

2021

COMMUNITY BENEFIT REPORT /
PROGRESS ON 2020-2022 COMMUNITY HEALTH IMPROVEMENT PLAN

Providence St. Mary Medical Center

Apple Valley, CA



To provide feedback on this CB Report or obtain a printed copy free of charge, please email Judy Wagner at Judy.Wagner@stjoe.org.



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EXECUTIVE SUMMARY

Providence continues its Mission of service in San Bernardino through Providence St. Mary Medical Center (SMMC). SMMC is an acute-care hospital with 213 licensed beds, founded in 1956 and located in Apple Valley, CA. The hospital's service area is the High Desert region, part of the San Bernardino County, including 373,422 people.

Providence St. Mary Medical Center dedicates resources to improve the health and quality of life for the communities it serves, with special emphasis on the needs of the economically poor and vulnerable. In Fiscal Year 2021 (July 1, 2020 – June 30, 2021), the hospital provided \$10,750,399 in Community Benefit in response to unmet needs. This includes \$19,324,702 in Medicare.

2020-2022 Providence St. Mary Medical Center Community Health Improvement Plan Priorities

As a result of the findings of our [2019 CHNA](#) and through a prioritization process aligned with our Mission, resources, and hospital strategic plan, Providence St. Mary Medical Center will focus on the following areas for its 2020-2022 Community Benefit efforts:

PRIORITY 1: ACCESS TO CARE

Access to Care – Creating awareness of current services and advocate together with residents to increase or bring new services and outreach to high need neighborhoods.

2021 Accomplishments

The hospital partnered with St Jude Neighborhood Clinics creating a local Federally Qualified Health Center named St. Mary Health Center providing primary care, diabetes services, counseling and COVID-19 vaccine care.

The hospital assisted a free health clinic to serve homeless persons while providing COVID-19 services. The hospital, in partnership with local school districts and Our Lady of the Desert Catholic Church, provided over 45,000 COVID-19 vaccines to the community.

The hospital partnered with The Public Health Institute and El Sol Neighborhood Education Center to conduct a High Desert wide COVID Health Equity Campaign reaching low income and communities of color. El Sol's work was recognized by Dr. Anthony Fauci and The White House in June 2021.

PRIORITY 2: MENTAL HEALTH AND SUBSTANCE USE

Mental Health and Substance Use – Creating awareness and education regarding mental health and substance use, particularly among the Latino/a population and students and ultimately bringing resources that address these in a meaningful and dignified way.

2021 Accomplishments

The hospital and its integrated medical group successfully started providing mental health services to its Medi-Cal patients.

The hospital continued its mental health partnership with Hesperia Unified School District. Together a framework for addressing the mental health and social and emotional learning needs of students is being implemented.

The hospital piloted a youth suicide navigation program assisting 65 youth prone to self-harm to connect with outpatient therapy as a relapse prevention strategy.

PRIORITY 3: HOMELESSNESS & HOUSING INSTABILITY

Homelessness and Housing Instability – Investing in housing and services to support those experiencing homelessness to increase access to housing and meet the chronic health needs of populations experiencing homelessness.

2021 Accomplishments

The hospital continued its membership on the City of Victorville’s Homeless Taskforce proposing development of a comprehensive campus and funding plan. The hospital provided grants helping establish a 24-hr. emergency shelter.

The hospital recruited housing partners and trained residents on city advocacy on the community’s need for affordable housing. The hospital began work with Providence Supportive Housing on an innovative housing complex serving low-income seniors on hospital donated land.

PRIORITY 4: OBESITY

Obesity – Addressing access to healthy foods, creating more active communities, and addressing high rates of obesity and diabetes. Creating opportunities for physical activity and nutrition education. Advocating for more supermarkets in neighborhoods with low incomes and increasing access to parks that will lead to healthier communities.

2021 Accomplishments

The hospital partnered with non-profits and Christ the Good Shepherd Catholic Church to open an emergency food program serving Adelanto residents. The hospital’s COVID emergency grants started a food home delivery program serving housebound seniors.

The hospital continued nutrition education targeting low-income neighborhoods and increased the supply of fresh fruits and vegetables provided to families living in affordable housing.

Providence

At Providence, we use our voice to advocate for vulnerable populations and needed reforms in health care. We are also pursuing innovative ways to transform health care by keeping people healthy, and

making our services more convenient, accessible, and affordable for all. In an increasingly uncertain world, we are committed to high-quality, compassionate health care for everyone – regardless of coverage or ability to pay. We help people and communities’ benefit from the best health care model for the future – today.

Together, our 120,000 caregivers (all employees) serve in 52 hospitals, 1,085 clinics and a comprehensive range of health and social services across Alaska, California, Montana, New Mexico, Oregon, Texas, and Washington.

Providence across five western states:

- [Alaska](#)
- [Montana](#)
- [Oregon](#)
- [Northern California](#)
- [Southern California](#)
- [Washington](#)

The Providence affiliate family includes:

- [Covenant Health in West Texas](#)
- [Facey Medical Foundation in Los Angeles, CA.](#)
- [Hoag Memorial Hospital Presbyterian in Orange County, CA.](#)
- [Kadlec in Southeast Washington](#)
- [Pacific Medical Centers in Seattle, WA.](#)
- [Swedish Health Services in Seattle, WA.](#)

As a comprehensive health care organization, we are serving more people, advancing best practices and continuing our more than 100-year tradition of serving the poor and vulnerable. Delivering services across seven states, Providence is committed to touching millions of more lives and enhancing the health of the American West to transform care for the next generation and beyond.

INTRODUCTION

Who We Are

Our Mission	As expressions of God’s healing love, witnessed through the ministry of Jesus, we are steadfast in serving all, especially those who are poor and vulnerable.
Our Vision	Health for a Better World.
Our Values	Compassion — Dignity — Justice — Excellence — Integrity

Providence St. Mary Medical Center is an acute-care hospital founded in 1956 and located in Apple Valley, CA. The hospital has 213 licensed beds, a staff of more than 1,750 and professional relationships with more than 450 local physicians. Major programs and services offered to the community include the following: care for breast cancer, care for diabetes, cardiology, emergency services, imaging, maternity care, outpatient testing, rehabilitation, respiratory services, stroke care, surgical services, vascular services, care for women and children and wound care.

Our Commitment to Community

Providence St. Mary Medical Center dedicates resources to improve the health and quality of life for the communities we serve. During Fiscal Year 2021 (July 1, 2020 – June 30, 2021), Providence St. Mary Medical Center provided \$10,750,399 in Community Benefit¹ in response to unmet needs and to improve the health and well-being of those we serve in in the High Desert Region part of San Bernardino County.

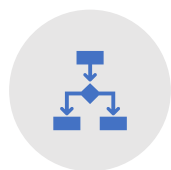
Health Equity

At Providence St. Joseph Health, we acknowledge that all people do not have equal opportunities and access to living their fullest, healthiest lives due to systems of oppression and inequities. We are committed to ensuring health equity for all by addressing the underlying causes of racial and economic inequities and health disparities. Our Vision is “Health for a Better World,” and to achieve that we believe we must address not only the clinical care factors that determine a person’s length and quality of life, but also the social and economic factors, the physical environment, and the health behaviors that all play an active role in determining health outcomes.

To ensure that equity is foundational to our CHIP, we have developed an equity framework that outlines the best practices that each of our hospital will implement when completing a CHIP. These practices include, but are not limited to the following:

¹ Per federal reporting and guidelines from the Catholic Health Association.

Figure 1. Best Practices for Centering Equity in the CHIP



Address root causes of inequities by utilizing evidence-based and leading practices



Explicitly state goal of reducing health disparities and social inequities



Reflect our values of justice and dignity



Leverage community strengths

Community Benefit Governance

Providence St. Mary Medical Center demonstrates organizational commitment to the community benefit process through the allocation of staff time, financial resources, participation, and collaboration with community partners. The Chief Mission Integration Officer and Director, Community Health Investment is responsible for coordinating implementation of State and Federal 501r requirements.

A charter approved in 2007 and revised in 2020 established the formation of the SMMC Community Health Committee. The role of the Community Health Committee is to support the Board of Trustees in overseeing community benefit issues. The Committee acts in accordance with a Board-approved charter. The Community Health Committee is charged with developing policies and programs that address identified needs in the service area particularly for underserved populations, overseeing development and implementation of the Community Health Needs Assessment (CHNA) and Community Health Improvement Plan (CHIP), and overseeing and directing the Community Benefit (CB) activities.

The Community Health Committee has a minimum of eight members including three members of the Board of Trustees. Current membership includes four members of the Board of Trustees and three community members. A majority of members have knowledge and experience with the populations most likely to have disproportionate unmet health needs. The Community Health Committee generally meets quarterly.

Roles and Responsibilities

Senior Leadership

- Chief Executive and senior leaders including the hospital's Chief Mission Integration Officer, are directly accountable for CB performance.

Community Health Committee (CHC)

- CHC serves as an extension of trustees to provide direct oversight for all charitable program activities and ensure program alignment with “Advancing the State of the Art of Community Benefit” (ASACB) Five Core Principles. It includes diverse community stakeholders. Trustee members on CHC serve as ‘board level champions.’
- The Committee provides recommendations to the Board of Trustees regarding budget, program targeting and program continuation or revision.

Community Health (CH) Department

- Manages CB efforts and coordination between CH and Finance departments on reporting and planning.
- Manage data collection, program tracking tools and evaluation.
- Develops specific outreach strategies to access identified Disproportionate Unmet Health Needs (DUHN) populations.
- Coordinates with clinical departments to reduce inappropriate ER utilization.
- Advocates for CB to senior leadership and invests in programs to reduce health disparities.

Local Community

- Partnership to implement and sustain collaborative activities.
- Formal links with community partners.
- Provide community input to identify community health issues.
- Engagement of local government officials in strategic planning and advocacy on health-related issues on a city, county or regional level.

Planning for the Uninsured and Underinsured

Our Mission is to provide quality care to all our patients, regardless of ability to pay. We believe that no one should delay seeking needed medical care because they lack health insurance. That is why Providence St. Mary Medical Center has a Financial Assistance Program (FAP) that provides free or discounted services to eligible patients.

One way Providence St. Mary Medical Center informs the public of FAP is by posting notices. Notices are posted in high volume inpatient and outpatient service areas. Notices are also posted at locations where a patient may pay their bill. Notices include contact information on how a patient can obtain more information on financial assistance as well as where to apply for assistance. These notices are posted in English and Spanish and any other languages that are representative of 5% or greater of patients in the hospital’s service area. All patients who demonstrate lack of financial coverage by third party insurers are offered an opportunity to complete the Patient Financial Assistance Application and are offered information, assistance, and referral as appropriate to government sponsored programs for which they may be eligible. For information on our Financial Assistance Program click

<https://www.providence.org/obp/ca>. In FY21, Providence St. Mary Medical Center provided \$5,363,557.

Medi-Cal (Medicaid)

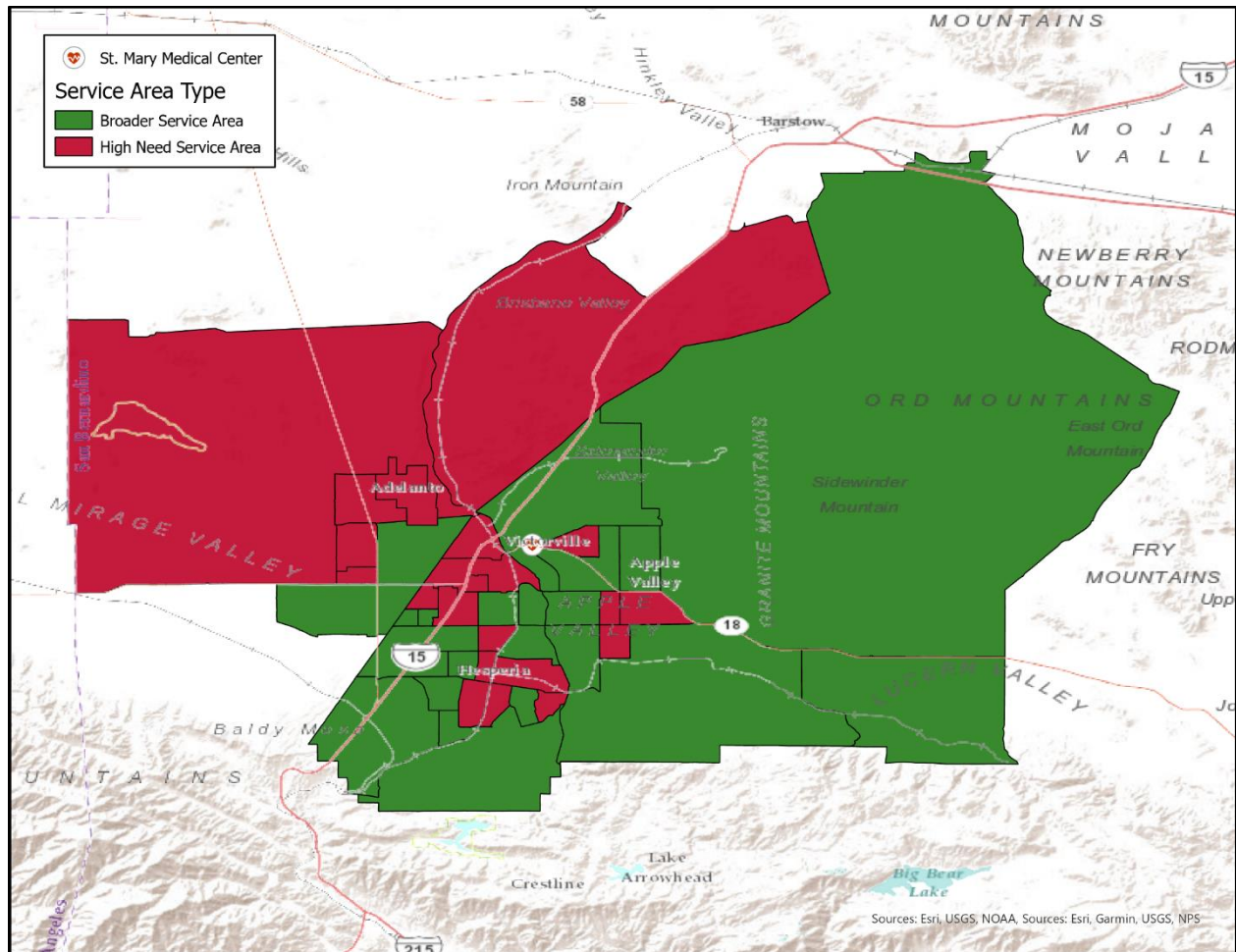
Providence St. Mary Medical Center provides access to the uninsured and underinsured by participating in Medicaid, also known as Medi-Cal in California. In FY21, Providence St. Mary Medical Center provided \$0 in Medicaid shortfall. The hospital received \$75,620,956 income from the Medi-Cal Hospital Quality Assurance Fee program. If it was not for the Hospital Quality Assurance Fee received, Unpaid cost of Medi-Cal would have been \$63,065,354.

OUR COMMUNITY

Description of Community Served

Providence St. Mary Medical Center’s service area is in the High Desert part of San Bernardino County, and includes a population of approximately 373,422 people. The population in the High Desert total service area makes up 17% of San Bernardino County.

Figure 2. Providence St. Mary Medical Center’s Total Service Area



Of the over 373,422 permanent residents of the High Desert, part of San Bernardino County roughly 44% live in the “high need” area, defined by lower life expectancy at birth, lower high school graduation rates, and more households at or below 200% FPL compared to census tracts across the county. For reference, in 2020, 200% FPL represents an annual household income of \$52,400 or less for a family of four. These households are more likely to regularly make spending tradeoffs regarding utilities, rent, groceries, medicine, and other basic expenses.

Community Demographics

POPULATION AND AGE DEMOGRAPHICS

Of the over 373,422 permanent residents in the total service area, the male-to-female distribution is roughly equal across geographies.

The high need service area has a higher percentage of people under 34 years of age, 66.9%, compared to 58% in the broader community.

POPULATION BY RACE AND ETHNICITY

Individuals identifying as Hispanic had a higher percentage living in high need service areas, 56.3% versus the broader service area, 45.8%. Blacks also had a higher percentage living in high need service areas, 12.9% in comparison to 9.2% living in broader service areas. The same was noted for individuals identifying as “other” race, 27.3% versus 20.8%.

People identifying as Asian and white were less likely to live in high need census tracts. For Asians, 2.5% lived in high need service areas and 4.1% in the broader service area. For whites, 49.0% lived in high need service areas, and 58.6% in the broader community.

SOCIOECONOMIC INDICATORS

Table 1. Income Indicators for High Desert Service Area

Indicator	Broader Service Area	High Need Service Area	San Bernardino County
Median Income Data Source: American Community Survey Year: 2019	\$61,846	\$41,164	\$60,761
Percent of Renter Households with Severe Housing Cost Burden Data Source: American Community Survey Year: Estimates based on 2013 – 2017 data	25.7%	35.3%	28.7%

The San Bernardino County and Broader Service Area median income is almost the same. What is striking, is that the median income earned in the high need service area is almost \$20,000 lower than that of the broader service area and county median income.

Severe housing cost burden represents households that spend 50% or more of their income on housing costs. A greater proportion of renter households are severely housing burdened in the high need service area (one out of every three households, 35.3%) in comparison to the broader service area (one out of every four households, 25.7%).

Full demographic and socioeconomic information for the service area can be found in the [2019 CHNA for Providence St. Mary Medical Center](#).

COMMUNITY NEEDS AND ASSETS ASSESSMENT PROCESS AND RESULTS

Summary of Community Needs Assessment Process and Results

Improving the health of our communities is foundational to our Mission and deeply rooted in our heritage and purpose. Our Mission calls us to be steadfast in serving all, with a special focus on our most economically poor and vulnerable neighbors. This core belief drives the programs we build, investments we make, and strategies we implement.

Knowing where to focus our resources starts with our Community Health Needs Assessment (CHNA), an opportunity in which we engage the community every three years to help us identify and prioritize the most pressing needs, assets, and opportunities. The 2019 CHNA was approved by the SMMC Community Health Committee on November 6, 2020.

Significant Community Health Needs Prioritized

Through a collaborative process engaging Community Health Committee members, and the Director of Community Health Investment, the hospital worked from a list of the eighteen (18) health and social needs identified by the CVS process. Staff developed a point system to assign each of the eighteen (18) identified needs to gain perspective and develop a hierarchy of which top needs have the potential to offer the highest impact in the High Desert. Each need was listed, and assessed based on the following:

- Trend over time (Getting “Worse” or “Better”)
- Impact on low-income or communities of color (“Very High” to “Very Low”)
- Are “High Need Areas” worse off than state averages? (“Yes” or “No”)
- Opportunity for Impact (“Low” to “Very High”)
- Alignment with System Priorities (“Yes” or “No”)
- Community Vital Signs Priority (“Yes” or “No”)
- Attorney General Requirement (“Yes” or “No”)

Based upon the scoring system and discussion, SMMC’s Community Health Committee identified the following priorities:

PRIORITY 1: ACCESS TO CARE

Creating awareness of current services and advocate with residents to increase or bring new services and outreach to high need neighborhoods.

PRIORITY 2: MENTAL HEALTH AND SUBSTANCE USE

Creating awareness and education regarding mental health and substance use, particularly amongst the Latino and African American populations and youth, and ultimately bringing resources that address these in a meaningful and dignified way.

PRIORITY 3: HOMELESSNESS & HOUSING INSTABILITY

Investing in housing and services to support those experiencing homelessness to increase access to housing and meet the chronic health needs of populations experiencing homelessness.

PRIORITY 4: OBESITY

Creating opportunities for physical activity and nutrition education. Advocating for more supermarkets in neighborhoods with low incomes and increasing access to parks will lead to healthier communities.

SMMC also assists the community as it addresses crime and economic development initiatives led by county and city governments, law enforcement and the education community.

Needs Beyond the Hospital's Service Program

No hospital facility can address all the health needs present in its community. We are committed to continuing our Mission by partnering with like-minded partners that count with the capacity and expertise to address the needs of High Desert Residents.

Furthermore, Providence St. Mary Medical Center will endorse local non-profit organizations to apply for funding through the St. Joseph Community Partnership Fund. Organizations that receive funding provide specific services and resources to meet the identified needs of underserved communities throughout SMMC's service areas.

The following community health needs identified in the ministry CHNA will not be address and an explanation is provided below:

- **Diabetes:** This need is tied closely to the Identified Priority, "Obesity." The hospital's grant to St. Jude Neighborhood Health Center, a local Federally Qualified Health Centers, supports its American Diabetes Association Certified program serving mostly uninsured and underinsured residents. Additionally, the community helped start a free clinic named Symba Center. Symba provides care to uninsured/undocumented persons from a clinic operated within a Victorville homeless shelter. Symba services include testing, prescribing low cost and free medications, diabetes and nutrition education, follow-up, and navigation.
- **Food and Nutrition:** This need is tied closely to the Identified Priority, "Obesity." Like-minded partners have integrated a regional approach to address issues associated to living in food deserts, through the "High Desert Food Collaborative." The hospital's service area has been identified by county public health as having 17 high poverty/ low healthy food access census tracts, the most in the county. The Los Angeles based Food Forward is donating farmer market recovered fresh produce to residents of Adelanto, Apple Valley, Barstow, Hesperia, Phelan, and Victorville. In 2020, Food Forward provided 3,000,000 pounds fruits and vegetables to food the collaborative's 96 partners.
- **Physical Activity:** This need is tied closely to the Identified Priority, "Obesity" and will be addressed by the Department of Public Health, County of San Bernardino" grant. The hospital will continue its advocacy with city and schools expanding the US Department of Transportation's Safe Routes to Schools program and the expansion of Adelanto's Park system.

- **Poverty:** the hospital collaborates with a local San Bernardino County Workforce Development office encouraging job fairs in Adelanto and old town Victorville. Additionally, as a Catholic institution we follow Catholic Social Teaching, and regarding jobs and salaries believe that “the economy must serve people, not the other way around. Work is more than a way to make a living; it is a form of continuing participation in God’s creation. If the dignity of work is to be protected, then the basic rights of workers must be respected – the right to productive work, to decent fair wages, to the organization and joining of unions, to private property and to economic initiative.” To this end the hospital is the largest healthcare partner in a regional student career initiative name Mountain Desert Career Pathways. Additionally, the hospital has started an equity campaign bringing health careers to low-income children living in old town Victorville.
- **Environmental Pollution:** Organizations working to address air quality include The Mojave Desert Air Quality Management District and the City of Victorville. The City’s April 2021 Environmental Justice Existing Conditions Assessment reports the southeastern portion of the city (old town Victorville) have higher asthma rates compared to the rest of the city. The city averages 82 asthma emergency department visits per 10,000 people where the average asthma prevalence for the County of San Bernardino is 67 visits per 10,000 people. The city will address this condition by renovating the community with new housing and improved street circulation. The hospital will advocate that the county’s mobile *Breathmobile* offer education and asthma testing. In addition Providence St. Joseph Health has committed to being carbon negative by 2030. This effort will involve all hospital staff.
- **Crime:** A project funded by the St. Joseph Health Community Partnership Fund, addresses crime and safety. Residents of Old Town Victorville have formed Revive Our Old Town (R.O.O.T.), a grassroot efforts addressing public safety, crime, and homelessness. R.O.O.T. advocates to city and business leaders that reviving old town will attract additional investment and improve the area’s quality of life. In November 2020, Victorville residents passed Measure P authorizing an additional 1% local tax (now 8.75%) generating up to \$15 million per year. An oversight committee was formed in April 2021 to begin addressing crime, fire, upgrading the library and park resources and addressing homelessness. In August 2021, Victorville approved formation of a Community Revitalization Investment Board (CRIA). The CRIA is authorized to spend tax increment in old town Victorville to include infrastructure improvements, assistance to businesses and land acquisition and development of affordable housing.
- **Smoking/Tobacco/Vaping:** The California Health Collaborative is active in the High Desert. This organization educates, informs, and drives policy to reduce tobacco related health disparities, improve health equity and reduce secondhand smoke in public and non-recreational places. The campaign works through youth who advocate and educate. Youth groups are currently working with Hesperia law enforcement in a decoy operation designed to identify establishments selling to underage youth. A youth group has formed to begin addressing the City of Victorville including the old town community previously mentioned as having elevated air particulate and asthma induced hospital Emergency Room visits.

COMMUNITY HEALTH IMPROVEMENT PLAN

Summary of Community Health Improvement Planning Process

Providence St. Mary Medical Center developed a three-year Community Health Improvement Plan (CHIP) to respond to these prioritized needs in collaboration with community partners, considering resources, community capacity, and core competencies.

The 2020- 2022 Community Health Improvement Plan (CHIP) process was impacted by the SARS-CoV-2 virus and COVID-19, which has impacted all our communities. While we have focused on crisis response, it has required a significant re-direction of resources and reduced community engagement in the CHIP process.

This CHIP is currently designed to address the needs identified and prioritized through the 2019 CHNA, though COVID-19 will have substantial impacts on our community needs. These impacts are likely to exacerbate some of the needs identified, and cause others to rise in level of priority. While this is a dynamic situation, we recognize the greatest needs of our community will change in the coming months, and it is important that we adapt our efforts to respond accordingly. We are committed to supporting, strengthening, and serving our community in ways that align with our Mission, engage our expertise, and leverage our Community Benefit dollars in the most impactful ways.

Providence St. Mary Medical Center anticipates that implementation strategies may change and therefore, a flexible approach is best suited for the development of its response to the CHNA. For example, certain community health needs may become more pronounced and require changes to the initiatives identified by Providence St. Mary Medical Center in the enclosed CHIP.

Addressing the Needs of the Community: 2020- 2022 Key Community Benefit Initiatives and Evaluation Plan

2021 Accomplishments

COMMUNITY NEED ADDRESSED #1: ACCESS TO CARE

Initiative Name

Expanding access to health services serving vulnerable populations and rural communities

Population Served

Low-income residents.

Long-Term Goal(s)/ Vision

Expanded services to rural populations and people experiencing vulnerability, particularly those with low incomes, those experiencing homelessness, and those with complex health and/or social needs.

Table 2. Strategies and Strategy Measures for Addressing Access to Care

Strategy	Population Served	Strategy Measure	Baseline	FY21 Accomplishments
1. Develop a plan to expand access to clinical services	Youth, families, older adults	# Of clinic partners	Two (St. Jude/ St. Mary Health Center and Borrego)	Third clinic partner named Symba Center in place serving homeless persons
2. Assess rural communities for health and social services	Students, adults, and older adults	# Of rural communities assessed for health needs	None	Two (Adelanto needs: Urgent care, mental health and dental services); (Snowline communities requesting health assessment; expansion of primary and specialty care services)
3. Implement a navigator for the hospital Emergency Department	Patients with low incomes	# Of patients receiving outpatient navigation	Navigation of patients by St. Mary Community Clinic ends with 30 patients	Program not in place in 2021; proposed again for 2022.
4. Support St. Jude Neighborhood Health Center FQHC	Inland Empire Health Plan (IEHP) members; patients that are uninsured and/or undocumented	# Of patient visits	24,795 patient visits	16,520 patient visits

Evidence Based Sources

www.cdc.gov

www.Communityschools.org

Resource Commitment

\$100,000 each year to develop then implement and report on providing health services to rural communities and vulnerable populations.

Key Community Partners

Snowline School District, Snowline Community Cabinet, St. Mary High Desert Medical Group, St Jude Neighborhood Clinic, Borrego Health, Symba Health, San Bernardino County Department of Public Health, San Bernardino County Department of Behavioral Health, City of Victorville, San Bernardino County Office of Homeless Services, Revive Our Old Town (ROOT) Institute For Public Strategies, San Bernardino County Cal-Fresh program, City of Victorville's Homeless Task Force, Illumination Foundation]

2021 Accomplishments

The Hospital helped establish Symba Health Center that expanded health services to the poor, especially homeless persons. Symba Health Clinic joins St. Mary Health Center and Borrego Health in a coordinated clinic campaign. All three clinics report visits were impacted by the COVID-19 pandemic. The drop of patient visits by St. Mary Health Center is the result of fixed clinic closures and not operating a mobile clinic service. Borrego's mobile service providing primary care and dental services was also impacted. All three clinic partners started providing COVID-19 testing and/or vaccines and coordinated vaccine services as part of San Bernardino County's COVID Vaccine Equity Plan:

<https://sbcovid19.com/vaccine/>

The hospital, in coordination with San Bernardino County Public Health and local school districts, provided a community-wide vaccine service starting February 2021 to the present. Over 50,000 vaccine doses have been provided by the hospital. Additionally, the hospital implemented a regional COVID Vaccine equity project funded by Providence Health. The campaign provided thousands of COVID masks as well as education on protection and access to testing and vaccines.

COMMUNITY NEED ADDRESSED #2: MENTAL HEALTH AND SUBSTANCE USE

Initiative Name

Help is Here Campaign, Work2BeWell mental health campaign

Population Served

Youth and adults

Long-Term Goal(s)/ Vision

Improve mental health treatment for youth, adults and people with a substance use disorder.

Table 3. Strategies and Strategy Measures for Addressing Mental Health and Substance Use

Strategy	Population Served	Strategy Measure	Baseline	FY21 Accomplishments
1. Implement Work2BeWell and Mental Health First Aid where the # of student-led events are reported along with Care Solace services to students seeking therapy	Students and young adults	# Of schools implementing Work2BeWell # Of Hesperia students seeking services thru Care Solace services	0 0	1 (Cedar Middle School) From July 2020 to June 30, 2021: 3,820 student requests with connections to mental health services
2. Improved Emergency Room care for patients where length of stay is reduced and the # of youth “connected to therapy” is reported	Youth and adults	# Of youth prone to self-harm or go onto crisis in out-patient navigation	44 youth	64 youth in weekly navigation; 95% participating in outpatient therapy; 1 youth reported relapse to self-harm
3. A stigma reduction campaign launched with support of public and private partners	Youth and adults	Campaign Plan	Help is Here Campaign conceived	Help is Here Campaign started; resource of local mental health services published; video and youth social media campaign started

Evidence Based Sources

www.sciencedaily.com/2017/08/170810173331.html

Resource Commitment

\$150,000 each year to develop, implement and report progress on each strategy.

Key Community Partners

Hesperia and local school districts; Work2BeWell/Providence Health, St. John of God Healthcare, Snowline School District, Victor Valley College, San Bernardino County Department of Behavioral Health, Providence Health's Behavioral Health Institute, Mind OC, Stigma Free OC, Every Mind Matters, Inland Empire Health Plan, Desert Mountain Children's Center, Life Skills Awareness, Ron Powell Consultants, High Desert Homeless Services, Illumination Foundation, City of Victorville, National Alliance for Mental Illness – Inland Valley, St. Mary High Desert Medical Group, Kaiser Permanente's Fontana Community Benefit program and Main Street Hesperia Mental Health Clinic.

2021 Accomplishments

Hesperia Unified School District (HUSD) begins implementation of its Framework integrating mental health and social and emotional learning. Care Solace service connects over 3,000 students seeking mental health services. HUSD reports plans to invest LCAP funds into expanded mental health services with additional counseling provided at schools.

A Help is Here Campaign started with development of a resource guide listing mental health services. The campaign also began engaging youth in developing social media on mental health and wellness. A sample video is: <https://app.frame.io/reviews/0c3a0e2c-edb9-441f-8762-9c413a563888/86d23ce6-7366-4b1d-abc2-fe318c698853> and Help is Here <https://www.providence.org/news/uf/653555275>

The hospital's youth suicide navigation program served 64 youth prone to self-harm with weekly outpatient navigation. Navigation reports 95% of youth are active in outpatient therapy and only one child relapsed to wanting to self-harm.

COMMUNITY NEED ADDRESSED #3: HOMELESSNESS AND AFFORDABLE HOUSING

Initiative Name

Homelessness Solutions

Population Served

People experiencing chronic homelessness and families with low-income

Long-Term Goal(s)/ Vision

Reduce chronic homelessness, support City of Victorville developing a comprehensive campus to address homelessness which will include housing, health and social services and expand the availability of affordable housing to extremely low income and low-income households.

Table 4. Strategies and Strategy Measures for Addressing Homelessness and Affordable Housing

Strategy	Population Served	Strategy Measure	Baseline	2021 Accomplishment
1. Implement a homeless navigator position for the hospital	People experiencing chronic homelessness	One homeless navigator hired	No homeless navigation provided	Budget for position approved and candidates identified to start in 2022
2. Support Development of a wellness campus for people experiencing homelessness by the City of Victorville to include recuperative care and mental health and social services	People experiencing chronic homelessness	A City approved site, design, and funding plan	No plan	Site and design approved and fundraising in progress.

<p>3. Develop a housing campaign in Apple Valley and Victorville with trained residents advocating for affordable housing</p>	<p>Families with low incomes</p>	<p># Of affordable housing projects proposed</p>	<p>No organized campaign or housing projects identified</p>	<p>Apple Valley: proposed 100 units by Coachella Valley Housing Coalition Victorville: proposed 194 units by Azure Development for old town</p>
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Evidence Based Sources

www.navigationroundtable.org

www.healthypeople.gov/2020/topics-objectives/topic/social-determinants-of-health

Resource Commitment

\$100,000

Key Community Partners

City of Victorville Homeless Taskforce, San Bernardino County Office of Homeless Services, GIPS, The Family Assistance Program, Inland Empire Health Plan, Loma Linda Medical Center, Wells Fargo Bank, Habitat for Humanity, Town of Apple Valley, Housing and Community Development, City of Victorville Planning Department.

2021 Accomplishment

Hospital funded housing campaign has identified housing projects and economic revitalization in the Town of Apple Valley and the City of Victorville. The town has drafted a new housing plan with a 10-acre project proposed to be developed by Coachella Valley Housing Collaborative. The project would develop 98 units of housing and include community rooms where social services would be provided.

The City of Victorville’s updated housing plan has added a new designation High Density Residential (HDR) allowing 20-30 dwelling units per acre. This change accommodates the lower income default density and provides additional housing opportunities. The city of Victorville is also slated to approve a developer building 194 units of affordable housing in old town Victorville.

COMMUNITY NEED ADDRESSED #4: OBESITY

Initiative Name

Cal Fresh Healthy Living in the High Desert

Population Served

Engage the community, food system and health providers to improve healthy food access to residents with emphasis on persons eligible for Cal Fresh benefits, physician partners screening patients for food as a social determinant of health and improving local access to healthy foods serving the community.

Long-Term Goal(s)/ Vision

Bringing together the medical and food systems to better serve patients and the community’s access to healthy foods.

Table 5. Strategies and Strategy Measures for Addressing Obesity

Strategy	Population Served	Strategy Measure	Baseline	2021 Accomplishment
1. Food Insecurity Screenings	Patients with low-incomes and experiencing food insecurity	# Of food insecurity screenings in a health care setting	0	327 patients screened
2. Lack of parks and walkable neighborhoods	Adelanto residents	# Of streets and parks proposed for improvement	0	6 streets serving 3 schools proposed in plan One new Park proposed at intersection of Chamberlain Way and Jonathan Street – residents provide input on park amenities
3. Food Insecurity	People with low-income	# Of persons provided food assistance	147,000 78,000 unduplicated	172,000 90,000 unduplicated

Evidence Based Sources

www.healthypeople.gov/2020/topics-objectives/topic/social-determinants-of-health

www.wp.sbcounty.gov/wp-content/uploads/sites/7/2018/01/Food-Security-and-Obesity-in-SanBernardino-County-2017-pdf

Resource Commitment

Staff and funding to implement campaign engaging physicians, food system, residents, and schools

Key Community Partners

County Department of Public Health Nutrition Department, St. Mary High Desert Medical Group, Physicians, FQHC clinics, local schools, Community Health Action Network

2021 Accomplishments

Grants by hospital and CARES Act funds from the City of Adelanto formed the city’s first weekly fresh produce food hub at Christ the Good Shepherd Catholic Church. The food program successfully integrated health care services providing COVID vaccine education and testing and health insurance enrollment into Medi-Cal.

The region’s food bank successfully expanded its access to free fruits and vegetables recovered from Los Angeles markets and central California farms. The food bank added additional freezer space to increase chilled storage capacity. Hospital grants also expanded a food home delivery service to 300 seniors homebound during California’s emergency request to stay at home order.

Other Community Benefit Programs

Table 5. Other Community Benefit Programs in Response to Community Needs

Initiative (Community Need Addressed)	Program Name	Description	Population Served (Low Income, Vulnerable or Broader Community)
1. Access to Care	Maternal Infant Health	Lactation Services	Broader Community
2. Poverty thru Workforce Development	Health Careers	College and High School students engaged in health career programs	Broader Community
3. Obesity/Nutrition	Food donations	Hospital kitchen donations to shelters	Low Income

FY21 COMMUNITY BENEFIT INVESTMENT

In FY21 Providence St. Mary Medical Center invested a total of \$10,750,399 in key community benefit programs. \$9,863,238 was invested in community health programs for the poor. \$5,363,557 in charity care was provided, \$0 in unpaid cost of Medi-Cal, including the Hospital Quality Assurance Fee Program, and \$887,161 in community benefits for the broader community. The hospital received \$75,620,956 income from the Medi-Cal Hospital Quality Assurance Fee program for FY21. If it was not for the Hospital Quality Assurance Fee received, Unpaid Cost of Medi-Cal would have been \$63,065,354. Providence St. Mary Medical Center applies a ratio of cost to charge to quantify financial assistance at cost, unreimbursed Medicaid, other means-tested government programs. The cost to charge ratio is aligned with the IRS Form 990, Schedule H Worksheet 2. Our community benefit program expenses are reported in alignment with the total cost incurred to run our programs, and we offset any restricted revenue received to arrive at our net community benefit expense.

FY2021 PROVIDENCE ST. MARY MEDICAL CENTER
(July 1, 2020-June 30, 2021)

CA Senate Bill (SB) 697 Categories	Community Benefit Program Categories	Net Benefit
Medical Care for Vulnerable Populations	Financial Assistance at cost	5,363,557
	Unpaid cost of Medicaid	0
	Unpaid other govt. programs	
Other Benefits for Vulnerable Populations	Community Health Improvement Services	1,457,619
	Subsidized Health Services	211,886
	Cash and In-Kind Contributions	2,584,502
	Community Building	
	Community Benefit Operations	245,674
	Total Benefits for Vulnerable Populations	9,863,238
Other Benefits for the Broader Community Populations	Community Health Improvement Services	811,569
	Subsidized Health Services	
	Cash and In-Kind Contributions	
	Community Building	
	Community Benefit Operations	
Health Profession Education, Training and Research	Health Professions Education and Research	75,592
	Total Benefits for the Broader Community	887,161
	Total Community Benefit	10,750,399

Medical Care Services for the Broader Community	Total Medicare shortfall	19,324,702
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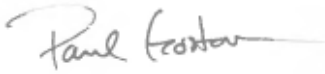
Telling Our Community Benefit Story: Non-Financial Summary of Accomplishments

The hospital serves on the San Bernardino County Community Vital Signs Community Transformation Plan. The plan calls for collaboration across all sectors to create a vibrant, physically, and environmentally healthy county in the next 20 years and outlines how ten (10) elements – jobs/economy, education, housing, public safety, infrastructure, quality of life, environment, wellness, water, and image are all part of an inter-connected system that relies on all elements to work in concert to improve the quality of life for the County’s residents. The hospital’s unique role is advocating for the needs of the Victor-valley region and shaping how resources are allocated. This work has resulted in increased investments in transportation funds supporting local Safe Routes to Schools grants; development of health navigation trainings and strategies supporting the expansion of affordable housing.

The hospital serves on the County’s Desert regional homeless committee and the City of Victorville’s Homeless Solutions Taskforce. The city and county are working together to secure federal and state grants that develops new homeless shelters to include health clinics and social services.

2021 CB REPORT GOVERNANCE APPROVAL

This 2021 Community Benefit Report was adopted by the Community Health Committee of the hospital on [insert date]. The final report was made widely available by Nov 15, 2021.



10/20/2021

Paul Gostanian
Chair

Date

St. Mary Community Health Committee

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Providence

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Together, our 120,000 caregivers (all employees) serve in 52 hospitals, 1,085 clinics and a comprehensive range of health and social services across Alaska, California, Montana, New Mexico, Oregon, Texas, and Washington.

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As a comprehensive health care organization, we are serving more people, advancing best practices, and continuing our more than 100-year tradition of serving the poor and vulnerable. Delivering services across seven states, Providence is committed to touching millions of more lives and enhancing the health of the American West to transform care for the next generation and beyond.