2022 Implementation Strategy

Kaiser Permanente Santa Rosa Medical Center

License number: 11000213

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

September 27, 2022
Kaiser Permanente Santa Rosa Medical Center
2022 IMPLEMENTATION STRATEGY

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# General Information

<table>
<thead>
<tr>
<th><strong>Contact Person</strong></th>
<th>Alena Wall, Public Affairs Director</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Date of written plan</strong></td>
<td>May 11, 2022</td>
</tr>
<tr>
<td><strong>Date written plan was adopted by authorized governing body</strong></td>
<td>September 27, 2022</td>
</tr>
<tr>
<td><strong>Date written plan was required to be adopted</strong></td>
<td>May 15, 2023</td>
</tr>
<tr>
<td><strong>Authorized governing body that adopted the written plan</strong></td>
<td>Kaiser Foundation Health Plan, Inc., Kaiser Foundation Hospitals, Board of Directors, Community Health Committee</td>
</tr>
<tr>
<td><strong>Was the written plan adopted by the authorized governing body on or before the 15th day of the fifth month after the end of the taxable year the CHNA was completed?</strong></td>
<td>Yes ☒ No ☐</td>
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<tr>
<td><strong>Date facility’s prior written plan was adopted by organization’s governing body</strong></td>
<td>March 18, 2020</td>
</tr>
<tr>
<td><strong>Name and EIN of hospital organization operating hospital facility</strong></td>
<td>Kaiser Foundation Hospitals, 94-1105628</td>
</tr>
<tr>
<td><strong>Address of hospital organization</strong></td>
<td>One Kaiser Plaza, Oakland, CA 94612</td>
</tr>
</tbody>
</table>
Kaiser Permanente Santa Rosa Medical Center 2022 Implementation Strategy

Summary

Kaiser Permanente is an integrated health care delivery system comprised of Kaiser Foundation Hospitals, Kaiser Foundation Health Plan, and physicians in the Permanente Medical Groups. For 75 years, Kaiser Permanente has been committed to shaping the future of health and health care — and helping our members, patients, and communities experience more healthy years. We are recognized as one of America’s leading health care providers and nonprofit health plans.

Every three years Kaiser Permanente Santa Rosa Medical Center conducts a community health needs assessment (CHNA) and identifies significant health needs. To address those needs, Kaiser Permanente Santa Rosa Medical Center has developed an implementation strategy (IS) for the priority needs it will address, considering both Kaiser Permanente’s and the community’s assets and resources. The CHNA-IS process is driven by a commitment to improve health equity and is intended to be transparent, rigorous, and collaborative.

For the 2023-2025 IS, Kaiser Permanente Santa Rosa Medical Center has identified the following significant health needs to be addressed in the IS, in priority order:

1. Housing
2. Access to care
3. Mental & behavioral health
4. Education

Kaiser Permanente Santa Rosa Medical Center’s CHNA report and three-year IS are publicly available at https://www.kp.org/chna.
Introduction/background

About Kaiser Permanente
Kaiser Permanente is an integrated health care delivery system comprised of Kaiser Foundation Hospitals, Kaiser Foundation Health Plan, and physicians in the Permanente Medical Groups. For 75 years, Kaiser Permanente has been committed to shaping the future of health and health care — and helping our members, patients, and communities experience more healthy years. We are recognized as one of America’s leading health care providers and nonprofit health plans.

Kaiser Permanente is committed to helping shape the future of health care. Founded in 1945, Kaiser Permanente has a mission to provide high-quality, affordable health care services and to improve the health of our members and the communities we serve. We currently serve 12.5 million members in 8 states and the District of Columbia. Care for members and patients is focused on their total health and guided by their personal Permanente Medical Group 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.

Kaiser Permanente regions and CHNA service areas
About Kaiser Permanente Community Health

At Kaiser Permanente, we recognize that where we live and how we live has a big impact on our health and well-being. Our work is driven by our mission: to provide high-quality, affordable health care services and to improve the health of our members and our communities. It’s also driven by our heritage of prevention and health promotion, and by our conviction that good health is a fundamental right.

As the nation’s largest nonprofit, integrated health system, Kaiser Permanente is uniquely positioned to improve the health and well-being of the communities we serve. We believe that being healthy isn’t just a result of high-quality medical care. Through our resources, reach, and partnerships, we are addressing unmet social needs and community factors that impact health. Kaiser Permanente is accelerating efforts to broaden the scope of our care and services to address all factors that affect people’s health. Having a safe place to live, enough money in the bank, access to healthy meals, and meaningful social connections is essential to total health. Now is a time when our commitment to health and values compel us to do all we can to create more healthy years for everyone. We also share our financial resources, research, nurses and physicians, and our clinical practices and knowledge through a variety of grantmaking and investment efforts.

As we reflect on how 2020 changed the world, we must recognize that communities everywhere are coping with unprecedented challenges magnified by the COVID-19 pandemic and a renewed struggle for racial equity and social justice.

Through our continued focus on expanding our community health approach we laid the foundation for an acceleration of work to meet the challenges posed by the public health crises we now face. We dedicated ourselves to improving the social health of our 12.5 million members and the millions of people who live in the communities we serve.

Learn more about Kaiser Permanente Community Health at https://about.kaiserpermanente.org/community-health.

Kaiser Permanente’s approach to community health needs assessment

The Affordable Care Act (ACA) was enacted in March 2010 to make health insurance available to more people, expand the Medicaid program, and support innovative medical care delivery to lower health care costs. The ACA also requires that nonprofit hospitals conduct a community health needs assessment (CHNA) every three years and develop an implementation strategy (IS) in response to prioritized needs.

Kaiser Permanente’s CHNA process is driven by a commitment to improve health equity. Our assessments place a heavy emphasis on how the social determinants of health — including structural racism, poverty, and lack of access to health-related resources such as affordable housing, healthy food, and transportation — are affecting the health of communities. By analyzing community-level data and consulting individuals with deep and broad knowledge of health disparities, the Community Health team in each KP service area has identified and prioritized needs unique to the community served. Each service area has developed an IS for the priority needs it will address, considering both Kaiser Permanente’s and the community’s assets and resources.

The Kaiser Permanente Santa Rosa Medical Center 2022 CHNA report and three-year IS are available publicly at https://www.kp.org/chna. In addition, the IS will be filed with the Internal Revenue Service using Form 990, Schedule H.
Community served

Kaiser Permanente defines the community served by a hospital as those individuals residing within its hospital service area. The Kaiser Permanente Santa Rosa Medical Center hospital service area includes residents in a defined geographic area surrounding the hospital and does not exclude low-income or underserved populations.

Santa Rosa service area
Santa Rosa service area demographic profile

Total population: 388,969

- American Indian/Alaska Native: 0.8%
- Asian: 4.4%
- Black: 1.8%
- Hispanic: 28.6%
- Multiracial: 3.1%
- Native Hawaiian/other Pacific Islander: 0.3%
- Other race/ethnicity: 0.2%
- White: 60.8%

- Under age 18: 19.8%
- Age 65 and over: 18.5%

Community health needs

Significant health needs identified in the Kaiser Permanente Santa Rosa Medical Center 2022 CHNA report

Each Kaiser Permanente service area analyzed and interpreted the primary and secondary data to determine what constitutes a health need in the community. Once all the community health needs were identified they were prioritized, resulting in a list of significant community health needs in the Santa Rosa service area, listed below.

1. Housing
2. Access to care
3. Mental & behavioral health
4. Education
5. Income & employment
6. Substance use
7. Climate & environment
8. Food insecurity
9. Community safety
Kaiser Permanente’s implementation strategy process
Identifying the highest priority needs with an equity lens informs our community investments and helps us develop strategies aimed at making long-term, sustainable change, allowing us to deepen the strong relationships we have with other organizations that are working to improve community health.

To identify the significant health needs that Kaiser Permanente Santa Rosa Medical Center will address in the 2022 three-year Implementation Strategy, Kaiser Permanente Santa Rosa Medical Center Community Health considered a set of criteria that includes:

- Severity and magnitude of need: How health measures compare to national or state benchmarks, the relative number of people affected, impact of COVID-19 on the need
- Community priority: The community prioritizes the issue over other issues
- Clear disparities or inequities: Differences in health factors or outcomes by geography, race/ethnicity, economic status, age, gender, or other factors
- Leveraging Kaiser Permanente assets: Kaiser Permanente can make a meaningful contribution to addressing the need
- Potential to improve health equity/disparities
- Feasibility

Health needs Kaiser Permanente Santa Rosa Medical Center plans to address
The health needs in the Santa Rosa service area that will be addressed during 2023-2025 are:

1. **Housing:** Having a safe place to call home is essential for the health of individuals and families. American families’ greatest single expenditure is housing, and for most homeowners, their most significant source of wealth. Housing costs have soared in recent years, with many families experiencing difficulty paying for housing. Black and Latinx renters are more likely to live in cost-burdened households and face housing instability. In the last 5 years, home prices in the Santa Rosa service area increased by 40 percent. High housing costs, including rent, have been further exacerbated by the 2017 Tubbs Fire, which destroyed 6 percent of the homes in Santa Rosa. Additionally, there are racial disparities in access to housing. While 62 percent of white residents in Sonoma County are homeowners, only 45 percent of Native American, 39 percent of Latinx, and 37 percent of Black residents are homeowners. Racist and biased practices in mortgage lending have historically made it difficult for Black, Indigenous, and people of color to own homes in the region. Interviewed community leaders shared that previously affordable areas are becoming gentrified and much more expensive. They emphasized that COVID-19 has widened the disparities that exist around housing and homelessness and that multiple families often live in one home to keep costs more manageable. They also emphasized the need for adequate housing for farm workers and affordable housing for the expanding senior population. They discussed the need to address the mental health needs of people experiencing homelessness, stressing the “Housing First” model to ensure people have stable housing.
2. Access to care: Access to comprehensive, quality health care services — including having insurance, local care options, and a usual source of care — is important for ensuring quality of life for everyone. Insurance by itself does not guarantee access to appropriate care, and many community members experience barriers related to language, transportation options, and differential treatment based on race, as well as access to fewer health care resources. Despite high levels of insurance coverage and health care providers in the Santa Rosa service area, there are chronic health needs across the area: 14 percent of adults report poor or fair health. Additionally, diabetes is prevalent among 19 percent of the population and heart disease in 13 percent of the population. Additionally, access to regular care varies by population: while 91 percent of white residents reported having a usual source of care, only 77 percent of Latinx and 61 percent of Pacific Islander residents report a usual source of care. Interviewed community leaders shared there is a lack of culturally responsive providers and providers focused on the specific care needs of communities of color, LGBTQ+ individuals, as well as a lack of understanding of the intersectionality of multiple identities.

3. Mental & behavioral health: Mental health affects all areas of life, including a person’s physical well-being, ability to work and perform well in school and to participate fully in family and community activities. Anxiety, depression, and suicidal ideation are on the rise due to the COVID-19 pandemic, particularly among Black and Latinx Americans. Communities across the country are experiencing a critical lack of capacity to meet the increased demand for mental health services. In Sonoma County, the age adjusted rate of death due to suicide, alcohol related disease, and drug overdoses per 100,000 residents is only slightly higher than California as a whole (36.6 compared to 34.3 per 100,000). However, the age adjusted rate of death due to intentional self-harm in Sonoma County is higher (13.3 compared to 10.5 per 100,000 statewide). The premature death rate for suicide significantly increased by 32 percent from 2011-2013 to 2015-2017. Additionally, there are disparities related to mental and behavioral health. For example, males had over twice the percentage of total years of potential life lost due to suicide (9 percent) compared to females (4 percent). The percentage of years of potential life lost due to suicide is highest in Santa Rosa (8 percent), followed by Petaluma and Sonoma Valley (7 percent). Additionally, 46 percent of students who are gay, lesbian, or bisexual reported seriously considered attempting suicide compared to 14 percent of students who are straight. Interviewed community leaders noted the long-term mental health impacts of trauma, particularly as Sonoma County residents navigate the impacts of regional wildfires and home losses as well as the COVID-19 pandemic.

4. Education: The link between education and health is well known. Having a high school diploma is correlated strongly with healthy behaviors, improved quality of life, and higher life expectancy. Children from families with low incomes are less likely to experience the numerous benefits of attending preschool, including higher rates of high school graduation and college attendance and lower levels of juvenile incarceration. Most residents in the Santa Rosa service area have a high school diploma; 88 percent compared to 82 percent in California. Additionally, 25 percent of adults have some college education which is higher than the state average of 21 percent. However, there are significant disparities in degree attainment across geographies and along racial lines. In Sea Ranch/Timber Cove, 6 in 10 adults 25 years and older hold bachelor’s degrees, whereas in Roseland just over 1 in 10 do. Only 64 percent of Latinx residents hold a high school diploma in Sonoma County as opposed to 96 percent of white residents. First generation Latinx students may face barriers to obtaining a degree and Latinx immigrants may have had limited opportunities to progress or complete their education in their home countries, creating barriers to obtaining continuing education in Sonoma County. Interviewed community leaders talked about learning loss during COVID-19, particularly as students had to take on additional responsibilities for their families. They noted that student engagement and school readiness is low and that students are becoming less inclined to graduate high school. They recommended integrating more health workers with the school system to break down siloes and dedicating resources to hiring and retaining mental health professionals with school expertise, particularly those with cultural expertise and bilingual skills.
Kaiser Permanente’s approach to implementation strategies

As the nation’s largest nonprofit integrated health care organization, Kaiser Permanente is mission-driven to improve health and well-being in the communities we serve. The COVID-19 pandemic has underscored deep-seated inequities in health care for communities of color and amplified the social and economic disparities that contribute to poor health outcomes.

We will continue to work to improve the conditions for health and equity by addressing the root causes of health, such as economic opportunity, affordable housing, health and wellness in schools, and a healthy environment. We carry out work in our focus areas through a lens that includes deepening our commitment to equity and inclusion.

Kaiser Permanente strategic focus areas include:

Increasing health access

- **Charity care**: Transforming Charitable Health Coverage and Medical Financial Assistance approaches to continue supporting coverage and care needs for our communities and patients
- **Medicaid**: Growing our Medicaid participation in a financially sustainable way through innovative operating models that support whole person care and coverage
- **Safety Net Partnerships**: Ensuring that communities have access to a strong safety net that can equitably meet patients’ needs and improve health outcomes

Social health needs

- **Thrive Local**: Establishing bi-directional electronic community networks that enable health care providers, safety net clinics, social service agencies, government programs, and other participants to make, receive, and track patient and client referrals
- **Food for Life**: Transforming the economic, social, and policy environments to improve health and food security for the communities we serve
- **Intergenerational healing and trauma**: Acknowledging and addressing trauma across the life course, including trauma related to exposure to racism

Improving community conditions

- **Economic opportunity**: Increasing income, improving financial security, and reducing economic inequities through our business operations and community partnerships
- **Housing for Health**: Transforming housing and homelessness systems to improve housing stability for the communities we serve
- **Thriving Schools**: Fostering healthier school environments for students, staff, and teachers
- **CityHealth**: Advancing local policies that improve conditions for health
- **Environmental stewardship**: Reducing and eliminating environmental contributors to disease and illness
Kaiser Permanente Santa Rosa Medical Center implementation strategies

Kaiser Permanente Santa Rosa Medical Center Community Health has identified the strategic focus, strategies, and expected impact for each priority health need, described in the table below. While we recognize that IS strategies can address multiple health needs, each strategy in the table is associated with the needs where we expect to see the greatest impact.

To implement the strategies identified, Kaiser Permanente Santa Rosa Medical Center will draw on a broad array of organizational resources, such as grantmaking and leveraged assets, as well as internal Kaiser Permanente programs. Kaiser Permanente Santa Rosa Medical Center Community Health also recognizes the importance of joint planning and collaboration with community stakeholders and leaders and welcomes opportunities to build on the strong partnerships we currently have in place.
<table>
<thead>
<tr>
<th>Priority health need</th>
<th>Expected impact</th>
<th>Focus</th>
<th>Strategy</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>1. Housing</strong></td>
<td>All people have access to safe, affordable, and stable housing and homelessness becomes a rare, brief occurrence</td>
<td>Housing for Health: Increase Affordable Housing Supply</td>
<td>Provide resources for preserving or enhancing the supply of affordable housing</td>
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<td></td>
<td></td>
<td>Housing for Health: Prevent Homelessness</td>
<td>Support evidence-based housing stabilization assistance</td>
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<td></td>
<td>Housing for Health: Transform Care</td>
<td>Support improved coordination among Continuum of Care programs, social service organizations, and housing providers</td>
</tr>
<tr>
<td><strong>2. Access to care</strong></td>
<td>Increased access to care for low-income at-risk populations</td>
<td>Medicaid &amp; Charity Care</td>
<td>Charitable Health Coverage: Provide access to comprehensive health care and to coverage for low-income individuals and families who do not have access to public or private health coverage</td>
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<tr>
<td></td>
<td></td>
<td>Medicaid: Provide high-quality medical care services to Medicaid participants who would otherwise struggle to access care</td>
<td>Medical Financial Assistance: Provide temporary financial assistance to low-income individuals who receive care at KP facilities and can’t afford medical expenses and/or cost sharing</td>
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<td>Support organizations that build capacity, provide information about coverage options, assist with eligibility screening, application and enrollment, and advocate for increasing coverage options for low-income individuals</td>
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<td></td>
<td>Improved quality of care for patients of safety net organizations</td>
<td>Safety Net Partnerships</td>
<td>Provide core support to safety net organizations, allowing these organizations to implement initiatives appropriate for the needs of their population (e.g., expansion of specialty care, providing more virtual care for nonsurgical specialties)</td>
</tr>
<tr>
<td>Priority health need</td>
<td>Expected impact</td>
<td>Focus</td>
<td>Strategy</td>
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<tr>
<td>All people have access to a robust network of community organizations to meet their social health needs</td>
<td>All people have consistent access to affordable healthy food</td>
<td>Thrive Local: CBO Capacity Development</td>
<td>Support community-based organization capacity building, including but not limited to, staffing, training, leadership development, and policy advocacy</td>
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<td></td>
<td></td>
<td>Thrive Local: Community Network Development</td>
<td>Support partnerships with local, regional, or national organizations to grow networks of community-based organizations that address social health needs and coordinate care</td>
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<td>Thrive Local: Maximizing the Value of the Network</td>
<td>Strengthen community networks by supporting community or navigation centers, community advisory councils, and interoperability with other systems</td>
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<td></td>
<td>All people have consistent access to affordable healthy food</td>
<td>Food for Life: Meal/Nutrition Distribution</td>
<td>Support organizations that distribute food such as medical tailored meals, prepared food, produce, or other food and meals to school children, families, and those in underserved communities</td>
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<td></td>
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<td>Food for Life: Increasing Purchasing Power</td>
<td>Support organizations that increase enrollment in programs that extend food dollars such as in the Supplemental Nutrition Assistance Program (SNAP), Special Supplemental Nutrition Program for Women, Infants and Children (WIC), and federal school meal programs</td>
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<tr>
<td>All community members experience social emotional health and wellbeing and have access to high quality behavioral health care services when needed</td>
<td></td>
<td>Mental Health &amp; Wellness</td>
<td>Increase access to behavioral health care services for low-income and vulnerable populations</td>
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<td></td>
<td>Contribute to the mitigation of the effects of trauma related to gun violence, community violence, family violence and other ACEs related to traumatic events for populations living in adverse environments</td>
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<td></td>
<td>Unhealthy substance use: Prevent and reduce misuse of drugs and alcohol</td>
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<td></td>
<td>Prevent and support healing from toxic stressors, ACEs and intergenerational trauma associated with systemic racism</td>
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<tr>
<td>Priority health need</td>
<td>Expected impact</td>
<td>Focus</td>
<td>Strategy</td>
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<tr>
<td>4. Education</td>
<td>Reduced structural barriers and improved opportunities for inclusive economic mobility</td>
<td>Economic Opportunity: College &amp; Career Readiness</td>
<td>Support programs that improve high school attendance, achievement, and/or graduation for students of color in low-income areas</td>
</tr>
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<td></td>
<td></td>
<td>Economic Opportunity: Quality Jobs &amp; Careers</td>
<td>Enhance career pathways by partnering with workforce development organizations to develop and implement job training and placement programs, including pre-apprenticeship programs</td>
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<td></td>
<td>Improved school readiness for children entering kindergarten</td>
<td>Academic Attainment</td>
<td>Expand subsidized preschool slots for low- and moderate-income families (focus on Latinx/Black African American pop)</td>
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<td></td>
<td>Increased access to educational and social health resources</td>
<td>Academic Attainment</td>
<td>Support organizations implementing digital equity policies, programs and/or tools for households with school-age children (e.g., affordable, robust broadband internet service, internet-enabled devices, digital literacy training)</td>
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</tbody>
</table>
Kaiser Permanente Santa Rosa Medical Center will monitor and evaluate the strategies listed above to track implementation and document the impact of those strategies in addressing significant health needs. Tracking metrics for each prioritized health need include the number of grants made, the number of dollars spent, the number of community-based organizations supported, and the number of people reached/served.

In addition to the strategies developed as part of the CHNA/IS process, many health needs are addressed by Kaiser Permanente business practices that contribute to community well-being, including environmentally responsible purchasing, waste reduction, and purchase of clean energy for facilities. We procure supplies and services from a diverse set of providers and partner with workforce development programs to support a pipeline for diverse suppliers, and we build the capacity of local small businesses through training on business fundamentals. We also conduct high-quality health research and disseminate findings intended to increase awareness of the changing health needs of diverse communities, address health disparities, and improve effective health care delivery and health outcomes.

### Health needs Kaiser Permanente Santa Rosa Medical Center does not plan to address

The significant health needs identified in the 2022 CHNA that Kaiser Permanente Santa Rosa Medical Center does not plan to address are shown in the table below, along with the reasons for not addressing those needs.

<table>
<thead>
<tr>
<th>Reason</th>
<th>Income &amp; employment</th>
<th>Substance use</th>
<th>Climate &amp; environment</th>
<th>Food insecurity</th>
<th>Community safety</th>
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<tbody>
<tr>
<td>Less feasibility to make an impact on this need</td>
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<td></td>
<td></td>
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<td>X</td>
</tr>
<tr>
<td>Significant Kaiser Permanente investments already have been made to address this need</td>
<td></td>
<td></td>
<td></td>
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<td>X</td>
</tr>
<tr>
<td>Aspects of this need will be addressed in strategies for other needs</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
</tbody>
</table>