2019 Implementation Strategy Report

Kaiser Foundation Hospital: Santa Rosa

License number: 11000213

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

March 18, 2020

KAISER PERMANENTE®

Kaiser Permanente Northern California Region Community Health

IS Report for KFH-Santa Rosa

Contents

I. General information

Contact Person:	Judy James
Date of written plan:	November 10, 2019
Date written plan was adopted by authorized governing body:	March 18, 2020
Date written plan was required to be adopted:	May 15, 2020
Authorized governing body that adopted the written plan:	Kaiser Foundation Hospitals Board of Directors' Community Health Committee
Was the written plan adopted by the authorized governing body on or before the 15th day of the fifth month after the end of the taxable year the CHNA was completed?	Yes ☒ No ☐
Date facility's prior written plan was adopted by organization's governing body:	March 16, 2017
Name and EIN of hospital organization operating hospital facility:	Kaiser Foundation Hospitals, 94-1105628
Address of hospital organization:	One Kaiser Plaza, Oakland, CA 94612

II. About Kaiser Permanente (KP)

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

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

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

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

III. About Kaiser Permanente Community Health

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

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

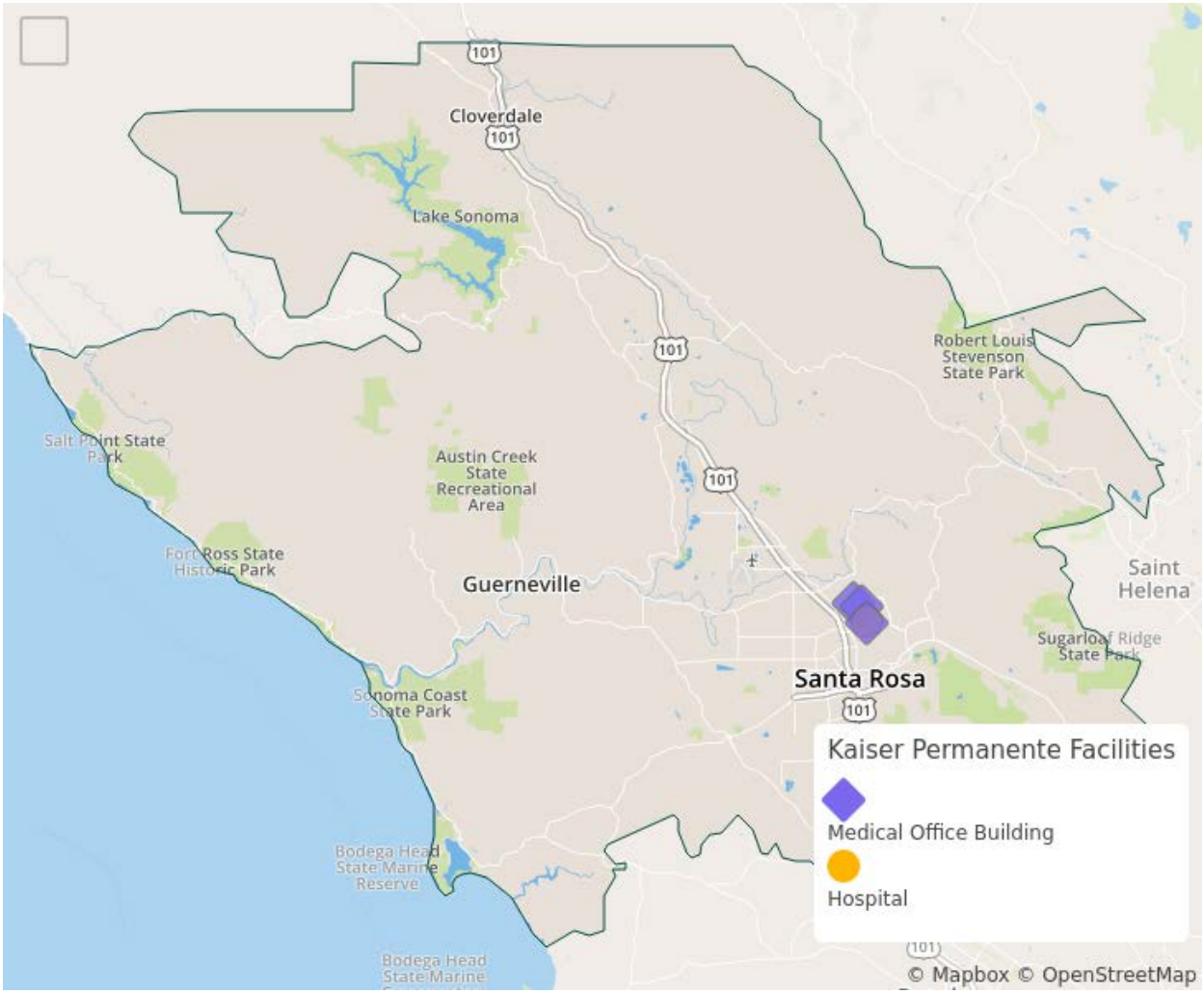
- Ensuring health access by providing individuals served at KP or by our safety net partners with integrated clinical and social services;
- Improving conditions for health and equity by engaging members, communities, and Kaiser Permanente's workforce and assets; and
- Advancing the future of community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

For many years, we've worked side-by-side with other organizations to address serious public health issues such as obesity, access to care, and violence. And we've conducted Community Health Needs Assessments to better understand each community's unique needs and resources. The CHNA process informs our community investments and helps us develop strategies aimed at

making long-term, sustainable change—and it allows us to deepen the strong relationships we have with other organizations that are working to improve community health.

IV. Kaiser Foundation Hospitals – Santa Rosa Service Area

A. Map of facility service area



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

The KFH-Santa Rosa service area includes most of Sonoma County, except for a small southern portion of Sonoma County in KFH-San Rafael's service area that includes the city of Petaluma, Sonoma, Boyes Hot Springs, Agua Caliente. The KFH-Santa Rosa service area also includes a small section of Napa County. Cities in the KFH-Santa Rosa service area include Cloverdale, Cotati, Healdsburg, Rohnert Park, Santa Rosa, Sebastopol, and Windsor. Using the Kaiser Permanente Data Platform, a comparison was done between Sonoma County and this service area. No notable differences in health status exist, so for the purpose of this assessment KFH-Santa Rosa considers the service area to be Sonoma County.

C. Demographic profile of community served

Race/ethnicity		Socioeconomic Data	
Total Population	394,030	Living in poverty (<100% federal poverty level)	11.7%
Asian	4.1%	Children in poverty	13.8%
Black	1.7%	Unemployment	2.8%
Hispanic/Latino	27.2%	Uninsured population	10.4%
Native American/Alaska Native	1.2%	Adults with no high school diploma	13.2%
Pacific Islander/Native Hawaiian	0.3%		
Some other race	11.9%		
Multiple races	5.4%		
White	75.2%		

Source: American Community Survey, 2012-2016

V. Purpose of Implementation Strategy

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

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

List of Community Health Needs Identified in 2019 CHNA Report

The list below summarizes the health needs identified for the KFH – Santa Rosa service area through the 2019 Community Health Needs Assessment process.

1. Housing and Homelessness
2. Education
3. Economic Security
4. Access to Care
5. Mental Health and Substance Use
6. Maternal and Child Health
7. Healthy Eating & Active Living (includes obesity and diabetes)
8. CVD/Stroke and Tobacco Use
9. Violence and Injury Prevention

VI. Who was involved in the Implementation Strategy development

A. Partner organizations

KFH-Santa Rosa collaborated with hospital partners through regular meetings of the Sonoma CHNA committee. Collaborating hospitals included, Sutter Santa Rosa Regional Hospital and Providence - St. Joseph Health's Memorial Hospital. Through the community engagement process described below, local community stakeholders contributed to the development of the Kaiser Permanente Community Health Implementation Strategy (CHIS).

B. Community engagement strategy

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

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

The identification of the implementation strategies included input from a broad range of residents through a community engagement meeting. Individuals with knowledge, information, and expertise relevant to the health needs of the community were consulted. These individuals included representatives from health departments, school districts, local non-profits, and other regional public and private organizations, as well as community leaders, clients of local service providers, and other individuals representing medically underserved, low-income, and sub-populations that face unique barriers to health (e.g., communities of color, individuals living in poverty).

In order to identify diverse perspectives and experiences in the community engagement meeting, the KP Community Benefit Team worked with Harder + Company to review the participant lists from the interviews and focus groups conducted for the KFH-Santa Rosa service area 2019 CHNA health need identification process. The participants for the IS community engagement meeting were selected in consultation with the Sonoma CHNA subcommittee due to their expertise and deep involvement in the community. After this initial draft, the Community Benefit Manager for the KFH-Santa Rosa service area provided additional suggestions for key stakeholders to include to ensure deep resident engagement.

The two-hour community engagement meeting was scheduled at a central location in the service area. One primary goal of the meeting was to elevate the current community efforts underway to address disparate health outcomes and to identify strategies (i.e., pathways) to achieve health equity. The consulting team developed facilitation guides designed to inquire about the following: which community organizations and initiatives were engaging in significant efforts to advance progress in the selected health needs; and which populations or geographic regions within the community would need additional support to reduce disparities in the health needs. Attendees reflected on CHNA data

presented during the meeting and were then asked to provide their expertise related to question prompts.

The participating community stakeholders provided rich information on organizations engaged in deep work in the community to address the prioritized health needs for the implementation strategies. Furthermore, as the community stakeholders reflected on the selected impact outcomes, they provided valuable feedback around which seemed to be most achievable and prioritized them in rank order. They also shared insights on what outcomes were missing, or where some outcomes overlapped. Collectively this information and feedback refined the outcomes and strategies selected for the KFH-Santa Rosa service area. For example, a breakout discussion group on Housing and Homelessness suggested that focusing on prevention would be cost effective. This feedback informed the recommendation to increase connections to supportive housing services for those at risk of homelessness in addition to those who have already lost their homes.

	Data collection method	Title/name	Number	Notes (e.g., input gained or role in IS process)
1	Community Engagement Meeting	Participants included representatives from non-profit agencies, community organizations, community clinics, health coalitions, foundations, county government, community residents	34	Representatives provided insights to refine strategies across the four needs: access to care, educational attainment, housing and homelessness and mental health and wellness

C. Consultant(s) used

Harder+Company Community Research (Harder+Company) is a social research and planning firm with offices in San Francisco, Sacramento, Los Angeles, and San Diego. Harder+Company works with public sector, nonprofit, and philanthropic clients nationwide to reveal new insights about the nature and impact of their work. Through high-quality, culturally-responsive evaluation, planning, and consulting services, Harder+Company helps organizations translate data into meaningful action. Since 1986, Harder+Company has worked with health and human service agencies throughout California and the country to plan, evaluate, and improve services for vulnerable populations. The firm's staff offer deep experience assisting hospitals, health departments, and other health agencies on a variety of efforts including conducting needs assessments, developing and operationalizing strategic plans, engaging and gathering meaningful input from community members, and using data for program development and implementation. Harder+Company offers considerable expertise in broad community participation, which is essential to both health care reform and the CHNA process in particular. Harder+Company is the consultant on several CHNAs throughout the state, including other Kaiser Foundation Hospital service areas in Roseville, Sacramento, San Bernardino, San Rafael, South Sacramento, Vacaville, and Vallejo.

VII. Health needs that KFH-Santa Rosa plans to address

A. Process and criteria used

The ability to make meaningful change in the health of KFH-Santa Rosa service area residents is dependent on understanding the community needs, identifying opportunities to partner with and leverage existing resources and initiatives, and consider the feasibility of making an impact. To

achieve this level of understanding, KFH-Santa Rosa hosted a meeting with the service area Community Health Improvement Committee (CHIC) to present quantitative and qualitative data from the CHNA; information related to existing national and regional Kaiser Permanente initiatives, as well as local community efforts related to the 2019 CHNA health needs; and existing Community Benefit projects. CHIC members engaged in a dialogue about the health needs and information presented and ranked the health needs based on the following criteria:

Criteria	Definition
1. CHNA prioritization	This criterion represents the community's prioritization of the CHNA health needs. Based on the community prioritization event, it takes into account the criteria of severity, disparities, and ability to impact change based on community assets.
2. Health disparities/equity	The health need disproportionately impacts the health status of one or more vulnerable population groups.
3. KP Alignment	KP can make a meaningful contribution to addressing the need because of regional community benefit initiatives and its relevant expertise to implement strategies to address those needs.
4. Deploying Non-CB organizational assets	Opportunity to have non-CB funding deployed to address health needs, as well as opportunity to draw down other assets of the organization (i.e., how we hire, how we purchase, how we build, and how we advocate).
5. Feasibility	Kaiser Permanente has the ability to have an impact given the local CB budget available.

Each meeting participant ranked the health needs on a scale of 1-3 for each criterion presented above. A score of 1 = the need does not meet the criterion, a score of 2 = the need somewhat meets the criterion, and a score of 3 = the need meets the criterion well.

For the second phase of health needs selection, participants placed colored dots representing their first-through-fourth choices for health needs that should be addressed through implementation work.

For the third phase of health needs selection, the final results of this voting were discussed by participating members. Considering the scores of dot-voting and discussion as input, KFH Santa Rosa selected the health needs with the highest scores to be addressed by the 2020-2022 Implementation Strategies.

B. Health needs that KFH-Santa Rosa plans to address

Access to Care and Coverage: Access to Care and Coverage was prioritized for the CHIS primarily because of alignment with regional community benefit initiatives Access to quality health care is important for maintaining health, preventing disease, and reducing avoidable disability and premature death. In terms of preventative investments, improving healthcare access is one of the

key strategies to achieving health equity. This health need has been prioritized for the CHIS to address the following needs: expanded insurance coverage; subsidized care to reduce financial barriers; a diverse workforce; improved access to primary care providers; reduced wait for services; access to oral health; and social nonmedical integration with primary care. In addition, investment in this health need by the Santa Rosa hospital service area aligns with other regional care initiatives, deepening the impact of the both.

Educational Attainment: Educational Attainment was prioritized for the CHIS primarily due to the high degree of inequality that affects youth from disadvantaged racial and ethnic backgrounds throughout their schooling. Education directly impacts a person's ability to live a long and healthy life. Education has consequences for health because it shapes professional advancement and the pursuit of a stable life. Additionally, education provides the knowledge and cultural capital necessary for navigating complicated health systems and sorting through available resources to seek help. As part of the prioritization process, the definition of this health need expanded to include other important health needs in the service area. For example, economic security becomes a part of this health need with a specific focus on reducing income inequality related to education attainment. Healthy Eating and Active Living is included with two primary goals: 1) encouraging and supporting active lifestyle initiatives in schools, including physical activity programs and other enrichment activities that also increase school engagement; and 2) supporting healthy food programs that ensure students are nourished and ready to learn. Finally, Violence and Injury prevention are included, specifically focusing on sexual health, and youth violence prevention.

Housing and Homelessness: Housing and Homelessness was prioritized for the CHIS primarily because it was the top ranked health need during the CHNA community prioritization process. Access to safe, secure, and affordable housing is an important social determinant of health. Families with fewer financial resources are more likely to experience substandard housing conditions and the associated risks. As part of the prioritization process, the definition of this health need expanded to include the Economic Security health need from the CHNA.

Mental Health and Well Being: Mental Health and Wellness was prioritized for the CHIS primarily due to the extreme rise in mental health needs following the 2017 Sonoma Complex Fires and the severity of substance abuse issues. Mental health and management of substance use are foundations for healthy living and encompass indicators such as rates of mental illness, access to social and emotional support, and access to providers for services related to preventive care and treatment for mental health and substance abuse. This health need has been prioritized for the CHIS due to the rise in tobacco use, especially recent increases of nicotine use among school aged youth with the rise of vaping.

VIII. KFH-Santa Rosa's Implementation Strategies

A. About Kaiser Permanente's Implementation Strategies

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

- Are available broadly to the public and serve low-income individuals

- Are informed by evidence
- Reduce geographic, financial, or cultural barriers to accessing health services, and if they ceased would result in access problems
- Address federal, state, or local public health priorities
- Leverage or enhance public health department activities
- Advance increased general knowledge through education or research that benefits the public
- Otherwise would *not* become the responsibility of government or another tax-exempt organization

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

KFH-Santa Rosa will draw on a broad array of strategies and organizational resources to improve the health of vulnerable populations within our communities, such as grant making, leveraged assets, collaborations and partnerships, as well as several internal KFH programs. The goals, outcomes, strategies, and examples of resources planned are described below for each selected health need.

B. 2019 Implementation Strategies by selected health need

Health need #1: Access to care and coverage

Long term goal	All community members have access to high quality, culturally and linguistically appropriate health care services in coordinated delivery systems
Intermediate goal(s)	• Increase access to comprehensive health care coverage for low income individuals • Increase access to subsidized care for those facing financial barriers to health care • Increase access to social non-medical services for low income and vulnerable populations • Increase access to a diverse, culturally competent health care workforce • Improve the capacity of health care systems to provide quality health care services
Strategies	• Support free clinics offering healthcare services for uninsured or undocumented • Increase awareness of medical financial assistance options for those above 250% • Support programs that expand use of patient navigators, health coaches, promotores de salud or community application assisters • Expand capacity of CBO's to participate in electronic social service locators (Thrive Local) • Support pathway programs to increase the diversity of the healthcare workforce by providing mentorship, academic enrichment, leadership development, and career exposure to populations underrepresented in healthcare (low income, minority students) • Support cultural competency training of future and current healthcare workforce to meet the needs of diverse patient populations

	• Support programs that enhance patient-centered medical home models and team-based care/ healthcare extenders • Support programs that mobilize residents to advocate for policies that improve access to healthcare • Support outreach and enrollment campaigns to increase CalFresh enrollment for eligible community members (Food For Life) (all areas) • Support screening for social non-medical service needs and connect low-income individuals and families to community and government resources (Thrive Local) • Support population health management approaches that improve health outcomes for safety net patients with diabetes and hypertension (PHASE) • Support community clinic consortia to develop programs and advocate for policies that improve access to quality health care for low income individuals • Participate in Medi-Cal Managed care • Provide Charitable Health Coverage • Provide Medical Financial Assistance • Provide workforce training programs to train current and future health care providers, including physicians, mental health practitioners, physical therapy, pharmacy, nurses, and allied health professionals, with the skills and linguistic and cultural competence to meet the health care needs of diverse communities (all areas) • Implement health care workforce pipeline programs to introduce diverse, underrepresented school age youth and college students to health careers (KP LAUNCH) • School for Allied Health expanding access to training and certificate programs for underrepresented individuals • Partner with Quality and Operations, outpatient geriatric care; home-based palliative care healthcare extenders for the coordination of non-medical support (food, transportation, fall prevention, etc.) • Provide input and expertise to academic and community partners to inform curricula, training and health career pipeline programs • Provide access to KP expertise related to population health management via trainings and consultation
Expected outcomes	• Reduced the percentage of individuals who are uninsured especially among low-income populations • Improved the capacity of free clinics to handle a greater volume of patients who are experiencing financial barriers to healthcare • Increased CalFresh enrollment, referrals to social health services, and receipt of non-medical needs such as housing vouchers and transportation • More trainings and pathways to healthcare careers for individuals identifying as racial or ethnic minorities • Better analyzed and implemented algorithms of healthcare workflows resulting in increases in the portion percentage of individuals with good diabetes management and hypertension control

Health need #2: Educational Attainment

Long term goal	Youth thrive in school and are prepared for college, career, and community success
Intermediate goal(s)	• Improve school readiness for children entering kindergarten • Build resilience and address trauma among students and staff in schools • Increase academic success during elementary school • Increase high school graduation for underrepresented youth • Support exposure to career paths for underserved and underrepresented youth • Improve job skills for people with barriers to employment
Strategies	• Support programs that improves the quality of early childhood workforce, such as through staff development and training • Support community education on the benefits for enrolling in preschool • Expand subsidized preschool slots for low and moderate income families • Support school-based climate improvement strategies focused on equity, empathy and engagement • Support on campus resources such as mental health counselors and peer support • Support programs that improve 3rd grade reading • Support programs that increase student engagement during the school day • Support programs that enrich mathematic instruction • Support enrichment opportunities at low income school sites to increase student engagement • Support tutoring and mentoring programming for academic success • Support career technical education and healthcare career pathways programs • Support skill development and academic resources for Transition Aged Youth with limited resources • Support career pathways for system involved youth • RISE Initiative, fostering resilience in school environments • Implement health care workforce pipeline programs to introduce diverse, underrepresented school age youth and college students to health careers (KP LAUNCH) • Hospital Facilities and Human Resources to partner with Unions and other workforce investment partners to develop internships and career pathways for skilled labor
Expected outcomes	• Increased preschool staff training and preschool enrollment for racial/ethnic minority and disadvantaged groups • Improved youth truth survey results reflecting a positive school climate and increased catalogue of implemented school climate enhancements reflecting trauma reduction efforts • Increased academic success as indicated by 3rd grade reading proficiency and 5th grade math proficiency test scores • Increased secondary school graduation rates for racial and ethnic minorities

	• Increased participation in career pathway programs and increased completion rates of skill development trainings by underserved and underrepresented youth

Health need #3: Housing and Homelessness

Long term goal	All community members have access to quality, affordable, and stable housing
Intermediate goal(s)	• Prevent individuals and families from falling into homelessness • Increase connections to supportive services for individuals experiencing homelessness or at risk of homelessness • Increase and preserve the stock of affordable housing, including Permanent Supportive Housing • Increase and enhance transitional housing and shelter availability
Strategies	• Funding for permanent and supportive housing services • Support unmet needs funds for emergent needs such as bridge funding for rent, car repair or PG&E. • Support community outreach to engage high need populations in supportive services • Support housing equity policy planning • Support predevelopment of affordable housing and housing preservation • Funding to strengthen local homeless system of care through the Housing and Health Initiative • Thriving Communities Fund to support affordable housing preservation • Funding to strengthen local homeless system of care through the Housing and Health Initiative • Partnership with KP Division of Research to develop a predictive model for housing instability
Expected outcomes	• Reduced point in time homeless count and the number of people insufficiently housed to prevent at-risk people from falling into homelessness • Increased social service and medical service utilization numbers for people experiencing homelessness • Increased number of affordable housing units, including permanent supportive housing • Increased availability of shelters and other temporary accommodations for individuals in need of transitional housing

Health need #4: Mental Health and Well Being

Long term goal	All community members experience social emotional health and wellbeing and have access to high quality behavioral health care services when needed

Intermediate goal(s)	• Increase capacity of organizations and institutions to provide trauma-informed services and programs • Enhance community supports to mitigate impact of ACEs • Increased access to behavioral health care services for low-income and vulnerable populations • Prevent and reduce misuse of drugs and alcohol
Strategies	• Expand place-based opportunities for trauma-informed services and programs • Support training of workforce to ensure trauma informed practices • Support community-based organizations addressing adverse childhood experiences • Expand knowledge of community members about the impacts of ACEs • Expand counseling services within community-based organizations and/or school settings • Support behavioral health programming for system-involved youth and previously incarcerated adults • Support peer to peer education and prevention services at schools and community settings • Support programming that reduces stigma and increases access to drug and alcohol treatment • Implement the Public Good Projects' Action Minded campaign, a digital community health intervention using education, social engagement and multi-media tools to engage the general public, issue-advocates and community partners, and KP employees as partners in reducing stigma towards mental health conditions • Support the capacity of clinics, schools or other community-based organizations to provide trauma-informed care to youth • Build student and staff resilience to address trauma and adverse childhood experiences • Provide KP's Education Theater program, Resilience Squad • Participate in Medi-Cal Managed care • Provide Charitable Health Coverage • Provide workforce training programs to train current and future mental health practitioners with the skills and linguistic and cultural competence to meet the health care needs of diverse communities • Care Experience Team, Chaplains and SW Dept to Partner with Center for Mind-body Medicine to increase the number of KP staff who are trained to foster community resilience (focus on non KP members)
Expected outcomes	• Increased number of organizations implementing trauma-informed care training and the number of community members engaged in the resilience/self-healing community model • Increased number of organizations offering supportive services for ACEs and increased access to community-based ACEs education • Reduced caseloads and wait times for counseling services especially for low-income and vulnerable populations

- Reductions in the percentage of 11th graders reporting alcohol or substance abuse and increased awareness of the adverse effects of substance use via media campaigns

C. Our commitment to Community Health

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

- **Reduce our negative environmental impacts and contribute to health at every opportunity.** We have optimized the ways in which we manage our buildings; purchase food, medical supplies and equipment; serve our members; consume energy; and process waste. The following strategies illustrate several of our practices that enable us to operate effectively while creating a healthier environment for everyone. Our Environmentally Preferable Purchasing Standard prioritizes the procurement of products with fewer chemicals of concern and less resource intensity, thus encouraging suppliers to increase the availability of healthier products. We are building renewable energy programs into our operations, with plans to be carbon neutral in 2020. We recognize that mitigating the impacts of climate change and pollution is a collective effort, and we are therefore proud to work with like-minded organizations and individuals, including the United Nations, Health Care Without Harm, government entities, as well as other influencers that advocate for environmental stewardship in the healthcare industry and beyond.
- **Deploy research expertise to conduct, publish, and disseminate epidemiological and health services research.** Conducting high-quality health research and disseminating its findings increases awareness of the changing health needs of diverse communities, addresses health disparities, and improves effective health care delivery and health outcomes in diverse populations disproportionately impacted by health disparities. Research projects encompass epidemiologic and health services studies as well as clinical trials and program evaluations. They cover a wide range of topics including cardiovascular disease, cancer, diabetes, substance abuse, mental health, maternal and child health, women's health, health care delivery, health care disparities, pharmaco-epidemiology, and studies of the impact of changing health care policy and practice.
- **Implement healthy food policies to address obesity/overweight**, such as purchasing sustainable, locally produced fruits and vegetables; supporting local restaurants and caterers that meet KP’s Healthy Picks and to make more available healthier food options in our communities; and supporting vendors that hire under/unemployed residents (with living wages and benefits) in the food production/distribution process. We also partner with school districts

and city governments to support them in adopting and implementing healthy food procurement policies.

- **Contribute toward workforce development, supplier diversity, and affordable housing to address economic security.** We support supplier diversity by implementing policies and standards to procure supplies and services from a diverse set of providers; working with vendors to support sub-contracting with diverse suppliers; partnering with community-based workforce development programs to support a pipeline for diverse suppliers; and building the capacity of local small businesses through training on business fundamentals. We also seek to reduce homelessness and increase the supply of affordable housing by strengthening systems to end homelessness and shaping policies to preserve and stimulate the supply of affordable housing.

IX. Evaluation plans

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

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

X. Health needs KFH-Santa Rosa does not intend to address

- CVD, Stroke, and Tobacco Use: This health need was not selected due to its low rank in the CHNA community prioritization. Additionally, the strategies identified within Access to Care and Mental Health and Wellness will address tobacco-related prevention and CVD which were main areas of concern under discussion during the health need selection meeting.

- Economic Security: This health need was not selected because it could be addressed through acting on upstream economic and social issues such as education. The strategies identified within Housing and Homelessness and Educational Attainment will largely address the needs related to Economic Security. When discussing the decision to prioritize Housing and Homelessness or Economic Security given their overlapping strategies, the specific need to solve for the housing crisis in Sonoma County was recognized, prioritizing Housing and Homelessness. Educational Attainment was identified as an upstream strategy for improving economic security.

- Healthy Eating and Active Living (HEAL): This health need was not selected due to its low rank in the CHNA community prioritization. Significant attention and resources in the service area are dedicated to this health need, including regional initiatives through Kaiser

Permanente. Additionally, Access to Care and Educational Attainment both contain strategies that address the high priority needs related to HEAL.

- Maternal and Child Health: This health need was not selected because it was viewed as a priority population that could be addressed through the other selected health needs. The needs of this priority population will be addressed within the needs that are identified.
- Violence and Injury Prevention: This health need was not selected due to its low rank in the CHNA community prioritization. Significant attention and resources in the service area are dedicated to this health need. Additionally, the strategies identified in Educational Attainment will address several of the highest needs related to Violence and Injury Prevention, including sexual health, bullying prevention and domestic violence, as a strategy to promote healthy relationships among youth.