St. Bernardine Medical Center Community Benefit 2020 Report and 2021 Plan

Adopted October 2020





A message from

Douglas Kleam, President and CEO of St. Bernardine Medical Center, and Dr. Robert Carlson, Chair of the Dignity Health St. Bernardine Medical Center Community Board.

Dignity Health's approach to community health improvement aims to address significant health needs identified in the Community Health Needs Assessments that we conduct with community input, including from the local public health department. Our initiatives to deliver community benefit include financial assistance for those unable to afford medically necessary care, a range of prevention and health improvement programs conducted by the hospital and with community partners, and investing in efforts that address social determinants of health.

St. Bernardine Medical Center shares a commitment with others to improve the health of our community, and delivers programs and services to help achieve that goal. The Community Benefit 2020 Report and 2021 Plan describes much of this work. This report meets requirements in California state law (Senate Bill 697) that not-for-profit hospitals produce an annual community benefit report and plan. Dignity Health hospitals in Arizona and Nevada voluntary produce these reports and plans, as well. We are proud of the outstanding programs, services and other community benefits our hospital delivers, and are pleased to report to our community.

In fiscal year 2020 (FY20), St. Bernardine Medical Center provided \$30,886,852 in patient financial assistance, unreimbursed costs of Medicaid, community health improvement services and other community benefits. The hospital also incurred \$41,809,647 in unreimbursed costs of caring for patients covered by Medicare.

The hospital's Community Board reviewed, approved and adopted the Community Benefit 2020 Report and 2021 Plan at its October 7, 2020 meeting.

Thank you for taking the time to review our report and plan. We welcome any questions or ideas for collaborating that you may have, by reaching to out to Kathleen McDonnell at 909.475.5083 or Kathleen.McDonnell@DignityHealth.org.

Douglas Kleam, President/CEO

Robert Carlson, PhD, Chairperson, Board of Directors

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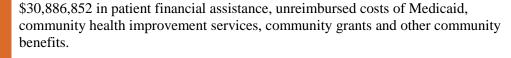
At-a-Glance Summary

Community Served



St. Bernardine Medical Center (SBMC) serves a broad and diverse population residing in multiple zip codes. While a few of the zip code communities enjoy a higher standard of living, the majority of the communities served are high need. The majority of discharges come from twenty-four (24) zip codes concentrated in the following cities: Bloomington, Colton, Crestline, Fontana, Hemet, Hesperia, Highland, Rancho Cucamonga, Redlands, Rialto, San Bernardino, Victorville and Yucaipa. The total population of these communities is 1,025,102.

Economic Value of Community Benefit



\$41,809,647 in unreimbursed costs of caring for patients covered by Medicare.

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 Healthcare
- Behavioral Health
- Chronic Diseases
- Housing & Homelessness
- Safety & Violence

FY20 Programs and Services



The hospital delivered several programs and services to help address identified significant community health needs. These included: programming at the Family Focus Center directed toward the youth of our community; the Bridges Program based at the Family Focus Center that focuses on young adults who have graduated high school but need assistance as they venture into adulthood; activities at the Baby & Family Center to promote healthy pregnancies and family lifestyles; a Community Health Navigator to work with the uninsured who visit our Emergency Department; a Community Grants program that awarded \$154,464 to local nonprofit agencies that address identified health needs; free flu shots for the community as well as community education, especially education focused on diabetes management and other chronic diseases. Our participation in the Accelerating Investments for Health Communities initiative focused on affordable housing in San Bernardino. The COVID pandemic necessitated shifting the method of delivering services with an increased focus on remote meetings and education, ensuring safe social distancing and infection control for programs taking place in person, and an increase in food delivery in response to a 45% increase in food insecurity in our community.



FY20 programs will continue; however, the coronavirus pandemic is causing a shift in priorities and activities. All programs will be modified to fit state guidelines to keep our participants safe. This may include virtual education, phone call interventions, mailing and delivering resources and tools to participants, and working with our community grantees as they modify their delivery of services.

This document is publicly available online at https://www.dignityhealth.org/socal/locations/stbernardinemedical/about-us/serving-the-community/community-health-needs-assessment-plan.

Written comments on this report can be submitted to the St. Bernardine Medical Center Community Health Office, 2101 N. Waterman Avenue, San Bernardino, CA 92404 or by e-mail to Kathleen.McDonnell@DignityHealth.org.

Our Hospital and the Community Served

About St. Bernardine Medical Center

St. Bernardine Medical Center is a member of Dignity Health, which is a part of CommonSpirit Health. Founded in 1931 by the Sisters of Charity of the Incarnate Word, St. Bernardine Medical Center follows the Catholic faith tradition and offers a myriad of health care services both locally and to the tertiary communities within the Inland Empire. Licensed for 342 beds with an average daily census of 174 during Fiscal Year 2020, St. Bernardine Medical Center employs 1,804 employees and maintains professional relationships with 383 local physicians and 84 Allied Health Professionals. As one of two hospitals in the city of San Bernardino, St. Bernardine Medical Center has a busy Emergency Department that received 68,828 visits in FY 2020.

Major program and service lines include emergency services, wound care, cardiac services including open heart surgery, orthopedics including complex and joint replacement, maternal child, designated primary stroke center, surgical weight loss (bariatrics), robotic surgery (da Vinci Si and Xi robots) and urgent care centers.

Our 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.

Our Vision

A healthier future for all – inspired by faith, driven by innovation, and powered by our humanity.

Financial Assistance for Medically Necessary Care

St. Bernardine Medical Center delivers compassionate, high quality, affordable health care and advocates for members of our community who are poor and disenfranchised. In furtherance of our mission, the hospital provides financial assistance to eligible patients who do not have the capacity to pay for medically necessary health care services, and who otherwise may not be able to receive these services.

A plain language summary of the policy is at the end of this report. The financial assistance policy and plain language summary are on the hospital's web site.

Description of the Community Served

The Inland Empire is a diverse and struggling region. St. Bernardine Medical Center is an identified Disproportionate Share Hospital, making it a safety net for the many low-income, vulnerable populations and uninsured in the community. The service area encompasses 24 ZIP Codes representing 14 cities. Currently, 21.5% of the population lives at or below 100% of the Federal Poverty Level (FPL), and 46.6% live at or below 200% FPL. In 2020, San



Bernardino County was ranked 40th (down from 38th in 2019) among counties in California for Health Outcomes by County Health Rankings & Roadmaps. The county lands in the bottom third of California counties for health outcomes. A summary description of the community is below, and additional details can be found in the CHNA report online.

The following¹ reflects demographics for the service area:

• Total Population: 1,025,102

Race/Ethnicity: 64.0% Hispanic or Latino; 20.6% White; 8.0% Black/African American;
 5.0% Asian/Pacific Islander; 2.4% All Other

Uninsured: 6.1 %Unemployment: 9.0%

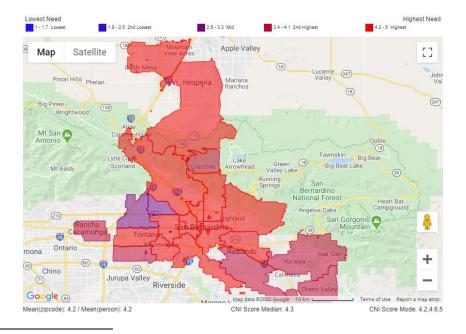
No High School Diploma: 25.2%
Medicaid Population: 10.8%
Other Area Hospitals: 6

• 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.



¹ Source: Claritas Pop-Facts® 2020; SG2 Market Demographic Module

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 benefit plan and programs were identified in the most recent CHNA report, which was adopted in October 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 https://www.dignityhealth.org/socal/locations/stbernardinemedical/about-us/serving-the-community/community-health-needs-assessment-plan or upon request at the hospital's Community Health office.

Significant Health Needs

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

- Access to health care In San Bernardino County, 32.6% is covered by Medi-Cal and 7.8% of the population has coverage that includes Medicare.
- Chronic Diseases In In San Bernardino County, 13.9% of the population has been diagnosed with asthma. Heart disease is the leading cause of death and stroke is the fourth leading cause of death in the service area. 11.4% of adults in San Bernardino County have been diagnosed with diabetes, and 15.2% have been diagnosed as pre-diabetic. 34.8% of the adult population reported being overweight.
- **Homelessness** The number of homeless persons in San Bernardino County increased 13.5% over the previous year. The unsheltered homeless make up the majority of the homeless and the percentage of unsheltered homeless increased in 2018.
- Mental health In San Bernardino County, 10.5% of adults experienced serious psychological distress in the past year. 8.1% of teens needed help for an emotional or mental health problem and 1% received counseling.
- **Violence and injury prevention** Crime statistics indicate that the rate of violent crime in the service area is 515.3 per 100,000 persons; higher than the rates for the county or state.

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.

2020 Report and 2021 Plan

This section presents strategies and program activities the hospital is delivering, funding or on which it is collaborating with others to address significant community health needs. It summarizes actions taken in FY20 and planned activities for FY21, with statements on anticipated impacts, planned collaboration, and patient financial assistance for medically necessary care. Program Digests provide detail on select programs' goals, measurable objectives, expenses and other information.

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 will: improve needs 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 Community Benefit Plan

St. Bernardine Medical Center 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. As a matter of Dignity Health policy, the hospital's community health and community benefit programs are guided by five core principles. All of our initiatives relate to one or more of these principles: Focus on Disproportionate Unmet Health-Related Needs; Emphasize Prevention; Contribute to a Seamless Continuum of Care; Build Community Capacity; Demonstrate Collaboration.

SBMC staff provided Community Benefit Initiative Committee (CBIC) members with information regarding current programs already addressing identified health needs as well as evidence of success. CBIC community stakeholder members provided valuable insight and connectivity to additional resources in the community. Hospital sponsored programs continue to be impacted by growing need, and it was determined these programs are valuable tools in improving community health. Discussion also focused on programs in the community and the importance of collaborating with local non-profits through the

Dignity Health Community Grants Program. These programs and strategies are highlighted on pages 11-15.

Impact of the Coronavirus Pandemic

• Food insecurity, which went up by 45%² in our service area. The hospital addressed food insecurity by offering fresh food delivery, aka the "Kindness Box," to community members who have chronic conditions and are home bound due to coronavirus. In addition, fresh food boxes were also sent to families served by the Family Focus Center.



- Loss of healthcare due to loss of job/benefits. By working with our community partners we have many resource referral sites to help access health care, including telehealth options (https://www.dignityhealth.org/mobile-apps/video-visits).
- Temporary suspension of in-person support, educational classes, symposiums, and community events. The hospital was able to provide support to people without having them leave their homes by providing virtual and mail in education. In addition, staff addressed suicide prevention and Mental Health First Aid training to youth and adults to better prepare the hospital's front line staff and community partners who work with our most vulnerable populations via ZOOM education.
- Loss of Stepping Stones Program participants. The hospital is keeping in contact with many of our volunteers and is offering virtual health education to keep them engaged until it is safe to return to the hospital. Some volunteers aided in contactless fresh food deliveries to families in need.
- Loss of in-person programs that work with at-risk youth, these programs include afterschool activities, career development, Late Night Hoops, Summer Camp, and Drug & Violence Prevention. The children in these programs were supported in other ways by offering phone call check-ins, and deliveries of educational games and activities to the students' homes. Summer camp was modified to meet CDC guidelines with limited number of participants to allow for social distancing.
- Increased need for resources. The Community Health Navigator accommodated to families' needs by providing application assistance to ensure families received increased EBT benefits and financial assistance

For FY21, we plan to always provide the maximum programming while keeping compliant to current coronavirus safety guidelines.

Report and Plan by Health Need

The following tables present strategies and program activities the hospital has delivered or intends to deliver to help address significant health needs identified in the community health needs assessment. They are organized by health need and include statements of strategy and program impact, and any collaboration with other organizations in our community.

² Source: Feeding America: The Impact of the Coronavirus on Food Insecurity https://www.feedingamericaaction.org/



Health Need: Access to Health Care

Strategy or Program Name			Planned FY21
Financial Assistance	Financial assistance is offered in accordance with Dignity Health's Financial Assistance Policy. See page 24.	\boxtimes	\boxtimes
Community Education	Offered free of charge to community members, classes address a variety of health issues.	\boxtimes	\boxtimes
Community Health Navigator	Navigator contacts uninsured individuals who are high utilizers of the Emergency Department in an effort to find a more suitable medical home as well as connections to other social services agencies providing basic needs.	\boxtimes	\boxtimes
Health Professionals Education	Cardiac Symposium brings latest research to clinicians. Diabetes Symposium brings best practices to clinicians.	\boxtimes	
Free Flu Shots	Free flu shots will be offered to the community through a variety of flu shot clinics in the community.	\boxtimes	\boxtimes
Residents Training Program	Partnership with University of California Riverside School of Medicine to address the shortage of physicians in the Inland Empire.	×	
Community Grants Program	Partner with local non-profit agencies that share common values and work together to improve access to care for our community.	\boxtimes	\boxtimes

Impact: The hospital's initiatives to address access to health care/preventive practices are anticipated to result in: increased access to basic health information in both culturally appropriate and understandable terms; gains in public or private health care coverage; increased knowledge about how to access and navigate the health care system; access to agencies providing basic needs, thereby providing a critical safety net; increased primary care "medical homes"; and an increase in primary care physicians (long term strategy).

Collaboration: Key partners include community clinics (e.g. Lestonnac Free Clinic, Al-Shifa Clinic and other clinics in the Community Health Association Southern Region), community-based organizations (e.g. Family Assistance Program, Mary's Mercy Center and others), schools and school districts, faith groups, public health and local cities.



Health Need: Behavioral Health (includes Mental Health and Substance Use and Misuse)

Strategy or Program Name	Summary Description		Planned FY21
Cultural Trauma & Mental Health Resiliency Program	SBMC is partnering with UniHealth Foundation in a multi-hospital initiative to increase the capacity of local community organizations and community members to identify mental distress, address the impacts of trauma, and increase resiliency via delivery of mental health awareness education. The project focuses on children and youth of color living in underserved neighborhoods and provides funding to Making Hope Happen Foundation to conduct training.	\boxtimes	
Community Health Education	Community education will be offered to the community free of charge and will address a variety of behavioral health care topics.	\boxtimes	\boxtimes
Community Grants Program	Grant funds will be awarded to nonprofit organizations whose mission and values align with that of Dignity Health to deliver services and strengthen service systems, which improve the health and well-being of vulnerable and underserved populations	×	×

Impact: The hospital's initiatives to address behavioral health are anticipated to result in: better support system for youth mental health issues resulting from poverty and trauma; trained adults to better recognize and support youth, including recognizing signs of suicide ideation; youth more focused on school with a plan for continued education and career path; healthier lifestyles; and a support system to help them achieve their goals.

Collaboration: Key partners include behavioral health providers, Making Hope Happen Foundation (non-profit foundation of San Bernardino Unified City School District), schools and other school districts, community-based organizations, the UniHealth Foundation, Dignity Health Southern California Hospitals, law enforcement, and regional collaboratives that seek to support individuals' mental health, substance use and case management needs.



Health Need: Chronic Disease (including Overweight and Obesity)

Strategy or Program Name	Summary Description	Active FY20	Planned FY21
Chronic Disease Self-Management Program	Classes for chronic disease will be offered in English and Spanish to community members free of charge. In FY21, many of these classes are anticipated to be via virtual trainings in order to comply with COVID safety guidelines.	\boxtimes	\boxtimes
Diabetes Empowerment Education Program (DEEP)	Classes for diabetes will be offered in English and Spanish to community members free of charge.	\boxtimes	\boxtimes
Sweet Success Program	Provides monitoring and education to gestational diabetic women.	\boxtimes	\boxtimes
Support Groups	Support groups for chronic health conditions include obesity, breast cancer (groups in both English and Spanish), and a bereavement support group meets twice a month with a hospital chaplain.	×	×
Community Grants Program	Partner with local non-profit agencies that share common values and work together to improve access to care for our community.	×	\boxtimes

Impact: The hospital's initiatives to address chronic disease are anticipated to result in: a better understanding of an individual's chronic condition, including measures to control or improve the medical condition; a healthy birth for gestational diabetic women; better health for the gestational diabetic mother post-partum; an improved sense of self through the support groups.

Collaboration: Key partners include public health, faith community, community clinics, communitybased organizations, the Mexican Consulate, American Heart Association, American Cancer Society, and the American Diabetes Association.



Health Need: Housing and Homelessness

Strategy or Program Name	Summary Description	Active FY20	Planned FY21
Accelerating Investment for Healthy Communities	SBMC will participate in a national initiative designed to increase investments in the social determinants of health with an emphasis on affordable housing.	\boxtimes	\boxtimes
Community Health Navigator	The Community Health Navigator will follow up with homeless persons who seek care in the ER, but are not admitted to the hospital. The Community Health Navigator will provide connections to social service agencies.	\boxtimes	\boxtimes
Community Grants Program	Grant funds will be awarded to nonprofit organizations whose mission and values align with that of Dignity Health to deliver services and strengthen service systems, which improve the health and well-being of vulnerable and underserved populations.	×	\boxtimes

Impact: The hospital's initiatives to address housing and homelessness are anticipated to result in: an increase in affordable housing options for the community; early identification of the homeless and faster connections to appropriate agencies for basic needs; appropriate housing for homeless patients upon discharge; and increased primary care "medical homes" and access to health insurance among those reached by navigator.

Collaboration: Key partners include housing developers (e.g. National Community Renaissance and other non-profit housing developers), Mary's Mercy Center - including Mary's Village, City of San Bernardino and related city agencies, funders, the Center for Community Investment, hospitals and health systems, Diocese of San Bernardino and other faith communities, community clinics, community-based organizations, and other housing agencies.



Health Need: Safety & Violence

Strategy or Program Name	Summary Description	Active FY20	Planned FY21
Cultural Trauma & Mental Health Resiliency Program	SBMC is partnering with UniHealth Foundation in a multi-hospital initiative to increase the capacity of local community organizations and community members to identify mental distress, address the impacts of trauma, and increase resiliency via delivery of mental health awareness education. The project focuses on children and youth of color living in underserved neighborhoods and provides funding to Making Hope Happen Foundation to conduct training.	\boxtimes	\boxtimes
Family Focus Center	The Family Focus Center will provide services and programs for at-risk youth. Services will include: after school activities, career development, Late Night Hoops, Summer Camp, Drug & Violence Prevention and Health & Nutrition. The Values to Success program will increase knowledge of healthy behaviors, helped build character and promote a sense of self-worth and self-efficacy. The Bridges program will support young adults who have graduated high school but need assistance in navigating college, careers and housing.	\boxtimes	\boxtimes
Stepping Stones Program	The Stepping Stones Program will provide an opportunity for teens and young adults to gain valuable hospital workplace experience through volunteer and mentor activities. The program allows participants to spend time volunteering in the hospital, providing focus on education attainment and career opportunities as a means to stability.	\boxtimes	\boxtimes
Community Grants Program	Grant funds will be awarded to nonprofit organizations whose mission and values align with that of Dignity Health to deliver services and strengthen service systems, which improve the health and well-being of vulnerable and underserved populations	\boxtimes	×

Impact: The hospital's initiatives to address safety and violence are anticipated to result in: youth more focused on school with a plan for continued education and career path; tobacco, alcohol and drug avoidance; healthier lifestyles; and a support system to help them achieve their goals.

Collaboration: Key partners include schools and school districts (e.g. San Bernardino City Unified School District and San Bernardino County Unified School District, Aquinas High School), colleges and universities (e.g. California State University San Bernardino, Valley College), businesses, faith community, cities, parks and recreation agencies, community clinics, community-based organizations, housing agencies and law enforcement.

Community Grants Program

One important way the hospital helps to address community health needs is by awarding financial grants to non-profit organizations working together to improve health status and quality of life. Grant funds are used to deliver services and strengthen service systems, to improve the health and well-being of vulnerable and underserved populations.

In FY20, the hospital awarded the grants below totaling \$154,464. Total amounts listed below are higher, as St. Bernardine Medical Center collaborates with Community Hospital of San Bernardino to provide joint awards. Some projects also may be described elsewhere in this report.

Grant Recipient	Project Name	Amount
Family Assistance Program	Supporting Victims in the Emergency Dept.	\$ 64,000
Legal Aid Society of San Bernardino	From At-Risk to Resiliency Via Access	\$ 70,727
Lestonnac Free Clinic	Community Continuum of Health Collaborative	\$ 75,000
Mary's Mercy Center	Better Health Through Partnership	\$ 45,000

Program Digests

The following pages include Program Digests describing key programs and initiatives that address one or more significant health needs. 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.

Community Hea	alth Navigator
Significant Health Needs Addressed	 □ Access to Care/Preventive Practice □ Chronic Diseases □ Housing and Homelessness
Program Description	The Community Health Navigator follows up by phone to patients who are high utilizers of the Emergency Department who are seen for diagnoses that could be addressed in an outpatient setting. Patients are provided with community resources. Assistance is provided for enrolling in government sponsored plans. The navigator may also assist with housing, food and employment needs.
Community Benefit Category	A3 – Healthcare Support Services Information & Referral.
	FY 2020 Report
Program Goal / Anticipated Impact	Assist the frequent users of the Emergency Department (ED) with conditions better treated as an outpatient instead of using the ED as regular source of health care. Navigator will also work with Care Coordination team for homeless patients upon discharge. Connection to social service agencies will be provided as appropriate.
Measurable Objective(s) with Indicator(s)	10% of those contacted by the Navigator will accept a referral to a free clinic.
Intervention Actions for Achieving Goal	Navigator will continue to follow up by phone to high utilizers of the ED, primarily the uninsured. ED Admitting staff also provides Navigator information to patients.
Collaboration	Lestonnac Free Clinic, Catholic Charities, Mary's Table, Legal Aid and other local non-profit support agencies and churches.
Performance / Impact	During FY20 the Navigator followed up on a total of 907 high utilizers of the ED. Of these, 69 (7.6%) received a referral to a free clinic.
Hospital's Contribution / Program Expense	\$131,332 was expended in staffing and purchased items for clients.
	FY 2021 Plan
Program Goal / Anticipated Impact	Assist the frequent users of the Emergency Department (ED) with conditions better treated as an outpatient instead of using the ED as regular source of health care. Connection to social service agencies will be provided as appropriate.
Measurable Objective(s) with Indicator(s)	10% of those contacted by the Navigator will accept a referral to a free clinic.
Intervention Actions for Achieving Goal	Navigator will continue to follow up by phone to high utilizers of the ED, primarily the uninsured. ED Admitting staff also provides Navigator information to patients.
Planned Collaboration	Lestonnac Free Clinic, Catholic Charities, Mary's Table, Legal Aid and other local non-profit support agencies and churches.

Family Focus C	enter
Significant Health Needs Addressed	
Program Description	A program geared to at-risk youth in the community, the Family Focus Center (FFC) is located across the street from San Bernardino High School. Services provided by the hospital at the center include several after school activities, career development, and Late Night Hoops. <i>Values to Success</i> increases participants overall knowledge of healthy behaviors, helps build character and promotes a sense of self-worth and self-efficacy. <i>Bridges</i> supports young adults who have graduated high school but need assistance in navigating college, career and housing.
Community Benefit Category	A4 – Social and Environmental Improvement Activities.
	FY 2020 Report
Program Goal / Anticipated Impact	Improve the lives of those attending the Family Focus Center (FFC).
Measurable Objective(s) with Indicator(s)	Increase the number of youth enrolled in the Bridges Program who complete their individualized Success Plans.
Intervention Actions for Achieving Goal	Each person enrolled in the Bridges Program works with staff to set personal goals. Goals may include obtaining legal documents, education goals, career goals, housing and/or personal growth and development.
Collaboration	The Family Focus Center collaborates with several community agencies, bringing in a variety of experts in multiple fields to engage with the at-risk population we serve.
Performance / Impact	FY2019: 36 successfully completed their individualized Success Plan. FY2020: 16 of 33 successfully completed their individualized Success Plan. (Spring session was cancelled early on due to COVID restrictions.)
Hospital's Contribution / Program Expense	\$444,661 was expended in staffing and programs.
	FY 2021 Plan
Program Goal / Anticipated Impact	Improve the lives of those attending the Family Focus Center.
Measurable Objective(s) with Indicator(s)	With COVID requiring remote learning at the start of the school year, FFC will establish a Learning Lab to assist at-risk youth with remote instruction. Success will be measured by percentage successfully completing school curriculum.
Intervention Actions for Achieving Goal	Learning Lab will include connection with students' teachers and Zoom curriculum, with additional time for extracurricular activity (art, nutrition, physical activity, personal skill building). Will also provide breakfast and lunch to participants, and additional food for weekends as needed.
Planned Collaboration	School districts of students, Community Health Educator, community agencies as appropriate.

Dignity Health (Community Grants Program
Significant Health Needs Addressed	 ☒ Access to Care/Preventive Practice ☒ Behavioral Health ☒ Chronic Diseases ☒ Housing and Homelessness ☒ Safety and Violence
Program Description	Award funds to local non-profit organizations to be used to effect collective impact, addressing the significant health priorities established by the most recent Community Health Needs Assessment. Awards will be given to agencies with a formal collaboration and a link to the hospital.
Community Benefit Category	E1 – Cash Donation
	FY 2020 Report
Program Goal / Anticipated Impact	Focused attention on health priorities and high utilizers in the hospital will provide connections to needed medical care and social services, thereby providing more appropriate care to the individual.
Measurable Objective(s) with Indicator(s)	Funding will be provided to implement programs that support significant health priorities and demonstrate strong collaboration with the hospital. 100% of funded programs will report objectives as a result of SBMC Community Grants on a semi-annual basis.
Intervention Actions for Achieving Goal	All awarded agencies will work with Director of Community Health to ensure programs are meeting the objectives stated in their grant proposals.
Collaboration	Collaboration with agencies receiving funding in FY20 included: Family Assistance Program, Legal Aid of San Bernardino, Lestonnac Free Clinic and Mary's Mercy Center.
Performance / Impact	4 collaborative proposals, representing 13 local non-profit agencies, received awards. Grants ranged from \$45,000 to \$75,000 to address significant health needs.
Hospital's Contribution / Program Expense	\$154,464 was expended in grant awards.
	FY 2021 Plan
Program Goal / Anticipated Impact	Focused attention on health priorities and high utilizers in the hospital will provide connections to needed medical care and social services, thereby providing more appropriate care to the individual.
Measurable Objective(s) with Indicator(s)	Funding will be provided to implement programs that support significant health priorities and demonstrate strong collaboration with the hospital. 100% of funded programs will report objectives as a result of SBMC Community Grants on a semi-annual basis.
Intervention Actions for Achieving Goal	All awarded agencies will work with Director of Mission to ensure programs are meeting the objectives stated in their grant proposals.
Planned Collaboration	Collaboration will continue with agencies awarded funds in FY21.

Other Programs and Non-Quantifiable Benefits

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

National Community Renaissance of California (NCRC)

In June 2018 Dignity Health approved a 7-year \$1,200,000 loan to NCRC, one of the largest nonprofit affordable housing developers in the U.S., who is partnering with the County of San Bernardino on the redevelopment of Waterman Gardens into Arrowhead Grove—a mixed income housing development together with attractive neighborhood facilities, shopping and recreational facilities.

Mary's Village

In January 2020, Dignity Health awarded \$157,584 to Mary's Village through the Homeless Health Initiative. Mary's Village is an 82-bed facility for homeless men looking to get off the streets and into permanent supportive housing. The funds provided beds and furniture for the residents and office furniture for staff.

First Step Staffing, Los Angeles

First Step Staffing, Inc. (FSS) was incorporated in Atlanta, Georgia, in 2006 as a nonprofit organization for the purpose of providing companies with a socially responsible alternative to typical staffing agencies, while offering meaningful employment opportunities for men and women who are in transition. In November, 2019, CommonSpirit Health approved a 5-year \$1,500,000 loan to FSSLA as gap financing for the acquisition of customer accounts and assets of OS4L in Paramount, Irwindale, and Corona helping very-low-income and homeless individuals find temporary and permanent employment opportunities.

Community Vital Signs

Since its launch in 2011, San Bernardino County *Community Vital Signs* has attracted both local and national attention spotlighting the county's efforts for rich collaboration by exemplifying the idea that all sectors are interrelated and must work in concert for collective action. The Community Transformation Plan serves as a guide to transform San Bernardino County into a healthier place to live, work, learn and play. Community Health and Outreach staff has served on the Steering Committee of Community Vital Signs to ensure integration of the health component in the program planning.

Preparation for Community Emergencies

In addition to collaboration with local agencies, St. Bernardine Medical Center continues to engage in the annual California Statewide Medical and Health Exercise (SWMHE), a realistic exercise meant to aid healthcare entities and their partners in developing operational plans in the event of a community emergency. This exercise is sponsored by the California Department of Public Health and the Emergency Medical Services Authority with representatives from multiple additional agencies. The FY20 California Statewide Medical and Health Exercise was held on November 21, 2019. Additionally, a Spring disaster exercise was conducted on March 11, 2020, to ensure the hospital is well prepared for any scenario that could impact our community.

Economic Value of Community Benefit

The economic value of all community benefit is reported at cost. Patient financial assistance (charity care) reported here is as reported to the Office of Statewide Health Planning and Development in Hospital Annual Financial Disclosure Reports, as required by Assembly Bill 204. The community benefit of Medicaid and other means-tested programs is calculated using a cost-to-charge ratio to determine costs, minus revenue received for providing that care. Other net community benefit expenses are calculated using a cost accounting methodology. Restricted offsetting revenue for a given activity, where applicable, is subtracted from total expenses to determine net benefit in dollars.

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	Persons	Net Benefit	% of Org. Expenses
Benefits for Living in Poverty			•
Financial Assistance	5,051	4,484,111	1.1%
Medicaid	90,009	20,862,007	4.9%
Community Services			
A - Community Health Improvement Services	7,941	637,645	0.1%
E - Cash and In-Kind Contributions	4	0	0.0%
F - Community Building Activities	171	447	0.0%
G - Community Benefit Operations	0	305,283	0.1%
Totals for Community Services	8,116	943,375	0.2%
Totals for Living in Poverty	103,176	26,289,493	6.2%
Benefits for Broader Community			
Community Services			
A - Community Health Improvement Services	2,580	382,519	0.1%
B - Health Professions Education	208	4,031,528	0.9%
C - Subsidized Health Services	121	945	0.0%
E - Cash and In-Kind Contributions	2,168	27,189	0.0%
F - Community Building Activities	298	155,178	0.0%
Totals for Community Services	5,375	4,597,359	1.1%
Totals for Broader Community	5,375	4,597,359	1.1%
Totals - Community Benefit	108,551	30,886,852	7.3%
Medicare	21,979	41,809,647	9.8%
Totals with Medicare	130,530	72,696,499	17.1%

Hospital Board Roster

Robert Carlson, PhD, Board Chair

Retired Educator

Toni Callicot

Retired CEO American Red Cross

Samuel Cherny, MD

Physician

June Collison, President

Community Hospital of San Bernardino

Jean-Claude Hage, MD

Physician

Kathleen Howard, CCVI

Sisters of Charity of the Incarnate Word

Nancy Jurecki, OP

Providence Health and Services

Douglas Kleam, President

St. Bernardine Medical Center

Wilfrid Lemann

Fullerton, Lemann, Schaefer & Dominick, LLP

Dale Marsden

Retired Superintendent San Bernardino City Unified

School District

Peter Mendoza

Human Services Program Integrity Division Chief

Ashis Mukherjee, MD

Physician

Faye Pointer

Retired Social Service Worker/Advocate

Michael Salazar

Vice President Wealth Management UBS

Financial Services, Inc.

Prabhdeep Sethi, MD

Chief of Staff

Connie Threlkel

President GoodFaith Medical Transportation Co., Inc.

Judith Valles

Retired Educator

Community Benefit Initiative Committee Roster

Fr. Michael Barry

Mary's Mercy Center

Claudia Davis, PhD

California State University, San Bernardino Community Hospital of San Bernardino Board Member

Deborah Davis

Legal Aid of San Bernardino

Ana Gamiz

Housing Authority of the County of San Bernardino

Sharon Gollaher, RN, MBA, ACM-RN, CMCN

Director Care Coordination St. Bernardine Medical Center

Sr. Kathleen Howard, CCVI

St. Mary Medical Center

St. Bernardine Medical Center Board Member

Rev. Deborah Jones

Director Mission Integration Community Hospital of San Bernardino Vicki Lee

SBCUSD Family Resource Center

Community Hospital of San Bernardino Board Member

Linda McDonald

Vice President Mission Integration Dignity Health Southern California

Kathleen McDonnell

Director Mission Integration St. Bernardine Medical Center

Candy Stallings

San Bernardino Sexual Assault Services Retired

Jordan Wright, Policy Advisor

Board of Supervisors

Josie Gonzales, Supervisor 5th District

Margo Young, C.PP.S., MD

St. Bernardine Medical Center

Financial Assistance Policy Summary

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

Free Care

• If you are underinsured with a family income of up to 250% of the Federal Poverty Level, you may be eligible to receive hospital services at no cost to you.

Discounted Care

• If you are uninsured or underinsured with an annual family income between 250-350% of the Federal Poverty Level, you may be eligible to have your bills for hospital services reduced to the highest amount reasonably expected to be paid by a government payer, which is unusually the amount that Medicare would pay for the same services.
If you are uninsured or underinsured with an annual family income between 350-500% of the Federal Poverty Level, you may be eligible to have your bills for hospital services reduced to the Amount Generally Billed, which is an amount set under federal law that reflects the amount that would have been paid to the hospital by private health insurers and Medicare (including co-pays and deductibles) for the medically necessary services.

If you are eligible for financial assistance under our Financial Assistance Policy you will not be required to pay more than the Amount Generally Billed described above. If you qualify, you may also request in interest-free extended payment plan.

You will never be required to make advance payment or other payment arrangements in order to receive emergency services.

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

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

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

California Hospital Medical Center 1401 South Grand Ave, Los Angeles, CA 90015 | Financial Counseling 213-742-5530

Patient Financial Services 888-488-7667 | www.dignityhealth.org/californiahospital/paymenthelp

Community Hospital of San Bernardino 1805 Medical Center Dr, San Bernardino, CA 92411

Financial Counseling 909-806-1317 | Patient Financial Services 909-806-1281

www.dignityhealth.org/san-bernardino/paymenthelp

Glendale Memorial Hospital 1420 South Central Ave, Glendale, CA 91204 | Financial Counseling 818-502-2305

Patient Financial Services 888-488-7667 | www.dignityhealth.org/glendalememorial/paymenthelp

Northridge Hospital Medical Center 18300 Roscoe Blvd, Northridge, CA 91328 | Financial Counseling 818-885-5368

Patient Financial Services 888-488-7667 | www.dignityhealht.org/northridgehospital/paymenthelp

St. Bernardine Medical Center 2101 N. Waterman Ave, San Bernardino, CA 92404

Financial Counseling 909-883-8711 ext. 4408 | Patient Financial Services 909-881-4418

www.dignityhealth.org/stbernardinemedical/paymenthelp

St. Mary Medical Center 1050 Linden Ave, Long Beach, CA 90813 | Financial Counseling 562-491-7078

Patient Financial Services 888-488-7667 | www.dignityhealth.org/stmarymedical/paymenthelp

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