



St. Mary Medical Center Long Beach, California

**Community Health Implementation Strategy
2016 – 2018**

TABLE OF CONTENTS

Executive Summary	2
Mission, Vision, and Values	4
Our Hospital and Our Commitment	5
Description of the Community Served	6
Implementation Strategy Development Process	
Community Health Needs Assessment Process	9
CHNA Significant Health Needs	9
Creating the Implementation Strategy	13
Planning for the Uninsured/Underinsured Patient Population	13
2016-2018 Implementation Strategy	
Strategy and Program Plan Summary	14
Anticipated Impact	15
Planned Collaboration	15
Program Digests	15
Appendix A: Community Board and Committee Rosters	21
Appendix B: Other Programs and Non-Quantifiable Benefits	23
Appendix C: Financial Assistance Policy Summary	24

EXECUTIVE SUMMARY

St. Mary Medical Center is located in Long Beach, CA. The city of Long Beach is a coastal community located in Los Angeles County. Based on the U.S. Census, Long Beach is the thirty-sixth most populous city in the nation and seventh in California. Long Beach is one of the most ethnically diverse communities in the United States with a strong sense of community and unique neighborhoods. St. Mary Medical Center also serves the surrounding communities of Carson, Paramount and Bellflower. While a few of the communities enjoy a higher standard of living, the majority of the communities served have greater needs. The service area for St. Mary Medical Center includes 663,973 residents. The majority of the service area residents live in Long Beach (71.4%) with the remaining 28.6% living in Bellflower, Paramount and Carson. Children and youth (ages 0-19) make up 28.7% of the population; while seniors (65 years and older) account for 9.7% of the population. In terms of race/ethnicity, the service area is very diverse. The largest portion of the service area is Hispanic/Latino (46.0%). Whites make up 23.9% of the population; Blacks/African Americans comprise 12.3% of the population and Asians 13.5%. Native Americans, Hawaiians, and other races combined total 4.3% of the population. 22.7% of service area residents, 25 years old and older, have less than a high school diploma. 42.5% of service area residents live below 200% of the federal poverty level (FPL).

The significant community health needs that form the basis of this document were identified in the hospital's most recent Community Health Needs Assessment (CHNA), which is publicly available at <http://www.dignityhealth.org/stmarymedical/community-benefits>. Additional details about identified needs, data collected, community input obtained, and prioritization methods used can be found in the CHNA report. As well, a description of program impact during the three years since the last Implementation Strategy can be found in the 2016 CHNA.

As part of the CHNA process, the significant community health needs were prioritized with input from the community, which yielded this prioritized list of significant health needs:

1. Mental health
2. Economic security
3. Obesity and diabetes
4. Access to housing
5. Chronic disease
6. Education
7. Access to care
8. Preventive care
9. Crime and violence
10. Pregnancy and birth outcomes
11. Environment and climate
12. Oral health
13. Substance abuse and tobacco

For the next three years, St. Mary Medical Center plans to address access to health care, obesity and diabetes, chronic diseases, preventive care, and pregnancy and birth outcomes through a number of

initiatives and a commitment of resources. For example, the Chronic Disease Self-Management programs will focus on diabetes management and reducing obesity. The Mary Hilton Family Health Center will provide prenatal care to improve birth outcomes. The Bazzeni Wellness Center offers preventive health education, chronic disease management and screenings. A full listing of the programs and activities planned to meet the selected health needs is outlined in this report.

This document is publicly available at: <http://www.dignityhealth.org/stmarymedical/community-benefits>. This report is available to the public on the hospital's website and a paper copy is available for inspection upon request at the St. Mary Community Health Office. Written comments on this report can be submitted to the Community Health Office at 1050 Linden Avenue, Long Beach, CA 90813 or by e-mail to kit.katz@DignityHealth.org.

MISSION, VISION AND VALUES

Our Mission

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

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

Our Vision

A vibrant, national health care system known for service, chosen for clinical excellence, standing in partnership with patients, employees, and physicians to improve the health of all communities served.

Our Values

Dignity Health is committed to providing high-quality, affordable healthcare to the communities we serve. Above all else we value:

Dignity - Respecting the inherent value and worth of each person.

Collaboration - Working together with people who support common values and vision to achieve shared goals.

Justice - Advocating for social change and acting in ways that promote respect for all persons.

Stewardship - Cultivating the resources entrusted to us to promote healing and wholeness.

Excellence - Exceeding expectations through teamwork and innovation.

Hello humankindness

After more than a century of experience, we've learned that modern medicine is more effective when it's delivered with compassion. Stress levels go down. People heal faster. They have more confidence in their health care professionals. We are successful because we know that the word "care" is what makes health care work. At Dignity Health, we unleash the healing power of humanity through the work we do every day, in the hospital and in the community.

Hello humankindness tells people what we stand for: health care with humanity at its core. Through our common humanity as a healing tool, we can make a true difference, one person at a time.

OUR HOSPITAL AND OUR COMMITMENT

St. Mary Medical Center (SMMC), founded in 1923 by the Sisters of the Charity of the Incarnate Word, is located at 1050 Linden Avenue, Long Beach, CA. It became a member of Dignity Health, formerly Catholic Healthcare West in 1996. The facility has 389 licensed beds and a campus that is approximately 14 acres in size. SMMC has a staff of 1,410 and professional relationships with 508 local physicians. Major programs and services include cardiac care, prenatal and childbirth services, bariatric surgery, stroke recovery, critical care, a 24-bed intensive care unit, a level 111B NICU with 25 beds and Disaster Resource Center. St. Mary Medical Center's Emergency Department is a level II trauma center and the Paramedic Base Station for the area.

St. Mary Medical Center is a tertiary hospital that provides care throughout the spectrum of life. SMMC's quality of medical services and care has resulted in SMMC receiving Dignity Health's BLUE STAR recognition on all four FY15 goals: hospital quality metrics, appropriate observation status, HCAHPS total points and Listening and Responding.

Rooted in Dignity Health's mission, vision and values, St. Mary Medical Center is dedicated to improving community health and delivering community benefit with the engagement of its management team, Community Board and Community Benefit Advisory Committee. The board and committee are composed of community members who provide stewardship and direction to the hospital as a community resource. St. Mary Administrative Leadership reviews all community benefit programs, decides on continuation or termination, and makes budget decisions with Community Board input.

The Community Benefit Advisory Committee (CBAC) is a committee of the Community Board. The CBAC helps determine program focus and design. The CBAC is comprised of community members representing the diversity of Long Beach, including leaders from public health, community-based organizations, and education. The Community Benefit Advisory Committee assists the Community Health Department in prioritizing programs that are in line with the hospital's strategic plan. The Committee provides input, advice, and approval for the Community Health Needs Assessment, Implementation Strategy, Community Benefit Plan, and program monitoring. Reports approved by the Community Benefit Advisory Committee are then submitted to the Community Board of St. Mary Medical Center for final approval. A roster of current Community Benefit Advisory Committee members can be found in Appendix A.

St. Mary Medical Center's community benefit program includes financial assistance provided to those who are unable to pay the cost of medically necessary care, unreimbursed costs of Medicaid (Medi-Cal), subsidized health services that meet a community need, and community health improvement services. Our community benefit also includes monetary grants we provide to not-for-profit organizations that work together to improve health on significant needs identified in our Community Health Needs Assessment. Many of these programs and initiatives are described in this report.

DESCRIPTION OF THE COMMUNITY SERVED

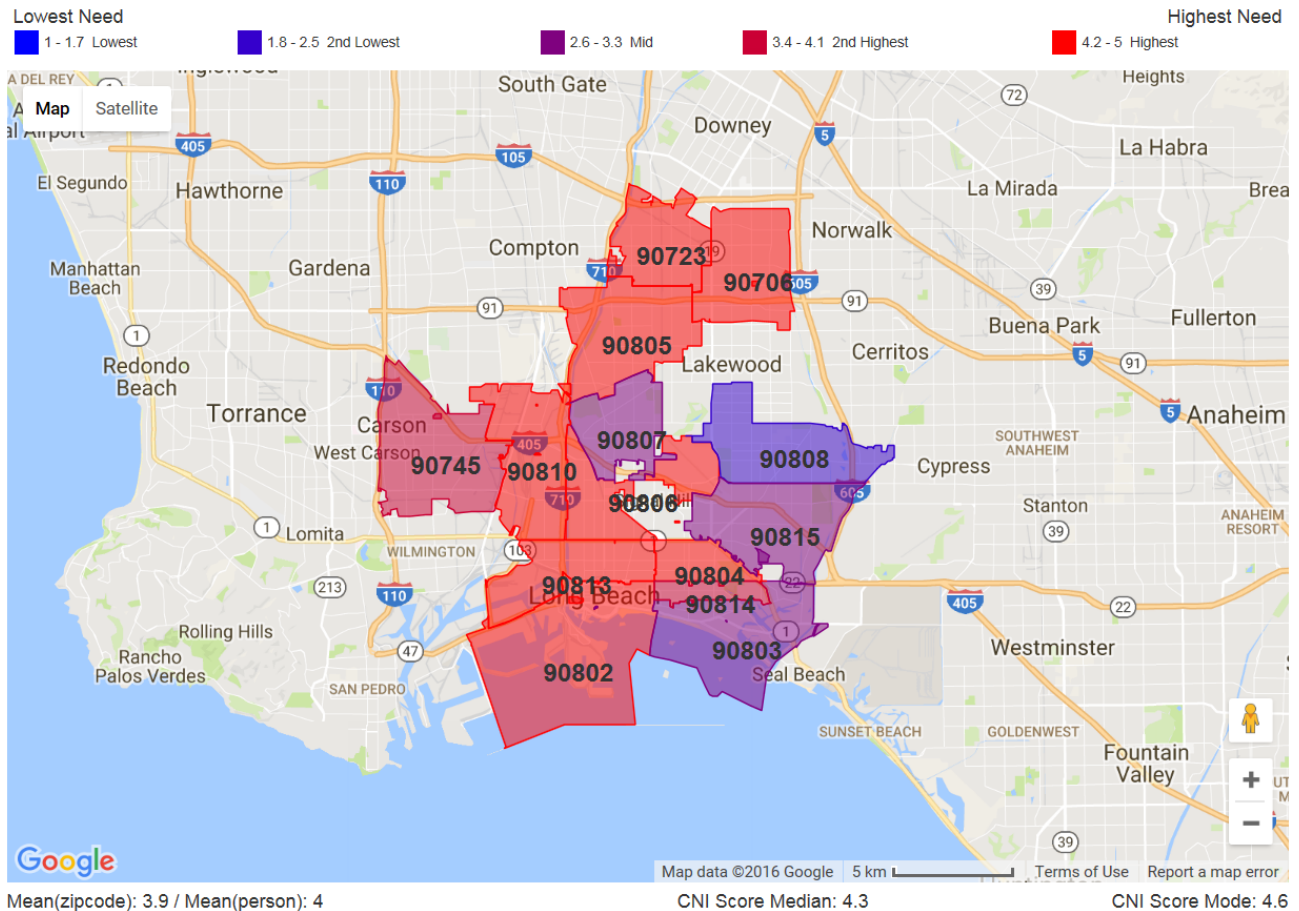
St. Mary Medical Center is located in Long Beach, CA. The city of Long Beach is a coastal community located in Los Angeles County. Based on the U.S. Census, Long Beach is the thirty-sixth most populous city in the nation and seventh in California. Long Beach is one of the most ethnically diverse communities in the United States with a strong sense of community and unique neighborhoods. St. Mary Medical Center also serves the surrounding communities of Carson, Paramount and Bellflower. While a few of the communities enjoy a higher standard of living, the majority of the communities served have greater needs. The service area encompasses 14 zip codes representing 4 cities and communities. It includes portions of Service Planning Areas 6 and 8 in Los Angeles County. To determine the service area, St. Mary Medical Center takes into account the zip codes of inpatients discharged from the hospital; the current understanding of community need based on the most recent Community Health Needs Assessment; and long-standing community programs and partnerships. The service area for St. Mary Medical Center includes 663,973 residents.

Overall, the St. Mary service area has regions that are economically challenged, has a great deal of homelessness, and has an influx of transitory populations; many of the residents in the service areas live below the poverty level and many neighborhoods and communities are considered underserved. Access to care and services, perceived barriers to existing services, lack of insurance, mental health services, diabetes, asthma, drug and alcohol abuse, and childhood obesity are some of the major health concerns. From a community health perspective, these low-income and underserved areas are of major concern.

A summary description of the community is below, and additional community facts and details can be found in the CHNA report online. The following data is from Truven Health Analytics:

Total Population: 681,680
Hispanic or Latino: 47.7%
White: 22.2%
Asian/Pacific Islander: 14.9%
Black/African American: 12.1%
Median Income: \$56,691
Uninsured: 6.8%
Unemployment: 7.7%
No High School Diploma: 22.4%
CNI Median Score: 4.3
Medicaid Patients*: 33.8%
Medically Underserved Areas or Populations: Yes

*Does not include individuals dually-eligible for Medicaid and Medicare.



Community Needs Index (CNI) Map

One tool used to assess health need is the Community Need Index (CNI) created and made publicly available by Dignity Health and Truven Health Analytics. The CNI analyzes data at the zip code level on five factors known to contribute or be barriers to health care access: income, culture/language, education, housing status, and insurance coverage. Scores from 1.0 (lowest barriers) to 5.0 (highest barriers) for each factor are averaged to calculate a CNI score for each zip code in the community. Research has shown that communities with the highest CNI scores experience twice the rate of hospital admissions for ambulatory care sensitive conditions as those with the lowest scores.

The St. Mary Medical Center service area zip codes tend to fall under the high need CNI score category. While the easternmost zip codes, including 90803, 90808 and 90815 have more moderate need scores ranging from 2.0 to 2.6, the majority of the service area scores equal to and greater than 4.2 indicating highest need. No zip code in this service area falls into the lowest need range identified by the CNI.

St. Mary Medical Center Service Area CNI Score by Zip Code

Zip Code and City	CNI Score	Zip Code and City	CNI Score
90706 Bellflower	4.2	90806 Long Beach	4.6
90723 Paramount	4.6	90807 Long Beach	3.2
90745 Carson	3.8	90808 Long Beach	2.0
90802 Long Beach	4.6	90810 Long Beach	4.4
90803 Long Beach	2.6	90813 Long Beach	5.0

90804 Long Beach	4.6	90814 Long Beach	3.6
90805 Long Beach	4.6	90815 Long Beach	2.6

Implementation Strategy Development Process

The hospital engages in multiple activities to conduct the community benefit and community health improvement planning process. These include, but are not limited to: conducting a Community Health Needs Assessment (CHNA) with community input at least every three years; using five core principles to guide planning and program decisions; measuring and tracking program indicators; and engaging the Community Benefit Advisory Committee and other stakeholders in the development of the annual community benefit plan and triennial Implementation Strategy.

Community Health Needs Assessment Process

The most recently completed CHNA was adopted by the St. Mary Medical Center Community Board in June, 2016. The Community Health Needs Assessment process was overseen by the Long Beach CHNA Collaborative. The Collaborative is comprised of Dignity Health St. Mary Medical Center, Kaiser Permanente South Bay, Long Beach MemorialCare System (Long Beach Memorial Medical Center, Community Hospital Long Beach and Miller Children's and Women's Hospital), The Children's Clinic "Serving Children and Their Families" and the City of Long Beach Department of Health and Human Services. Secondary data were collected from a variety of local, county, and state sources. The community profile includes demographic characteristics of the service area, social determinants of health, health behaviors and health outcomes. The report includes benchmark comparison data that measures Memorial data findings with Healthy People 2020 objectives. For the CHNA, information was obtained through eight focus groups and interviews with key community stakeholders, public health, service providers, members of medically underserved, low-income, and minority populations in the community and individuals or organizations serving or representing the interests of such populations. The CHNA process included the identification of resources potentially available to meet community health needs. These resources are available in the CHNA report.

St. Mary Medical Center makes the CHNA and its companion Implementation Strategy widely available to the public and welcomes comments on them. The CHNA report is available to the public on the hospital's website <http://www.dignityhealth.org/stmarymedical/community-benefits> and a paper copy is available for inspection upon request at the St. Mary Community Health Office. Public comment was requested on the previous CHNA and Implementation Strategy. All written comments were reviewed and, where appropriate, are included in the CHNA.

CHNA Significant Health Needs

Significant health needs were identified through a scoring process of the primary and secondary data collected. Those health needs that were confirmed by more than one indicator were identified as a significant health need. Meaning that: (1) secondary data showed that the size of the health need was a concern, as measured by the proportion of the community affected, compared to the benchmarks (e.g., SPA, County, State or Healthy People 2020) and (2) that primary data collection efforts (i.e., key stakeholder interviews and focus groups) identified the health need as a concern in the service area.

Significant Health Needs

The following significant health needs were determined:

- **Access to care** – Health insurance coverage is considered a key component to accessing health care including regular primary care, specialty care and other health services that contributes to one's health status. In the hospital service area, 79.5% of residents are insured which is higher than the county rate of 77.8%; however, there remain many barriers to accessing care.
- **Access to housing** – Close to fifty percent of residents in the service area are either living in substandard housing or living in cost burdened households. Individuals with mental and physical health needs, veterans, LGBTQ populations, people with disabilities and families are populations highly impacted by housing access issues and homelessness.
- **Chronic disease** – Chronic diseases include HIV/AIDS, asthma, cancers, heart disease and high blood pressure. Conditions such as asthma impact the service area due to high levels of air pollution, while heart disease and high blood pressure are impacted by factors such as the local food environment.
- **Crime and violence** – Property crimes include burglary, larceny-theft and motor vehicle theft. Violent crimes include homicide, rape, robbery (of an individual or individuals, not a home or business) and aggravated assault. Long Beach has the highest violent crime rate followed by Paramount and Bellflower.
- **Economic security** – Economic security is closely linked to many health needs identified in this CHNA, as engaging in healthy behaviors is more difficult when simply meeting one's basic needs is an everyday struggle. About 42% of the service area population lives below the 200% federal poverty level, confirming the need for strategies that address poverty and employment.
- **Education** – Of the service area population age 25 and over, 22.7% have less than a high school diploma. Non-English speakers and young adults from low-income, African American, Latino and Cambodian populations are highly impacted by the lack of formal higher education.
- **Environmental and climate** – The service area is afflicted with high amounts of air and noise pollution from industrial activities and adjacent freeways and railroad tracks. Lower income neighborhoods in Long Beach are often food deserts, lacking grocery stores and other establishments that provide healthier food options.
- **Mental health** – 8.2% of adults in SPA 6 and 11.8% in SPA 8 of adults experienced serious psychological distress in the past year. A significant portion of people who sought or needed help did not receive treatment (45.6% in SPA 6 and 32.1% in SPA 8). Community stakeholders identified four populations in Long Beach who are disproportionately affected by mental health issues. These are: the homeless, veterans, Cambodian community and youth, in particular LGBTQ youth and those in foster care.
- **Obesity and diabetes** – Being overweight is a precursor to many chronic diseases, including diabetes. Obesity and diabetes greatly impact the St. Mary service area and are diagnosed most frequently among the region's low-income communities of color. Ten to fifteen percent of individuals in the region are diagnosed with diabetes while about one-third are considered obese.
- **Oral health** – Engaging in preventive behaviors, such as having regular dental exams, can decrease the likelihood of developing future health problems. 41.6% of adults in SPA 6 and 30.3% in SPA 8 had not had a dental exam within the last year. Children have increased access to dental care when

compared to adults; 75.8% of children in SPA 6 and 81.5% of children in SPA 8 have dental insurance.

- **Pregnancy and birth outcomes** – there were 9,491 births in the service area in 2012. In the service area 8% of births are to teens. 7.4% of births are low birth weight births. Engaging in early prenatal care is important because health risks to both the mother and infant can be detected early. 84.0% of women in the service area obtained prenatal care during the first trimester of their pregnancy.
- **Preventive care** – Preventive care includes immunizations and screenings and plays a role in maintaining population health and reducing the burden on health care services. Generally, SPA 8 had a greater need for increased immunization and screenings, as compared to SPA 6; however, both areas would benefit from greater rates of both screening and immunization.
- **Substance abuse and tobacco use** – For low-income children and adults in African American, Latino and Cambodian communities in the greater Long Beach area, trauma and adversity contribute to substance abuse and other conditions. The mentally ill, the homeless and veterans were identified as the communities that were most affected by this health issue.

Significant Health Needs the Hospital will Address

The Long Beach CHNA Collaborative planned and convened a prioritization session. Outreach for the session was conducted via the same network of individuals and groups used for key stakeholder interviews and focus groups. Fifty-four (54) participants attended the half-day session on December 11, 2015. Session participants included public health experts; and leaders, representatives, or members of medically underserved, low-income, and minority populations. The areas of expertise among prioritization session participants were broad and covered the spectrum of social determinants of health, health behaviors and outcomes.

Prioritization session participants had data and other information relevant to the health needs of the service area. The following four criteria were used to prioritize the significant health needs:

- **Severity:** The health need has serious consequences (morbidity, mortality, and/or economic burden) for those affected.
- **Disparities:** The health need disproportionately impacts certain groups of people more than others (e.g. by geography, age, gender, race/ethnicity).
- **Prevention:** Effective and feasible prevention is possible. There is an opportunity to intervene at the prevention level and impact overall health outcomes. Prevention efforts include those that target individuals, communities, and policy efforts.
- **Leverage:** The solution could impact multiple problems. Addressing this issue would impact multiple health issues.

During the prioritization session, health needs were reviewed and discussed and then participants cast seven votes across the 13 health needs using the four criteria discussed above. The following table provides the results of prioritization. While the calculated values provide an overall priority score to help indicate which health needs are of higher priority, the results are not intended to dictate the final policy decision. Rather they offer a means by which choices can be ordered.

The community input yielded this prioritized list of significant health needs:

1. Mental Health
2. Economic Security
3. Obesity and Diabetes
4. Access to Housing
5. Chronic Disease
6. Education
7. Access to Care
8. Preventive Care
9. Crime and Violence
10. Pregnancy and Birth Outcomes
11. Environment and Climate
12. Oral Health

After the community forum prioritized the health needs, the Community Health team used the following criteria to determine the significant health needs that SMMC will address in the Implementation Strategy:

- **Organizational Capacity:** Is there capacity to address the issue?
- **Existing Infrastructure:** Are there programs, systems, staff and support resources in place to address the issue?
- **Established Relationships:** Are there established relationships with community partners to address the issue?
- **Ongoing Investment:** Are there existing resources that are committed to the issue? Staff time and financial resources for this issue are counted as part of our community benefit effort.
- **Focus Area:** Have competencies and expertise been acknowledged to address the issue? Does the issue fit with the organizational mission?

After a thorough process that applied these criteria to the identified significant health needs, SMMC selected the following needs to address:

- Access to care
- Chronic diseases
- Overweight and diabetes
- Pregnancy and birth outcomes
- Preventive care

Significant Health Needs the Hospital will Not Address

Taking existing hospital and community resources into consideration, St. Mary Medical Center will not directly address the remaining health needs identified in the CHNA including: mental health, environmental health, economic security, access to housing, education, crime and violence, oral health and substance abuse. SMMC cannot address all the social determinants of health or the health needs present in the community; therefore, it will concentrate on those health needs that can most effectively be addressed given the organization's areas of focus and expertise.

Creating the Implementation Strategy

As a matter of Dignity Health policy, the hospital's community health and community benefit programs are guided by five core principles. All of our initiatives relate to one or more of these principles:

- **Focus on Disproportionate Unmet Health-Related Needs:** Seek to address the needs of communities with disproportionate unmet health-related needs.
- **Emphasize Prevention:** Address the underlying causes of persistent health problems through health promotion, disease prevention, and health protection.
- **Contribute to a Seamless Continuum of Care:** Emphasize evidence-based approaches by establishing operational linkages between clinical services and community health improvement activities.
- **Build Community Capacity:** Target charitable resources to mobilize and build the capacity of existing community assets.
- **Demonstrate Collaboration:** Work together with community stakeholders on community health needs assessments, health improvement program planning and delivery to address significant health needs.

Planning for the Uninsured/Underinsured Patient Population

In keeping with its mission, the hospital offers patient financial assistance (also called charity care) to those who have health care needs and are uninsured, underinsured, ineligible for a government program or otherwise unable to pay for medically necessary care. The hospital strives to ensure that the financial capacity of people who need health care services does not prevent them from seeking or receiving care. A plain language summary of the hospital's Financial Assistance Policy is in Appendix C.

Financial assistance is not considered to be a substitute for personal responsibility, and patients are expected to cooperate with the hospital's procedures for obtaining financial assistance and contribute to the cost of their care based on individual ability to pay. Patients are informed about the Dignity Health Financial Assistance Policy through the Registration and Admitting Department. St. Mary has information in English and Spanish posted in public areas, all registration waiting rooms, the cafeteria, emergency department, and admitting. Every patient receives a pamphlet describing the Financial Assistance program, regardless of their coverage. On each billing statement sent to the patient's home, there is information about the financial assistance program and how to apply.

Assistance is offered to apply for public health coverage programs, discounts and payment plans are offered for uninsured patients. St. Mary has worked to inform the public of Financial Assistance/Charity Care policy through its work with St. Mary Clinics and community partners by providing information and discussion regarding the policy and how to access the assistance. St. Mary Medical Center partnered with the Long Beach Department of Health and Human Services through the Health Access Collaborative, a group of Long Beach community programs that help uninsured persons access health care and health benefits. Certified Enrollment Counselors from the St. Mary Clinics and Families in Good Health programs participated in various enrollment events throughout the city as part of the collaborative. St. Mary established a Certified Enrollment Entity through the St. Mary Foundation, created educational brochures, and hosted multiple enrollment events at its Health Enhancement Center to facilitate insurance enrollment initiatives.

2016-2018 Implementation Strategy

This section presents strategies, programs and initiatives the hospital intends to deliver, fund or collaborate with others to address the selected significant community health needs over the next three years. It includes summary descriptions, anticipated impacts, planned collaboration, and detailed “program digests” on select initiatives.

The strategy specifies planned activities consistent with the hospital’s mission and capabilities. The hospital may amend the plan as circumstances warrant. For instance, changes in significant community health needs or in community assets and resources directed to those needs may merit refocusing the hospital’s limited resources to best serve the community.

Strategy and Program Plan Summary

The following programs and initiatives address the significant health needs the hospital has chosen to address.

Access to Health Care

- **Financial Assistance** – provides financial assistance through both free and discounted care for health care services, consistent with the hospital’s financial assistance policy. In FY14 and FY15 St. Mary Medical Center provided over 7,700 persons with close to \$19 million in financial assistance.
- **C.A.R.E. Program** – an HIV medical and psychosocial service program.
- **Family Clinic of Long Beach** – for over 25 years, the Family Clinic provides primary care services.
- **Families in Good Health** – grant funded programs to help families make health choices.
- **Medical Transportation Program** – hospital funds three vans, one van is a lift van for persons with disabilities. The vans transport those who lack transportation to needed medical and preventive health care services.

Chronic Disease

- **Bazzeni Wellness Center** – provides preventive health education, chronic disease management and screening, exercise classes and resources for individuals 50 years and older.
- **Chronic Disease Self-Management Program** – offered in English and Spanish to help individuals manage their chronic conditions.

Obesity and diabetes

- **Family Clinic of Long Beach** – provides prevention of obesity and related chronic disorders.
- **St. Mary Outpatient Diabetes Program** – this education and support program is recognized by the American Diabetes Association.

Preventive care

- **Bazzeni Wellness Center** – provides education, screenings, health promotion activities and disease prevention, including flu shots.

- **Every Women Counts** – the Imaging Center at St. Mary offers mammography services to underserved women over age 40. Breast care and pap smears are also offered.
- **Mobile Care Unit** – a mobile van that travels to high-need areas to provide health care screening, education and outreach. The Mobile Care Unit is staffed by a community health team.

Pregnancy and birth outcomes

- **Welcome Baby** – a voluntary hospital and home-based intervention for pregnant and postpartum women.
- **Mary Hilton Family Health Center** – offers OB, perinatal and pediatric services.

Anticipated Impact

The anticipated impacts of specific, major program initiatives, including goals and objectives, are stated in the Program Digests on the following pages. Overall, the hospital anticipates that actions taken to address significant health needs will: improve health knowledge, behaviors, and status; increase access to care; and help create conditions that support good health. The hospital is committed to monitoring key initiatives to assess and improve impact and address the underlying causes of persistent health problems through health promotion and disease prevention. The Community Benefit Advisory Committee, hospital executive leadership, Community Board, and Dignity Health receive and review program updates. The hospital creates and makes public an annual Community Benefit Report and Plan, and evaluates impact and sets priorities for its community health programs by conducting Community Health Needs Assessments every three years.

Planned Collaboration

St. Mary Medical Center collaborates with many community partners from the nonprofit and private sectors, local universities and the Long Beach Department of Health and Human Services to assist with the implementation of community benefit goals and objectives. Working collaboratively with community partners, the hospital provides leadership and advocacy, stewardship of resources, assistance with local capacity building, and participation in community-wide health planning. Collaborators on specific programs are stated in the following program digests.

Program Digests

The following pages include Program Digests describing key programs and initiatives that address one or more significant health needs identified in the most recent CHNA report.

Comprehensive AIDS Resource and Education (C.A.R.E.)	
Significant Health Needs Addressed	<ul style="list-style-type: none"> ✓ Access to Care ✓ Chronic Disease ❑ Obesity and Diabetes ✓ Preventive Care ❑ Pregnancy and Birth Outcomes
Program Emphasis	<ul style="list-style-type: none"> ✓ Focus on Disproportionate Unmet Health-Related Needs ✓ Emphasize Prevention ✓ Contribute to a Seamless Continuum of Care ✓ Build Community Capacity ✓ Demonstrate Collaboration
Program Description	<p>Comprehensive AIDS Resource and Education (C.A.R.E.) Program was founded in 1986. Since its inception, C.A.R.E. has grown into a nationally recognized HIV medical, and psychosocial service program that now provides comprehensive HIV medical, dental and psychosocial services to over 1,725 low-income residents of Southern Los Angeles County who are infected or affected by HIV disease regardless of their ability to pay. C.A.R.E. is a non-profit, hospital based HIV program that is directly funded by federal, state and county grants (see www.careprogram.org).</p>
Community Benefit Category	A2. Community Based Clinical Services
Planned Actions for 2016 - 2018	
Program Goal / Anticipated Impact	Increase access to health care services. Expanded access to care will support a reduction of HIV morbidity and mortality through continuing current services to HIV/AIDS- at risk or infected populations who are not receiving care or whom are underserved.
Measurable Objective(s) with Indicator(s)	<ul style="list-style-type: none"> • 100% of clients will have a behavioral health need assessment completed. • CARE's HIV Testing initiative will annually complete 10,000 HIV screenings.
Intervention Actions for Achieving Goal	<ol style="list-style-type: none"> 1. CARE will partner with the ED and local community-based organizations to screen residents for HIV. 2. Based on a behavioral health assessment, a health plan will be developed for every client. 3. Clients diagnosed with HIV during an ED visit will be linked to needed health care and supportive services. 4. CARE will increase community awareness through quarterly community forums.
Planned Collaboration	CARE will continue to collaborate with UCLA Harbor, LGBTQ Center of Long Beach, and the Long Beach Department of Health and Human Services to engage community members who may be in need of behavioral health support.

Chronic Disease Self-Management	
Significant Health Needs Addressed	<input type="checkbox"/> Access to Care <input checked="" type="checkbox"/> Chronic Disease <input checked="" type="checkbox"/> Obesity and Diabetes <input checked="" type="checkbox"/> Preventive Care <input type="checkbox"/> Pregnancy and Birth Outcomes
Program Emphasis	<input checked="" type="checkbox"/> Focus on Disproportionate Unmet Health-Related Needs <input checked="" type="checkbox"/> Emphasize Prevention <input checked="" type="checkbox"/> Contribute to a Seamless Continuum of Care <input checked="" type="checkbox"/> Build Community Capacity <input checked="" type="checkbox"/> Demonstrate Collaboration
Program Description	Chronic Disease Self-Management Program (CDSMP)—Based on the Stanford Model, this proven 6 week self-help program is offered to the community in English and Spanish. The goal of the program is to teach participants the skills they need to know in manage their chronic condition(s) on a daily basis to achieve the maximum quality of physical, mental and emotional well-being.
Community Benefit Category	A1. Community Health Education - Lectures/Workshops
Planned Actions for 2016 - 2018	
Program Goal / Anticipated Impact	Offer evidence-based chronic disease management (CDM) programs to decrease hospital admissions and ER use for persons with chronic diseases.
Measurable Objective(s) with Indicator(s)	<ul style="list-style-type: none"> • Using Pre/Post-test methodology, participants will demonstrate increased knowledge of disease self-management. • Participants will document changes in behavior they will undertake to appropriately manage their chronic diseases.
Intervention Actions for Achieving Goal	<ol style="list-style-type: none"> 1. Annually conduct four sessions of the CDSMP. 2. Train Promotora's to provide workshop in Spanish "Tomando Control de su Salud" and hold two workshops per year. 3. Annually host one leader training. 4. Annually add two Stanford Chronic Disease Self-Management Programs.
Planned Collaboration	Community Agencies Community Clinics Community Centers and Senior Center Emergency Department Case Management Partners in Care Foundation Centro Cha and Latino's in Action

Family Clinic of Long Beach	
Significant Health Needs Addressed	<ul style="list-style-type: none"> ✓ Access to Care ✓ Chronic Disease ✓ Obesity and Diabetes ✓ Preventive Care ❑ Pregnancy and Birth Outcomes
Program Emphasis	<ul style="list-style-type: none"> ✓ Focus on Disproportionate Unmet Health-Related Needs ✓ Emphasize Prevention ✓ Contribute to a Seamless Continuum of Care ✓ Build Community Capacity ✓ Demonstrate Collaboration
Program Description	<p>The Family Clinic of Long Beach has been providing primary care to the Long Beach Community for over 25 years. Developed as part of the St. Mary residency program, The Family Clinic continues to support the residency and of over 30 medical students and dozens of pharmacy students each year. The Family clinic serves as the hub of medical services for our group of clinics, serving as the Medical Home for adult patients seeking primary care services or referrals to specialists in our clinic network. Serving over 1,500 residents of Long Beach in calendar year 2015, the clinic focuses on internal medicine with additional services such as:</p> <ul style="list-style-type: none"> ▪ Travel Clinic ▪ Coumadin Clinic ▪ Diabetes Education Program ▪ Case Management Services ▪ Specialty Medicine
Community Benefit Category	C. Subsidized Services
Planned Actions for 2016 - 2018	
Program Goal / Anticipated Impact	Increase access to primary health care for the medically underserved. Stabilize patients with diabetes and decrease disease through prevention services.
Measurable Objective(s) with Indicator(s)	<ul style="list-style-type: none"> • Increase access for 100 patients annually to obtain care at the clinic. • Provide 80 patients with diabetes and medication therapy management and prevention services.
Intervention Actions for Achieving Goal	<ol style="list-style-type: none"> 1. Provide patients with diabetes and medication therapy management. 2. Screen patients for diabetes, cervical cancer and avoidance of antibiotic treatment in adults with acute bronchitis.
Planned Collaboration	<p>Mobile Clinic</p> <p>Emergency Department</p>

Every Woman Counts	
Significant Health Needs Addressed	<ul style="list-style-type: none"> ✓ Access to Care ❑ Chronic Disease ❑ Obesity and Diabetes ✓ Preventive Care ❑ Pregnancy and Birth Outcomes
Program Emphasis	<ul style="list-style-type: none"> ✓ Focus on Disproportionate Unmet Health-Related Needs ✓ Emphasize Prevention ✓ Contribute to a Seamless Continuum of Care ✓ Build Community Capacity ✓ Demonstrate Collaboration
Program Description	Every Woman Counts programs are able to offer mammography and cervical screening services to women who are uninsured/underinsured and of low/no income, age 40+. The Komen grant provided diagnostic services to women under age 40 and uninsured men. In addition to diagnostic services, the Center offers certification into the Breast and Cervical Cancer Treatment Program (BCCTP) as well as coordination of care by our staff RN.
Community Benefit Category	A2. Community-Based Clinical Services E3. In-kind assistance
Planned Actions for 2016 - 2018	
Program Goal / Anticipated Impact	Increase preventive screening for cancer.
Measurable Objective(s) with Indicator(s)	4,000 women will be enrolled in the free programs and will be tracked by the department.
Intervention Actions for Achieving Goal	<ol style="list-style-type: none"> 1. Offer community health education, community lectures, presentations and workshops. 2. Provide outreach and health education in the media and community health awareness events to encourage healthy behaviors and promote early detection of cancer through screening. 3. Participate in health and wellness fairs.
Planned Collaboration	Susan G. Komen Foundation AIDS Project Los Angeles YWCA

Mary Hilton Family Health Center (OB, Antenatal and Pediatrics Clinic)	
Significant Health Needs Addressed	<ul style="list-style-type: none"> ✓ Access to Care ❑ Chronic Disease ❑ Obesity and Diabetes ✓ Preventive Care ✓ Pregnancy and Birth Outcomes
Program Emphasis	<ul style="list-style-type: none"> ✓ Focus on Disproportionate Unmet Health-Related Needs ✓ Emphasize Prevention ✓ Contribute to a Seamless Continuum of Care ✓ Build Community Capacity ✓ Demonstrate Collaboration
Program Description	<p>Mary Hilton Family Health Center has OB, perinatal, and pediatric services: The clinics provide comprehensive services to serve mothers and children from pregnancy through young adulthood. Services includes:</p> <ul style="list-style-type: none"> • Benefits assistance • Comprehensive Pre-natal Services Program (CPSP) • High risk care • Vaccines • Care for diabetic expecting mothers
Community Benefit Category	<p>A1. Community Health Education A2. Community-Based Clinical Services A3. Health Care Support Services</p>
Planned Actions for 2016 - 2018	
Program Goal / Anticipated Impact	Increase access to prenatal and postnatal care to improve the health of mother and child.
Measurable Objective(s) with Indicator(s)	<ul style="list-style-type: none"> • Increase access to in home and post-partum and pediatric services through implementation of the Welcome Baby Program. • Increase and provide prenatal care and education to women by 10%.
Intervention Actions for Achieving Goal	<ul style="list-style-type: none"> • Enroll at-risk mothers and their children into the Welcome Baby Program. • Increase access to prenatal care and pediatric care.
Planned Collaboration	<p>California Diabetes and Pregnancy Program, known as Sweet Success – extra medical care of expecting mothers that have diabetes. Welcome Baby Program – support for mothers and children to prevent disruption or delays in care.</p>

APPENDIX A: COMMUNITY BOARD AND COMMITTEE ROSTERS

Sandy Cajas

Paul Carter

Suny Lay Chang

Chester Choi, M.D.
St. Mary Medical Center

Minnie Douglas, Ed.D., R.N.

Ivy Arlinda Goolsby
Int'l Realty & Investment

Sr. Elizabeth Ann Hayes, CCVI
Villa de Matel

Bonnie Lowenthal

Allen Miller
COPE Health Solutions

George Murchison

Sr. Christina Murphy, CCVI
Villa de Matel

Christopher R. Pook

Shelly Schlenker
Dignity Health

Erin Simon, Ed.D.

Alexander Stein, M.D.

Rocky Suarez
Suarez Investment Group

Robert R. Waestman

Ex-Officio (non-voting)

Joel Yuhas
Hospital President & CEO

Bertram E. Sohl, MD

Community Benefit Advisory Committee

Minnie Douglas, Ed.D., R.N.

Ivy Arlinda Goolsby
Int'l Realty & Investment

Chan Hopson
Khmer Parent Association

Patrick Kennedy
Long Beach Interfaith Community Organization

Anthony Ly
Long Beach Department of Health and Human Services

Jean Bixby Smith
Retired

Cynthia Terry
Consultant

Anna Totta
Retired

Felton Williams, Ph.D.
Long Beach Unified School District

Cecile Walters
Retired, City of Long Beach

Kimm Hurley
Dignity Health Regional Director of Social Work

Sister Celeste Trahan, CCVI
Vice President Mission Integration

Tim Bajeczko
Foundation Office

Leon Choiniere, CFO

Kit G. Katz
Director Community Benefits

APPENDIX B: OTHER PROGRAMS AND NON-QUANTIFIABLE BENEFITS

Partnering with others who share our vision and values is necessary to bring about real and lasting improvements in the health care system and the health of those we serve.

- Dignity Health's Community Grants Program is one way we are working collaboratively to increase access to quality care and improve the social determinants of health. Dignity Health grant funds are to be used to deliver services to and improve the health and well-being of underserved populations. From 2013 to 2015, St. Mary Medical Center contributed more than \$300,000 in grant funds to community organizations that worked to increase access to health care, improve chronic disease management, and provide services for the poor.
- St. Mary Medical Center continues to provide leadership and assistance with community-wide health planning in collaboration with area hospitals and nonprofit agencies including the Hospital Association of Southern California. Working collaboratively with community partners, St. Mary provided leadership and advocacy, assisted with local capacity building, and participated in community-wide health planning.
- St. Mary Medical Center, in the role of community partner, provides meeting space for nonprofit and community organizations.
- St. Mary Medical Center collaborates with many community-based organizations to improve capacity and enhance the health of the greater community. The C.A.R.E. Program collaborates with many regional and local boards to educate and encourage awareness of preventing HIV/AIDS as well as to make patient-centered treatment available to everyone affected or infected. Many of the St. Mary leadership and staff represent St. Mary throughout the community providing expertise as speakers, board members, mentors, and resources to the community that we serve.
- St. Mary Medical Center works to ensure the carbon footprint is minimal. Administrative Leadership established the “Green Team” to promote awareness and initiate efforts at recycling and being responsible stewards. St. Mary collaborates with the Beacon House Association, a nonprofit, to recycle cardboard, glass, plastic, newspapers, and ink cartridges. In collaboration with Food Finders and the American Red Cross, St. Mary recycles cell phones.
- The mission of St. Mary Medical Center is one that is embraced by staff. Community support included sponsoring, in collaboration with Catholic Charities, more than 200 families at the annual Helping Hands program, which provides toys and gift certificates for food at Christmas-time to families who would otherwise be unable to have a celebration. Clothes for babies and children are provided by SMMC staff to the Mary Hilton Family Health Center Clinic to provide for families who are in need. Food drives occur several times a year to provide food for the clients of the C.A.R.E. (Comprehensive AIDS Resources and Education) Program through which hundreds of pounds of food have been donated by staff and volunteers in support of their food bank.

APPENDIX C: FINANCIAL ASSISTANCE POLICY SUMMARY

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

Free Care

- If you are uninsured or underinsured with a family income of up to 200% of the Federal Poverty Level you may be eligible to receive hospital services at no cost to you.

Discounted Care

- If you are uninsured or underinsured with an annual family income between 200-350% of the Federal Poverty level, you may be eligible to have your bills for hospital services reduced to the highest amount reasonably expected to be paid by a government payer, which is usually the amount that Medicare would pay for the same services.
- If you are uninsured or underinsured with an annual family income between 350-500% of the Federal Poverty level you may be eligible to have your bills for hospital services reduced to the Amount Generally Billed, which is an amount set under federal law that reflects the amount that would have been paid to the hospital by private health insurers and Medicare (including co-pays and deductibles) for the medically necessary services.

If you are eligible for financial assistance under our Financial Assistance Policy you will not be required to pay more than the Amount Generally Billed described above. If you qualify, you may also request an interest-free extended payment plan. You will never be required to make advance payment or other payment arrangements in order to receive emergency services.

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

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

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

California Hospital Medical Center 1401 South Grand Ave, Los Angeles, CA 90015 | **Financial Counseling** 213-742-5530 Patient Financial Services 888-488-7667 | www.dignityhealth.org/californiahospital/paymenthelp

Community Hospital of San Bernardino 1805 Medical Center Dr., San Bernardino, CA 92411 **Financial Counseling** 909-806-1317 | Patient Financial Services 909-806-1281 www.dignityhealth.org/san-bernardino/paymenthelp

Glendale Memorial Hospital 1420 South Central Ave, Glendale, CA 91204 | **Financial Counseling** 818-502-2305 Patient Financial Services 888-488-7667 | www.dignityhealth.org/glendalememorial/paymenthelp

Northridge Hospital Medical Center 18300 Roscoe Blvd, Northridge, CA 91328 | **Financial Counseling** 818-885-5368 Patient Financial Services 888-488-7667 | www.dignityhealth.org/northridgehospital/paymenthelp

St. Bernardine Medical Center 2101 N. Waterman Ave, San Bernardino, CA 92404 **Financial Counseling** 909-883-8711 ext 4408 | Patient Financial Services 909-881-4418 www.dignityhealth.org/stbernardinemedical/paymenthelp

St. Mary Medical Center 1050 Linden Ave, Long Beach, CA 90813 | **Financial Counseling** 562-491-7078 Patient Financial Services 888-488-7667 | www.dignityhealth.org/stmarymedical/paymenthelp