St. Mary's Medical Center

Community Health 2022 Implementation Strategy

Adopted October 2022

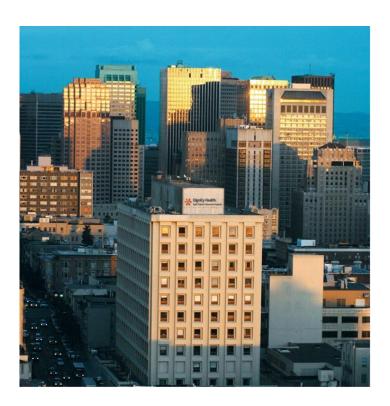




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At-a-Glance Summary

Community Served



Located in northern California, San Francisco is a seven by seven square mile coastal, metropolitan city and county that includes Treasure Island and Yerba Buena Island, just northeast of the mainland. The only consolidated city and county in the state, San Francisco is densely populated and boasts culturally diverse neighborhoods in which residents speak more than 12 different languages. The city is characterized by steep inequality with ten percent of its population living below the federal poverty level, while at the same time hosting the third most billionaires in the world.

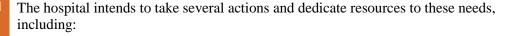
Significant Community Health Needs Being Addressed

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



- Access to welcoming healthcare
- Behavioral Health and Substance Use
- Economic Opportunity

Strategies and Programs to Address Needs





Access to Welcoming Healthcare

Work with care partners to support patient's access to Cal-AIM benefits Street-Based Medicine Outreach Serious Illness Program for Chinese Seniors Community Grants Program
Patient Financial Assistance

Behavioral Health and Substance Use

Convening with SFPD, DPH, SFFD on Care for Patients Under 5150 Holds Cal-AIM

Medication Assisted Treatment and Substance Use Navigator San Francisco Health Improvement Partnership

Economic Opportunity

Cal-AIM

Health Professions Education

Anticipated Impact



The anticipated impact of these strategies and programs include:

- Increased access to health care and reduced barriers to care.
- Improved coordination of services for persons experiencing homelessness.
- Increased availability of mental health services in community settings.

• Increased access to needed services and resources through collaboration with community partners.

Planned Collaboration



Key community partners include (partial listing):

- Community health centers
- Housing and homeless services
- City and County of San Francisco, including public health
- Inquirer
- Senior centers and service agencies
- Behavioral Health and substance use service providers

This document, the most recent Community Health Needs Assessment and Community Benefit Report is publicly available online at the hospital's website here:

https://www.dignityhealth.org/bayarea/locations/stmarys/about-us/community-benefit

Written comments on this report can be submitted to the St. Mary's Medical Center Community Health Department 450 Stanyan St.
San Francisco CA 94117 or by e-mail to Alexander.Mitra@DignityHealth.org.

Our Hospital and the Community Served

About St. Mary's Medical Center

St. Mary's Medical Center is a member of Dignity Health, which is a part of CommonSpirit Health. The hospital was founded by the Sisters of Mercy and has cared for the people of the San Francisco Bay Area since 1857. In 1986 it was one of the founding hospitals of Dignity Health. A fully accredited teaching hospital in the heart of San Francisco, it has 275 licensed beds. For 165 years, St. Mary's has built a reputation for quality, personalized care, patient satisfaction, and exceptional clinical outcomes. Our key service lines include orthopedics, cardiovascular, oncology, adolescent psychiatry, and acute rehabilitation. We offer a full range of diagnostic services and a 24-hour Emergency Department.

Our Mission

As CommonSpirit Health, we make the healing presence of God known in our world by improving the health of the people we serve, especially those who are vulnerable, while we advance social justice for all.

Our Vision

A healthier future for all – inspired by faith, driven by innovation, and powered by our humanity.

Financial Assistance for Medically Necessary Care

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

Description of the Community Served

St. Mary's Medical Center serves the City and County of San Francisco. San Francisco, at roughly 47 square miles, is the most densely populated large city in California. Between 2011 and 2018, San Francisco grew by almost eight percent to 888,817 persons outpacing population growth in California (6 percent).

The population is aging and the ethnic shifts continue with an increase in the Asian and Pacific Islander population, increase in multiethnic populations and a decrease in the Black/African American population. San Francisco has a relatively small proportion of households with children (19 percent) compared to the state overall (34 percent).

Despite areas of affluence, there remain significant pockets of poverty (as evidenced in the Community Needs Index which follows) particularly in the African American and Hispanic/Latino communities.



	San Francisco
Total Population	873,965
Race	073,703
White - Non-Hispanic	40.2%
Black/African American - Non-Hispanic	5.6%
Hispanic or Latino	15.2%
Asian/Pacific Islander	36.0%
All Others	3.0%
Total Hispanic & Race	100.0%
% Below Poverty	10.0%
Unemployment	2.2%*
No High School Diploma	11.4%
Medicaid/Pubic Insurance (% of households)	30%+
Uninsured (% of households)	5.2%

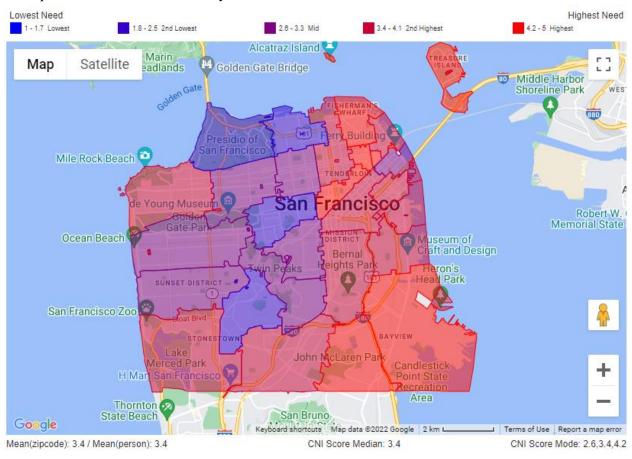
Source: Census Bureau, 2020 Census.

^{*}Employment Development Department, May 2022

⁺ American Community Survey, 2015-2019

Community Needs Index

One tool used to assess health need is the Community Need Index (CNI). 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, educate, 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.



List of San Francisco zip codes and Community Health Needs score for each Zip Code

94102	Zip Code	CNI Score	Population	City	County	State
94104 4.2 434 San Francisco San Francisco California 94105 2.6 11802 San Francisco San Francisco California 94107 3.4 34441 San Francisco San Francisco California 94108 4.6 13717 San Francisco San Francisco California 94109 3.6 58196 San Francisco San Francisco California 94110 3.4 74270 San Francisco San Francisco California 94111 3.8 5337 San Francisco San Francisco California 94111 2.6 85036 San Francisco San Francisco California 94112 3.6 85036 San Francisco San Francisco California 94115 3.2 34756 San Francisco San Francisco California 94116 2.8 45656 San Francisco San Francisco California 94117 2.4 40715 San Francisco	94102	4.4	37485	San Francisco	San Francisco	California
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Community Assessment and Significant Needs

The health issues that form the basis of the hospital's community health Implementation Strategy and programs were identified in the most recent CHNA report, which was adopted in June 2022. 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
- Discussion of impacts of actions taken by the hospital since the preceding CHNA

Additional details about the needs assessment process and findings can be found in the CHNA report, which is publicly available on the hospital's website or upon request from the hospital, using the contact information in the At-a-Glance Summary (page 4).

Significant Health Needs

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

Significant Health Need	Description	Intend to Address?
Access to welcoming health care	Access to Welcoming Healthcare refers to the right to accessible and affordable, culturally grounded, relevant, and competent acute and preventative healthcare. Welcoming care is delivered in local neighborhoods, by healthcare professionals who are from the communities they are serving, are grounded in anti-racism and interpersonal bias, have knowledge of the community's historic relationship with (and harm done by) the healthcare system, and are equitably compensated for their work.	X
Behavioral health and substance use	Behavioral Health and Substance Use refers to access, stigma, availability, and affordability of behavioral and mental health professionals and services. Substance use refers to substance access, use, and availability of support for substance misuse. Behavioral Health also refers to the freedom from external and environmental trauma. Community violence decreases the real and perceived safety of a neighborhood disrupting social networks by inhibiting social interactions, causing chronic	Х

Significant Health Need	Description	Intend to Address?
	stress among residents who are worried about their safety, and acting as a disincentive to engage in social interactions.	
Economic Opportunity	Economic opportunity refers to the financial and socioeconomic conditions which allow for an individual and community to effectively afford the tangible and intangible materials and resources necessary to thrive. These materials and resources intertwine with various social determinants of health located in a community, and they take into account the systemic conditions which perpetuate unequal access economic outcomes among historically and/or systematically under-resourced populations such as undocumented, LGBTQIA+, and BIPOC communities.	X

Significant Needs the Hospital Does Not Intend to Address

St. Mary's Medical Center intends to address all three community health needs.

2022 Implementation Strategy

This section presents strategies and program activities the hospital intends to deliver, fund or collaborate with others to address significant community health needs over the next three years, including resources for and anticipated impacts of these activities.

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

Creating the Implementation Strategy

The hospital is dedicated to improving community health and delivering community benefit with the engagement of its management team, board, clinicians and staff, and in collaboration with community partners.

The following criteria were used by the hospital to determine the significant health needs St. Mary's Medical Center will address in the Implementation Strategy:

- Existing Infrastructure: There are programs, systems, staff and support resources in place to address the issue.
- Established Relationships: There are established relationships with community partners to address the
- Ongoing Investment: Existing resources are committed to the issue. Staff time and financial resources for this issue are counted as part of our community benefit effort.
- Focus Area: The hospital has acknowledged competencies and expertise to address the issue and the issue fits with the organizational mission.

St. Mary's Medical Center engaged hospital leaders to examine the identified health needs according to these criteria. Hospital and health system participants included Care Coordination, Emergency Department, Nursing, Graduate Medical Education, Surgery, Business Development, Mission, and Palliative Care. Department leaders were asked about their staff and patient needs, connection to community resources, and department goals. Staff shared that valuable insights such as need to break down silos in the organization, support patients with services pre- and post- hospitalization, access city services and increase safety for staff in the Emergency Department.



St. Mary Medical Center

Community input or contributions to this implementation strategy included the Tenderloin Health Improvement Partnership, sitting as the Hospital's Community Advisory Committee, and San Francisco Health Improvement Partnership. Through the Tenderloin Health Improvement Partnership, attendees provided valuable input on the needs of the community for case management and other community supports, housing, substance use treatment and an environment free of danger.

The CHNA served as the resource document for the review of health needs as it provided statistical data on the severity of issues and also included community input on the health needs.

As a result of the review of needs and application of the above criteria, St. Mary's Medical Center chose to focus on: Access to Welcoming Healthcare, Behavioral Health and Substance Use, and Economic Opportunity.

For each health need the hospital plans to address, the Implementation Strategy describes: actions the hospital intends to take, including programs and resources it plans to commit, anticipated impacts of these actions, and planned collaboration between the hospital and other organizations. In most cases, the strategies identified to address the selected needs are based on existing programs that have evidence of success. For some strategies, St. Mary's Medical Center is part of a larger collaborative initiative.

Community Health Strategic Objectives

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

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



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



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



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



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

Strategies and Program Activities by Health Need

Health Need: Acces	s to Welcoming Healthcare						
Anticipated Impact (Goal)	The hospital's initiatives to address Access to Welcoming Health Care are anticipated to result in: increased identification and treatment of chronic disease, and increased compliance with chronic disease prevention and management recommendations.						
			Strategic	Objectives			
Strategy or Program	Summary Description	Alignment & Integration	Clinical - Community Linkages	Capacity for Equitable Communities	Innovation & Impact		
Cal-AIM: California Advancing and Innovating Medi-Cal	Cal-AIM is a transformational project to better serve patient in Medi-Cal managed care plans by investing in upstream factors including housing, nutrition, case management and behavioral health services. The hospital will work with our partners to ensure patients take full advantage of the benefits afforded to them through CalAIM.	X	X	X	X		
Serious Illness Program for Chinese Seniors: Stupski Grant	Develop a comprehensive serious illness program that starts well in advance of end-of-life issues. Includes Advance Care Directives training, case management work to connect referred patients to services, use CCHCA's insurers database with predictive modeling tools to proactively outreach to seniors.	X	X	X	X		
Planned Resources	The hospital will provide health care subject matter experts, project management support, case managers, philanthropic cash grants, outreach communications, and program management support for these initiatives.						



Health Need: Access to Welcoming Healthcare

Planned Collaborators

Key partners include: community clinics, insurers, clinical non-profits, San Francisco Department of Public Health, non-profits serving seniors, API community,

+	+

Health Need: Behavioral Health and Substance Use

Anticipated Impact (Goal)	The hospital's initiatives to address Behavioral Health and Substance Use hope to increase connection and referrals to behavioral health and substance use services.					
			Strategic	Objectives		
Strategy or Program	Summary Description	Alignment & Integration	Clinical - Community Linkages	Capacity for Equitable Communities	Innovation & Impact	
Medically Assisted Treatment and Substance Use Navigator	SMMC's ability to identify and provide onsite medication assisted treatment (buprenorphine, methadone, suboxone) and community-based support to patients with alcohol/substance use disorders.	X	X			
Cal-AIM	Cal-AIM is a transformational project to better serve patient in Medi-Cal managed care plans by investing in upstream factors including housing, nutrition, case management and behavioral health services.	X	X	X	X	
Convening Group on the Care for Patients under 5150 holds	With the support of St. Mary's and Saint Francis Emergency Department leadership, the hospital began convening meetings with SFPD: CIT, SFDPH: Comprehensive Crisis Services around	X		X		

coordinating care for patients under 5150 holds. The meetings

Health Need: Behav	vioral Health and Substance Use				
	have grown to encompass SFFD: SCRT and SFDPH: AOT, and have been helpful in creating clearer connections between the various partners worked				
Planned Resources	The hospital will provide health care subject matter experts, project philanthropic cash grants, outreach communications, and program matter experts.	-		_	
Planned Collaborators	Key partners include: community clinics, community-based organiz mental health and substance use treatment providers.	ations, pub	lic health a	nd city agend	cies, and

Health Need: Econo	omic Opportunity				
Anticipated Impact (Goal) Support patients of the hospital to receive support pre- and post- discharge for social determinants of health and train the next generation of health care leaders.					
	Summary Description		Strategic	Objectives	
Strategy or Program		Alignment & Integration	Clinical - Community Linkages	Capacity for Equitable Communities	Innovation & Impact
Community grants program	Offers grants to nonprofit community organizations to create linkages for patients to pre- and post- discharge support.			X	
Health Professions Education	In partnership with local colleges and universities, SMMC's Health Professions Education is designed to provide hands on experience for students to gain the tools and skills to be the next		X	X	

Health Need: Econ	omic Opportunity				
	generation of health care leaders. Saint Francis provides Health Professions Education in Nursing, Clinical Pastoral Education, Dietetic, and Burn.				
Cal-AIM	Cal-AIM is a transformational project to better serve patient in Medi-Cal managed care plans by investing in upstream factors including housing, nutrition, case management and behavioral health services. The hospital plans to work with SFHP to identify and refer Cal-AIM eligible patients to Enhanced Case Management and Community Supports to start and engage with the entity to ensure patients can receive the full benefits they are eligible for.	X	X	X	X
Planned Resources	The hospital will provide project management support, case managers, philanthropic cash grants, outreach communications, and program management support for these initiatives.				
Planned Collaborators	Key partners include: city and county agencies, funders, faith communications, and housing agencies.	unity, com	munity clin	ics, commu	nity-

Program Highlights

California Advancing and Innovating Medi-Cal

Cal-AIM is a re-imagining of the Medi-Cal system to create investments into upstream determinants of health. Saint Francis and St. Mary's are looking to ensure staff know how to refer patients to program perks like case management, medically tailored meals and housing navigation.

San Francisco Health Improvement Partnership

SMMC staff are active in the SFHIP leadership and steering committees. SFHIP is motivated by a common vision, values, and community-identified health priorities and as such SFHIP will drive community health improvement efforts in San Francisco. The SMMC community health plan and strategy is designed to align with SFHIP priorities.

Advocacy

SMMC staff advocate for local and state health policy. SMMC staff engages with elected and appointed officials at the local, state and federal level as well as a diversity of healthcare thought leaders from the public and private sector in support of SMMC and SFMH's strategic objectives.

Convening on Care for Patients under 5150 Holds

With the support of Saint Francis Emergency Department leadership, the hospital began convening meetings with SFPD: CIT, SFDPH: Comprehensive Crisis Services around coordinating care for patients under 5150 holds. The meetings have grown to encompass SFFD: SCRT and SFDPH: AOT, and have been helpful in creating clearer connections between the various partners worked