Dameron Hospital 2020 Community Health Implementation Strategy







Introduction & Purpose

Dameron 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.

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.

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 Dameron Hospital to develop and collaborate on community benefit programs that address prioritized health needs identified in its 2019 CHNA. Dameron Hospital has adopted the following priority areas for our community health investments.

Prioritized Health Needs – Planning to Address

- Economic Security
- Obesity/Healthy Eating and Active Living (HEAL)/Diabetes

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 our 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 prioritized according to the following criteria:

- It fits the definition of a "health need" as described above.
- It was confirmed by multiple data sources (i.e., identified in both secondary and primary data).
- Indicator(s) related to the health need performed poorly against a defined benchmark (e.g., state average).



• It was chosen as a community priority. Prioritization was based on the frequency with which key informants and focus groups mentioned the need. The final list included only those that at least three key informants and focus groups identified as a need.

For further information about the process to identify and prioritize significant health needs, please refer to Dameron Hospital's 2019 CHNA report at the following link: https://www.dameronhospital.org/about-us/community-health-needs-assessment/

About Dameron Hospital

Dameron Hospital is a fully accredited, non-profit, 200+ bed community hospital providing acute and tertiary level care to San Joaquin County residents. Our commitment to providing the highest quality care has earned Dameron Hospital various state and national recognitions, as well as numerous awards and accolades. The hospital has also been designated by Blue Shield of California as a Blue Distinction® Center for Bariatric Surgery and for Knee and Hip Replacements as part of the Blue Distinction® Centers for Specialty Care program. In addition to being a top-rated joint replacement center in the Stockton area, and the county's leading orthopedic hospital, Dameron has also been recognized as a Top Performer for its Quality Metrics by The Joint Commission.

The San Joaquin County Emergency Medical Services Agency has also named Dameron as a designated STEMI (heart attack) receiving center and certified stroke center. Thanks to Dameron's Lifeline technology and cardiac-prepared ER staff, emergency responders have a local care partner that also is a Certified Cardiac Care Hospital and a Cardiothoracic Surgery Center with an active Cardiac Catheterization Lab.

Dameron Hospital continues its leading-edge tradition, and we are continually enhancing its facilities and services to help fulfill our mission of delivering top-quality care to the community. Dameron services include cardiology and cardiac surgery, orthopedics, bariatric surgery, as well as general acute care, emergency, and intensive care services.

Dameron Hospital and Adventist Health

To expand healthcare choices and access in the Stockton area, Adventist Health began management of Dameron Hospital on January 1, 2020, under an agreement between the nonprofit healthcare organizations, Dameron Hospital Board President Bill Trezza announced on December 18, 2019.

"Dameron leadership and staff want to do more for their community, and this agreement makes that possible," Trezza said. "Adventist Health has expanded and improved healthcare



services in Lodi since joining the community in 2015, and we're eager to build San Joaquin County healthcare services together."

Adventist Health, is 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 facilities Include:

- 21 hospitals with more than 3,284 beds
- More than 273 clinics (hospital-based, rural health and physician clinics)
- 13 home care agencies and seven hospice agencies
- Four joint-venture retirement centers
- Compassionate and talented team of 35,000 associates, 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

Dameron Hospital Implementation Strategy

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

Health Need 1: Economic Security

- Collaboration with HealthForce Partners
- Workplace Wellness Initiative through collaboration with the American Heart Association
- Partner with the San Joaquin County Medical Society Decision Medicine Program

Health Need 2: Obesity/Healthy Eating and Active Living (HEAL)/Diabetes

- Free health education seminars
- Newsletters distributed to more than 32,000 community households
- Help all ages get more physical activity, including programs that meet language/culture needs.

Under the health need of economic security, you will note that Dameron is collaborating with partners to improve career pathways and prepare skilled workers to meet the demand of healthcare organizations. Additionally, we are trying to improve workplace health in our local businesses. When employees are healthy, absenteeism decreases, productivity increases, and both employer and employee benefit. These initiatives can be indirectly linked to homelessness. If we create opportunities for our students to succeed and prepare them to meet the needs of the workforce, and improve the health and well-being of our employers, then we are setting our community up for economic stability.

The Action Plan presented below outlines in detail the individual strategies and activities Dameron Hospital will implement to address the health needs identified though 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. Dameron 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 specific plan to address the following significant health needs identified in the 2019 CHNA.



Adventist Health

Significant Health Needs - NOT Planning to Address

- Violence/Injury Prevention: Need is being addressed by others
- · Mental Health: Dameron does not have the resources at this time to address this need
- Access to Care Need is being addressed by others
- Substance Abuse/Tobacco: Need is currently being addressed by others
- Asthma: Dameron does not have the resources necessary at this time to address this need
- Oral Health: Need is being addressed by others
- Climate and Health: Hospital does not have expertise to effectively address the need



Dameron Hospital Implementation Strategy Action Plan

PRIORITY HEALTH NEED: ECONOMIC SECURITY

GOAL STATEMENT: IMPROVE THE ENCONOMIC SECURITY IN OUR COUNTY BY IMPROVING CAREER OPPORTUNITIES FOR OUR RESIDENTS, INCREASING THE SUPPLY OF QUALIFIED WORKERS TO MEET THE NEEDS OF THE HEALTHCARE INDUSTRY, AND IMPROVE THE OVERALL HEALTH OF OUR LOCAL BUSINESSES.

Mission Alignment: (Well-being of People; Well-being of Places; Equity) Well-being of people, Equity

Strategy 1.1: Dameron has partnered with HealthForce Partners to improve career pathway opportunities for community residents and to increase the supply of skilled workers to meet the needs of a dynamic healthcare industry in the Northern San Joaquin Valley.

Strategy 1.2: Dameron is collaborating with the American Heart Association, Adventist Health Lodi Memorial and the Lodi Chamber of Commerce's Health Value Action Team to provide our local businesses with a nationally successful program, the Workplace Health Solutions. The program will offer local businesses a suite of science-based, evidence-informed tools and services to help build a workplace culture of health.

Strategy 1.3: Dameron is collaborating with the San Joaquin Medical Society's Decision Medicine program, which was created to address the physician shortage in San Joaquin County. It is a program for high school students who are interested in becoming physicians. Students are high achieving from underrepresented backgrounds and attend a variety of high schools from across San Joaquin County.

Programs/ Activities	Process Measures	Results: Year 1	Short Term Outcomes	Results: Year 2	Medium Term Outcomes	Results: Year 3
Activity 1.1 Participation in the HOPE pilot program	# of participants enrolled in the Helping Our People Elevate (HOPE) pilot program		# of participants that successfully complete the program		# employed in a new position	
Activity 1.2 Partnership with American Health Association	# of employers recruited for the AHA's Workplace Health Solutions		Train at least 10 champions, one from each organization		Self-assessed health state of organization % Decrease in employee absenteeism	
Activity 1.3 Partnership with SJ Medical Society Decision Medicine Program	# of students participating in the Dameron Hospital program segment		# of students that pursue secondary education in the medical/clinical field		# of students that achieve undergraduate degree in the medical/clinical academic track	





Source of Data:

• Dameron, HealthForce Partners, the American Heart Association, San Joaquin Medical Society

Target Population(s):

• Incumbent workers, low income, local businesses, underrepresented students

Adventist Health Resources: (financial, staff, supplies, in-kind etc.)

• Financial, staff, supplies

Collaboration Partners: (place a "*" by the lead organization if other than Adventist Health)

• HealthForce Partners, the American Heart Association*, Lodi Chamber of Commerce, San Joaquin Medical Society*

PRIORITY HEALTH NEED: ECONOMIC SECURITY

CBISA Category: (A - Community Health Improvement; E - Cash and In-Kind; F - Community Building; G - Community Benefit Operations)

- Category B Health Professions Education
- Category F Community Building



PRIORITY HEALTH NEED: OBESITY/HEALTHY EATING AND ACTIVE LIVING (HEAL)/DIABETES

GOAL STATEMENT: INCREASE PHYSICAL ACTIVITY FOR ALL AGES AND ESTABLISH PROGRAMS IN HIGH RISK NEIGHBORHOODS

Mission Alignment: (Well-being of People; Well-being of Places; Equity) Well-being of people,

Strategy 1.1: Free public health education seminars offering information on options to restore mobility and promote physical activity

Strategy 1.2: Distribute health education articles to area residents on health eating and active living to improve health and reduce obesity

Strategy 1.3: Convene a Summit in 2020 to encourage adoption of parks

Programs/ Activities	Process Measures	Results: Year 1	Short Term Outcomes	Results: Year 2	Medium Term Outcomes	Results: Year 3
Activity 1.1 Free public health education seminars	# of classes # of participants		Increased awareness of options to maintain mobility and active lifestyles		Improved mobility based on lifestyle change or clinical interventions	
Activity 1.2	# of households reached # of articles		Increased awareness of the benefits of healthy lifestyles and ways to accomplish that		Self-assessed readership survey	
Activity 1.3	Engage 40 partners Survey at least 50 residents living near parks we plan to improve to assess their utilization and provide baseline data		# of partners who adopt a park # of park improvements		Increase in park utilization. Park utilization will be evaluated by surveying residents living by improved parks to assess their use.	





Source of Data:

- Dameron
- Parks and Recreation
- Participant surveys

Target Population(s):

Low income, high risk, elderly

Adventist Health Resources: (financial, staff, supplies, in-kind etc.)

• Financial: staff, supplies, materials

Collaboration Partners: (place a "*" by the lead organization if other than Adventist Health/Dameron Hospital)

• County Health Collaborative*

CBISA Category: (**A** - Community Health Improvement; **E** - Cash and In-Kind; **F** - Community Building; **G** - Community Benefit Operations)

Category A

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To request a copy, provide comments or view electronic copies of current and previous community health needs assessments or community benefit implementation strategies, please visit the Community Benefits section on our website at https://www.dameronhospital.org/about-us/community-health-needs-assessment/