogram Program (Ultrasound and MRI) Increase community capacity for accessing preventative care services in the community Continue active participation on the Siskiyou Health Collaborative and assist with the development of a more robust healthcare workforce in Siskiyou County |
| Planned Collaboration | Siskiyou Health Collaborative |

| Maternal and Ch | nild Health |
|---------------------------------------|--|
| Significant Health Needs Addressed | □ Access to Care ✓ Maternal and Child Health □ Mental Health |
| Program Description | Maternal Opioid Training for Maternal and Child Health Providers |
| Community Benefit Category | A – Community Health Improvement Services |

| Planned Actions for 201 | 9 - 2021 |
|---|---|
| Program Goal / Anticipated Impact | A reduction in opioid exposed infants at birth or in early childhood |
| Measurable Objective(s) with Indicator(s) | Increase healthcare provider awareness of the number of opioid dependent mothers in Siskiyou County |
| Intervention Actions for Achieving Goal | Provide an educational opportunity tool kit for maternal and child health providers in the community Early identification of opioid impaired mothers and get them into treatment sooner Explore offering home visits for post-partum mothers and babies |
| Planned Collaboration | Siskiyou Public Health |

| Mental Health | |
|---|---|
| Significant Health Needs Addressed | □ Access to Care □ Maternal and Child Health ✓ Mental Health |
| Program Description | The hospital's initiatives to address access to behavioral health services are anticipated to result in: expanded access to behavioral health services; increased knowledge about how to access and navigate the health care system; and reduce barriers to care. |
| Community Benefit Category | A – Community Health Improvement Services |
| | |
| Planned Actions for 201 | 9 - 2021 |
| Planned Actions for 201 Program Goal / Anticipated Impact | 9 - 2021 Expanded access to behavioral health services |
| Program Goal / | |
| Program Goal / Anticipated Impact Measurable Objective(s) | Expanded access to behavioral health services Expand access to behavioral health services in outpatient rural clinics |

Hospital Board and Committee Rosters

FY 2020 DIGNITY HEALTH NORTH STATE SERVICE AREA **COMMUNITY BOARD MEMBERS**

Ryan Denham, Chairman, President S.J. Denham

Eva, Jimenez, Secretary, VP of Economic and Workforce Development at Shasta College

Todd Strumwasser, M.D., SVP Northern California Division

Fernando Alvarez, M.D., Internal Medicine/Hospitalist with Vituity

Diane Brickell, Retired Educator

Jim Cross, President of Cross Petroleum

Sister Clare Marie Dalton, VP Mission Integration at Mercy General Hospital

Sandra Dole, Real Estate Agent with Vista Real Estate

Riico Dotson, M.D., Orthopedic Surgeon

Alan Foley, Financial Advisor with Ameriprise Financial

Nikita Gill, M.D., Interventional Cardiologist

Hillary Lindauer, Licensed Marriage and Family Therapist and the Executive Director of the Family Counseling Center

Sister Bridget McCarthy, VP Mission Integration Greater Sacramento Service Area

Patrick Quintal, M.D., Pediatrician with Lassen Medical Clinic

Any communications to Board Members should be made in writing and directed to:

Lynn Strack, Executive Assistant Dignity Health North State P.O. Box 496009 Redding, CA 96049-6009 (530) 225-6103 (530) 225-6118 fax

Mercy Medical Center Mt. Shasta COMMUNITY ADVISORY COUNCIL – FY2019

- Rodger Page, President, Mercy Medical Center Mt. Shasta
- Diane Brickell, McCloud, Health Clinic Board member, and Dignity Health North State
 Service Area Community Board Member
- Keith Cool, Business Owner
- Jim Cross, Mercy Foundation North Board member, large business owner, and Dignity Health North State Service Area Community Board Member
- Lori Harch, School Board member
- James Langford, retired teacher
- Russ Porterfield, Business Owner
- Mike Rodriguez, Mt. Shasta City Parks & Recreation Director
- Norma Stone, McCloud area representative, retired Mercy employee
- Karen Teuscher, Community Member, Past Dignity Health North State Service Area Community Board Member

Other Participants:

- Lisa Hubbard, CNE
- Joyce Zwanziger, MMCMS Marketing/Community Relations/Volunteer Services Manager

