

## Adventist Health Clear Lake Hospital 2021 Community Health Plan



The following Implementation Strategy serves as the 2020 – 2022 Community Health Plan for Adventist Health Clear Lake and is respectfully submitted to the Office of Statewide Health Planning and Development on May 27<sup>th</sup>, 2022 reporting on 2021 results.

## Executive Summary

### Introduction & Purpose

Adventist Health Clear Lake Hospital is pleased to share its Community Health Implementation Strategy. This follows the development of its 2019 Community Health Needs Assessment (CHNA) in accordance with requirements in the Affordable Care Act and IRS 990 Schedule H requirements and approved by the Adventist Health Board of Directors on October 17, 2019.

After a thorough review of the health status in our community through the community health needs assessment (CHNA), we identified areas that we could address using our resources, expertise and community partners. Through these actions and relationships, we aim to empower our community and fulfill our mission of “Living God’s love by inspiring health, wholeness and hope.”

The results of the CHNA guided this creation of this document and aided us in how we could best provide for our community and the vulnerable among us. This Implementation Strategy summarizes the plans for Adventist Health Clear Lake Hospital to develop and collaborate on community benefit programs that address prioritized health needs identified in its 2019 CHNA. Adventist Health Clear Lake has adopted the following priority areas for our community health investments.

#### Prioritized Health Needs – Planning to Address

- **Health Priority #1:**
  - Address drug abuse/substance use within the community
- **Health Priority #2:**
  - Increase housing stability and target homelessness
- **Health Priority #3:**
  - Community outreach & education for all high need and/or disenfranchised communities and access to health services
- **Health Priority #4:**
  - Increase opportunity for cancer prevention and screenings

Building a healthy community requires multiple stakeholders working together with a common purpose. We invite you to explore how we intend to address health challenges in our community and partner to achieve change. More importantly, we hope you imagine a healthier

region and work with us to find solutions across a broad range of sectors to create communities that define the well-being of people.

The purpose of the CHNA was to offer a comprehensive understanding of the health needs in Adventist Health Clear Lake Hospital service area and guide the hospital's planning efforts to address those needs.

The significant health needs were identified through an analysis of secondary data and community input. These health needs were identified according to a set of criteria that included primary and secondary data on Lake County and responses received from Community Forums held around Lake County. We recognized that many of the priority health needs from prior CHNAs remain health issues for Lake County. For further information about the process to identify and prioritize significant health needs, please refer to Adventist Health Clear Lake Hospital CHNA report at the following link:

<https://www.adventisthealth.org/about-us/community-benefit/>

## Adventist Health Clear Lake Hospital and Adventist Health

Adventist Health Clear Lake Hospital is an affiliate of Adventist Health, a faith-based, nonprofit integrated health system serving more than 80 communities on the West Coast and Hawaii.

### Vision

Adventist Health will be a recognized leader in mission focus, quality care and fiscal strength.

### Mission Statement

Living God's love by inspiring health, wholeness and hope.

### Adventist Health Includes:

- 23 hospitals with more than 3,600 beds
- 290 clinics (hospital-based, rural health and physician clinics)
- 15 home care agencies and eight hospice agencies
- Three retirement centers & one continuing care retirement community

- A workforce of 37,000 including associated medical staff physicians, allied health professionals and volunteers

We owe much of our heritage and organizational success to the Seventh-day Adventist Church, which has long been a promoter of prevention and whole person care. Inspired by our belief in the loving and healing power of Jesus Christ, we aim to bring physical, mental and spiritual health and healing to our neighbors of all faiths. Every individual, regardless of his/her personal beliefs, is welcome in our facilities. We are also eager to partner with members of all faiths to enhance the health of the communities we serve.

Our commitment to quality health care stems from our heritage, which dates to 1866 when the first Seventh-day Adventist healthcare facility opened in Battle Creek, Michigan. There, dedicated pioneers promoted the “radical” concepts of proper nutrition, exercise and sanitation. Early on, the facility was devoted to prevention as well as healing. They called it a sanitarium, a place where patients—and their families—could learn to be well.

More than a century later, the health care system sponsored by the Seventh-day Adventist Church circles the globe with more than 170 hospitals and more than 500 clinics, nursing homes and dispensaries worldwide. And the same vision to treat the whole person—mind, body and spirit—continues to provide the foundation for our progressive approach to health care.

## Summary of Implementation Strategies

### Implementation Strategy Design Process

Stakeholders from the 19 hospital facilities in the Adventist Health System were invited to participate in a Mission Integration Summit on September 26 and 27, 2019. During these two day-long events, participants were introduced to the 2019 Adventist Health Implementation Strategy Template. After the summit, each hospital was invited to participate in a series of technical assistance calls and consultation sessions with representatives from Adventist Health Community Integration and Conduent Health Communities Institute to further develop and refine their implementation strategy.

### Adventist Health Clear Lake Hospital Implementation Strategy

The implementation strategy outlined below summarizes the strategies and activities by Adventist Health Clear Lake Hospital to directly address the prioritized health needs. They include:

- **Health Need 1: Address drug abuse/substance use within the community including alcoholism**
  - SUN ED Navigator, Complete ED Bridge Program, and implement Hub & Spoke
  - X-Wavier training & certification course for ED providers
  - Opioid Recovery, Detox & Counseling Services / Live Well Institute
- **Health Need 2: Increase housing stability and target homelessness**
  - Expanding Project Restoration – Restoration House Support Staffing
  - Providing supportive housing navigation for permanent supportive housing
  - Hope Rising – Hope Center opened December 2020
  - Elijah House COVID Shelter established and supported by AHCL
- **Health Need 3: Community outreach & education for all high need and/or disenfranchised communities and access to health services**
  - Shower Trailer
  - Safe Sleeping for Baby & Mothers – Spanish Language
  - Food Insecurity Program to provide fresh food as COVID relief
  - Konocti Clinic – Provide Care on School Campus
- **Health Need 4: Increase opportunity for cancer prevention and screenings**
  - New screening for Hereditary cancer using Dr. Westgate's 'AHEAD' program in Family Practice at Hilltop Medical Building, and Women's Care department in the hospital.
  - 3D Mammography – Incentive gift for compliance.
  - Colon cancer screening
  - Prostate cancer screening
  - Smoking Cessation

The Action Plan presented below outlines in detail the individual strategies and activities Adventist Health Clear Lake Hospital will implement to address the health needs identified through the CHNA process. The following components are outlined in detail in the tables below: 1) actions the hospital intends to take to address the health needs identified in the CHNA, 2) the anticipated impact of these actions as reflected in the Process and Outcomes measures for each activity, 3) the resources the hospital plans to commit to each strategy, and 4) any planned collaboration to support the work outlined.

No hospital can address all the health needs identified in its community. Adventist Health Clear Lake Hospital is committed to serving the community by adhering to its mission, and using its skills, expertise and resources to provide a range of community benefit programs. This Implementation Strategy does not include a specific plan to address the following significant health needs identified in the 2019 CHNA.

### Significant Health Needs – NOT Planning to Address

- AHCL strives to address all significant health needs in our community. The 2019 Lake County CHNA identified 4 significant priority health needs. AHCL is operating & expanding programs aimed at addressing community health needs in all identified 4 priority areas.

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## COVID 19 Considerations

The COVID-19 global pandemic has caused extraordinary challenges for Adventist Health hospitals and health care systems across the world including keeping front line workers safe, shortages of protective equipment, limited ICU bed space and developing testing protocols. They have also focused on helping patients and families deal with the isolation needed to stop the spread of the virus, and more recently vaccine roll out efforts.

Adventist Health, like other health care systems, had to pivot its focus to meet the most urgent healthcare needs of its community during the pandemic, as well as reassess the ability to continue with some community health strategies due public health guidelines for social distancing. Adjustments have been made to continue community health improvement efforts as possible, while ensuring the health and safety of those participating. The Strategy Action Plan Grids on the following pages reflect updated activities for each strategy.

In FY21, Adventist Health as a system took the following actions in response to the needs created or exacerbated by COVID-19:

- Began offering more virtual health care visits to keep community members safe and healthy
- Developed an online symptom tracker to help community members determine if they may have COVID-19 or some other flu type illness and what steps to take
- Was part of a communitywide effort by the local health system to vaccinate eligible community members to help stop the spread of the virus

## Adventist Health Clear Lake Implementation Strategy Action Plan

<b>Priority Health Need: Address Drug Abuse/Substance Use Within the Community</b>				
<b>Goal Statement: Improve healthy behavior by reducing drug dependency.</b>				
<b>Mission Alignment: Well-Being of People</b>				
<b>Strategy 1: Fill gaps in drug addiction recovery services and continuum to improve recovery, access, and outcomes.</b>				
Program/Activity	Metrics			
<i>Activity 1.1- ED Bridge and Substance Use Navigator (SUN) Program</i>	<b>Process Measure:</b>	<b>Year 1 2020</b>	<b>Year 2 2021</b>	<b>Year 3 2022</b>
	Number of Encounters	370	778	
	Number of Interventions	285	489	
	Number of those who accepted treatment	111	189	
	<b>Short Term Outcomes:</b>			
	Percentage of patients being seen by SUN & accepting treatment	39%	35%	
	<b>Medium Term Outcomes:</b>			
Number of people Bridged & receiving addiction treatments	118	239		
<i>Activity 1.2- X-Wavier Training &amp; Certification</i>	<b>Process Measure:</b>	<b>Year 1 2020</b>	<b>Year 2 2021</b>	<b>Year 3 2022</b>
	Number of X-Wavier Certified providers in Lake County	11	11	
	<b>Short Term Outcomes:</b>			
	Increased access to opioid treatment & number of patients receiving services for each x-wavered provider			
	<b>Medium Term Outcomes:</b>			
Reduction in overdoses/opioid related hospitalizations/deaths in Lake County				
<b>Additional Resources</b>				
<i>Opioid Recovery- Live Well Services</i>	<b>Process Measure:</b>	<b>Year 1 2020</b>	<b>Year 2 2021</b>	<b>Year 3 2022</b>
	Percentage of Success Rate			
	<b>Short Term &amp; Medium-Term Outcomes:</b>			
	Number of New Clients	On-Hold Due to COVID-19	On-Hold Due to COVID-19	
Number of Recidivism				
Capacity Rate				
<b>Source of Data:</b>				

AHCL hospital medical record/Cerner, SUN/Bridge self-reporting, CA opioid dashboard ( <a href="https://skylab.cdph.ca.gov/ODdash">https://skylab.cdph.ca.gov/ODdash</a> ).
<b>Target Population(s):</b> SUD diagnosed patients with co-occurring illnesses. New patients ready for SUD treatment.
<b>Adventist Health Resources:</b> (financial, staff, supplies, in-kind etc.) Staff, Financial, Data Tracking Supplies
<b>Collaboration Partners:</b> All organizations with x-wavered providers: Dr. Bradley, Mendocino Lakeview clinic, Sutter Lakeside Hospital. Lake County Behavioral Health, AA, NA, Celebrate Recovery, church groups throughout Lake County. *CARE, Inc.
<b>CBISA Category:</b> A - Community Health Improvement

### Strategy Results 2021:

Adventist Health Clear Lake recognizes the increasing need for addiction services with our hospital emergency department and outpatient clinic care. For that reason, increased efforts have been made in outreach and education of our associates, providers, the communities we serve and most importantly those suffering with the pain from the disease of addiction. Over the past five years, in order to better serve our communities Adventist Health Clear Lake has applied for and received grant funding to provide Medically Assisted Treatment (MAT) and the CA Bridge grant, to specifically address California’s opioid epidemic and to accelerate health organizations progress to reduce opioid related deaths and addiction.

We are also very pleased to report that eleven (11) Adventist Health physicians and providers have received training in 2021 - specific for supporting our patients who are ready for immediate medical assistance to begin navigating the road to recovery.



**Priority Health Need: Increase housing stability and target homelessness.**

**Goal Statement: Connect high utilizers of healthcare to housing.**

**Mission Alignment: Well-Being of People**

**Strategy 1: Grow capacity for existing programs and reduce time to secure supportive housing for program participants.**

Program/Activity	Metrics			
<i>Activity 1.1- Restoration Hours</i>		<b>Year 1 2020</b>	<b>Year 2 2021</b>	<b>Year 3 2022</b>
	<b>Process Measure:</b>			
	Number of Clients	8	Data is currently unavailble.	
	Number Housed	4		
	Number of Inpatient Hospitalizations	37		
	Number of ED Vistis	15		
	Number of Jail Days	92		
	Number of EMS Transports	N/A		
	Number of Police Department Calls	17		
	<b>Short Term Outcomes:</b>			
	Client acuity from enrollment to graduation.		Data is currently unavailble.	
	Time to housing placement	N/A		
	Number wait listed participants			
<b>Medium Term Outcomes:</b>				
Average acuity improvement per patient		Data is currently unavailble.		
Improvement in LOS	N/A			
Reduced number of wait listed participants				
<i>Activity 1.2- Hope Center</i>		<b>Year 1 2020</b>	<b>Year 2 2021</b>	<b>Year 3 2022</b>
	<b>Process Measure:</b>			
	Number of People Served	Facility Opened in Dec. 2020	Data is currently unavailble.	
	Number of People Housed			
	Number of Hospitalizations			
Number of ED Visits				

	Number of Jail Days Number of EMS Transports Number of Police Department Calls	Facility Opened in Dec. 2020	Data is currently unavailble.	
	<b>Short &amp; Medium Term Outcomes:</b> LOS. Admit – Placement VISPDAT Amount of Savings After Enrollment		Data is currently unavailble.	
<i>Activity 1.3- Elijah House Collaboration</i>		<b>Year 1 2020</b>	<b>Year 2 2021</b>	<b>Year 3 2022</b>
	<b>Process Measure:</b> Average Daily Census	28/36	N/A	
<i>Activity 1.4- Healthy Homes</i>		<b>Year 1 2020</b>	<b>Year 2 2021</b>	<b>Year 3 2022</b>
	<b>Process Measure:</b> Number of individuals housed – <i>Opened July 2020</i>	3	N/A	
	<b>Short Term Outcomes:</b> Number qualifying for low income and Section 8 Housing	N/A	N/A	
	<b>Medium Term Outcomes:</b> Number of those transitioned into permanent housing	N/A	N/A	
<b>Source of Data:</b> AHCL EMR, Hope Center & Hope Harbor self-reported.				
<b>Target Population(s):</b> <ul style="list-style-type: none"> <li>Homeless with health conditions and history of high healthcare utilization</li> <li>Patients in need of respite care.</li> </ul> Homeless during cold months.				
<b>Adventist Health Resources:</b> (financial, staff, supplies, in-kind etc.) Staff, Financial, Data tracking.				
<b>Collaboration Partners:</b> <ul style="list-style-type: none"> <li>Adventist Church &amp; others, Lake County Transit (bus), Hope Rising community coalition, EMS, Fire, Law Enforcement, City government, Sutter Lakeside Hospital, Lake County Department of Health.</li> </ul>				
<b>CBISA Category:</b> A - Community Health Improvement				

### Strategy Results 2021:

Due to the ongoing pandemic, many of our programs were impacted throughout 2021. Additionally, due to staffing shortages, many of our programs remained on hold. We hope to make forward progress in 2022.

<b>Priority Health Need: Community outreach and engagement for all high need and/or disenfranchised communities and access to health services.</b>					
<b>Goal Statement: Increase healthy behaviors in the community.</b>					
<b>Mission Alignment: Well-Being of People</b>					
<b>Strategy 1: Providing services into the community and adding access points to health and social services.</b>					
<b>Program/Activity</b>	<b>Metrics</b>				
<i>Activity 1.1 Shower Trailer</i>		<b>Year 1 2020</b>	<b>Year 2 2021</b>	<b>Year 3 2022</b>	
	<b>Process Measure:</b>		See Narrative Below		
	Number of Showers				72
	Percentage of Health Screenings				100%
	Number of Referrals				25
	<b>Short Term Outcomes:</b>				
	Number of referrals to Lake County Social Services				72
<b>Medium Term Outcomes:</b>					
Percentage of participants utilizing healthcare services through primary care.		25%			
Number of Urgent Care- Chronic Disease Management Needed		5			
<i>Activity 1.2- Safe Sleeping for Baby &amp; New Mothers (English &amp; Spanish)</i>		<b>Year 1 2020</b>	<b>Year 2 2021</b>	<b>Year 3 2022</b>	
	<b>Process Measure:</b>		See Narrative Below		
	Number of Sleep Safe Classes				4
	Number of Attendees				30
	Number of 1:1's Offered				3 ENG 1SPN
	<b>Short Term Outcomes:</b>				
	Number of mothers & babies that stay with AHCL PCP				
<b>Medium Term Outcomes:</b>					
Decrease in SIDS.					
Improved Pediatric Outpatient Visit Compliance					
<b>Source of Data:</b> AHCL EMR, Shower Trailer self reporting					
<b>Target Population(s):</b> Homeless, Low income families, Spanish speaking					

<p><b>Adventist Health Resources:</b> (financial, staff, supplies, in-kind etc.) Staff, Financial, Supplies</p>
<p><b>Collaboration Partners:</b> (place a "*" by the lead organization if other than Adventist Health)</p> <ul style="list-style-type: none"> <li>• Churches &amp; Clearlake Community Centers for shower trailer host locations, City of Clearlake.</li> <li>• Lake County Peer Support, Lake County Behavioral Health</li> </ul>
<p><b>CBISA Category:</b> A - Community Health Improvement</p>

### Strategy Results 2021:

**AHCL Shower Trailer Project** – This project expanded from 2 days per week in 2020 to 3 days per week in 2021 and increased to 2 locations in Lake County – Clearlake Oaks Big O Peer Center and the Clearlake Shower Trailer site at the Senior Center. We have seen a substantial increase in the number of guests served each week and had 2 Health Outreach Events at the Clearlake site, offering Covid vaccines and testing, wound care, Narcan training and kit giveaway, dental screening, Social Services applications, haircuts, etc. At each event we had 7 community partners that also participated. With a local community grant, we have been able to provide clean clothes (socks, underwear, sweats, t-shirts) for our guests. We have referred guests to available housing options, including Restoration House, Hope Center and Elijah House. Plans for 2022, include expanding to 5 days per week and adding locations in Lucerne and Kelseyville. We have also added a full-time staff member so that one person can clean the showers and the other can greet guests and identify needed resources.

**Baby Sleep Safe** – CPSP (*Comprehensive Perinatal Services Program*) is a program that guides the mother through the pregnancy and postpartum journey. The program follows three assessments: Health Education, Nutrition, and Psychosocial. At every appointment our conversation and education fall under one of these three categories. The goal of the program is to enhance the knowledge of maternity for each woman, all through education and community support. Much of what we know about pregnancy is only seen from the outside (*i.e. body changes*). The AHCL Baby Sleep Safe program helps woman understand what is happening on during their pregnancy. The program explores fetal development, emotions, hormone changes, up to and including postpartum care, and of course when they need to seek additional help. The CPSP program wants to give every mother and their baby a healthy start.

<b>Priority Health Need: Increase opportunity for cancer prevention and screenings.</b>				
<b>Goal Statement: Reduce cancer mortality rate in Lake County</b>				
<b>Mission Alignment: Well-Being of People</b>				
<b>Strategy 1: Increase screening opportunities by expanding early detection programming.</b>				
<b>Program/Activity</b>	<b>Metrics</b>			
<i>Activity 1.1 "AHEAD" Hereditary Cancer Screenings</i>		<b>Year 1 2020</b>	<b>Year 2 2021</b>	<b>Year 3 2022</b>
	<b>Process Measure:</b>	On Hold Due to COVID-19	On Hold Due to COVID-19	
	Number of Screenings			
	Number of Referrals to Specialty			
	<b>Short Term Outcomes:</b>			
	Number of Biopsies Ordered			
Number of New Patients Screening				
Percentage of Malignant/Benign Cases				
<b>Medium Term Outcomes:</b>				
Number of patients in treatment from screening				
Mortality Rate				
<i>Activity 1.2- 3D Mammography</i>		<b>Year 1 2020</b>	<b>Year 2 2021</b>	<b>Year 3 2022</b>
	<b>Process Measure:</b>	On Hold Due to COVID-19		
	Number of Screenings			
	Number of Referrals			
	Number of Treatments			
	Compliance Rate			
	1873			
	50%			
<b>Short Term Outcomes:</b>				
Number of Biopsies Ordered				
Percentage of Malignant/Benign Cases				
<b>Medium Term Outcomes:</b>				
Number of patients in treatment from Screening				
Mortality Rate				
<i>Activity 1.3- Colorectal Screening (Scope)</i>		<b>Year 1 2020</b>	<b>Year 2 2021</b>	<b>Year 3 2022</b>
	<b>Process Measure:</b>		3004	
Number of Screenings				

	Number of Referrals Number of Treatments Compliance Rate		60%	
	<b>Short Term Outcomes:</b> Number of Biopsies Ordered Percentage of Malignant/Benign Cases	On Hold Due to COVID-19		
	<b>Medium Term Outcomes:</b> Number of patients in treatment from Screening Mortality Rate			
<i>Activity 1.4- Prostate Cancer Screenings</i>			<b>Year 1 2020</b>	<b>Year 2 2021</b>
	<b>Process Measure:</b> Number of Screenings Number of Referrals Compliance Rate	On Hold Due to COVID-19	On Hold Due to COVID-19	
	<b>Short Term Outcomes:</b> Number of Biopsies Ordered Percentage of Malignant/Benign Cases			
	<b>Medium Term Outcomes:</b> Number of patients in treatment from Screening Mortality Rate			
<b>Source of Data:</b> AHCL EMR				
<b>Target Population(s):</b> Vulnerable Population				
<b>Adventist Health Resources:</b> Facility, Staff, Supplies, Financial				
<b>Collaboration Partners:</b> (place a "*" by the lead organization if other than Adventist Health) AHSH, AHUV, Howard Memorial				
<b>CBISA Category:</b> A - Community Health Improvement				

## **Strategy Results 2021:**

**Cancer Screening:** The sad reality of cancer screening during COVID in 2020 was reduced due to numerous factors that included clinic closures to meeting the anticipated needs of our community due projected needs for medical beds for effected patients. Additionally, patients were staying home and sheltering as was recommended and, in some cases, required. Adventist Health Clear Lake recognizes these factors and has already begun ramping up services and screening protocols within our rural healthcare clinics in Lake County. In addition to the metrics above, there were 3807 cervical cancer screenings with 50% of patients receiving referrals to specialty care.

## The Adventist Health + Blue Zones Solution

Our desire to improve community well-being grew out of not only our mission at Adventist Health -to live God's love by inspiring health, wholeness and hope – but also by the sheer need as seen across our system of 23 hospitals. Overwhelmingly, we see issues related to health risk behaviors, mental health and chronic illnesses throughout the communities we serve. That is why we have focused our work around addressing behavior and the systems preventing our communities from achieving optimal health.

In an effort to meet these needs, our solution is to create a sustainable model of well-being that measurably impacts the well-being of people, well-being of places and equity.

In 2020, Adventist Health acquired Blue Zones as the first step toward reaching our solution. By partnering with Blue Zones, we will be able to gain ground in shifting the balance from healthcare – treating people once they are ill – to transformative well-being – changing the way communities live, work and play. In 2021, Adventist Health committed to launching six Blue Zone Projects within our community footprint, and as we enter 2022 these projects are active. Blue Zone Projects are bringing together local stakeholders and international well-being experts to introduce evidence-based programs and changes to environment, policy and social networks. Together, they measurably improve well-being in the communities we serve.