



# 2016 Implementation Strategy Report for Community Health Needs

Kaiser Foundation Hospital Riverside  
License #250000327

Approved by KFH Board of Directors  
March 16, 2017

To provide feedback about this Implementation Strategy Report,  
email [chna-communications@kp.org](mailto:chna-communications@kp.org)

**Kaiser Foundation Hospitals  
Community Health Needs Assessment (CHNA)  
Implementation Strategy Report  
2016**

Kaiser Foundation Hospitals – Riverside  
License #250000327  
10800 Magnolia Ave, Riverside, CA 92505

**I. General Information**

Contact Person:	Karen Roberts, Senior Director, Public Affairs & Brand Communications	
Date of Written Plan:	December 5, 2016	
Date Written Plan Was Adopted by Authorized Governing Body:	March 16, 2017	
Date Written Plan Was Required to Be Adopted:	May 15, 2017	
Authorized Governing Body that Adopted the Written Plan:	Kaiser Foundation Hospital/Health Plan Boards of Directors	
Was the Written Plan Adopted by Authorized Governing Body On or Before the 15 <sup>th</sup> Day of the Fifth Month After the End of the Taxable Year the CHNA was Completed?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Date Facility's Prior Written Plan Was Adopted by Organization's Governing Body:	December 4, 2013	
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**

Kaiser Permanente is a not-for-profit, integrated health care delivery system comprised of Kaiser Foundation Hospitals, Kaiser Foundation Health Plan, and The Permanente Medical Groups. For more than 65 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. Today we serve more than 10.6 million members in eight states and the District of Columbia. Since our beginnings, we have been committed to helping shape the future of health care. Kaiser Permanente is dedicated to care innovations, clinical research, health education and the support of community health.

### III. About Kaiser Permanente Community Benefit

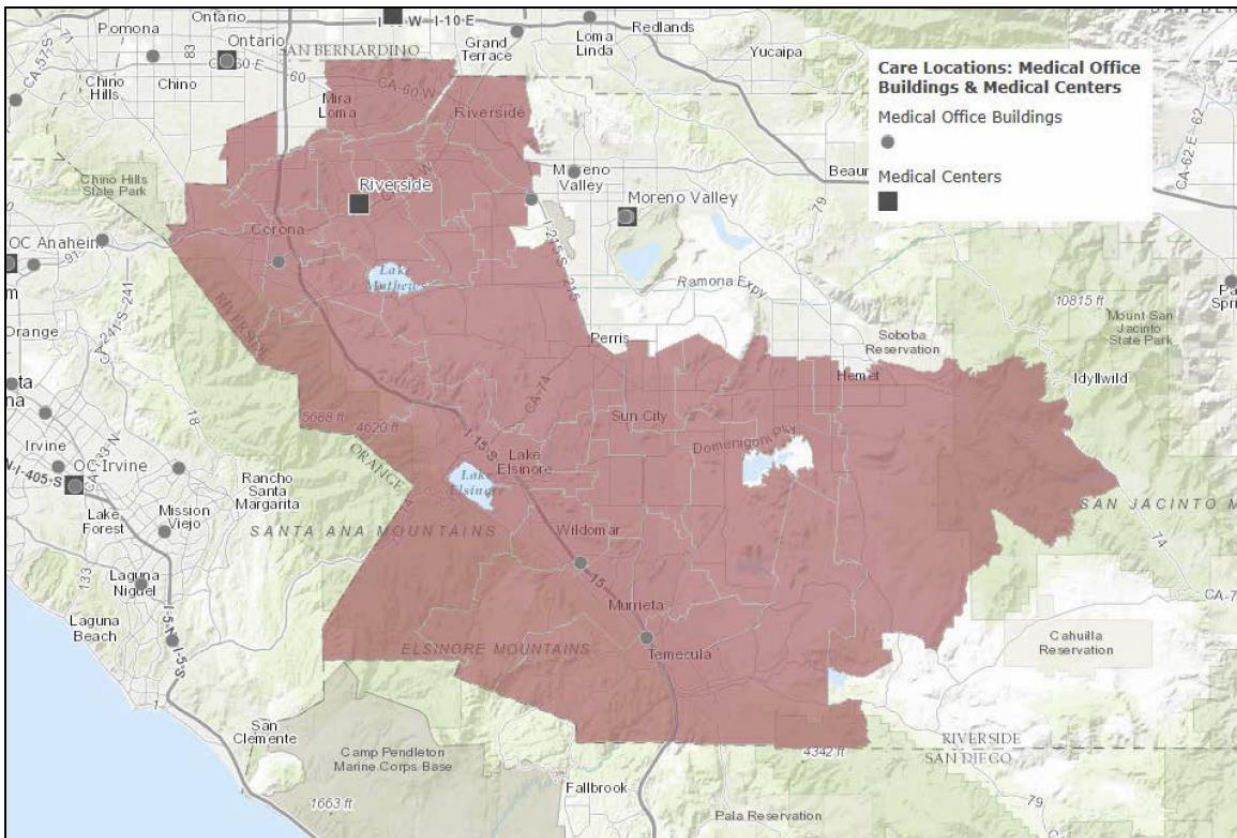
We believe good health is a basic aspiration shared by all, and we recognize that promoting good health extends beyond the doctor’s office and the hospital. Like our approach to medicine, our work in the community takes a prevention-focused, evidence-based approach. We go beyond traditional corporate philanthropy or grant-making to leverage financial resources with medical research, physician expertise, and clinical practices. Historically, we have focused our investments in three areas—Health Access, Healthy Communities, and Health Knowledge—to address critical health issues in our communities.

For many years, we have worked collaboratively with other organizations to address serious public health issues such as obesity, access to care, and violence. We have conducted Community Health Needs Assessments (CHNA) 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.

In addition, Kaiser Permanente seeks to promote community health upstream by leveraging its assets to positively influence social determinants of health – social, economic, environmental – in the communities we serve.

### IV. Kaiser Foundation Hospitals – Riverside Service Area

KFH-Riverside is located at 10800 Magnolia Ave, Riverside, CA 92505. The map below describes the geographic area covered by KFH-Riverside. The service area includes 17 cities: Corona, Eastvale, Hemet, Homeland, Jurupa Valley, Lake Elsinore, Menifee, Murrieta, Norco, Perris, Quail Valley, Riverside, Romoland, Sun City, Temecula, Wildomar, and Winchester.



The Medical Center Area (MCA) includes the following cities and zip codes within Riverside County:

City	Zip Codes
Corona	91718, 91719, 91720, 92877, 92878, 92879, 92880, 92881, 92882, 92883
Eastvale	92880, 91752
Hemet	92343, 92545
Homeland	92348, 92548
Jurupa Valley	92509
Lake Elsinore	92330, 92530, 92531, 92532
Menifee	92355, 92584
Murrieta	92362, 92562, 92564, 92563
Norco	91760, 92860
Perris	92570, 92571, 92572, 92599
Quail Valley	92587
Riverside	92506, 92513, 92514, 92515, 92516, 92503, 92504, 92509, 92505, 92519
Romoland	92380, 92585
Sun City	92381, 92586, 92587, 92585, 92584
Temecula	92390, 92589, 92590, 92591, 92592, 92593
Wildomar	92595
Winchester	92396, 92596

KFH-Riverside Demographic Data	
Total Population	1,363,371
Race	
White	67%
Black	6%
Asian	7%
Native American/ Alaskan Native	1%
Pacific Islander/ Native Hawaiian	<1%
Some Other Race	14%
Multiple Races	5%
Ethnicity	
Hispanic or Latino	42%
Non-Hispanic	58%

KFH-Riverside Socio-economic Data	
Living in Poverty (<200% FPL)	35%
Children in Poverty	20%
Unemployed	9%
Uninsured	18%
No High School Diploma	18%

Note: \*Percentages were pulled from the CHNA Data Platform in May 2016  
(<http://www.communitycommons.org/groups/community-health-needs-assessment-chna/>)

## 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 final regulations released in December 2014. This implementation strategy describes KFH-Riverside's planned response to the needs identified through the 2016 Community Health Needs Assessment (CHNA) process. For information about KFH-Riverside's 2016 CHNA process and for a copy of the report please visit [www.kp.org/chna](http://www.kp.org/chna).

## **VI. List of Community Health Needs Identified in 2016 CHNA Report**

The list below summarizes the health needs identified for the KFH-Riverside service area through the 2016 Community Health Needs Assessment process.

1. Access to care
2. Obesity
3. Transportation
4. Economic security
5. Diabetes
6. Climate and health
7. Cancer
8. Mental health
9. Cardiovascular disease
10. Substance use and tobacco
11. Asthma
12. HIV and STIs

## **VII. Who was Involved in the Implementation Strategy Development**

The implementation strategy was developed through a process that involved hospital operational leadership and community partners. One group of stakeholders was involved in the IS development for both KFH-Riverside and KFH-Moreno Valley (the combined service area covers Riverside County). The core planning team consisted of the hospital service area's Operations Leadership Team (OLT), comprised of stakeholders representing both Kaiser Foundation Hospital/Health Plan and the Southern California Permanente Medical Group (SCPMG) and included:

- Jiji Abraham, Chief Financial Officer, Riverside Area
- Cecilia Arias, Community Benefit Health Manager
- Robert Blair, Chief Administrative Officer
- Frank Flowers, MD, Area Medical Director
- Robin Mackenroth, Chief Operating Officer of KFH-Riverside
- Karen Roberts, Senior Director of Public Affairs and Brand Communications
- Corey Seale, Chief Operating Officer, KFH-Moreno Valley
- Karen Sirski-Martin, Assistant Medical Group Administrator
- Vita Willett, Senior Vice President, Area Manager

### **a. Partner Organizations**

KFH-Riverside's partnership with Strategic Health Alliance Pursuing Equity (SHAPE) Riverside County was instrumental to developing the Implementation Strategy (IS) Report. SHAPE is a community-wide alliance composed of 28 community partners that represent multiple sub-populations in the KFH-Riverside community. The community partners include organizations such as, First 5 Riverside, Hospital Association of Southern California, Riverside Community Health Foundation, a number of Riverside County departments, and Western Riverside Council of Governments. Participating in the quarterly meetings provided KFH-Riverside with multiple perspectives on developing a strategy to address the four selected health needs that aligned with county-wide efforts to improve health for all of Riverside County.

Additionally, Boys & Girls Club of Greater Redlands-Riverside, Desert AIDS Project, First 5 Riverside, Inland Empire Health Plan, Lestonnac Free Clinic, Planned Parenthood of the Pacific Southwest, and Riverside County Department of Public Social Services participated in the Twitter chats described below. These organizations represent multiple sub-populations in the KFH-Riverside community are long-time partners of KFH-Riverside.

### **b. Community Engagement Strategy**

While not required by Federal CHNA regulations, Kaiser Permanente encourages all KFH facilities developing Implementation Strategy plans to elicit community input throughout the plan development process. Voluntary Community members' and stakeholders' 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 collaborations.

HARC organized a total of six Twitter chats, which are live Twitter events that took place between October 4, 2016 and October 6, 2016, to gather input from community members. The chats were publicized to community members via email, social media promotion, and announcements at community meetings. HARC moderated the chats and focused on the three priority health needs identified through the process outlined in Section VIII. While there was some minor participation from the community agencies Boys & Girls Club of Greater Redlands-Riverside, Desert AIDS Project, First 5 Riverside, Inland Empire Health Plan, Lestonnac Free Clinic, Planned Parenthood of the Pacific Southwest, and Riverside County Department of Public Social Services, there was not sufficient participation from community residents or partner agencies to draw any conclusions. There are a number of possible reasons the Twitter chats were not successful, including the limited time to publicize the events, HARC's small Twitter following, and the region's lack of familiarity with Twitter chats.

Subsequently, HARC widely distributed a community survey in an effort to garner insight on the three priority health needs from the region's residents. The survey was offered in both English and Spanish. The resulting data was qualitatively analyzed by the HARC team. The community resident engagement process proved valuable for the KFH-Riverside core planning team in ensuring that the strategies align with the needs of the KFH-Riverside community. Below are the results:

### ***Demographics***

A total of 112 community members completed all sections of the survey, which includes a total of 87 women and 25 men. Of the participants, 36.6% identified as Hispanic. The specific ethnic breakdown includes: 58.9% Whites/Caucasians, 11.6% Hispanics/Latinos, 11.6% Blacks/African Americans, 4.5% Mixed/Multiracial, 2.7% American Indians/Pacific Islanders, and 2.7% Other.

The age groups of the respondents were quite varied. Ages ranged from 21 to 75 years old, and the mode age of respondents was 50 years old. The majority of respondents report a high income level. Specifically, 42% of community members report an annual household income of over \$75,000.

### ***Access to Care***

Overwhelmingly, community members suggested that access to care should be ameliorated by increasing outreach and education in the community. Specifically, there should be assistance with becoming enrolled and understanding the resources that are available in the community. Other suggestions include: increased transportation, make coverage affordable, offer more free clinics, and bolster current resources in the community.

Potential partners identified by community members for improving *access to care* include: Borrego Health, Clinicas de Salud del Pueblo, Coachella Valley Volunteers in Medicine, Riverside University Health System, and Desert AIDS Project.

### ***Mental Health***

When asked what steps can be taken to help people with a mental health problem, community members pointed to a need for more education and outreach. Respondents also reiterated the need to increase available services, improve the accessibility of services already available, and connect individuals with appropriate services. Community members also called for more community-based programs located in schools, community centers, and other areas easily accessed by the community.

Potential partners identified by community members for addressing *mental health* include: Catholic Charities, churches such as First Congregational Church of Riverside and The Grove Community Church, Desert AIDS Project, Family Service Association, Jewish Family Services, National Alliance on Mental Illness, and Riverside University Health System Behavioral Health.

### ***Obesity/Diabetes***

Some suggestions were offered for steps we can make in our community, to improve healthy eating and an active lifestyle. Specifically, many community members suggested increased education about proper eating and exercise, along with outreach to get people more involved in these activities. The community also made suggestions for additional resources, such as: farmers markets, food banks, free cooking classes, and other community events to get the community collaboratively living a healthy lifestyle.

Potential partners identified by community partners in addressing *obesity and diabetes* include: City governments, the County of Riverside, Desert Recreation District, Family Service Association (Mobile Fresh Bus), FIND Food Bank, Hidden Harvest, and senior centers.

	DATA COLLECTION METHOD	TYPE	PARTICIPANTS			
			Total number of participants	Number of residents	Number of organizational reps	Number of county reps
1	Community Survey	Community residents including Spanish-speaking	112	112	0	0
2	Twitter Chat	Community residents and Boys & Girls Club of Greater Redlands-Riverside, Desert AIDS Project, First 5 Riverside, Inland Empire Health Plan, Lestonnac Free Clinic, Planned Parenthood of the Pacific Southwest, and Riverside County Department of Public Social Services	10	3	7	0

**c. Consultant Used**

KFH-Riverside utilized HARC, Inc. (Health Assessment and Research for Communities). HARC is a nonprofit research and evaluation organization that is dedicated to providing objective, reliable research, analysis and technical services to communities in order to facilitate better decision making regarding health and quality of life.

HARC is located within Riverside County (Palm Desert), and the majority of HARC’s clients are health care organizations and nonprofits within the County. As such, HARC is deeply embedded in the very community that is served by KFH-Riverside, and brings added insight to this process.

HARC’s research team on this project included:

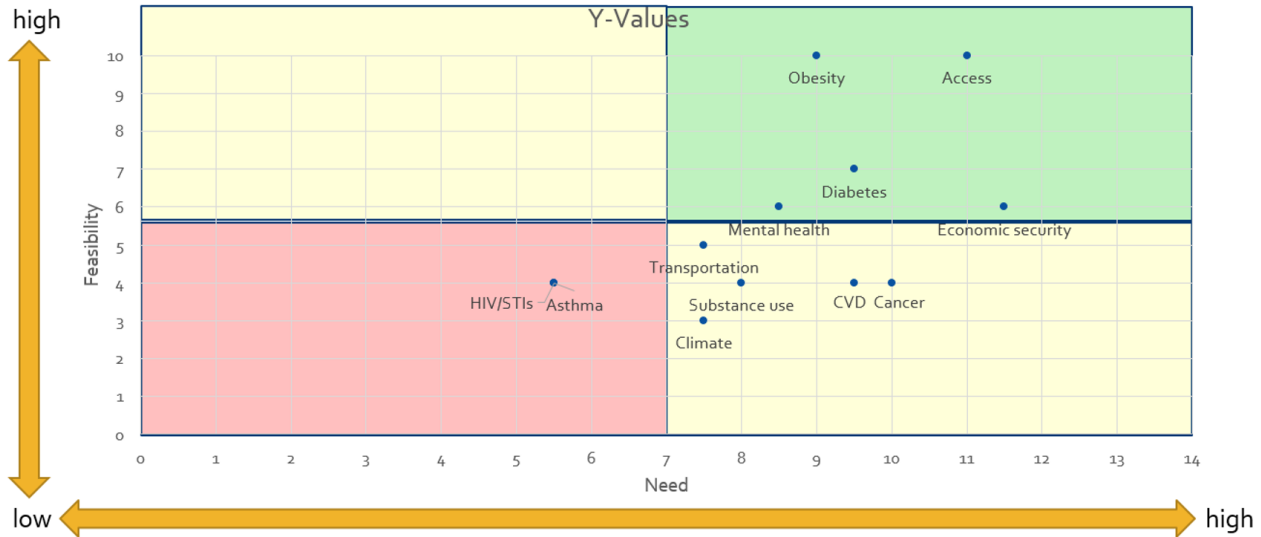
- Dr. Jenna LeComte-Hinely, Chief Executive Officer
- Dr. Casey Leier, Director of Research and Evaluation
- Ivy Torres, Research and Evaluation Associate



**VIII. Health Needs that KFH-Riverside Plans to Address**

**a. Process and Criteria Used**

HARC facilitated a prioritization session with the core planning team. To prepare for the meeting, HARC and key members of the core planning team rated each of the 12 health issues identified in the CHNA by using the worksheets in the “Selecting Health Needs” document provided by Kaiser Permanente Southern California Regional Community Benefit. Using these worksheets ensured that KFH-Riverside used a consistent set of criteria with other hospitals in the region. As such, each health issue was rated on ‘Need’ and ‘Feasibility’. ‘Need’ was determined using the following set of criteria: magnitude (number of people affected), severity (consequences to those affected), and level of disparities (to what degree are vulnerable groups disproportionately affected). The criteria for ‘Feasibility’ included: existing Kaiser Permanente assets and the ability to leverage existing assets/partnerships to address those issues. The score ranged from 1 to 5 for each criterion. The total scores for each of the criteria determined whether the health need was a “High” or “Low” Need and “High” or “Low” Feasibility. Scores above 7 signified a high need and scores above 8 signified high feasibility. Using this information, HARC plotted the need and feasibility of each of the 12 health issues. This resulted in the following matrix.



The core planning team used this information to inform their prioritization of health issues, focusing on those needs that were high need/high feasibility. In addition to the need/feasibility matrix, the core planning team also took the following factors into account when selecting health needs to address: alignment with the priorities set by community stakeholders who participated in the CHNA, alignment with other Kaiser Foundation Hospitals in the Southern California region, alignment with other initiatives in Riverside County, and medical center expertise and experience.

HARC facilitated the discussion to ensure that the entire team reached a consensus on which were the most critical needs for KFH-Riverside to address in the coming years.

**b. Health Needs that KFH-Riverside Plans to Address**

KFH-Riverside decided to address three health issues: access to care, obesity/diabetes, and mental health.

**Access to Care**

The ability to access medical care is a wide reaching construct that includes aspects such as the presence of health insurance, the affordability of seeking treatment, the availability of health care providers who can provide treatment, the ability to get to places where treatment is provided, and other issues around accessibility.

Many people in the KFH-Riverside service area still lack health insurance (18% are uninsured), and those that have it are often unclear on how to navigate the health care system and how to use it. Even those with health insurance who know how to get care can struggle to receive the care they need due to a shortage of providers; the local ratio of primary care providers to patient population is nearly half the state average (40.2 providers per 100,000 population, versus the state average of 77.2 per 100,000). This health need was selected because of its high priority ranking and KFH-Riverside's wealth of existing resources and connections to address this issue.

### **Mental and Behavioral Health**

Mental health is the state of well-being in which every individual realizes his or her own potential, can cope with normal stresses of life, and is able to contribute to his or her community. Mental health includes not only the absence of negative mental health states (e.g., anxiety, depression, etc.) but also the presence of positive mental health states (e.g., satisfaction, self-worth, etc.)

Suicide is the 10<sup>th</sup> leading cause of death in America. Suicide mortality rates in the Riverside service area are on par with national rates (nearly 10 per 100,000 population). Mental health issues are closely related to other issues such as substance use and abuse and smoking. There is a serious lack of mental health care providers; there are about 68.4 providers per 100,000 people in the KFH-Riverside service area (compared to the state average of 157 per 100,000). KFH-Riverside has a history of collaboration between existing resources and connections to address this need.

### **Obesity/Diabetes/HEAL**

Excess weight is a major problem in the U.S. Being overweight, or, at a more extreme level, obese, can cause many health issues and exacerbate many existing conditions. Obesity is caused, in part, by an imbalance of energy output to energy intake; that is, eating too much or eating unhealthy food, while not obtaining enough exercise.

Diabetes is the 7<sup>th</sup> leading cause of death in America<sup>1</sup>. 95% of people with diabetes have type 2 diabetes, which is highly associated with obesity/overweight<sup>2</sup>. Over 60% of local adults are overweight or obese<sup>3</sup>. Obesity is a risk factor for many of the other health issues that were identified (e.g., cardiovascular disease, cancer, diabetes, etc.), and thus, is a good place to start to reduce those issues as well. KFH-Riverside will strive to encourage healthy eating and active living in order to reduce the number of people who are overweight or obese and or are at risk of having diabetes. KFH-Riverside will continue to collaborate with existing resources and connections to address this need.

## **IX. KFH-Riverside 's Implementation Strategies**

As part of the Kaiser Permanente integrated health system, KFH-Riverside 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.
- ✓ Reduce geographic, financial, or cultural barriers to accessing health services, and if they ceased would result in access problems.

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<sup>1</sup> Data obtained from Center for Disease Control and Prevention (2015) <http://www.cdc.gov/nchs/fastats/leading-causes-of-death.htm>

<sup>2</sup> Data obtained from American Diabetes Association (2015) <http://www.diabetes.org/diabetes-basics/statistics/?referrer=https://www.google.com/>

<sup>3</sup> Data obtained from California Interview Health Survey (2014)

- ✓ 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.

The following represents the goals, strategies and expected outcomes for each of the health needs KFH-Riverside plans to address for the 2017-2019 Implementation Strategy (IS) timeline. KFH-Riverside will draw on a broad array of organizational resources to implement these strategies, such as grant-making, in-kind resources, collaborations and partnerships, as well as several internal KFH programs. In particular, KFH-Riverside will leverage assets to support partnerships, community-based organizations, leaders, and networks that build capacity to advance health equity; sustain and scale change; and build the field of knowledge in three areas: access to care, obesity/diabetes/HEAL, and mental health. Whenever possible, KFH-Riverside will focus on solutions to these health issues that are place-based, evidence-based, multi-sector collaborations. For the purpose of this report, examples of resources are provided to illustrate how KFH-Riverside plans to implement the strategies. For examples of how these resources have been deployed to date, please visit the 2016 Community Health Needs Assessment Report [www.kp.org/chna](http://www.kp.org/chna) under the chapter: Implementation Strategy Evaluation of Impact.

KFH-Riverside 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-Riverside welcomes future opportunities to enhance its strategic plans by relying on and building upon the strong community partnerships it currently has in place.

### **Access to Care**

KFH-Riverside's **long-term goal** for addressing access to care is that all community members have access to timely, coordinated, high quality health care from a trained and diverse workforce. It aims to visualize this goal by organizing its strategies around the following **strategic priorities (or intermediate goals)**:

- Increase coverage and access to comprehensive, quality health care services for low income and uninsured populations.
- Improve the capacity of health care systems to provide quality health care services, including the social and non-medical needs of their patients.
- Improve the capacity of the primary care workforce to meet community needs.
- Enhance individuals' utilization of the community-based health delivery system.

These priorities have guided the development of the following core **strategies** to address access to care in the community. A large sub-set of these strategies are aligned with the Riverside County Community Health Improvement Plan (CHIP) and will enable greater collaboration with public health and community health partners in addressing this health need.

- Support the provision of high quality health care (including preventive services and specialty care) for underserved populations. As part of the largest non-profit health system, KFH-Riverside participates in government-sponsored programs for low-income individuals (i.e. Medi-Cal Managed Care and Medi-Cal Fee-for-Service), provide access and comprehensive health care to low-income individuals and families who do not have access to public or private health coverage through charitable health coverage, and provide financial assistance to low-income individuals who receive care at Kaiser Permanente facilities and can't afford medical expenses and/or cost sharing.
- Support targeted outreach, enrollment, and retention efforts to increase access to health care coverage, particularly among communities of color and immigrant populations, where disparities in both access to care and health care coverage is greatest.
- Develop solutions that address the health care needs of people who do not qualify for low-cost or no-cost health insurance, including but not limited to undocumented individuals. KFH-Riverside

leverages surgical and preventive screening access to uninsured patients in Riverside County. The collaboration between Kaiser Permanente and community clinics, including but not limited to Lestonnac Free Clinic, Riverside Free Clinic, and Borrego Health provides for the coordination of referrals for low-risk outpatient surgery and colonoscopy screenings for uninsured residents.

- Support policies and programs that improve ability of the health care organizations to assess upstream factors and coordinate with community-based preventive services
- Improve the quality improvement (QI) infrastructure of health care organizations by supporting capacity to use data, leadership training, business operations and through other infrastructure building strategies
- Provide training for medical providers on the provision of culturally competent care to diverse populations. An example of a partnership and use of KFH-Riverside assets is the University of California, Riverside School of Medicine Internal Medicine Residency Program, a three-year residency program which brings 12 residents to the Inland Empire to train at sites in the region, including KFH-Riverside.
- Reduce barriers to access to care by providing language interpretation, transportation, non-traditional access points, and/or other supportive services.
- Support policies and programs that improve public understanding of the health care delivery system and the onboarding and orientation for new patient members.
- Support the development of community-based organizations, leaders, and networks, and build their capacity to advance equity and improve access to health care.
- Support partnerships and networks that sustain and scale change and lift up priorities, evidence and experience of communities, and to share information about what works in improving access to health care for the underserved. KFH-Riverside Community Benefit Manger is a member of the Project KIND Coalition which coordinates access to medical, dental, mental, and optical services throughout Riverside County to underinsured uninsured children.
- Leverage Kaiser Permanente assets to drive coverage and access to health care for the underserved, build the capacity of the primary care workforce and improve appropriate utilization of health care services.

Successful implementation of these strategies is expected to contribute to the following set of **outcomes** in the community:

- Improved referrals and coordination between health care providers and community-based efforts.
- Improved capacity, readiness and effectiveness of community-based organizations to address access to health care.
- Reduced barriers that impede an individuals' ability to see and obtain health care.
- Improved individual/public knowledge of how to navigate the health care system.
- Improved individual/public understanding of health insurance and medical care coverage.
- Improved core clinical, financial, operational, and data informed decision-making capacities among health care organizations.

### **Mental and Behavioral Health**

KFH-Riverside's **long-term goal** for addressing mental health is that all community members have optimal levels of mental health and well-being and access to high quality mental and behavioral health care services when needed. It aims to visualize this goal by organizing its strategies around the following **strategic priorities (or intermediate goals)**:

- Improve the knowledge, capacity and infrastructure of health care, organizations and communities to address mental and behavioral health.
- Promote positive mental health by fostering community cohesion and social and emotional support.

These priorities have guided the development of the following core **strategies** to address mental health in the community. A large sub-set of these strategies is aligned with the Riverside County Community Health Improvement Plan (CHIP) and will enable greater collaboration with public health and community health partners in addressing this health need.

- Support integration of health care with community-based mental health services, such as: training of health care providers to identify mental and behavioral health needs, patient navigators who can help patients access services, strengthening of referral networks, and/or co-location of services between primary care and mental health providers.
- Support school and youth development organizations in learning about and addressing mental and behavioral health, including suicide prevention and trauma-informed care.
- Enhance access to high quality substance abuse treatment including medication-assisted treatments to decrease the burden of addiction and promote resiliency and recovery.
- Support prevention efforts to increase community awareness and educate youth and adults about the dangers of prescription drugs (including sharing, proper disposal, unintentional overdose, etc.)
- Support organizational changes that can reduce employee stress.
- Support community-based initiatives that promote positive mental health by fostering community connection to one's neighbors and participation in local activities and create access to safe local public spaces where people can congregate. KFHRiverside will address mental health by collaborating with the National Alliance for Mental Illness (NAMI) Western Riverside County, by providing hospital conference room space for mental health workshops at no cost to the community.
- Support policies and programs that address early child development and toxic stress, including positive parenting and violence-free homes. KFHRiverside collaborates with The Carolyn E. Wylie Center for Children, Youth and Families, MFI Recovery and other community-based organizations that provide services for children and their families with core operation support and in-kind donations of surplus equipment. KFHRiverside physicians volunteer regularly to present at the Inland Empire Perinatal Mental Health Collaborative on topics such as medication management, medical issues and depression, and maternal mental health
- Support the development of community-based organizations, leaders, and networks, and build their capacity to advance equity and reduce stigma surrounding mental and behavioral health.
- Leverage Kaiser Permanente assets to drive community health and champion organizational practice changes that promote mental and behavioral health.
- Support collaborations and networks that sustain and scale change and lift up priorities, evidence and experience of communities, to share information about what works in improving behavioral and mental health and to build the field. The Community Benefit Manager serves as an advisory board member and conference planner for the Grow Riverside and Invest Health Initiatives that supports the Riverside Food System Alliance, Farm-to-Fork movement throughout the inland region. This initiative aims to increase access to fresh produce, create jobs, develop a food distribution hub, and align affordable housing goals with farm incubator programs.

Successful implementation of these strategies is expected to contribute to the following set of **outcomes** in the community:

- Increased access (availability and affordability) of mental health services in health care or community settings.
- Improved referrals and coordination between health care providers and community resources and programs.
- Increased awareness of prescription drug misuse and abuse, enabling stronger prevention and identification of the issue.
- Improved community cohesion, networks, and social support.
- Improved capacity, readiness and effectiveness of community-based organizations, community leaders and residents to address mental and behavioral health.

### **Obesity/Diabetes/HEAL**

KFH-Riverside's **long-term goal** for addressing obesity/HEAL/diabetes is that all community members eat healthy and move more as a part of daily life. It aims to visualize this goal by organizing its strategies around the following **strategic priorities (or intermediate goals)**:

- Improve access to opportunities for physical activity in the community.
- Improve access to healthy food options in the community.
- Improve linkages between health care services and community-level services.

These priorities have guided the development of the following core **strategies** to address obesity/HEAL/diabetes in the community. A large sub-set of these strategies is aligned with the Riverside County Community Health Improvement Plan (CHIP) and will enable greater collaboration with public health and community health partners in addressing this health need.

- Support new and improved policies and environments that support active transportation and physical activity (e.g., safe pedestrian bicycle routes.)
- Support policies that prioritize underserved neighborhoods for park investments and encourage communities to use parks to their full potential.
- Support local governments, schools and/or community-based organizations to provide healthy food options (including accessible drinking water) and to adopt healthy food policies, including procurement practices.
- Support local governments, schools and/or community-based organizations to enroll community members into available food programs such as WIC, Cal Fresh, etc.
- Promote use of Cal Fresh and WIC benefits at farmer's markets for purchasing fresh fruits and vegetables.
- Support programs that improve referral of patients to evidence-based health promotion programs that teach self-management and empowerment techniques for chronic disease management and prevention.
- Support collaboration between health care providers and community-level services to support patients' needs related to upstream determinants of health, such as access to healthy food at local grocery stores and addressing violence-free neighborhoods.
- Support multi-level, multi-component initiatives in community settings to support access to healthy, affordable food and activity-promoting environments. An example of an initiative for this strategy is the Healthy Eating Active Living (HEAL) Zones. HEAL Zones are multi-year, place-based investments that support policy, advocacy and/or system changes in communities. These initiatives aim to lower the prevalence of obesity and overweight by increasing access to fresh fruit, vegetables, healthy beverages and increasing safe places to play and be physically active.
- Support multi-level, multi component initiatives in school settings to produce significant and measurable impact on the health of students, staff and teachers in K-12 schools within communities. An example for this strategy is the Thriving Schools Initiative, a community based effort to improve healthy eating, physical activity and school climate in K-12 schools in Kaiser Permanente's service areas, primarily through a focus on policy, systems and environmental changes that support healthy choices and a positive school climate.
- Support the development of community-based organizations, leaders, and networks, and build their capacity to advance equity and prevent obesity/promote healthy eating and active living
- Support programs—particularly evidence-based programs—that address diabetes prevention, education, and self-management.
- Leverage Kaiser Permanente assets to drive community health, including healthy eating and active living and champion organizational practice changes that promote health.
- Support collaboration and networks that sustain and scale change and lift up priorities, evidence and experience of communities, and to build the field of healthy eating and active living. An

example for this strategy is the Grow Riverside and Invest Health Initiatives that supports the Riverside Food System Alliance, Farm-to-Fork collaboration.

Successful implementation of these strategies is expected to contribute to the following set of **outcomes** in the community:

- Adoption and implementation of policies and environments that increase availability and enable access to healthy food and/or physical activity.
- Reduced availability and marketing of unhealthy foods and beverages.
- Increased enrollment and use of federal food programs.
- Improved patient assessment and care for chronic conditions by health care providers.
- Improved referrals and coordination between health care providers and community resources and programs.
- Improved capacity, readiness, and effectiveness of community-based organizations, community leaders and residents to collaborate and to promote policy, system and environmental change.

In addition to addressing the selected health needs described above, Kaiser Permanente, as an integrated health care delivery system, dedicates resources that target broader health system needs and upstream determinants of health such as economic security and transportation.

### **Research**

Kaiser Permanente conducts, publishes, and disseminates high-quality epidemiological and health services research to improve the health and medical care throughout our communities. Access to reliable data is a significant need of the overall health care system and can also be implemented in service of the identified health needs. Deploying a wide range of research methods contributes to building general knowledge for improving health and health care services, including clinical research, health care services research, and epidemiological and translational studies on health care that are generalizable and broadly shared. 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. Research projects encompass epidemiologic and health services studies as well as clinical trials and program evaluations. They cover a wide range of topics including clinical trials, building scientific expertise in health services and policy, and implementation science to bridge the gap between research and practice.

### **Our Commitment to Total Health**

Kaiser Permanente is aware of the significant impact that our organization has on the health of our communities as a consequence of our business practices including hiring, purchasing, and environmental stewardship. We have explored opportunities to align our hiring practices, our purchasing, our building and our environmental stewardship efforts with the goal of improving the conditions that contribute to health in our communities. The following strategies are illustrations of the types of organizational business practices we implement to address priority health needs and contribute to community health and well-being. These strategies are not exhaustive of everything we do and is intended as an illustrative list.

- **Implement green business practices and building standards to address climate and health**, such as purchasing clean wind and solar energy; and renovating all buildings to meet “Kaiser Permanente brand” expectations around environmental stewardship and the built environment.
- **Implement food policies to address obesity/overweight** by supporting the spread of farmers markets.
- **Contribute toward supplier diversity in the community to address economic security** 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/service providers; working

with community-based workforce development programs to support a pipeline for diverse suppliers/service providers; and building the capacity in target neighborhoods/populations.

- **Develop the health care workforce to address access to care and economic security** by implementing health care workforce pipeline programs to introduce diverse, underrepresented school age youth and college students to health careers; partnering with local vocational schools, community colleges, workforce investment boards, or community-based workforce development programs to create pipelines from target communities; and providing workforce training programs to train current and future health care providers with the skills, linguistic, and cultural competence to meet the health care needs of diverse communities.

## **X. Evaluation Plans**

KFH-Riverside will monitor and evaluate the strategies listed above for the purpose of tracking the implementation of those strategies as well as to document the anticipated impact. Plans to monitor will be tailored to each strategy and will include the collection and documentation of tracking measures, such as the number of grants made, number of dollars spent, and number of people reached/served. In addition, KFH-Riverside will require grantees to propose, track and report outcomes, including behavior and health outcomes as appropriate. For example, outcome measures for a strategy that addresses obesity/overweight by increasing access to physical activity and healthy eating options might include number of students walking or biking to school, access to fresh locally grown fruits and vegetables at schools, or number of weekly physical activity minutes.

## **XI. Health Needs Facility Does Not Intend to Address**

The KFH-Riverside core planning team chose to select three health need categories and develop strategies to address them. This will allow KFH-Riverside to focus efforts, and make a substantial impact in those priority areas.

Economic security and transportation are upstream drivers of many other health issues, and has an indirect impact on nearly every health issue because people in poverty experience disproportionately worse health. KFH-Riverside decided to infuse the strategies to address each of the top priorities with a focus on low-income populations.

Using the criteria described previously, health needs listed below were not identified as areas where KFH – Riverside had unique assets to deploy. The needs were not identified high on magnitude and severity and/or they may not be more directly or immediately correlated with health outcomes (such as transportation or climate and health). Some of the health needs (such as diabetes and substance use) can also be addressed through a focus on other needs (such as obesity/overweight and mental health). Moreover, there are existing community partners and networks who are currently addressing some of these health priorities. The needs that will not be addressed are:

**Transportation**

**Economic security**

**Climate and health**

**Cancer**

**Cardiovascular disease**

**Substance use and tobacco**

**Asthma**

**HIV and STIs**

While this Implementation Strategy Report responds to the CHNA and Implementation Strategy requirements in the Affordable Care Act and IRS Notices, it is not exhaustive of everything we do to enhance the health of our communities. KFH-Riverside will look for collaboration opportunities



that address needs not selected where it can appropriately contribute, or where those needs align with current strategy and priorities.