



CITRUS VALLEY HEALTH PARTNERS

Citrus Valley Medical Center, Inc.
Inter-Community Campus 210 W. San Bernardino Rd., Covina, CA 91723-1516
License # 930000131

Queen of the Valley Campus - 1115 S. Sunset Avenue, West Covina, CA 91790-3940
License # 930000131

Foothill Presbyterian Hospital-Johnston Memorial
250 S. Grand Avenue - Glendora, CA 91741-4218
License # 930000052

2013 Community Health Needs Assessment (CHNA) Implementation Strategy Report

I. General Information

Contact Person: Maria Peacock, Director, Community Benefit
Written Plan Effective Date: December 31, 2014

Date Plan was Authorized and Adopted by
Authorized Governing Body: March 26, 2014

Written Plan adopted and approved by: Strategic Planning, Marketing and Community Benefit Committee of the Board

Was the written plan written and Adopted by the Authorized Governing Body by End of Tax Year in Which CHNA was made available to the Public? Yes No

Date Facility's Prior Written Plan Was Adopted by Organization's Governing Body:

Name and EIN of Hospital Organization Operating Hospital Facility:
Citrus Valley Health Partners - EIN # 95-3885523

Address of Hospital Organization: 140 W. College Street, Covina, CA 91722

II Citrus Valley Health Partners (CVHP)

As the largest, nonprofit health care provider for the residents of the East San Gabriel Valley, CVHP serves the community through the work of its four facilities: Citrus Valley Medical Center – Inter-Community Campus in Covina, Citrus Valley Medical Center – Queen of the Valley Campus in West Covina, Foothill Presbyterian Hospital in Glendora, Citrus Valley Hospice and Citrus Valley Home Health in West Covina. Nearly one million residents in the East San Gabriel Valley rely on CVHP for their health care needs.

While CVHP is focused on healing the sick, we are also dedicated to reaching out to improve the health of our community. Our community outreach efforts allow us to reach beyond our hospital walls to help educate our community members, to help manage their health and to give them options in resources and health screenings. We offer a variety of health programs, services and support groups and partner with a variety of community organizations, cities and school districts with the common goal of improving health and well-being.

III Citrus Valley Health Partners Community Benefit

CVHP is an organization recognized for its outstanding community outreach efforts and accomplishments. An organization dedicated to creating innovative partnerships among the numerous health and social service organizations in our valley, with close to 100 participating agencies in diverse collaborative relationship devoted to promoting community health and well-being. In addition, CVHP has a charity care policy in place to respond to the needs of low-income uninsured populations.

CVHP's vision is to be an integral partner in elevating communities' health through partnerships. This is principle that guides all community health improvement and community benefit initiatives. Some highlights include CVHP's Get Enrollment Moving program, also known as GEM, volunteers and CVHP staff members work together and in collaboration with community-wide partners to recruit eligible families and enroll them in the different Medi-Cal programs, Covered California, and other health access programs for low-income uninsured and underinsured populations. Enrollment is followed by three separate calls to ensure enrollment confirmation, utilization of services, as well as trouble shoot and provide assistance at renewal time. GEM works in partnership with Promotoras de Salud/Health Promoters, a peer outreach and education neighborhood-based initiative with the purpose of teaching and connects community residents with health insurance options. CVHP's Diabetes and Lighten Up San Gabriel Valley programs offer a culturally competent disease prevention approaches as well as best practices to disease management with the support of CVHP's clinical professionals and through community multidisciplinary partnerships. CVHP's maternal/child program offers home visitation during the prenatal and postpartum stages. CVHP has been diligent and responsive to the health coverage changes by offering outreach and education throughout the community in the Affordable Care Act/MediCal Expansion, Market Place, and other. Since conception, Every Child's Healthy Option (ECHO) is a collaborative effort involving CVHP, coordinated and lead by local school districts. The program offers free urgent care services in various specialties regardless of income level and provides enrollment for the child in the adequate health insurance program.

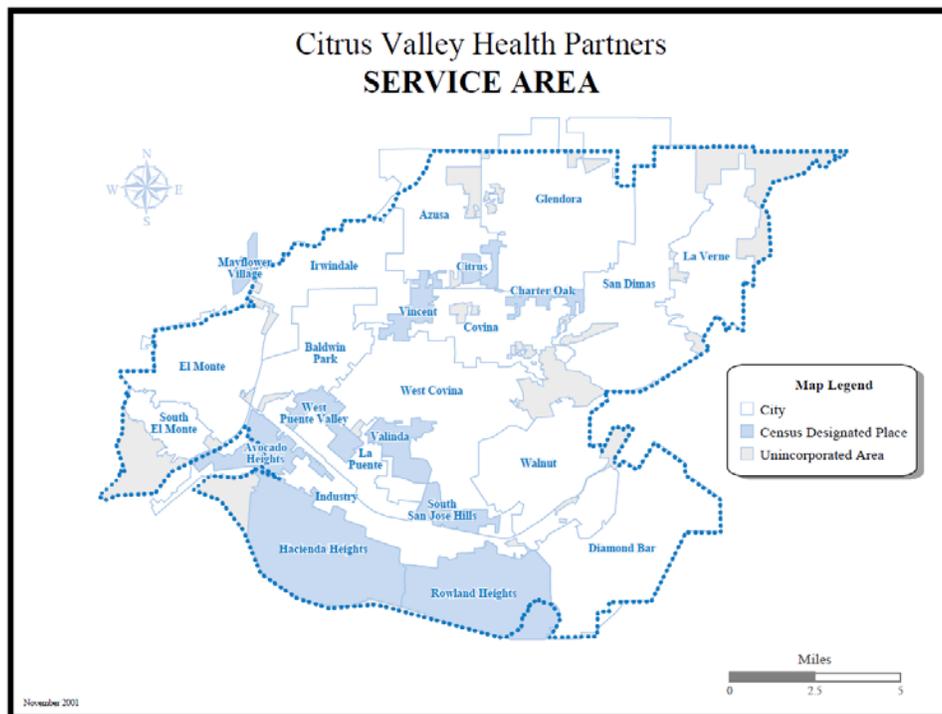
IV Rationale for Implementation Strategy

The Community Needs Implementation Strategy is being adapted to comply with federal tax law requirements set forth in Internal Revenue Code section 501r requiring hospital facilities owned and operated by an organization described in Code section 501(c)(3) to conduct a community health needs assessment at least once every three years and adopt an implementation strategy to meet the community health need identified through the community health needs assessment.

CVHP's implementation strategy is the means to satisfy all applicable requirements outlined in the proposed regulations released in April of 2013. This implementation strategy focuses on the needs identified in the 2013 Community Health Needs Assessment.

V Citrus Valley Health Partners Service Area

CVHP's Service Area is characterized by significant disparities in income. An average of 14.3% of people live under the 100% of the Federal Poverty Level (FPL) and 33.7% live below the 200% of the FPL while, by contrast, one city accounts for only 4.6% of people living below 100% of the FPL. The cities and non incorporated areas that CVHP serves are Avocado Heights, Azusa, Baldwin Park (including Irwindale), Bassett, Covina, Diamond Bar, El Monte, Glendora, Hacienda Heights, La Puente, La Verne, Rowland Heights, San Dimas, South El Monte, Valinda, Walnut and West Covina. CVHP's service area is part of the SPA 3 (Service Planning Area 3 of Los Angeles County).



In 2010, the total population within CVHP service was 880,220, making up 7.1% of the population in Los Angeles County (U.S. Census, 2010) (U.S. Census Bureau Decennial Census, 2010). The largest portion of the population in the CVHP service area lives in La Puente (13.1%), West Covina (12.3%), and El Monte (10.3%).

There are slightly more females (50.1%) than males (49.9%). Over a third (32.7%) is between the ages of 25 and 44 years in the CVHP service area, one fourth (25.5%) in the CVHP service area is between the ages of 0 and 17 years. By ethnicity, over half (55.7%) of the population is Hispanic/ Latino. The second largest ethnic group is Asian/Pacific Islander making up over a quarter (22.5%) of the population. The third largest ethnic group is Caucasian with 18.0% of the population, smaller when compared to 27.8% in Los Angeles County (U.S. Census Bureau Decennial Census, 2010) and 2.1% are African American. Over a quarter (26.9%) of the population has less than a 9th grade education, another 20.1% in the CVHP service have a high school diploma. The service area has lower rates of four year college and graduate degrees in Los Angeles County. By language spoken, a larger portion of the population speaks Spanish (41.3%) at home another third speak English only (37.2%) at home; a larger portion of the population speaks an Asian/Pacific Island language (18.9%) at home when compared to Los Angeles County (10.9%).

Based on the 2009 California Health Interview survey, over one fourth (28.6%) of the CVHP service area has an annual household income of \$20,000 or below, slightly higher when compared to Los Angeles County report (23.8%). In

addition, over one third (33.7%) of the population served by CVHP is lives below the FPL. The larger portions of families are living in poverty in the cities of El Monte (18.3%), Baldwin Park (14.0%), and South El Monte (12.6%) when compared to Los Angeles County overall (12.6%). The unemployment rate in the CVHP service area is 10.2, slightly higher when compared to Los Angeles County (9.7).

VI List of Identified Community Health Needs

Below is the summary list in alphabetical order of the health needs identified in the CVHP's 2013 Community Health Needs Assessment:

- | | |
|---|--------------------------|
| 1. Alcohol and Substance Abuse | 11. Colorectal Cancer |
| 2. Allergies | 12. Diabetes |
| 3. Alzheimer's Disease | 13. Disability |
| 4. Arthritis | 14. HIV/AIDS |
| 5. Asthma | 15. Hypertension |
| 6. Cancer, in General | 16. Infant Mortality |
| 7. Cardiovascular Disease | 17. Intentional Injury |
| 8. Cervical Cancer | 18. Mental Health |
| 9. Chlamydia | 19. Obesity/Overweight |
| 10. Chronic Obstructive Pulmonary Disease | 20. Oral Health |
| | 21. Unintentional Injury |
| | 22. Vision |

VII Individuals Involved in the Development of the Implementation Strategy

Maria Peacock, Director, Community Benefit Programs

Tracy Dallarda, Chief Communications Officer

Xxxxxx Who else?

VIII Availability of the 2013 Community Health Needs Assessment (CHNA) to the Public

CVHP's has implemented a variety of strategies to make the report widely available to the general public within the service area.

- 1) The full report was made available at CVHP's website http://www.cvhp.org/documents/CVHP_CHNA_Report_2013.pdf
- 2) CVHP and Kaiser Permanente Baldwin Park presented their joint tri-annual community needs assessment at a breakfast for local governments, non-profits, community based organizations, faith communities, school districts, community colleges, public and private agencies, institutions of higher education, public health department, department of health services, mental health agencies, etc. It is estimated that 80 community representatives attended this event and received a hard copy and digital copy of the full report.
- 3) The San Gabriel Valley Tribune covered the event and published a newspaper article informing the general public in the geographic service area about the findings and availability of the assessment It can be found at: <http://www.sgtribune.com/health/20140207/mental-health-obesity-top-list-of-san-gabriel-valley-health-problems>
- 4) The report findings and hospital priorities were presented to the Health Consortium of the Greater San Gabriel Valley.

IX Health Needs that Citrus Valley Health Partners will Address

a. Process and Criteria Utilized in the Selection

Citrus Valley Health Partners Community Benefit Director and Chief Communications Operating Officer engaged in a review process to identify which needs the hospital will address from the broader list of community health needs identified in the 2013 CHNA. The systematic process was based on two factors: 1) Community Need and 2) Feasibility. The methodology used for the selection included a scale of 1 to 5 from least to most for each of the health needs listed in section VI. The resulting scores were translated to a four section grid (vertical and horizontal axes from Low to High) according to Need and Feasibility for review by the Implementation Strategy Team. The health needs receiving the highest scores for Need and Feasibility were selected as needs that Citrus Valley Health Partners will address as outlined and described in the Priority Areas listed below in section IX.b.

Following is the conceptual criteria utilized for this process:

Need:

- Magnitude/Scale of the Problem: the health need affects a large number of people within the community
- Severity of Problem: the health need has serious consequences (morbidity, mortality, and/or economic burden) for those affected
- Disparities: the health need disproportionately impacts the health status of one or more vulnerable population groups

Feasibility:

- Citrus Valley Health Partners Assets: CVHP has relevant expertise and/or unique assets as an integrated health system to make successful contributions
- Ability to leverage: opportunity to collaborate with existing community partners working to address the need, to build on current programs and efforts, identify and support emerging innovative opportunities, and other assets.

b. CVHP will address the following health needs:

Area of Focus 1: Increase Awareness and Access to Mental Health Programs and Services.

Mental Health Needs are associated with many other health factors, including poverty, alcohol consumption, unemployment, suicide, chronic medical diseases, and lack of a consistent source of primary care.

Mental health services are difficult to access and insurance criteria and requirements are difficulty for many to meet. In the CVHP service area more adults (657.0) experience mental health-related hospitalizations per 100,000 adults when compared to California (551.7). More youth (375.4) experienced mental health-related hospitalizations per 100,000 youth when compared to California (256.4). Furthermore, more people went without needed mental health treatment (51.4%) when compared to Los Angeles County (47.3%). The sub-populations experiencing greatest impact are African Americans (19.3%), Whites (17.8%), and Hispanic Latinos (13.0%). Stakeholders identified youth, middle-aged adults, homeless persons, and the uninsured are the most severely impacted. Six cities in the service area accounted for more mental health adult hospitalizations per 100,000 persons and 11 cities accounted for the highest youth mental health-related hospitalizations per 100,000 persons; however, stakeholders indicated that the entire service area is impacted by disparities.

Area of Focus 2: Increase Awareness and Improve Access to Programs, Education and Services focusing on the reduction on Obesity and Overweight conditions.

Associated health needs consist of hypertension, diabetes, cardiovascular disease, and obesity and overweight.

The prevalence of obesity/overweight and diabetes was identified as a key need in the CVHP service area specifically related to youth (under the age of 18). Obesity reduces life expectancy and causes devastating and costly health problems, increasing the risk of coronary heart disease, stroke, high blood pressure, diabetes, and other chronic diseases. Diabetes lowers life expectancy by up to 15 years, increases the risk of heart disease by two to four times, and is the leading cause of kidney failure, lower-limb amputations, and adult-onset blindness. A diabetes diagnosis can also indicate an unhealthy lifestyle—a risk factor for further health issues.

Healthy lifestyles including nutrition and physical activity need to be incorporated early in life to avoid future health problems. In the Citrus Valley Health Partners service area more youth (30.6%) are obese when compared to California (29.8%). A higher number of youth is overweight (15.1%) when compared to California (14.3%). A slightly higher percentage of youth in the CVHP'S service area are physically inactive (38.4%) when compared to California (37.5%). A significant rate of diabetes in the service area is 18.5% compared to Los Angeles County rate of 10.5%. Moreover, the uncontrolled diabetes hospitalization rate of 12.9 adults per 100,000 persons is higher compared to California at 9.5 per 100,000 persons. Additionally, a significant portion of the population in CVHP's service area was diagnosed with hi blood pressure (30.2%) compared to Los Angeles County (25.5%) and more people die of hypertension and hypertensive renal failure at a rate of 1.3 compared to California at 1.0. at last, more people were hospitalized for heart disease (374.4 per 100,000 persons) when compared to Los Angeles County (367.1 per 100,000 persons) as well as a higher number of cerebrovascular disease hospitalizations (233.6) when compared to California (221.5).

Area of Focus 3: Increase Diabetes Prevention Strategies and Disease Management Best Practices

Associated drivers for the high rates of diabetes in CVHP's service area include being overweight, having high blood pressure, high cholesterol, high blood sugar (or glucose), lack of physical inactivity, smoking, unhealthy eating habits, age, race, gender, having a family history of diabetes, lack of consistent source of primary care.

There is a clear need to take advantage of recent discoveries about the individual and societal benefits to improved diabetes management and prevention by bringing life-savings results and complementing the efforts of primary prevention among those at risk for developing diabetes. More people were diagnosed with diabetes in the CVHP service area (18.5%) than in Los Angeles County (10.5%). Also, more adults (147.4) experienced diabetes-related hospitalizations per 100,000 adults when compared to Los Angeles County; furthermore, more uncontrolled diabetes-related hospitalizations occurred per 100,000 persons (12.7) when compared to Los Angeles County (9.5). More people died of diabetes related conditions at a rate of (2.1) when compared to California (1.9) per 10,000 persons. People between the ages of 45 and 64 (1.5%) and over the age of 65 (1.0%) experienced the most hospital incidents resulting from diabetes compared to other age groups. Stakeholders indicated that more people are being diagnosed with diabetes at a younger age.

X Citrus Valley Health Partners Implementation Strategies

Priority Health Need 1: Increase Awareness and Access to Mental Health Programs and Services.

Goal: Expansion of Mental Health Services:

Strategies:

- Exploring possibility of partial hospitalization facility providing individual and group therapy in extended outpatient setting
- Developing joint grant proposals with community clinics to enhance mental health services in our community
- Expand access points:
- Developing outpatient mental health services in collaboration with new FQHC and staffed by psychiatric NP and licensed social workers
- Collaborate with other mental health programs on improving overall health to address "drivers" (obesity/overweight, diabetes, CV disease)

Goal: Improve Access

Strategies:

- Construction of new Community Health Clinic (FQHC) across from Inter-Community Hospital Campus
- Existing FQHC management team will operate; expected completion Summer 2014
- 12 exam rooms
- Health care teams
- Retail pharmacy

Priority Health Need 2: Increase Awareness and Improve Access to Programs, Education and Services focusing on the reduction on Obesity and Overweight conditions.

Goal: Increase awareness and access to Lighten Up SGV program, resources and services.

Strategies:

- Lighten Up SGV program is not a diet or meal plan, but a program utilizing community resources and our health care experts to provide education and support for health living
- Three components:
 1. Education, Web, Weigh-in Event
 2. Monthly series of FREE classes featuring presentations by CVHP experts and community partners
 3. Topics include: weight loss myths, ideas for shopping and cooking healthier, tips to start a fitness routine, how to deal with emotional eating and more
- Also includes special events and activities like Yoga, Zumba, Supermarket Tour and more
- Majority of classes held at Queen of the Valley in West Covina
- Dedicated program Web site found at www.lightenupsgv.com
- Social networking features to encourage discussion: Message boards (Weight Watchers, seniors, new moms), FREE user profile page, regular blog posts on weight loss and fitness tips
- Access to more than 100 health and weight loss articles
- Links to Healthy Partners – groups and businesses providing health services
- Dedicated FACEBOOK page

- Focus on youth:
 - Partnership with Bonita USD and cities of La Verne & San Dimas in 2012
 - Partnership with West Covina USD in 2013
 - Lower age requirement to encourage entire families to join
 - Create special classes aimed at educating children and their parents on healthy eating and healthy living
 - Focus more on becoming active and health education, rather than weight loss

Priority Health Need 3: Increase Diabetes Prevention Strategies and Disease Management Best Practices

Goal: Increase awareness of diabetes education and services and create greater access points for better chronic disease management.

Strategies:

- Preventable hospital admissions
- Access to care
 - Through chronic disease management
- Seeking grant funding for Diabetes Clinic on site at QVC campus
 - Recruitment of primary care physicians
 - Recruitment of specialty physicians
 - Manage patients outside hospital through new FQHC and partnerships with existing clinics and communities
 - Continue to seek partnerships

XI Citrus Valley Health Partners Evaluation Plans

Citrus Valley Health Partners will monitor and evaluate the strategies listed above for the purpose of tracking the implementation of those strategies as well as to document the anticipated impact. Plans to monitor will be tailored to each strategy and will include the collection and documentation of tracking measures, such as the number of grants made, number of financial resources spent, number of people reached/served, number and role of volunteers, and volunteer hours as an example.