St. Joseph Health, Petaluma Valley

Fiscal Year 2013 COMMUNITY BENEFIT REPORT
PROGRESS ON FY12 - FY14 CB PLAN/IMPLEMENTATION STRATEGY REPORT

St. Joseph Health
Petaluma Valley

TABLE OF CONTENTS

[1] Non-financial summary of accomplishments are referred to in SB 697 as non-quantifiable benefits.

EXECUTIVE SUMMARY

Our Mission
To extend the healing ministry of Jesus in the tradition of the Sisters of St. Joseph of Orange by continually improving the health and quality of life of people in the communities we serve.

Our Vision
We bring people together to provide compassionate care, promote health improvement and create healthy communities.

Our Values
The four core values of St. Joseph Health -- Service, Excellence, Dignity and Justice -- are the guiding principles for all we do, shaping our interactions with those whom we are privileged to serve.

Who We Are and Why We Exist

St. Joseph Health, Petaluma Valley Hospital (PVH), founded by the Sisters of St. Joseph of Orange, has been serving the healthcare needs of families in the community for more than 50 years. During this time, its mission has remained the same: to continually improve the health and quality of life of people in the communities served. Part of a statewide network of hospitals and clinics known as St. Joseph Health (SJH), PVH is part of a countywide ministry that includes two hospitals, urgent care and community clinics, hospice, home health services, and other facilities for treating the healthcare needs of the community in Sonoma County and the region. The ministry's core facilities are Petaluma Valley Hospital, an 80-bed acute care hospital, and Santa Rosa Memorial Hospital, a full service 289-bed acute care hospital that includes a Level II trauma center for the coastal region from San Francisco to the Oregon border.

As a values based organization, St. Joseph Health has a long-standing commitment to the communities it serves. SJH works under the premise of "Value Standards." SJH' Value Standard Seven: Community Benefit states, "We commit resources to improving the quality of life in the communities we serve, with special emphasis on the needs of the poor and underserved." Ten percent of the net income is dedicated to community benefit. In Sonoma County, PVH partners with St. Joseph Health, Santa Rosa Memorial to carry out its Community Benefit actions through strategic elements that address the political, social, behavioral and physiological determinants of health: Healthy Communities, Community Health and Advocacy. The primary strategies employed to address community needs are community capacity building, improving health outcomes for vulnerable populations and reducing social isolation of special populations.

Community Benefit programs and clinics include: Neighborhood Care Staff community organizing program, Agents of Change Training in Our Neighborhoods

leadership training, Circle of Sisters after-school program, St. Joseph Mobile Health Clinic, House Calls/Home Sweet Home, *Promotores de Salud* health promotion program, St. Joseph Dental Clinic, *Cultivando la Salud* Mobile Dental Clinic and, Mighty Mouth dental disease prevention program. Given the changing context for its work, St. Joseph Health, Petaluma Valley Hospital anticipates the need for a flexible approach in its response to community needs. For example, certain community health needs may become more pronounced and require changes to the initiatives identified by PVH in the Community Benefit Plan/Implementation Strategy.

St. Joseph Health, Petaluma Valley Hospital (PVH) demonstrates organizational commitment to the community benefit process through the allocation of staff, financial resources, participation and collaboration. The Area Vice President of Mission Integration is responsible for coordinating implementation of Senate Bill 697 provisions as well as the opportunities for Executive Management Team, physicians and other staff to participate in planning and carrying out the Community Benefit Plan. The trustees, executive management, physicians, employees of PVH and surrounding community are all involved in providing on-going feedback/monitoring and informing the direction of policies and programmatic content of community benefit activities. In addition, community benefit plans, processes and programs reflect both the SJH strategic system and entity goals and objectives.

During Fiscal Year 2013, St. Joseph Health, Petaluma Valley (PVH) invested a total of $9,268,627 in community benefit; provided 5,698 encounters. In addition, PVH invested an additional $10,620,328 in unpaid cost to Medicare, ensuring needed care to low-income patients.

Overview of Community Needs and Assets Assessment

The Community Health Needs Assessment (CHNA) 2011 was a collaborative effort by the Sonoma County Health Alliance, comprised of St. Joseph Health, Petaluma Valley Hospital; St. Joseph Health, Santa Rosa Memorial; Sutter Medical Center of Santa Rosa; Kaiser Permanente Medical Center – Santa Rosa; and the Sonoma County Department of Health Services. The CHNA spotlights the health, well being and future of the children of Sonoma County. Since 2001, these partners have joined forces in their needs assessments to address significant community health issues. Key experts in priority health areas were engaged and consulted on an ongoing basis and when the assessment was completed, invited to participate in discussions around further opportunities to collaborate on identified issues. A presentation was also made to the County Board of Supervisors, as well as Petaluma City Council members and the City Manager.

This report continues to draw attention to children's health issues, focusing on four areas: dental health; maintaining a healthy weight through nutrition and physical activity; avoiding alcohol and drugs; and ensuring that babies are born drug free. This needs assessment takes a close look at progress toward improvements in health through initiatives, innovation and community collaboration and continues to search out "Windows of Opportunity" to prevent serious children's health problems and to bring the community together to envision and realize a "Lifetime of Health" for our children.

Data used to support the findings that led to the priority health issues discussed in the needs assessment include local, regional, and national surveillance and epidemiological data in the areas of oral health, substance abuse and obesity and nutrition. Secondary level quantitative data include large-scale state, county and other regional level surveys, U.S. Census data, and other demographic data.

Community Plan Priorities/Implementation Strategies

St. Joseph Health, Petaluma Valley Hospital's major Community Benefit accomplishments addressed in this plan during Fiscal Year 13 (FY13) include:

- ***Youth Alcohol Abuse Prevention*:**

The environment can have a profound impact on the health of individuals. Where individuals live, work, learn, and play affects their behavior. The availability of healthy options provides increased possibilities for healthy living. Environmental change strategies have been shown to be effective in reducing risky health behaviors, such as youth drinking. During FY13, St. Joseph Health, Petaluma Valley Hospital (PVH) participated in the Petaluma Coalition to Prevent Alcohol, Tobacco and Other Drug Problems. The Coalition, many sectors of our community, including our local police department, school district, health care providers, non-profits, youth groups and other organizations, businesses, elected officials and residents, is coordinated by Petaluma's Healthy Communities Consortium; and is implementing a multi-year Drug Free Communities grant awarded by SAMHSA. . Through its participation in the Sonoma County Prevention Partnership, PVH also played a key role in community efforts in three Sonoma County communities that resulted in a 7% total decrease in citations by law enforcement for minors in possession of alcohol.

- ***Children's Healthy Weight:***

Collaborative efforts in Sonoma County to prevent childhood obesity are multi-level and multi-disciplinary. They include community participation in St. Joseph Health, Petaluma Valley Hospital's Healthy for Life program, a school- and after school-based program that focuses on building school capacity to support healthy eating and physical activity among its students and their families. Healthy for Life includes teacher

and staff training in SPARK physical education (PE) curriculum, which provides tools to incorporate physical activity into classroom teaching, enhanced (PE) through community volunteers teaching Zumba, nutrition education, and working with school wellness committees to make needed environmental and policy changes that support students' healthy choices. During FY13, the Petaluma Boys & Girls Club served as a Healthy Communities site. On a countywide level, these collective efforts, 20% of the participating students who began the year classified either as overweight or obese improved their weight status; which was double the team's goal of a 10% improvement.

- ***Senior Care Management:***

St. Joseph Health, Petaluma Valley Hospital understands the importance of supporting seniors to age safely and with dignity in their homes. The hospital provided intensive care management to homebound, low-income, primarily Spanish-speaking seniors who have multiple chronic diseases and live with complex socio-economic disadvantages. The hospital's House Calls program provided 132 service encounters in Petaluma during FY13, helping to prevent infectious and manage chronic diseases among low-income seniors with complex medical and socio-economic conditions, also prevention unnecessary hospital admissions for Chronic Heart Disease for 7 seven patients receiving intensive care management.

INTRODUCTION

Our Mission
To extend the healing ministry of Jesus in the tradition of the Sisters of St. Joseph of Orange by continually improving the health and quality of life of people in the communities we serve.

Our Vision
We bring people together to provide compassionate care, promote health improvement and create healthy communities.

Our Values
The four core values of St. Joseph Health -- Service, Excellence, Dignity and Justice -- are the guiding principles for all we do, shaping our interactions with those whom we are privileged to serve.

Who We Are and Why We Exist

St. Joseph Health, Petaluma Valley Hospital (PVH), founded by the Sisters of St. Joseph of Orange, has been serving the healthcare needs of families in the community for more than 50 years. During this time, its mission has remained the same: to continually improve the health and quality of life of people in the communities served. Part of a statewide network of hospitals and clinics known as St. Joseph Health (SJH), PVH is part of a countywide ministry that includes two hospitals, urgent care and community clinics, hospice, home health services, and other facilities for treating the healthcare needs of the community in Sonoma County and the region. The ministry's core facilities are Petaluma Valley Hospital, an 80-bed acute care hospital, and Santa Rosa Memorial Hospital, a full service 289-bed acute care hospital that includes a Level II trauma center for the coastal region from San Francisco to the Oregon border.

As a values based organization, St. Joseph Health has a long-standing commitment to the communities it serves. SJH works under the premise of "Value Standards." SJH' Value Standard Seven: Community Benefit states, "We commit resources to improving the quality of life in the communities we serve, with special emphasis on the needs of the poor and underserved." Ten percent of the net income is dedicated to community benefit. In Sonoma County, PVH partners with St. Joseph Health, Santa Rosa Memorial to carry out its Community Benefit actions through strategic elements that address the political, social, behavioral and physiological determinants of health: Healthy Communities, Community Health and Advocacy. The primary strategies employed to address community needs are community capacity building, improving health outcomes for vulnerable populations and reducing social isolation of special populations.

Community Benefit programs and clinics include: Neighborhood Care Staff community organizing program, Agents of Change Training in Our Neighborhoods

leadership training, Circle of Sisters after-school program, St. Joseph Mobile Health Clinic, House Calls/Home Sweet Home, *Promotores de Salud* health promotion program, St. Joseph Dental Clinic, *Cultivando la Salud* Mobile Dental Clinic and, Mighty Mouth dental disease prevention program. Given the changing context for its work, St. Joseph Health, Petaluma Valley Hospital anticipates the need for a flexible approach in its response to community needs. For example, certain community health needs may become more pronounced and require changes to the initiatives identified by PVH in the Community Benefit Plan/Implementation Strategy. During Fiscal Year 2013 (FY13), these clinics and programs provided the following core services:

Healthy Communities: Building community capacity and empowerment to address quality of life concerns.

The **Neighborhood Care Staff (NCS)** mentor grassroots leadership to address local community health and quality of life issues. NCS models and mentors community representatives in these key functions: the identification of local assets, providing forums for dialogue, surfacing and supporting local leaders, facilitating the development of self-sustaining community groups, facilitating community-based strategic planning, helping to build linkages to and between community resources, and advocating for community participation in the issues that most affect it. In FY13, worked with low-income residents from low-income neighborhoods with disproportionate unmet health needs; engaging in 541 service encounters with these individuals.

Agents of Change Training in our Neighborhoods (ACTION) is a companion program to NCS that provides leadership and advocacy training. In FY13 collaborated with St. Joseph Health, Santa Rosa Memorial to secure funding from the Sonoma County Board of Supervisors to provide ACTION training to participants the Sonoma County Community Garden Network, which includes at three gardens in Petaluma: McDowell School, Arroyo Garden and Sunrise Community Garden.

Circle of Sisters is a free violence prevention after-school program for girls ages 10 to 14. The program participants attend schools and after-school programs with high rates of free and reduced lunches. In FY 2013, Circle of Sisters served 15 girls and their families through over 200 encounters provided at the Petaluma Boys & Girls Club. The mentoring provided through Circle of Sisters supports the participants in making healthier choices.

Community Health: Promoting health improvement and increasing access to healthcare services for low-income and under-served vulnerable persons, while fostering collaboration and incorporating healthy community strategies.

House Calls tend to the physical, spiritual and emotional needs of frail elderly seniors and adults with chronic diseases by providing primary medical care at home. Eligible seniors have limited access to care due to impaired mobility, under-insurance, and lack of funds. The House Calls team, which includes nurse practitioners, nurses, case management, and medical assistance, provided 541 patient encounters during FY13, which help to prevent unnecessary emergency department visits and to more effectively manage chronic disease.

The **Mobile Health Clinic** serves primarily low-income Latino persons of all ages who are without a regular physician or have difficulty accessing healthcare services; traveling to sites throughout the county that include churches, schools, migrant camps and homeless shelters. The Clinic offers health screenings, well child exams, immunizations, treatment of minor medical problems, health and nutritional education, information and referrals. During fiscal year 2013, the mobile health clinic supported community health outreach efforts in the Petaluma area.

The **Mary Isaac Wellness Center** is located on-site at the Committee on the Shelterless' multi-service shelter site. It is staffed by one of the hospital's Family Nurse Practitioners, with support from students and other volunteers; and provides health education, screening, treatment and referral services to homeless adults. During FY13, the Mary Isaac Wellness Center provided 1,419 encounters to 358 individuals.

The ***Promotores de Salud*** bridge language and culture, providing health information and referrals, enrolling uninsured families into publicly funded health plans, conducting cooking and nutrition classes, and training community volunteer health promoters in heart health. In FY13, the *Promotores de Salud* served 137 low-income individuals in Petaluma through 317 service encounters. In addition, the team served 39 children, youth and adults through the obesity prevention program Healthy for Life, implemented in partnership with Petaluma Boys & Girls Club, as well as the hospital's own Circle of Sisters after-school program. These individuals were engaged in 137 service encounters in Healthy for Life, including nutrition education, physical education, teacher and staff training, and school wellness committee support.

St. Joseph Health – Sonoma County's continuum of **oral health services** include a children's dental clinic located in Santa Rosa that serves children from all over the county, as well as a mobile dental clinic and Mighty Mouth dental disease prevention program. These clinics and program were founded to address the number one unmet need of children in the community: access to dental care. The clinics prioritize service to children ages 0-16 years, but also serve adults with urgent needs. They provide basic, preventive, emergency and comprehensive dental care with a strong focus on prevention and education. During FY13, 205 individuals from Petaluma received 380 service encounters at the St. Joseph Dental Clinic. An additional 365 individuals received 600 service encounters through the Mobile Dental Clinic team. One of the oral health program's most successful efforts is the Mommy & Me program, targeting low-

income children ages 0-5 and their mothers. Of these participants, on a countywide level, 98% remained cavity-free; as compared to 66% of children seen at the clinics who did not participate in this educational program.

> Advocacy: Advocating for vulnerable populations and working to affect social and public policy change through grassroots advocacy and engaging persons of influence.

Together with its community partners, coalitions, agencies and residents, SJH-SC's Community Benefit team addressed its current strategic community health priorities: children's oral health, youth and peri-natal substance abuse, and childhood obesity. Its actions have been planned and implemented within the framework of the Spectrum of Prevention developed by The Prevention Institute. This framework, also used in the Sonoma County Community Health Needs Assessment that informed the development of this Community Benefit plan, serves to ensure a comprehensive, multi-disciplinary and multi-layered approach to addressing these concerns; and in this way, creates potential for achieving deeper, more sustainable change.

St. Joseph Health, Petaluma Valley Hospital demonstrates organizational commitment to the community benefit process through the allocation of staff, financial resources, participation and collaboration. The Area Vice President of Mission Integration is responsible for coordinating implementation of Senate Bill 697 provisions as well as the opportunities for Executive Management Team, physicians and other staff to participate in planning and carrying out the Community Benefit Plan. The trustees, executive management, physicians, employees of SJHS-SC and surrounding community are all involved in providing on-going feedback/monitoring and informing the direction of policies and programmatic content of community benefit activities. In addition, community benefit plans, processes and programs reflect both the SJH strategic system and entity goals and objectives.

During Fiscal Year 2013, St. Joseph Health, Petaluma Valley (PVH) invested a total of $9,268,627 in community benefit; providing service to 1,133 persons. In addition, PVH invested an additional $10,620,328 in unpaid cost to Medicare, ensuring needed care to low-income patients.

Community Benefit Governance Structure

The trustees, executive management, physicians, employees of St. Joseph Health, Petaluma Valley Hospital (PVH) and members of the surrounding community are all involved in providing on-going feedback/monitoring and informing the direction of policies and programmatic content of community benefit activities. In addition, community benefit plans, processes and programs reflect both the St. Joseph Health

strategic system and local entity goals and objectives. PVH's 2013 strategic plan included a focus on six dimensions of performance, which include sacred encounters, quality, physician and employee collaboration, stewardship, and wellness and health improvement. The hospital's community benefit efforts address all these dimensions, including these specific goals from its strategic plan which are reflected in its work in and with the community:

- Practice evidence based care
- Build an integrated delivery system infrastructure
- Engage our physicians as meaningful partners
- Engage our employees as meaningful partners in realizing our mission outcomes
- Reduce childhood obesity
- Reduce untreated dental decay among children

St. Joseph Health, Petaluma Valley Hospital demonstrates organizational commitment to the community benefit process through the allocation of staff, financial resources, participation and collaboration. The Area Vice President of Mission Integration is responsible for coordinating implementation of Senate Bill 697 provisions as well as the opportunities for Executive Management Team, physicians and other staff to participate in planning and carrying out the Community Benefit Plan.

The Community Benefit Committee is a joint committee of the Boards of Trustees of Santa Rosa Memorial and Petaluma Valley Hospitals (SJH's Sonoma County entities), and supports these boards in overseeing community benefit activities in accordance with its Board approved charter. The Committee consists of at least three members of the Boards of Trustees and has a majority of members from the community who have knowledge or experience with populations with disproportionate unmet health needs in the communities served. Members of the hospitals' Executive Management Team and Trustees of both Santa Rosa Memorial and Petaluma Valley Hospitals have made site visits out in the communities to see the Community Benefit clinics and programs in action, and to speak with some of those being served.

PLANNING FOR THE UNINSURED AND UNDERINSURED

Patient Financial Assistance Program

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 St. Joseph Health, Petaluma Valley Hospital has a Patient Financial Assistance Program (FAP) that provides free or discounted services to eligible patients. In FY 13, St. Joseph Health, Petaluma Valley Hospital provided $1,565,634 in Financial Assistance and provided 994 encounters.

One way St. Joseph Health, Petaluma Valley informs the public of its 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.

COMMUNITY NEEDS ASSESSMENT PROCESS AND RESULTS

Summary of Community Needs Assessment Process and Results

The Sonoma County Health Alliance was formed in 2000 with the goal of improving the health of Sonoma County through collaboration among the many health systems and providers in the County. The Alliance formed a Community Health Improvement subcommittee to foster community health improvement through collaborative planning, investment and action, with participation from Sutter Medical Center of Santa Rosa, St. Joseph Health, Santa Rosa Memorial (SRM), St. Joseph Health, Petaluma Valley (PVH), Kaiser Permanente Medical Center – Santa Rosa and the Sonoma County Department of Health Services.

The Needs Assessment 2011 was part of this collaborative to spotlight the health, well being and future of the children of Sonoma County. Since 2001, these partners have joined forces in their needs assessments to address significant community health issues. This report continues to draw attention to children's health issues, focusing on four areas: dental health; maintaining a healthy weight through nutrition and physical activity; avoiding alcohol and drugs; and ensuring that babies are born drug free. This needs assessment takes a close look at progress toward improvements in health through initiatives, innovation and community collaboration and continues to search out "Windows of Opportunity" to prevent serious children's health problems and to bring the community together to envision and realize a "Lifetime of Health" for our children. Key experts in priority health areas were engaged and consulted on an ongoing basis and when the assessment was completed, invited to participate in discussions around further opportunities to collaborate on identified issues. Steering committee members interviewed and met with the groups and individuals who are listed in the Acknowledgements at the beginning of the Needs Assessment Report. A presentation

was also made to the County Board of Supervisors, as well as Petaluma City Council members and the City Manager.

The Needs Assessment points to and acknowledges the good work of the many important efforts underway throughout the county to address child health: Health Action, the Community Activity and Nutrition-Coalition (CAN-C), First 5 Sonoma County, Healthy Eating, Active Living (HEAL), The Sonoma County Oral Health Access Coalition, The Pediatric Dental Initiative, and Drug Free Babies among others. These are spotlighted to provide an opportunity for those in the community who want to support this work to do so. It takes commitment from individuals and organizations, adding their resources and strength to these local efforts, to be successful in making critical shifts in children's health in our community. Data used to support the findings that led to the priority health issues discussed in the needs assessment include local, regional, and national surveillance and epidemiological data in the areas of oral health, substance abuse and obesity and nutrition. Secondary level quantitative data include large-scale state, county and other regional level surveys, U.S. Census data, and other demographic data.

Identification and Selection of DUHN Communities

Communities with Disproportionate Unmet Health Needs (DUHN) are communities defined by zip codes and census tracts where there is a higher prevalence or severity for a particular health concern than the general population within our ministry service area.

DUHN Group and Key Community Needs and Assets Summary Table

DUHN Population Group or Community	Key Community Needs	Key Community Assets
Undocumented immigrants who do not speak English	• Assistance accessing Immigration Resources • Processes that facilitate access to medical care • Wider outreach& access to healthy food through more food pantries • Affordable Housing for single parents/families with small children • Process to facilitate housing availability for families with special needs	Media outlets provide bilingual & bicultural programming Local church Holds Immigration forums. Healthcare Services for undocumented & uninsured. Food pantry increases food security Community agencies Employment, education, and family support programs Housing Assistance addressing needs of undocumented and low income residents.
Low income families	• Childhood Obesity prevention and awareness programs • Community Redevelopment programs • Economic Capacity-building	Affordable Housing for low income families Action Groups Resident led actions addressing quality of life concerns Food Security and Nutrition Community Garden Medical services for undocumented and uninsured Food pantries increase food security Local church Holds Immigration forums. Community agencies Employment, education, and family support programs Coalitions Addressing substance abuse and obesity; agencies & residents together
Agricultural/Day workers	• Permanent building that can house day labor employment resources	Churches strong connections to community Filipino Community Center provides resources to Filipino and

DUHN Population Group or Community	Key Community Needs	Key Community Assets
	• Traffic Calming measures near day laborers center • Affordable Housing • Employment Resources • Gang prevention measures • Economic Rebuilding measures • Alcohol and drug prevention measures	broader community Local Fruit Stand provides local produce Healdsburg Labor Center Coordinates and provides employment opportunities Medical care for undocumented and uninsured Community agencies Employment, education, and family support programs
Latino community	• Substance Abuse prevention. • Family violence prevention • Gang prevention measures • Informational Immigration forums • Health Needs • Healthy and nutritious foods	DAAC (Drug Abuse Alternative Center): Resources to address substance abuse. Law Enforcement Support residents addressing gang graffiti, traffic calming, crime prevention education Medical services for undocumented and uninsured Food pantries increase food security Local church Holds Immigration forums Community agencies Employment, education (literacy, GED, language), health and family support programs Media outlets provide bilingual and bicultural programming Transitional Housing for people breaking out of homelessness, Emergency Shelters for homeless women and children Fair Housing information and tenant's rights. Coalitions Addressing substance abuse and obesity; agencies & residents together

DUHN Population Group or Community	Key Community Needs	Key Community Assets
Youth	• Gang Prevention Measures • Substance Abuse prevention • Civic engagement opportunities • Organized youth activities • Higher education mentorship programs • Student retention • STD education and awareness • Sports Teams and Resources • Childhood Obesity • Health education and awareness • After School Programs • Library	Schools ESL classes for parents, Spanish and English classes for youth After school programs for youth of all ages Community Clinics Access to care for low income families DAAC (Drug Abuse Alternative Center): Resources to address substance abuse Local sports clubs recreation opportunities for youth City Parks & Recreation Dept's recreation opportunities City libraries Computers & tutors for youth in need of homework help Head Start Early childhood social skills and self-esteem building Community agencies opportunities for youth to build resiliency, work skills, tutoring Grassroots Groups Leadership development and social engagement opportunities
Seniors	• Affordable housing • Access to health services • Transportation • Recreational Activities • Informational Forums • Home Care • Senior Center Resources	Affordable Housing Provides low income housing Medical Care Clinic offers services for low income people, and also those who are undocumented and uninsured. Senior programs Senior Center offers classes and courses. St. Joseph Home Care Home care visits to residents.

Priority Community Health Needs

Children's Oral Health. Dental disease is completely preventable and yet the most recent local survey found that almost half of Sonoma County's kindergartners and about 60% of its third graders have already experienced tooth decay, and over 16% of them have untreated decay.[i] For many children, poor oral health is a painful ongoing problem, increasing their chances of falling behind in school and social development, and suffering painful bouts of toothache and infection. Research in Sonoma County shows that of all the county's children, low-income children suffer the most tooth decay. With a focus on prevention and more access to care, all Sonoma County children can experience optimum oral health.

[1] *Sonoma Smile Survey, June 2009*. p.2

Key Findings - Children's Oral Health

- Tooth decay is rampant among Sonoma County children.
- Untreated decay is a serious problem for Sonoma County children, especially for low-income children and Hispanic children.
- Sonoma County is making progress in expanding dental coverage for children.
- Children's insurance programs in Sonoma County do not provide equivalent coverage.
- Children who depend on public health insurance experience major barriers to receiving dental care.
- Children are not receiving urgent care for serious conditions such as Early Childhood Caries.
- Children are not receiving needed preventive dental visits.
- Children are not receiving protective dental sealants in sufficient numbers.
- Sonoma County children do not have access to fluoridated drinking water.
- Education for parents and children is essential to good oral health.

St. Joseph Health in Sonoma County, including Petaluma Valley Hospital collaborating with Santa Rosa Memorial, has developed a highly focused oral health system of care to respond to this need, including the St. Joseph Dental Clinic, "Cultivando la Salud" Mobile Dental Clinic, and Mighty Mouth Dental Disease Prevention Program. Together, these programs are implementing a special project focused on decreasing dental disease in children ages 0-5, which includes education, prevention, and treatment services. This endeavor is distinct from other PVH community health efforts in that it exclusively engages the oral health programs rather than the more comprehensive initiatives that involve all its Community Benefit clinics and programs. For this reason, PVH has chosen to continue this important response to the unmet oral health needs of Sonoma County's vulnerable children and their families

apart from this current plan; which is inclusive of the more comprehensive organizational-wide initiatives.

Childhood Obesity, Nutrition and Fitness. Childhood overweight is an urgent health crisis with no easy solution. Preventing childhood overweight is a collective responsibility requiring individual, family, community, health care, business, and governmental commitments to focus on this critical health issue. Access to affordable and healthy foods, local and safe parks and play spaces, addressing sedentary behavior and promoting physical fitness, all make a difference.

Key Findings - Childhood Obesity, Nutrition and Fitness

- Low-income children in Sonoma County are at highest risk for overweight and obesity.
- Higher rates of overweight and obesity are reported among Hispanic children 5-19.
- Sonoma County youth are not consuming the five daily recommended servings of fruits and vegetables.
- Many students are not meeting basic fitness standards.
- Anemia is prevalent among low-income children.
- Food insecurity is linked to overweight in Sonoma County.
- Infrastructure, policy and housing contribute to overweight and obesity in Sonoma County.
- Schools must be part of the solution to solving overweight and obesity.

Youth Alcohol, Tobacco and Other Drug Use. Alcohol, tobacco and other drug use among Sonoma County youth is a major public health concern. The dangers of such use are extensive, pervasive and lasting for teens and yet the social pressures for teens to drink and use drugs are enormous. Community factors such as permissive attitudes and behaviors, and access from commercial and social sources play a huge role in contributing to underage drinking and drug use.

Key Findings - Youth Alcohol, Tobacco and Other Drug Use.

- Community norms and availability affect alcohol use in Sonoma County.
- Alcohol is the leading drug used by Sonoma County youth.
- Sonoma County students of alternative schools show significantly higher rates of alcohol, other drug and tobacco use then peers in comprehensive schools.
- More young people reported using marijuana than tobacco in the past 30 days.
- Tobacco use increases with age.
- Methamphetamine is a serious problem for some Sonoma County youth.
- Sonoma County teens continue to have high rates of binge drinking.
- Motor vehicle crashes are the leading cause of death among teenagers. Alcohol use is a major contributor.

- Prescription drug abuse has been identified as a growing problem in Sonoma County.
- Sonoma County needs more AOD treatment programs for youth.

Perinatal Alcohol, Tobacco and Other Drug Use. Women want to do the best they can for their babies. But through lack of knowledge or because of dependence or abuse, many women expose the fetuses they carry to alcohol and other drugs. Pregnancy is a unique time when women, even habitual ATOD users, are open to making changes in their lives for the sake of their future children. Remarkable progress is being made in Sonoma County to reach ATOD using pregnant women and help them eliminate substance abuse and find treatment.

Key Findings - Perinatal Alcohol, Tobacco and Other Drug Use.

- Illicit drug use by pregnant women in Sonoma County is a major problem.
- Tobacco is the most frequently used substance by pregnant women.
- Alcohol is the second most frequently used substance by pregnant women in Sonoma County.
- Marijuana is the drug used most often, but for pregnant women in treatment, methamphetamine is the primary drug of abuse.
- AOD use is linked to child neglect and abuse.
- Community providers have reported an increase in neonatal withdrawal from prescription drugs.

Given the scope of its Community Benefit programs and clinics PVH has elected to respond to the needs associated with substance abuse by focusing on the county's vulnerable youth. It will continue to partner with other public and private agencies addressing this urgent problem, supporting the communication of available services to the families served and leveraging resources when possible to support the services provided by its community partners. St. Joseph Health, Petaluma Valley Hospital anticipates that implementation strategies may change and therefore, a flexible approach is best suited for the development of its response to the SRM Community Health Needs Assessment. For example, certain community health needs may become more pronounced and require changes to the initiatives identified by PVH in its CB Plan/Implementation Strategy.

No hospital facility can address all of the health needs present in its community. We are committed to continue our Mission through community benefit programming and by periodically funding other non-profits that we partner with in the community through our Care for the Program managed by St. Joseph Health, Petaluma Valley Hospital. Furthermore, St. Joseph Health, Petaluma Valley Hospital will endorse local non-profit organization partners to apply for funding through the St. Joseph Health, Community Partnership Fund. Organizations that receive funding provide specific

services, resources to meet the identified needs of underserved communities through St. Joseph Health communities.

The following health needs will not be addressed directly in this plan, as they are either being addressed by local nonprofit organizations with greater expertise or resources to respond to the problem, or through another already existing St. Joseph Health, Sonoma County initiative. In the case of youth and peri-natal substance abuse, given the scope of its Community Benefit programs and clinics St. Joseph Health, Petaluma Valley Hospital has elected to respond to the needs associated with substance abuse by focusing on the county's vulnerable youth. It will continue to partner with other public and private agencies addressing this urgent problem, supporting the communication of available services to the families served and leveraging resources when possible to support the services provided by its community partners. St. Joseph Health, Petaluma Valley Hospital will endorse local nonprofit organizational partners to apply for funding through our St. Joseph Health Foundation to meet this need. Organizations that receive funding provide specific per-natal services, resources and meet the needs of this vulnerable population that Petaluma Valley Hospital does not, in order to make best use of limited resources and avoid duplication of efforts with its community partners.

In regards to children's oral health, St. Joseph Health, Petaluma Valley Hospital collaborates with Santa Rosa Memorial Hospital's highly focused oral health system of care to respond to this need, including the St. Joseph Dental Clinic, "Cultivando la Salud" Mobile Dental Clinic, and Mighty Mouth Dental Disease Prevention Program. Together, these programs are implementing a special project focused on decreasing dental disease in children ages 0-5, which includes education, prevention, and treatment services. This endeavor is distinct from other Petaluma Valley Hospital community health efforts in that it exclusively engages the oral health programs rather than the more comprehensive initiatives that involve all its Community Benefit clinics and programs. For this reason, Petaluma Valley Hospital has chosen to continue this important response to the unmet oral health needs of Sonoma County's vulnerable children and their families apart from this current plan; which is inclusive of the more comprehensive organizational-wide initiatives.

COMMUNITY BENEFIT PLANNING PROCESS

Summary of Community Benefit Planning Process

St. Joseph Health, Petaluma Valley Hospital is committed to the shared vision of the communities it serves; articulated in many collaborative efforts, but perhaps most clearly in Health Action and in www.healthysonoma.org. Community partners from all sectors have come together through Health Action to develop a strategic vision and

plan to improve community health, and that vision is aided by the healthysonoma.org tool. This website provides a single access point to unbiased data and information about community health issues and interventions in Sonoma County and healthy communities in general. Administered by the County of Sonoma's Department of Health Services and jointly funded by its health and healthcare partners, including St. Joseph Health, Petaluma Valley Hospital (PVH) and St. Joseph Health, Santa Rosa Memorial (SRM), it is intended to help planners, policy makers, and community members learn about issues, identify improvements, and collaborate for positive change. To help guide the community towards success in achieving its vision, PVH and SRM join their other partners in adopting two key frameworks: the Spectrum of Prevention, developed by the Prevention Institute to ensure comprehensive prevention interventions that address the underlying causes of community health concerns, and Collective Impact, which includes a shared agenda, shared measurement, mutually reinforcing activities, continuous communication, and support from a backbone organization, in this case the Sonoma County Department of Health Services.

The steps in the planning process were as follows. For each initiative the problem was defined and how the need was determined; the scope and seriousness of the problem was described; and available resources were identified. The final step in the process was to define how the initiative aligns with the SJH mission outcomes, the core principles of community benefit established through the "Advancing the State of the Art in Community Benefit – ASACB" project led by the Public Health Institute and in which SJH was a leading partner; and how it aligns with the local Ministry Strategic Priorities. The ASACB Core Principles are:

- *Emphasis on Disproportionate Unmet Health-related Needs (DUHN*): All services, activities and donations to be counted as community benefits will include outreach and design elements that ensure access for communities with DUHN.
- *Emphasis on Primary Prevention:* There is increased emphasis on program activities that address the underlying causes of persistent health problems as part of a comprehensive strategy to improve health status and quality of life in local communities.
- *Build Seamless Continuum of Care:* Operational linkages are developed between clinical services and community health improvement activities to ensure that investment in these activities yield measurable impacts upon health status and quality of life.
- *Build Community Capacity:* Charitable resources are strategically targeted to mobilize and build the capacity of existing community assets.
- *Emphasis on Collaborative Governance*: A collaborative approach to the governance and management of community benefit activities is developed.

The criteria and process used to select and prioritize initiatives are the following:

Criteria for Selection of Areas of Focus:

- Congruency and relevance to the mission and vision;
- Size of the issue;
- Seriousness of the issue;
- Community identification of issue as a priority;
- Community capacity to address the issue;
- Organizational capacity to address the issue;
- Feasibility of addressing the issue (time, financial…);
- Potential community and stakeholder engagement in efforts; and
- Potential for sustainability of efforts.

Selection Process:

- Completion and analysis of 3-Year Community Needs Assessment;
- Yearly updating of data through monitoring of Community Benefit activities outcomes;
- Discussion and analysis of information by Community Benefit staff, initial brainstorm on areas of priority focus;
- Discussion and analysis of information by Community Benefit management team, and formulation of recommendations for selection of priority areas of focus;
- Discussion and analysis of data and recommendations by Community Benefit Committee, and selection of priority focus areas;
  Discussion of Community Benefit Committee selection and any discussion of any further recommendations; and
- Final approval of Community Benefit plan by Community Benefit Committee.

St. Joseph Health, Petaluma Valley Hospital
FY12 – FY14 Community Benefit Plan/Implementation Strategies and Evaluation Plan
FY13 Accomplishments

Initiative: Children's Healthy Weight

Description: In 1998, St. Joseph Health, Petaluma Valley Hospital (PVH) joined with other public and private agencies to form the Community Activity & Nutrition Coalition, a diverse group working to promote optimal nutrition and physical activity for children through collaboration on environmental and policy change strategies. In 2008, PVH committed to significantly reduce childhood obesity in each of the communities we serve by 2018, and a plan of action based on the framework of the Spectrum of Prevention,

including: influencing policy, mobilizing communities, changing organizational practice, fostering coalitions, educating providers, promoting community education, and strengthening individual knowledge. The Children's Healthy Weight Initiative grew out of that long-term commitment, and engages community partners from CAN-C and beyond in multi-level interventions aimed at increasing the number of children that achieve and maintain a healthy weight for their age and height in Sonoma County; with a particular focus on its most vulnerable children.

All of PVH's Community Benefit programs are actively involved with this initiative to some degree. These include the dental clinics, which ensures the provision of nutrition education to its patients; the mobile health clinic, which provides health education related to healthy weight and the chronic diseases associated with unhealthy weight to the parents and families of low-income children; the health promotion programs, the primary team providing health education and training community-based health education and promotion volunteers; Circle of Sisters, which includes nutrition, physical activity, and other related issues in its after-school curriculum; and the Neighborhood Care Staff and Agents of Change Training in Our Neighborhoods programs, who engage residents and organizations in low-income communities in leadership development, community organizing and advocacy for healthier communities policies, environments, and social cohesion.

Key Community Partners: St. Joseph Health, Santa Rosa Memorial, Health Action of Sonoma County, Community Activity & Nutrition Coalition, iGROW, iWALK, Redwood Community Health Coalition, School Districts throughout Sonoma County, Boys & Girls Clubs, County of Sonoma Board of Supervisors and Health Department, Redwood Empire Food Bank, Northern California Center for Well-Being, Petaluma Bounty, North County Wellness District

Goal (Anticipated Impact[2]): The goal of the Children's Healthy Weight Initiative is to achieve an improvement of 10% in the weight status of children ages 2-17 in the hospital's Community Benefit Service Area.

Target Population (Scope): Children and adolescents ages 0 to 17 years old in St. Joseph Health- Sonoma County Community Benefit Service Area.

How will we measure success? Outcome Measure: The initiative's outcome measure is the % of improvement in weight status among low-income children in the hospital's Community Benefit Service Area. All the hospitals within St. Joseph Health, including

[2] **Anticipated Impact** is equivalent to **Goal**. Language is used for clarity with regard to IRS Proposed Rule (2013)

Petaluma Valley Hospital, developed evaluation plans as part of their three-year Community Benefit Implementation Strategies/Plans. These plans include the development of logic models used to monitor and evaluate progress. An Access database was developed and used for monitoring, evaluation and reporting purposes for each Priority Initiative.

Three-Year Target: 10% improvement.

Strategy 1: Increase access to affordable healthy foods
Strategy Measure 1: The Neighborhood Care Staff (NCS) helped to build the new Sonoma County Community Garden Network. The program team serves as the key technical assistance regarding grassroots leadership development to the Network's 58 member gardens, supported with a $41,000 grant from the Sonoma County Board of Supervisors for garden-based leadership trainings. NCS supported 18 low-income families committed to reactivating the McDowell Elementary School Garden by providing technical assistance and mentoring on how to do outreach and engage other residents and community partners in their efforts.

Strategy 2: Provide mentoring to children and families to support healthy lifestyle choices
Strategy Measure 2: The hospital's Promotores de Salud established a new system of coordination to target health education outreach to the low-income, Spanish-speaking patients who came to the Emergency Department for cardiac-related concerns. A brief letter was sent by the health promotion team, inviting each one to participate in a special, evidence-based "Train-the Trainer" educational program called Su Corazon, Su Vida (Your Heart, Your Life). Of a total of 13 graduates in Petaluma, 7 of these served as volunteer trainers following their graduation from the program, receiving ongoing mentoring from the hospital's health promotion staff.

Strategy 3: Build community capacity to support healthy eating and physical activity
Strategy Measure 3: The hospital's ACTION program leveraged resources from the Sonoma County Board of Supervisors to provide leadership training to identified community leaders from 4 Sonoma County communities, including 2 members from Petaluma. The Petaluma trainees finalized a strategic plan to reactivate the garden at McDowell Elementary School and to increase garden participation.
Strategy 4: Engage community members in environmental and policy change
Strategy Measure 4: The Neighborhood Care Staff engaged residents in 1 low-income neighborhood in Petaluma in a countywide food environment project, CX3. This project, coordinated by the Sonoma County Department of Health for the Community Nutrition and Activity Coalition, trains residents to assess current conditions and

develop action plans to enhance the policy and environments that increase access to healthy foods in their neighborhood.

Strategy 5: Provide community education on nutrition and physical activity
Strategy Measure 5: The St. Joseph Dental Clinic and the Promotores de Salud collaborated to implement "Rethink Your Drink" education to the clinic's patients and family members, promoting increased consumption of water and reduction of consumption of sugary drinks.

Strategy 6: Provide nutrition counseling to children and their families
Strategy Measure 6: The Mobile Health Clinic screened 4 low-income individuals that were identified as at-risk for a chronic disease associated with overweight or obesity.

FY13 Accomplishments:

Collaborative efforts in Sonoma County to prevent childhood obesity are multi-level and multi-disciplinary. They include community participation in St. Joseph Health, Petaluma Valley Hospital's Healthy for Life program, a school-based program that focuses on building school capacity to support healthy eating and physical activity among its students and their families. Healthy for Life includes teacher and staff training in SPARK physical education (PE) curriculum, which provides tools to incorporate physical activity into classroom teaching, enhanced (PE) through community volunteers teaching Zumba, nutrition education, and working with school wellness committees to make needed environmental and policy changes that support students' healthy choices. As a result of these collective efforts, 20% of the participating students who began the year classified either as overweight or obese improved their weight status; which was double the team's goal of a 10% improvement.

Initiative: Youth Alcohol Use Prevention

Description: In order to address the growing problem of youth alcohol abuse in Sonoma County, St. Joseph Health, Petaluma Valley Hospital joined the Sonoma County Prevention Partnership, led by the County's Department of Health Services. The Partnership is a countywide coalition that develops population strategies to address substance abuse through advocacy and policy on a local level. Petaluma Valley Hospital's Youth Alcohol Abuse Initiative is a part of local collaborative efforts to change community norms, ordinances, and policies regarding the availability, promotion and use of alcohol. This Initiative was also designed within the framework of the Spectrum of Prevention, and includes multi-level interventions by St. Joseph Health, Petaluma Valley Hospital programs and its community partners.

Key Community Partners: St. Joseph Health, Santa Rosa Memorial, Sonoma County Department of Health Services, Sonoma County Prevention Partnership, Healthy Communities Consortium

Goal (Anticipated Impact[3]): The initial goal of this Initiative was to reduce the rate of hospitalization due to alcohol abuse among children and adolescents. After the first two years of implementation of this plan, it was determined that hospitalization due to alcohol abuse among the target population was not the priority goal in Sonoma County. Conversation with community partners lead to adoption of the county wide goal of reducing the number of law enforcement citations for minors in possession of alcohol.

Target Population (Scope): Children and adolescents ages 0-17 in SJHS-SC Community Benefit Service Area

How will we measure success? Outcome Measure: Number of citations given by law enforcement for minor in possession of alcohol.

Three-Year Target: 10% reduction

Strategy 1: Increase self-esteem through youth programming
Strategy Measure 1: Discussions at Circle of Sisters sites regarding alcohol use and its consequences empowered the participants to express their opinions, challenge each other and support healthy decisions for themselves and their peers. For example, all Circle of Sisters groups participated in Red Ribbon week, during which they engaged in dialogue about media depictions of alcohol use, discussed their own family life experiences with alcohol, acted out scenarios in which peer pressure was exerted to engage in alcohol use, and created viable ways to say "no." The participants took a pledge to refrain from drug and alcohol use and made red ribbons to declare their pride in making that choice.

In addition to education and dialogue, 16 youth participants in Circle of Sisters and in the Neighborhood Care Staff engaged in community service. Their activities touched the lives of a total of 56 low-income individuals and mentored youth in community leadership skills.

Strategy 2: Provide parent support through education and social support
Strategy Measure 2: Circle of Sisters and Neighborhood Care Staff pre- and post-tests indicated that family members of youth participants felt supported and more able to

[3] **Anticipated Impact** is equivalent to **Goal**. Language is used for clarity with regard to IRS Proposed Rule (2013)

support their children to refrain from alcohol use. Countywide, a total of 51 adults participated in the pre/post-testing, and 100% reported an increased sense of self-efficacy. A multi-programmatic team that included the hospital's AmeriCorps VIP volunteers, Circle of Sisters, Neighborhood Care Staff and the Promotores de Salud organized a community event called Healthy You and Me. The event, formerly called Parent University, broadened its community participants and topics covered, to include information for youth and adults on drug and alcohol use among young people.

Strategy 3: Foment trusting relationships between youth and adults.
Strategy Measure 3: The hospital's Circle of Sisters, Neighborhood Care Staff and the Promotores de Salud all facilitated opportunities in the Petaluma area for youth to engage with, work alongside, and/or serve adults and older adults in their communities. Together, they engaged 15 youth in community activities and inter-generational activities, such as community gardening and cultural celebrations.

Strategy 4: Identify and refer at-risk youth and their families for appropriate services
Strategy Measure 4: 5 youths and their families were identified as at-risk and referred by Circle of Sisters and the Neighborhood Care Staff to community partners for treatment, parent support, mentoring and other services.

FY13 Accomplishments:
The environment can have a profound impact on the health of individuals. Where individuals live, work, learn, and play affects their behavior. The availability of healthy options provides increased possibilities for healthy living. Environmental change strategies have been shown to be effective in reducing risky health behaviors, such as youth drinking. During FY13, St. Joseph Health, Petaluma Valley Hospital (PVH) played a key role in community efforts in three Sonoma County communities that resulted in a 7% total decrease in citations by law enforcement for minors in possession of alcohol.

Initiative: Senior Care Management

Description: St. Joseph Health, Petaluma Valley Hospital's Senior Care Management Initiative was developed in response to the needs of the fastest growing sector of Sonoma County's population, seniors. The steady increase of Latino seniors, in particular, is expected to continue for several decades; with numbers increasing from 2,410 in 1990 to over 48,000 in 2050. Older Latinos are more likely to be living in poverty than their non-Latino Caucasian counterparts. Issues facing Latino seniors include stress due to acculturation processes, lack of health insurance and deficient access to both preventative and treatment health and social services. Petaluma Valley Hospital's

Senior Care Management Initiative provides comprehensive, multi-disciplinary care to seniors through direct service in the home and coordinating services provided by community partners like St. Joseph Health, Santa Rosa Memorial, Sonoma County Area Agency on Aging, the Redwood Empire Food Bank, Catholic Charities, and others; as well as community mobilizing and advocacy efforts to enhance the local system of care.

Key Community Partners: St. Joseph Health, Santa Rosa Memorial, Sonoma County Area Agency on Aging, the Redwood Empire Food Bank, and Catholic Charities.

Goal (Anticipated Impact[4]): Decrease hospital readmissions for Congestive Heart Failure (CHF).

Target Population (Scope): Individuals ages 65 and above in SJHS-SC Community Benefit Service Area

How will we measure success? Outcome Measure: % hospital readmissions for Congestive Heart Failure (CHF). All the hospitals within St. Joseph Health, including Petaluma Valley Hospital, developed evaluation plans as part of their three-year Community Benefit Implementation Strategies/Plans.

Three-Year Target: 3% reduction in hospital readmissions for Congestive Heart Failure

Strategy 1: Reduce social isolation of low-income seniors
Strategy Measure 1: The Neighborhood Care Staff engaged seniors in organized community activities, such as community gardening and community celebrations. They also engaged residents in focus groups about their needs, in collaboration with the Area Agency on Aging. Through the focus group process, the staff identified low-income seniors living in isolation in the communities served by the program. This mapping process helped to target the team's outreach efforts. Circle of Sisters also stepped up its efforts to engage seniors as community mentors to the program's young participants.

Strategy 2: Reduce risk for chronic disease among low-income seniors
Strategy Measure 2: Outreach efforts of the Promotores de Salud to engage seniors in nutrition education through cooking classes were not very successful, with only two

[4] **Anticipated Impact** is equivalent to **Goal**. Language is used for clarity with regard to IRS Proposed Rule (2013)

seniors participating on a countywide level. However pre/post tests revealed that both participants in health education reported changes in behavior

Strategy 3: Provide comprehensive chronic disease management to low-income seniors
Strategy Measure 3: The House Calls program provides in-home multi-disciplinary care and intensive case management to 7 low-income seniors who are unable to leave their homes to access other care. The prevention of chronic disease is one of the priorities of these efforts, and as a result of these services these were no hospitalizations due to Congestive Heart Failure among these House Calls patients.

Strategy 4: Prevent infectious disease
Strategy Measure 4: The House Calls team participates in countywide immunization efforts to prevent infectious disease among seniors. They were able to provide pneumococcal and seasonal flu vaccination to House Calls' patients. None of the program's patients were hospitalized due to pneumonia during Fiscal Year 2013.

FY13 Accomplishments:

St. Joseph Health, Petaluma Valley Hospital understands the importance of supporting seniors to age safely and with dignity in their homes. The hospital provided intensive care management to homebound, low-income, primarily Spanish-speaking seniors who have multiple chronic diseases and live with complex socio-economic disadvantages. The hospital's House Calls program provided 132 service encounters in Petaluma during FY13, helping to prevent infectious and manage chronic diseases among low-income seniors with complex medical and socio-economic conditions. These encounters prevented unnecessary hospital admissions for Chronic Heart Disease for 7 patients receiving intensive care management.

Other Community Benefit Programs and Evaluation Plan

Program: Children's Oral Health

Description: St. Joseph Health's ministries in Sonoma County, Petaluma Valley and Santa Rosa Memorial Hospitals, have collaborated to develop a highly focused oral health system of care to respond to this need, including the St. Joseph Dental Clinic, "Cultivando la Salud" Mobile Dental Clinic, and Mighty Mouth Dental Disease Prevention Program. Together, these programs are implementing a special project focused on decreasing dental disease in children ages 0-5, which includes education, prevention, and treatment services.

Key Community Partners: St. Joseph Health, Santa Rosa Memorial and Sonoma County Oral Health Access Coalition

Goal (Anticipated Impact[5]): Reduce to 28% of children ages 0-5 receiving dental care at the hospital's Dental Clinic and Mobile Dental Clinic with Class II and Class III (urgent, emergent) dental decay (as compared to state rate of 33%).

Target Population (Scope): Dental disease is completely preventable and yet the most recent local survey found that almost half of Sonoma County's kindergartners and about 60% of its third graders have already experienced tooth decay, and over 16% of them have untreated decay.[ii] For many children, poor oral health is a painful ongoing problem, increasing their chances of falling behind in school and social development, and suffering painful bouts of toothache and infection. Research in Sonoma County shows that of all its children, low-income children suffer the highest rate of tooth decay. With a focus on prevention and more access to care, all Sonoma County children can experience optimum oral health.

How will we measure success? Outcome Measure: % of children ages 0-5 receiving dental care at the hospital's Dental Clinic and Mobile Dental Clinic with Class II and Class III (urgent, emergent) dental decay, as measured by Dentrix software.

FY13 Accomplishments:

Petaluma Valley Hospital and Santa Rosa Memorial Hospital's collaborative Children's Oral Health program exceeded its goal, achieving a countywide rate of only 24% of children ages 0-5 served by the hospital's dental clinics had urgent or emergent dental needs (Class II = decay, Class III = urgent decay), or 758 out of 3,133 children see. This also far exceeds the statewide rate of 33%. The team believes that it was the enhanced educational efforts that helped to achieve this significant outcome. By adopting the basic tenet of health promotion, in that service recipients are most responsive to providers who they can identify as trusted community agents, the culturally appropriate staffing, education and clinical service models used succeeded in reaching the population with the most complex, challenging and urgent unmet dental needs.

[5] **Anticipated Impact** is equivalent to **Goal**. Language is used for clarity with regard to IRS Proposed Rule (2013)

FY13 Community Benefit Investment

FY13 COMMUNITY BENEFIT INVESTMENT
ST JOSEPH HEALTH, PETALUMA VALLEY HOSPITAL
(ending June 30, 2013)

CA Senate Bill (SB) 697 Categories	Community Benefit Program & Services[6]	Net Benefit
Medical Care Services for Vulnerable[7] Populations	Financial Assistance Program (FAP) (Charity Care-at cost)	$1,565.634
	Unpaid cost of Medicaid[8]	$6,577,365
	Unpaid cost of other means-tested government programs	$959,037
Other benefits for Vulnerable Populations	Community Benefit Operations	$0
	Community Health Improvements Services	$62,281
	Cash and in-kind contributions for community benefit	$42,000
	Community Building	0
	Subsidized Health Services	5,000
	Total Community Benefit for the Vulnerable	***$9,211,317***
Other benefits for the Broader Community	Community Benefit Operations	$11,888
	Community Health Improvements Services	$35,422
	Cash and in-kind contributions for community benefit	$10,000
	Community Building	$0
	Subsidized Health Services	$0
Health Professions Education, Training and Health Research	Health Professions Education, Training & Health Research	$0
	Total Community Benefit for the Broader Community	***$57,310***
	TOTAL COMMUNITY BENEFIT *(excluding Medicare)*	$9,268,627
Medical Care Services for the Broader Community	Unpaid cost to Medicare[9] ***(not included in CB total)***	$10,620,328

[6] Catholic Health Association-USA Community Benefit Content Categories, including Community Building.
[7] CA SB697: "Vulnerable Populations" means any population that is exposed to medical or financial risk by virtue of being uninsured, underinsured, or eligible for Medicaid, Medicare, California Children's Services Program, or county indigent programs. For SJHS, we exclude Medicare as part of Community Benefit total and only include it below the line for SB697 reporting purposes.
[8] Accounts for Hospital Fee. The pledge/grant (separate from the quality assurance fee) is reported in Cash and In-kind Contributions for other vulnerable populations.
[9] Unpaid cost of Medicare is calculated using our cost accounting system. In Schedule H, we use the Medicare cost report.

Telling Our Community Benefit Story: Non-Financial[10] Summary of Accomplishments

The hospital's leadership team also contributed to the community through volunteer service and participation on community boards. Some of the community-based organizations benefitting from its service include the Healthy Communities Consortium, Health Action, Rebuilding Together, Redwood Empire Food Bank, Red Cross, United Way, American Heart Association and Petaluma Community Health Center, among others.

[10] Non-financial summary of accomplishments are referred to in SB 697 as non-quantifiable benefits.