

St. Joseph's Behavioral Health Center

2025 Community Health Implementation Strategy and Plan

Adopted October 2025






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At-a-Glance Summary

<p>Community Served</p> 	<p>St. Joseph's Behavioral Health Center (SJBHC), in collaboration with other community stakeholders, chose San Joaquin County as the primary service area for the Community Health Needs Assessment (CHNA). However SJBHC primarily serves residents of Stockton along with members of neighboring communities within San Joaquin County. Overall the primary hospitals' service area consists of 24 ZIP codes, and based on the top 75-80% of patient discharges from FY25 (July 1, 2024 - June 30, 2025) the patients served were from the following specific zip codes; 95203, 95204, 95205, 95206, 95207, 95209, 95210, 95212, 95215 and 95219.</p>
<p>Significant Community Health Needs Being Addressed</p> 	<p>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).</p> <p>Needs the hospital intends to address with strategies and programs are:</p> <ul style="list-style-type: none"> • Access to Care • Mental/Behavioral Health including Substance Use • Social Support • Education • Transportation
<p>Strategies and Programs to Address Needs</p> 	<p>The hospital intends to take several actions and to dedicate resources to these needs, including:</p> <ul style="list-style-type: none"> • Access to Care: Behavioral Evaluation Services, which provides free evaluation to individuals with behavioral health concerns, Workforce Development Initiatives as well as supporting programs through the Community Health Improvement Grants Program. • Mental/Behavioral Health including Substance Use: Workforce Development Initiatives as well as supporting programs through the Community Health Improvement Grants Program. • Social Support: Community Support Groups and Aftercare Services, Workforce Development Initiatives as well as supporting programs through the Community Health Improvement Grants Program. • Education: Workforce Development Initiatives as well as supporting programs through the Community Health Improvement Grants Program. • Transportation: Transportation assistance, Workforce Development Initiatives as well as supporting programs through the Community Health Improvement Grants.

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 St. Joseph's Medical Center Community Health Department, 1800 North California Street, Stockton, CA 95204 or by e-mail to sjmccommunityhealth@commonspirit.org.

Our Hospital and the Community Served

About the Hospital

St. Joseph's Behavioral Health Center is a Dignity Health hospital. Dignity Health is a member of CommonSpirit Health.

Established services in 1974 as a patient care unit at St. Joseph's Medical Center (SJMC) in Stockton. In 1988, the program expanded operations to the current location, 2510 North California Street. SJBHC is a 35 bed licensed not-for-profit psychiatric hospital serving Central California, with 154 employees and 18 medical staff. Inpatient and partial hospitalization services are provided to adults, 18 years and older.

Outpatient services are provided for adults, adolescents and children older than 5 years.

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.

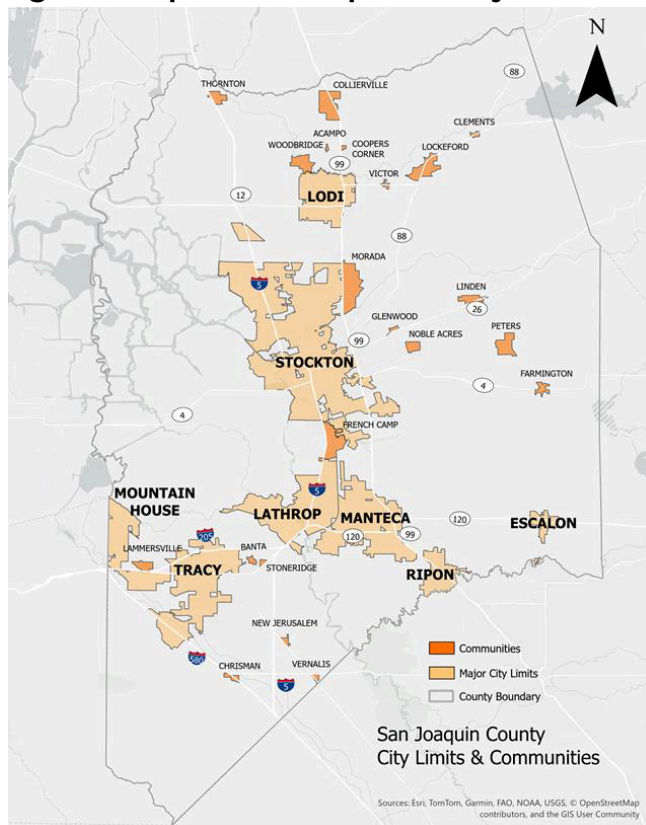


Description of the Community Served

St. Joseph's Behavioral Health Center serves San Joaquin County, in the Central Valley of California which is roughly 60 miles east of San Francisco and 35 miles south of Sacramento, with a total population of 779,445 (2022). The County encompasses an area of 1,426 square miles, with 35 square miles of water and waterways, and includes 8 cities (Escalon, Lathrop, Lodi, Manteca, Mountain House, Ripon, Stockton, and

Tracy) as well as many ranching and farming communities scattered across the County (Figure 1). Within these areas are the following zip codes: 95202, 95203, 95204, 95205, 95206, 95207, 95209, 95210, 95211, 95212, 95215, 95219, 95220, 95230, 95231, 95236, 95237, 95240, 95242, 95253, 95258, 95304, 95320, 95330, 95336, 95337, 95366, 95376, 95377, 95385, 95391, and 95686. A summary description of the community is below, and additional details can be found in the CHNA report online.

Figure 1. Map of San Joaquin County



San Joaquin County is one of California's fastest growing counties, home to diverse racial and ethnic populations. San Joaquin is a county of contrasts; there is enormous economic wealth and community growth opportunities and a variety of assets and resources to support health, however, San Joaquin County faces significant challenges in terms of economic and health disparities. A plurality of residents is Hispanic/Latino, and almost a quarter of residents are foreign-born. While many within the County are economically secure, nearly 13% of residents live in poverty. Children have a poverty rate of over 17%, and more than 1 in 10 residents aged 65 years and older live in poverty. The educational attainment of San Joaquin County residents is much lower than California residents; about 20% of County adults have no high school diploma, compared to 16% of adult Californians, and a much bigger gap exists between the percent of County residents with a college degree (20%) versus California overall (36%).

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 May 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 Care	Comprehensive, quality healthcare access, including insurance, providers, timeliness, and cultural alignment, is vital for health and quality of life. Limited access harms wellbeing.	<input checked="" type="checkbox"/>
Mental/Behavioral Health inc Substance Use	Mental health impacts all life areas. Rising "deaths of despair" highlight a critical shortage of mental health and substance use treatment services.	<input checked="" type="checkbox"/>
Chronic Disease/Healthy Eating and Living (HEAL)	Chronic diseases are major causes of illness, death, and high healthcare costs. Healthy eating and physical activity are key to prevention and management.	<input type="checkbox"/>
Housing	Affordable, safe housing is crucial for health and socioeconomic success. Unaffordable housing leads to hardship; homelessness worsens health and increases premature death risk.	<input type="checkbox"/>
Economics	Steady employment and strong economic environments foster community health. Childhood poverty has lasting negative health effects; economic policies can improve well-being.	<input type="checkbox"/>

Significant Health Need	Description	Intend to Address?
Social Support	Strong social networks improve physical and mental well-being, providing coping mechanisms. Loneliness negatively impacts health; community resources foster vital connections.	<input checked="" type="checkbox"/>
Community Safety	Safe communities promote social and economic well-being. Crime and violence harm health. Exposure to violence, especially for youth, has severe long-term consequences.	<input type="checkbox"/>
Education	Higher education correlates with better health, longer lives, and greater socioeconomic success. Preschool and high school completion provide significant long-term benefits.	<input checked="" type="checkbox"/>
Food Security	Inconsistent access to healthy food leads to poor diet and increased chronic disease risk, burdening individuals and healthcare systems.	<input type="checkbox"/>
Transportation	Reliable, safe transportation is essential for basic needs. Auto reliance causes injuries and pollution. Other modes provide vital access, exercise, and social cohesion.	<input checked="" type="checkbox"/>

Significant Needs the Hospital Does Not Intend to Address

As a hospital exclusively delivering behavioral health services, needs identified in the broader CHNA beyond access to care, mental health, social support, education, and transportation are not ones that the hospital is able to address. St. Joseph's Medical Center, other hospitals, and community service organizations in the region are addressing these needs.

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.

The Community Health Needs Assessment (CHNA) and subsequent Community Health Improvement Plan (CHIP) for San Joaquin County were created through a year-long, collaborative process (March 2024-April 2025). This involved a Core Team and Steering Committee, representing various community stakeholders, who gathered extensive data through key informant interviews, community focus groups, and analysis of over 100 health indicators. The CHNA emphasized health disparities and marginalized populations, informing the CHIP's focus on collective impact to improve health equity.

Hospital and health system participants include representatives from the Steering Committee member organizations, which are listed below. Those organizations that also played a crucial role as part of the Core Team, guiding the entire Community Health Improvement Plan (CHIP) process, are specifically indicated with an asterisk (*). This distinction highlights their elevated level of involvement and leadership throughout the initiative.

211 San Joaquin	Dignity Health, St. Joseph's Medical Center and Behavioral Health Center*	San Joaquin County Children's Alliance
Adventist Health Lodi Memorial*	El Concilio	San Joaquin County Council of Governments
Amilia Adams Whole Life	Emergency Food Bank	San Joaquin County Office of

Center		Education <ul style="list-style-type: none"> • Early Childhood Education • Comprehensive Health Programs
Asian Pacific Self-Development and Residential Association (APSARA)	Health Net*	San Joaquin County Health Care Service Agency
Boys and Girls Club	Health Plan of San Joaquin*	San Joaquin County Human Service Agency: Aging and Community Services*
Catholic Charities Diocese of Stockton	Hispanic Chamber of Commerce	San Joaquin County Public Health Services*
Child Abuse Prevention Council	Kaiser Permanente*	San Joaquin Health*
City of Stockton <ul style="list-style-type: none"> • Office of the Mayor • Office of Violence Prevention 	Little Manila Rising	St. Mary's Community Services
Community Medical Centers*	LOVE Inc. Manteca	Stocktonians Taking Action to Neutralize Drugs (STAND)
Dameron Hospital*	Mary Magdalene Community Services Public Health Advocates	Stockton NAACP
Data Co-op	Reinvent South Stockton Coalition*	Sutter Health*
Department of Health and Human Services, Region 9	San Joaquin Community Foundation	Third City Coalition Trust for Public Land
Faith in the Valley	San Joaquin PRIDE Center	University of the Pacific School of Health Sciences*
First 5 San Joaquin*	Sierra Vista Homes, Residents Council	Visionary Home Builders
Health Force Partners	San Joaquin County Behavioral Health Services*	PREVAIL
*= Denotes Core Team Members		

Community input or contributions to this implementation strategy in 2025 was inclusive and comprehensive, guided by a Core Team planning group (San Joaquin County Public Health Services, San Joaquin County Behavioral Health Services, San Joaquin County's nonprofit hospitals, Medi-Cal managed care plans, federally qualified health centers as well as representatives from the philanthropic and education sectors, Reinvent South Stockton Coalition and First 5 San Joaquin) and broadly representative Steering Committee, with input from County residents. The 2025 CHNA included interviews with 12 key informants, 40 focus group discussions with 350 community residents, and data analyses for over 100 indicators, creating a robust picture of the issues affecting residents' health.

The programs and initiatives described here were selected on the basis of the analyzed quantitative and qualitative data were triangulated to identify the top health needs in the County and summary health need profiles were created. The following criteria were used to prioritize the health needs:

- Health measures: San Joaquin County indicators compare poorly to the California average.
- Clear disparities or inequities: Data show differences by racial/ethnic subgroups.
- Community input: Interviews/focus groups identified important issues related to the health need.
- Prevention: Opportunities exist for health promotion and disease prevention rather than treatment.

After points were assigned to each health need based on the criteria above, the scores were totaled. The CHNA report details the process of assigning points to both secondary and primary data. Scores from the 2022 CHNA and CHIP health need rankings were also incorporated into the overall health need scores. Finally, the health need scores were normalized to a 100-point scale, resulting in a ranked list of health needs.

Programs and initiatives are chosen based on the following criteria:

- Existing programs with proven impactful outcomes
- Evidence-based or promising practices
- Potential for addressing health disparities and social determinants of health
- Likelihood of impacting health equity and cultural disparities
- Alignment with current county-wide collaborative efforts

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.

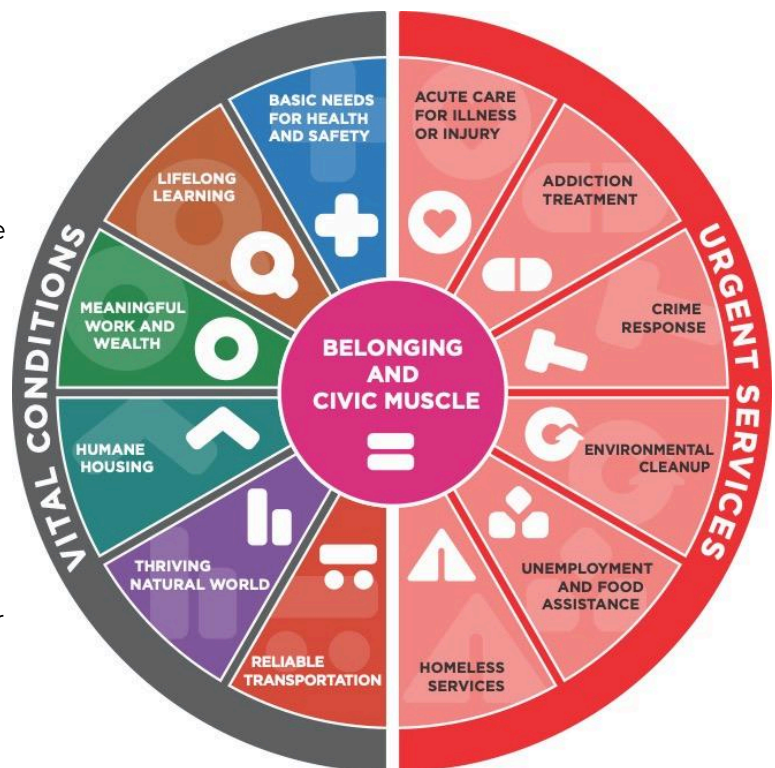
- **Core Strategy 1:** Extend the care continuum by aligning and integrating clinical and community-based interventions.
- **Core Strategy 2:** Implement and sustain evidence-informed health improvement strategies and programs.
- **Core Strategy 3:** Strengthen community capacity to achieve equitable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

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.

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.

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 Care				
Population(s) of Focus:	Under or uninsured, and broader community				
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)
Community Health Improvement Grants Program	Annual grants are awarded to non-profits demonstrating the best ability to impact community health needs identified in the latest assessment. The grants fund innovative, collaborative services, and partners must report outputs and outcomes.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<ul style="list-style-type: none"> VC: Basic Needs for Health and Safety VC: Lifelong Learning VC: Reliable Transportation VC: Belonging and Civic Muscle US: Acute Care for Illness or Injury US: Addiction Treatment US: Homeless Services US: Unemployment, Food Assistance
Workforce Development	Dignity Health aims to boost healthcare access via workforce development. SJMC leads in cultivating San Joaquin County's	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<ul style="list-style-type: none"> VC: Basic Needs for Health and Safety

Health Need:	Access to Care				
	future medical providers. Its Graduate Medical Education (GME) program with Touro University, initiated in 2018 with 15 residents, is projected to reach more than 200 residents and fellows by 2026. SJMC also partners with various colleges to provide students (i.e. nursing, pharmacy, paramedic, respiratory, and others) with clinical rotations as a strategy to expand the healthcare professional pipeline in San Joaquin County.				<ul style="list-style-type: none"> • VC: Lifelong Learning • VC: Belonging and Civic Muscle • US: Acute Care for Illness or Injury • US: Addiction Treatment
Financial Assistance Program	Provide high-quality, affordable services to all, regardless of their ability to pay. Financial assistance options, including discounted, interest-free, or free services, are available based on the patient's financial situation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<ul style="list-style-type: none"> • VC: Basic Needs for Health and Safety • VC: Reliable Transportation • US: Acute Care for Illness or Injury • US: Addiction Treatment
Planned Resources:	Contribute financial resources and in-kind support for these initiatives. This includes funding for staff, community health educators, philanthropic cash grants, outreach communications, supplies, and program management.				
Planned Collaborators:	Some program partners are noted in the respective program summaries above. Contact sjmccommunityhealth@commonspirit.org for a full description of collaborating partners.				
Anticipated Impacts (overall long-term goals)		Measure		Data Source	

Promote measures to help manage patient health, identify health risks, and improve access to care as well as connecting patients to other resources within the community according to their needs.	# of screenings; % of patients screened; # of community events supported by hospital; # of participants; # of primary care appointments scheduled	Internal records; Hospital records; data from community partners
Workforce development initiatives help to address the culturally diverse healthcare provider shortage in San Joaquin County.	# of residents and students rotating through hospital; # of locally hired medical professionals from workforce programs; # of workforce programs	Hospital records; data from healthcare partners

Health Need:	Mental Health/Behavioral Health Including Substance Use				
Population(s) of Focus:	Broader community				
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)
Community Health Improvement Grants Program	Please reference the Access to Care need section above for the program description.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<ul style="list-style-type: none"> VS: Thriving Natural World VS: Basic Needs for Health and Safety VS: Humane

Health Need:	Mental Health/Behavioral Health Including Substance Use				
					<ul style="list-style-type: none"> Housing VS: Meaningful Work & Wealth VS: Lifelong Learning VS: Belonging and Civic Muscle US: Acute Care for Illness or Injury US: Addiction Treatment US: Crime Response US: Homeless Services US: Unemployment, Food Assistance
Community Mental Health Programming	SJBHC will partner with mental health experts to launch programs addressing Mental/Behavioral Health and Substance Use including but not limited to: <ul style="list-style-type: none"> 24/7 behavioral health evaluations Substance Use Navigation Medication Assisted Treatment (MAT) Support groups Aftercare 	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<ul style="list-style-type: none"> VC: Basic Needs for Health and Safety VC: Lifelong Learning VC: Belonging and Civic Muscle US: Acute Care for Illness or Injury US: Addiction Treatment US: Crime

Health Need:	Mental Health/Behavioral Health Including Substance Use				
					Response
Graduate Medical Education (GME)	<p>Dignity Health is committed to workforce development. The GME program started in 2018 and below is a summary of the implemented and planned expansion of the program:</p> <ul style="list-style-type: none"> • Psychiatry: 7 new residents each year x4 years (started 07/2021). Increased to 10 residents per year as of 02/2024. • Child & Adolescent Psychiatry: 3 new fellows each year x2 years (to start 07/2026) • Addiction Medicine: 2 new fellows each year x2 years (to start 07/2028)) 	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<ul style="list-style-type: none"> • VC: Basic Needs for Health and Safety • VC: Lifelong Learning • US: Acute Care for Illness or Injury • US: Addiction Treatment
Connected Community Network (CNN)	<p>This network connects the public with resources and programs from community-based organizations (CBOs), addressing complex patient and community needs. CBOs offer vital services such as affordable housing, maternal/child health, chronic disease management, healthy food, and mental health/substance abuse counseling.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<ul style="list-style-type: none"> • VC: Basic Needs for Health and Safety • VC: Humane Housing • VC: Lifelong Learning • VC: Belonging and Civic Muscle • US: Addiction Treatment • US: Homeless Services • US: Unemployment, Food Assistance

Health Need:	Mental Health/Behavioral Health Including Substance Use				
Wellness Navigator	<p>Provide medication assisted treatment with Buprenorphine to those struggling with opioid use disorder.</p> <p>Provide education to both the community and other healthcare providers regarding opioid use disorder and treatment options such as buprenorphine. Participate in the San Joaquin County Opioid Safety Coalition.</p>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<ul style="list-style-type: none"> • UC: Basic Needs for Health and Safety • US: Lifelong Learning • US: Acute Care for Illness or Injury • US: Addiction Treatment • US: Crime Response
Planned Resources:	Contribute financial resources and in-kind support for these initiatives. This includes funding for staff, community health educators, philanthropic cash grants, outreach communications, supplies, and program management.				
Planned Collaborators:	Some program partners are noted in the respective program summaries above. Contact sjmccommunityhealth@commonspirit.org for a full description of collaborating partners.				

Anticipated Impacts (overall long-term goals)	Measure	Data Source
Increase access to mental health & substance use treatment / services.	# of community groups; # of participants; # of community events supported by hospital; # of participants	Internal records; Hospital records;
Address barriers such as cost, lack of insurance, transportation, language / cultural competency, social stigma.	# of Mental Health trainings / classes / workshops; # of participants;	Internal records; Hospital records; data from community partners; pre/post surveys from trainings

	/ classes / workshops
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Health Need:	Social Support				
Population(s) of Focus:	Broader Community				
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)
Dialectical Behavior Therapy (DBT) 101	Low-cost classes to help support families with a loved one in treatment. These are open to the public.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<ul style="list-style-type: none"> VC: Basic Needs for Health and Safety VC: Lifelong Learning
Community Health Improvement Grants Program	Please reference the Access to Care need section above for the program description.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<ul style="list-style-type: none"> VC: Basic Needs for Health and Safety VC: Lifelong Learning VC: Belonging and Civic Muscle US: Addiction Treatment
In-kind Donations	Providing support groups, in-kind donations of meeting spaces, and free aftercare groups for community members and their loved ones who are coping with new or ongoing life-altering diagnoses.. These include, but are not limited to, the following:	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<ul style="list-style-type: none"> VC: Basic Needs for Health and Safety VC: Belonging and Civic Muscle US: Addiction

Health Need:	Social Support				
	<ul style="list-style-type: none"> National Alliance on Mental Illness (NAMI) Alcoholic Anonymous Narcotics Anonymous Women in Recovery Nurses in Recovery 				Treatment
Connected Community Network (CNN)	Please reference the Mental Health need section above for the program description..	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<ul style="list-style-type: none"> VC: Basic Needs for Health and Safety VC: Lifelong Learning VC: Belonging and Civic Muscle US: Addiction Treatment
Planned Resources:	Contribute financial resources and in-kind support for these initiatives. This includes funding for staff, community health educators, philanthropic cash grants, outreach communications, supplies, and program management.				
Planned Collaborators:	Some program partners are noted in the respective program summaries above. Contact sjmccommunityhealth@commonspirit.org for a full description of collaborating partners.				

Anticipated Impacts (overall long-term goals)	Measure	Data Source
Increase knowledge and connections to a multipronged approach to increasing familial and social support.	# resources identified; # of outreach events; # of community partners funded by SJMC grant program;	Internal records; Hospital records; data from community partners

Health Need:	Education				
Population(s) of Focus:	Physicians, medical students, the patients they serve, and the broader community				
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)
Graduate Medical Education (GME)	<p>Dignity Health is committed to workforce development. The GME program started in 2018 and below is a summary of the implemented and planned expansion of the program:</p> <ul style="list-style-type: none"> • Psychiatry: 7 new residents each year x4 years (started 07/2021). Increased to 10 residents per year as of 02/2024. • Child & Adolescent Psychiatry: 3 new fellows each year x2 years (to start 07/2026) • Addiction Medicine: 2 new fellows each year x2 years (to start 07/2028)) 	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<ul style="list-style-type: none"> • Basic Needs for Health and Safety • Lifelong Learning • Belonging and Civic Muscle • Acute Care for Illness or Injury • Addiction Treatment
Community Health Improvement Grants Program	Please reference the Access to Care need section above for the program description.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<ul style="list-style-type: none"> • Basic Needs for Health and Safety • Lifelong Learning • Belonging and Civic Muscle • Addiction Treatment

Health Need:	Education
Planned Resources:	Contribute financial resources and in-kind support for these initiatives. This includes funding for staff, community health educators, philanthropic cash grants, outreach communications, supplies, and program management.
Planned Collaborators:	Contact sjmccommunityhealth@commonspirit.org for a full description of collaborating partners.

Anticipated Impacts (overall long-term goals)	Measure	Data Source
Workforce development initiatives help to address the culturally diverse healthcare provider shortage in San Joaquin County.	# of residents and students rotating through hospital; # of hired physicians from workforce programs; # of workforce programs	Hospital records; data from healthcare partners
Increase referrals and connections to a multipronged approach to supporting higher education and educational opportunities.	# resources identified; # of outreach events; # of community partners funded by SJMC grant program;	Internal records; Hospital records; data from community partners

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Health Need:	Transportation	
Population(s) of Focus:	Broader Community	
Strategy or Program	Summary Description	Strategic Alignment

Health Need:	Transportation				
		Strategy 1: Extend care continuum	Strategy 2: Evidence- informed	Strategy 3: Community capacity	Vital Condition (VC) or Urgent Service (US)
Community Health Improvement Grants Program	Please reference the Access to Care need section above for the program description.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<ul style="list-style-type: none"> Basic Needs for Health and Safety Reliable Transportation
Transportation	Continue to provide transportation for patients without any other financial means to get home post hospitalization.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<ul style="list-style-type: none"> Reliable Transportation
Planned Resources:	Contribute financial resources and in-kind support for these initiatives. This includes funding for staff, community health educators, philanthropic cash grants, outreach communications, supplies, and program management.				
Planned Collaborators:	Too many to list. Please contact sjmccommunityhealth@commonspirit.org for details.				

Anticipated Impacts (overall long-term goals)	Measure	Data Source
Increase referrals and connections to a multipronged approach to increasing access to transportation for those needing access to care and basic needs.	# resources identified; # of outreach events; # of community partners funded by SJMC grant program;	Internal records; Hospital records; data from community partners