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\(^1\) Non-financial summary of accomplishments are referred to in SB 697 as non-quantifiable benefits.
EXECUTIVE SUMMARY

Our Mission
To extend the healing ministry of Jesus in the tradition of the Sisters of St. Joseph of Orange by continually improving the health and quality of life of people in the communities we serve.

Our Vision
We bring people together to provide compassionate care, promote health improvement and create healthy communities.

Our Values
The four core values of St. Joseph Health -- Service, Excellence, Dignity and Justice -- are the guiding principles for all we do, shaping our interactions with those whom we are privileged to serve.

Who We Are and What We Exist

Following a difficult journey across the country, nine teaching Sisters arrived in Humboldt County in June of 1912 in response to a request from the Northern California Catholic Bishop. The Sisters arrived from La Grange, Illinois with a few coins remaining from the funds given to them for their journey and a strong commitment to educate the children of the area. The Sisters traveled by train and finally by steam ship, the only mode of transportation in and out of this rural isolated county. They started a school in Eureka, the largest town in the Humboldt County area, in August of 1912, and began teaching the children. In 1918, they were approached by the county’s leaders and asked to go into the homes and care for the families stricken by the flu epidemic. The only Eureka hospital had been closed by the doctors’ who owned it when they had left the area to minister to World War I casualties, and the entire area was lacking in health care. The Sisters responded quickly and went out into the community, caring for the sick in their own homes, and temporarily opening the shuttered hospital for patients who required an increased level of care. At the end of the epidemic, the civic leaders requested the Sisters continue to operate the hospital, and the Sisters then spent months preparing the abandoned facility to be permanently reopened. The Sisters commitment to health care started with the flu epidemic, continued with the opening of the Eureka hospital permanently in 1920, expanded to the Eel River Valley area in 1957 with the opening of Redwood Memorial Hospital and continues today with their ongoing mission to bring people together to provide compassionate care, promote health improvement and create healthy communities.

St. Joseph Health – Redwood Memorial (RMH) is a critical access hospital opened in 1957 by the Sisters, again at the request of local leaders, this time those of the Eel River Valley. The hospital is located 30 miles from ministry partner St. Joseph Health – Eureka, (SJE) and partners with SJE to provide health care to the North Coast region of California.

St. Joseph Health- Redwood Memorial provides twenty four hour emergency services, women’s and children’s services, holistic patient centered care (the Journey), surgical services, outpatient laboratory services and is a partner with SJE in providing accredited cancer programs. The hospital provides
outpatient rehabilitation services for the Eel River Valley, cardiopulmonary care, orthopedic surgical care and endoscopy. There are 35 beds, 34 doctors and 198 employees.

The Journey was adopted by Redwood Memorial to promote the optimal well-being of the community, provide a welcoming and healing environment that physically, emotionally and spiritually uplifts patients, families, physicians and volunteers. The success of the Journey has been documented through awards to Redwood Memorial that recognized the ministry for the success of meeting this vision of the Journey. All employees of RMH are trained in the standard of care that adheres to the Journey mission.

Redwood Memorial provides care to all residents of the Eel River Valley, which encompasses the communities of Fortuna, Loleta, Ferndale, Rio Dell and Scotia, as well as smaller isolated non-incorporated communities in the mountains surrounding the region. Redwood Memorial’s community benefit activities and priorities address the needs of the most isolated, underserved areas of the region and of the populations living in these areas. The activities include addressing the unmet mental health needs of the growing Latino population, addressing the continuing health care needs of the homeless and most vulnerable, providing food assistance to families facing food insecurity and providing outreach and education on the value of health screening and early prevention interventions.

**FY13 Community Benefit Investment**

St. Joseph Health – Redwood Memorial provided $9,290,005 in community benefit in FY13 and an additional $7,842,779 for the unpaid cost of Medicare.

**Overview of Community Needs and Assets Assessment**

St. Joseph Health, Redwood Memorial (RMH) partnered with St. Joseph Health, St. Joseph Hospital Eureka to complete a Community Health Needs and Assets Assessment (CHNA) in 2011. The CHNA followed the same process RMH and SJE had used in six (6) prior assessments, organizing and summarizing existing secondary documents and primary data collected from a broad spectrum of community resources and citizens. The four priority focus areas for the Community Benefit Plan were selected from the data collected after an evaluation by the full Community Benefit Committee. The CHNA highlighted the concern the community members had about food insecurity, about access to both medical and mental health resources for the Latino population and the large homeless population, and the difficulty citizens have accessing health education and resources in the outlying areas of the large geographic area served by the SJH ministries. The Community Benefit Committee reviewed the CHNA, received input from staff, reviewed the capacity of RMH to address the needs and selected these four topics for the focus areas. The other needs were evaluated by the Committee and were not selected as focus areas for reasons that included other organizations were better suited to address the issue, other organizations had previously taken the lead to address the issue, RMH did not have the resources to adequately address the need or the issue was outside the scope of the ministry’s mission.
Community Plan Priorities/Implementation Strategies

The Community Needs and Asset Assessment of 2011 areas of focus chosen by the Community Benefit Committee are:

- Access to education and health screenings: The isolation of the region increases the need for health outreach activities that assure that all citizens of the county have the ability to receive needed education. By formalizing partnerships with Humboldt Medical Specialists, the American Cancer Society, and Evergreen Lodge, RMH will assist SJE in providing all newly diagnosed cancer patients with personalized books containing information specific to their disease process. Cancer screenings will be offered free of charge to the county residents through Humboldt Medical Specialists and community physicians, both during participation at sponsored health fairs and in scheduled weekend clinics, with 100% who have abnormal screening results referred for follow up care. Education and information will be provided to the isolated regions of the service delivery area through activities targeted to reach individual citizens through a variety of activities.

- Food Insecurity: Humboldt County has a high percentage of families that state they are food insecure and yet Humboldt has a far reaching network of food pantries. A survey was conducted in 2012 to determine why there continues to be the disconnect between the resources (the pantry network/Cal Fresh) and the families. RMH, partnering with SJE, commissioned a food survey through the California Center for Rural Policy in partnership with Food for People, the county wide network of food resources. The survey provided RMH with information to further understand how to improve access and increase the enrollment of families into the Cal Fresh programs.

- Mental Health Access for the Latino Community: There are few resources for mental health access in Humboldt County and no counseling resources for an individual that only speaks Spanish. The growing Latino population has suffered from the inability to address mental health needs and, RMH will increase the number of culturally and linguistically appropriate mental health and behavioral health resources. RMH is partnering with SJE and community organizations to address this community wide deficit.

- Access to Care: There continues to be a large homeless population in Humboldt County who seek the majority of their medical interventions from RMH’s emergency room. The Care Transition Team, SJE, Humboldt State’s California Center for Rural Policy, the Robert Woods Johnson Foundation, Open Door Community Health Centers, the Community Resource Centers, Healing Ring, and the Serenity Inn will partner to improve the care for this transient population. The partnership will provide shelter, medications, food and transportation to improve health by decreasing avoidable bed days and use of the emergency room for non-emergent health care needs.
INTRODUCTION

Who We Are and Why We Exist

St. Joseph Health, Redwood Memorial is a ministry of St. Joseph Health, Orange California and was the founded in 1957 at the request of local Eel River Valley community leaders. Their partnering hospital, St. Joseph Eureka, was established in 1920, by the Sisters of St. Joseph of Orange. The Sisters arrived in Humboldt County in 1912 to educate the children and began their ministry to the sick during the 1918 flu epidemic. The epidemic brought attention to the lack of health care for the region and the Sisters responded by reopening the empty hospital in Eureka in 1920. The Sisters 101 years in the community is honored through the continuing of education of the children in the school they opened in August of 1912 and the continuing provision of quality health care in Humboldt County at both Redwood Memorial and St. Joseph hospitals.

Redwood Memorial was opened in 1957 when the citizens of the Eel River Valley approached the Sisters of St. Joseph of Orange and advocated for a full service hospital in the city of Fortuna. Today, RMH employs almost 200 staff members to address the health care needs of the patients of the region. Redwood Memorial strengthens its own ability to address the needs of the people they serve by continually partnering with community organizations to address the mission of the Sisters – to go out into the communities, listen to the needs of the people and address those needs. RMH continues to provide care for all of the Eel River Valley, an area that has a high disproportionate unmet health care need, and RMH identifies the entire county for community benefit activities with a special focus on those that live in the county’s southern most isolated regions.

- Redwood Memorial has partnered with the American Cancer Society (ACS), the fully accredited RMH and SJE Cancer Programs, Humboldt Medical Specialists, Humboldt State University California Center for Rural Policy and area physicians to increase access to health education for the community. SJE, through the ACS, provides each newly diagnosed cancer patient with a notebook individualized to address the patient’s cancer diagnosis and these books are also available for RMH newly diagnosed cancer patients. The books are distributed by an oncology social worker who has an office at Evergreen Lodge. The Lodge provides housing for oncology patients who travel to SJE to receive treatment from the fully accredited Cancer Program and is the primary housing resource for patients of RMH that live in the isolated regions of Southern Humboldt County. The Lodge was built in collaboration with the American Cancer Society, the College of the Redwoods building trades, the Southwest Rotary, SJE and RMH. The Lodge is a wonderful example of how multiple organizations can come together to meet a defined community need, the need to assist patients who did not have the resources to travel for their oncology treatment. The social worker, in fiscal year 2012, became more directly involved in the care of the oncology patients when her job duties were expanded to include evaluating the social/psycho needs of all cancer patients and assuring they were offered the resources to address these needs. As part of the team of resources available to all oncology patients, the social worker sits on the Cancer Committee and attends the RMH cancer tumor boards, and reports needed educational needs to the Community Benefit Area Director.
Redwood Memorial also provides assistance to area physicians and Humboldt Medical Specialists to provide health screenings for community members. The screenings were held in 2012 at both Redwood Memorial and SJE’s community wide health fairs and in scheduled clinics open to all community members. Humboldt Medical Specialists dermatology office sponsored a weekend screening where 39 patients were screened for skin cancers and all patients who had adverse results were referred for medical follow up. During the annual Apple Harvest Festival, RMH staff provided 220 finger stick tests, 129 bone density tests and 250 BMI tests, while providing health information to the 750 individuals who visited their booth. RMH staff also participated in the annual Bay Shore Mall Health Fair, sponsored by SJE, where 5,500 people attended. RMH provided screenings to 135 individuals for bone density, 200 for BMI and 300 for blood pressure at this event. All those screened who had abnormal test results were referred to physicians for follow up care.

In collaboration with Humboldt State University’s California Center for Rural Policy and the Robert Woods Johnson grant, RMH provided space for a six week patient focused education series, assisting patients to learn to take control of their medical needs. In addition, CCRP is the lead in the effort to increase the number of community members who receive colon cancer screenings.

- St. Joseph Health, Redwood Memorial, partnered with St. Joseph Eureka, the California Center for Rural Policy and Food for People (the area’s food bank) to determine why a high percentage of single mothers report their children go to bed each night hungry. The survey respondents, 1,127 families, provided information to assist RMH, in partnership with SJE, in a community wide effort to address the food insecurity of the area. Food for People has a system of 15 food pantries, spread throughout Humboldt County, that provide access to food, yet parents, when surveyed, reported food insecurity is on the rise. Cal Fresh, California’s food stamp program, is not used by 50% of the local families eligible to use them, and the survey respondents reported confusion about eligibility requirements and how to enroll. Findings from the survey also showed the heads of the household lack the knowledge of affordable food resources. The lack of knowledge equated to reported high levels of stress from a feeling of inadequacy to provide for their families and was leading to high level of depression in the surveyed families.

RMH strengthened their community partnerships to address this issue, becoming a part of a community wide effort to increase the use of Cal Fresh and increase the knowledge of families on how to access the available food resources.

The Community Benefit Committee offered grants to community organizations for food, partnered with SJH’s Community Funding Partnership for additional grant dollars to community food programs, partnered on a Cal Fresh outreach county wide grant, and used the Community Benefit Programs of both RMH and SJE to increase access through food pantries and Cal Fresh enrollments. These steps resulted in 294 families applying for Cal Fresh, 7,665 distributions of commodities and the provision of 1,261 weekend food back packs to the area’s
school children. In December of 2012, the Community Needs Network of the Community Benefit Committee (the subcommittee charged with allocating Care for the Poor funding) awarded grants to 7 local organizations that provide food services to the poor. The grants ranged from $20,000 for Food for People to continue the Farm to Family produce distribution throughout the county to $5,000 to Arcata House for food resources for Arcata’s homeless population. In FY 13, Food for People’s Free Produce markets were funded by the Community Needs Network grant and the markets provided 151,007 pounds of free produce to 3,333 low income homes with 10,379 individuals. The markets were held in the cities of Eureka and Fortuna, as well as the isolated communities of Garberville and Redway in Southern Humboldt County. Locally Delicious also received funding and by contract with local farmers, grew 5 tons of produce to provide to Food for People for distribution specifically for low income senior citizens.

RMH’s Community Resource Centers (CRCs) have been sites for summer lunch distribution for children. With such a high rate of children on free or reduced lunches during the school year, proper nutrition in the summer months is of grave concern to organizations working to provide proper nutrition to the students while out of school. The CRCs assisted with the provision of 16,144 lunches through 20 sites spread throughout the county.

- Redwood Memorial partners with many local community organizations to address the needs of the growing Latino population. In partnership with SJE, RMH provides services to the population through the Paso a Paso and Healthy Kids Humboldt programs. These programs provide child birth education, doula support, parenting classes, breast feeding support and assistance in enrollment assistance for Cal Fresh, insurance and WIC. The nine Community Benefit staff members (Paso a Paso, Healthy Kids Humboldt and the Loleta CRC) compose the largest group of Spanish speaking staff in the County and are often approached by other community organizations to assist in outreach activities to the population they serve.

The staff is often the only source of support for the families and for community organizations who are trying to work with them. To address the need, the staff has become available to respond beyond the scope of their written job duties. This includes listening to the frustration and anxiety from the families and the other organizations on the lack of mental/behavioral health resources for those whose only language is Spanish. The staff sought support from a Spanish speaking Catholic priest who became the only resource for mental health support for both the population and the staff that was overwhelmed in attempting to address the lack. The Community Benefit Committee saw the need in the CNHA and responded by including this area of focus in the planning of community benefit activities.

Telecommunication equipment was purchased through a grant with North Coast clinics Network and Open Door Community Health Centers and placed in the SJE General Hospital campus to be used by Paso a Paso and Healthy Kids Humboldt. The staff was educated on how to use the equipment and conversations were begun with outside counseling resources to provide counseling via this communication equipment. The Community Needs Network
awarded a second year of funding to Open Door Community Health Center with an $18,000 grant for a Spanish speaking counselor. RMH in partnership with SJE also funded an agreement with Sonoma County’s Catholic Charities to provide immigration support to the families as another resource to decrease the anxiety concerning the issue.

RMH provided funding to the Department of Public Health, Maternal and Child Services to translate a video on postpartum depression into Spanish. Maternal Child Services had received feedback from local care providers that postpartum depression was a growing concern for the population and there were no tools available in Spanish. Paso a Paso staff assisted with the translation of the video and in June of 2013, the final version was made available as a tool to assist the new mothers.

- RMH and SJE are often the source of all health care for the area’s 5,000 County Medical Services Provider (CSMP) eligible citizens. Of the 3,300 county residents actively enrolled in CSMP, the applications reflect the majority of them are homeless. These homeless use RMH and SJE’s emergency room as their primary source of medical care, and if they become inpatients, stay longer than housed individuals as they lack the ability to receive follow up care post discharge. To address this, RMH and SJE received a CSMP grant to hire a social worker and nurse team to provide case management to assist these patients with their discharge care needs.

The team required the resources to provide for the patients, including housing, medications and supplies. To address this, the Community Benefit Committee agreed to provide assistance through contracts with both the Serenity Inn and Healing Ring for beds, local pharmacies for medications and supplies, using internal Budget Philosophy operations dollars to pay for them. The program goal for FY 13 was to decrease the acute care bed days by 190 and the actual decrease was 782, an amazing 412% higher than expected decrease. The CSMP team is a partner in the work with the RMH Care Transition Program a program that is part of the county wide Robert Woods Johnson Aligning Forces for Quality funding. Humboldt is one of only 14 RWJ programs in the United States and recently was notified that funding will continue for round four for services to this population. Partners in the work include the Independent Physician Association, California Center for Rural Policy and Open Door Community Health Centers. RMH’s Community Resource Center coordinators also are strong partners, addressing the health care needs of the homeless prior to the need for emergency room or acute care.

The Care Management department of RMH and SJE began a project in FY 13, partnering with the local skilled nursing facilities to provide beds for homeless acute care patients who required a higher level of care than could be provided by the Serenity Inn or the Healing Ring. The partnership included hiring a nurse, also through Budget Philosophy dollars. The nurse provides case management to the patients during the acute care stay and follows them to the skilled nursing facility to continue case management until discharge. This case management was a necessary component of the high level of support the patients needed, support the local skilled nursing facilities did not have the capacity to provide. Prior to this project, the skilled nursing facilities denied these high need patients a bed in the facilities for fear their individual
needs could not be met. In FY 13, 41 patients were served and the team estimates the patients would have spent at least 81 days in an acute care bed without this program.

The Alcohol and Drug Care Services provides the only detox beds for individuals in the community and was in danger of closing for one month, due to lack of funding prior to beginning of the new fiscal year. The Community Benefit department utilized funds set aside for the work with the homeless to provide the funding to assure no loss of this vital service for the month.

**ORGANIZATIONAL COMMITMENT**

**Community Benefit Governance and Management Structure**

St. Joseph Health – Redwood Memorial has a Board of Trustees that appoints a Community Benefit Committee (CBC) to guide the planning, development, implementation and evaluation of community benefit activities. The CBC is chaired by a Trustee and contains members of St. Joseph Health, Redwood Memorial executive management team, community benefit staff, a representative from the hospital’s finance department, representatives from community organizations and community citizens. The CBC has Board approved by-laws, charter and policies defining their work. The Board of Trustees receives monthly written reports on Community Benefit activities and programs, a yearly presentation from the Area Director of Community Benefit and verbal reports after each meeting by the CBC Trustee Chair. The Chair carries forward to the full board recommendations for programs, initiatives and funding that have been approved by the full CBC at their meetings.

The Vice President of Mission Integration is a member of the Community Benefit Committee and is the liaison between the CBC and the executive management team. The Vice President of Mission Integration provides the committee with management support and assures the Community Benefit Plan is in alignment with the strategic goals of St. Joseph Health. The Area Director of Community Benefit and the Care Transition Manager are members of the CBC and are active members of the Area Management Team, a team that reviews and supports the St. Joseph Health strategic plan.

**PLANNING FOR THE UNINSURED AND UNDERINSURED**

**Patient Financial Assistance Program**

We believe that no one should delay seeking needed medical care because they lack health insurance. That is why St. Joseph Health, Redwood Memorial has a **Patient Financial Assistance Program (FAP)** that provides free or discounted services to eligible patients. In FY13, St. Joseph Health-Redwood Memorial provided $776,073 in charity care.

One way St. Joseph Health, Redwood Memorial informs the public of FAP is by posting notices. Notices are posted in high volume inpatient and outpatient service areas. Notices are also posted at locations where a patient may pay their bill. Notices include contact information on
how a patient can obtain more information on financial assistance as well as where to apply for assistance. These notices are posted in English and Spanish and any other languages that are representative of 5% or greater of patients in the hospital’s service area. All patients who demonstrate lack of financial coverage by third party insurers are offered an opportunity to complete the Patient Financial Assistance application and are offered information, assistance, and referral as appropriate to government sponsored programs for which they may be eligible.

**COMMUNITY**

*Defining the Community*

Humboldt County has an estimated population of 134,827 citizens living in an area of 3,568 square miles. There are only 38 individuals living per square mile in comparison to the average of 239 throughout all of California. The geography of the county includes 80% of all land set aside for forestlands, protected redwood forests and recreational State and Federal park lands. The remaining 20% of available land is spread over the entire region, showing the potential isolation of many of the 134,827 residents from routine support services. Eureka, the county seat has almost 20% of the entire population with 26,961 citizens. With Eureka, the total population of the other cities Arcata (17,248) and Fortuna (11,836), as well as the unincorporated community of McKinleyville (15,177) along Highway 101, the Humboldt Bay region is over 53% of the total population for the entire county.
COMMUNITY NEEDS ASSESSMENT PROCESS AND RESULTS
Summary of Community Needs Assessment Process and Results

St. Joseph Health, Redwood Memorial partnered with St. Joseph Health, St. Joseph Health, St. Joseph Eureka to complete a Community Need Health Assessment (CNHA) in 2011. The CHNA followed the same process used in six (6) prior assessments, organizing and summarizing secondary documents and primary data collected from a broad spectrum of community resources and citizens.

It is important to understand the isolation of Humboldt’s unincorporated communities when reviewing the priority areas selected for focus by the RMH CBC. The data collected for the CHNA is one resource for the selection but an understanding of the weather conditions, the road conditions, the poverty rates of the area and the isolation of many of the smaller unincorporated regions is another important resource. The region has levels of very high unemployment and areas of low, with the unemployment rate for April 2012 at 8.4% for the entire county. Two communities in the Eel River Valley, Ferndale (1,372) and Rio Dell (3,250) have both the lowest and highest employment rates, making it important that outreach activities be focused on the communities with the higher need. Fuel prices in California average $3.89 per gallon in April of 2012 and for Humboldt County, the average was $4.13. With the adverse road conditions in the more isolated regions added to the high poverty rates, low income residents have difficulty traveling to the Humboldt Bay region where the majority of all health care services are delivered. There is little or no public transportation and residents that can afford to purchase a car often cannot afford insurance or fuel for it. The US Census Bureau reports that 18.4% of all Humboldt County citizens are living below the poverty line, an increase of 4% from the same time last year. The median household income is $40,376 compared to the State median of $61,632 and with unemployment, high fuel prices and extreme isolation, transportation is a constant financial drain on all area residents.

For children living in poverty, the variation from community to community is even more telling. In 2010, there was a county wide 52.6% rate for free and reduced lunches in the area’s schools. The numbers vary from school to school within the RMH delivery area. Within the city of Fortuna there are two school districts – one has a rate of 80.67% and the other 65.38%. In the communities of Rio Dell and Scotia, separated only by a bridge over the Eel River, the difference is even more dramatic with Rio Dell schools rate at 71.58% and Scotia’s only 16.53%. The small community of Loleta has the highest rate for the region at 91.45%.

The secondary service areas of Del Norte, Mendocino and Trinity counties have high rates of poverty and unemployment, putting a strain on RMH as a critical care hospital available to address the health care needs of Southern Humboldt and Northern Mendocino counties. The
US Census Bureau notes the poverty rate for Del Norte County is 22%, for Trinity County 17.6% and for Mendocino County 17.8%. The data for free and reduced lunches show that 69.7% of all Del Norte Unified School District students are eligible, 61% of the students in Trinity County and 69.4% in the Mendocino County school district, with seven of the school districts at 100% of the enrollment. The individuals living in the area served by RMH are often the most rural members of the counties and the most independent, seeking health care services only as a last resort, making the health care delivery difficult and prevention education necessary.

The assets of Humboldt and the surrounding counties are reviewed as part of the CHNA process and when setting community benefit activities, as RMH realizes that no one entity can address far reaching issues without community relying on community strengths. Partnerships are one of the primary strengths of the entire RMH region with partnerships crossing county borders and partners coming together to address community needs. These partnerships include the school districts of Loleta, Rio Dell and Fortuna, Robert Woods Johnson, Hydesville Community Church, California Center for Rural Policy, the Food Policy Council, Open Door Community Health Centers Mobile Medical Office, the County government, St. Joseph Health – St. Joseph Eureka, American Cancer Society, the Bertha Russ Lytel Foundation, the Mel and Grace McLean Foundation – the list can go on and on with names of organizations that come together to address the health care needs of the region RMH serves. RMH believes these partnerships provide the additional support needed to address the identified community needs.

St. Joseph Health, Redwood Memorial anticipates that implementation strategies may change and therefore, a flexible approach is best suited for the development of its response to the St. Joseph Health, Redwood Memorial CHNA. For example, certain community health needs may become more pronounced and require changes to the initiatives identified St. Joseph Health, Redwood Memorial in the enclosed CB Plan/Implementation Strategy.

**Identification and Selection of DUHN Communities**

Communities with Disproportionate Unmet Health Needs (DUHN) are communities defined by zip codes and census tracts where there is a higher prevalence or severity for a particular health concern than the general population within our ministry service area.
DUHN² Group and Key Community Needs and Assets Summary Table

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<th>DUHN Population Group or Community</th>
<th>Key Community Needs</th>
<th>Key Community Assets</th>
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<td>Low income individuals who do not have access to appropriate housing and community based health care</td>
<td>Access to community based health care</td>
<td>Strong coordination between organizations and systems working to address needs</td>
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<td>Hispanic population of Humboldt County</td>
<td>Access to culturally appropriate mental and behavioral health resources</td>
<td>Strong connection to church, clinic network, school and hospitals</td>
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<td>Households with incomes below the federal poverty level with children living in the home</td>
<td>Access to affordable, nutritious food</td>
<td>County-wide community and program support through Food for People, local food pantries and Cal Fresh outreach project of the California Center for Rural Policy</td>
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<td>Low income geographically isolated individuals without coverage for prevention and treatment services</td>
<td>Access to information and education on prevention and treatment</td>
<td>Effective prevention and treatment community partnerships</td>
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Priority Community Health Needs

St. Joseph Health, Redwood Memorial prioritized the following four issues from the CHNA to be addressed through Community Benefit Activities for FY 13: Access to Care (reduction of inappropriate readmits to SJE, for patients of the St. Joseph Care Transition Team and RMH’s Eureka Community Resource Center), Mental Health resources for the Latino Community (build a mental/behavioral health service infrastructure for the low income Latino populations of Humboldt County), Food Security in Humboldt County (improve the food security of low income singles women with children under the age of 18) and Access to Education and Health Screenings (increase access to cancer preventative awareness and treatment services),

² “Communities with DUHN generally meet one of two criteria: either there is a high prevalence or severity for a particular health concern to be addressed by a program, or there is evidence that community residents are faced with multiple health problems and have limited access to timely, high quality health care (Advancing the State of the Art in Community Benefit (ASACB) User’s Guide for Excellence and Accountability, 2004).”

“Communities” may be neighborhoods or population groups. For more information, please refer to Appendix 1: DUHN Population Criteria.
Needs Beyond the Hospital’s Service Program

No hospital facility can address all of the health needs present in its community. We are committed to continue our Mission through community benefit program and by funding other non-profits through our Care for the Poor Program managed by St. Joseph Health, Redwood Memorial.

Furthermore, St. Joseph Health, Redwood Memorial will endorse local non-profit organization partners to apply for funding through the St. Joseph Health, Community Partnership Fund. Organizations that receive funding provide specific services, and resources to meet the identified needs of underserved communities through St. Joseph Health communities.

The following community health needs identified in the ministry CHNA will not be addressed and an explanation is provided below:
Transportation: The isolated regions surrounding RMH have a great need for affordable public transportation as the area is underserved by available county resources. RMH is not able to address this issue as it is outside the scope of services for the ministry and is an issue dependent on government funding and resources to solve.

Affordable housing: The Eel River Valley does not have adequate, well maintained affordable housing. The Loleta Chamber of Commerce, Bear River Rancheria and the Wyiot Tribe are addressing the need for additional housing and the issue is outside the mission of RMH.

COMMUNITY BENEFIT PLANNING PROCESS
Summary of Community Benefit Planning Process

The four priority focus areas for the Community Benefit Plan were selected from the data collected after an evaluation by the full CB Committee. The CB Committee reviewed the CHNA, received input from staff, reviewed the capacity of Redwood Memorial Hospital to address the needs and selected four topics for the focus areas. The CB Committee heard the concern of community members about food insecurity, about access to both medical and mental health resources for the Latino population and the large homeless population, and the difficulty citizens have accessing health screening and education resources in the outlying areas of the large geographic area served. Therefore, these were the four priority areas of focus chosen by the CB Committee.
FY12 – FY14 Community Benefit Plan/Implementation Strategies and Evaluation Plan

FY13 Accomplishments

The RMH Community Benefit priority initiatives are as follows: Access to Care, Access to Education and Health Screenings, Mental Health resources for the Latino community and Food Security in Humboldt County. Below is a summary of the initiatives and the FY13 accomplishments.

**Initiative:** Access to Care

**Description:** St. Joseph Health, Redwood Memorial is partnering with community organizations to address the rate of inappropriate readmits for patients of the Care Transition Team and the Redwood Memorial Eureka Community Resource Center.

**Key Community Partners:** The partners in this effort include, yet are not limited to, SJH, St. Joseph Eureka, Serenity Inn, North Coast Clinics Network, Open Door Community Health Centers, Homeless Court, Eureka Rescue Mission, St. Vincent de Paul, and the Healing Ring.

**Goal (Anticipated Impact):** Reduce inappropriate readmits to SJE for patients of the Care Transition Team and the Redwood Memorial Eureka Community Resource Center.

**Target Population (Scope):** Homeless persons of the communities served by Care Transition and the Redwood Memorial Eureka Community Resource Center

**How will we measure success? Outcome Measure (Evaluation Plan):** Increase of avoidable bed days for patients of the Care Transition Team and the Redwood Memorial Eureka Community Resource Center.

**Three-Year Target:** 200 avoidable bed days over the three year period

**Strategy 1:** Number of pre-acute options available in Humboldt County

**Strategy Measure 1:** Number of pre-acute options

- Goal of 20 total pre-acute options available in the community in FY13. Pre-acute care options for the homeless include case management, medication, transportation, food, shelter and/or a medical home that would keep them from having to return to the hospital through ED and UC to get service. Goal met.

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3 Anticipated Impact is equivalent to Goal. Language is used for clarity with regard to IRS Proposed Rule (2013)

4 Evaluation Plan is equivalent to Outcome Measure. Language is used for clarity with regard to IRS Proposed Rule (2013)
Initiative: Access to Care (Continued)

Strategy 2: Increased use of Care Transition Program support services for high users

Strategy Measure 2: Number of patients who receive services from Care Transitions

- Goal of 80 patients enrolled in the Care Transitions in FY13. Goal was exceeded with 89 patients enrolled in this program.

Strategy 3: Increase capacity for safe residential options for high users of services

Strategy Measure 3: Number of residential beds available to high users

- Goal is to have 10 beds in residential facilities in FY13. Goal was exceeded with 11 bed options in the community.

FY13 Accomplishments:

The Robert Woods Johnson grant provided additional funding in FY 13 to hire and place a nurse in the emergency room. The grant, labeled Super Utilizer, includes strengthening the Care Transition Team’s ability to evaluate patients for case management support immediately at the point of access. The process also strengthened the commitment between RMH/SJE and Open Door Community Health Centers to identify the patients who truly were existing Open Door patients from those who required a primary care provider. Open Door and the Care Transition Team began to hold face to face case meetings to assure that the patient was receiving the coordinated care required to address their health issues and assist the patients without follow up care to receive it.

St. Joseph Health – Eureka, RMH’s partnering ministry, funded a new case manager to follow the patients from the hospital into a skilled nursing facility bed. The case manager was required for specific patients who required the follow up only available at the skilled nursing level, yet no care facility would accept them. There have been times when patients who required IV therapy at home, yet had no home, remained in the hospital for long periods of time simply to receive one or two infusions per day. The care facilities were concerned about the level of mental health needs of the population and discharge planning follow up once the patient recovered enough to return ‘home’. The skilled facilities did have the staffing level or expertise to address the patient needs. The case manager has an expertise in psychiatric follow up and a psychiatrist is also available for higher levels of intervention. The original agreement was to provide this level of care to only one skilled nursing facility in the Eureka area and it was determined the patient and the facilities benefited more if the arrangement covered multiple ones. From the idea that RMH/SJE would purchase one bed in a skilled nursing facility grew a program where all local facilities share the responsibility to provide care for this higher need patient including the large skilled nursing facility in Fortuna.

The Care Transition Team and the SJH-RMH Community Resource Center have worked together with the community to decrease the number of acute care bed usage by 782 in FY 13. This far exceeds the target set three years ago when it was believed that only 190 bed days could be saved in fiscal year 13. The program has been so successful that in FY 13, staff previously funded through grant dollars is
funded completely by the hospital itself and the hospital administration places a high level of respect and support for the outcomes generated for the targeted population served.

**FY12 – FY14 Community Benefit Plan/Implementation Strategies and Evaluation Plan**

**FY13 Accomplishments**

**Initiative:** Access to Education and Health Screenings

**Description:** RMH is committing time and resources to increase the access to cancer preventative awareness and treatment services for all residents of the defined service areas.

**Key Community Partners:** The partners in this work includes, not limited to, American Cancer Society, Physicians, Humboldt Medical Specialists, SJE/RMH Regional Cancer Program, Paso a Paso, St. Joseph Health-St. Joseph Eureka, RMH Community Resource Centers, Evergreen Lodge, Public Health, Latino Net, Breast Health Project, California Center for Rural Policy, Redwoods Community Action Agency

**Goal (Anticipated Impact):** Increase access to cancer preventative awareness and treatment services

**Target Population (Scope):** Low income geographically isolated individuals without coverage for prevention and treatment services

**How will we measure success? Outcome Measure (Evaluation Plan):** Number of prevention education activities and free screenings offered to low income

**Three-Year Target:** 6 partnerships established and 26 training events occurred

**Strategy 1:** Develop partnerships

**Strategy Measure 1:** Number of partnerships developed

- Goal for FY13 was to add one additional partnership. A formal partnership was finalized with Humboldt State University's California Center for Rural Policy to join forces with their Aligning Forces work to bring an increase to colon cancer screenings to all areas of the county. Goal met.

**Strategy 2:** Provide education to the community on the importance of cancer screenings and early detection

**Strategy Measure 2:** Number of education events or access points

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3 Anticipated Impact is equivalent to Goal. Language is used for clarity with regard to IRS Proposed Rule (2013)

6 Evaluation Plan is equivalent to Outcome Measure. Language is used for clarity with regard to IRS Proposed Rule (2013)
Goal for FY13 was to add information on cancer screening and early detection to the Aligning Forces website site. Goal met.

Initiative: Access to Education and Health Screenings (Continued)

Strategy 3: Provide resources to patients/families on cancer prevention/screenings
Strategy Measure 3: Number of resources provided
- Goal for FY13 was to provide four resources to the community. Two health fairs provided free cancer screening; a social worker was hired for the Cancer program to work with patients and meet their needs; free mole check provided by Dr. Dana at his office; and head and neck cancer screening made available at the Arcata farmer’s market. Goal met.

Strategy 4: Referrals to doctors for abnormal results
Strategy Measure 4: Number of people referred to treatment
- Goal for FY13 was 100% referral of abnormal results to physician for follow up. Goal met.

FY13 Accomplishments:

The staff of RMH participated in the Apple Harvest Festival in downtown Fortuna, providing health information to 750 individuals and doing 220 finger stick screens, 129 bone density screenings and 250 BMI. In February of 2013, over 5,000 people came to the Bay Shore Mall to receive health information and obtain screenings at the SJE health fair. The screenings included access to low cost lab draw coupons for patients who are uninsured and were unable to obtain labs ordered by their physicians. The attendees were able to receive blood sugar, mole checks, blood pressure screening, and bone density screenings as well as health information from 91 educational stations. For rural Humboldt County, the health fair is often the only event that provides low income patients and families ease of access to multiple community resources and screenings. RMH’s staff participated by completing 135 bone density screens, 200 BMI and 300 blood pressure.

The area physicians began to provide screening clinics on weekends as well as ‘Walks with the Doc’. The screenings enabled individuals to have skin/mole screenings at no cost with 100% of those with abnormal results referred immediately to the physician for follow up care. The walks brought individual patients into an environment that allowed them increased comfort with the physicians, the ability to ask individual questions and the information they needed to obtain care for health related concerns.

The RMH/SJE Cancer Programs collaborated with the Arcata Farmer’s Market to provide head and neck examinations as community education and prevention during Oral, Head and Neck Cancer Awareness Week. The event was held in conjunction with the weekly Saturday market and 53
individuals received written information and 22 individuals had head and neck exams completed. All that had abnormal results were referred for follow up services by the two doctors and one nurse practitioner who provided the screenings.

Initiative: Access to Education and Health Screenings (Continued)

RMH supports SJF’s relationship with the American Cancer Society for access to directed patient information for those patients that are newly diagnosed with cancer. The ACS provides individual books with information on the specific diagnosis to the Oncology Social Worker who hands these books out to the patients when meeting them for follow up needs. The Social Worker hours were increased from .2 to .6 FTE to assure that the patients had access to the social, emotional support services needed to begin to adjust to the new diagnosis.

FY12 – FY14 Community Benefit Plan/Implementation Strategies and Evaluation Plan

FY13 Accomplishments

Initiative: Mental Health resources for Latino community

Description: RMH is partnering with community organizations within the service area to develop and deliver mental and behavioral health services to the Latino community


Goal (Anticipated Impact): Build a mental/behavioral health service infrastructure for the low income Latino population of Humboldt County

Target Population (Scope): The low income Latino population of Humboldt County

How will we measure success? Outcome Measure (Evaluation Plan): Increase the number of culturally and linguistically appropriate mental and behavioral health resources available for the low income Humboldt County Latino populations

Three-Year Target: 6 culturally and linguistically appropriate resources available in the community

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7 Anticipated Impact is equivalent to Goal. Language is used for clarity with regard to IRS Proposed Rule (2013)
8 Evaluation Plan is equivalent to Outcome Measure. Language is used for clarity with regard to IRS Proposed Rule (2013)
**Strategy 1:** Partner with Mobile Medical Office for increased training of promotoras on mental and behavioral health interventions  
**Initiative:** Mental Health resources for Latino community (Continued)

**Strategy Measure 1:** Number of trained promotoras
- FY13 goal was to train four additional promotoras. All six of the Paso a Paso staff and the two Healthy Kids Humboldt staff have been trained. Goal exceeded.

**Strategy 2:** Provide telehealth for mental/behavioral health access for the Latino population
**Strategy Measure 2:** Telehealth connectivity to Spanish speaking mental and behavioral counselors
- FY13 goal was to have Telehealth equipment at four SJH-HC locations. Equipment installed at Eureka, Loleta and Willow Creek Community Resource Centers and also at the General Hospital Campus of Paso a Paso. Goal met.

**Strategy 3:** Provide education on the use of the equipment
**Strategy Measure 3:** Participants will show increased awareness of mental and behavioral health services available in the community
- FY13 goal was to have at least two trainings on use of the equipment and how to access mental health resources. Open Door provided individual trainings to our staff on three different occasions. Goal exceeded.

**FY13 Accomplishments:**

RMH/SJE partnered with the North Coast Clinic Network to obtain tele-health equipment and with Open Door Community Health Center for training. The partnership resulted in tele-health equipment for the staffs of Paso a Paso and Healthy Kids Humboldt to use for their Spanish speaking clients. Equipment was also placed in RMH Community Resource Centers, to be used by the staff and community groups to access education and resources. The staff met with Open Door IT staff to learn how to utilize the equipment and was provided access to all services Open Door offers through their own widely acclaimed tele-health network of service providers.

The Area Director of Community Benefit met with Open Door to begin to develop access to University of Southern California (USC) Spanish speaking counselors for the growing Latino population. The ministry area is now served by one Spanish speaking counselor with Care for the Poor funding from RMH to Open Door to provide this service through the Federally Qualified Clinic. By developing the relationship with USC, RMH will strengthen the tele-health mental health resources for the population and increase access to other health care needs the population requires without the added burden for families to drive the 600 miles to USC itself.
Initiative: Mental Health resources for Latino community (Continued)

The formal partnership with Catholic Charities of Sonoma County brought an increase in immigration support to the Latino families with various processes tested for the population served. After a year of testing the ability of the Latino families to access the immigration support through set appointments, additional efforts will be the focus in FY 14 to further streamline the process for the families. The stress of immigration issues is reported by staff working with the families to be one of the primary sources of the mental and behavioral health issues in the homes. The immigration support has a high significance in the RMH area due to the large population of Latino families who live in the area to support the dairies, the cheese factory and other agricultural industries.

FY12 – FY14 Community Benefit Plan/Implementation Strategies
FY13 Accomplishments

Initiative: Food Security in Humboldt County

Description: Single parents in Humboldt County report that their children go to bed hungry, yet the schools and the local food pantries focus heavily on enabling the families to easily obtain needed food. RMH is focusing efforts to increase the awareness of resources for the families to assure all area children are provided nutritious food.

Key Community Partners: RMH partners with SJH-SJE, California Center for Rural Policy, Food for People, community food pantries, WIC, Community Resource Centers, Humboldt Food Policy Council, Humboldt Communities for Activities and Nutrition, Healthy Kids Humboldt, Humboldt County Office of Education, schools, Boys and Girls Club, Public Health and the Department of Health and Human Services to address food security.

Goal (Anticipated Impact\(^9\)): Improve the food security of low income single women with children under the age of 18

Target Population (Scope): Single women with children under the age of 18

How will we measure success? Outcome Measure (Evaluation Plan\(^10\)):

\(^9\) Anticipated Impact is equivalent to Goal. Language is used for clarity with regard to IRS Proposed Rule (2013)

\(^10\) Evaluation Plan is equivalent to Outcome Measure. Language is used for clarity with regard to IRS Proposed Rule (2013)
Percent of low income single mothers with children under the age of 18 reporting food insecurity out of total mothers reporting.

**Initiative:** Food Security in Humboldt County (Continued)

**Three-Year Target:** Reduce from 60% to 54% of single mothers with children reporting food insecurity

**Strategy 1:** Coordination among with target population

**Strategy Measure 1:** # of coordination activities

- Goal for FY13 was to add two partnerships to the original working group. We added partnerships with schools in the communities of Rio Dell, Willow Creek, Loleta and Blue Lake to add or enhance a community garden. Goal exceeded.

**Strategy 2:** Develop plan for improved use of services to decrease food insecurity

**Strategy Measure 2:** Plan written

- Goal for FY13 was to apply for CalFresh funding and articulate in that application a plan for decreasing food insecurity via increased outreach and enrollment of target population in CalFresh. Goal met.

**Strategy 3:** Implement plan

**Strategy Measure 3:** Implementation delivery of plan steps

- Goal for FY13 was to evaluate the success of three implementation steps. Use of the bicycle blender, a community dinner in Blue Lake and the Willow Creek food pantry were all evaluated in this fiscal year. Goal met.

**FY13 Accomplishments:**

RMH joined a coordinated effort led by the Humboldt County Department of Health and Human Services to increase the access to Cal Fresh for all those eligible for this service. Humboldt County received a multi-year grant to increase the Cal Fresh dollars used by families to improve access to healthy food for the family and to increase dollars that are generated by Cal Fresh expenditures. The campaign has been labeled by community partner, Food for People, as ‘Bring a Million to Humboldt’. California statistics show that if all people in Humboldt County that are eligible to receive Cal Fresh use them an additional one million dollars in food revenue will be generated in the local economy. Humboldt County has many small family owned farms that bring fresh, nutritious food resources to the multiple countywide Farmer’s Markets and these farmers accept Cal Fresh dollars. If the dollars are increased by one million, the family farms benefit and the circle of bringing high quality, locally grown food to the tables of area families increases as well.
Initiative: Food Security in Humboldt County (Continued)

RMH provided Care for the Poor funding to 7 local organizations that provide food services to the poor. The grants ranged from $20,000 for Food for People to continue the Farm to Family produce distribution throughout the county to $5,000 to Arcata House for food resources for Arcata’s homeless population. In FY 13, Food for People’s Free Produce markets were funded by the Community Needs Network grant and the markets provided 151,007 pounds of free produce to 3,333 low income homes with 10,379 individuals. The markets were held in the cities of Eureka and Fortuna, as well as the isolated communities of Garberville and Redway in Southern Humboldt County. Locally Delicious also received funding from the Community Needs Network and by contract with local farmers, grew 5 tons of produce to provide to Food for People for distribution specifically for low income senior citizens.

RMH’s Community Resource Centers (CRCs) have been sites for summer lunch distribution for children. With such a high rate of children on free or reduced lunches during the school year, proper nutrition in the summer months is of grave concern to organizations working to provide proper nutrition to the students while out of school. The CRCs assisted with the provision of 16,144 lunches through 20 sites spread throughout the county.

Other Community Benefit Programs and Evaluation Plan

Program: Physician coverage for the underserved

Description: 24 hour physician coverage in the emergency room

Key Community Partners: Emergency room physicians, St. Joseph Health – Eureka, St. Joseph Health- Santa Rosa Memorial, primary physician offices, Humboldt Medical Specialists, North Coast Clinics Network, Open Door Community Health Center, Independent Physician Association, Serenity Inn, Healing Ring, St. Vincent de Paul, Department of Health and Human Services

Goal (Anticipated Impact): Access to care

Target Population (Scope): Uninsured/underinsured patients

How will we measure success? Outcome Measure (Evaluation Plan): Avoidable bed days for target population

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11 Anticipated Impact is equivalent to Goal. Language is used for clarity with regard to IRS Proposed Rule (2013)
12 Evaluation Plan is equivalent to Outcome Measure. Language is used for clarity with regard to IRS Proposed Rule (2013)
**Program:** Physician coverage for the underserved (Continued)

**FY13 Accomplishments:**
There were 13,359 patients seen in the St. Joseph Health – Redwood Memorial emergency room with 6,523 or 49% of these uninsured/underinsured. These patients had approximately 13,000 encounters with the emergency room physicians and health care providers.

St. Joseph Health – Redwood Memorial works in close partnership with St. Joseph Health – Eureka to provide complete coverage to patients seen in the RMH emergency room. Together the two hospitals assure that all services required of emergency patients are provided – such as cardiac care (SJE), orthopedic (SJE and RMH), emergency surgery (SJE and RMH) and rehabilitation support services (SJE inpatient and RMH outpatient). Concentration on the needs of the patients is also enhanced by the partnership between the Care Transition Team and the Community Resource Centers, providing pre and post-acute support services. These two support programs provide medications, housing, food and clothing to address the daily needs of the emergency room patients.

**Other Community Benefit Programs and Evaluation Plan**

**Program:** Career training and support services

**Description:** Health education internships for health care trainings

**Key Community Partners:** College of the Redwoods, Humboldt County Office of Education, Independent Physician Association, Humboldt State University, area schools, Department of Health and Human Services, Redwood Community Action Agency

**Goal (Anticipated Impact)**: Access to health education and screenings

**Target Population (Scope):** Health career students

**How will we measure success? Outcome Measure (Evaluation Plan):** Internships will be available for health care students

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13 *Anticipated Impact* is equivalent to *Goal*. Language is used for clarity with regard to IRS Proposed Rule (2013)

14 *Evaluation Plan* is equivalent to *Outcome Measure*. Language is used for clarity with regard to IRS Proposed Rule (2013)
Program: Career training and support services (Continued)

FY13 Accomplishments:
The staff from St. Joseph Health – Redwood Memorial provided 5,244 hours of one on one mentoring to 23 interns during fiscal year 2013. The internships included nursing, medical social workers, and physical and occupational therapists. Mentoring was provided throughout the hospital and support was primarily focused in the nursing units.

The Community Resource Centers, located in five locations of Humboldt County, partnered with Humboldt State University, the Department of Health and Human Services and the judicial system to provide placements for social work interns, TANF families and homeless court assignees. The CRCs also provide placements for AmeriCorps trainees assigned by Redwood Community Action Agency. All of these partnerships established by the St. Joseph Health – Redwood Memorial sponsored CRCs increase the outreach each center is able to provide to the individuals they serve as well as providing needed on the job experience for the assigned interns.

Other Community Benefit Programs and Evaluation Plan

Program: Physician Recruitment

Description: Recruitment of physicians for the medically underserved area of Humboldt and Del Norte Counties

Key Community Partners: St. Joseph Health – Eureka, St. Joseph Health – Santa Rosa, Humboldt Medical Specialists, Independent Physician Association, Humboldt Del Norte Medical Society

Goal (Anticipated Impact\(^{15}\)): Medical providers for the community

Target Population (Scope): Broader community of Humboldt and Del Norte Counties

How will we measure success? Outcome Measure (Evaluation Plan\(^{16}\)): Medical access available to decrease bed days

FY13 Accomplishments:
St. Joseph Health – Redwood Memorial in partnership with St. Joseph Health – Eureka recruits physicians for the medically underserved areas of Humboldt and Del Norte counties. The partnership resulted in the recruitment of ten (10) new physicians to this medically underserved area. With the aging of the physician population, both in specialty care and primary care, the recruitment of physicians is a most important step to assure quality health care continues to be available to the North Coast.

\(^{15}\) Anticipated Impact is equivalent to Goal. Language is used for clarity with regard to IRS Proposed Rule (2013)

\(^{16}\) Evaluation Plan is equivalent to Outcome Measure. Language is used for clarity with regard to IRS Proposed Rule (2013)
Other Community Benefit Programs and Evaluation Plan

Program: Donations to nonprofits, individuals

Description: Provision of daily resources for low income patients of St. Joseph Health – Redwood Memorial

Key Community Partners: Food for People, Humboldt County Office of Education, Redwood Community Action Agency, St. Vincent de Paul, California Center for Rural Policy, Evergreen Lodge, St. Joseph Health – Eureka, rural school districts, Humboldt Area Foundation

Goal (Anticipated Impact\(^{17}\)): Access to daily needs

Target Population (Scope): Underinsured of Humboldt County

How will we measure success? Outcome Measure (Evaluation Plan\(^{18}\)):
Avoidable bed days

FY13 Accomplishments:
Through community partnerships, 201 patients of St. Joseph Health – Redwood Memorial have been provided support for meeting their daily needs. The support includes food, shelter, medications and transportation for the patient and their families. There were 199 hours of staff involvement for the provision of these support services and 1,037 individual encounters.

In partnership with the Care Transition Team, the St. Joseph Health – Redwood Memorial Community Resource Centers worked with individual patients to provide support services needed in order to maintain personal health. The support includes gas vouchers, vouchers to local food resources, food pantries, commodities, clothing, shelter and medications. St. Joseph Health – Redwood Memorial had found that many patients in need of acute care could be assisted through access to these support services in advance of the declination of health. In some instances, patients returned daily to the emergency room for the next dose of antibiotics because they could not afford to purchase the prescription given to them at their first visit. In others, patients declined to have necessary surgery due to lack of housing. The CRCs and the Care Transition team provided these needs along with case management, allowing the patient to receive the health care they required.

\(^{17}\) Anticipated Impact is equivalent to Goal. Language is used for clarity with regard to IRS Proposed Rule (2013)

\(^{18}\) Evaluation Plan is equivalent to Outcome Measure. Language is used for clarity with regard to IRS Proposed Rule (2013)
## FY13 Community Benefit Investment

### FY13 COMMUNITY BENEFIT INVESTMENT

**Redwood Memorial Hospital**

*(ending June 30, 2013)*

<table>
<thead>
<tr>
<th>CA Senate Bill (SB) 697 Categories</th>
<th>Community Benefit Program &amp; Services</th>
<th>Net Benefit</th>
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<tr>
<td>Medical Care Services for Vulnerable(^{20}) Populations</td>
<td>Financial Assistance Program (FAP) (Charity Care-at cost)</td>
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<td>Unpaid cost of Medicaid(^{21})</td>
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<td>Unpaid cost of other means-tested government programs</td>
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<td>Other benefits for Vulnerable Populations</td>
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\(^{19}\) Catholic Health Association-USA Community Benefit Content Categories, including Community Building.  
\(^{20}\) CA SB697: “Vulnerable Populations” means any population that is exposed to medical or financial risk by virtue of being uninsured, underinsured, or eligible for Medicaid, Medicare, California Children’s Services Program, or county indigent programs. For SJH, we exclude Medicare as part of Community Benefit total and only include it below the line for SB697 reporting purposes.  
\(^{21}\) Accounts for Hospital Fee. The pledge/grant (separate from the quality assurance fee) is reported in Cash and In-kind Contributions for other vulnerable populations.  
\(^{22}\) Unpaid cost of Medicare is calculated using our cost accounting system. In Schedule H, we use the Medicare cost report.
The employees of St. Joseph Health-Redwood Memorial Hospital are the greatest non-financial asset the organization provides for the community. The employees are dedicated to providing the best health care available on the North Coast and to volunteering in their own community to support the area’s citizens. RMH has employees who coach, who sponsor and support activities for all ages, who volunteer on the boards of non-profits, who dedicate time and energy to their schools and to their churches. These employees daily provide a community benefit for their own individual communities throughout Humboldt County.

An example of the RMH employees’ contribution to the community is through the No One Dies Alone program where employees volunteer their time to sit at the bedside of patients who are dying and offer comfort, dignity and a hand to hold. Trained by Hospice of Humboldt, volunteers provide this compassionate service for patients without family present and also offer respite services to family members of patients who need a break. RMH employees and volunteers also maintain a clothing closet, called Shelly’s Closet, where patients discharged from the Emergency Department or Inpatient care can receive clean, gently used clothing if they are in need. A third program offered by RMH and has little financial impact, but demonstrates the employees’ dedication to serving their community is the Vial of Life program. On their own time, employees distribute stickers – to the community - where life-saving prescription information can be recorded and kept in a visible location in homes. This helps first responders identify necessary information about patients quickly and accurately.

Almost 50% of all patients seen at RMH in FY13 are underinsured and lack adequate funds to meet their health care needs. There are donations in place to assist these patients with travel vouchers, gas cards, meals, housing and medications. The needs of the Eel River Valley are constant and RMH is adaptable in how and when to address them.

RMH, in conjunction with SJE, are the primary resources for quality health care in Humboldt County – and the primary partner to non-profit organizations who daily work to meet all the needs for the population we share.

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23 Non-financial summary of accomplishments are referred to in SB 697 as non-quantifiable benefits.