Community Hospital San Bernardino

Community Benefit 2022 Report and 2023 Plan

Adopted October 2022





A message from

June Collison, President, and Tony Myrell, Chair of the Dignity Health Community Hospital San Bernardino 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.

Community Hospital San Bernardino 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 2022 Report and 2023 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 voluntarily 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 2022 (FY22), Community Hospital San Bernardino provided \$34,302,393 in patient financial assistance, unreimbursed costs of Medicaid, community health improvement services and other community benefits. The hospital also incurred \$5,941,783 in unreimbursed costs of caring for patients covered by Medicare.

The hospital's Community Board reviewed, approved and adopted the Community Benefit 2022 Report and 2023 Plan at its October 27, 2022 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 out to Reverend Deborah, Director Mission Integration at (909) 806-1415 or Deborah.Jones2@Common Spirit.org.

June Collison, President Community Hospital San Bernardino

Tony Myrell, Chairperson Community Board of Directors

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At-a-Glance Summary

Community Served



The Dignity Health Community Hospital San Bernardino (CHSB) service area includes 31 ZIP Codes in 17 cities within San Bernardino County, including the City of San Bernardino. CHSB services 1,208,298 racially residents.

Economic Value of Community Benefit

\$34,302,393 in patient financial assistance, unreimbursed costs of Medicaid, community health improvement services, community grants and other community benefits.

\$5,941,783 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 Health care
- Behavioral Health
- Chronic Diseases
- Housing & Homelessness
- Preventive Practices
- Safety & Violence Prevention

FY22 Programs and Services



The hospital delivered several programs and services to help address identified significant community health needs. These included:

- Stepping Stones Program
- Health Education Center
- Community Health Navigator
- Community Health Improvement Grants Program
- Accelerating Investments for Healthy Communities Initiative

FY23 Planned Programs and Services



FY22 programs will continue with adjustments made for the new significant health needs that were not previously addressed in the FY 19, namely Preventive Practices. All programs will be modified to fit COVID state guidelines to keep our staff and 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 the hospital's website https://www.dignityhealth.org/communityhospitalofsanbernardino/about-us/community-programs/community-health-neds-assessment-plan.

Written comments on this report can be submitted to the Community Hospital San Bernardino Mission Integration Office at 1805 Medical Center Drive, San Bernardino, CA 92411. To send comments or questions about this report, please e-mail Deborah Jones, Director of Mission Integration at Deborah.Jones2@CommonSpirit.org.

Our Hospital and the Community Served

About Community Hospital San Bernardino

Community Hospital of San Bernardino is a member of Dignity Health, which is a part of CommonSpirit Health. CHSB is located at 1805 Medical Center Drive, San Bernardino, CA 92411. Licensed for 343 beds with an average daily census of 260 during fiscal year 2022. Community Hospital of San Bernardino employees 1,556 employees and maintains professional relationships with 231 local physicians and 13 Allied Health Professionals.

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

It is the policy of CommonSpirit Health to provide, without discrimination, emergency medical care and medically necessary care in CommonSpirit hospital facilities to all patients, without regard to a patient's financial ability to pay. This hospital has a financial assistance policy that describes the assistance provided to patients for whom it would be a financial hardship to fully pay the expected out-of-pocket expenses for such care, and who meet the eligibility criteria for such assistance. The financial assistance policy, a plain language summary and related materials are available in multiple languages on the hospital's website.

Description of the Community Served

Community Hospital of San Bernardino serves 31 ZIP Codes in 17 cities, 8 of which are located in the City of San Bernardino. A summary description of the community is provided below, and additional details can be found in the CHNA report.

The population of the CHSB service area is 1,208,298. Children and youth, ages 0-17, make up 28% of the population, 61.8% are adults, ages 18-64, and 10.2% of the population are seniors, ages 65 and older. The majority of the population in the service area identifies as Hispanic/Latino (60.6%). 22.9% of the population identifies as White/Caucasian, 8.9% as Black/African American. 4.9% as Asian and 2.2% of the population identifies as multiracial(two-or-more races), 0.2% as American

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Indian/Alaskan Native, 0.2% as Native Hawaiian/Pacific Islander, and 0.2% as American Indian/Alaskan Native.

Among the residents in the service area, 17.3% are at or below 100% of the federal poverty level (FPL) and 40/3% are 200% of the FPL or below. In the hospital service areas. 23.7&of adults, ages 25 and older, with no high school diploma, which is higher than the state rate of (16.7%).

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 April 2022. This document also reports on programs delivered during fiscal year 2022 that were responsive to needs prioritized in the hospital's previous CHNA report; all of the 2019 CHNA's significant needs are among the 2022 ones.

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 https://www.dignityhealth.og/content/dam/dignity-health/pdfs/chna/2002-chna/CommunityHospitalofSanBernardino2022-CHNA2.pdf or upon request at the hospital's Mission Services office.

Significant Health Needs

The CHNA identified the significant needs in the table below, which also indicates which needs the hospital intends to address. Identified needs may include specific health conditions, behaviors and health care services, and also health-related social needs that have an impact on health and well-being.

| Significant Health Need | Description | Intend to Address? |
|-------------------------|---|--------------------|
| Access to health care | Access to health care refers to the availability of primary care and specialty care services. Health insurance coverage is considered a key component to ensure access to health care. Barriers to care can include lack of transportation, language and cultural issues. | X |
| Birth indicators | Poor pregnancy and birth outcomes include low birthweight, preterm births and infant mortality. These are associated with | |

| Significant Health Need | Description | Intend to Address? |
|---------------------------------|--|--------------------|
| | late or no prenatal care, unplanned pregnancy, cigarette smoking, alcohol and other drug use, being HIV positive, obesity, maternal age, and poor nutrition. | |
| Chronic diseases | A chronic disease or condition usually lasts for three months or longer and may get worse over time. Chronic diseases can usually be controlled but not always cured. The most common types of chronic diseases are cancer, heart disease, | X |
| COLUD 10th | stroke, diabetes, and arthritis. | |
| COVID-19* | The Coronavirus disease (COVID-19) is an infectious disease caused by the SARS-CoV-2 virus. In the U.S., over one million persons have died as a result of contracting COVID. | X |
| Dental care/oral health | Oral health refers to the health of the teeth, gums, and the entire oral-facial system. Some of the most common diseases that impact our oral health include cavities (tooth decay), gum (periodontal) disease, and oral cancer. | |
| Economic insecurity | Economic insecurity is correlated with poor health outcomes. Persons with low incomes are more likely to have difficulty accessing health care, have poor-quality health care, and seek health care less often. | |
| Food insecurity | The USDA defines food insecurity as limited or uncertain availability of nutritionally adequate foods or an uncertain ability to acquire foods in socially-acceptable ways. | |
| Housing and homelessness | Homelessness is known as a state of being unhoused or unsheltered and is the condition of lacking stable, safe, and adequate housing. | X |
| Mental health | Mental health includes our emotional, psychological, and social well-being. It affects how we think, feel, and act. | X |
| Overweight and obesity* | Overweight and obesity are common conditions that are defined as the increase in size and amount of fat cells in the body. Obesity is a chronic health condition that raises the risk for heart disease and is linked to many other health problems, including type 2 diabetes and cancer. | X |
| Preventive practices | Preventive practices refer to health maintenance activities that help to prevent disease. For example, vaccines, routine health screenings (mammogram, colonoscopy, Pap smear) and injury prevention are preventive practices. | X |
| Sexually transmitted infections | Sexually transmitted infections (STIs) usually pass from one person to another through sexual contact. Common STIs include syphilis, gonorrhea, and chlamydia. | |

| Significant Health Need | Description | Intend to Address? |
|--------------------------------|--|--------------------|
| Substance use | Substance use is the use of tobacco products, illegal drugs or prescription or over-the-counter drugs or alcohol. Excessive use of these substances, or use for purposes other than those for which they are meant to be used, can lead to physical, social or emotional harm. | X |
| Violence and injury prevention | Violent crimes include homicide, rape, robbery and assault. Property crimes include burglary, larceny and motor vehicle theft. Injuries are caused by accidents, falls, hits, and weapons, among other causes. | X |

^{*}COVID-19 will be addressed within the scope of the Preventive Practices needed.

Significant Needs the Hospital Does Not Intend to Address

Taking existing hospital and community resources into consideration, CHSB will not directly address birth indicators, dental care, economic insecurity, food insecurity, and sexually transmitted infections as priority health needs. Knowing that there are not sufficient resources to address all the community health needs, CHSB chose to concentrate on those health needs that can most effectively be addressed given the organization's areas of focus and expertise, The hospital has insufficient resources to effectively address all the identified needs and, in some cases, the needs are currently addressed by others in the community.

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2022 Report and 2023 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 FY22 and planned activities for FY23, with statements on impacts and community collaboration. Program Highlights provide additional detail on select programs.

Planned activities are consistent with current significant needs and the hospital's mission and capabilities. The hospital may amend the plan as circumstances warrant, such as changes in community needs or resources to address them.

Creating the Community Benefit Plan

Community Hospital of San Bernardino 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 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 Committee Benefit Initiative Committee (CBIC) members with information regarding current programs already addressing identified health needs as well as identified opportunities for new sources to address significant health needs. 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 Health Grants Program. These programs and strategies are highlighted on pages 10-14.

Community Health Strategic Objectives

The hospital believes that program activities to help address significant community health needs should reflect a strategic use of resources and engagement of participants both inside and outside of the health care delivery system.

CommonSpirit Health has established four core strategic objectives for community health improvement activities. These objectives help to ensure that our program activities overall address strategic aims while meeting locally-identified needs.





Create robust alignment with multiple departments and programmatic integration with relevant strategic initiatives to optimize system resources for advancing community health.



Work with community members and agency partners to strengthen the capacity and resiliency of local ecosystems of health, public health, and social services.





Scale initiatives that complement conventional care to be proactive and community-centered, and strengthen the connection between clinical care and social health.

Partner, invest in and catalyze the expansion of evidence-based programs and innovative solutions that improve community health and well-being.

Report and Plan by Health Need

The tables below 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.



Health Need: Access to Care Health Care

| Strategy or Program Name | Summary Description | Active FY22 | Planned FY23 |
|--|---|----------------|-----------------|
| Financial assistance for the uninsured or underinsured | Community Hospital of San Bernardino 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 will 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. | | |
| Connected Community Network (CCN) | Through the CCN, hospital care coordination and community partner agencies will work together to identify vulnerable patients' health and health-related social needs, and electronically link health care providers to organizations that provide direct services. | | |
| Health Education Center | Community education will be offered to the community free of charge and will address a variety of access to health care topics including local resources for primary and preventive care, and navigating the health care system. | | |
| Flu shots | Free flu shots will be offered to the community through a variety of shot clinics in the community. | \boxtimes | |
| 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 | |

Goal and Impact: The hospital's initiatives to address access to health/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).

Collaborations: Key partners include community clinics (e.g. Lestonnac and other clinics in the Community Health Association Inland Southern Region), community-based organizations (e.g. Family Assistance Program, Mary's Mercy Center, Para Su Salud, schools and school districts (including Making Hope Happen Foundation), faith groups, public health and local cities.



Health Need: Behavioral Health Including Mental Health and Substance Use and Misuse

| Strategy or Program Name | Summary Description | Active FY22 | Planned FY23 |
|--|---|----------------|-----------------|
| Cultural Trauma & Mental Health Resiliency Program | CHSB is partnering with the Making Hope Happen Foundation in a multi-hospital initiative to increase the capacity of local community organizations and community members to identify mental distress, address the impact of trauma, and increase resiliency via delivery of mental health awareness education. The project focusses on children and youth of color living in underserved neighborhoods and provides funding to Making Hope Happen Foundation to conduct training. | | |
| Health Education Center | Community education will address a variety of behavioral health care topics. | × | |
| Adult Behavioral Health Program | There is an inpatient adult behavioral health program with 50 beds, Psychiatric Medical Program, and Involuntary Adult Inpatient Program. | X | \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. | | |

Goal and Impact: Increased access to behavioral health services in community settings and improved screening and identification of behavioral health needs.

Collaboration: Key partners include behavioral health providers, schools and school districts, community-based organizations, the UniHealth Foundation, Dignity Health Southern California Hospitals, law enforcement, San Bernardino City School District, and regional initiatives that seek to support individuals' mental health, substance use and case management needs.



Health Need: Chronic Diseases (Including Overweight and Obesity)

| Strategy or Program Name | Summary Description | Active FY22 | Planned FY23 |
|-----------------------------|--|----------------|-----------------|
| Health Education Center | Community education will be offered to the community free of charge and will address a variety of chronic disease-related health care topics, including the Chronic Disease Self-Management Program. | ⊠ | |
| Diabetes Wellness Center | The Sweet Success program is housed at the Diabetes Wellness Center and will focus on gestational diabetes. | × | \boxtimes |
| Support groups | Support groups will be offered to persons with chronic disease conditions, their families and caregivers. | × | \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. | X | |

Goal and Impact: Increased identification and treatment of chronic diseases and improved compliance with chronic disease prevention and management recommendations.

Collaborators: Key partners include public health, faith community, community clinics, community-based organizations, American Heart Association, Cancer Society, and the American Diabetes Association.

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Health Need: Housing and Homelessness

| Strategy or | Summary Description | Active | Planned |
|---|--|--------|---------|
| Program Name | | FY22 | FY23 |
| Accelerating Investment for Healthy Communities | CHSB will participate in a national initiative designed to increase investments in the social determinants of health with an emphasis on affordable housing. | X | |

| 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. | | |
|------------------------------------|--|-------------|---|
| Community Health 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 | X |

Goal and 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).

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

| Health Nee | d: Preventive Practices | | |
|---|--|----------------|-----------------|
| Strategy or Program Name | Summary Description | Active FY22 | Planned FY23 |
| Vaccines | Provides free vaccines in the community. | \boxtimes | \boxtimes |
| Health Education Center | Provides community education on a variety of preventive care topics. | | |
| Personal Protective Equipment (PPE) | Distributes PPE at local community events and to community partners. | | |
| Community Health Improvement Grants program | Offers grants to nonprofit community organizations that provide preventive care programs and services. | | |

Goal and Impact: The hospital's initiatives to address prevention are anticipated to result in: increased access to preventive care services in the community, increased compliance with preventive care recommendations (screenings, vaccines, and life style and behavior changes), and decreases spread of communicable diseases.

Collaboration: Key partners include public health, faith community, community clinics, community-based organizations.

| Health Need: Safety and Violence Prevention | | | |
|--|--|----------------|-----------------|
| Strategy or Program Name | Summary Description | Active FY21 | Planned FY22 |
| Cultural Trauma & Mental Health Resiliency Program | CHSB is partnering with the 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. | | |
| 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 Stepping Stones program provides teens and young adults with a way to give back to their community while keeping them off the streets, safe and out of harm's way. | | |
| 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. | | |

Goal and 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 San Bernardino City Unified School District, San Bernardino County Unified School District, Aquinas High School, colleges and universities, including California State University San Bernardino, Valley College and others, businesses, faith community, cities, parks and recreation agencies, community clinics, community-based organizations, housing agencies and law enforcement.

Community Health Improvement 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 related to CHNA priorities.

In FY22, the hospital awarded the grants below totaling \$156,452. Total amounts listed below are higher as Community Hospital of San Bernardino collaborates with St. Bernardine Medical Center to provide joint awards. Some projects also may be described elsewhere in this report.

| Grant Recipient | Project Name | Amount |
|-----------------------------|---|----------|
| Family Assistance Program | Emergency Assistance | \$40,587 |
| Legal Aid of San Bernardino | Access to Health and Homes | \$98,430 |
| Lestonnac Free Clinic | Community Continuum of Health Collaborative | \$75,000 |
| Mary's Mercy Center | Veronica's Home of Mercy – Better Health Through Partnership | \$45,000 |

Program Highlights

The following pages describe a sampling of programs and initiatives listed above in additional detail, illustrating the work undertaken to help address significant community health needs.

| Dignity Health Community Grants Program | | | | | |
|--|---|--|--|--|--|
| Significant Health Needs Addressed | Access to care Behavioral health (mental health and substance use Chronic diseases (including overweight and obesity Housing and homelessness Safety and violence | | | | |
| Program Description | Awards funds to local non-profit organizations to be used to effect collective impact, addressing the significant health priories established by the most recent Community Health Needs and Assessment. Awards will be given to agencies with a formal collaboration and link to the hospital. | | | | |
| Population Served | Underserved and marginalized populations | | | | |
| Program Goal / Anticipated Impact | Focused attention on health priorities and high utilizers in the hospital will provide to needed medical care and social services, thereby providing more appropriate care to the individual. Will provide connections to needed medical care and social services, thereby providing more appropriate care to the individual and improving the health of the community. | | | | |
| FY 2022 Report | | | | | |
| Activities Summary | Funding was awarded to Family Assistance Program, Legal Aid of San Bernardino, Lestonnac Free Clinic and Mary's Mercy Center. | | | | |
| Performance / Impact | Funding FY22 addressed the following needs: Access to Healthcare, Behavioral Health, Chronic Diseases, Housing and Homelessness and Safety and Violence. Agencies reported that they are on track to meet goals established in their respective proposals. | | | | |
| Hospital's Contribution / Program Expense | \$156,452 was expended in cash awards to recipients. | | | | |
| FY 2023 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 and improving the health of the community | | | | |

| Planned Activities | Collaboration will continue with agencies awarded funds in FY22 which |
|--------------------|---|
| | will allow for better connection for community and patients who are |
| | discharged and who may be able to benefit from service offered by the |
| | non-profit agencies. |

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.

Preparation for Community Emergencies

In addition to collaboration with local agencies, Community Hospital of San Bernardino continues to engage in disaster drills. For 2020 we had a COVID-19 drill in March 2020 and also a pandemic surge drill in December 2020. In light of the current pandemic we were on a modified exempt status for 2020. We had a tabletop drill in January 2022 and July 2022. These drills were to ensure the hospital is well prepared for any scenario that could impact our community.

Economic Value of Community Benefit

| Complete Summary - Classified Including N | Ion Comn | nunity Benefit | (Medicare) | | |
|--|----------|----------------|-----------------------|----------------|---------------|
| For period from 7/1/2021 through 6/30/2022 | | | | | |
| | Persons | Expense | Offsetting Revenue | Net Benefit | % of Expenses |
| Benefits For Poor | | | | | |
| Financial Assistance | 10,012 | 8,113,000 | 0 | 8,113,000 | 2.8% |
| Medicaid | 57,566 | 189,741,147 | 166,157,373 | 23,583,774 | 8.3% |
| Community Services | | | | | |
| A - Community Health Improvement Services | 14,436 | 669,327 | 0 | 669,327 | 0.2% |
| E - Cash and In-Kind Contributions | 748 | 659,378 | 0 | 659,378 | 0.2% |
| G - Community Benefit Operations | 0 | 127,963 | 0 | 127,963 | 0.0% |
| Totals for Community Services | 15,184 | 1,456,668 | 0 | 1,456,668 | 0.5% |
| Totals for Poor | 82,762 | 199,310,815 | 166,157,373 | 33,153,442 | 11.6% |
| Benefits for Broader Community | | | | | |
| Community Services | | | | | |
| A - Community Health Improvement Services | 1,261 | 655,982 | 124,783 | 531,199 | 0.2% |
| B - Health Professions Education | 25 | 449,726 | 0 | 449,726 | 0.2% |
| F - Community Building Activities | 106 | 168,026 | 0 | 168,026 | 0.1% |
| Totals for Community Services | 1,392 | 1,273,734 | 124,783 | 1,148,951 | 0.4% |
| Totals for Broader Community | 1,392 | 1,273,734 | 124,783 | 1,148,951 | 0.4% |
| Totals - Community Benefit | 84,154 | 200,584,549 | 166,282,156 | 34,302,393 | 12.0% |
| Medicare | 2,820 | 16,030,587 | 10,088,804 | 5,941,783 | 2.1% |
| Totals with Medicare | 86,974 | 216,615,136 | 176.370.960 | 40,244,176 | 14.1% |

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

Hospital Board and Committee Rosters

Community Hospital of San Bernardino

June Collison

Community Hospital of San Bernardino

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Community Hospital of San Bernardino

Gabriel Ramirez

New York Life Securities

Julie Sprengel

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Dignity Health

Community Benefit Initiative Committee Roster

Claudia Davis, PhD

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

Pablo Ramirez Executive Director

Legal Aid of San Bernardino

Daniel Flores

Executive Director Mary's Mercy Center

Christian Starks

Director Community Health St. Bernardine Medical Center

Rev. Deborah Jones

Director Mission Integration & Spiritual Care 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