2025 Community Health Implementation Strategy and Plan

Adopted November, 2025





A member of CommonSpirit

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At-a-Glance Summary

Community Served



Mercy Medical Center Mt. Shasta is located in Siskiyou County. Siskiyou County is located in the northernmost part of California, situated along the U.S. Interstate 5 corridor bordering the State of Oregon. Siskiyou County is rural in nature covering 6,347 square miles with a total population of approximately 44,000 people. The majority of patients served by the hospital reside in one of the southern Siskiyou County ZIP codes, including: 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 the hospitals intends to address with strategies and programs are:



- Access to health care, including specialty care and dental care
- Access to behavioral health, including substance use disorder treatment and navigation of services
- Low-income and supportive humane housing
- Unmet vital conditions, including transportation, education, food and economic stability
- Violence prevention

Strategies and Programs to Address Needs

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





- Human Trafficking/Violence Prevention
- Substance Use Navigation
- **Transportation Services**



Planned resources and collaborators to help address these needs, as well as anticipated impacts of the strategies and programs, are described in the "Strategies and Program" Activities by Health Need" section of the document.

This document is publicly available online at the hospital's website. Written comments on this strategy and plan can be submitted to the Mercy Medical Center Mt. Shasta's Community Health Office, 914 Pine St., Mt. Shasta, CA 96067 or by e-mail to alexis.ross@commonspirit.org.

Our Hospital and the Community Served

About the Hospital

Mercy Medical Center Mt. Shasta is a member of CommonSpirit Health, one of the largest nonprofit health systems in the U.S., with more than 2,200 care sites in 24 states coast to coast, serving patients in big cities and small towns across America.

Mercy Medical Center Mt. Shasta is a 25-bed Critical Access Hospital situated on a 14-acre campus at 914 Pine Street in Mt. Shasta, California, near Interstate 5 and the base of Mount Shasta. Accredited by The Joint Commission and a member of the American Hospital Association, it serves as a Level III Trauma Center and Primary Stroke Center. The hospital provides a wide array of comprehensive inpatient and outpatient services, including orthopedics, imaging, nuclear medicine, laboratory, wound care, and a family birth center.

In addition to the main facility, Mercy Medical Center Mt. Shasta operates three Rural Health Clinics: Mercy Mt. Shasta Community Clinic, Mercy Lake Shastina Community Clinic, and Dignity Health Pine Street Clinic. With over 300 skilled professionals and support staff, approximately 45 active doctors, and more than 40 dedicated volunteers, Mercy Medical Center Mt. Shasta has been named in the Top 100 Critical Access Hospitals by the National Rural Health Association. The hospital has also received the following awards/recognitions:

- CMS 5 Star Rating for Nurse Communication
- Cal Hospital Compare Honor Roll recognition for maternal care and safe opioid care
- California Maternal Quality Care Collaborative Maternal Safety Standards Implementation: Hemorrhage
- California Department of Public Health Honor Roll recognition for Hospital Acquired Infections Antimicrobial Stewardship Program
- American Heart Association Get with the Guidelines: Silver Award and Stroke Silver Plus
- American Heart Association Get with the Guidelines: Rural Stroke Gold Award
- LGBTQ+ Healthcare Equity Top Performer
- Environmental Excellence Award from Practice Greenhealth

Our Mission

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

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

The hospital serves approximately 44,000 individuals who reside in the rural and frontier communities of Siskiyou County. A summary description of the community is below, and additional details can be found in the CHNA report online.

The community served by the hospital encompasses all of Siskiyou County and includes the cities of Yreka, Weed, and Mt. Shasta, and multiple smaller communities such as Hornbrook, Montague, Grenada, Gazelle, Lake Shastina, Dunsmuir, and Mc Cloud. The hospital also serves the following zip codes, as geographically depicted in Figure 1:

- 95568 (Somes Bar)
- 96014 (Callahan)
- 96023 (Dorris)
- 96025 (Dunsmuir)
- 96027 (Etna)
- 96031 (Forks of Salmon)
- 96032 (Fort Jones)
- 96034 (Gazelle)
- 96037 (Greenview)
- 96038 (Grenada)
- 96039 (Happy Camp)

- 96044 (Hornbrook)
- 96050 (Klamath River)
- 96057 (McCloud)
- 96058 (Macdoel)
- 96064 (Montague)
- 96067 (Mt. Shasta)
- 96085 (Scott Bar)
- 96086 (Seiad Valley)
- 96094 (Weed)
- 96097 (Yreka)
- 96134 (Tulelake)



The hospital does not exclude any low-income or underserved populations and includes all members of the community. Siskiyou County is served by one additional critical access acute care hospital, Fairchild Medical Center. The community is also supported by the Siskiyou County Health and Human Services Agency, Public Health Division.

Demographics within Mercy Medical Center Mt. Shasta's service area as derived from the U.S. Census include:

- Total population: 43,834
- Median age (years): 47.4
- Percent Hispanic or Latino(a): 13.1%
- Percent White alone, not Hispanic or Latino(a): 74.2%
- Median household income range: \$55,499
- Percent of families living in poverty (below 100% federal poverty level): 16.6%
- Unemployment rate: 8.2%
- Percent with less than a high school diploma, 25 years and over: 8.9%
- Percent, age 5 and older who speak English less than "very well": 3.3%
- Percent without health insurance: 6.4%
- No. of Partnership HealthPlan of California Members (Medi-Cal administrator): 19,100

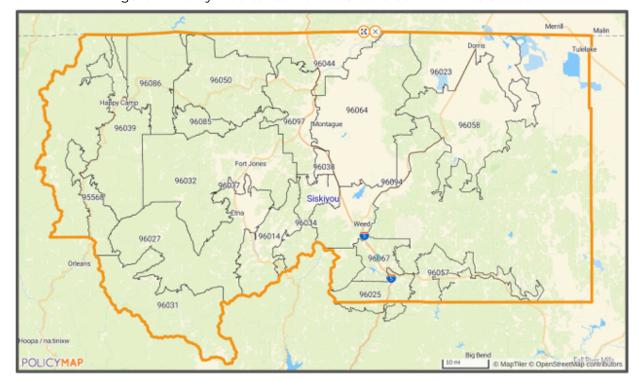


Figure 1 - Mercy Medical Center Mt. Shasta Communities Served

Community Assessment and Significant Needs

The health issues that form the basis of the hospital's community health implementation strategy and plan were identified in the most recent CHNA report, which was adopted in June, 2025. The CHNA report includes:

- description of the community assessed consistent with the hospital's service area;
- description of the assessment process and methods;
- data, information and findings, including significant community health needs;
- community resources potentially available to help address identified needs; and
- impacts of actions taken by the hospital since the preceding CHNA.

Additional details about the needs assessment can be found in the CHNA report, which is publicly available on the hospital's website or upon request from the hospital, using the contact information in the At-a-Glance Summary.

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 or health care services, and also health-related social and community needs that have an impact on health and well-being.

Significant Health Need	Description	Intend to Address?
Access to health care, including specialty care and dental care	Siskiyou County faces a critical healthcare access crisis, leading to the highest crude mortality rate in California and significant rates of liver disease and breast cancer deaths. This limited access is severely compounded by a severe shortage of healthcare providers, making primary care appointments difficult to secure and necessitating travel outside the county, often even out of state, for specialized services.	
Access to behavioral health, including substance use disorder treatment and navigation of services	Siskiyou County has a severe behavioral health crisis, with high rates of suicide and overdose deaths, including opioid-related fatalities, nearly double the state average. This pervasive issue is deeply intertwined with generational trauma, poverty, and social isolation, affecting all ages and socioeconomic groups.	\supset
Low-income and supportive humane housing	Siskiyou County faces a severe housing insecurity crisis, with many families forced into precarious living situations like trailers, tents, or vehicles lacking utilities, and a significant unhoused population. The county lacks sufficient affordable housing, particularly for low-income individuals and seniors.	
Unmet vital conditions, including transportation, education, food and economic stability	Siskiyou County is deeply impacted by poverty, with a significant portion of its residents, including children, living below the poverty line. This widespread poverty creates a detrimental cycle, hindering families' access to essential resources like transportation, healthy food, education, and healthcare, perpetuating generational poverty and trauma.	
Violence prevention	Focus group participants shared many stories of the need for violence prevention in the County. Siskiyou County has one of the highest rates of firearm-related deaths as compared to other California counties. Teen dating violence and sexual exploitation were identified as growing threats in the county, with service providers noting that at-risk youth, particularly those experiencing housing instability or coming from abusive homes, are at an elevated risk of being groomed for exploitation.	

2025 Implementation Strategy and Plan

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, including resources for and anticipated impacts of these activities.

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 Implementation Strategy

The hospital is dedicated to improving community health and delivering community benefit with the engagement of



its staff, clinicians and board, and in collaboration with community partners. Hospital and health system participants include the Community Board which is composed of community members who provide stewardship and direction for the hospital as a community resource. These parties review community benefit plans and program updates prepared by the hospital's community health director and other staff. Additionally, the Community Health and Outreach staff engage a core internal team that may include clinical staff, care coordinators and social workers, members of the hospital leadership team, and Dignity Health leaders at the regional and local levels from Mission Integration, IT, Legal, Administration, and Finance. These core teams help shape initiatives, provide internal perspective on issues and help define appropriate processes, procedures and methodologies for measuring outcomes.

The programs and initiatives described in this report were selected on the basis of a comprehensive set of criteria, aiming for strategic and impactful community health improvement.

These criteria include:

- Alignment with Mission: Ensuring the initiatives support the hospital's core purpose.
- Best Practices Research: Incorporating evidence-based approaches.
- Community Readiness: Considering the community's capacity and willingness to act on the issue.
- Equity Focus: Prioritizing needs that disproportionately affect vulnerable populations and contribute to health disparities.
- Leveraging Existing Strengths: Identifying issues where existing infrastructure (programs, systems, staff) and established relationships with community partners are already in place.
- Measurability: Selecting issues where there is a clear ability to have a measurable impact.

- Problem Assessment: Evaluating the magnitude and severity of the health issues.
- Resource Availability: Assessing the availability of both hospital and external community resources.
- Sustainability: Ensuring there is ongoing investment and commitment of resources (staff time and financial) for the chosen initiatives.

Furthermore, selection involves research on best practices, alignment with local, state, or national health priorities, and a strong emphasis on collaboration with community stakeholders. Where possible, initiatives are designed to employ upstream prevention models to address the social determinants of health, with a critical focus on building and strengthening relationships with community-based providers to ensure long-term success and sustainability.

Community Health Core Strategies

The hospital believes that program activities to help address significant community health needs should reflect a strategic use of resources. CommonSpirit Health has established three core strategies for community health improvement activities. These strategies help to ensure that program activities overall address strategic aims while meeting locally-identified needs.

- **Core Strategy 1**: Extend the care continuum by aligning and integrating clinical and community-based interventions.
- **Core Strategy 2**: Implement and sustain evidence-informed health improvement strategies and programs.
- **Core Strategy 3**: Strengthen community capacity to achieve equitable health and well-being.

Vital Conditions and the Well-Being Portfolio

Community health initiatives at CommonSpirit Health use the Vital Conditions framework and the Well-Being Portfolio¹ to help plan and communicate about strategies and programs.

Investments of time, resources, expertise and collaboration to improve health and well-being can take different approaches. And usually, no single approach can fully improve or resolve a given need on its own.

One way to think about any approach is that it may strengthen "vital conditions" or provide "urgent services," both of which are valuable to support thriving people and communities. A set of program activities may seek to do one or both. Taken together, vital conditions and urgent services compose a well-being portfolio.

What are Vital Conditions?

¹ The Vital Conditions Framework and the Well-Being Portfolio were created by the Rippel Foundation, and are being used with permission. Visit https://rippel.org/vital-conditions/ to learn more.

These are characteristics of places and institutions that all people need all the time to be healthy and well. The vital conditions are related to social determinants or drivers of health, and they are inclusive of health care, multi-sector partnerships and the conditions of communities. They help create a community environment that supports health.

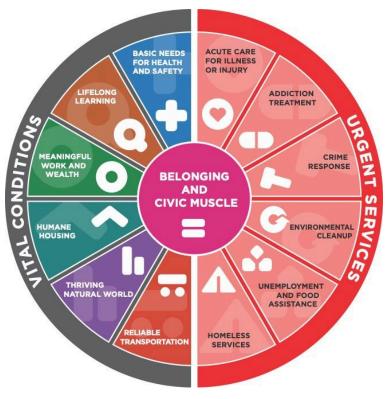
What are Urgent Services?

These are services that anyone under adversity may need temporarily to regain or restore health and well-being. Urgent services address the immediate needs of individuals and communities, say, during illness.

What is Belonging and Civic Muscle? This is a sense of belonging and power to help shape the world. Belonging is feeling part of a community and valued for what you bring. Civic muscle is the power of people in a society to work across differences for a thriving future.

Well-Being Portfolio in this Strategy and Plan

The hospital's planned strategies and program activities that follow are each identified as aligning with one of the vital conditions or urgent services in this figure.



This helps to identify the range of approaches taken to address community needs, and also acknowledges that the hospital is one community resource and stakeholder among many that are dedicated to and equipped for helping to address these needs and improve health.

Strategies and Program Activities by Health Need

Health Need:	Access to health care, including specialty care and dental care				
Population(s) of Focus:	Vulnerable populations with primary care and der	Vulnerable populations with primary care and dental care needs			
			Stra	tegic Align	ment
Strategy or Program	Summary Description	Strategy 1: : Extend care	Strategy 2: Evidence- informed	Strategy 3: Community capacity	Vital Condition (VC) or Urgent Service (US)
Financial Assistance	The hospital provides financial assistance for uninsured/underinsured and low-income residents. Rural health clinics offer sliding fee scale for patients who do not qualify for insurance.	N		N	Basic Needs for Health and Safety (VC)
Build community resiliency/Creating Healthy Communities	The hospital will partner with Siskiyou County Health and Human Services Public Health Division to coordinate whole person care systems in Siskiyou County which are culturally appropriate.	V		Ŋ	Basic Needs for Health and Safety (VC)
Workforce Development	Identify and partner with community organizations who are leading workforce development efforts to increase access to a diverse and inclusive health care workforce—both in clinical and nonclinical/corporate settings and improve health equity.	V		abla	Meaningful Work and Wealth (VC)

Health Need:	Access to health care, including specialty care and dental care					
Health Education Outreach	Provide health education and outreach at community events throughout the year.				Basic Needs for Health and Safety (VC)	
Dental Care	Explore opportunities to partner with Siskiyou County Health and Human Services - Public Health Branch and other community partners to improve access to dental services.			V	Basic Needs for Health and Safety (VC)	
Dignity Health Community Health Improvement Grants Program	Conducted annually by the hospital, the Dignity Health Community Health Improvement Grants Program provides financial support to nonprofit community-based organizations that are focused on increasing access to mental/behavioral health and substance use services and working collaboratively to provide a continuum of care to vulnerable individuals, families and children.			\square	Basic Needs for Health and Safety (VC)	
Planned Resources:	The hospital will provide registered nurses, social workers, community health educators, philanthropic cash grants, outreach communications, and program management support for these initiatives.					
Planned Collaborators:	The hospital will partner with local medical clinics and local community based organizations to improve access to quality primary care health services.					

Anticipated Impacts (overall long-term goals)	Measure	Data Source
Increase access to care and reduce Social Determinants of Health barriers to accessing care	A decrease in the identification of social needs via the Social Determinants of Health screening	Electronic Health Record

Individuals experience better access to health care through improved health care utilization	Reduction in unnecessary ED visits and hospitalizations	Electronic Health Record
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Health Need:	Access to behavioral health, including substance use disorder treatment and navigation of services				
Population(s) of Focus:	Vulnerable populations with behavioral health ne	eds			
St			Stra	tegic Align	ment
Strategy or Program	Summary Description	Strategy 1: Extend care continuum	Strategy 2: Evidence- informed	Strategy 3: Community capacity	Vital Condition (VC) or Urgent Service (US)
Financial Assistance	The hospital provides financial assistance for uninsured/underinsured and low-income residents. Rural health clinics offer sliding fee scale for patients who do not qualify for insurance.			N	Basic Needs for Health and Safety (VC)
Education and Awareness	Provide education and awareness and reduce stigma in the community			V	Basic Needs for Health and Safety (VC)
Help Me Grow Siskiyou Parent Support	The program provides social connections, reduces stress and helps parents identify and become educated regarding their children's developmental stages, provide resources and parenting tools.			Ø	Basic Needs for Health and Safety (VC)
Substance Use Navigation	The Substance Use Navigation program provides high-quality care for individuals with substance use disorder. The program seeks to fully	V	V	V	Addiction Treatment (US)

Health Need:	Access to behavioral health, including substance use disorder treatment and navigation of services					
	integrate addiction treatment into standard medical practice—increasing access to treatment to save more lives.					
Dignity Health Community Health Improvement Grants Program	Conducted annually by the hospital, the Dignity Health Community Health Improvement Grants Program provides financial support to nonprofit community-based organizations that are focused on increasing access to mental/behavioral health and substance use services and working collaboratively to provide a continuum of care to vulnerable individuals, families and children.	abla		abla	Basic Needs for Health and Safety (VC)	
Planned Resources:	The hospital will provide registered nurses, social workers, community health educators, philanthropic cash grants, outreach communications, and program management support for these initiatives.					
Planned Collaborators:	The hospital will partner with local clinics and local community based organizations to improve access to behavioral health and substance use disorder services.					

Anticipated Impacts (overall long-term goals)	Measure	Data Source
A strengthened continuum of care for behavioral health, including enhanced substance use navigation and a unified, accessible entry point for all individuals seeking support.	Increase in the the percentage of individuals receiving one type of service (e.g., mental health) who are screened for and, if indicated, referred to another relevant service (e.g., substance use disorder treatment, primary care, social services).	Electronic Health Record

Increased awareness of mental health conditions and access to resources, trainings and treatments	Increase in the total number of individuals participating in educational events geared toward the general public and/or caregivers.	Hospital Community Benefit Data
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Health Need:	 Low-income and supportive humane housing Unmet vital conditions, including transportation, education, food and economic stability 				
Population(s) of Focus:	Vulnerable populations with housing and/or unme	et vital cond	ition need	S	
Chusha ay ya ya Dua ay ya ay	Company Decements in		Stra	itegic Align	ment
Strategy or Program	Summary Description	Strategy 1: Extend care continuum	Strategy 2: Evidence- informed	Strategy 3: Community capacity	Vital Condition (VC) or Urgent Service (US)
Summer Food Program and Nutritional Education	Provide nutritious lunches daily for up to 100 at-risk K-8 children and provide nutrition education to help 220 youth learn about healthy eating.			Ø	Basic Needs for Health and Safety (VC)
Transportation Assistance	Provide transportation services such as: van service, taxi vouchers or bus tokens to patients who need assistance with returning to their home after receiving services at the hospital.			V	Basic Needs for Health and Safety (VC)
Community Engagement	Strengthen trust and relationships with key stakeholders to improve overall well-being by supporting and expanding existing successful projects and activities that support regional			V	Basic Needs for Health and Safety

Health Need:	 Low-income and supportive humane housing Unmet vital conditions, including transportation, education, food and economic stability 					
	wellness.					
Dignity Health Community Health Improvement Grants Program	Conducted annually by the hospital, the Dignity Health Community Health Improvement Grants Program provides financial support to nonprofit community-based organizations that are focused on increasing access to mental/behavioral health and substance use services and working collaboratively to provide a continuum of care to vulnerable individuals, families and children.				Basic Needs for Health and Safety (VC)	
Planned Resources:	The hospital will provide nurses, social workers, community health educators, philanthropic cash grants, outreach communications, and program management support for these initiatives.					
Planned Collaborators:	The hospital will continue to seek out partnerships with local organizations that respond to the health needs of our community. Community-based collaborations continue to be a priority for the hospital and will continue to drive community benefit efforts.					

Anticipated Impacts (overall long-term goals)	Measure	Data Source
Improved health outcomes for those at-risk of and/or experiencing homelessness.	Reduction in unnecessary ED visits and hospitalizations	Electronic Health Record
Reduction of the prevalence of chronic disease in the community.	Reduction in unnecessary ED visits and hospitalizations related to chronic disease	Electronic Health Record

Health Need:	Violence prevention				
Population(s) of Focus:	Vulnerable populations who are at a higher risk of social exclusion, isolation, and loneliness (e.g. older adults, youth, LGBTQ+, racial and ethnic minorities, people with disabilities, people with low socioeconomic status, immigrants and refugees)				
Strategy or Program	Summary Description	Strategic Alignment			
		Strategy 1: Extend care continuum	Strategy 2: Evidence- informed	Strategy 3: Community capacity	Vital Condition (VC) or Urgent Service (US)
Mission and Ministry Fund, United Against Violence Grant	Facilitate strategy sessions and the development of a violence prevention/human trafficking coalition in Siskiyiou County. This plan will build upon and align existing work identified during planned activities.			V	Basic Needs for Health and Safety (VC)
Prevent violence and intervene when it is suspected	Increase health system and community capacity to identify victims of human trafficking and respond appropriately.			\checkmark	Crime Response (US)
Provide trauma-informed care for patients	Explore ongoing opportunities to promote Trauma Informed Care practices within the behavioral health service line.			V	Basic Needs for Health and Safety (VC)
Human Trafficking Taskforce	A Human Trafficking Taskforce made up of multidisciplinary leaders with a victim- centered approach on strategies, interventions and policies.	V			Crime Response (US)
Human Trafficking/Violence Training led by the	Anti-Trafficking Outreach and Training Specialist from IRC will provide trainings to bring awareness around human trafficking and its	\checkmark		\checkmark	Crime Response (US)

Health Need:	Violence prevention				
International Rescue Committee (IRC)	various forms and resources available at local and national level. Physicians, Physicians Assistants, Nurse Practitioners, Nurses, Social Workers, Pharmacists, Police, Fire, Hospitality, Government, and other Community Members will be invited.				
Dignity Health Community Health Improvement Grants Program	Conducted annually by the hospital, the Dignity Health Community Health Improvement Grants Program provides financial support to nonprofit community-based organizations that are focused on increasing access to mental/behavioral health and substance use services and working collaboratively to provide a continuum of care to vulnerable individuals, families and children.	V		V	Basic Needs for Health and Safety (VC)
Planned Resources:	The hospital will provide nurses, social workers, community health educators, philanthropic cash grants, outreach communications, and program management support for these initiatives.				
Planned Collaborators:	Community Based Organizations				

Anticipated Impacts (overall long-term goals)	Measure	Data Source
Reduced disparities and enhanced community relations	Qualitative data from focus groups with key populations regarding their experiences of fairness, inclusion, and trust.	2028 Community Health Needs Assessment