

2019 Implementation Strategy Report

Kaiser Foundation Hospital: Anaheim and Irvine

License number: #060000091

Approved by Kaiser Foundation Hospitals Board of Director's Community Health Committee

March 18, 2020



Kaiser Permanente Southern California Region Community Health Implementation Strategy Report for KFH-Anaheim and Irvine

Contents

I. General information	3
II. About Kaiser Permanente (KP)	4
III. About Kaiser Permanente Community Health	4
IV. Kaiser Foundation Hospitals – Anaheim and Irvine	5
A. Map of facility service areas	5
B. Geographic description of the community served (towns, counties, and/or zip codes)	6
C. Demographic profile of community served	7
V. Purpose of Implementation Strategy	8
List of Community Health Needs Identified in 2019 CHNA Report	8
VI. Who was involved in the Implementation Strategy development	8
A. Partner organizations	8
B. Community engagement strategy	9
C. Consultant(s) used	. 13
VII. Health needs that KFH-Anaheim and Irvine plans to address	13
A. Process and criteria used	. 13
B. Health needs that KFH-Anaheim and Irvine plan to address	. 13
VIII. KFH-Anaheim and Irvine's Implementation Strategies	14
A. About Kaiser Permanente's Implementation Strategies	. 14
B. 2019 Implementation Strategies by selected health need	. 15
C. Our commitment to Community Health	. 21
IX. Evaluation plans	23
X. Health needs KFH-Anaheim and Irvine does not intend to address	23

I. General information

Contact Person:	John E. Stratman, Jr., Senior Director, Public Affairs and Brand Communications
Date of written plan:	Movember 15, 2019
Date written plan was adopted by authorized governing body:	March 18, 2020
Date written plan was required to be adopted:	May 15, 2020
Authorized governing body that adopted the written plan:	Kaiser Foundation Hospitals Board of Directors' Community Health Committee
Was the written plan adopted by the authorized governing body on or before the 15 th day of the fifth month after the end of the taxable year the CHNA was completed?	Yes ⊠ No □
Date facility's prior written plan was adopted by organization's governing body:	March 16, 2017
Name and EIN of hospital organization operating hospital facility:	Kaiser Foundation Hospitals, 94-1105628
Address of hospital organization:	One Kaiser Plaza, Oakland, CA 94612

II. About Kaiser Permanente (KP)

Founded in 1942 to serve employees of Kaiser Industries and opened to the public in 1945, Kaiser Permanente is recognized as one of America's leading health care providers and nonprofit health plans. We were created to meet the challenge of providing American workers with medical care during the Great Depression and World War II, when most people could not afford to go to a doctor. Since our beginnings, we have been committed to helping shape the future of healthcare. Among the innovations Kaiser Permanente has brought to U.S. health care are:

- Prepaid health plans, which spread the cost to make it more affordable
- A focus on preventing illness and disease as much as on caring for the sick
- An organized, coordinated system that puts as many services as possible under one roof—all connected by an electronic medical record

Kaiser Permanente is an integrated health care delivery system comprised of Kaiser Foundation Hospitals (KFH), Kaiser Foundation Health Plan (KFHP), and physicians in the Permanente Medical Groups. Today we serve more than 12 million members in eight states and the District of Columbia. Our mission is to provide high-quality, affordable health care services and to improve the health of our members and the communities we serve.

Care for members and patients is focused on their Total Health and guided by their personal physicians, specialists, and team of caregivers. Our expert and caring medical teams are empowered and supported by industry-leading technology advances and tools for health promotion, disease prevention, state-of-the-art care delivery, and world-class chronic disease management. Kaiser Permanente is dedicated to care innovations, clinical research, health education, and the support of community health.

III. About Kaiser Permanente Community Health

For more than 70 years, Kaiser Permanente has been dedicated to providing high-quality, affordable health care services and to improving the health of our members and the communities we serve. We believe good health is a fundamental right shared by all and we recognize that good health extends beyond the doctor's office and the hospital. It begins with healthy environments: fresh fruits and vegetables in neighborhood stores, successful schools, clean air, accessible parks, and safe playgrounds. Good health for the entire community requires equity and social and economic well-being. These are the vital signs of healthy communities.

Better health outcomes begin where health starts, in our communities. Like our approach to medicine, our work in the community takes a prevention-focused, evidence-based approach. We go beyond traditional corporate philanthropy or grant making to pair financial resources with medical research, physician expertise, and clinical practices. Our community health strategy focuses on three areas:

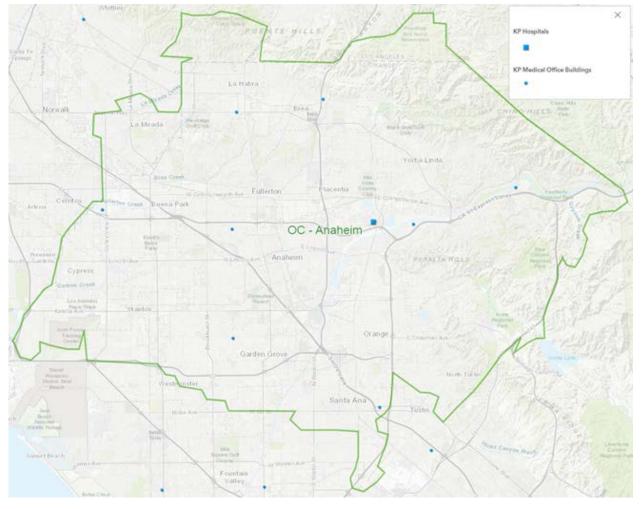
- Ensuring health access by providing individuals served at KP or by our safety net partners with integrated clinical and social services;
- Improving conditions for health and equity by engaging members, communities, and Kaiser Permanente's workforce and assets; and
- Advancing the future of community health by innovating with technology and social solutions.

For many years, we've worked side-by-side with other organizations to address serious public health issues such as obesity, access to care, and violence. We've also conducted Community Health Needs Assessments to better understand each community's unique needs and resources. The CHNA process informs our community investments and helps us develop strategies aimed at making long-term, sustainable change—and it allows us to deepen the strong relationships we have with other organizations that are working to improve community health.

IV. Kaiser Foundation Hospitals – Anaheim and Irvine

A. Map of facility service areas

Figure A. KFH-Anaheim Service Area



Buena Park × KP Hospitals Anaheim KP Medical Office Buildings Garden Grove Santa Ana Valle Huntington Beach Costa Mesa OC - Irvine Rancho ANTA ANA MOUNT Mission Viejo Altso VI apistrano

Figure B. KFH-Irvine Service Area

B. Geographic description of the community served (towns, counties, and/or zip codes)

Two Kaiser Permanente hospitals serve the Orange County area under a single license. The KFH-Anaheim service area includes the communities of Anaheim, Brea, Buena Park, Chino Hills, Cowan Heights, Cypress, El Modena, Fullerton, Garden Grove, La Habra, La Mirada, La Palma, Los Alamitos, Modjeska, Modjeska Canyon, North Tustin, Orange, Placentia, Santa Ana, Silverado, Stanton, Tustin, Villa Park, and Yorba Linda. The KFH-Irvine service area includes the communities of Aliso Viejo, Balboa Island, Capistrano Beach, Corona Del Mar, Costa Mesa, Coto de Caza, Dana Point, El Toro, Foothill Ranch, Fountain Valley, Huntington Beach, Irvine, Irvine Hills, Ladera Ranch, a section of Lake Elsinore, Laguna Beach, Laguna Hills, Laguna Niguel, Laguna Woods, Lake Forest, Midway City, Mission Viejo, Newport Beach, Newport Coast, Rancho Santa Margarita, San Clemente, San Juan Capistrano, Seal Beach, South Laguna, Sunset Beach, Trabuco Canyon, and Westminster.

C. Demographic profile of community served

The following tables include race, ethnicity, and additional socioeconomic data for the KFH-Anaheim and KFH-Irvine service areas. Please note that "race" categories indicate "non-Hispanic" population percentage for Asian, Black, Native American/Alaska Native, Pacific Islander/Native Hawaiian, Some Other Race, Multiple Races, and White. "Hispanic/Latino" indicates total population percentage reporting as Hispanic/Latino.

Table 1. Demographic Profile: KFH-Anaheim

Race/ethnicity		Socioeconomic Data	
Total Population	1,518,877	Living in poverty (<100% federal poverty level)	14.57%
Asian	19.72%	Children in poverty	21.42%
Black	1.76%	Unemployment	2.9%
Hispanic/Latino	44.94%	Uninsured population	14.96%
Native American/Alaska Native	0.22%	Adults with no high school diploma	20.70%
Pacific Islander/Native Hawaiian	0.29%		
Some other race	0.13%		
Multiple races	2.07%		
White	30.87%		

Table 2. Demographic Profile: KFH-Irvine

Race/ethnicity		Socioeconomic Data	
Total Population	1,670,518	Living in poverty (<100% federal poverty level)	10.35%
Asian	18.49%	Children in poverty	12.09%
Black	1.34%	Unemployment	2.8%
Hispanic/Latino	24.57%	Uninsured population	9.82%
Native American/Alaska Native	0.19%	Adults with no high school diploma	10.80%
Pacific Islander/Native Hawaiian	0.27%		
Some other race	0.25%		
Multiple races	3.05%		
White	51.85%		

Source: American Community Survey (2010-2016)

V. Purpose of Implementation Strategy

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

This Implementation Strategy is intended to satisfy each of the applicable requirements set forth in the final regulations released in December 2014. This implementation strategy describes KFH-Anaheim and Irvine planned response to the needs identified through the 2019 Community Health Needs Assessment (CHNA) process. For information about KFH-Anaheim and Irvine 2019 CHNA process and for a copy of the report please visit www.kp.org/chna.

List of Community Health Needs Identified in 2019 CHNA Report

Below is the list of health needs identified for the KFH-Anaheim and Irvine service area through the 2019 Community Health Needs Assessment process:

- 1. Access to Healthcare
- 2. Economic Security
- 3. Mental Health
- 4. Stroke
- 5. Suicide

VI. Who was involved in the Implementation Strategy development

A. Partner organizations

The following community-based organizations, hospitals, and groups supported the development of the implementation strategy plan. These partners represent multiple sub-populations in the community and were able to provide multiple perspectives on developing a strategy to address health needs.

- Hoag Memorial Hospital
- St. Jude Medical Center
- St. Joseph's Medical Center
- Mission Hospital
- CHOC Children's Hospital
- Orange County Health Care Agency
- Orange County Health Improvement Partnership
- Children's Cause Orange County
- HomeAid Orange County
- MECCA (Multi-Ethnic Collaborative of Community Agencies)
- Health Funders Partnership of Orange County

- CULTIVATE Team
- Be Well OC Result Area #1, Stigma Reduction Workgroup
- Core Connect Workgroup

B. Community engagement strategy

While not required by Federal CHNA regulations, Kaiser Permanente requires all KFH facilities developing Implementation Strategy plans to elicit community input throughout the plan development process. Community member and stakeholder engagement in the implementation strategy development process is intended to enable:

- KFH facilities to develop a deeper understanding of community perspective in developing Implementation Strategies, allowing opportunities for increased collaboration, potential impact, and sustainability
- Opportunities to engage community members beyond organizations and leaders with whom facilities may typically collaborate
- Transparency throughout the implementation strategy development process
- Opportunities to inform community leaders about Kaiser Permanente's unique structure and resources to effectively foster meaningful partnerships.

During the IS process key stakeholders, collaboratives, and community organizations were engaged to provide input on planned strategies and interventions to address the three identified community health needs in the Anaheim and Irvine service areas. Engagement consisted of key informant interviews and focus groups. Topics discussed included current needs, gaps and barriers, and existing efforts. Where community benefit could partner and bolster existing operational and community efforts was a focus across engagements.

	Method of Data	Job Title	Number of People	Notes on Input
KP S	stakeholders	12.2.2		,
1	Key Informant Interview	Director, Behavioral Health (Psychiatry & Addiction Medicine)	1	Recommended staff to consider resiliency - how to manage issues and appropriate ways to access services
2	Key Informant Interview	Physician Director of Behavioral Health	1	Discussed need in community for first responder programs and discussed need for health care professionals to receive training for suicide prevention

3	Key Informant Interview	Complete Care: Clinical Strategic Goals	1	Opportunity to partner on Cal Fresh initiatives
4	Key Informant Interview	Senior Learning Consultant	1	Consider partnering with Community Benefit grantees to offer free health and wellness classes; provide motivational interviewing training to community partners throughout the year.
5	Key Informant Interview	Talent Acquisition Manager	1	Consider the readiness of the community partner organization to identify candidates for our high impact hiring program.
6	Focus Group	Chief Operating Officer Pediatrician Licensed Social Worker Clinical Strategic Goals Assistant Medical Group Administrator, Primary Care Services Regional Delivery System Strategy and Planning	6	Recommended interventions for economic security - specifically food recovery and redistribution; high impact hiring; sourcing locally and promoting educational attainment. Continue to improve our KPCares volunteer program.
7	Focus Group	Director, Utilization Management Manager, Outpatient Services, Long Term Care Manager, Social Services Nephrologist, Geriatric Medicine	5	Recommend considering economic security, homeless navigation. Consider issues facing older adults such as isolation, transportation, and food security.

		Administrator, Continuing Care Service Line		
Com	munity Organiza	ations		
1	Key Informant Interview	Chief Development Officer	1	County would benefit from a stronger system for housing navigation and funding for homeless prevention and diversion.
	Key Informant Interview	Director of Community Benefit	1	The community would benefit if Kaiser Permanente could share their findings from their pediatric mental health screening and share the screening tool with other hospital systems in the county.
	Key Informant Interview	Executive Director	1	Schools would benefit by having a toolkit for students, poster campaigns, writing workshops that has the voice of the students. Also, a more robust sharing of video vignettes to reduce stigma. Faith based training is also very important - look for innovative activities to provide parent education and access for early childhood and adolescence.
2	Key Informant Interview	Executive Director	1	Reviewed workforce development needs for mental health professionals in the County such as peer provider certificate programs, strengthening behavioral health training for primary care providers and expanding the

				role of other workforce sectors in promoting mental health and wellbeing by building capacity for trauma-informed training.
3	Focus Group	Health Funders Partnership of Orange County	10	Recommend focus on housing and health & resilient families and communities.
	Focus Group	Be Well OC	12	Conduct a public education campaign on mental health across the continuum. Incorporate/include mental health education as part of all school enrollment. Start the conversation about mental health during prenatal visits. Mental health screening is done in conjunction with physical screening and is normalized.
	Focus Group	Orange County Department of Education	4	Discussed importance of social emotional learning, intersection between physical and mental wellness and importance of teacher trainings around trauma informed care and ACEs.
4	Focus Group	Orange County Health Care Agency (OCHCA)	30	Our community health focus areas align with the other hospital systems in Orange County as well as the OCHCA and CalOptima. System navigation is a need for medical and nonmedical needs.

C. Consultant(s) used

Kaiser Permanente contracted with EVALCORP Research and Consulting to prepare the Implementation Strategy Report for the Anaheim/Irvine service area. All staff hold advanced degrees and have completed graduate level courses in program evaluation, applied research methods, data collection tool development, data analysis, and advanced statistics. Staff working on the project have a cumulative total of over 50 years of evaluation and research experience and have engaged in over 20 strategic planning and needs assessment projects.

VII. Health needs that KFH-Anaheim and Irvine plans to address

A. Process and criteria used

Before beginning the Implementation Strategy health need prioritization process, KFH-Anaheim and Irvine chose a set of criteria to use in selecting the list of health needs including the severity and magnitude of the need, the extent to which disparities in the need exist across race or place, and the extent to which Kaiser Permanente is positioned to meaningfully contribute to addressing the need in collaboration with other community-based resources (e.g. relevant expertise, existing commitments and initiatives to meet community health needs, etc.). The extent to which community voice spoke to the urgency of the health need through the CHNA and the existence of other community resources dedicated to the need were important additional criteria in making final health need selections. Those health needs that were elevated across the following criteria were selected to be addressed in the implementation strategy plan:

- **Severity of need:** This refers to how severe the health need is (such as its potential to cause death or disability) and its degree of poor performance against the relevant benchmark.
- Magnitude/scale of the need: The magnitude refers to the number of people affected by the health need.
- Clear disparities or inequities: This refers to differences in health outcomes by subgroups. Subgroups may be based on geography, languages, ethnicity, culture, citizenship status, economic status, sexual orientation, age, gender, or others.
- Leveraging KP Assets: KP can make a meaningful contribution to addressing the need because of its relevant expertise, existing strategies, and/or unique business assets as an integrated health system and because of an organizational commitment to improving community health.
- Community prioritizes the issue over other issues: This refers to the Community Health Needs Assessment findings and the County Health Improvement Plan.
- Existing attention/resources dedicated to the issue: KP can make a contribution leveraging existing community resources and reducing duplicative efforts; one example is Mind OC and their ongoing efforts to address mental health.

B. Health needs that KFH-Anaheim and Irvine plan to address

Access to Healthcare. Access to comprehensive quality health care is important for the achievement of health equity and for increasing the quality of life for everyone. Limited access to health care can dramatically impact people's health outcomes. Health insurance, is one of many mechanisms that enable people to access necessary care. In Orange County, only 80% of residents aged 18-64 are insured. During the community engagement process, residents also identified transportation, long wait

times, cost, and difficulty navigating the healthcare system as barriers to accessing care. This health need was selected to be addressed in the Implementation Strategy because poor access to care, particularly preventative care, can negatively impact resident health and hospital operation; for instance, poor access to preventative care contributes to high Emergency Room Utilization and higher rates of chronic diseases if left untreated.

Economic Security. Economic insecurity exists in both the Anaheim and Irvine service areas. Secondary data indicates that the experience of economic insecurity impacts health needs locally, including poor mental health, obesity, diabetes, stroke, and cancer. In the Anaheim service area for example, on average, 15% of the population lives below the poverty level. Some subgroups in the service area, such as Latinos, experience higher levels of poverty (20%). This health need was selected to be addressed in the Implementation Strategy because community engagement revealed that the lack of economic security impacts resident's lives in various ways. The lack of affordable, quality housing in Orange County was cited in nearly every interview and focus group engagement during the Community Health Needs Assessment.

Mental Health. Mental health is an important component of a person's overall health and well-being. According to secondary data, poor mental health can result in a 61% reduction in life expectancy if left untreated. In the Irvine service area, white residents report having 3-4 poor mental health days a month. This health need was selected to be addressed in the Implementation Strategy because of the extensive level of work already being conducted around this issue in the service area in addition to the level of concern expressed by residents through the Community Health Needs Assessment. Through the community engagement process, residents indicated that youth and young adults are turning to substances like marijuana, vaping, and misuse of prescription drugs as a coping mechanism to address daily stressors. Additionally, Resident surveys collected through the engagement process indicated that 64% were concerned about mental health and throughout engagements residents reported experiencing a number of barriers to accessing mental health care including stigma, language, insufficient providers and inpatient services, and cost.

VIII. KFH-Anaheim and Irvine's Implementation Strategies

A. About Kaiser Permanente's Implementation Strategies

As part of the Kaiser Permanente integrated health system, KFH-Anaheim and Irvine has a long history of working internally with Kaiser Foundation Health Plan, the Southern California Permanente Medical Group, and other Kaiser Foundation Hospitals, as well as externally with multiple stakeholders, to identify, develop and implement strategies to address the health needs in the community. These strategies are developed so that they:

- Are available broadly to the public and serve low-income individuals
- Are informed by evidence
- Reduce geographic, financial, or cultural barriers to accessing health services, and if they ceased would result in access problems
- Address federal, state, or local public health priorities
- Leverage or enhance public health department activities
- Advance increased general knowledge through education or research that benefits the public

• Otherwise would *not* become the responsibility of government or another tax-exempt organization

KFH-Anaheim and Irvine is committed to enhancing its understanding about how best to develop and implement effective strategies to address community health needs and recognizes that good health outcomes cannot be achieved without joint planning and partnerships with community stakeholders and leaders. As such, KFH-Anaheim and Irvine welcomes future opportunities to enhance its strategic plans by relying on and building upon the strong community partnerships it currently has in place.

KFH-Anaheim and Irvine will draw on a broad array of strategies and organizational resources to improve the health of vulnerable populations within our communities, such as grant making, leveraged assets, collaborations and partnerships, as well as several internal KFH programs. The goals, strategic priorities, strategies (including examples of interventions), and expected outcomes are described below for each selected health need.

B. 2019 Implementation Strategies by selected health need

Health Need #	1: Access to Care
Long Term Goal	All community members have access to high quality care services from a trained and diverse workforce in a coordinated delivery system.
Strategic priorities	1. Increase coverage, access, and utilization of health care services for populations that are underserved, uninsured, and/or underinsured.
	2. Improve and build the current and emerging workforce to meet the primary care needs of the community.
	3. Improve the capacity of healthcare systems to provide quality healthcare, including interventions to address the social determinants of health.
Strategies & Core	1.1 Provide access and comprehensive health care to low-income individuals and families who do not have access to public or private health coverage.
Interventions	 The Kaiser Permanente Medicaid program provides high-quality medical care services to Medicaid eligible participants who would otherwise struggle to access care.
	 The Kaiser Permanente Medical Financial Assistance program provides temporary financial assistance to low-income individuals who receive care at Kaiser Permanente facilities and who can't afford medical expenses and/or cost sharing.
	The Kaiser Permanente Charitable Health Coverage program provides access to comprehensive health care to low-income individuals and families who do not have access to public or private health coverage.

- 1.2 Support access to care for patients through collaboration among community clinics, clinic networks, and other safety net providers.
 - With the support of grant funding, Regional Associations of California (Essential Access Health) strengthen the capacity of California's community clinics and health centers and to advance local health delivery system transformation through statewide policy.
 - Through grant-making Kaiser Permanente will partner with organizations that have community health navigator programs, such as the Coalition of Orange County Community Health Centers to increase access to care.
- 2.1 Support and implement physician and other pipeline and training programs, using evidence-based, culturally competent and patient-centered population management modules.
 - The Kaiser Permanente Graduate Medical Education (GME) recruits and prepares the physician workforce of the 21st century by optimizing the unique clinical and educational opportunities within Kaiser Permanente's integrated model of care, which is now considered the gold standard for improving the entire U.S. healthcare system. As part of their training, residents participate in rotations at school-based health centers, community clinics, and homeless shelters.
- 3.1 Design, pilot and implement systems for screening community members with social (non-medical) needs and refer to community-based programs.
 - The Kaiser Permanente Thrive Local initiative integrates the social determinants of health into ongoing care plans by screening and connecting low-income individuals and families to community and government resources.
- 3.2 Strengthen the capacity and infrastructure of community clinics to effectively prevent and manage chronic disease, including cardiovascular health and diabetes.
 - Through grant-making, increase chronic disease prevention, screening and management, including mammography screenings, in partnership with health centers and community partners.
 - In collaboration with stroke-advocacy organizations, such as the American Heart Association, Kaiser Permanente will expand public awareness about the scale, scope, and nature of stroke and its lifestyle effects in the black community.
 - Kaiser Permanente will participate on advisory groups and boards to increase advocacy and education on asthma prevention and treatment, including air quality issues, such as the Environmental Justice Advisory Group of the South Coast Air Quality Management District and the local American Lung Association California Board of Directors.

Expected outcomes

KP aims to achieve its strategic priorities through interventions, that if successfully implemented, could result in a set of expected outcomes, such as:

- Improved healthcare provider capacity to screen their members and patients for non-medical social needs.
- Improved referral and coordination between healthcare and community-based providers to address the social needs of communities.
- Sustained and/or enhanced availability of services and financial resources to support coverage and access to quality healthcare for uninsured and underinsured community members.

Health Need #2: Economic Security Long Term All community members experience improved economic security and access to social Goal services, including affordable housing, educational attainment, training and employment, and healthy foods. Strategic 1. Reduce food insecurity in the community and improve access to healthy foods. priorities 2. Preserve and improve the availability of affordable housing and improve care coordination to serve individuals experiencing homelessness and to prevent displacement. 3. Improve educational attainment and employment opportunities. Strategies & 1.1 Design, pilot and implement programs and systems for promoting, screening and/or enrolling community members in food benefit programs. Core Interventions The Kaiser Permanente Food for Life initiative delivers a multi-pronged approach to improve food security, such as the Cal Fresh enrollment campaign utilizes multi-modal outreach to increase Cal Fresh enrollment for eligible community members. 1.2 Support programs that procure, recover and/or redistribute food to food insecure communities. The Kaiser Permanente Food Recovery and Food Redistribution program envision foodservices as the source of nutritious meals for patients, staff and the broader community by distributing food to food insecure communities. With the support of grant funding, the California Association of Food Banks Farm to Family utilizes advocacy and outreach efforts to procure and

- provide fresh produce to food banks serving individuals and families who are food insecure.
- Kaiser Permanente participates as an active member in the Orange County Strategic Plan for Aging; Senior Nutrition/Food Security Committee and part of the Waste Not OC Coalition recovering and redistributing food to food insecure community members.
- 1.3) Support the capacity of communities and anchor organizations to adopt and implement policies and programs to ensure access to healthy foods.
 - The Kaiser Permanente Thriving Schools Healthy Eating Active Living (HEAL)
 Initiative, in partnership with Alliance for a Healthier Generation, supports Title

 1 schools with the adoption and implementation of policies and practices to
 continuously improve the school's culture and practices around health.
 - 2.1 Enhance the infrastructure and capacity of service providers to serve individuals at risk or experiencing homelessness.
 - Through grant making, Kaiser Permanente will partner with organizations to increase the number of housing navigators.
 - 2.2 Support and participate in collaboratives that support coordination and funding of resources (such as health services and housing) for individuals at risk or experiencing homelessness.
 - Kaiser Permanente will partner with the United to End Homelessness initiative, working to create long-term supportive housing and reduce homelessness in Orange County to a functional zero.
 - 3.1 Support the long-term economic vitality of communities through procurement, hiring and workforce development, and/or small business development impact investing.
 - The Kaiser Permanente Social Enterprises strategy works competitive, revenue-generating businesses with the social mission to hire and provide training to people who are striving to overcome employment barriers, including homelessness, incarceration, substance abuse, mental illness, and limited education.
 - The Kaiser Permanente, High Impact Hiring is a talent-sourcing strategy that aligns business needs with positive community impact. High Impact Hiring creates career opportunities for people with employment barriers, focusing on specific populations of disadvantaged people or specific geographic areas.

Expected outcomes

KP aims to achieve its strategic priorities through interventions, that if successfully implemented, could result in a set of expected outcomes, such as:

- Increased number of community members screened for food insecurity and enrolled in food benefit programs.
- Enhanced availability of housing assistance and programs, such as eviction prevention and defense, rental assistance programs, and other supportive services.
- Improved employment opportunities for hard to hire community members.

Health Need #3: Mental Health Long Term All community members have optimal levels of mental health and well-being through Goal improved equitable access to evidence-based, high quality, appropriate care and reduced efforts of stigma. Strategic 1. Improve access and connection to mental healthcare in clinical and community priorities settings. 2. Improve and build the current and emerging mental health workforce to meet community needs. 3. Reduce mental health stigma and improve knowledge, capacity and resilience in individuals, communities, and organizations. Strategies & Core 1.1 Support the infrastructure and capacity building of community organizations and Interventions clinics to improve access to quality mental health care. Kaiser Permanente will participate in Be Well Orange County's subgroup on closing treatment gaps and improving access to mental health services. Kaiser Permanente will collaborate with the newly formed Children's Mental Health Collaborative to increase access for children to mental health services. Kaiser Permanente's Center for Healthy Living provides Motivational Interviewing training, an evidence-based counseling method that can be used as an effective short-term intervention with those experiencing addiction, free of charge to community partners. 1.2 Support the integration of mental health care, case management, and navigation services into clinical care and community settings.

- With the support of grant funding, Mind OC Be Well Hub will provide colocated mental health and substance abuse services to improve care coordination and reduce emergency room visits.
- Kaiser Permanente will work with clinical care sites to expand screening protocols across the lifespan, including for Adverse Childhood Experiences (ACEs) in pediatric offices and mental health screening for older adults in primary care settings.
- 2.1 Support the education and training of licensed mental health professionals to be culturally competent.
 - In collaboration with MECCA (Multi-Ethnic Collaborative of Community Agencies) Kaiser Permanente will increase cultural competency and better reach underserved communities in Orange County.
- 2.2 Support the utilization of pipeline and training programs to increase the number of licensed and diverse mental health professionals.
 - Continue to be a member of the OC STEM Initiative and support the collaborative efforts with K-12, community colleges and business and industry, health care employers and stakeholders to convene and address healthcare career pathways.
 - Provide workforce development opportunities through the Masters Social Work internship program.
 - Collaborate with public and private partners, such as Children's Cause Orange County, in support of the formation of a new Orange County Early Childhood Mental Health Workforce Development Initiative.
- 3.1 Support efforts to improve the community and social support system's knowledge, attitudes, beliefs and perceptions about mental health, trauma and resilience.
 - Kaiser Permanente will participate in the Be Well OC initiative for stigma reduction including attending collaborative meeting and supporting the Stigma Free OC initiative.
 - Kaiser Permanente will participate in collective impact efforts coordinated by Waymakers to prevent substance use among youth in the Capistrano Unified School District and the Newport-Mesa Unified School District.
 - Through grant-making, Kaiser Permanente will partner with NAMI Orange County to work with the students in schools to raise awareness about mental health and wellness by developing tool-kits, offering writing labs, or peer-topeer student clubs.

- The Kaiser Permanente Public Good Projects' Action Minded campaign, a
 digital community health intervention using education, social engagement and
 multi-media tools to engage the general public, issue-advocates and
 community partners in reducing stigma towards mental health conditions
- 3.2 Support the enhancement of organizational culture, practices and policies in schools and other institutions to be trauma-informed.
 - Kaiser Permanente will collaborate with educational organizations, such as the Orange County Department of Education, to provide trauma-informed training for educators and providers to better understand the impact of trauma on academic achievement and behavior.
 - Kaiser Permanente will collaborate with MIND OC and other community-based organizations to support suicide prevention efforts at schools and across the county.

Expected outcomes

KP aims to achieve its strategic priorities through interventions, that if successfully implemented, could result in a set of expected outcomes, such as:

- Improved understanding of and attitudes toward mental health care among individuals and organizations.
- Improved help-seeking behavior among those in need of mental health care.
- Increased number of culturally competent individuals in the mental health workforce.
- Enhanced capacity in clinical and community-based settings to address community mental health needs.

C. Our commitment to Community Health

At Kaiser Permanente, our scale and permanence in communities mean we have the resources and relationships to make a real impact, and wherever possible, our regions and facilities collaborate with each other and with key institutions in our communities, such as schools, health departments, and city/county governments to create greater impact. The CHNA/IS process presents the opportunity to reinforce and scale national and regional strategies to address health needs that impact all of our communities, even if those health needs are not prioritized locally. The following strategies illustrate the types of organizational business practices as well as regional efforts that we implement to address multiple health needs and contribute to overall community health and well-being:

• Reduce our negative environmental impacts and contribute to health at every opportunity. We have optimized the ways in which we manage our buildings; purchase food, medical supplies and equipment; serve our members; consume energy; and process waste. The following strategies illustrate several of our practices that enable us to operate effectively while creating a healthier environment for everyone. Our Environmentally Preferable Purchasing Standard

prioritizes the procurement of products with fewer chemicals of concern and less resource intensity, thus encouraging suppliers to increase the availability of healthier products. We are building renewable energy programs into our operations, with plans to be carbon neutral in 2020. We recognize that mitigating the impacts of climate change and pollution is a collective effort, and we are therefore proud to work with like-minded organizations and individuals, including the United Nations, Health Care Without Harm, government entities, as well as other influencers that advocate for environmental stewardship in the healthcare industry and beyond.

- Deploy research expertise to conduct, publish, and disseminate epidemiological and health services research. Conducting high-quality health research and disseminating its findings increases awareness of the changing health needs of diverse communities, addresses health disparities, and improves effective health care delivery and health outcomes in diverse populations disproportionately impacted by health disparities. Kaiser Permanente's Department of Research and Evaluation, Kaiser Foundation Research Institute, and Nursing Research Programs deploy a wide range of research methods, including clinical research, health care services research, and epidemiological and translational studies on health care that are generalizable and broadly shared, helping build a knowledge base that improves health and health care services.
- Implement healthy food policies to address obesity/overweight, such as purchasing sustainable, locally produced fruits and vegetables; supporting local restaurants and caterers that meet KP's Healthy Picks and to make more available healthier food options in our communities; and supporting vendors that hire under/unemployed residents (with living wages and benefits) in the food production/distribution process. We also partner with school districts and city governments to support them in adopting and implementing healthy food procurement policies.
- Contribute toward workforce development, supplier diversity, and affordable housing to address economic security. We support supplier diversity by implementing policies and standards to procure supplies and services from a diverse set of providers; working with vendors to support sub-contracting with diverse suppliers; partnering with community-based workforce development programs to support a pipeline for diverse suppliers; and building the capacity of local small businesses through training on business fundamentals. We also seek to reduce homelessness and increase the supply of affordable housing by strengthening systems to end homelessness and shaping policies to preserve and stimulate the supply of affordable housing.
- Support community members directly through ongoing engagement and direct services. The Kaiser Permanente Educational Theater (KPET) uses live theatre, music, comedy, and drama to inspire children, teens, and adults to make healthier choices and better decisions about their well-being around topics such as: reading and literacy, conflict management, healthy eating and active living, bullying, and sexually transmitted infections. KPET is provided free of charge to schools and the general community.
- Support cities to adopt and implement evidence-based policies that advance health
 prosperity and equity. The CityHealth initiative works with cities to enhance their capacity to
 advance policy priorities, such as earned sick leave, universal pre-kindergarten, affordable

housing/inclusionary zoning, complete streets, alcohol sales control, tobacco 21, smoke-free indoor air, food safety and restaurant inspection ratings, and healthy food procurement.

IX. Evaluation plans

Kaiser Permanente has a comprehensive measurement strategy for Community Health. Our vision at Kaiser Permanente is for our communities to be the healthiest in the nation. To that end, we are committed to pursuing a deep and rigorous understanding of the impact of our community health efforts. We monitor the health status of our communities and track the impact of our many initiatives on an ongoing basis. And we use our measurement and evaluation data, and information gathered through our Community Health Needs Assessments, to improve the effectiveness of our work and demonstrate our impact. The Community Health Needs Assessments can help inform our comprehensive community health strategy and can help highlight areas where a particular focus is needed and support discussions about strategies aimed at addressing those health needs.

In addition, KFH Anaheim and Irvine will monitor and evaluate the strategies listed above for the purpose of tracking the implementation and documenting the impact of those strategies in addressing selected CHNA health needs. Tracking metrics for each prioritized health need include the number of grants made, the number of dollars spent, the number of people reached/served, collaborations and partnerships, and metrics specific to KFH leveraged assets. In addition, KFH Anaheim and Irvine tracks outcomes, including behavior and health outcomes, as appropriate and where available.

X. Health needs KFH-Anaheim and Irvine does not intend to address

While all the health needs prioritized in the 2019 Community Health Needs Assessment process are important to address, the implementation strategy planning process requires KFH-Anaheim and Irvine to conduct a selection process based on critical criteria including health need severity, magnitude, inequity, and the extent to which KFH-Anaheim and Irvine is in a position to meaningfully address the need (see Section VII.A for a full description of selection criteria). Health needs that were not elevated across these critical criteria were not selected for the implementation strategy plan. Health needs not selected include: Stroke and Suicide. These health needs were not selected as standalone needs for the purposes of this report, but KFH Anaheim and Irvine plans to address these needs through efforts to improve Access to Care and Mental and Behavioral Health, respectively (see Section VIII for a full description of strategies).