



SAN ANTONIO REGIONAL HOSPITAL

Community Benefit Program Highlights, Inventory, and Economic Valuation 2019



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Introduction



About San Antonio Regional Hospital

San Antonio Regional Hospital was founded by Dr. William Howard Craig in 1907 to meet the healthcare needs of local residents. As the community surrounding the hospital grew, it became apparent that larger, more modern facilities were needed. Community leaders rallied to raise the needed capital and the hospital moved to its current location on San Bernardino Road in 1924. Through community support, the hospital grew – from its modest beginning with 18 beds, 5 physicians, and limited staff — to a 363-bed regional medical facility with over 2,400 employees and a medical staff of nearly 600 physicians.

On January 6, 2017 the hospital's main campus in Upland opened the largest expansion in its history. The 179,000 square foot addition, which includes a new 52-bed emergency department and 92-bed patient tower, incorporated the latest healthcare architectural design and advanced technological features with the goal of meeting the needs of the growing population in the west end of California's Inland Empire.

In addition to the main campus, the hospital has satellite locations in Rancho Cucamonga, Fontana, and Eastvale. These facilities provide outpatient care in a close, convenient setting for the region's growing population. Additionally, San Antonio opened a new 60,000 square foot two-story ambulatory care facility directly across the street from the hospital which includes City of Hope's comprehensive cancer center. The hospital's Women's Breast and Imaging Center, as well as pre-operative and pre-procedure services are located on the second floor. San Antonio also provides services and programs to complement City of Hope's cancer center.

Leadership

San Antonio Regional Hospital is governed by a 15-member Board of Trustees. The hospital's Medical Staff President-Elect, President, and Immediate Past President are members of the board by virtue of their offices. At least two additional physicians are elected from the medical staff, and the remaining members are elected from the community at-large. The Board of Trustees, with physician leaders comprising a significant portion of its membership, sets the direction for the hospital's Community Benefits Program.

The Executive Management Group directs the hospital's strategic planning process and allocates resources for community benefit activities. The Executive Management Group includes the Chief Executive Officer, Chief Financial Officer, Chief Operating Officer, Chief

Nursing Officer, Chief Strategy Officer, Chief Human Resource Officer, Chief Information Officer, and President of the Hospital Foundation.

Board of Trustees and Officers



HOWARD BORENSTEIN
CHAIR OF THE BOARD

Howard Borenstein has served on the Board of Trustees since March 2014, serving as secretary beginning in 2017 and was elected Chair in 2018. Mr. Borenstein is an Attorney with The Law Office of Howard S. Borenstein. Mr. Borenstein is a Certified Specialist in Tax Law and a California Certified Public Accountant serving the surrounding communities for 27 years. He has served on numerous boards and community organizations.



AL ARGUELLO
TRUSTEE

Al Arguello has served on the Board of Trustees since January 2019. Mr. Arguello is a 50-year veteran with Bank of America and currently serves as Sr. Vice President and Inland Empire Market President for San Bernardino and Riverside counties. Mr. Arguello is currently serving and has served on the boards of numerous nonprofit organizations and he is presently on the Board of the Greater Riverside Chamber of Commerce, Rancho Cucamonga Community and Arts Foundation, Inland Empire Economic Partnership, Monday Morning Group of Riverside, on the Dean's Advisory Board of the UCR School of Business Administration, member of the Steering Committee of the Micro Enterprise Collaborative of Inland Southern California and past board member of the San Antonio Hospital Foundation.



SOHAN BASSI, M.D.
SECRETARY

Sohan Bassi, M.D. has been a Trustee since January 2016 and was elected Secretary in 2019. He was President of the Medical Staff in 2004 and served as an ex officio Board member from 2003 through 2005. Dr. Bassi is the President/Partner for Foothills Infectious Disease Medical Group, Inc. He joined the San Antonio Regional Hospital Medical Staff in 1992 and is the Medical Advisor of Infectious Diseases for San Antonio. He is board certified in Infectious Diseases and Internal Medicine and is a member of several Infectious Disease organizations.





VINCENT J. CAROLLO, M.D.
VICE CHAIR

Dr. Carollo has served as a member of the Board of Trustees since January 2013 and was elected Vice Chair in 2018. He practiced Internal Medicine at San Antonio Regional Hospital for 30 years. During his tenure, he served as an ex officio member of the Board of Trustees from 1982 through 1984 including President of the Medical Staff in 1983.



JOHN T. CHAPMAN
PRESIDENT AND CHIEF EXECUTIVE OFFICER, INTERIM

John T. Chapman joined the hospital as Chief Operating Officer in October 2018 and accepted the role as Interim President and Chief Executive Officer in September 2019. He is a microbiologist by training, and previously served as Chief Operations / Administrative Officer at Highland Hospital in Oakland, CA and also led the clinical and support services for the Alameda Health System.



VICTOR CHING, M.D.
TREASURER

Dr. Ching has served as a member of the Board of Trustees since September 2017. He has been a member of San Antonio Urology Medical Group since 1983. During his tenure, he served as an ex officio member of the Board of Trustees from 2008 through 2010 including President of the Medical Staff in 2009. He is a member of numerous organizations including the American Urological Association and the Inland Empire Foundation for Medical Care.





ED DIGIAMARINO, M.D.
PRESIDENT OF THE MEDICAL STAFF

Ed DiGiamarino, M.D. is an ex officio member of the Board of Trustees, serving a three year term that expires in December 2020. Dr. DiGiamarino was appointed to the Medical Staff of San Antonio in 1987 and during his tenure served as an ex officio member of the Board of Trustees from 2002 through 2004 including President of the Medical Staff. Dr. DiGiamarino is Board Certified in Anesthesiology.



WES FIFIELD
TRUSTEE

Wes Fifield has served on the Board of Trustees since July 2017. He is the Owner of Panorama Development and serves on the board of various community organizations including the Upland School Board, the Highlander Educational Foundation, and the Scheu Family YMCA.



DEBORAH FREUND, PH.D.
TRUSTEE

Deborah Freund has served on the Board of Trustees since January 2016. She is the Paul O'Neill-Alcoa Chair at the Rand Corporation and past President of the Claremont Graduate University. Dr. Freund is a current member of numerous boards, professional and civic organizations including Cedars-Sinai Health System and Children's Hospital of Los Angeles. She has written more than 100 articles and chapters, two books, and is an internationally-recognized health economist.





SARA KHAN, M.D.
PRESEDENT ELECT

Sara Khan, M.D., is an ex officio member of the Board of Trustees, serving a three year term that expires in December 2021. Dr. Khan was appointed to the Medical Staff of San Antonio in 2008. Dr. Khan is Board Certified in Internal Medicine and is a Medical Director at Premier Hospitalist Group of California.



SUSAN LEONIS-JENSEN
TRUSTEE

Susan Leonis-Jensen has served on the Board of Trustees since April, 2017. She is a current Board member of the Leonis Family Foundation, past Board member of the Hospital Foundation and the National Charity League, Inc.



ANDREA DUTTON
TREASURER

Andrea Dutton has served on the Board of Trustees since January 2011 and was elected Treasurer in 2018. She is a Professor and Program Director for the Chaffey College Radiology Technology program. She is a member of numerous organizations including Phi Kappa Phi, The Community Foundation, The Frontier Project, California Teachers Association, and the American Society of Radiologic Technologists.





MICHAEL CHAI, M.D.
PAST PRESIDENT OF THE MEDICAL STAFF

Michael Chai, M.D., is an ex officio member of the Board of Trustees, serving a three year term that expires in December 2019. Dr. Chai was appointed to the Medical Staff of San Antonio in 1996 and is Board Certified in Internal Medicine.

Mission Statement and Commitment to the Community

Our Commitment

The leadership at San Antonio has an unwavering commitment to the hospital's mission, vision, values, and strategic plan, which focus on improving the region's overall health by providing quality patient care in a compassionate and caring environment.

Mission

Our mission is to improve the health and well-being of the people we serve.

Vision

Our vision is to be a leader in creating healthy futures through excellence and compassion.

Values

<p>Patient Centered</p> <p>We engage patients as our partners in care.</p>	<p>We will:</p> <ul style="list-style-type: none"> • Engage patients/families to understand and exceed their expectations • Actively listen to patients and families • Embrace patients and families as part of the care team • Respect patient and family privacy, dignity, and beliefs • Genuinely care for patients in the way we want to be treated
<p>Safety</p> <p>We make safety our highest priority for patients, visitors, and our care team.</p>	<p>We will:</p> <ul style="list-style-type: none"> • Identify, report, and escalate safety concerns • Personally practice safety in our daily work • Safeguard others • Correct safety hazards • Provide assistance to patients, visitors, and team members



<p style="text-align: center;">Compassion</p> <p style="text-align: center;">We treat everyone with dignity and respect.</p>	<p style="text-align: center;">We will:</p> <ul style="list-style-type: none"> • Energetically engage in actions that enhance patient well-being • Provide comfort and seek to eliminate anxieties and fear • Offer encouragement to patients, families, and the care team • Seek to understand expectations and perceptions • Advocate for our patients and care team
<p style="text-align: center;">Respect</p> <p style="text-align: center;">We value every individual through our words and actions.</p>	<p style="text-align: center;">We will:</p> <ul style="list-style-type: none"> • Seek to better understand all people regardless of their background • Communicate appropriately with others • Talk with and not about others • Listen and not judge, carefully select our words, and agreeably disagree • Acknowledge and consider the variety of perspectives and opinions
<p style="text-align: center;">Integrity</p> <p style="text-align: center;">We do the right thing – ethically, legally, and morally.</p>	<p style="text-align: center;">We will:</p> <ul style="list-style-type: none"> • Always be honest in our communication • Follow through on what we say • Report any integrity concerns • Question actions that may be inconsistent with our values • Take ownership, correct actions, and not blame others
<p style="text-align: center;">Excellence</p> <p style="text-align: center;">We embrace the principles of a high reliability organization.</p>	<p style="text-align: center;">We will:</p> <ul style="list-style-type: none"> • Actively pursue high reliability in everything we do • Proactively identify improvement opportunities • Embrace behaviors that reduce risk • Collaborate in activities to improve organizational performance • Contribute to building/maintaining sustainable processes



San Antonio Regional Hospital's Community Benefits

Rancho San Antonio
Medical Plaza



Eastvale San Antonio
Medical Plaza



Sierra San Antonio
Medical Plaza



1100 Building
San Antonio Regional
Hospital



San Antonio Regional

Caring for Our Community

Community benefits are more than just numbers. They represent people — children, parents, grandparents, and those who may be both disadvantaged and disenfranchised. This report highlights how San Antonio Regional Hospital goes above and beyond the delivery of essential patient care services to promote healthier lifestyles, early detection of disease, and enhanced access to basic healthcare services.

As a regional healthcare provider, San Antonio is committed to maintaining the highest quality of care for those we serve. As a nonprofit hospital, all of our resources are devoted to providing healthcare services. We strive to provide our community with the best of care by allocating a percentage of hospital operations to be used in purchasing new or upgraded equipment, expanding service, and providing care for the vulnerable population.

While the Inland Empire is a maturing economic market, many individuals and families are at significant risk during a medical crisis. Often this is due to an inability to access health insurance or the result of inadequate insurance coverage. The hospital's charity care policy provides relief to these families who would otherwise face medical bankruptcy. During 2019, \$2,272,471 in charity care was provided for patients entering the hospital's emergency department who were either treated and released or required an inpatient stay. The hospital absorbed \$31,695,889 in unreimbursed costs incurred in providing care and treatment for Medi-Cal patients, while other uncompensated care (bad debts) totaled \$4,971,653 in actual costs incurred by the hospital to treat these patients. In addition to direct medical care, San Antonio Regional Hospital reaches out to its community in a variety of ways that go well beyond the traditional care provided by an acute care hospital. An inventory of these programs and activities is provided later in this report.



In many communities within the hospital's service area, needs far exceed accessible resources. San Antonio understands the power of collaboration and seeks alliances with other health and social service providers to develop community-based programs with defined goals and measurable outcomes. These partnerships help to leverage the community's resources to achieve the maximum benefit for its residents.

Cancer Center

A grand opening event on October 24, 2019 celebrated the new state-of-the-art cancer center and outpatient care center on San Antonio Regional Hospital's campus in Upland.

City of Hope's 25,000-square-foot cancer center offers medical oncology and infusion, radiation oncology and general oncology and colorectal cancers. In total, the facility houses nine cancer specialists, 25 exam rooms, two procedure rooms and 23 infusion chairs — including two infusion chairs in private rooms. Importantly, it also offers phase 2 and phase 3 clinical trials.

A full complement of services is offered on the second floor to provide a one-stop shop for patients who need diagnostic testing and preoperative services. The broad array of outpatient services includes preoperative evaluation, laboratory, and electrocardiogram (EKG) and imaging modalities such as fluoroscopy, ultrasound, PET CT scanning and stereotactic biopsy. A wig salon and boutique with cancer-related support items are available, along with a conference room for cancer education and support groups.

The hospital's well-regarded Women's Breast & Imaging Center is also located in the new outpatient care center. The San Antonio Regional Hospital Cancer Program is accredited by the American College of Surgeons Commission on Cancer. The hospital has often received commendations from the commission for its outstanding programs and services. The collaboration with City of Hope is an important next step in advancing services and programs for cancer patients throughout the region.

Community Profile

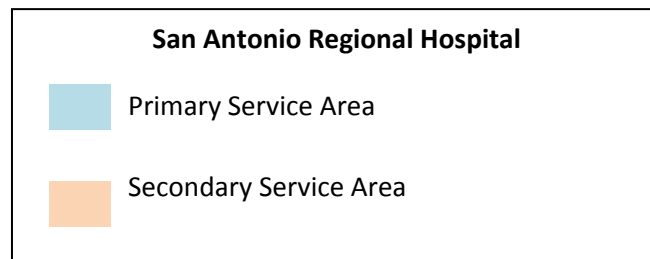
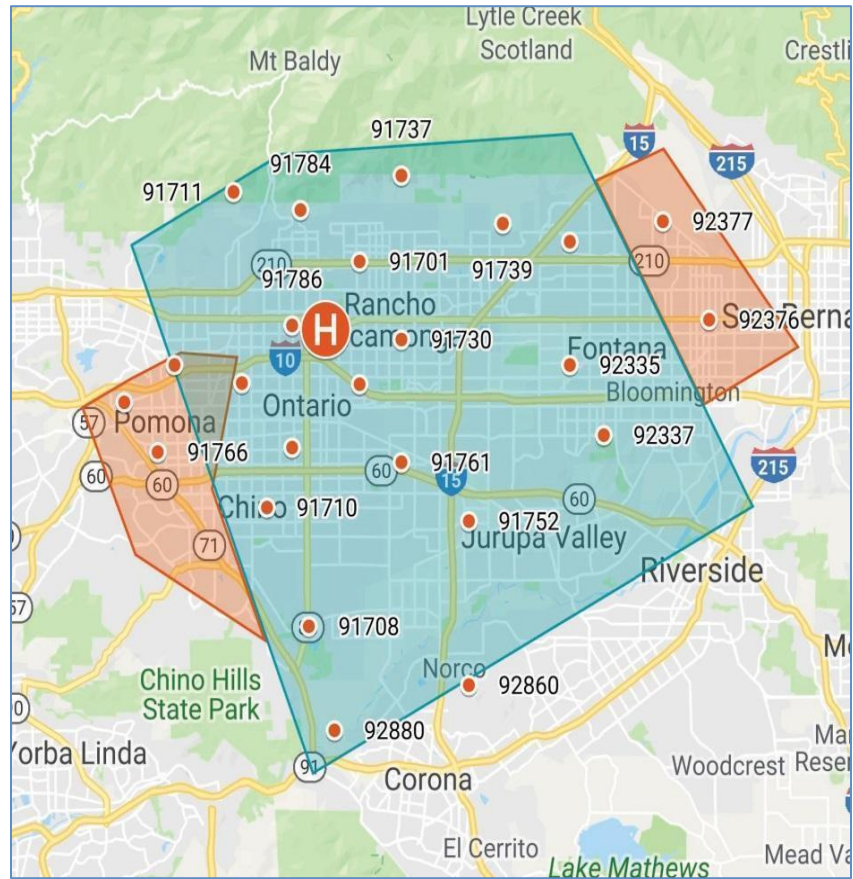
A community is seen as having both physical and geographic components, as well as the socioeconomic and psychosocial factors that define a sense of community. Individuals can thus be part of multiple communities - geographic, virtual, and social. The current focus on community-based participatory research in public health has prompted an evaluation of what constitutes a community. In this report, we defined a community as the geographic area served by San Antonio Regional Hospital and the populations it serves.

San Antonio Regional Hospital resides in the City of Upland, located in the "West End" of San Bernardino County. However, like many hospitals, San Antonio's service area is defined as the geographic area from which it receives the majority of its hospital admissions. The total service area is divided into "primary" and "secondary" areas, with the primary service area accounting for approximately 80% of the hospital's admissions, and represents the majority of San Antonio's planning efforts. As illustrated on the map below, San Antonio's primary service area, denoted in green, comprises the cities of Chino, Claremont, Eastvale, Fontana, Montclair, Ontario, Rancho Cucamonga, and Upland. San Antonio's secondary service area, shaded in purple, extends to Pomona on the west, Chino Hills to the southwest, Norco on the southeast, and Rialto at the eastern edge of the service area.



San Antonio Regional Hospital Service Area Map

Figure 1



Service Area Key Characteristics

The following pages illustrate key characteristics of the hospital's primary service area (PSA) as a whole, as well as each city within the PSA. While many areas across the state and nation are experiencing slow to moderate growth, the hospital's PSA will generate a robust 2% growth rate in 2019, although growth rates vary among the cities. Similarly, there is significant variation in the social determinants of health; for example, the median



household income in Montclair is \$57,134 compared to \$103,392 in Eastvale, and Claremont's educational attainment is substantially higher than other cities. Social determinants of health play a key role in the hospital's community benefit planning efforts.

The following infographics were completed using ESRI'S (Environmental Systems Research Institute) 2019 Community Analyst data.

San Antonio Regional Community Benefit Service Area

Table 1

Geographic Area	Zip Code
Primary Service Area	
Chino	91708, 91710
Claremont	91711
Eastvale	91752, 92880
Fontana	92335, 92336, 92337
Montclair	91763
Ontario	91758, 91761, 91762, 91764
Rancho Cucamonga	91701, 91730, 91737
Upland	91784, 91785, 91786
Secondary Service Area	
Chino Hills	91709
Norco	92860
Pomona	91766, 91767, 91768
Rialto	92376, 92377



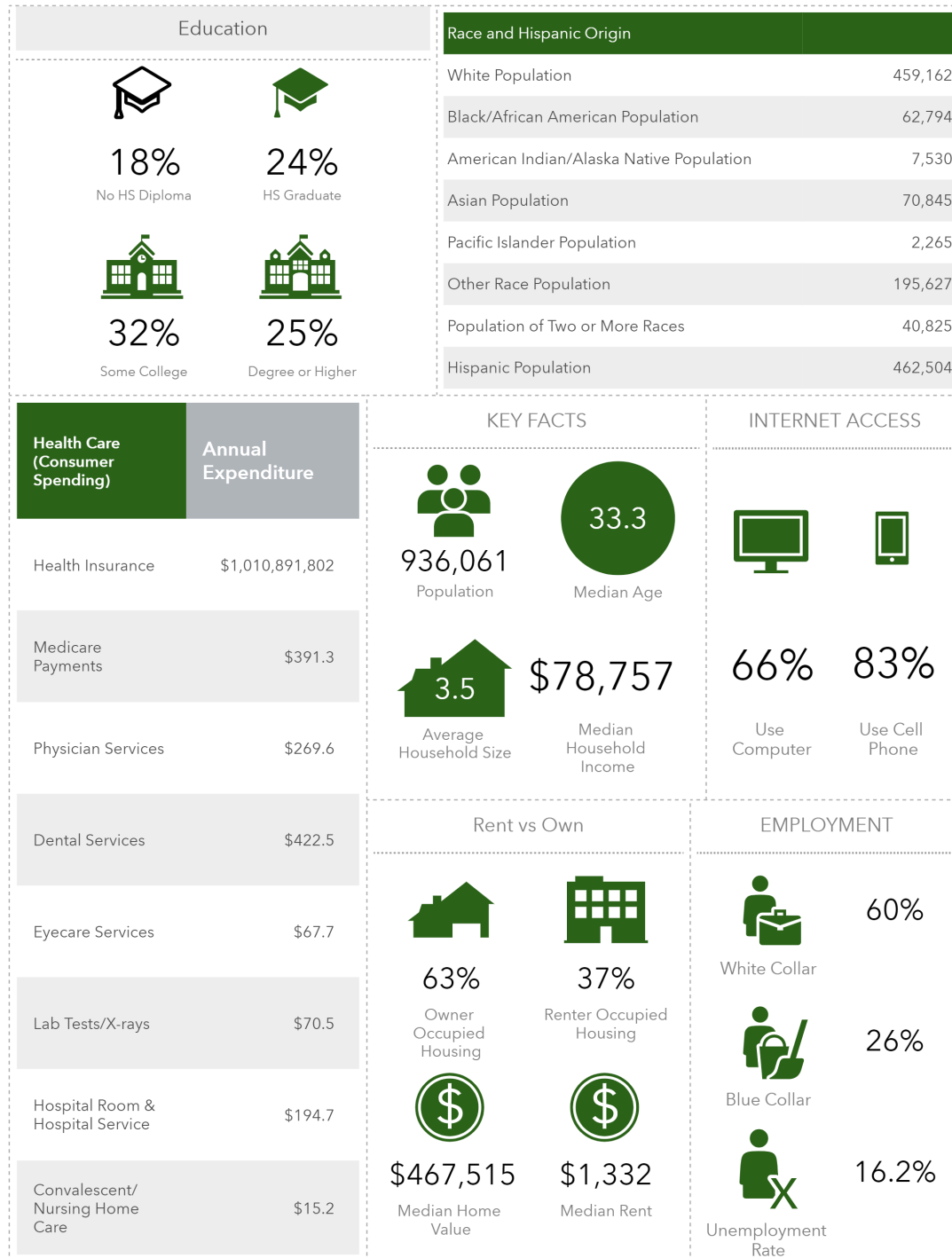
San Antonio Regional Hospital Primary Service Area

Figure 2

CB 2019-Primary Service Area

17 ZIP Codes
91701 (Rancho Cucamonga) et al.
Geography: ZIP Code

Prepared by Esri



Primary Service Area Statistics

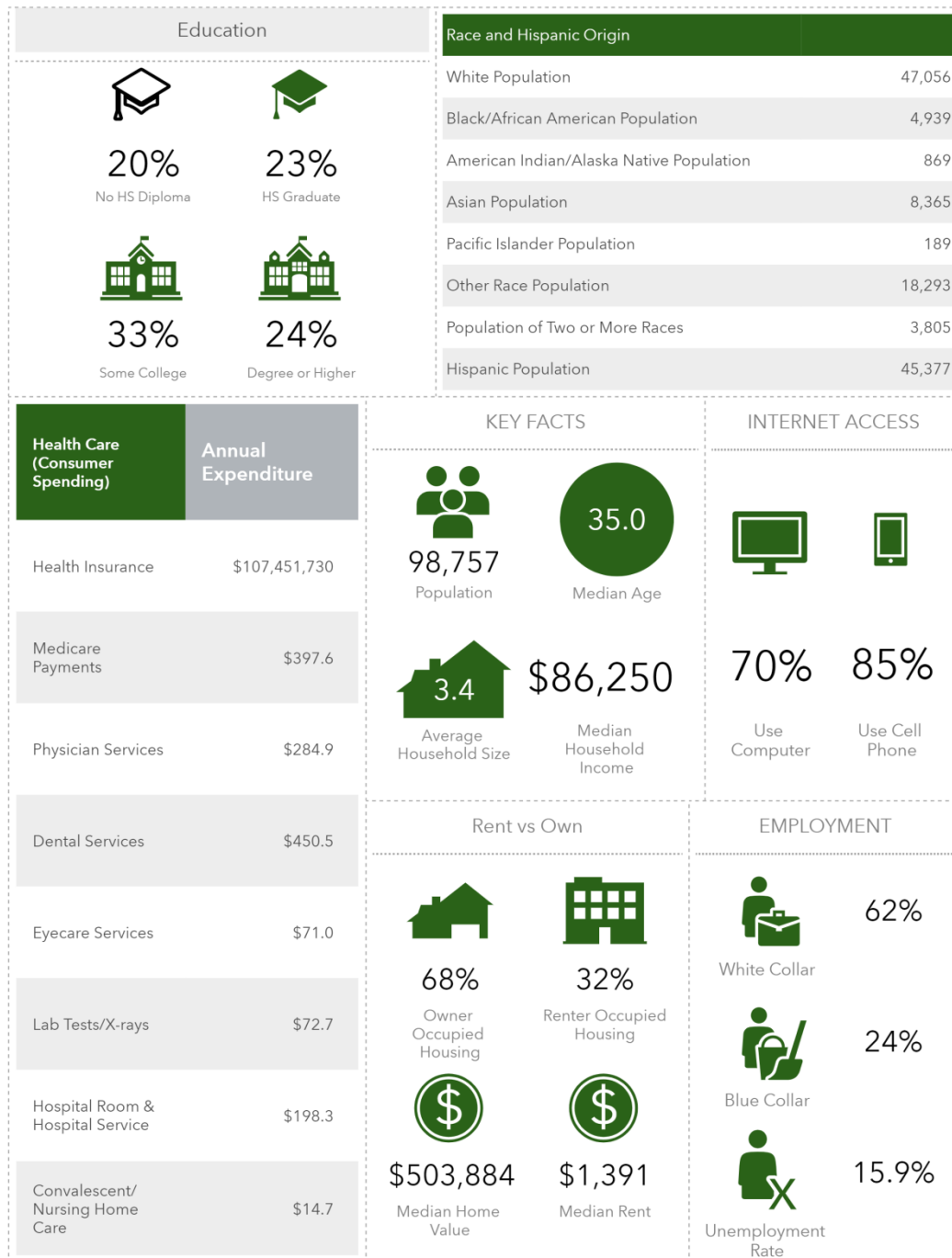
City of Chino

Figure 4.1

CB 2019-Chino

2 ZIP Codes
91708 (Chino) et al.
Geography: ZIP Code

Prepared by Esri



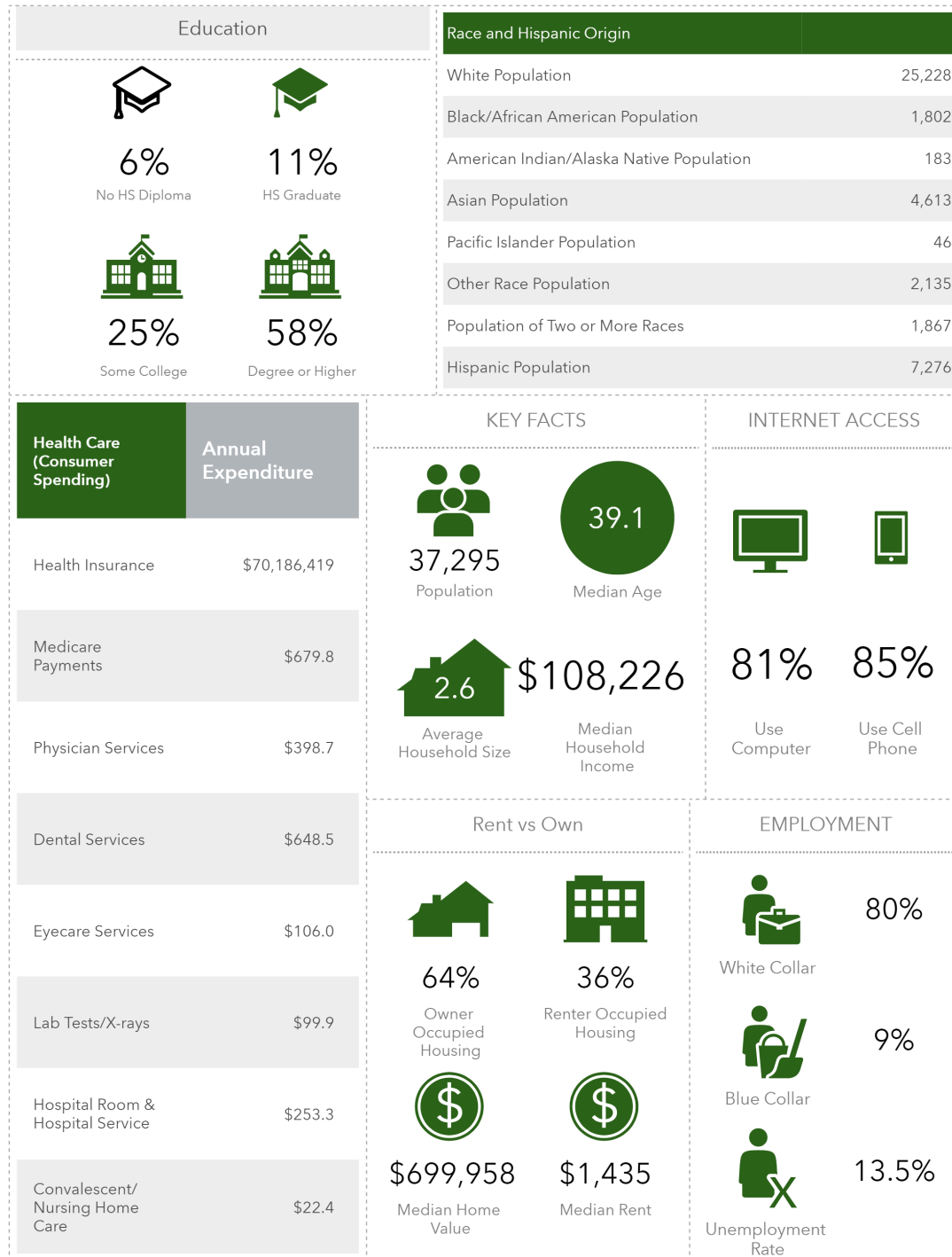
City of Claremont

Figure 4.2

CB 2019-Claremont

91711 (Claremont)
91711 (Claremont)
Geography: ZIP Code

Prepared by Esri



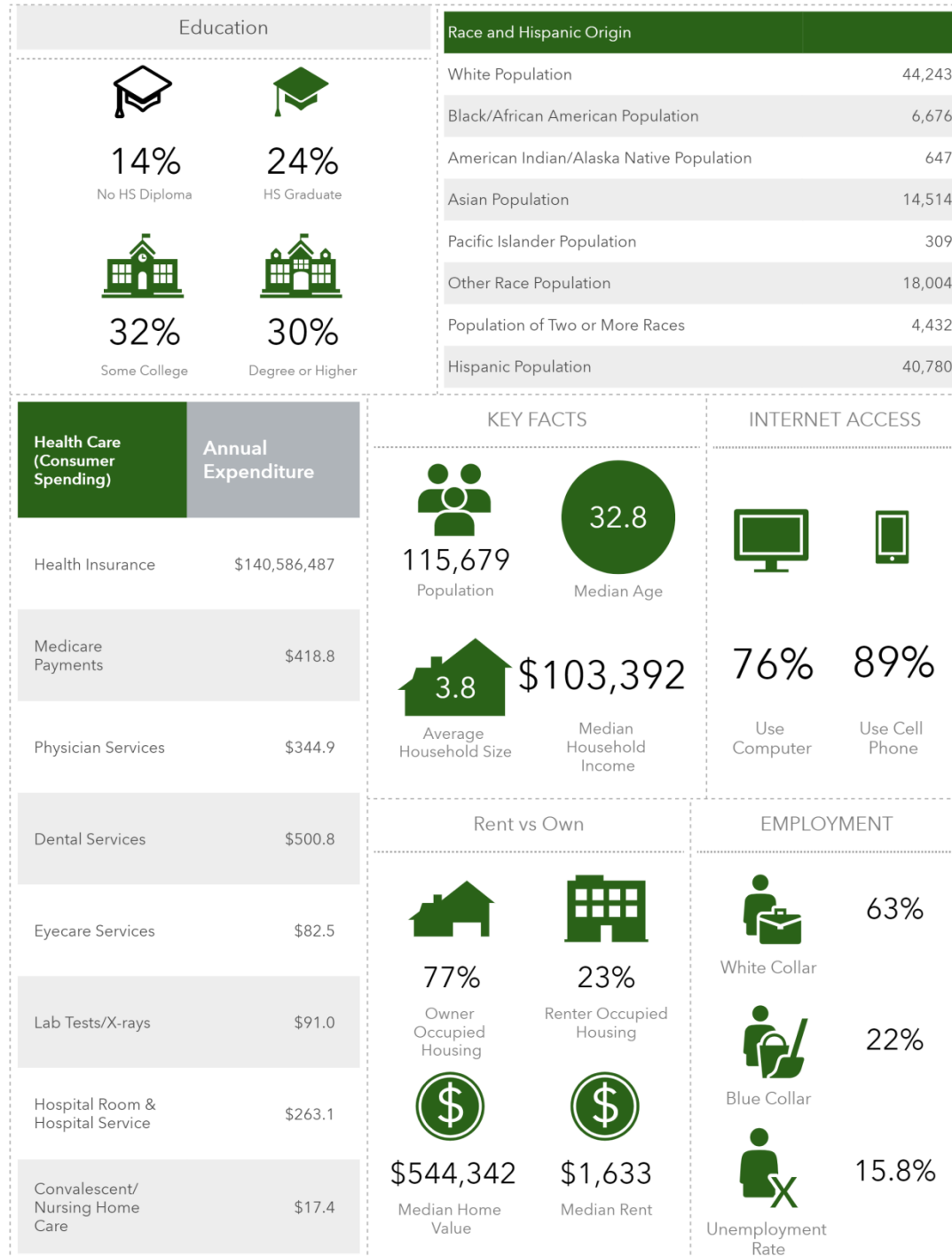
City of Eastvale

Figure 4.3

CB 2019-Eastvale

2 ZIP Codes
91752 (Mira Loma) et al.
Geography: ZIP Code

Prepared by Esri



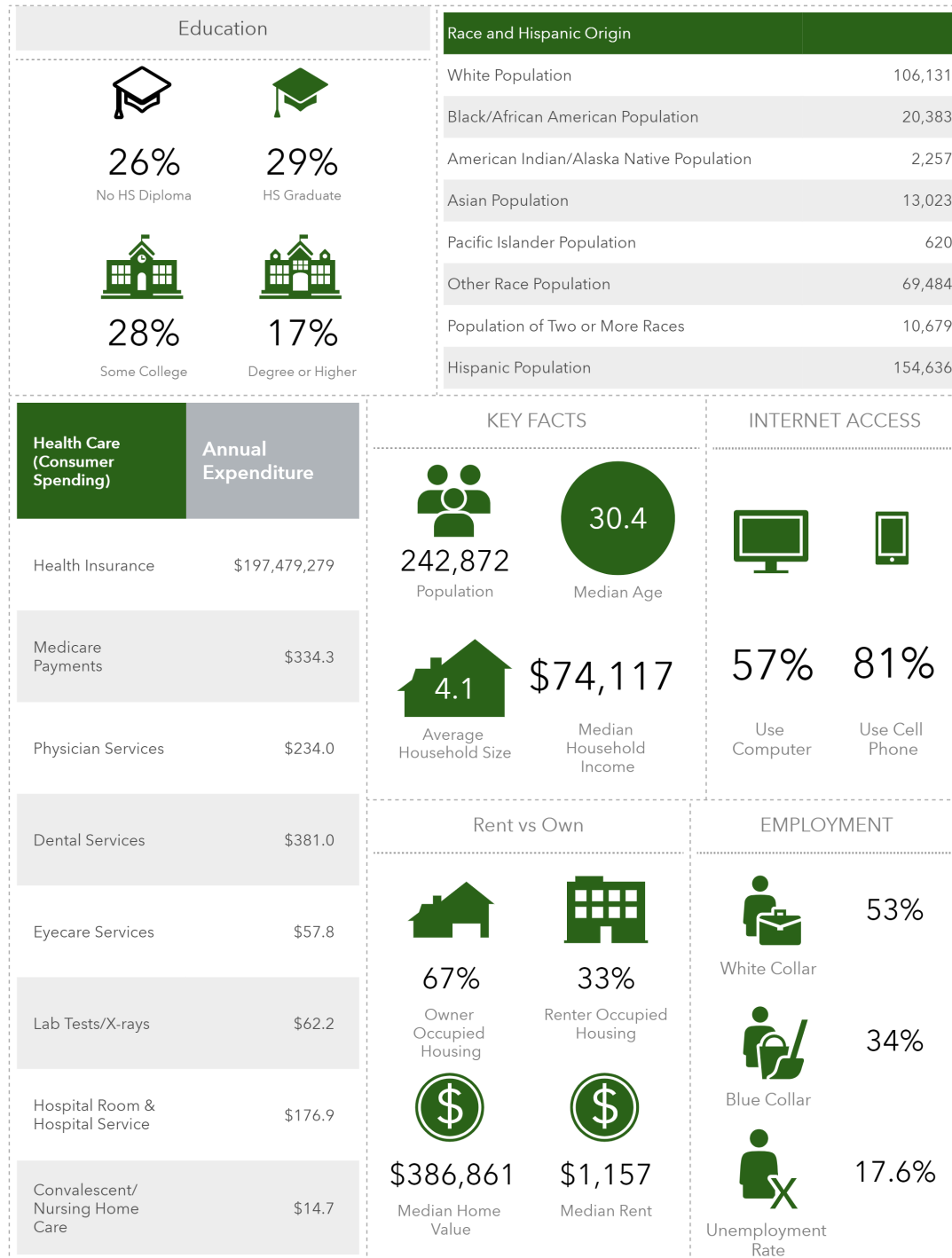
City of Fontana

Figure 4.4

CB 2019-Fontana

3 ZIP Codes
92335 (Fontana) et al.
Geography: ZIP Code

Prepared by Esri



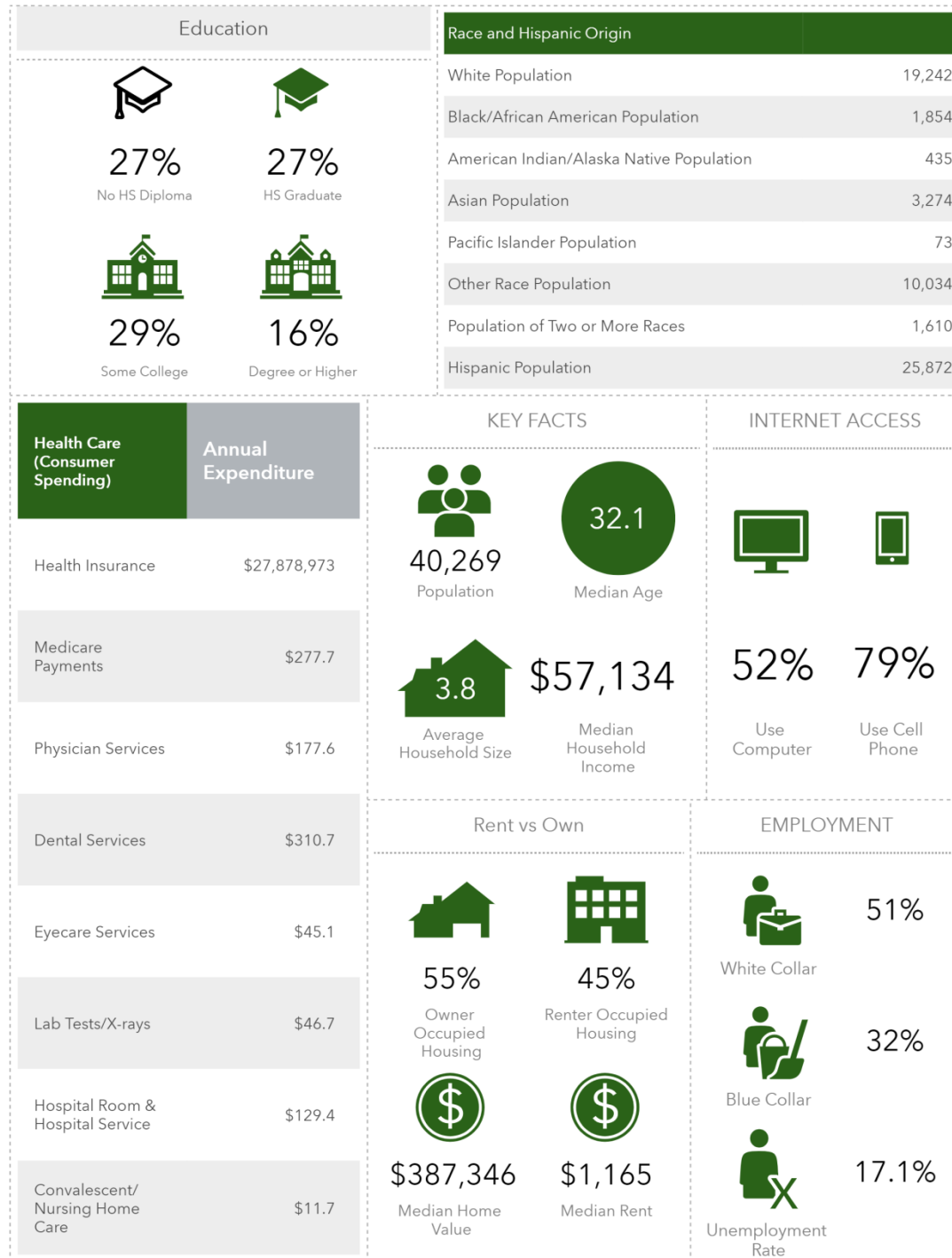
City of Montclair

Figure 4.5

CB 2019-Montclair

91763 (Montclair)
91763 (Montclair)
Geography: ZIP Code

Prepared by Esri



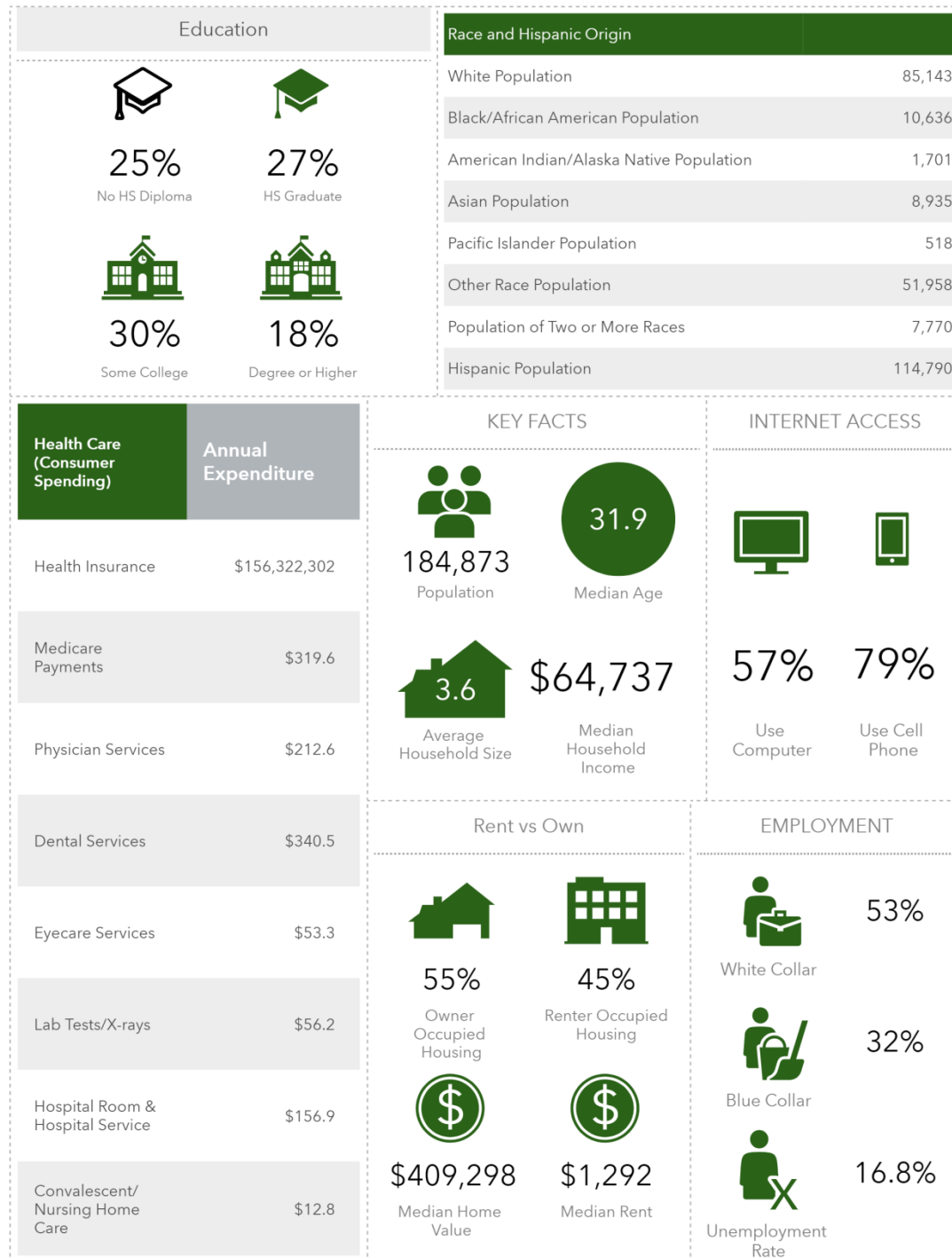
City of Ontario

Figure 4.6

CB 2019-Ontario

3 ZIP Codes
91761 (Ontario) et al.
Geography: ZIP Code

Prepared by Esri



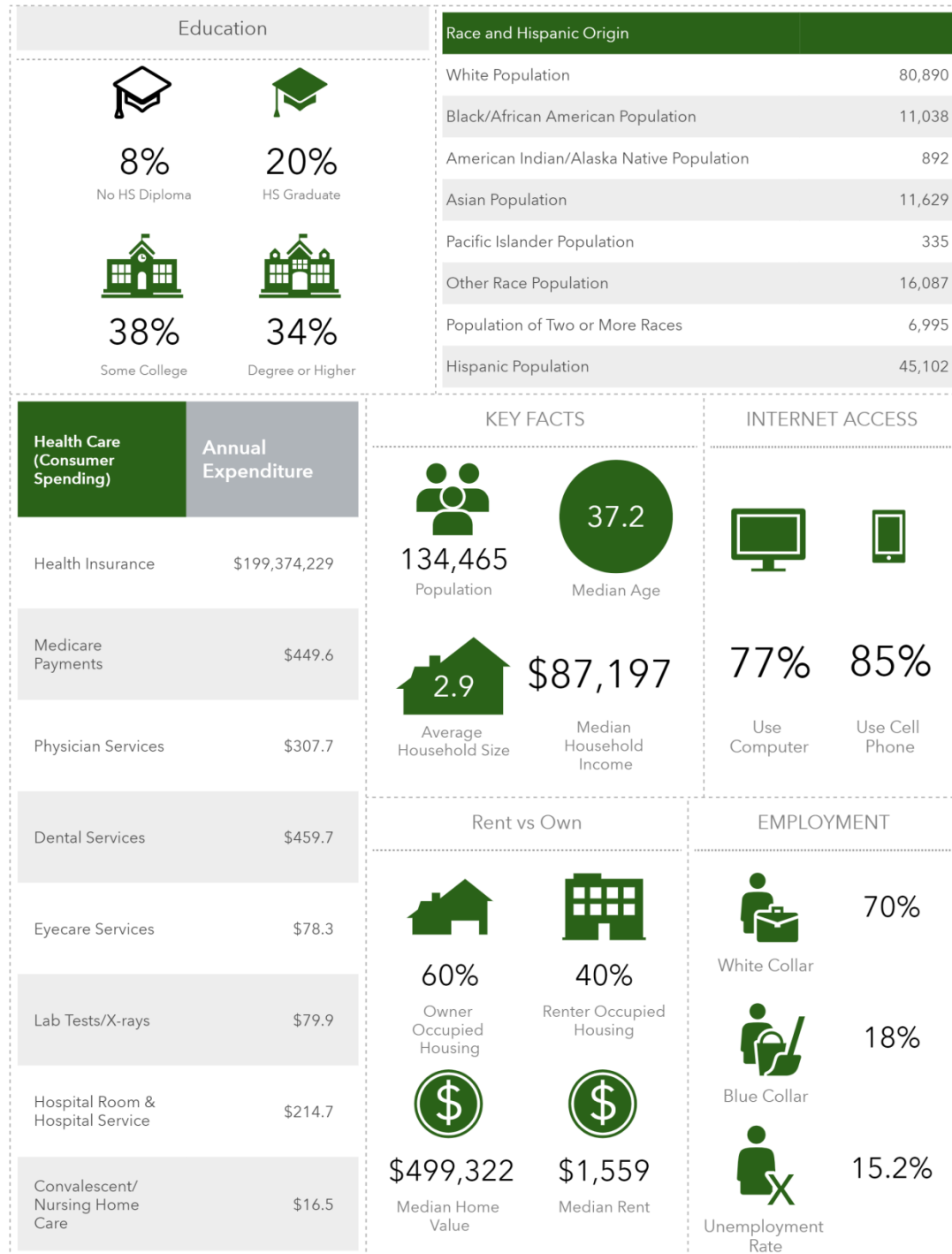
City of Rancho Cucamonga

Figure 4.7

CB 2019-Rancho Cucamonga

3 ZIP Codes
91701 (Rancho Cucamonga) et al.
Geography: ZIP Code

Prepared by Esri



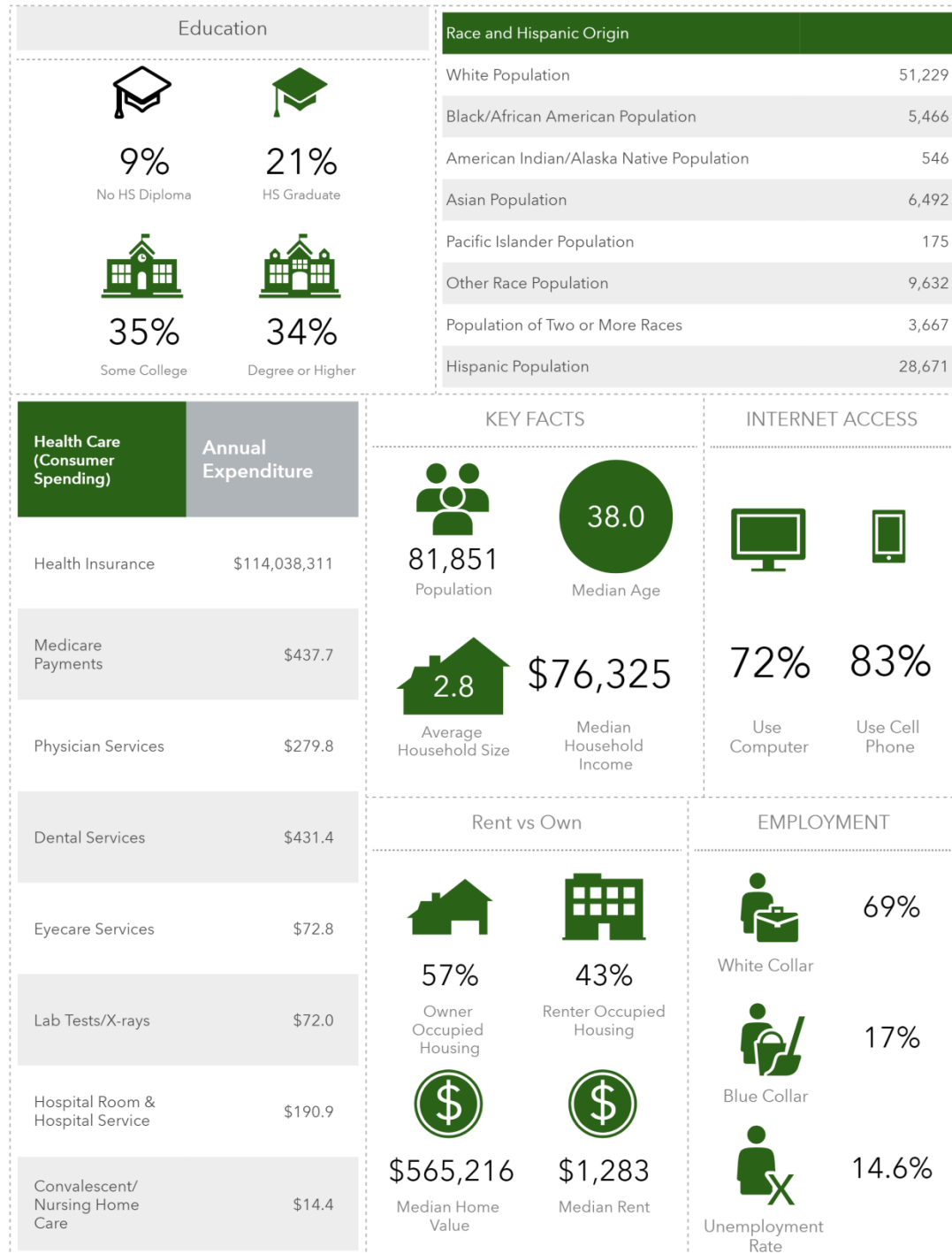
City of Upland

Figure 4.8

CB 2019-Upland

2 ZIP Codes
91784 (Upland) et al.
Geography: ZIP Code

Prepared by Esri



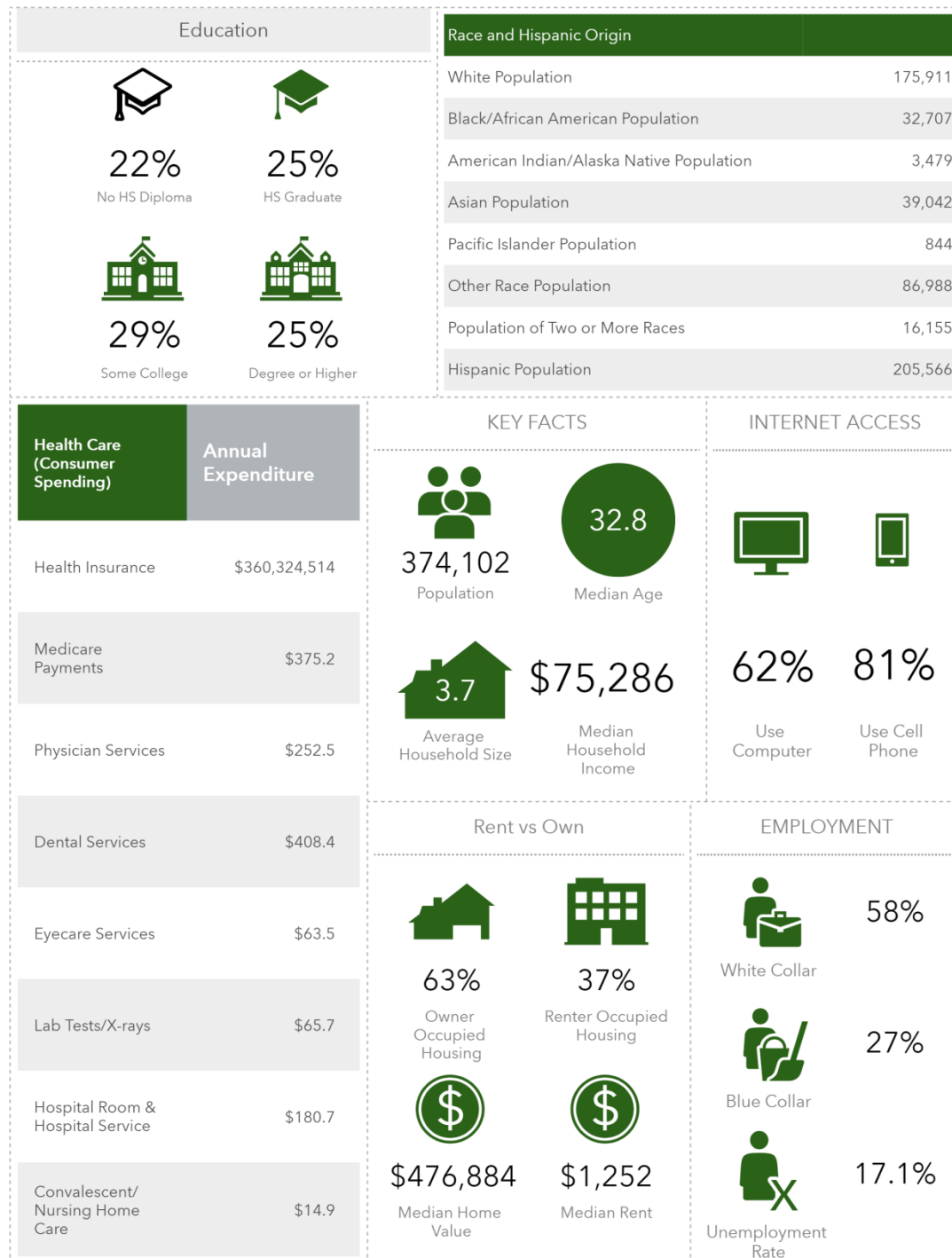
San Antonio Regional Hospital Secondary Service Area

Figure 3

CB 2019-Secondary Service Area

7 ZIP Codes 2
91709 (Chino Hills) et al.
Geography: ZIP Code

Prepared by Esri



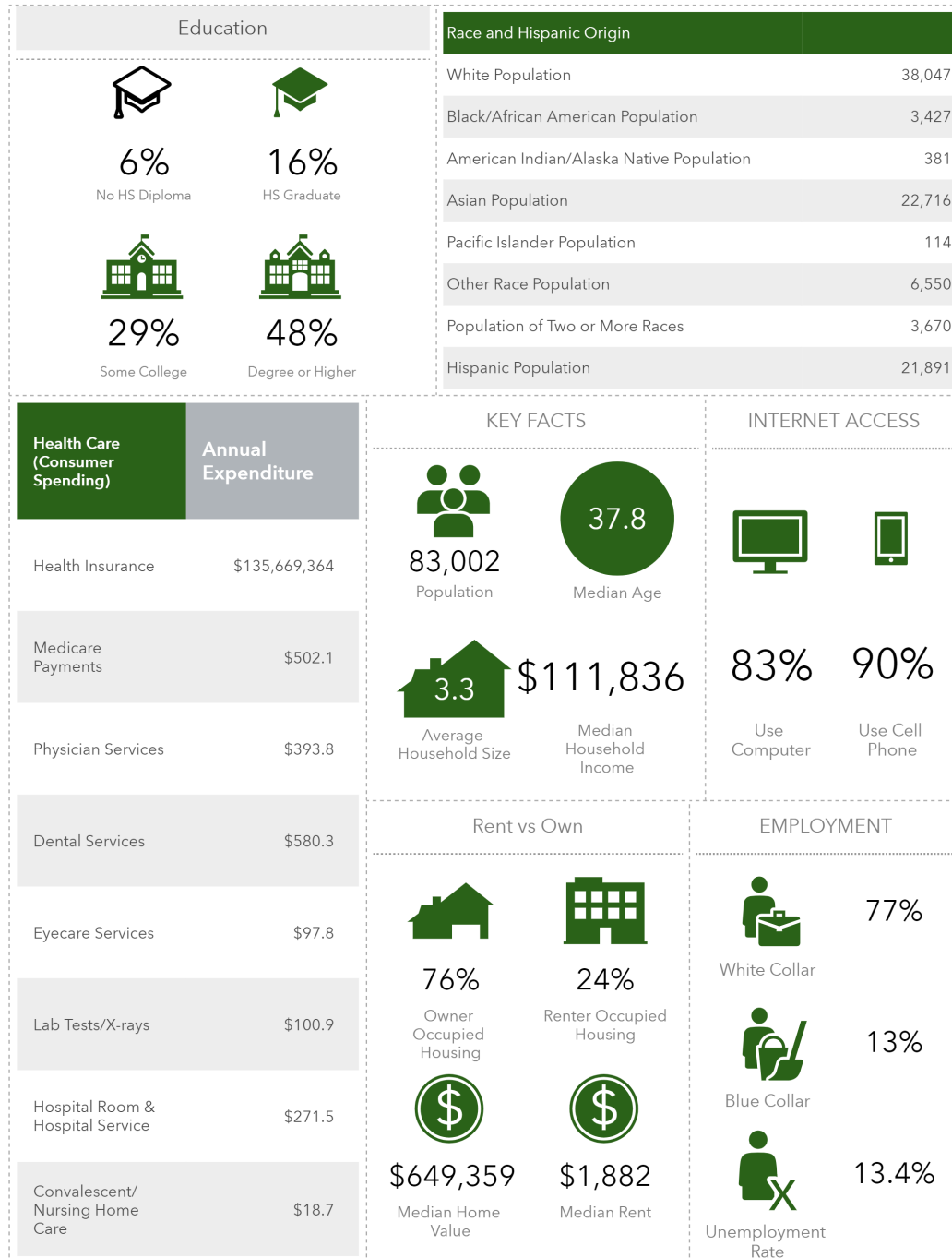
City of Chino Hills

Figure 5.1

CB 2019-Chino Hills

91709 (Chino Hills)
91709 (Chino Hills)
Geography: ZIP Code

Prepared by Esri



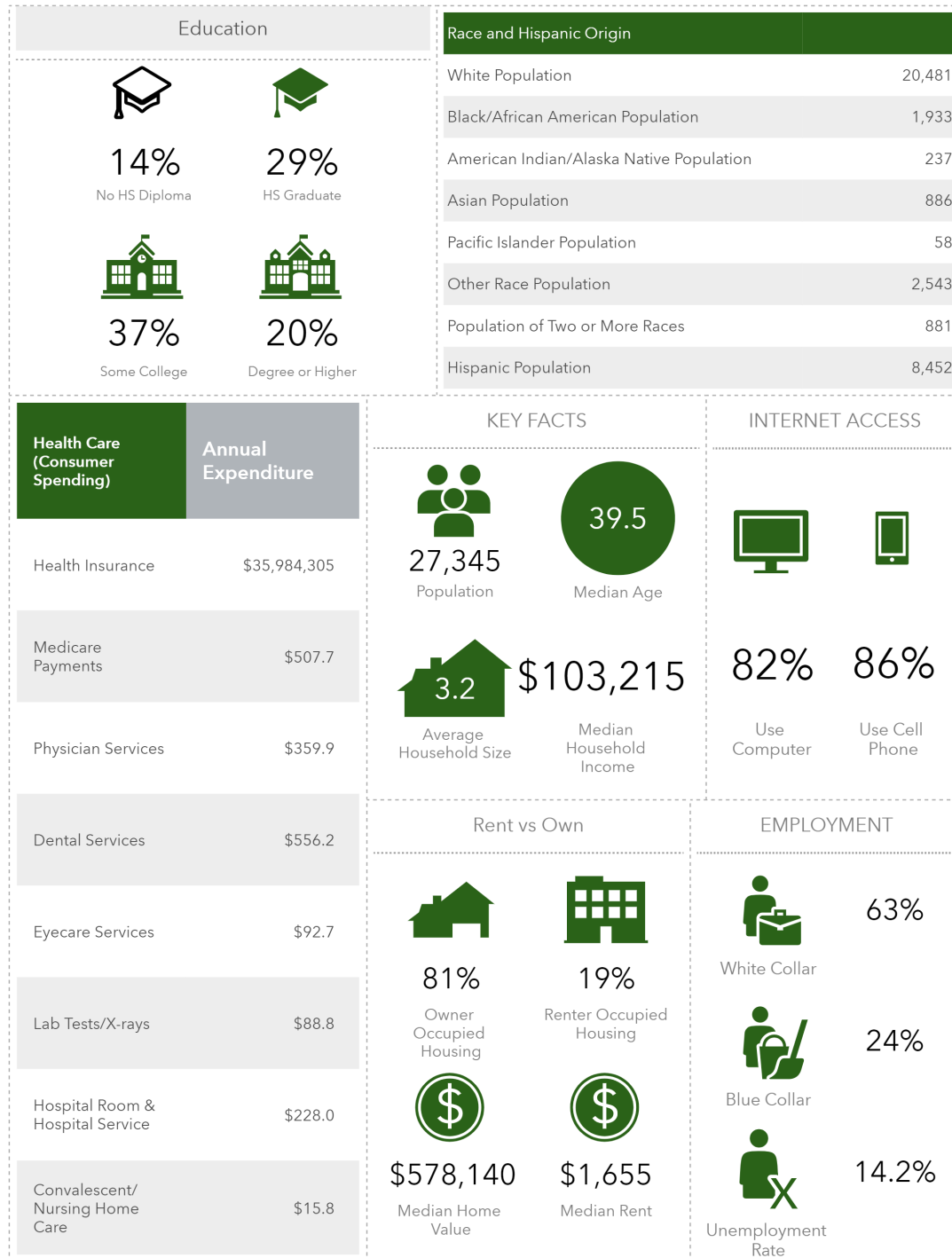
City of Norco

Figure 5.2

CB 2019-Norco

92860 (Norco)
92860 (Norco)
Geography: ZIP Code

Prepared by Esri



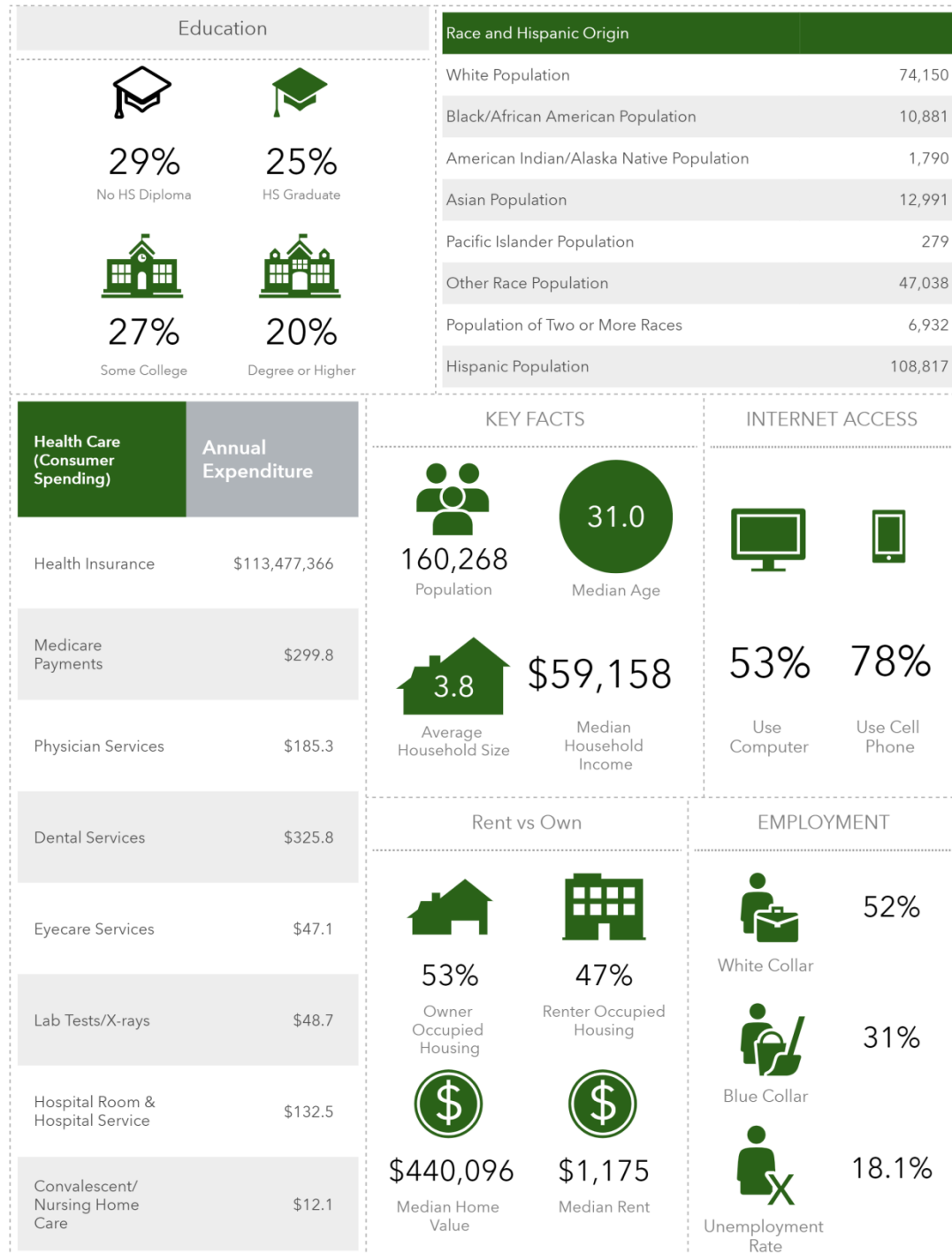
City of Pomona

Figure 5.3

CB 2019-Pomona

3 ZIP Codes
91766 (Pomona) et al.
Geography: ZIP Code

Prepared by Esri



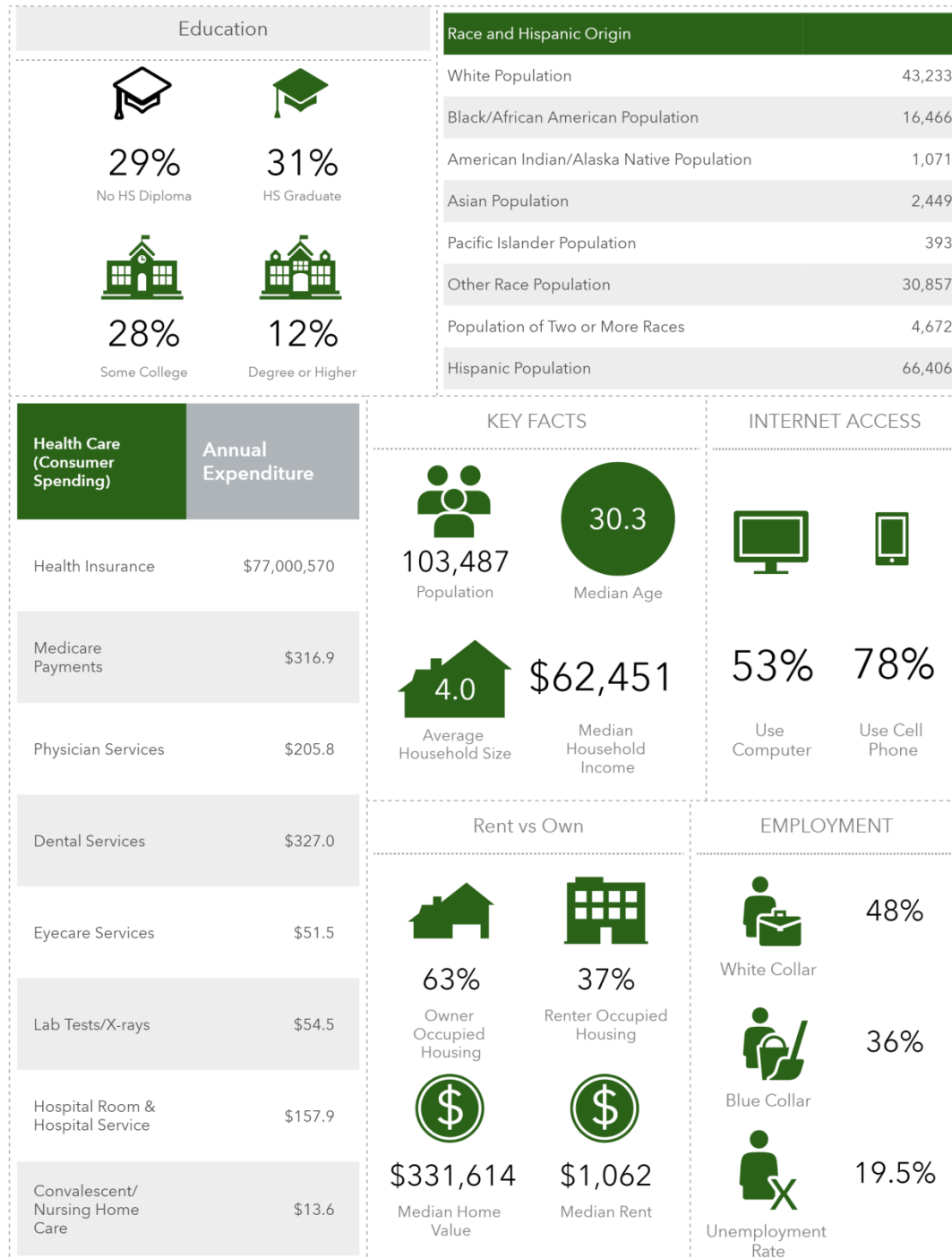
City of Rialto

Figure 5.4

CB 2019-Rialto

2 ZIP Codes
92376 (Rialto) et al.
Geography: ZIP Code

Prepared by Esri



Community Health Needs Assessment (CHNA) Overview

CHNA Requirements

The Patient Protection and Affordable Care Act (ACA) enacted on March 23, 2010, included new requirements for nonprofit hospitals to maintain their tax-exempt status. The final regulations and guidance on these requirements, which are contained in section 501(r) of the Internal Revenue Code, were published in Internal Revenue Bulletin 2015-5 on February 2, 2015. Included in the new regulations is a requirement that all nonprofit hospitals conduct a community health needs assessment (CHNA) and develop an implementation strategy to address those needs every three years. In addition, Schedule H was added to nonprofit hospitals' Form 990 annual tax filing submitted to the Internal Revenue Service.

The State of California, through its Office of Statewide Health Planning and Development, implemented the requirements for a community health needs assessment (CHNA), the development of a community benefit plan, and the reporting structure for nonprofit hospitals' community benefit programs as legislated through Senate Bill 697. San Antonio Regional Hospital has conducted a CHNA and developed a Community Benefit Implementation Plan every three years since SB697 became effective in 1995. The CHNA conducted in 2016 informed the hospital's implementation plan for 2017 – 2019. The report that follows presents the inventory and valuation for 2019, highlighting a few of the targeted efforts that have been initiated through the Implementation Plan.

2016 Inland Empire Regional CHNA

The Hospital Association of Southern California (HASC) works with hospitals to advance quality healthcare delivery and supports hospital community benefit planning through an Inland Area Community Benefit Committee representing the major hospitals in Riverside and San Bernardino Counties. In preparation for the 2016 CHNA cycle, HASC led an effort among member hospitals to conduct an Inland Empire Regional CHNA. The HASC Community Benefit Committee worked collaboratively to design the overall CHNA strategy and the coordination of primary and secondary data collection in collaboration with the Departments of Public Health in both Inland Empire counties. The hospitals that participated in the regional CHNA included:

- Loma Linda Medical Center Children's Hospital
- Loma Linda University Behavioral Medicine Center
- Loma Linda University Medical Center
- Loma Linda University Medical Center-Murrieta
- Montclair Hospital Medical Center
- Parkview Community Hospital Medical Center
- Redlands Community Hospital
- Ridgecrest Regional Hospital
- San Antonio Regional Hospital
- San Bernardino Mountains Community Hospital
- San Geronimo Memorial Hospital



The collaborative effort of HASC and these hospitals resulted in a regional CHNA among a large group of geographically diverse hospitals in the Inland Counties Region of Southern California (Inland Empire). Given the rapid growth of the Inland Empire, the higher rates of poverty, significant health needs, and inadequate primary care infrastructure, this collaboration not only supported the completion of the required reporting, but also fostered the opportunity for more unified and strategic thinking to address population needs in the region. The CHNA served as the beginning of a collaborative effort to support the health of the region.

San Antonio and each of the participating hospitals were responsible for developing their own implementation strategy and plan using the data from the CHNA. However, the goal of the HASC Community Benefits Committee is to identify areas that the region will work on collectively and in collaboration with partners outside of the healthcare system.

Health Needs Reviewed for the Two-County Region

The regional CHNA was built on the community health improvement process initiated by the San Bernardino County Department of Public Health, Community Vital Signs. As healthcare continues to evolve and systems of care become more complex, the CHNA process is becoming a key component to inform the collective efforts of communities in addressing their most pressing health needs. The CHNA viewed health with a collective lens and included not only health outcomes and clinical care components, but also included social determinants and health indicators from the built environment.

The process for determining community health needs requires collecting reliable public health data or metrics measured against a benchmark (i.e. state averages) and engaging the community to solicit their input on the needs they perceive to be the most pressing in their community. The CHNA process also requires that the community participate in prioritizing health needs and that a hospital identify potential resources available to address those needs. The criteria and process used for prioritizing the health needs is not defined by the IRS, but considerations typically include factors such as the severity of the health need, the number of community members impacted, or the presence of health inequities among segments of the community.

The regional CHNA incorporated three distinct data methodologies that, when interpreted together, provide a deeply rich picture of the health landscape of the communities. The assessment contained a plethora of health indicators (hospitalizations, social determinants of health, maternal and child health, mortality and morbidity) gathered from multiple primary and secondary sources. This quantitative data illustrates the current snapshot of health statistics in the communities that the member hospitals serve and also how they compare across geographical boundaries. The quantitative data was stratified by common public health groupings and service areas allowing a targeted identification of unique challenges and opportunities surrounding health status, quality of life, and risk factors in the region and in each hospital's individual service area.

The full assessment provides a detailed review of health in the Inland Empire with clear similarities and variability across the two counties and hospital service areas. Several health indicators stand out as desirable and others indicate an opportunity for additional

study and outreach. The top chronic health conditions identified through data compilation include (in alphabetical order):

- Asthma
- Chronic obstructive pulmonary disease
- Mental illness
- Obesity
- Substance abuse

Voices from the Community

A community health “quality of life” survey (QOL) was administered to obtain community input regarding the strengths and areas of opportunity that exist in each community. The survey was available in English and Spanish and was disseminated through a variety of channels across hospital service areas. A total of 541 individuals completed the QOL survey. Of those who completed the survey, 50% were between the ages of 40 - 65, 12.6% were 65 years or older, 30% had an annual household income of \$25,000 or less, and 60% were Hispanic. Qualitative data was also garnered through the use of eight community members, health experts, and key stakeholder focus groups. The focus groups, conducted in both English and Spanish, revealed thoughts and perceptions and augmented the quantitative data collected in the assessment process. The focus groups allowed a deep understanding of the issues respondents believe are important. The assessment displays data at the county level and when available several health indicators are provided for each hospital’s service area.

The quality of life surveys and focus groups were tailored to assess the direct and indirect needs of the communities throughout the Inland Empire. The information shared gave insight into some of the concerns individuals had for their community. Community concerns ranged from the quality of the education system, access to mental health services, pollution, economy, homelessness, climate change, and the overabundance of fast food restaurants.

The top health challenges identified for the communities involved in the regional CHNA are listed in table 2.

Table 2

Health Outcomes	Social Determinants	Clinical Care	Built Environment
<ul style="list-style-type: none"> ◆ Diabetes (Higher rates among Hispanics/Latinos) ◆ Behavioral health ◆ Heart disease and stroke ◆ Chronic Obstructive Pulmonary Disease ◆ Colorectal Cancer ◆ Obesity 	<ul style="list-style-type: none"> ◆ High rates of poverty ◆ Lower median incomes ◆ Lower educational attainment 	<ul style="list-style-type: none"> ◆ Shortage of primary care physicians ◆ Lack of or failure to access preventive screenings for cancer ◆ Inadequate prenatal care 	<ul style="list-style-type: none"> ◆ Affordable housing shortages ◆ Lack of access to healthy foods

Several common themes emerged through the compilation and analysis of the CHNA findings, and the identified health needs were summarized into the following categories:

- Access to Healthcare
- Chronic Disease Management
- Prevention and Wellness
- Healthy Environment
- Behavioral Health

Everyone participating in the CHNA recognized that the causes of community health needs are both complex and challenging to articulate. Equally challenging is the task of addressing these needs in meaningful and impactful ways. With the completion of the CHNA and the prioritization process, the San Antonio team embarked on the next step to develop and refine an array of Community Benefit Programs aimed at addressing the health needs identified in the CHNA. During this process, the team developed goals, objectives, and initiatives to address the priority health needs that were identified. Using primary and secondary data from the CHNA, the team offered input regarding opportunities to address health issues, identified potential challenges, and provided insight into established activities and programs that currently address the health priorities. San Antonio's 2017 – 2019 Implementation Strategy and Plan reflects the results of this process.

2017-2019 Community Benefit Implementation Strategy and Plan

To complement the 2016 CHNA, a Community Benefit Implementation Plan was created with specific strategies and programs to address identified health needs. The five areas of focus in the 2017-2019 Implementation Plan include: chronic disease management, increasing healthcare access for vulnerable populations, improvement of health through prevention and wellness, improvement of the health environment, and increasing access to behavioral health awareness and education opportunities. The synergy among these five priority areas enabled the hospital to employ the lessons learned through its extensive CHNA to develop a cohesive and effective three-year strategic Community Health Implementation Plan to address the identified health needs.

The Implementation Plan serves as a guiding document for the planning and programming of community benefit activities targeting health issues identified through the CHNA. The plan focuses on community members noted to be most at risk due to existing or impending health conditions, often compounded by one or more social determinants of health, that are likely to result in adverse health outcomes. The implementation plan is closely aligned with San Antonio's strategic plan, mission, and values.

San Antonio is committed to focusing its Community Benefits resources on increasing evidence-based and evidence-informed prevention programs for the community, measuring program impact, and advancing care coordination and service integration.

Implementation Strategy Matrix

The following matrix identifies the strategic initiatives included in the 2017 – 2019 Implementation Strategy and Plan. Each initiative addresses one or more of the five focus areas derived from the significant health needs identified in the 2016 CHNA.



Table 3

Focus Areas Addressing Significant Health Needs					
INITIATIVE	ACCESS TO HEALTH CARE	CHRONIC DISEASE MANAGEMENT	PREVENTION AND WELLNESS	HEALTHY ENVIRONMENT	BEHAVIORAL HEALTH
<u>HELP</u> Elementary Expansion	X	X	X		
<u>Community Health Improvement Program</u> (CHIP) Expansion	X	X	X		
<u>Know Your Numbers</u> (KYN) Expansion	X	X	X	X	
<u>BUILD</u> Case Management Program Expansion	X	X	X		X
Workforce Development(Healthy Eating Lifestyle Program 12+ Expansion)	X		X		
Leadership Development (Healthy Cities Certificate Program)	X	X	X	X	
Support Local and Regional Behavioral Health Policy Change and Educational/Awareness Initiatives	X		X		X

2019 Implementation Strategy Accomplishments

The following table provides a brief description of the major accomplishments achieved in each initiative during 2019.

Table 4

Initiatives	Strategies	Accomplishments
Healthy Eating and Lifestyles Program (<i>HELP</i>)	Expand <i>HELP</i> Elementary School	<i>HELP</i> was reevaluated in 2017. The program was rebranded as <i>wHealth</i> (Wellness + Healthcare), and a revised curriculum for elementary students was developed and implemented in 2018.



Community Health Improvement Program (<i>CHIP</i>)	Expand <i>CHIP</i> program coaches and participants	In 2019, <i>CHIP</i> successfully recruited 40 students to become health coaches for a total of 216 over the past four years. <i>CHIP</i> enrolled 68 patients in 2019 raising the total number cared for by these health coaches to 306 patients. To date, unnecessary ER visits were reduced by 36% and hospitalizations by 42% among <i>CHIP</i> participants enrolled for nine months.
Know Your Numbers (<i>KYN</i>)	Expand <i>KYN</i> program participants	In 2019, <i>KYN</i> had a total of 704 participants seen in four locations: De Anza community Center, Dorothy A. Quesada Community Center, Veterans Memorial Park Community Center, and Ontario Health Clinic for a total of 16 health screenings. This number increased by 221 new participants (+45.8%) compared to 2018.
BUILD (Bold, Upstream, Innovative, Local, Data-drive) Program	Expand <i>BUILD</i> case management program	<i>BUILD</i> clinical community health worker case management increased by 154 new participants. Of those participants 483 enrolled in case management while 57% remained active throughout the year.
Workforce Development (<i>HELP 12+</i>)	Expand <i>HELP</i> program to reach high school students	During 2017, the <i>HELP</i> program was rebranded as wHealth (Wellness + Healthcare). New HealthCorps curriculum was adopted and in 2018 was delivered to high school and middle school students in Upland and Chaffey Joint Union High School Districts. In 2019, the wHealth Program was provided to a total of 420 students. Additionally, a Career Day was added to introduce students to Laboratory and Pharmacy careers.
Healthy Communities Leadership Development	Develop Healthy Communities Certificate Program	The program concept was revised in 2018 to provide health policy training directed at decision makers. During 2018 HCI collaborated with the County Department of Public Health from both Riverside and San Bernardino Counties to provide training around healthy communities' policies. The training was part of a regional conference attended by policy makers from across the Inland Empire including councilpersons, city managers, and city planners. HCI continues to support and/or sponsor policy training across the region.



Behavioral Health	Support local and regional behavioral health policy change and educational awareness initiatives	Supported the Hospital Association of Southern California in its advocacy efforts to raise awareness and create policy change to address unmet behavioral health needs in the region. In addition, mental health was incorporated into the wHealth program through mental resilience education.
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Community Benefit Program Highlights 2019

The following outreach services and programs serve as examples to highlight the actualization of San Antonio's Implementation Strategy and Plan during 2019.

Community Lectures

Every month San Antonio Regional Hospital hosts a community health education lecture. These lectures are open to the public for the purpose of engaging the community and increasing education related to specific health topics. Lectures are led by the hospital's physicians, clinical staff, or community organizations. Community lectures are broadly publicized and open to the entire community. Approximately, 743 community members registered for community lectures and the *Heart Health Series* in 2019. Community lecture topics were as follows:

- Legal and Financial Workshop for Alzheimer's Disease and Related Dementia
- Protecting Your Bottom Line: Colorectal Cancer Prevention and Screening
- Prostate Cancer: New Screening Guidelines and Early Detection
- Vaping: The New Public Health Issue
- Breast Cancer

During the month of February we held a *Heart Health Series*. Topics are as follows:

- SAVING YOUR HEART: The Prevention and Treatment of Cardiovascular Disease
- CONSIDERING A FAD DIET? What Does Your Heart Say?
- WOMEN & HEART DISEASE
- HAS YOUR HEART VALVE SPRUNG A LEAK?
- LIFE GOES ON: Healing Your Heart and Mind After a Cardiac Event
- Free glucose, blood lipids, and BMI screenings (January)





*HCI Graduate intern providing Colorectal Cancer education



*Community discussion panel for prevention and treatment of Cardiovascular Disease



*City of Hope physician, Dr. Natasha Garg, with community member discussing breast cancer education

Generations Ahead Workshops

San Antonio understands that healthy habits are vital at every stage of life, but as we age, staying active and well-nourished is even more important. Generations Ahead is the hospital's senior program, which provides targeted services and programs designed to assist older adults in maintaining their health and vitality. *Generations Ahead* is broadly publicized and open to the entire community with 390 participants/seniors registered for 2019.

During the odd months, seniors participate in healthy eating classes that include a cooking demonstration with registered dietician, Kayla Keel. Kayla provided health education lectures on various nutrition topics, approved recipes were distributed, and a taste testing of the recipe was held at the end of every lecture. This encourages seniors to eat nutrient rich meals and change their lifestyle to keep them healthy. Cooking demonstrations and topics for 2019 included:

- Change Your Salty Ways: The impact that sodium has on health and cardiovascular health.
- Life is Sweet: Reducing the amount of added sugars and zero nutrient foods
- It's Time For Spring Cleaning: Healthier options for cleaning the home to reduce/eliminate chemicals linked to respiratory issues, skin irritation, and the disruption of the endocrine system.



- **Staying Hydrated-Staying Healthy:** Hydration is more than just drinking water, it includes fruits and veggies as well.
- **Food For Your Mood:** Fight off the holiday blues and discover mood boosting foods
- **Generations Ahead Recruitment:** Seniors are encouraged to bring a friend and get them healthy

BROCCOLI CHEDDAR SOUP

NUTRITION INFO PER SERVING
 CALORIES: 230
 KCAL
 TOTAL FAT: 8G
 TOTAL CARB: 26G



INGREDIENTS

- -1 BUNCH BROCCOLI
- -1 SMALL ONION, FINELY CHOPPED
- -1 MEDIUM RED-SKINNED POTATO, DICED
- -1/4 CUP ALL-PURPOSE FLOUR
- -3 CUPS LOW-SODIUM CHICKEN OR VEGETABLE BROTH
- -KOSHER SALT AND FRESHLY GROUND BLACK PEPPER
- -1/4 TEASPOON FRESHLY GRATED NUTMEG
- -1 CUP GRATED EXTRA-SHARP CHEDDAR
- -1 TEASPOON WORCESTERSHIRE SAUCE
- -ONE 12-OUNCE CAN FAT-FREE EVAPORATED MILK (USE-DAIRY FREE MILK IF NEEDED)
- -2 SCALLIONS, THINLY SLICED

COOKING INSTRUCTIONS

PREP: 15 MINS COOK: 25 MINS YIELD: 6 SERVINGS

1. SEPARATE THE STEMS AND CHOP THE STEMS AND COARSELY CHOP THE FLORETS AND SET ASIDE SEPARATELY.
2. HEAT OVER MEDIUM HEAT. ADD THE BROCCOLI STEMS, ONIONS AND POTATOES AND COOK, STIRRING, UNTIL SOFTENED, 7 TO 10 MINUTES.
3. ADD THE FLOUR AND COOK, STIRRING, UNTIL LIGHTLY TOASTED, ABOUT 2 MINUTES.
4. STIR IN THE BROTH AND BRING TO A BOIL. REDUCE THE HEAT TO MAINTAIN A SIMMER AND CONTINUE TO COOK, STIRRING OCCASIONALLY, UNTIL THICKENED AND THE VEGETABLES ARE TENDER, 12 TO 15 MINUTES.
5. MEANWHILE, COMBINE THE RESERVED FLORETS AND 1/2 CUP WATER IN A SMALL SAUCEPAN. BRING TO A BOIL, COVER AND CONTINUE TO STEAM UNTIL THE FLORETS ARE BRIGHT GREEN AND CRISP-TENDER, ABOUT 5 MINUTES.
6. ADD THE ENTIRE CONTENTS OF THE POT WITH THE FLORETS TO THE SOUP ALONG WITH THE NUTMEG. STIR TO COMBINE AND REMOVE FROM THE HEAT.
7. STIR IN THE CHEDDAR, WORCESTERSHIRE AND MILK. SEASON WITH SALT AND PEPPER. GARNISH WITH THE SCALLIONS.

★ FOOD SAFETY ★

KITCHEN CLEANING CHECKLIST

PANTY

Make "zones" in your pantry-baking, snacks, etc.

- Pull out all items
- Trash any expired, old, stale or inedible food
- Donate any unopened food you don't want
- Transfer open items to jars or containers
- Combine like half-used containers
- Wipe down pantry shelves, and clean any organizers
- Place items back into pantry neatly

FRIDGE & FREEZER

Use what you have to organize-plastic containers ok.

- Pull out all food from fridge and freezer
- Trash any food that is expired, old, or inedible
- Wipe down shelves, and wash ice cube trays
- Pull out drawers and wash, replace, and then put food back in neatly
- Declutter top of fridge, dust and wipe clean
- Take down all magnets and papers from exterior wipe them
- Vacuum fridge coils



TOMATO QUINOA SALAD

NUTRITION

Calories: 255 kcal
 Total fat: 10g
 Fiber: 7g
 Sugar: 2g
 Carbs: 33g
 Protein: 9g
 Sodium: 450 mg



INGREDIENTS

- 1/2 cup dry quinoa
- 3/4 cup water
- 2-3 cups chopped/sliced tomato
- 15 oz can chickpeas, drained and rinsed
- 1/4 cup chopped green onion
- 1/4 cup fresh lime juice (from 2 limes)
- 1 clove garlic (smashed and minced)
- 1 TBSP fresh chopped parsley
- 1/2 tsp ground cumin
- 1/4 tsp sea salt
- 1/8 tsp pepper
- additional fresh chopped parsley to taste
- 2 TBSP avocado oil



 **SAN ANTONIO REGIONAL HOSPITAL**



GenerationsAHEAD

FOOD FOR YOUR MOOD!
TUESDAY, NOVEMBER 5, 2019 | 11:30 AM TO 1:00 PM
WEST WING 1 CONFERENCE ROOM

Fight off the holiday blues and discover some foods that can help improve your mood! San Antonio dietitian Kayla Keel will cook up something delicious, and discuss healthy food and lifestyle tips to give your mood a boost during this holiday season. *Gobble! Gobble!*

Registration for this class is October 15-29, 2019. Register at: <https://genaheadnovember.eventbrite.com>

Make your reservation...at the website listed above during the time frame indicated. If you do not have Internet access, please leave a message on the reservation line at 909.920.6139. Include your full name, phone number (with area code), the number of people coming with you, and state which event you will attend. Our reservation line is an automated voice mail system. Once you leave your information, your reservation is confirmed. You will not receive a return call.

PLEASE NOTE: Reservations must be made during the time frame indicated for each event.

 **SAN ANTONIO REGIONAL HOSPITAL**



GenerationsAHEAD

WINTER WONDERLAND!
THURSDAY, DECEMBER 12, 2019 | 11:00 AM TO 1:00 PM (Yes...a little longer for the holiday party!)
AITA AUDITORIUM

It's the most wonderful time of the year! Join us as we welcome the season with friends, food, and holiday treats. Bring a friend and try your luck with games and activities, or enjoy a cup of cocoa with new friends. As always, there will be door prizes! Bring an unwrapped gift to add to our tree and share with a local child in need. Art supplies, toys, and toiletries for teens are always welcome! A gift is not required to participate.

Registration for this event is November 11 to December 6, 2019. Register at: <https://genaheaddecember.eventbrite.com>

Make your reservation...at the website listed for each event during the time frame indicated. If you do not have Internet access, please leave a message on the reservation line at 909.920.6139. Include your full name, phone number (with area code), the number of people coming with you, and state which event you will attend. Our reservation line is an automated voice mail system. Once you leave your information, your reservation is confirmed. You will not receive a return call.

PLEASE NOTE: Reservations must be made during the time frame indicated for each event.

During the even months seniors increase their physical activity by attending free group classes tailored to their needs at the Scheu YMCA in Upland. Seniors participate in a 30-45 minute group exercise taught by a senior instructor from the YMCA. These sessions are entitled “Let’s Get Physical”.





Health & Hot Rods

The annual men's health event took place on June 22, 2019 from 8 am to 12 pm. This event is offered to community members in the hospital's service area, making it convenient for men to receive health screenings and education, while enjoying the display of classic cars and hot rods. The event was broadly publicized and open to the entire community and served nearly 280 guests and provided screenings to 88 participants, including blood pressure, body mass index (BMI), cholesterol, glucose, and pulmonary function.

Throughout the event venue, educational opportunities were provided in the form of physician lectures, health and wellness booths, posters, and the materials included at registration. Booths provided education on cancer prevention, heart health and early heart attack care (EHAC), stroke awareness and timely response (BEFAST), wellness, physical activity, and nutrition. Representatives from City of Hope, American Cancer Society (ACS), and American Heart Association (AHA) were present to provide additional health education, and American Medical Response (AMR) paramedics provided hands-only CPR training. San Antonio doctors were also present and provided brief lectures on heart health and maintaining overall health and well-being.



American Cancer Society

During the month of April, San Antonio Regional Hospital hosted the American Cancer Society (ACS) Survivor Tea as well as Making Strides Kickoff Event on August 21st in Aita Auditorium bringing together survivors and inspirational speakers. Additionally, San Antonio sponsored the Making Strides Walk held on August 28th at the Quakes Stadium in Rancho Cucamonga and supported with community information and a walking team.



San Antonio's community outreach was enhanced by a unique transportation grant from ACS, providing patients a resource to get to and from cancer treatment. The San Antonio care team was trained as concierges to arrange transport for community members. Funds were utilized to provide taxis, specialized medical transport, and Lyft rides to and from a patient's residence thereby eliminating a transportation barrier.

Breast Cancer Awareness Month

During the month of October San Antonio Regional Hospital hosted a series of breast cancer awareness events. In partnership with Cathy Zappia, Strategic Partnership Manager from the American Cancer Society and Livia Vargas, RN Oncology Nurse from San Antonio, multiple cancer prevention events were held for underserved, underinsured, or uninsured community members. During October, 206 participants attended various health events that were primarily delivered to a Spanish-speaking community of need. The number of participants consists of attendees from these community presentations, as well as those in attendance at the *Know Your Numbers Event* and with the City of Rancho Cucamonga *Cancer Survivor Groups*.

Livia Vargas and Cathy Zappia staffed the health information booths. Livia Vargas met one-on-one with community members to discuss personal questions, breast cancer prevention, nutrition, warning signs, and provided a mammogram screening voucher for \$49.95. Cathy Zappia focused on overall cancer prevention, when to get screened for all cancers, including behaviors that increase the risk of cancer. Both representatives provided resources and skills for preventing breast cancer, increasing the community's knowledge, and encouraging mammogram screens.

Community events were supported by multiple partners including the American Cancer Society, San Antonio Cancer Center, Clinical Community Health Workers, and El Sol (local non-profit). Events were broadly publicized and open to the entire community. Comprehensive screenings, including cholesterol, blood glucose, blood pressure, and BMI were also offered. The message of prevention was consistent with the educational materials distributed upon registration.

To complement the hospital's prevention program, a lower cost breast cancer screening program was implemented to address one of the hospital's top five late stage cancer diagnoses, breast cancer. Vouchers were distributed at various events to encourage breast cancer screening activity. During the cancer prevention events described above, education about breast cancer was presented and the screening vouchers were explained and distributed to all event participants.



Know Your Numbers



In February 2015, San Antonio Regional Hospital, in collaboration with Loma Linda University Masters of Public Health students, initiated the Know Your Numbers (KYN) program in Ontario, California. The goal of the program was to reduce chronic disease incidence in impoverished, uninsured, and underinsured populations through screening and health education. KYN provides biometric screenings for the low-income population living in Ontario's "HEAL" (Healthy Eating and Active Living) Zone and surrounding communities. KYN provides health education, social determinant of health assessments, and biometric screenings, including blood pressure, body mass index (BMI), glucose, and cholesterol through community-based point-of-care testing.

KYN is a self-management and health education program designed around the health belief model that assumes health-related actions depend on a participants' belief that he/she is susceptible to significant health issues that improve through a prescribed health recommendation. Participants get their lipid panels taken by a licensed phlebotomist and have a consultation with a registered nurse (RN) who explains to the participants their readings (i.e. their biometric screening numbers) and how certain numbers impact their health status. Following the consultation, participants considered high risk are assigned a Clinical Community Health Worker (CCHW) and are given a customized program plan to reduce their numbers. All participants are connected with educational resources based on their individual needs, are provided with additional resources through referrals and community programs.

The initial screening program included 50 participants, of which 72% were Hispanic, 22% were uninsured, 48% did not have a primary care physician, and 36% had never visited a hospital. Thirty-four percent of the participants had high blood pressure and 20% displayed numbers indicative of a hypertensive crisis. Fifty percent of the participants were clinically obese and 34% were overweight as indicated by their BMI metrics. Due to the success of the pilot program, KYN was expanded to include several screening locations residing in and around the Healthy Eating and Active Living (HEAL) Zone of Ontario.

Expanding KYN Participation

In 2016, KYN was incorporated into the Healthy Ontario Initiative (HOI), an innovative multi-sectoral collaborative partnership in the City of Ontario. This effort was funded, in part, by a "BUILD" Health Challenge Grant provided by: 1) The Advisory Board Company, 2)



de Beaumont Foundation, 3) The Colorado Health Foundation, 4) The Kresge Foundation, and 5) Robert Wood Johnson Foundation. The goal of the BUILD funding partners was to foster and expand meaningful partnerships among hospitals, community-based organizations, and local public health departments to create Bold, Upstream, Innovative, Local, Data-driven (BUILD) solutions to address the complex problems that influence the health of local residents. The remaining funding and other resources for the program were provided by HOI's partners, which include San Antonio Regional Hospital, The City of Ontario, and the San Bernardino County Public Health Department. HOI's goal was to reduce obesity and its associated health impact on vulnerable populations. San Antonio's KYN program served a key role in engaging the community in understanding health issues and healthcare access, as well as, empowering participants to take an active role in improving health status individually and reducing chronic illness across the community.

In 2017, there was a push to further enhance the case management aspect of the program. San Antonio staff and community partners worked diligently on developing health curricula for the case management sub-population within the whole population. Case management parameters were created to determine which participants needed individual care. In addition to the new curriculum, efforts were made to provide individual nutrition education for participants with the highest need. This education took place in the homes of individual participants presented by one of the hospital's registered dietitians (RD). Home visits allowed for an in-depth analysis of diet patterns and living conditions. This allowed the RD to tailor each plan to the individual, maximizing individual success and satisfaction with the program.

KYN took place in the heart of Ontario, but was open to others within the hospital's service area. Over the past years, nearly all participants were predominantly Hispanic and the vast majority were women. Women were more likely to participate in case management and Hispanics were also more likely to participate than other ethnicities. In general, participants had low incomes, over a third did not have a high school diploma, and over half were unemployed. Those who were unemployed and who had low education levels were more likely to participate in case management. About half of all participants did not have a primary care physician and about half did not have health insurance. Those without a primary care doctor and health insurance were most likely to participate in case management. This demonstrates the need for increased access within the hospital's service area, and one of the specific successes of the KYN program was increasing access to healthcare services.

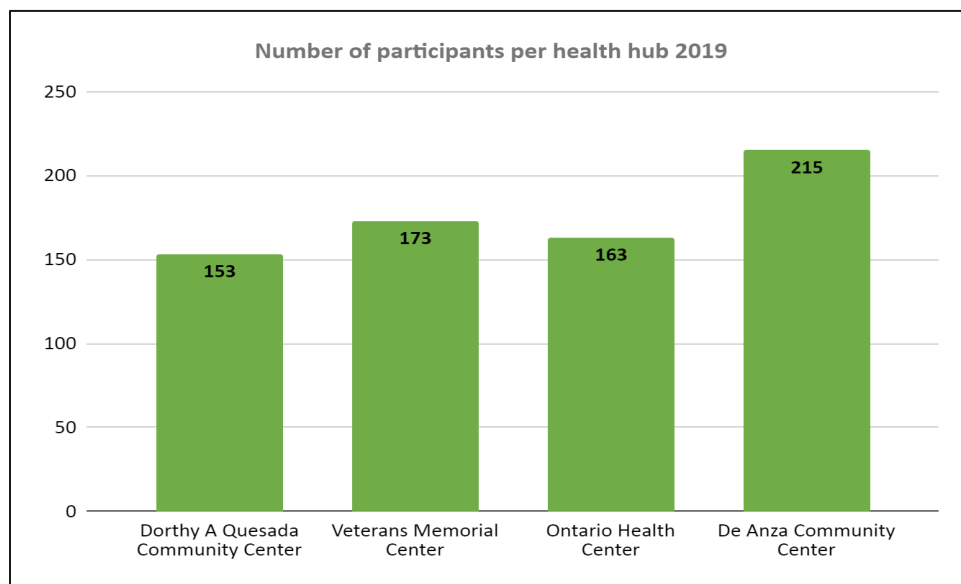
The program's findings demonstrated KYN maintained a steady number of participants, and was therefore continued through the support of project sponsors including San Antonio Regional Hospital. In 2019, about 35% of the 483 case management participants were still actively involved in the program after a year. Within one year, more than one third of participant's returned for a follow-up visit and/or referred to case management. The high number of referral rates increased case management participation. All community members are invited to participate in this screening regardless of health status, health insurance status, or any other barrier, including healthy, at-risk populations, case management participants, and participants that were not participating in case management. Community members were offered educational



materials and encouraged to monitor their health to lower their numbers to prevent chronic disease. Participants that had referrals had follow ups with their assigned Clinical Community Health Worker to control their numbers and lower their risk. Follow-up screenings are encouraged to monitor cholesterol, glucose, blood pressure, LDLs, and HDLs levels. The following charts provide participant overview, biometric overview, as well as a comparison of average compared to participant reading for glucose, total cholesterol, blood pressure, HDLs, and LDLs.

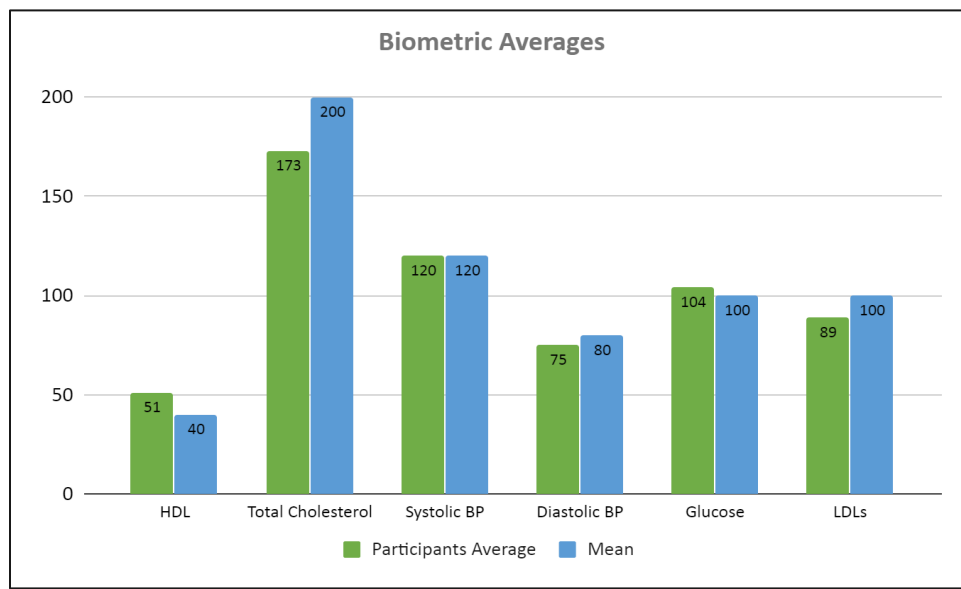
Number of participants per health hub 2019

Graph 1



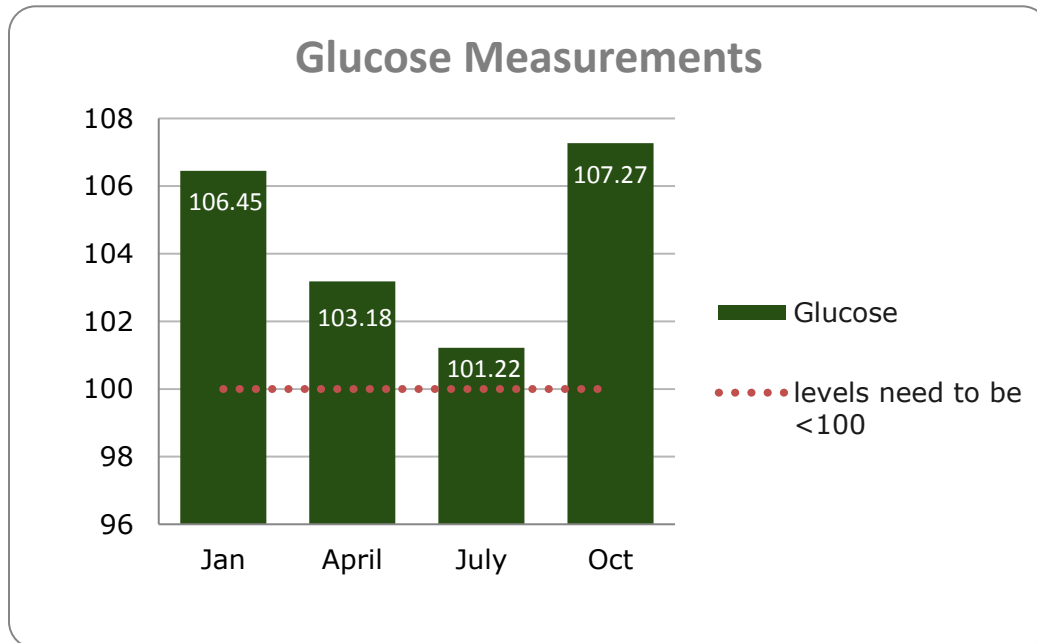
Biometric Averages

Graph 2



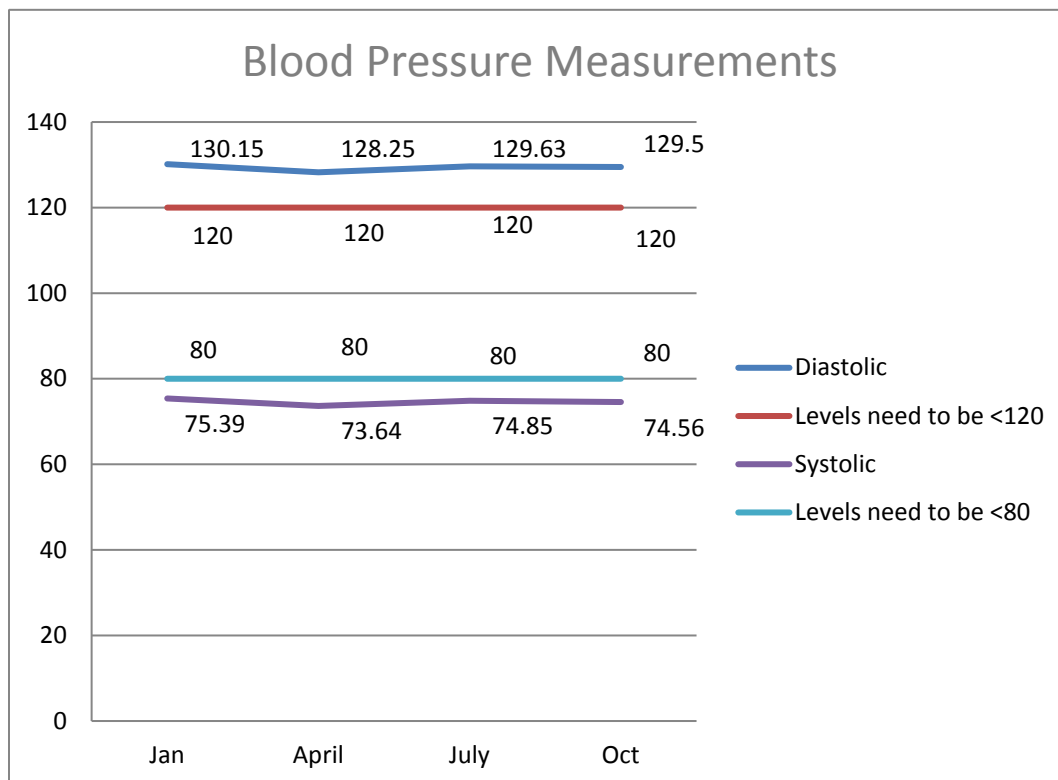
Glucose Measurements

Graph 3



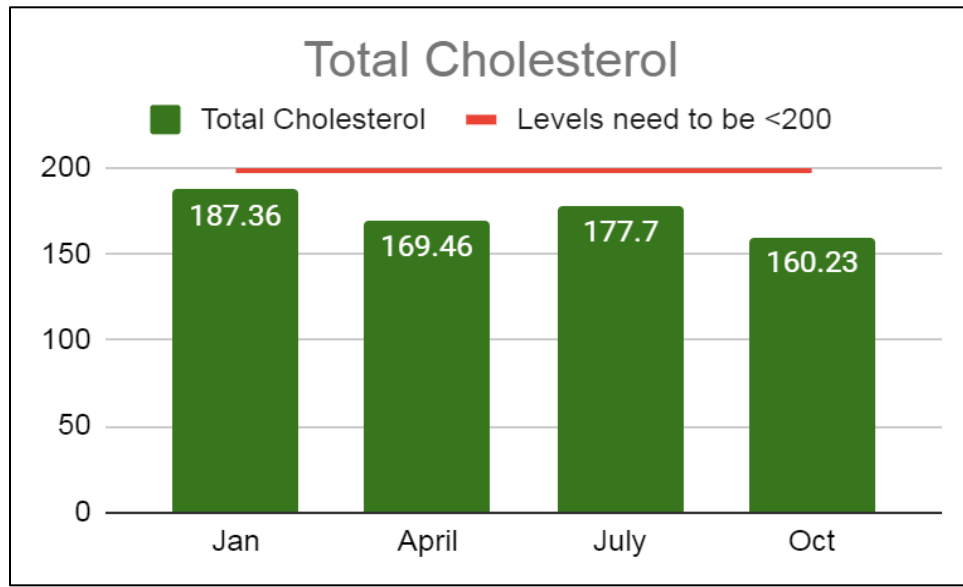
Blood Pressure Measurements

Graph 4



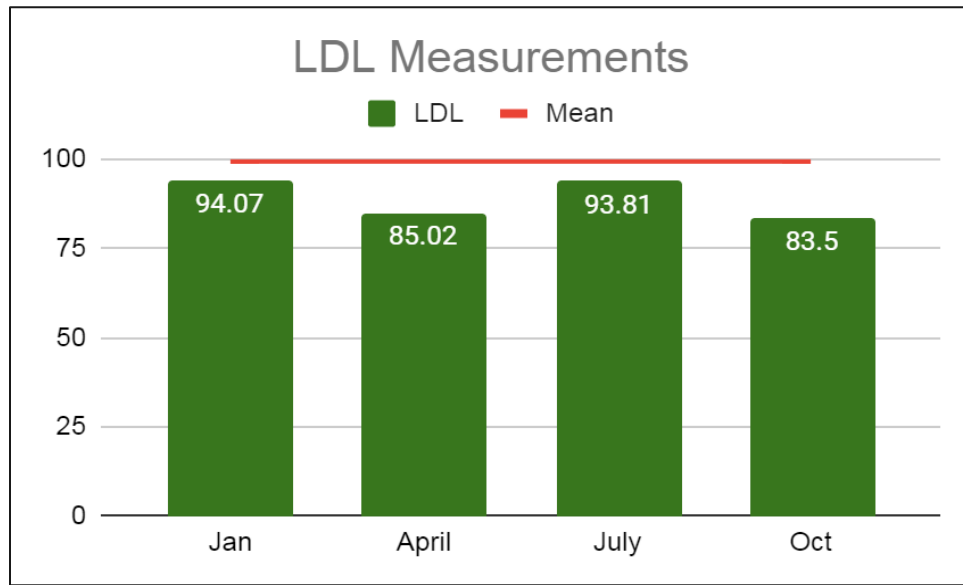
Total Cholesterol

Graph 5



LDL Measurements

Graph 6

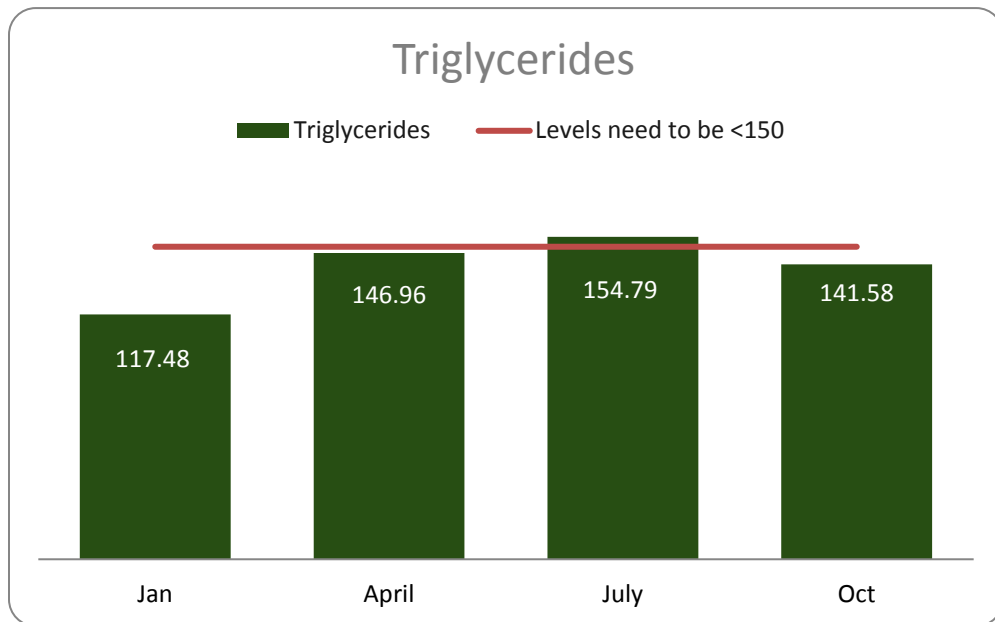


** HDL's were taken and averages include both men and women. Due to different levels of means, for men or women, charts could not accurately display results.*



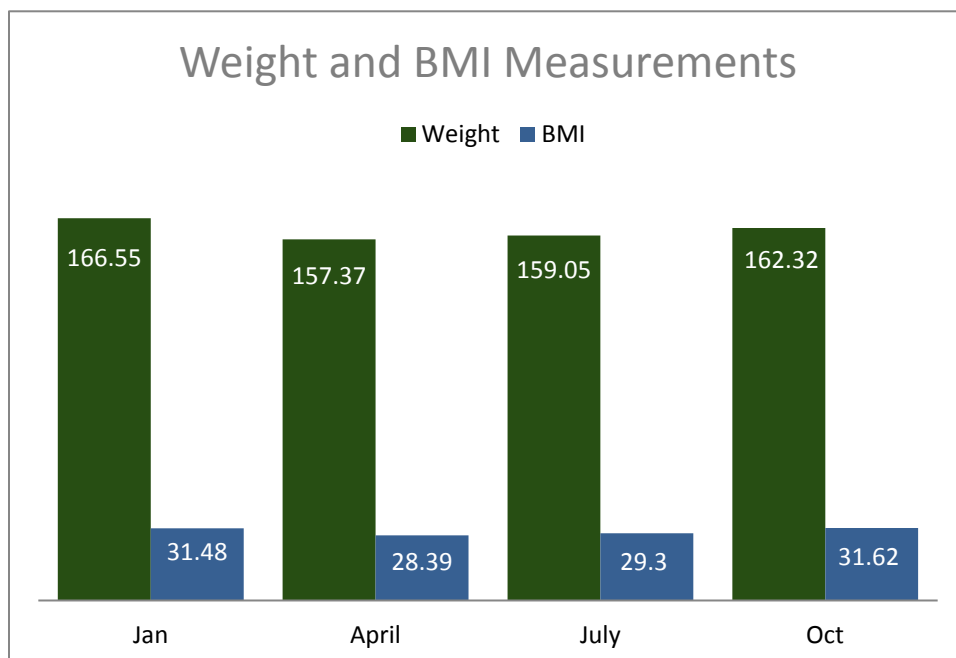
Triglyceride Levels

Graph 7



Weight and BMI

Graph 8



The individual graphs show that case management participants improved their health status from the beginning of the year to the end. Cholesterol levels were as low as 158, which is lower than the target of 200. By the end of the year, the average diastolic blood pressure reading for case management participants decreased by 95 percent. Levels for HDLs also were significantly less remaining at the standard biometric of <50. The improvement of LDLs revealed that case management participants have consistently reported below the average of 100. The graphs indicate that participant's health status was not within optimal range at the start of their participation and by the end of the year, health status improved. More than 70% of the participants displayed normative results and have remained healthy throughout the year. With the utilization of KYN, the overall health of the community continues to prosper as KYN serves to provide case management participants with necessary health screenings, education, and the tools needed to reduce their risk of chronic illnesses, as well as achieving increased access to healthcare.

Community Health Improvement Program (CHIP)

In 2019, CHIP successfully recruited 40 students to become health coaches and a total of 216 over the past four years. CHIP enrolled 68 patients in 2019 raising the total number cared for by these health coaches to 306 patients. To date, unnecessary ER visits were reduced by 36% and hospitalizations by 42% among CHIP participants enrolled for nine months.

The Center for Disease Control has reported that six in ten Americans live with at least one chronic disease, like heart disease, cancer, stroke, or diabetes. These and other chronic diseases are the leading causes of death and disability in America, and they are also a leading driver of healthcare costs. In fact, the CDC has reported that 90% of the nation's \$3.3 trillion in annual healthcare expenditures relate to caring for people with chronic and mental health conditions. The aging population and the continued escalation of patients with chronic conditions is a principal reason San Antonio Regional Hospital developed and implemented the community health improvement program (CHIP) in January 2015.

CHIP is one of the initiatives San Antonio developed to: 1) diminish healthcare gaps, 2) promote the delivery of evidence-based care, and 3) reduce unnecessary emergency room visits and hospitalizations. Coordinated by a dedicated interdisciplinary healthcare team employing a series of individualized continuous care algorithms, this program focuses on appropriate patient identification, prevention, evidence-based disease management, and exemplary treatment of individuals with chronic conditions.

Each participating CHIP member is closely monitored in accordance with an individualized Comprehensive Health Profile (CHP), Quality Care Plan (QCP), and longitudinal patient scorecard. A novel stratification scale that assesses socioeconomic status, education/assimilation capacity, mental health history, adherence potential, psychological stress factors, and support is utilized along with data mining and standardized clinical assessments to individualize evidence-based clinical strategies based upon each person's respective needs and capabilities.

A unique aspect of CHIP is the training and utilization of student health coaches. In addition to the CHIP interdisciplinary clinical team, members are monitored by health coaches trained through an innovative credit-based collaborative educational seminar and



internship program with California State University San Bernardino Schools of Public Health, Nursing, Biology, and Kinesiology; Western University of Health Sciences, College of Graduate Nursing; and Cal Poly Pomona Dietitian/ Nutrition students. After appropriate screening, selected students participate in a seminar taught by our interdisciplinary team of healthcare professionals including physicians, nurses, nutritionists, social workers, and hospital administrators. Licensed professionals (registered nurse and physician) oversee the work of the student health coaches, and their scope of activities are consistent with their competence and the training and demonstrated skills provided through the program.

Once trained, student health coaches provide in-home visits and phone interactions. Students engage in the process of educating and motivating at-risk members to take an active and meaningful role in their health and well-being. The primary objectives of the health coach are to foster meaningful interactions for boosting cooperation and adherence, while helping to resolve non-medical issues (social determinants of health) that impede effective risk factor management and patient care.

Lewis-San Antonio Healthy Communities Institute

The Lewis-San Antonio Healthy Communities Institute (HCI) was established in April 2016 to identify opportunities, solutions, and partners to positively impact the health of our region. HCI seeks to address the healthcare worker shortage as well as elements of the educational attainment gap through its *wHealth* program. The mission is to create a pipeline of students, especially underrepresented populations, who are interested in, engaged, and prepared for college and health related fields. HCI is currently focusing on three program areas: healthcare workforce, health policy education, and non-clinical healthcare internships.

Health Care Workforce

wHealth

Southern California's Inland Empire Region includes San Bernardino, the largest US geographical county, and Riverside Counties. This region has poorer health status and a greater shortage of healthcare professionals than surrounding communities. Lewis-San Antonio Healthy Communities Institute (HCI) developed a school-based adolescent program called "*wHealth*" (*wellness + healthcare*) to address these two major needs to build healthier outcomes for the future of the Inland Empire.

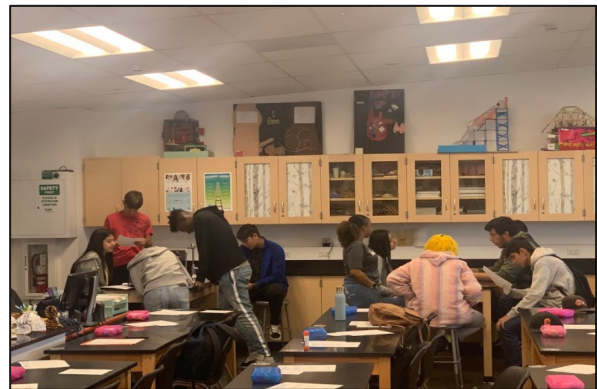
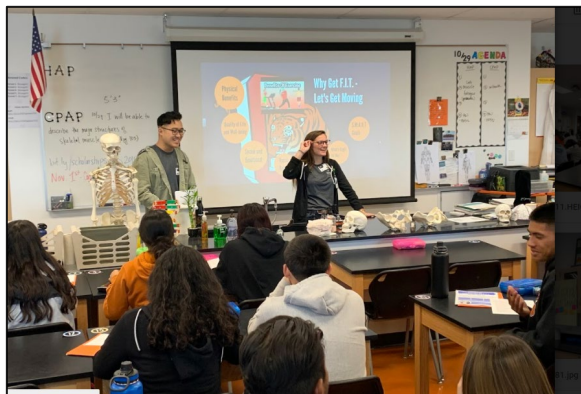
wHealth supports students in their health career journey by: 1) creating learning opportunities around chronic disease prevention; 2) helping to establish lifelong healthy habits; 3) supporting an interest in healthcare careers; and 4) retaining local students in the region. This program aims to increase knowledge on wellness topics and healthcare professional development training. The *wHealth* curriculum is adapted from HealthCorps Inc., a national nonprofit, and is aligned to national health education standards focusing on nutrition, fitness, and mental resiliency. The *wHealth* program goals include: 1) increasing knowledge in nutrition, physical activity, and mental resilience among junior high and high school participants using HealthCorps curriculum; and 2) increasing professional development training for healthcare career preparedness among high school



participants. The curriculum utilizes university students from across the region to instruct high school wellness in eight classroom sessions.

These university students are either in a Master of Public Health program or a Bachelor level program in Public Health or Health Sciences. These students are fulfilling their practicum requirement (varies from 120 to 400 hours) for their degree and gaining exposure to public health needs within their own communities. These students fulfill their practicum requirement as interns to instruct high school students, conduct program operations, and collect data in the classroom throughout the program implementation.

Professional development through the widely-known “Train-the-Trainer model” is integrated throughout the program along with instruction and mentorship among various educational levels. The university students are instructors on the wellness curriculum and mentors to the high school students as they answer questions on college life, majors, and career planning. Once the high school students complete their eight-week HealthCorps program, they have the opportunity to teach the curriculum to junior high students, while gaining peer-to-peer training and building presentation skills for professional development. Following the eight sessions, high schoolers are invited to submit applications to the “Trainer Program,” which occurs in the second half of the school year. This portion of the program includes in-person professional skills workshop on resume-building, group interviews, dress for success, social media etiquette, and training sessions for team building and lesson development. The high school students then instruct a simplified version of the HealthCorps wellness lessons to junior high students.



In addition to their learning experience in the classroom, high school students have the opportunity to tour San Antonio Regional Hospital, meeting current working healthcare professionals in this setting as well as at other community partner sites such as farms and holistic grocery stores as a complement to the program sessions.

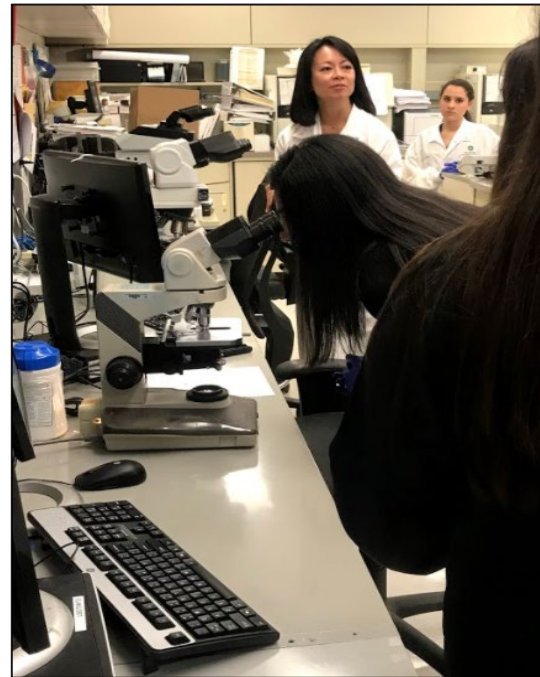
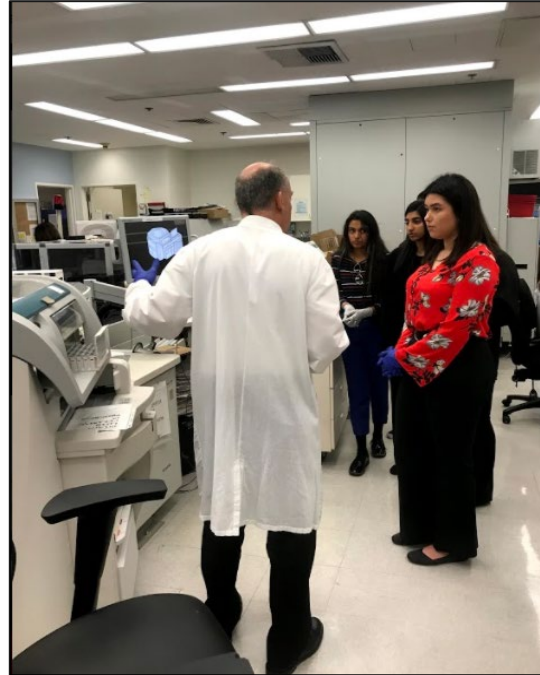
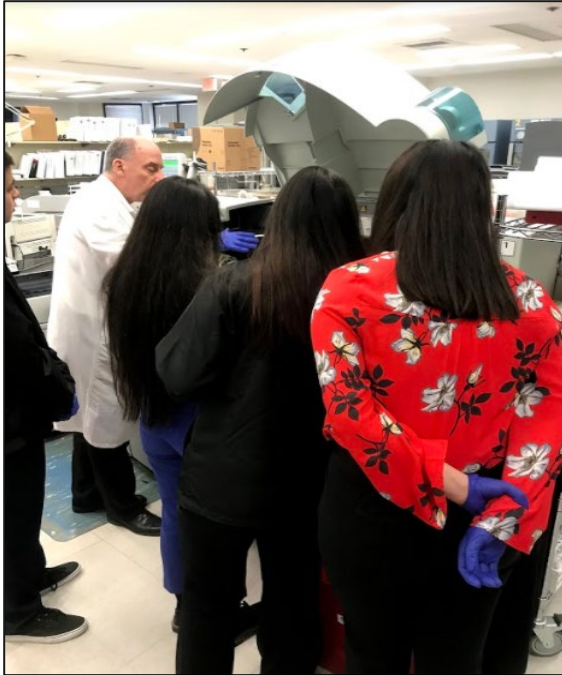
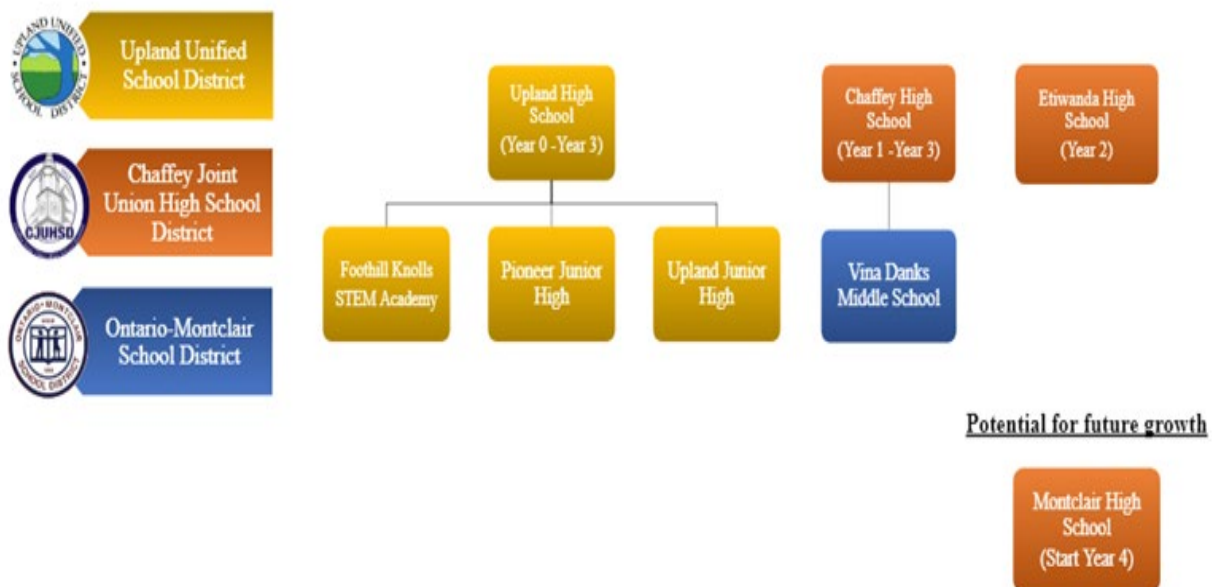


Table 1: Ongoing Program Participation			
School Year	High School	High School Trainers	Junior High
2016 - 2017 (Year 0) Pilot Year	165 <ul style="list-style-type: none"> Upland High 	17 <ul style="list-style-type: none"> Upland High 	64 <ul style="list-style-type: none"> Foothill Knolls
2017 - 2018 (Year 1)	287 <ul style="list-style-type: none"> Upland High Chaffey High 	33 <ul style="list-style-type: none"> Upland High Chaffey High 	139 <ul style="list-style-type: none"> Foothill Knolls Pioneer Upland Vina Danks
2018 - 2019 (Year 2)	486 <ul style="list-style-type: none"> Upland High Chaffey High Etiwanda High 	18 <ul style="list-style-type: none"> Upland High Chaffey High 	91 <ul style="list-style-type: none"> Foothill Knolls Vina Danks
2019 - 2020 (Year 3) In Progress	315 <ul style="list-style-type: none"> Upland High Chaffey High 	19 <ul style="list-style-type: none"> Upland High Chaffey High 	91 <ul style="list-style-type: none"> Foothill Knolls Vina Danks

Figure 6: Ongoing Program Dissemination



Non-Clinical Internships

HCI continued to expand San Antonio's graduate student internship program in 2019, bringing students from various health disciplines on-site and in the community for practicum experiences. Students ranged from undergraduate, graduate, and doctoral levels pursuing degrees in public health, social work, healthcare administration, nutrition, and business administration. These students were matched with projects that met their practicum requirements as well as supported a community need. Additionally, students were connected to various health professionals in and out of the hospital, were exposed to the need for health professionals in the local area, and were encouraged to remain in the region while fulfilling their professional aspirations. Forty one students from the following universities participated in this program:

- California State University San Bernardino – Undergraduate & Graduate Students in Public Health and Health Care Management, Public Health
- Loma Linda University – Graduate students in MPH, MHA, Nutrition (Registered Dietician in training), Health Promotion and Education
- Claremont Graduate University – MPH, MPH/MBA, Biostats/Epi, MD
- Pitzer University – Undergrad - Social Impact/Community Engagement
- California Baptist University – MPH
- California State University Fullerton – Nursing

In 2019, intern opportunities expanded within San Antonio Regional Hospital including Health Information Management, Cardiac Care, Quality, Business Development, and Community Outreach. Projects included:

- Workforce Data Hub
- Handwashing Survey
- Cancer Community Needs Survey
- Colorectal Cancer (CRC) Program
- Community Health Worker Training

Additionally, a Randall Lewis Health Policy Fellow was placed with our Business Development and Physician Recruitment office.

Financial Summary of Community Benefits

Inventory

San Antonio Regional Hospital's primary responsibility is to provide healthcare services; however, its mission does not end there. Every effort is made to reach into the community with additional services and programs in response to the community's needs. A summary and valuation of the 2019 community outreach program follows, along with an accounting of the financial losses sustained in providing medical care to uninsured and underinsured patients.

The hospital's community benefit inventory was completed using software developed by the Catholic Hospital Association and VHA, Inc. in partnership with Lyon Software. The



Community Benefit Inventory for Social Accountability (CBISA) software allowed San Antonio's activities to be summarized into the broad categories outlined in Senate Bill 697.

Valuation

The following table summarizes the 2019 community benefit valuation, delineated by major category.

2019 Community Benefit Valuation	
Community Health Improvement Services	
Category	Benefit
Community Health Education and Support	
Breast Cancer Support Group	\$2,925
Breast Feeding Class	126
Cancer Caregiver Support Group	1,064
Cancer Prevention Education	1,639
Cancer Support Group	1,386
Colorectal Cancer Prevention	1,940
Community CPR & First Aid Classes	1,187
Community Education Calendars	39,924
Community Health Lectures	10,327
Diabetes Adult Education Class	459
Diabetes Adult Support	4,533
Generations Ahead	6,299
Healthy Beginnings	227,924
Infant Care Class	725
Kick/Prenatal Yoga	670
Medical Minutes	59,600
Men's Health Event and Car Show	2,473
Mom's Embracing the Moment	4,056
NICU follow-up Clinic	5,916
Nutrition for Cancer Support	8,075
Nutrition Counseling	936
Parenting Premies	157
Pilates for Cancer Health	2,700
Positive Parenting Class	20
Prepared Childbirth	2,099
Registered Dietician Support	1,113
Safe Sitter Education	1,024
Sibling Classes	436



Susan G. Komen	638
Community Based Clinical Services	
Know Your Numbers Health Screenings	48,878
Healthcare Support Services	
Blood Drive	7,161
Community Health Improvement Program CHIP	508,843
Emergency Medical Services Base Station	552,254
Palliative, Spirituality, & Health	35,972
Taxi Vouchers	8,866
Other Community Needs	
Access to Clinical Care/Physician Shortage	766,805
Community Outreach	6,455
Community Health Improvement Services Total	\$2,325,605
Health Professions Education	
Other Health Professions Education	
Chaffey College Radiology Training	117,161
HCI Non-Clinical Internship Program	35,372
Health Professions Education Total	\$152,533
Subsidized Health Services	
Emergency and Trauma	
Physician Fees: Indigent Care	\$253,778
Hospital Outpatient Services	
Sierra San Antonio Urgent Care	11,911
Subsidized Health Services Total	\$265,689
Financial and In-kind Donations	
Cash Donations	
Cash Donations	\$40,400
In--kind Donations	
Angel Tree Toy Donation	4,515
Meals on Wheels	54,696
Thanksgiving Food Baskets	4,022
Financial and In-kind Donations Total	\$103,633
Community Building Activities	
Community Support	
HCI Community Activities	2,999
Leadership Development	
HCI Policy	7,286



Program Development/Operations	
HCI Planning and Operations	87,772
Workforce Development	
HCI Healthcare Workforce	17,541
Community Building Activities Total	\$115,598
Community Benefit Operations	
Other Resources	
Community Outreach Planning and Operations	1,728
Community Benefit Operations Total	\$1,728
Total Community Benefit	\$2,964,786
Unreimbursed Medical Care (based on the fully allocated cost of care)	
Charity Care (care provided at no cost to patients)	\$2,272,471
Medi-Cal Shortfall*	\$31,695,889
Total Community Benefit Including Unreimbursed Medical Care	\$33,968,360
Bad Debt	\$4,971,653
Total Including Bad Debt	\$38,940,013
*Medi-Cal (reimbursement does not cover the fully allocated cost of care)	



Contact

Additional information regarding San Antonio Regional Hospital, its history and its future, is available at www.sarh.org. Questions regarding this report or the hospital's community benefit activities should be directed to Angelica Baltazar, Executive Director, Healthy Communities Institute at (909) 920-4773.

