Dignity Health St. Rose Dominican - Siena Community Benefit 2019 Report and 2020 Plan

Adopted November 2019
A message from

Lawrence Barnard, Nevada Market Leader and President/CEO of Dignity Health St. Rose Dominican Siena and Rose de Lima Campuses, and John Socha, Chair of the Dignity Health St. Rose Dominican Community Board.

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

Dignity Health St. Rose Dominican shares a commitment with others to improve the health of our community, and delivers programs and services to help achieve that goal. The Community Benefit 2019 Report and 2020 Plan describes much of this work. This report meets requirements in California state law (Senate Bill 697) that not-for-profit hospitals produce an annual community benefit report and plan. Dignity Health hospitals in Arizona and Nevada voluntarily produce these reports and plans, as well. We are proud of the outstanding programs, services and other community benefits our hospital delivers, and are pleased to report to our community.

In fiscal year 2019 (FY19), Dignity Health St. Rose Dominican Siena Campus provided $48,986,967 in patient financial assistance, unreimbursed costs of Medicaid, community health improvement services and other community benefits. The hospital also incurred $39,226,974 in unreimbursed costs of caring for patients covered by Medicare.

The hospital’s Community Board reviewed, approved and adopted the Community Benefit 2019 Report and 2020 Plan at its November 21, 2019 meeting.

Thank you for taking the time to review our report and plan. We welcome any questions or ideas for collaborating that you may have, by reaching out to Holly Lyman, Director of Community Health (702) 616-4903.

Lawrence Barnard
Nevada Market Leader
President/CEO Siena and Rose de Lima Campuses

John Socha
Chairperson, Board of Directors
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# At-a-Glance Summary

## Community Served
Dignity Health – St. Rose Dominican provides health services throughout Clark County. Clark County is the most populous county in Nevada, accounting for nearly three-quarters of the state’s residents with a total population of 2,112,426.

While Clark County’s core population has increased in the last decade, its diversity has also increased. For example, Non-Hispanic white individuals no longer account for most of the population. Hispanic and Asian residents have larger shares of the population in Clark County than in the state of Nevada or in the United States.

## Significant Community Health Needs Being Addressed
The significant community health needs the hospital is helping to address and that form the basis of this document were identified in the hospital’s most recent Community Health Needs Assessment (CHNA). Needs being addressed by strategies and programs are:

<table>
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<tr>
<th>Needs Being Addressed</th>
<th>Strategies and Programs to Address Needs</th>
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<tr>
<td>Access to Care</td>
<td>Access to care: Nevada Health Link &amp; Medicaid Enrollment, Helping Hands Program, Engelstad Foundation RED Rose Program Navigation, Patient Financial Assistance; Funding Grantees such as Catholic Charities Transition Respite for the Homeless, Lend a Hand of Boulder City, Stallman Touro Clinic at the Shade Tree, Toe Tag Monologues</td>
</tr>
<tr>
<td>Violence Prevention</td>
<td>Violence prevention: Human Trafficking Response Program, Parent Gun Safety Classes, Mental Health First Aid (Adult and Youth), SafeTALK Suicide Prevention, Senior Peer Counseling; Funding Grantees such as Rape Crisis Center, Prevent Child Abuse Nevada, Toe Tag Monologues, The Shade Tree, St. Jude’s Ranch for Children</td>
</tr>
<tr>
<td>Substance Use</td>
<td>Substance use: Mental Health First Aid (Adult and Youth), EMPOWERED Program, Let’s Talk Support Groups, AA &amp; NA groups; Funding Grantees such as Toe Tag Monologues, Foundation for Recovery</td>
</tr>
<tr>
<td>Mental Health</td>
<td>Mental health: Senior Peer Counseling, Perinatal Mood and Anxiety Disorders Program, Mental Health First Aid (Adult &amp; Youth), Let’s Talk Support Groups; Funding Grantees Such as Toe Tag Monologues</td>
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## Anticipated Impact
- Navigate clients to services
- Enroll clients in health plan or Medicaid
- Provide education
- Prevent suicide, rape, domestic violence, child abuse and human trafficking
Transport clients to care and services
Provide support and counseling
Contribute to a reduction in fatalities on our roadways
Raise individual and community awareness, resiliency and capacity to act with respect to safety, violence prevention, substance use and mental health
Provide funding, support and collaboration

Crucial partners identified:

- Human Trafficking Task Force
- Las Vegas Coalition for Zero Fatalities
- National Alliance on Mental Illness (NAMI)
- Nevada Coalition for Suicide Prevention
- Nevada Department of Public Safety
- Nevada Health Link
- Nevada Office of Suicide Prevention
- PACT Coalition
- Southern Nevada Harm Reduction Alliance
- Southern Nevada Health District
- State of Nevada Department of Welfare and Social Services

Potential Grantees:
- Foundation for Recovery
- Catholic Charities
- Rape Crisis Center
- The Shade Tree
- Lend a Hand
- Toe Tag Monologs
- St. Jude's Ranch for Children
- Prevent Child Abuse Nevada

This document is publicly available online at strosehospitals.org.

Written comments on this report can be submitted to Dignity Health – St. Rose Dominican Community Health Program at 2651 Paseo Verde Parkway, Suite 180, Henderson, NV 89074 or by e-mail to holly.lyman@dignityhealth.org.
Our Hospital and the Community Served

About Dignity Health – St. Rose Dominican

Dignity Health – St. Rose Dominican is a member of Dignity Health, which is a part of CommonSpirit Health.

Hospital Locations

As the community’s only not-for-profit, faith-based hospital system, the St. Rose Dominican hospitals are guided by the vision and core values of the Adrian Dominican Sisters and Dignity Health.

Rose de Lima Campus on opening day, 1947

The Adrian Dominican Sisters arrived in Henderson, Nevada, the summer of 1947 to run what was then a small community hospital. Over the last 72 years, this small hospital has grown into a large multi-faceted healthcare system. Dignity Health - St. Rose Dominican now has three hospital campuses in the Las Vegas valley, with a total of 473 beds, more than 1,300 physicians, 400 volunteers and more than 3,500 employees.
In addition to its three acute-care hospitals, Dignity Health Nevada offers primary and specialty care services throughout the Las Vegas Valley at its nine Dignity Health Medical Groups. Additionally, four new Dignity Health – St. Rose Dominican Neighborhood Hospitals have opened in underserved parts of the valley in partnership with Emerus, the nation’s innovative leader in building and operating micro hospitals.

Dignity Health – St. Rose Dominican is a member of the 22-state Dignity Health network of nearly 9,000 physicians, 62,000 employees, and 400 care centers, including hospitals, urgent and occupational care, imaging centers, home health, and primary care clinics. As the Henderson and Las Vegas communities grow, the Dignity Health – St. Rose Dominican health system and its nearly 4,000 employees will continue the Sisters’ mission of serving people in need.

The Siena Campus was founded in 2000 and currently has 326 beds. The hospital has received the American Heart Association’s (AHA’s) Mission: Lifeline-STEMI Receiving Center – GOLD PLUS Achievement Award for implementing quality improvement measures outlined by the AHA for the treatment of patients who suffer severe heart attacks for three years in a row (2017-2019). The American Heart Association/American Stroke Association also awarded Siena the Get with the Guidelines-Stroke Gold Plus with Honor Roll Elite Achievement Awards in 2018 and 2019. The hospital’s trauma center is verified as a Level III trauma center by the Committee on Trauma (COT) of the American College of Surgeons. The Siena Campus is one of only two Baby-Friendly designated hospitals in southern Nevada, and it was chosen as “Best Place to Have A Baby” in the 2018 Las Vegas Review-Journal’s readers poll. Healthgrades awarded the Siena Campus a five-star rating for c-section deliveries in 2018 for the fourth year in a row.

The Rose de Lima Campus, founded by the Adrian Dominican Sisters in 1947, recently went through a transition and now offers 24/7 emergency room care, limited inpatient beds, and imaging services. The hospital received an A in hospital safety scores from The Leapfrog Group, a national nonprofit organization, in fall 2018 and spring 2019. The Rose de Lima Campus was 1) a recipient of the Healthgrades Patient Safety Excellence Award; 2) named among the top 5% in the nation for patient safety; and 3) named among the top 10% in the nation for patient safety 2 years in a row (2017-2018). The Rose de Lima Campus also received the American Heart Association/American Stroke Association 2018 Get With the Guidelines® - Stroke Gold Plus Quality Achievement award.

The San Martin Campus opened in late 2006 and has 147 beds. In 2019, the hospital received the American Heart Association and American Stroke Association Get with the Guidelines-Stroke GOLD PLUS Achievement Award for its commitment and success in implementing a high standard of stroke care. The hospital is a Healthgrades five-star recipient for treatment of Heart Failure for two years in a row (2018-2019), a five-star recipient for treatment of Stroke (2019), a five-star recipient for treatment of Chronic Obstructive Pulmonary Disease and for Pneumonia for two years in a row (2018-2019), and a five-star recipient for Esophageal/Stomach Surgeries for three years in a row (2017-2019). In 2018, the San Martín Campus was chosen “Best Hospital” in the Las Vegas Review-Journal readers’ poll and received a silver award for “Best Place to Have a Baby.” San Martín was also the first hospital in southern Nevada to be designated as a Baby-Friendly hospital in 2014.

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.
Financial Assistance for Medically Necessary Care

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

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

Description of the Community Served

Dignity Health – St. Rose Dominican serves Clark County. A summary description of the community is below. Additional details can be found in the CHNA report online.

The geographic area for this CHA is Clark County, the common community for all partners participating in the CHA collaborative. Clark County is the nation’s 14th largest county that serves more than 2.25 million citizens and more than 46 million visitors a year. Clark County serves a community living in rural or urban areas. A key component of the county’s economy is tourism, and among its largest industries are accommodation and food service, retail trade and health care and social assistance.

All counties within Nevada have had tremendous population growth within the last decade. However, the majority of the population remains within Clark County, and it continues to grow. Between 2015 and 2016 Clark County’s population grew from 2.11 million to 2.16 million. Clark County comprises only 7% (8,091 square miles) of Nevada’s land mass (110,567 square miles) but contains 72% of the state’s total population. Because of Clark County’s contribution to the state population, caution should be exercised when comparing the county to the state.

Dignity Health - St. Rose Dominican also serves an increasingly diverse population. The largest racial group, White (including Hispanic/Latino ethnicity), makes up 44.11% of the population, followed by the populations identifying as Black or African American (10.8%) and as Asian (10.15%). Notably, 30.68% of Clark County residents identify as Hispanic or Latino, a higher percentage than seen across Nevada and much higher than the rest of the U.S. (U.S. Census Bureau). Two-thirds of Clark County residents spoke only English at home as of 2014. Among the remaining third, the residents spoke Spanish or Spanish Creole at home.

It is well known that educational attainment and poverty impact health. Data from 2010-2014 show slightly lower levels of education among Clark County residents than the nation as a whole. In addition, education is unevenly distributed within the county with 26.8% of Whites having at least a bachelor’s degree compared to 8.6% of Hispanics (U.S. Census Bureau). Clark County’s poverty level increased from 10.9% (2005-2009) to 15.7%. The poverty level increased even more for children under the age of 18 from 15.2% to 23% during the same time period. Females between 25 and 34 are the largest demographic living in poverty, followed by females between 18 and 24.
Community Demographics
Total Population: 2,173,048
Race: 42.6% White – Non-Hispanic, 31.3% Hispanic or Latino, 11.0% African American, 10.8% Asian/Pacific Islander, 4.4% Other
Median Income: $57,611
Unemployment: 5.6%
No HS Diploma: 15.1%
Medicaid Population: 16.3%*
Uninsured: 12.1%
CNI Score: 3.6
Other Area Hospitals: 11
Medically Underserved Areas or Populations: Yes
(Sources: http://datausa.io/profile/geo/clark-county-nv/#economy; U.S. Census Bureau. American Community

Community Need Index

One tool used to assess health need is the Community Need Index (CNI) created and made publicly available by Dignity Health and IBM Watson Health. The CNI analyzes data at the zip code level on five factors known to contribute or be barriers to health care access: income, culture/language, education, housing status, and insurance coverage.

Scores from 1.0 (lowest barriers) to 5.0 (highest barriers) for each factor are averaged to calculate a CNI score for each zip code in the community. Research has shown that communities with the highest CNI scores experience twice the rate of hospital admissions for ambulatory care sensitive conditions as those with the lowest scores.
Community Assessment and Significant Needs

The hospital engages in multiple activities to conduct its community health improvement planning process. These include, but are not limited to conducting a Community Health Needs Assessment with community input at least every three years, identifying collaborating community stakeholder organizations, describing anticipated impacts of program activities and measuring program indicators.

Community Health Needs Assessment

The health issues that form the basis of the hospital’s community benefit plan and programs were identified in the most recent CHNA report, which was adopted in May 2019.

This document also reports on programs delivered during fiscal year 2019, which are linked to needs prioritized in the hospital’s previous CHNA report.

The CHNA contains several key elements, including:
- Description of the assessed community served by the hospital;
- Description of assessment processes and methods;
- Presentation of data, information and findings, including significant community health needs;
- Community resources potentially available to help address identified needs; and
- Discussion of impacts of actions taken by the hospital since the preceding CHNA.

Additional details regarding the needs assessment process and findings can be found in the CHNA report, which is publicly available at strosehospitals.org or upon request to the hospital’s Community Health office.

Significant Health Needs

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

- Access to Care (health insurance coverage, service navigation, linguistic and cultural sensitivity)
- Motor vehicle and pedestrian safety (distracted driving, impaired driving, bicyclist and pedestrian safety)
- Violence prevention (gun violence, child abuse, domestic violence, suicide)
- Substance use (alcohol use, maternal substance use, opioid overdoses)
- Mental health (lack of providers, stigma)

The hospital intends to take action to address all of the prioritized significant health needs in the CHNA report, both through its own programs and services and with community partners. Lists and descriptions of those planned actions are included in this report.
2019 Report and 2020 Plan

This section presents strategies and program activities the hospital is delivering, funding or on which it is collaborating with others to address significant community health needs. It summarizes actions taken in FY19 and planned activities for FY20, with statements on anticipated impacts, planned collaboration, and patient financial assistance for medically necessary care. Program Digests provide detail on select programs’ goals, measurable objectives, expenses and other information.

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

The anticipated impacts of the hospital’s activities on significant health needs are summarized below, and for select program initiatives are stated in Program Digests. Overall, the hospital anticipates that actions taken to address significant health needs will: improve health knowledge, behaviors, and status; increase access to needed and beneficial care; and help create conditions that support good health. The hospital works to evaluate impact and sets priorities for its community health programs in triennial Community Health Needs Assessments.

Creating the Community Benefit Plan

Dignity Health – St. Rose Dominican is dedicated to improving community health and delivering community benefit with the engagement of its management team, board, clinicians and staff, and in collaboration with community partners.

Presented the CHNA and requested input on the implementation strategy from key partners listed below. Also hosted a full-day strategic planning meeting with key stakeholders and community health leaders. Presented at the Community Health Advisory Committee and Community board.

Dignity Health Community Health Leadership Team
Dignity Health Community Health Advisory Committee
Dignity Health Community Board
State of Nevada Office of Suicide Prevention
Nevada Department of Public Safety, Office of Traffic Safety
Southern Nevada Health District
State of Nevada Division of Public and Behavioral Health

Programs were selected based on the following:
1. Existing Dignity Health – St. Rose Dominican programs with evidence of success/impact
2. Researched effective interventions through meeting with key partners and began implementation of new programs.
3. Focused the Dignity Health Grants on the CHNA priorities to leverage the skills and capabilities of community partners.
## Health Need: Access to Care

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<th>Summary Description</th>
<th>Active FY19</th>
<th>Planned FY20</th>
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<tr>
<td>Nevada Health Link &amp; Medicaid Enrollment</td>
<td>Enrollment assistance for uninsured individuals and families</td>
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<tr>
<td>Transitional Respite for the Homeless Program – Catholic Charities</td>
<td>Help homeless men who are too frail to recover from illness or injury on the streets. Program clients will receive individualized case management, be connected to community services and receive primary or supplemental medical care.</td>
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<tr>
<td>Helping Hands Program</td>
<td>Provide home-bound seniors with transportation to doctor appointments, pharmacy, grocery and other needs</td>
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<tr>
<td>Lend a Hand of BC</td>
<td>GRANTEE - Provide home-bound seniors in Boulder City with transportation to doctor appointments</td>
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<tr>
<td>Engelstad Foundation RED Rose</td>
<td>Breast cancer screening and navigation for uninsured and/or undocumented women</td>
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<tr>
<td>Stallman Touro Clinic at The Shade Tree</td>
<td>GRANTEE – Provide primary medical and additional health care services including mental health care, substance abuse treatment, gynecological care and pediatric care to residents of the emergency shelter for homeless and abused women and children</td>
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<tr>
<td>Toe Tag Monologues</td>
<td>GRANTEE – Deliver wrap-around services including, life skills/job skills and mentorship to youth in the Juvenile Justice System, Homeless Shelters and the Clark County School District. Programs focus on behavioral health, skills development, violence prevention and access to care support.</td>
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<tr>
<td>Patient Financial Assistance</td>
<td>Educate and inform patients and the community about our hospital’s financial assistance policy</td>
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**Impact:** Gains in public or private health care coverage; increased knowledge about how to access and navigate the health care system; increased primary care visits among home-bound seniors; access to medical care for homeless men, women and children

**Collaboration:** The hospital will partner with Nevada Health Link, Catholic Charities, The Shade Tree, Lend a Hand of Boulder City, State of Nevada Department of Welfare and Social Services, Nevada WIC, NAMI, PACT Coalition, CARE Coalition, Aging and Disability Services, Fund for a Healthy Nevada, Regional Transportation Commission, Access to Healthcare Network, Women’s Health Connection, Southern Nevada Health District
# Health Need: Motor Vehicle and Pedestrian Safety

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<th>Planned FY20</th>
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<tr>
<td>Zero Fatalities</td>
<td>Program includes the following initiatives: Always Buckle Up, Don’t Drive Impaired, Focus on the Road, Stop on Red, Be Pedestrian Safe, Ride Safe</td>
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<tr>
<td>Advocacy</td>
<td>Partner with the Nevada Zero Fatalities Occupant Protection Task Force to advocate upgrading NRS 484D.495 to a Primary Seat Belt Law</td>
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<tr>
<td>AARP Drivers Safety</td>
<td>Provide driver’s safety courses for seniors throughout the valley</td>
<td>☒</td>
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<tr>
<td>Car Seat Safety Checks</td>
<td>Provide car seat safety checks throughout the valley</td>
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</table>

**Impact:** Eliminate fatalities on our roadways

**Collaboration:** Nevada Department of Public Safety/Office of Traffic Safety, Las Vegas Coalition for Zero Fatalities, AARP, Safe Kids, Nevada Department of Transportation

# Health Need: Violence Prevention

<table>
<thead>
<tr>
<th>Strategy or Program Name</th>
<th>Summary Description</th>
<th>Active FY19</th>
<th>Planned FY20</th>
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<tbody>
<tr>
<td>Human Trafficking Response Program</td>
<td>Ensure that trafficked persons are identified in the health care setting and are assisted with victim-centered, trauma-informed care and services.</td>
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<tr>
<td>Mental Health First Aid (Adult &amp; Youth)</td>
<td>Mental Health First Aid is an 8-hour course that gives people the skills to help someone who is developing a mental health problem or experiencing a mental health crisis.</td>
<td>☐</td>
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</tr>
<tr>
<td>SafeTALK Suicide Prevention</td>
<td>A half-day training program that teaches participants to recognize and engage persons who might be having thoughts of suicide and to connect them with community resources trained in suicide intervention. SafeTALK stresses safety while challenging taboos that inhibit open talk about suicide.</td>
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<tr>
<td>Parent Gun Safety Class</td>
<td>Educate parents on gun safety through prenatal classes and ongoing education</td>
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</tr>
<tr>
<td>Senior Peer Counseling</td>
<td>Provide confidential, personal and supportive counseling to people facing the challenges and concerns of growing older, such as: loss and bereavement, retirement, health concerns, relationships, normal aging issues and loneliness.</td>
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<td>☒</td>
</tr>
<tr>
<td>Rape Crisis Center</td>
<td>GRANTEE – Provide prevention education programs to empower participants to change social norms and community conversations around violence and to access resources when they are needed, eventually leading to a reduction of interpersonal violence.</td>
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</tr>
<tr>
<td>Prevent Child Abuse Nevada</td>
<td>GRANTEE – Provide training for professionals, parents and youth to strengthen families and protect children.</td>
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</tr>
<tr>
<td>GRANTEE</td>
<td>Summary Description</td>
<td>Active FY19</td>
<td>Planned FY20</td>
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</tr>
<tr>
<td>Toe Tag Monologues</td>
<td>GRANTEE – Targeting youth in the Juvenile Justice System, Homeless Shelters and the Clark County School District, Toe Tag Monologues delivers wrap-around services including, life skills/Job skills and mentorship. Programs focus on behavioral health, skills development, violence prevention and access to care support.</td>
<td>☐</td>
<td>☒</td>
</tr>
<tr>
<td>The Shade Tree</td>
<td>GRANTEE – Provide primary medical and additional health care services including mental health care, substance abuse treatment, gynecological care and pediatric care to residents of the emergency shelter for homeless and abused women and children</td>
<td>☒</td>
<td>☒</td>
</tr>
<tr>
<td>St. Jude’s Ranch for Children</td>
<td>GRANTEE – Provide therapeutic foster care including clinical therapy, public school attendance and learning new life skills for children who have been victimized by child abuse and neglect.</td>
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</tbody>
</table>

**Impact:** Prevent suicide, rape, domestic violence, child abuse and human trafficking. Provide resources, support and care for victims of rape, domestic violence, child abuse and human trafficking.

**Collaboration:** Nevada Coalition for Suicide Prevention, PACT Coalition, State of Nevada Office of Suicide Prevention, Senior Peer Counseling, Human Trafficking Task Force, Senior Peer Counseling, CARE Coalition, Southern Nevada Harm Reduction Alliance

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### Health Need: Substance Use

<table>
<thead>
<tr>
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<th>Active FY19</th>
<th>Planned FY20</th>
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</thead>
<tbody>
<tr>
<td>EMPOWERED</td>
<td>(Empowering Mothers for Positive Outcomes with Education, Recovery, and Early Development) provides community resources, support services, education, and connections to recovery and treatment services for women with substance use disorders during pregnancy and after giving birth.</td>
<td>☒</td>
<td>☒</td>
</tr>
<tr>
<td>Mental Health First Aid (Adult &amp; Youth)</td>
<td>Mental Health First Aid is an 8-hour course that gives people the skills to help someone who is developing a mental health problem or experiencing a mental health crisis.</td>
<td>☐</td>
<td>☒</td>
</tr>
<tr>
<td>AA &amp; NA</td>
<td>Provide 9 AA and/or NA support groups at the hospitals and centers. Provide space, promotion and support.</td>
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</tr>
<tr>
<td>Toe Tag Monologues</td>
<td>GRANTEE – Deliver wrap-around services including, life skills/Job skills and mentorship to youth in the Juvenile Justice System, Homeless Shelters and the Clark County School District. Programs focus on behavioral health, skills development, violence prevention and access to care support.</td>
<td>☐</td>
<td>☒</td>
</tr>
<tr>
<td>Foundation for Recovery</td>
<td>GRANTEE – Dispatch certified Recovery Coaches to local ERs to connect individuals impacted by Substance Use Disorder to peer recovery services, provide them with linkages to community resources, including overdose prevention, education and harm reduction.</td>
<td>☒</td>
<td>☒</td>
</tr>
</tbody>
</table>

**Impact:** Reduce opioid overdoses, provide support for individuals in substance use recovery, educate community about addiction, and provide connection to substance use and treatment during pregnancy and after giving birth.

**Collaboration:** PACT Coalition, NAMI, Alcoholics Anonymous, Narcotics Anonymous, Southern Nevada Health District, State of Nevada
# Health Need: Mental Health

<table>
<thead>
<tr>
<th>Strategy or Program Name</th>
<th>Summary Description</th>
<th>Active FY19</th>
<th>Planned FY20</th>
</tr>
</thead>
<tbody>
<tr>
<td>Senior Peer Counseling</td>
<td>Provide confidential, personal and supportive counseling to people facing the challenges and concerns of growing older, such as: loss and bereavement, retirement, health concerns, relationships, normal aging issues and loneliness.</td>
<td>☒</td>
<td>☒</td>
</tr>
<tr>
<td>Mental Health First Aid (Adult &amp; Youth)</td>
<td>Mental Health First Aid is an 8-hour course that gives people the skills to help someone who is developing a mental health problem or experiencing a mental health crisis.</td>
<td>☐</td>
<td>☒</td>
</tr>
<tr>
<td>Let’s Talk Support Groups</td>
<td>Provide 5 Let's Talk groups for new families across the valley. This group serves and reflects diverse communities including fathers, mothers and gender non-confirming parents; parents who are facing the challenges of new parenting including perinatal emotional complications, addiction, incarceration, racism and other oppressions; and parents from varied traditions and cultures.</td>
<td>☒</td>
<td>☒</td>
</tr>
<tr>
<td>Perinatal Mood and Anxiety Disorder (PMAD)</td>
<td>Provides community trainings, education, support groups, counseling and care navigation for all families with perinatal mood and anxiety disorders.</td>
<td>☒</td>
<td>☒</td>
</tr>
<tr>
<td>Toe Tag Monologues</td>
<td>GRANTEE – Deliver wrap-around services including, life skills/Job skills and mentorship to youth in the Juvenile Justice System, Homeless Shelters and the Clark County School District. Programs focus on behavioral health, skills development, violence prevention and access to care support.</td>
<td>☐</td>
<td>☒</td>
</tr>
</tbody>
</table>

**Impact:** Increase access to mental health services through navigation, support groups, peer counseling and counseling services. Reduce stigma through education, awareness and outreach

**Collaboration:** PACT Coalition, Nevada Coalition for Suicide Prevention, NAMI, State of Nevada Office of Suicide Prevention
Community Grants Program

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

In FY19, the hospital awarded the grants below totaling $359,005. Some projects also may be described elsewhere in this report.

<table>
<thead>
<tr>
<th>Grant Recipient</th>
<th>Project Name</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Catholic Charities of Southern Nevada</td>
<td>Mobilizing Care for the Medically Underserved</td>
<td>$50,000</td>
</tr>
<tr>
<td>Foundation for Recovery</td>
<td>Emergency Department Recovery Coaching</td>
<td>$50,000</td>
</tr>
<tr>
<td>Helping Hands of Vegas Valley</td>
<td>Senior Coordinated Transportation Program</td>
<td>$20,000</td>
</tr>
<tr>
<td>Las Vegas CHIPS</td>
<td>Second Responders 911 Referral Program</td>
<td>$60,000</td>
</tr>
<tr>
<td>Lend a Hand of Boulder City</td>
<td>Senior Transportation and Respite Care</td>
<td>$20,000</td>
</tr>
<tr>
<td>Nevada Health Centers</td>
<td>Nevada Children’s Health Project</td>
<td>$59,005</td>
</tr>
<tr>
<td>The Shade Tree</td>
<td>Stallman Touro Clinic</td>
<td>$80,000</td>
</tr>
<tr>
<td>U.S. Veterans Initiative</td>
<td>Healthy Living For Veterans</td>
<td>$20,000</td>
</tr>
</tbody>
</table>
Program Digests

The following pages include Program Digests describing key programs and initiatives that address one or more significant health needs. The digests include program descriptions and intervention actions, statements of which health needs are being addressed, any planned collaboration, and program goals and measurable objectives.

### Medicaid & Nevada Health Link Enrollment

<table>
<thead>
<tr>
<th>Significant Health Needs Addressed</th>
<th>✓ Access to Care</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Motor Vehicle and Pedestrian Safety</td>
</tr>
<tr>
<td></td>
<td>Violence Prevention</td>
</tr>
<tr>
<td></td>
<td>Substance Use</td>
</tr>
<tr>
<td></td>
<td>Mental Health</td>
</tr>
</tbody>
</table>

**Program Description**

Dignity Health St. Rose Dominican has six trained and licensed Exchange Enrollment Facilitators (EEF) who will assist the uninsured with enrollment in Medicaid, CHIP or a qualified Health Plan.

**CB Category**

A3-d. Health Care Support Services – Enrollment Assistance

### FY 2019 Report

<table>
<thead>
<tr>
<th>Program Goal / Anticipated Impact</th>
<th>Reduce the number of uninsured adults and children in southern Nevada</th>
</tr>
</thead>
<tbody>
<tr>
<td>Measurable Objective(s) with Indicator(s)</td>
<td>• Assist 250 individuals in enrolling in a qualified health plan through Nevada Health Link. Assist 200 clients in enrolling in Medicaid</td>
</tr>
<tr>
<td></td>
<td>• Attend 120 outreach events</td>
</tr>
<tr>
<td></td>
<td>• Provide resources and information to our existing WIC, RED Rose, WomensCare, Neighborhood Hospital and St. Rose uninsured clients.</td>
</tr>
<tr>
<td></td>
<td>• Collaborate with 15 partners to increase outreach</td>
</tr>
<tr>
<td></td>
<td>• Recertify 5 EEFs</td>
</tr>
</tbody>
</table>

| Intervention Actions for Achieving Goal | • Achieve NHL grant outcomes to secure ongoing funding |
|                                        | • Train staff, maintain licenses |
|                                        | • Identify and reach at-risk populations who need healthcare |
|                                        | • Marketing in REACH and through all programs Attend community events |
|                                        | • Attend community events |
|                                        | • Staff one EEF at all 6 of our Community Health Centers |

**Collaboration**

Nevada Health Link, State of Nevada Department of Welfare and Social Services, Cardenas Markets, United Labor Agency of Nevada, Nevada JobConnect, Nevada WIC

**Performance / Impact**

- Enrolled 843 Individuals
- 435 Qualified Health Plan
- 390 Medicaid
- Attended 212 Events

Promoted NHL in the REACH Magazine, UPDATE and throughout the community

**Hospital Contribution**

Total expense $461,384 less grant funding of $212,560. Hospital provided space at 5 locations, fringe, overhead, computers and tech support, marketing and mileage.

### FY 2020 Plan

<table>
<thead>
<tr>
<th>Program Goal / Anticipated Impact</th>
<th>Reduce the number of uninsured adults and children in southern Nevada</th>
</tr>
</thead>
</table>
## Helping Hands

### Significant Health Needs Addressed
- Access to Care
- Motor Vehicle and Pedestrian Safety
- Violence Prevention
- Substance Use
- Mental Health

### Program Description
Helping Hands of Henderson assists homebound individuals 60 years of age and older who live in Henderson with transportation to medical/dental/optical appointments, prescription drop off/pickup, grocery shopping, food pantry, congregate meals and social activities. Provides supplemental groceries to low-income/homebound seniors.

### CB Category
A3. Health Care Support Services

### FY 2019 Report

#### Program Goal / Anticipated Impact
Assist in meeting the needs of seniors living in Henderson so they can remain independent in their homes thereby postponing the costly expense of assisted living. The program provides supplemental groceries to low-income/homebound seniors, access to physicians, food, pharmacy and other needed services to allow the senior to maintain an independent and healthy life.

#### Measurable Objective(s) with Indicator(s)
- 525 Total unduplicated clients
- 9000 Total round trip rides
- 2,500 Referrals and 500 reassurance calls
- Recruit 5-7 new volunteers
- Food Bank Participants
- 100% of clients were able to access food as a result of Helping Hands services
- 95% of clients will report they were able to maintain medical appointments
- 100% of clients report an increase in feelings of independence

#### Intervention Actions for Achieving Goal
Distribute health information and supportive health service referrals, bi-annual surveys from clients, the provision of transportation services that the program provides and supplemental food deliveries.

#### Collaboration
Aging and Disability Services Division (ADSD), Regional Transportation Commission (RTC), Fund for a Healthy Nevada, Three Square Food Bank, MGM Grand Resorts Foundation, Caesars Entertainment, Wells Fargo, Lend a Hand of Boulder City, Helping Hands of Vegas Valley, City of Henderson, HopeLink.

#### Performance / Impact
- Enrolled/Reassessed 507 clients
- Provided 8912 round-trip rides
| Recruit 11 new volunteers and maintain an active volunteer base of 51  |
| Reduced waiting list to 123  |
| Provide 3,244 community referrals and 507 reassurance calls  |
| Enrolled 40 Golden Grocery Foodbank clients  |
| Provided 130 grocery deliveries  |

Hospital’s Contribution / Program Expense:  
Total expense $806,118 less grant funding of $442,379. Hospital provided required match for grant funding, overhead, leadership and some fringe.

**FY 2020 Plan**

**Program Goal / Anticipated Impact**
Assist in meeting the needs of seniors living in Henderson so they can remain independent in their homes thereby postponing the costly expense of assisted living. The program provides access to physicians, food, pharmacy and other needed services to allow the senior to maintain an independent and healthy life.

**Measurable Objective(s) with Indicator(s)**
- Enroll/Reassess 525 unduplicated clients
- 8,950 Total round trip rides
- 3250 Referrals
- 520 Reassurance Calls
- Recruit 9 volunteers and maintain 55 active volunteers
- Provide 450 Golden deliveries
- 98% of clients will have access food as a result of Helping Hands services
- 95% of clients will report they were able to maintain medical appointments because of Helping Hands
- 90% of clients will report an increase in feelings of independence since enrolling in Helping Hands.

**Intervention Actions for Achieving Goal**
- Increase grant funding to purchase new vehicles
- Increase grant funding to hire additional drivers
- Attend Community Outreach Events

**Planned Collaboration**
Aging and Disability Services Division (ADSD), Regional Transportation Commission (RTC), Fund for a Healthy Nevada, Three Square Food Bank, MGM Grand Resorts Foundation, Caesars Entertainment, Wells Fargo, Lend a Hand of Boulder City, Helping Hands of Vegas Valley, City of Henderson, HopeLink.

**Engelstad Foundation RED Rose**

**Significant Health Needs Addressed**
- Access to Care
- Motor Vehicle and Pedestrian Safety
- Violence Prevention
- Substance Use
- Mental Health

**Program Description**
The RED Rose program provides free mammography, ultrasound, biopsy and surgical consultations for individuals 49 years and younger who are uninsured or underinsured. The bi-lingual Breast Health Navigator coordinates care from screening to treatment. Support services such as payment of monthly utilities, transportation costs, groceries, rent and other incidentals while fighting breast cancer. In addition all Navigators are trained Nevada Health Link Enrollment Facilitators and can enroll clients into the appropriate plan.
<table>
<thead>
<tr>
<th>CB Category</th>
<th>A2. Community-based clinical services</th>
</tr>
</thead>
</table>

### FY 2019 Report

<table>
<thead>
<tr>
<th>Program Goal / Anticipated Impact</th>
<th>Increase breast cancer screening rates to diagnose breast cancer as early as possible for uninsured and/or undocumented clients.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Measurable Objective(s) with Indicator(s)</td>
<td>Total services provided leading to cancer diagnosis, financial assistance and Medicaid/Health Plan enrollment assistance.</td>
</tr>
</tbody>
</table>
| Intervention Actions for Achieving Goal | • Funds were received through the Engelstad Endowment, grants and fundraising events throughout the year.  
• Increased marketing through REACH Magazine and attended community health fairs.  
• Moved RED Rose to the North Las Vegas Neighborhood Hospital Wellness Center to be geographically closer to clients |
| Performance / Impact |  
- Eligibility Screenings: 232  
- Clinical Breast Exams: 70  
- Diagnostic Mammograms: 134  
- Screening Mammograms: 19  
- Ultrasounds: 206  
- Biopsies: 39  
- Surgical Consultations: 26  
- Cancer Diagnosis: 6 and Surgical Treatment: 4  
- Temporary Financial Assistance: 30 Clients $72,259 TOTAL; Rent $15,819; Electricity $6,628; Gas $1,773; Water $389; Groceries $35,450; Transportation $12,200.  
The RED Rose program continues to see 96% Spanish-speaking clients, and 100% of clients are uninsured |
| Hospital's Contribution / Program Expense | The hospital contribution to this program totaled $625,987 in FY2019 less $207,356 in grants. St. Rose provided space, staff, fringe, clinical services, IT, overhead and leadership. |

### FY 2020 Plan

<table>
<thead>
<tr>
<th>Program Goal / Anticipated Impact</th>
<th>Increase breast cancer screening rates to diagnose breast cancer as early as possible for uninsured and/or undocumented clients.</th>
</tr>
</thead>
</table>
| Measurable Objective(s) with Indicator(s) | 300 Eligibility Screenings  
90 Clinical Breast Exams  
175 Mammograms  
200 Ultrasounds  
40 Surgical consultations  
40 Biopsies  
Total Malignancies detected & Total Cancer diagnosis  
Total Breast Surgeries  
40 Total Temporary Financial Assistance Provided |
| Intervention Actions for Achieving Goal | • Fundraise and secure grants to provide services  
• Increase marketing through REACH magazine and media  
• Attend 100 events which reach the uninsured and undocumented  
• Collaborate with key partners to reach women in need. |
## Diabetes Lifestyle Center

| Significant Health Needs Addressed | Access to Care  
Motor Vehicle and Pedestrian Safety  
Violence Prevention  
Substance Use  
Mental Health |
|------------------------------------|

### Program Description
Provide evidence-based diabetes prevention, education and self-management programs

### CB Category
A1. Community Health Education

### FY 2019 Report

<table>
<thead>
<tr>
<th>Measurable Objective(s) with Indicator(s)</th>
<th>Expand access to evidence-based programs for people with diabetes</th>
</tr>
</thead>
</table>

**Diabetes Prevention:** promote and expand pre diabetes education to reach 300 participants. Promote and expand diabetes alert day. **CDC NDPP:** Reach preliminary status and look into Medicare billing. Offer classes to reach at least 30 participants. **ADA Program:** Increase encounters by 15%. **Stanford DSMP:** Begin offering DSMP- Stanford Plus to rural communities via telehealth. Reach 160 participants. Train and certify Community Health Workers in DSMP.

| Intervention Actions for Achieving Goal | Continue marketing to Physicians office. Offer pre diabetes screenings at health fairs. Facilitating a diabetes alert day. Having our dietitians offering services in our 4 neighborhood hospitals, Blue Diamond, Sahara, W. Flamingo and North Las Vegas. Assess program website and utilization. |
|-----------------------------------------|

### Collaboration
State of Nevada, ADA, AADE, CDC, QTAC, YMCA, Nevada Health centers, Dignity Health medical group, Nevada Diabetes Stakeholder group, Healthinsight, Cardiac Rehab, Wound Care, City of Henderson, Navi Health, Inpatient Case Managers/Dietitians, Physician groups-cardiology, kidney, internal medicine and podiatrist.

### Performance / Impact

**Diabetes Prevention:** Provided lab screening event in Nov with an emphasis on A1.c and fasting blood sugar screenings to help promote Diabetes month; heart healthy eating class –97 participants; pre diabetes lectures – 81 participants; pre diabetes screenings were done throughout the Las Vegas communities.

**CDC NDPP:** Offered a total of 2 programs with 21 participants enrolled. Engaged and Retained 80% of the participants in the year-long program. Successfully conducted 3 lifestyle coach trainings in Northern and Southern Nevada. Total trained was 42 new NDPP lifestyle coaches. Obtained Preliminary Recognition from CDC making the program eligible for Medicare billing.

**ADA Program:** 319 Individuals received 1:1 visit with RD/CDE. 335 encounters for group education which is a 78% increase. An additional 173 follow up visits were conducted. Of the participants who reported back, 80.2% reached their behavior change goals. Goals include: healthy eating, being active, taking medication, monitoring, problem solving, reducing risks, and healthy coping. There was a 1.2 point drop in A1c and 1.2 point drop in BMI in comparing pre-program to post-program results. Also, 97.7% of the participants reporting back met the program outcome of having a plan for follow up with a provider and labs at least every 6 months. There were 186 diabetes support group encounters.

**Stanford DSMP:** Reached 123 DSMP participants by providing 8 workshops in English and 2 in Spanish. Received a State grant totaling $157,765, to continue working with the QTAC on diabetes education and prevention in the State. Average self-rated health score improved from 2.71 pre-program to 3.07 post-program (5 point scale 1=poor, 5=excellent). The average self-rated confidence level for the participants managing their chronic condition has improved from 6.6 pre-program to 8.12 post- programs (scale from 1 to 10). The average days the participants exercised for at least 30 minutes has improved 2.71 pre-program to 3.83 post-program (scale from 0 to 7 days). The average scale of the participants utilizing nutrition fact labels has improved from 3.4 pre-survey to 3.66 post-survey (scale from 1 to 5). The average scale of the
participants preparing a list of questions for their doctors has improved from 2.86 pre-survey to 3.21 post-survey (scale from 1 to 5). Offered 2 DSMP training in Rural and Southern Nevada.

Hospital's Contribution
Hospital total expense $207,371 less program revenue. Hospital provided space, staff, fringe, overhead and marketing.

### FY 2020 Plan

<table>
<thead>
<tr>
<th>Program Goal / Anticipated Impact</th>
<th>Diabetes Prevention: Increase number of participants in prediabetes classes and NDPP by 10%. Become a Medicare DPP supplier to increase access of DPP to Medicare recipients. ADA Program: Continue to expand diabetes and nutrition services to the Neighborhood Wellness Centers by increasing accessibility to dietitians and diabetes educators at those locations. Increase the number of participants in the program by 10%. Stanford DSMP: Expand the Diabetes Self-Management Program by delivering 2 leader trainings - one in English and one in Spanish. Collaborate with rural organizations to host DSMP to underserved communities.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Measurable Objective(s) with Indicator(s)</td>
<td></td>
</tr>
<tr>
<td>Planned Collaboration</td>
<td>State of Nevada, ADA, AADE, CDC, QTAC, YMCA, Nevada Health centers, Dignity Health medical group, Nevada Diabetes Stakeholder group, Healthinsight, Cardiac Rehab, Wound Care, City of Henderson, Curaspan, Inpatient Case Managers/Dietitians, Physician groups-cardiology, kidney, internal medicine and podiatrist.</td>
</tr>
</tbody>
</table>

### Chronic Disease Management

<table>
<thead>
<tr>
<th>Significant Health Needs Addressed</th>
<th>✓ Access to Care</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>☑ Motor Vehicle and Pedestrian Safety</td>
</tr>
<tr>
<td></td>
<td>☑ Violence Prevention</td>
</tr>
<tr>
<td></td>
<td>☑ Substance Use</td>
</tr>
<tr>
<td></td>
<td>☑ Mental Health</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Program Description</th>
<th>Provide access to evidence-based programs for prevention, education and self-management. Programs include:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>● Congestive Heart Active Management Program (CHAMP)</td>
</tr>
<tr>
<td></td>
<td>● Chronic Disease Self-Management - Cancer Thriving &amp; Surviving, Tomando Control de Su Salude, Positive Self-Management for HIV, Chronic Pain Self-Management, Diabetes Self-Management (English &amp; Spanish) also reported in Diabetes.</td>
</tr>
<tr>
<td></td>
<td>● Innovative Heart Health</td>
</tr>
<tr>
<td></td>
<td>● Powerful Tools for Caregivers</td>
</tr>
<tr>
<td></td>
<td>● Stepping On Fall Prevention &amp; Tai Ji Quan: Movement for Better Balance (TJQMBB)</td>
</tr>
<tr>
<td></td>
<td>● Enhance Fitness</td>
</tr>
</tbody>
</table>

| CB Category | A1. Community Health Education |

### FY 2019 Report

<p>| Program Goal / Anticipated Impact | Expand access to evidence-based programs for people with chronic disease and other risk factors |</p>
<table>
<thead>
<tr>
<th>Measurable Objective(s) with Indicator(s)</th>
<th>Intervention Actions for Achieving Goal</th>
</tr>
</thead>
</table>
| **CHAMP**: Total Patients Enrolled, ACEI & Beta Blocker and 30 day readmission rate | • Marketing through REACH, community partners and Wellness Centers  
• Referrals from physicians, case management  
• Offer Quality Circle quarterly meetings as a strategy to retain, engage, and strengthen the skills of lay leaders  
Continue working with community partners to host workshops, secure additional grant funding, and support partners in expanding and developing an infrastructure to offer the CDSME programs statewide.  
• Partner with the Nevada Goes Falls Free Coalition, build capacity of fall prevention system |
| **CDSME**: Total participants, Completion %, outcome measures | **Collaboration** |
| **INNOVATIVE HEART HEALTH**: Total clients enrolled, total classes, Farmer’s Market | Dignity Health Heart & Vascular, UNR Sanford Center, Touro University, College of Southern Nevada CHW Program, State of Nevada Department of Public and Behavioral Health, Aging and Disabilities Service Division, Ryan White Part A Program, Cleveland Clinic Lou Ruvo Center for Brain Health, OLLIE, City of Henderson Parks & Recreation, Nye Communities Coalition, William N. Pennington Life Center, University of Reno, Access to Health Care Network, Community Counseling Center, Aid Heath Foundation, Southern Nevada Health District, Aids for Aids of Nevada, The Center- LGBTQ |
| **FALL PREVENTION**: Provide 4 classes reaching 80 people | **Performance / Impact** |
| **ENHANCE FITNESS**: Provide classes at all centers and Improve fitness outcomes | **CHAMP** 683 Patients Enrolled, 94.4% on ACEI or ARB, 96% on Beta Blocker, Zero 30 day readmissions  
**CDSME**  
- Total Participants: 449 (378 in English) (71 in Spanish)  
- Total Classes: 36 workshops (31 in English) (5 in Spanish)  
- Provided 8 CDSME leader trainings: 4 CDSMP, 3 DSMP, 1 CPSMP, 1 Tomando Control de Su Salud, and 1 PSMP  
- Total Leaders: 163, Certified in: 93 English CDSMP and DSMP, 24 Spanish CDSMP, 25 DSMP, 16 PSMP, and 5 CTS  
- Average self-rated health score improved from 2.8 pre-program to 3.2 post-program  
- The average self-rated confidence level for the participants managing their chronic condition improved from 6.9 pre-program to 8.0 post-program (scale from 1 to 10). The average days the participants exercised for at least 30 minutes has improved 2.6 pre-program to 3.5 post-program (scale from 0 to 7 days). The average scale of the participants utilizing nutrition fact labels has improved from 3.1 pre-survey to 3.5 post-survey (scale from 1 to 5). The average scale of the participants preparing a list of questions for their doctors has improved from 2.9 pre-survey to 3.3 post-survey (scale from 1 to 5).  
**INNOVATIVE HEART HEALTH**  
- Delivered 16 Heart Healthy classes with 29 participants enrolled.  
- 45% of participants had an overall reduction in BMI.  
- The average self-rated confidence level for the participants managing their cardiovascular disease improved from 2.9 pre-program to 4.0 post-program.  
- Systolic blood pressure improved by 7.3 points and diastolic blood pressure improved by 3.8 points.  
- Hosted total of 6 PopUp Farmer’s Stands.  
- Delivered Heart Healthy Program to 15 participants via Telehealth in Nye County.  
- Certified 17 Community Health Workers in the Healthy Heart Training.  
**CAREGIVERS**  
- Delivered 6 PTC workshops with 92 enrolled and 76 program completers.  
**FALL PREVENTION**  
- Trained 16 facilitators in a two-day TJQMBB  
- Trained 19 facilitators in a three-day Stepping On facilitator training  
- Completed 9 TJQMBB workshops generating 4,357 encounters  
- Completed 7 Stepping On classes with 72 completers |
**ENHANCE FITNESS:**
- Provided 845 Classes at 4 centers generating 12,584 fitness encounters
- Improvement in Fitness Scores: 77% Chair Stand, 64% Arm Curl, 63% Up and Go

<table>
<thead>
<tr>
<th>Hospital’s Contribution / Program Expense</th>
<th>Total hospital expense $709,432 less grant funding of $595,958. Hospital provided staff, classroom and consult space, overhead and fringe, IT, marketing and promotion.</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>FY 2020 Plan</strong></td>
<td></td>
</tr>
<tr>
<td><strong>Program Goal / Anticipated Impact</strong></td>
<td>Expand access to evidence-based programs for people with chronic disease and other risk factors</td>
</tr>
</tbody>
</table>
| **Measurable Objective(s) with Indicator(s)** | **CHAMP:** Patients Enrolled 650, ACEI & Beta Blocker rate and 30 day readmission rate  
**CDSME:** 450 Total participants, Completion %, outcome measures  
- Deliver 2 CDSME leader trainings, 1 in English and 1 in Spanish. Certify 20 leaders in CDSME.  
- Conduct community outreach utilizing peer navigators to recruit 50 Ryan White Part A clients for PSMP.  
**INNOVATIVE HEART HEALTH:**  
- Enroll 30 patients in the Healthy Heart Program.  
- Identify and provide 30 heart healthy kits.  
**CAREGIVERS:**  
- Deliver 2 PTC leader trainings and certify 20 PTC leaders.  
- Deliver 4 PTC with 80 program completers.  
**FALL PREVENTION:**  
- Provide 7 Stepping On Classes with 70 completers  
- Provide 5 TJQMBB with 50 completers  
- Conduct one 3-day Stepping On Facilitator Training  
- Conduct fall risk screenings quarterly  
**ENHANCE FITNESS:**  
- Provide 900 classes generating 14,000 fitness encounters  
- Increase fitness measures by 5% |
| **Intervention Actions for Achieving Goal** | **CDSME:** Continue working with community partners to host CDSME workshops, secure additional grant funding, and support partners in expanding and developing an infrastructure to offer CDSME programs statewide  
**INNOVATIVE HEART HEALTH:** Continue implementation of MNT protocol and nutrition education services to patients with hypertension and/or high cholesterol and track evaluation indicators. Work with local clinics and community coalitions to develop workflow to receive referrals for the patients with hypertension and/or high cholesterol.  
**CAREGIVERS:** Recruit potential PTC leaders for the training. Secure additional funding to expand program to other underserved areas.  
**FALL PREVENTION:** Secure grant funding. Expand the Nevada Goes Falls Free Coalition, increase fall risk screenings  
**ENHANCE FITNESS:** Expand program to all 6 centers. Host an instructor training, |
| **Planned Collaboration** | College of Southern Nevada CHW Program, State of Nevada Department of Public and Behavioral Health, Aging and Disabilities Service Division, Ryan White Part A Program, Cleveland Clinic Lou Ruvo Center for Brain Health, OLLIE, City of Henderson Parks & Recreation, Nye Communities Coalition, William N. Pennington Life Center, University of Reno, Access to Health Care Network, Community Counseling Center, Aid Heath Foundation, Southern Nevada Health District, Aids for Aids of Nevada, The Center- LGBTQ, UNR Sanford Center for Aging, Touro University, Dignity Health Heart & Vascular |
# Zero Fatalities

## Significant Health Needs Addressed
- Access to Care
- Motor Vehicle and Pedestrian Safety
- Violence Prevention
- Substance Use
- Mental Health

## Program Description
Zero fatalities is all about eliminating fatalities on our roadways. We are aiming for zero fatalities because everyone matters. Dignity Health supports this goal by partnering to address impaired driving, seat belt usage and pedestrian safety through legislation, community outreach, collaboration and marketing.

## CB Category
A1. Community Health Education

### FY 2019 Report

#### Program Goal / Anticipated Impact
1. Zero Fatalities by 2030
2. Zero Teen Fatalities by 2021
3. Maintain Zero Infant/Child fatalities for ages one day - 2 years

#### Measurable Objective(s) with Indicator(s)
- Reduction in fatalities
- Total education encounters
- Awareness campaign reach
- Advocacy Efforts
- Total AARP Drivers Safety Classes/Attendees
- Total Car Seat Safety Checks

#### Intervention Actions
Began planning partnerships and programs

#### Collaboration
Nevada Department of Public Safety Office of Traffic Safety, AARP, Safe Kids, Nevada Department of Transportation

#### Performance / Impact
- 126 Total Car Seat Safety Installations
- 131 Total Participants in AARP Driver’s Safety Program

#### Hospital Contribution
$5130 for car seat safety checks, classroom space, promotion and marketing of services

### FY 2020 Plan

#### Program Goal / Anticipated Impact
1. Zero Fatalities by 2030
2. Zero Teen Fatalities by 2021
3. Maintain Zero Infant/Child fatalities for ages one day - 2 years

#### Measurable Objective(s) with Indicator(s)
- Reduction in fatalities
- Total education encounters
- Awareness campaign reach
- Advocacy Efforts
- 150 Total AARP Drivers Safety Classes/Attendees
- 150 Total Car Seat Safety Checks

#### Intervention Actions for Achieving Goal
1. Partner with NDPS to provide an education program that promotes safety for all users of Nevada roads, including pedestrians and bicyclists.
2. Partner with AARP to provide drivers safety courses for seniors throughout the valley
3. Participate in the Nevada Zero Fatalities Impaired Driving Prevention Task Force
4. Partner with the Nevada Zero Fatalities Occupant Protection Task Force to advocate upgrading NRS 484D.495 to a Primary Seat Belt Law
5. Provide Car Seat Safety Checks throughout the valley

#### Planned Collaboration
Nevada Department of Public Safety Office of Traffic Safety, AARP, Safe Kids, Nevada Department of Transportation
## SafeTALK Suicide Prevention

| Significant Health Needs Addressed | ❑ Access to Care
| ❑ Motor Vehicle and Pedestrian Safety
| ✓ Violence Prevention
| ❑ Substance Use
| ❑ Mental Health |
| --- | --- |
| **Program Description** | SafeTALK is a half-day training program that teaches participants to recognize and engage persons who might be having thoughts of suicide and to connect them with community resources trained in suicide intervention. SafeTALK stresses safety while challenging taboos that inhibit open talk about suicide. |
| **CB Category** | A1. Community Health Education |

### FY 2019 Report

#### Program Goal / Anticipated Impact
Provide training on suicide prevention to community groups that have a role in the prevention of suicide and related behaviors.

#### Measurable Objective(s) with Indicator(s)
- After training, participants in the safeTALK program should be able to:
  - 1. Challenge attitudes that inhibit open talk about suicide.
  - 2. Recognize a person who might be having thoughts of suicide.
  - 3. Engage them in direct and open talk about suicide.
  - 4. Listen to the person’s feelings about suicide to show that they are taken seriously.
  - 5. Move quickly to connect them with someone trained in suicide intervention.

#### Intervention Actions for Achieving Goal
- Begin planning trainings and partnerships for FY20

#### Collaboration
- State of Nevada Office of Suicide Prevention, Southern Nevada Health District/Violence and Injury Prevention, Nevada Coalition for Suicide Prevention

#### Performance / Impact
- Scheduled SafeTalk T4T for November 13 & 14
- Began training all Community Health staff in Safe Talk
- Hospital’s Contribution
  - None in FY19

### FY 2020 Plan

#### Program Goal / Anticipated Impact
Provide training on suicide prevention to community groups that have a role in the prevention of suicide and related behaviors.

#### Measurable Objective(s) with Indicator(s)
- After training, participants in the safeTALK program should be able to:
  - 1. Challenge attitudes that inhibit open talk about suicide.
  - 2. Recognize a person who might be having thoughts of suicide.
  - 3. Engage them in direct and open talk about suicide.
  - 4. Listen to the person’s feelings about suicide to show that they are taken seriously.
  - 5. Move quickly to connect them with someone trained in suicide intervention.

#### Intervention Actions for Achieving Goal
- Train staff and/or hire 4 safeTALK instructors to provide program
- Host safeTALK at all 6 centers across the valley
- Reach 50 participants per year
- Train all Community Health Staff and offer training to hospital staff

#### Planned Collaboration
- State of Nevada Office of Suicide Prevention, Southern Nevada Health District/Violence and Injury Prevention, Nevada Coalition for Suicide Prevention
## EMPOWERED – Empowering Mothers for Positive Outcomes with Education, Recovery, and Early Development

### Significant Health Needs Addressed

| Access to Care | ✓ |
| Motor Vehicle and Pedestrian Safety | ☐ |
| Violence Prevention | ☐ |
| Substance Use | ✓ |
| Mental Health | ☐ |

### Program Description

EMPOWERED (Empowering Mothers for Positive Outcomes with Education, Recovery, and Early Development) addresses the increasing number of women of childbearing age in Southern Nevada who are either challenged with opioid dependence or maintained on opioid prescriptions. For both groups, the goal is for a healthy pregnancy, delivery, and postpartum experience. EMPOWERED provides community resources, education, and connections to treatment and/or recovery services. In addition, we provide:

- Education on Neonatal Abstinence Syndrome (NAS)
- Developmental assessments
- Postpartum support for 1 year after delivery
- Breastfeeding support
- Parenting classes and education on the hospital stay
- Infant CPR
- Support groups

### CB Category

A1. Community-based clinical services

### FY 2019 Report

#### Program Goal / Anticipated Impact

Increase participation and engagement by enrolled participants by 10% each year. This program will do so by continued community outreach, providing education, and supporting our community partners.

#### Measurable Objective(s) with Indicator(s)

- Total Referrals
- Total Mothers enrolled
- Total Education encounters
- Total Developmental Assessments

#### Intervention Actions for Achieving Goal

- Monthly community outreach
- Facilitate educational and informational sessions in various community settings
- Provide education and support through prenatal consultations
- Conduct developmental screenings on infants from birth to 1 year to assess developmental progress from opioid exposure during pregnancy
- Provide client access to community resources

#### Collaboration

Southern Nevada Health District, State of Nevada, local Medication Assisted Treatment Providers, and OB/GYNs.

#### Performance / Impact

The EMPOWERED Program supported and served 61 women by proving client referrals to prenatal providers, substance abuse treatment, pain management assistance, mental health services, and social services such as WIC and Insurance. Within these services provided, the EMPOWERED Program increased their community outreach and was able to provide awareness and education on NAS to the community at large; conducting multiple outreach activities with various community partners.

#### Hospital's Contribution / Program Expense

Program expense $301,849.70 included staff, space and overhead

### FY 2020 Plan
<table>
<thead>
<tr>
<th>Program Goal / Anticipated Impact</th>
<th>Increase participation and engagement by enrolled participants by 10% each year. This program will do so by continued community outreach, providing education, and supporting our community partners.</th>
</tr>
</thead>
</table>
| Measurable Objective(s) with Indicator(s) | Total Referrals  
Total Mothers enrolled  
Total Education encounters  
Total Developmental Assessments |
| Intervention Actions for Achieving Goal | • Monthly community outreach  
• Facilitate educational and informational sessions in various community settings  
• Provide education and support through prenatal consultations  
• Conduct developmental screenings on infants from birth to 1 year to assess developmental progress from opioid exposure during pregnancy  
• Provide client access to community resources |
| Planned Collaboration | Southern Nevada Health District, State of Nevada, local Medication Assisted Treatment Providers, and OB/GYNs. |

### Mental Health First Aid

#### Significant Health Needs Addressed
- Access to Care  
- Motor Vehicle and Pedestrian Safety  
- Violence Prevention  
- Substance Use  
- Mental Health

#### Program Description
Mental Health First Aid is an 8-hour course that gives people the skills to help someone who is developing a mental health problem or experiencing a mental health crisis. The evidence behind the program demonstrates that it does build mental health literacy, helping the public identify, understand and respond to signs of mental illness. The vision of this program is to become as common as CPR and First Aid training. This means having regular courses offered in every community across the U.S. Since St Rose has 6 centers across the valley, we hope to expand this program in those communities.

#### CB Category
A1-d. Community Healthy Education – Support Groups

### FY 2019 Report

#### Program Goal / Anticipated Impact
Studies show that this program:  
• Saves lives  
• Improves the mental health of the individual administering care and the one receiving it  
• Expands knowledge of mental illnesses and their treatments  
• Reduces overall social distance toward individuals with mental illnesses by improving mental health literacy.  
People who are trained in the program:  
• Have greater confidence in providing help to others  
• Greater likelihood of advising people to seek professional help  
• Improved concordance with health professionals about treatments  
• Decreased stigmatizing attitudes

#### Measurable Objective(s)
Begin planning for program implementation in October 2019

#### Intervention Actions
Partnered with the Office of Suicide Prevention. Scheduled a staff member to become certified to teach Mental Health First Aid
<table>
<thead>
<tr>
<th>Collaboration</th>
<th>Nevada Coalition for Suicide Prevention, PACT Coalition, NAMI, State of Nevada Office of Suicide Prevention, Senior Peer Counseling, CARE Coalition</th>
</tr>
</thead>
<tbody>
<tr>
<td>Performance / Impact</td>
<td>Program launched October 2019</td>
</tr>
<tr>
<td>Hospital's Contribution</td>
<td>Program launched October 2019</td>
</tr>
</tbody>
</table>

**FY 2020 Plan**

<table>
<thead>
<tr>
<th>Program Goal Anticipated Impact</th>
<th>Studies show that this program:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>• Saves lives</td>
</tr>
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<td></td>
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</tr>
<tr>
<td></td>
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</tr>
<tr>
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<td>• Have greater confidence in providing help to others</td>
</tr>
<tr>
<td></td>
<td>• Greater likelihood of advising people to seek professional help</td>
</tr>
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<td>• Improved concordance with health professionals about treatments</td>
</tr>
<tr>
<td></td>
<td>• Decreased stigmatizing attitudes</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Measurable Objective(s) with Indicator(s)</th>
<th>1. Train and/or hire 2-4 Mental Health First Aid or Youth Mental Health First Aid Instructors</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>2. Provide 10 Mental Health First Aid and 4 Youth Mental Health First Aid classes per year across the valley at our 6 centers</td>
</tr>
<tr>
<td></td>
<td>3. Teach 150 people with this program</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Intervention Actions for Achieving Goal</th>
<th>1. Advertise program in REACH magazine quarterly</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>2. Offer training to staff and volunteers of Dignity Health – St. Rose Dominican</td>
</tr>
<tr>
<td></td>
<td>3. Attend Nevada Coalition for Suicide Prevention meetings, PACT Coalition meetings, and NAMI meetings</td>
</tr>
<tr>
<td></td>
<td>4. Promote program at special events, health fairs and in the community.</td>
</tr>
<tr>
<td></td>
<td>5. Partner with key groups to cross-promote program</td>
</tr>
</tbody>
</table>

| Planned Collaboration | Nevada Coalition for Suicide Prevention, PACT Coalition, NAMI, State of Nevada Office of Suicide Prevention, Senior Peer Counseling, CARE Coalition, Southern Nevada Harm Reduction Alliance, NV CHW Association, University of Nevada Cooperative Extension |

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**Perinatal Mood and Anxiety Disorders Program**

**Significant Health Needs Addressed**

- Access to Care
- Motor Vehicle and Pedestrian Safety
- Violence Prevention
- Substance Use
- Mental Health

**Program Description**

The PMAD (Perinatal Mood and Anxiety Disorders) Program is a Statewide program that offers community trainings, education, support groups and care coordination for all families.

**CB Category**

A1-d. Community Healthy Education – Support Groups

---

**FY 2019 Report**
### Program Goal / Anticipated Impact
Reduce mental health stigma, promote and educate health professionals on PMADs and available community resources for their clients/patients, and continue to provide support and care coordination to moms and families experiencing PMADs.

<table>
<thead>
<tr>
<th>Measurable Objective(s) with Indicator(s)</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>• Educate and train 200 community and health professionals on PMADs.</td>
<td></td>
</tr>
<tr>
<td>• Reach 550 moms who attend 9 support groups across the valley (5 Let's Talk and 4 Mommy mixer)</td>
<td></td>
</tr>
<tr>
<td>• Provide health navigation for 150 clients</td>
<td></td>
</tr>
<tr>
<td>• Provide 150+ client intakes</td>
<td></td>
</tr>
<tr>
<td>• Provide counseling services for 200+ clients</td>
<td></td>
</tr>
</tbody>
</table>

| Intervention Actions for Achieving Goal | Provided PMAD trainings to community and health professionals, support groups, mommy mixers and support with funding therapy. PMAD facilitators have trained over 500 community and health professionals and currently offer 9 support groups – 5 Let’s Talk and 4 Mommy Mixers. The coordinator currently assists moms and families in need of clinical therapy. We help coordinate the family’s insurance mental health provider and assist with funding the therapy if the provider is unable to see the patient within a two-week period. |

| Collaboration | Southern NV WIC clinics, Southern NV Health District, United Healthcare, Behavioral Health Options, Baby's Bounty, State of NV Division of Child and Family Services, Maternal & Child Health Coalition, UNLV School of Medicine, Breastfeeding Peer Counselors, OBGYNs, UMC Hospital, and Postpartum Support International. |

| Performance / Impact | Trained 269 community health professionals Completed 232 health navigation for clients Provided counseling services for 218 clients Let's Talk and Mommy Mixers reached 735 moms across the valley |

| Hospital's Contribution | Total program expense $96,335 which included state and local funding. Program includes 1.2 FTEs, therapy services, support groups, supplies and continuing education. |

### FY 2020 Plan
Reduce mental health stigma, promote and educate health professionals on PMADs and available community resources for their clients/patients, and continue to provide support and care coordination to moms and families experiencing PMADs.

<table>
<thead>
<tr>
<th>Measurable Objective(s) with Indicator(s)</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>• Educate and train 275 community and health professionals on PMADs.</td>
<td></td>
</tr>
<tr>
<td>• Reach 800 moms who attend 9 support groups across the valley (5 Let’s Talk and 4 Mommy mixer)</td>
<td></td>
</tr>
<tr>
<td>• Provide health navigation for 250 clients</td>
<td></td>
</tr>
<tr>
<td>• Provide 250 client intakes</td>
<td></td>
</tr>
<tr>
<td>• Provide counseling services for 250 clients</td>
<td></td>
</tr>
</tbody>
</table>

| Intervention Actions for Achieving Goal | We will continue to provide PMAD trainings to community and health professionals, support groups, mommy mixers and support with funding therapy. |

| Planned Collaboration | Southern Nevada WIC clinics, Southern NV Health District, United Healthcare, Behavioral Health Options, Baby's Bounty, Las Vegas Baby Co., State of Nevada Division of Child and Family Services, Maternal Child Health Coalition, UNLV School of Medicine, State Breastfeeding Peer Counselors, southern Nevada OBGYNs, southern Nevada pediatricians |

### Significant Health Needs Addressed
- Access to Care
- Motor Vehicle and Pedestrian Safety
### Program Description

A nation-wide program designed by the Center for Healthy Aging, the Senior Peer Counseling program provides confidential, personal and supportive counseling to people facing the challenges and concerns of growing older, such as: loss and bereavement, retirement, health concerns, relationships, normal aging issues and loneliness. Dignity Health’s counselors are a team of carefully trained volunteers who provide supportive counseling under the close supervision of mental health professionals.

### CB Category

A1. Community Health Education

## FY 2019 Report

### Program Goal / Anticipated Impact

Discussing concerns with a trained and caring peer counselor can really make a difference in reducing loneliness and depression. Counseling offers an outlet to work through feelings, recognize strengths, consider alternatives, learn new coping skills and redirect your life toward greater meaning and purpose.

### Measurable Objective(s) with Indicator(s)

<table>
<thead>
<tr>
<th>Total Clients</th>
<th>Total Counseling Sessions</th>
<th>Total Intakes</th>
<th>Total Active Counselors</th>
</tr>
</thead>
<tbody>
<tr>
<td>66</td>
<td>440</td>
<td>251</td>
<td>14</td>
</tr>
</tbody>
</table>

### Intervention Actions for Achieving Goal

1. Recruit, screen, train, and retain peer counselors annually. Provide bi-weekly supervision and ongoing training.
2. Recruit clients through physician referrals, self-referral, community partners, REACH Magazine and website.
3. Match clients with an appropriate counselor and monitor through supervision

### Collaboration

State of Nevada Office of Suicide Prevention, ADSD

### Performance / Impact

- **Total Clients**: 66
- **Total Counseling Sessions**: 440
- **Total Intakes**: 251
- **Active Counselors**: 14

### Hospital’s Contribution

$71,317, program coordinator, counseling space and supervision space (both centers)

## FY 2020 Plan

### Program Goal / Anticipated Impact

Discussing concerns with a trained and caring peer counselor can really make a difference in reducing loneliness and depression. Counseling offers an outlet to work through feelings, recognize strengths, consider alternatives, learn new coping skills and redirect your life toward greater meaning and purpose.

### Measurable Objective(s) with Indicator(s)

<table>
<thead>
<tr>
<th>Total Clients</th>
<th>Total Counseling Sessions</th>
<th>Total Intakes</th>
<th>Total Referrals to other programs or services</th>
<th>Total Clients who have completed counseling</th>
</tr>
</thead>
<tbody>
<tr>
<td>75</td>
<td>550</td>
<td>260</td>
<td>150</td>
<td>20</td>
</tr>
</tbody>
</table>

### Intervention Actions for Achieving Goal

- Recruit, screen, train, and retain peer counselors. Provide bi-weekly supervision and ongoing training.
- Recruit clients through physician referrals, self-referral, community partners, REACH Magazine and website.
- Match clients with an appropriate counselor and monitor counseling through supervision. Expand counselors out to other Centers

### Planned Collaboration

State of Nevada Office of Suicide Prevention, ADSD
Other Programs and Non-Quantifiable Benefits

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

OTHER PROGRAMS

**Breastfeeding**
St. Rose Dominican is committed to protecting new mothers milk supply and the nutrition of the baby.
Outcomes: Maintained Baby Friendly designations for both San Martin and Siena. 300 Outpatient Lactation Consultations, 485 Phone Consultations, 355 breastpump rentals, 871 breastfeeding support group encounters, 188 prenatal breastfeeding class participants.

**Community Coalitions**
The Nevada Statewide Maternal and Child Health Coalition (NVMCH) provide leadership to improve the physical and mental health, safety and well-being of the maternal and child population across Nevada.
Outcomes: 754 active members statewide

**Fitness Programs**
Provide free and low cost fitness programs to the community. Incorporate mind, body and spirit into these programs and teach the Enhance Fitness evidence-based curriculum that improves balance, strength, flexibility, endurance and emotional well-being.
Outcomes: Offered 54 different ongoing weekly exercise programs generating 27,977 encounters.

**Health and Wellness Programs**
Enhance quality of life by providing programs that reduce stress, provide education and psychosocial support. People who move to Las Vegas often leave their support systems behind and suffer from isolation and loneliness, which can have a negative impact on physical and mental health.
Outcomes: Reached 2,277 participants with classes.

**Infants, Children & Parenting**
Provided programs to enhance baby safety, early bonding, baby development and parenting.
Outcomes: 6,111 participants

**Safety/Injury Prevention**
Based on community mortality reports, provide education, skills and services to the community on safety for the prevention of injury and death. Target specific groups and needs – teens, new parents, work sites, adults and seniors.
Outcome: 922 participants.

**Screenings**
Provide low or no cost medical and health screenings for the uninsured in our community to detect the early onset of illness and disease. Provide referrals to follow up care as needed.
Outcomes: Provided 1,318 screenings open to the community.

**Support Groups**
Provide support to individuals working through the healing process. A study conducted by Spiegel, et al., determined that psychosocial intervention, in the form of support groups, has a positive effect on survival for patients.
Outcomes: Provided 24 different support groups, 42 different meetings for a total of 14,522 encounters

**Transportation Assistance**
Transportation program for patients and families to enhance patient access to care including cabs, bus tokens, and other transportation services with a specific focus on vulnerable populations.
Outcomes: Over the course of the year, St. Rose Dominican assisted 906 individuals with 24-hour bus passes distributed to individuals in need.
WIC Nutrition Program
A nutrition program for women, infants and children under age 5 providing healthy food, nutritional counseling and education, breastfeeding counseling and breast pumps for low income families.
Outcomes: 3,954 clients enrolled in the program.

NON-QUANTIFIABLE BENEFITS
Community Building Activities: St. Rose Dominican engages in a variety of activities to further the mission of advocacy, partnership and collaboration.
- **Rebuilding Together Project.** St. Rose Dominican employees partnered with Rebuilding Together to make critical repairs on one home in the Las Vegas Valley for low-income, disabled and/or aging residents. This project strives to preserve affordable home ownership and revitalize communities.
- **Kindness Kloset.** Employees donate new sweat pants, sweatshirts, t-shirts, socks and slippers for patients who are being discharged with no clothing to wear home. These patients are discharged from one of the units or from the Emergency Departments at all three campuses.
- **Smoke-Free Campus Initiative.** All three St. Rose Dominican campuses are smoke free and have been recognized by the American Lung Association and the Nevada Cancer Coalition.
- **Healthy Rose Employee Wellness Program.** St. Rose Dominican was recognized as a Silver Level recipient of the American Heart Association’s Fit Friendly Worksites Recognition Program for taking steps to create a culture of wellness for our employees.
- **Sister Robert Joseph Bailey Elementary School - Book Drive and Back-to school supplies and Christmas gifts were donated by employees for over 150 low-income children.**
- **Prayer Shawls** were distributed to over 500 patients at all three campuses, local hospice and partner convalescent rehab centers. These shawls are knitted with love and prayers to help patients heal.
- **Pet Blessings** – Collected used towels and blankets for local animal shelters.
- **Bus Passes and boxed lunches** are distributed to walk-ins in need at all three campuses.
- **Community Events.** Many of our employees volunteer their time and money by participating in community events with local charities. Seventy-five employees volunteered at the Opportunity Village HallOveen and Magical Forest event to raise funds for women and men with disabilities. The hospital coordinates four teams (80 employees) for the Rose Regatta Dragon Boat Festival, Susan G. Komen Race for the Cure, American Heart Association Heart Walk and the American Lung Association Scale the Strat climb.
- **ECHO (Employees Can Help Others)** allows employees to donate spare change and other funds to help fellow employees who need financial assistance with rent/mortgage, utilities and other payments while going through family crisis. These funds are distributed through the ECHO committee which handles all requests.
The economic value of community benefit for patient financial assistance is calculated using a cost-to-charge ratio, and for Medicaid and other categories of community benefit using a cost accounting methodology.

### Benefits for Living in Poverty

<table>
<thead>
<tr>
<th></th>
<th>Persons Served</th>
<th>Net Benefit</th>
<th>% of Org Expenses</th>
</tr>
</thead>
<tbody>
<tr>
<td>Financial Assistance</td>
<td>4,401</td>
<td>6,071,012</td>
<td>1.3</td>
</tr>
<tr>
<td>Medicaid</td>
<td>21,700</td>
<td>33,584,679</td>
<td>7.2</td>
</tr>
<tr>
<td>Means-Tested Programs</td>
<td>72</td>
<td>1,762,489</td>
<td>0.4</td>
</tr>
</tbody>
</table>

### Community Services

<table>
<thead>
<tr>
<th></th>
<th>Persons Served</th>
<th>Net Benefit</th>
<th>% of Org Expenses</th>
</tr>
</thead>
<tbody>
<tr>
<td>A - Community Health Improvement Services</td>
<td>50,648</td>
<td>1,046,030</td>
<td>0.2</td>
</tr>
<tr>
<td>B - Health Professions Education</td>
<td>0</td>
<td>66,781</td>
<td>0.0</td>
</tr>
<tr>
<td>E - Cash and In-Kind Contributions</td>
<td>0</td>
<td>283,511</td>
<td>0.1</td>
</tr>
<tr>
<td>G - Community Benefit Operations</td>
<td>0</td>
<td>15,000</td>
<td>0.0</td>
</tr>
</tbody>
</table>

Totals for Community Services 50,648 1,411,322 0.3

### Totals for Living in Poverty

<table>
<thead>
<tr>
<th></th>
<th>Persons Served</th>
<th>Net Benefit</th>
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</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>76,821</td>
<td>42,829,502</td>
<td>9.1</td>
</tr>
</tbody>
</table>

### Benefits for Broader Community

<table>
<thead>
<tr>
<th></th>
<th>Persons Served</th>
<th>Net Benefit</th>
<th>% of Org Expenses</th>
</tr>
</thead>
<tbody>
<tr>
<td>A - Community Health Improvement Services</td>
<td>85,340</td>
<td>2,295,854</td>
<td>0.5</td>
</tr>
<tr>
<td>B - Health Professions Education</td>
<td>50</td>
<td>3,546,016</td>
<td>0.8</td>
</tr>
<tr>
<td>E - Cash and In-Kind Contributions</td>
<td>0</td>
<td>12,608</td>
<td>0.0</td>
</tr>
<tr>
<td>F - Community Building Activities</td>
<td>12,621</td>
<td>268,053</td>
<td>0.1</td>
</tr>
<tr>
<td>G - Community Benefit Operations</td>
<td>0</td>
<td>34,934</td>
<td>0.0</td>
</tr>
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</table>

Totals for Community Services 98,011 6,157,465 1.3

### Totals for Broader Community

<table>
<thead>
<tr>
<th></th>
<th>Persons Served</th>
<th>Net Benefit</th>
<th>% of Org Expenses</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>98,011</td>
<td>6,157,465</td>
<td>1.3</td>
</tr>
</tbody>
</table>

### Totals - Community Benefit

<table>
<thead>
<tr>
<th></th>
<th>Persons Served</th>
<th>Net Benefit</th>
<th>% of Org Expenses</th>
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<tbody>
<tr>
<td></td>
<td>174,832</td>
<td>48,986,967</td>
<td>10.4</td>
</tr>
</tbody>
</table>

### Medicare

<table>
<thead>
<tr>
<th></th>
<th>Persons Served</th>
<th>Net Benefit</th>
<th>% of Org Expenses</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>34,553</td>
<td>39,226,974</td>
<td>8.4</td>
</tr>
</tbody>
</table>

### Totals with Medicare

<table>
<thead>
<tr>
<th></th>
<th>Persons Served</th>
<th>Net Benefit</th>
<th>% of Org Expenses</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>209,385</td>
<td>88,213,941</td>
<td>18.8</td>
</tr>
</tbody>
</table>

Net Benefit equals costs minus any revenue from patient services, grants or other sources.
Hospital Board and Committee Rosters

Community Board Members
July 1, 2019 – June 30, 2020

Maggie Arias-Petrel
CEO, Global Professional Medical Consulting

Lawrence Barnard
Nevada Market Leader and President/CEO
Dignity Health – St. Rose Dominican Siena

Cynthia Cammack, O.P.
Nursing Services Specialist, Hospice By The Bay

Neel Dhudshia, M.D.
Cardiovascular Surgery of Southern NV

Patricia Dulka, O.P.
Holy Rosary Chapter Prioress
Adrian Dominican Sisters

Patrick Hays
Retired

Craig Johnson, Board Secretary
SVP, Hill International, Inc

Patricia McDonald
Adrian Dominican Sister

Jennifer Raroque, M.D.
Platinum Hospitalists

John Socha, Board Vice Chair
Vice President, Health Center Strategy & Development, Culinary Health Fund

Rita Vaswani
Vice President/Senior Relationship Manager
Nevada State Bank

Kate Zhong
Physician/CEO, CNS Innovations

Community Health Advisory Committee (CHAC) Members
July 1, 2019 – June 30, 2020

Sister Phyllis Sikora, O.P., Chairperson
Service Area Vice President of Mission Integration & Spiritual Care

Polly Bates
Grant Manager, Foundation

Nicole Bungum, MS, CHES
Supervisor, Office of Chronic Disease Prevention & Health Promotion, Southern Nevada Health District

Asia Dean
Director Strategic Planning

Sr. Patricia Dulka
Holy Rosary Chapter Prioress, Adrian Dominican Sisters

Jennifer Findlay
Helping Hands Manager

Mark Domingo
Disease Management Program Manager

Dr. Shawn Gerstenberger
Dean, School of Community Health Sciences, UNLV

Patricia Lindberg
Retired, Community Member

Holly Lyman, MPH, CLC
Director Community Health

Sister Patricia McDonald
Adrian Dominican Sisters

Deacon Thomas A. Roberts
President and CEO
Catholic Charities of Southern Nevada

Shelley Williams, RN, CDE
Lead Diabetes Educator
Financial Assistance Policy Summary

Summary Of Financial Assistance Programs

Dignity Health's Financial Assistance Policy describes the financial assistance programs available to uninsured or underinsured 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 200-500% of the Federal Poverty level, you will be charged the Amount Generally Billed (AGB), which is an amount set under federal law that reflects the amounts that would have been paid to the hospital by private health insurers and Medicare (including co-pays and deductibles) for the medically necessary services that you received.

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.

St. Rose Dominican - Rose de Lima Campus 102 East Lake Mead Parkway, Henderson, NV 89015
Financial Counseling 702-616-7558 | Patient Financial Services 877-877-8345
www.dignityhealth.org/las-vegas/paymenthelp

St. Rose Dominican - San Martín Campus 8280 West Warm Springs Rd, Las Vegas, NV 89113
Financial Counseling 702-492-8009 | Patient Financial Services 877-877-8345
www.dignityhealth.org/las-vegas/paymenthelp

St. Rose Dominican - Siena Campus 3001 St. Rose Parkway, Henderson, NV 89052
Financial Counseling 702-616-5002 | Patient Financial Services 877-877-8345
www.dignityhealth.org/las-vegas/paymenthelp