



**Annual Report and Plan for Community Benefit
Community Health System
Fiscal Year 2022 (September 1, 2021 - August 31, 2022)**

Submitted to:
Department of Health Care Access and Information
Accounting and Reporting Systems Section
Sacramento, California

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About Community Health System

Community Health System

Community Health System (CHS) is a locally owned, not-for-profit healthcare system based in Fresno, California. Established in 1897, CHS is the region's largest healthcare provider and private employer. With about 10,000 employees and 1,600 affiliated physicians, CHS serves a 15,000 square-mile area that includes Fresno, Kings, Madera and Tulare counties in California's Central Valley. CHS is made up of three entities: Community Medical Centers (hospitals and outpatient centers), Community Provider Network (our affiliated physicians) and Community Care Health (our health plan). Community Medical Centers (CMC) operates its facilities under two hospital licenses: Community Regional Medical Center (CRMC) and Clovis Community Medical Center (CCMC). Fresno Heart & Surgical Hospital (FHS) and Community Behavioral Health Center (CBHC) operate under the CRMC license. Community also operates a cancer institute and several long-term care, outpatient and other healthcare facilities.

For 125 years, Community Health System has been investing in this region – growing a successful healthcare system that supports our community and serves Valley residents. CHS is home to the only Level I Trauma Center and Comprehensive Burn Center between Los Angeles and Sacramento. We serve as the area's "safety net" provider, caring for our region's most vulnerable populations.

Community Regional Medical Center (CRMC)

CRMC has 685 licensed beds and offers Central California's highest level of medical care. CRMC is a leader in comprehensive cardiovascular services, has a Level 3 neonatal intensive care unit, a comprehensive burn center and a full-service 58,000 square-foot Emergency Department. We partner with the University of California San Francisco (UCSF) Fresno Medical Education Program to train about 300 residents and 50 fellows annually in residency and fellowship training programs including emergency medicine, obstetrics/gynecology, pediatrics and pulmonary and critical care.

Fresno Heart & Surgical Hospital (FHS)

FHS is a small specialty hospital in Central California with 48-licensed beds. FHS is known for its excellent patient experience and exemplary cardiac, vascular and bariatric surgery services.

Community Behavioral Health Center (CBHC)

CBHC is the Valley's only inpatient mental health facility for those in need of acute psychiatric care. CBHC provides 24-hour care to patients based on their individual level of need. The center accepts voluntary admittance and non-ambulatory patients capable of transferring themselves.

Clovis Community Medical Center (CCMC)

CCMC has 352 licensed beds, an expansive Emergency Department (ED) and provides specialty care for patients, including comprehensive cardiac care, women's services and labor and delivery. CCMC is home to Community Cancer Institute (CCI) and the Marjorie E. Radin Breast Care Center, part of Central California's premier comprehensive cancer care program, which offers a multi-disciplinary care team clinic, screenings and diagnostics, as well as cancer treatments using the most advanced technology available.

Community Health System

Community Medical Centers

Community Provider Network including Community Health Partners, a medical foundation

Community Care Health

Outpatient Centers

Advanced Medical Imaging

Community Cancer Institute

Deran Koligian Ambulatory Care Center

Marjorie E. Radin Breast Care Center

Long-Term Care Center

Community Subacute & Transitional Care Center

Hospitality Home

Terry's House

Specialty Centers

Advanced Diagnostic Testing Center

Bob Smittcamp Family Neuroscience Institute

Disease Management Center

Leon S. Peters Burn Center

Leon S. & Pete P. Peters Future Generations Center

Leon S. Peters Rehabilitation Center

Marjorie E. Radin Breast Care Center

Primary Stroke Center

Surabian Dental Care Center

Table Mountain Rancheria Trauma Center

Wound Care Centers

Clinics

Community Gynecologic Oncology Specialists
Community Maternal Fetal Medicine – Subhashini Ladella, MD
Community Medical Oncology Specialists
Community Neurosciences Institute – Clovis
Community Neurosciences Institute – Fresno
Community Neurosciences Institute – River Park
Community Neurosciences Institute – Visalia
Community Pediatric Care - Halifax
Community Pediatric Specialists
Community Perinatology
Community Psychiatry and Rehab
Community Primary Care – Ali M. Fayed, MD
Community Primary Care – Alluvial
Community Primary Care – Christopher Kuebrich, MD & Esmeralda Arreola, MD
Community Primary Care – Halifax
Community Primary Care – Sussex Way
Community Specialty Surgery Associates
Copeland Medical Healthcare Partners, A Member of Community Health Partners
M2 Oncology, A Member of Community Health Partners
Sierra Endocrine Associates

Affiliations

California Health Sciences University
Central California Faculty Medical Group
Family Healthcare Network
Samuel Merritt College
University of California, San Francisco, School of Medicine
University of the Pacific

Accreditation

Every three years, The Joint Commission inspects participating hospitals to gauge the quality of care. CHS hospitals are fully accredited.

Mission, Vision and Values



Mission

Community Health System exists to better the lives of all those we serve.

Vision

We will be the trusted health leader, opening new doors to educate, innovate and expand our care and services across the Valley.

Values

Humanity: to do right by all people

Duty: to care, teach and serve is our calling

Excellence: to reach beyond expectations in all we do

Ingenuity: to fearlessly forge new paths forward

Commitment to Diversity

As a locally owned and operated healthcare network, CHS respects and celebrates the Central Valley's rich and diverse heritage. Our commitment to diversity and inclusion is a cornerstone of

our patient care and work culture. All are welcome as valued members of our community whether employee, physician, student or visitor. We have mandatory education for all employees on respectful LGBTQ+ interactions and California laws against workplace bullying and discrimination.

CHS prides itself on being a diverse healthcare provider. This is reflected in our workforce with 37% of clinical and non-clinical staff identifying as Latino, 23% of Asian descent and 4% as Black. 70% of our workforce represents ethnicities other than white and 75% of our workforce identifies as female. 43% of Community’s senior leadership are women and 26% of our leaders represent an ethnicity other than white.



Governance

CHS is governed by a volunteer Board of Trustees comprised of local civic leaders and physicians. The Trustees set the vision and policy direction for the organization and approve the organization's strategic, business and financial plans. The Board of Trustees reviews and adopts the Community Health Needs Assessment, the annual community benefit report and our impact on the areas of greatest need.

Senior management encourages initiatives to expand access to healthcare services in our community and is committed to investing in and partnering with local, nonprofit organizations working in socio-economically disadvantaged neighborhoods and rural populations. A multi-stakeholder committee ensures Board and senior management directives are fulfilled and approves financial allocations to community benefit programs, outreach and education. Community benefit and community service are at the heart of our healthcare system.

FY22 CHS Board of Trustees

(CHS Board of Trustees who served from September 1, 2021 through August 31, 2022)

Farid Assemi, *Chair*

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Chandrasekar Venugopal, MD

Craig S. Castro, President & Chief Executive Officer

Commitment to the Community

CHS recognizes its obligation to provide service above and beyond its role as a system of healing facilities. Community's hospitals provide financial assistance to those in the community who cannot afford services, or whose health insurance does not cover all services provided, and we invest in the community to increase access to healthcare services and improve health. This report demonstrates tangible ways in which CHS is fulfilling its mission to better the lives of all those we serve through humanity and ingenuity.

Service Area

Community's hospital facilities are located in the heart of California's San Joaquin Valley near major interstate highways and three popular national parks.

- Community Regional Medical Center is located at 2823 Fresno St., Fresno, CA 93721
- Clovis Community Medical Center is located at 2755 Herndon Ave., Clovis, CA 93611
- Fresno Heart & Surgical Hospital is located at 15 E. Audubon Dr., Fresno, CA 93720
- Community Behavioral Health Center is located at 7171 N. Cedar Ave., Fresno, CA 93723

The hospitals define their primary service area as Fresno, Kings, Madera and Tulare counties.

Community Health System's Service Area Snapshot

Population

- The population is 1,761,174.
- Children and youth make up 28.8% of the population, 59.2% are adults and 12% are seniors, ages 65 and older.

Race and Ethnicity

- More than half of the population (57.0%) identify as Hispanic or Latino.
- At 29.1% of the population, whites are the second largest race/ethnic group in the service area.
- Asians comprise 7.2% of the population and 3.6% of the population are Black.

Languages

- Spanish is spoken in 38.5% of the homes, 54.1% of the residents speak English only and 4.3% speak an Asian language in the home.

Poverty

- Among residents, 20.5% live at or below 100% of the federal poverty level (FPL), which is higher than the state rate (12.6%).
- 44.2% of the population live at 200% of FPL.

Community Health Needs Assessment

CHS completed a Community Health Needs Assessment (CHNA) in 2022 as required by state and federal law. The CHNA is a primary tool used by CHS facilities to determine its community benefit plan, which outlines how it will give back to the community in the form of healthcare and other community services to address unmet community health needs. The assessment incorporated components of primary data collection and secondary data analysis that focused on the health and social needs of the service area.

Targeted interviews and focus groups were used to gather information and opinions from persons who represent the broad interests of the community served by CHS. Fifty (50) key informant interviews were completed during October and November 2021. Interviewees included leaders and/or representatives of medically underserved, low-income and minority populations, local health or other departments or agencies that have current data or other information relevant to the health needs of the community. In addition, 59 focus groups were held in the region, led by eight organizations. The focus groups included 473 community members and were held in-person or virtually. Focus groups were held in five languages to meet the needs of the participants. Finally, community-based organizations and other groups distributed a community survey in online and paper formats to area residents; 4,856 usable surveys were received. Input was also obtained from County Departments of Public Health and Departments of Behavioral Health.

Significant Health Needs

Secondary data collection resulted in identifying community health needs that were further assessed in the primary data collection – key informant interviews, focus groups and a community-wide survey. The identified significant needs included (in alphabetical order):

- Access to child care
- Access to healthcare (includes dental and mental healthcare)
- Adverse childhood experiences
- Chronic diseases
- COVID-19
- Crime and violence
- Economic stability
- Education
- Environmental conditions (includes water and air)
- Food insecurity
- Internet access

- HIV/AIDS and STIs
- Housing and homelessness
- Maternal and child health
- Mental health
- Nutrition and physical health (includes overweight and obesity)
- Preventive care and practices (includes screenings, immunizations/vaccines)
- Substance use (alcohol and drugs)
- Tobacco and nicotine
- Transportation

Community respondents were asked to rank the health outcomes and social determinants of health that contribute to disease in the region. The results of the responses from the priority ranking were compared to the secondary data collected for each health need and the primary data collected from a community survey, focus groups and key informant interviews. As a result, the top five prioritized health needs were identified:

1. Mental health
2. Maternal and child health
3. Access to care
4. Chronic diseases
5. Nutritional and physical health

The complete CHNA report can be accessed at: <https://www.communitymedical.org/about-us/community-benefit>. We welcome feedback on the CHNA and Implementation Strategy. Please send your feedback to Chelsea Aivazian, Project Manager, Community Benefit at caivazian@communitymedical.org.

Addressing Priority Health Needs

In FY22, CHS engaged in activities and programs that addressed the priority health needs identified in the 2020-2022 Implementation Strategy. While CHS participates in local and regional collaborative efforts around all the identified health needs from the 2019 CHNA, we committed to community benefit efforts that addressed access to care, economic security, obesity/healthy eating and active living/diabetes, maternal and infant health and mental health. Activities and programs that highlight CHS' commitment to the community are detailed below.

Access to Care

Response to Need

Fresno Medical Respite Center

CHS is a founding hospital partner in the Fresno Medical Respite Center, allowing for safe discharge for persons who are experiencing homelessness to continue their recovery. The Center provides eight beds for men and four beds for women at the Fresno Rescue Mission in downtown Fresno.

Ryan White HIV/AIDS Program

CHS partners with Family Health Care Network's Special Services Clinic to provide vital and timely healthcare and case management for patients with HIV/AIDS and their families. In FY22, the clinic provided care to patients under the federal Ryan White grant.

Support Groups and Education

Community Cancer Institute (CCI) hosted support groups for 336 cancer survivors and their families. The support groups, held in English and Spanish, were open to all persons touched by cancer, regardless of where they received cancer care. Support groups included Hope Matters, nutrition and head and neck cancers. Fighting Cancer Through Nutrition is a free, online class for survivors who want to maximize their quality of life. Fifty-seven community members participated in FY22.

Patient Financial Navigator Program

CCI supported a financial counselor to help cancer patients and families needing support to navigate the costs of care. The counselor met with patients, reviewed treatment plans and provided guidance to alleviate concerns about finances.

Assistance with Insurance Coverage

In partnership with Fresno's County Department of Social Services, CHS provided enrollment for uninsured patients who presumptively qualified for Medi-Cal. In FY22, 428 persons were enrolled in Medi-Cal through the program.

Transportation Services

Transportation vouchers were made available to patients and families having difficulty accessing care because of transportation challenges.

Sexual Assault Forensic Exam Program (SAFE)

Community Regional Medical Center's Emergency Department provided Fresno County's only around-the-clock, in-hospital testing and examinations for sexual assault and rape victims. Twelve specially trained nurses collected, preserved and securely stored evidence collected from adult and child victims and from suspects under police custody. Sexual Assault Forensic Exam Program nurses helped gather evidence of sexual violence and ensured patients were safely discharged. Nurses also provided follow-up evaluations for child victims of sexual abuse and helped connect victims and their families to counseling services. In FY22, 178 persons were served.

Trauma Prevention Program

CRMC provides the only Level I Trauma Center and comprehensive burn center in the area. An injury prevention specialist provided extensive injury prevention outreach in schools and other community-based venues, including car seat safety checks and education on topics like fall prevention, bicycle and pedestrian safety, the dangers of distracted driving for teens and smarter driving tips for older adults.

In partnership with the Fresno Police and Project ChildSafe, 10,000 gun locks were distributed. Patients were asked about gun ownership and provided with a cable lock to secure their gun as part of routine patient screenings.

Gang Intervention Specialist

A CRMC and UCSF Fresno gang intervention specialist met with willing patients associated with gangs in the ED. This program is part of a grant funded pilot study to intervene with gang violence victims while they are recovering in the hospital to interrupt the cycle of violence and reduce the number of those getting hurt or hurting others.

El Porvenir Community Resource Fair

CHS provided bilingual health-related resources to the unincorporated community of El Porvenir, in western Fresno County during their Community Resource Fair. This was an opportunity to bring

services and educational resources directly to farmworker residents.

Economic Security

Response to Need

Beat the Heat Community Event

CHS partnered with Fresno City Councilmember Tyler Maxwell to provide East-Central Fresno's 'Beat the Heat' summer events. Two community activities consisted of water games, physical activities and health and educational resources to local underserved neighborhoods.

Food to Share Program

CHS invested \$100,000 to assist families through Fresno Metro Ministry's Food to Share program which provides surplus food from local farmers, food processors and grocery stores in Fresno to families in need. The program operated a fleet of trucks that collected excess food for the food redistribution, which was made available to low-income families in southwest Fresno with young children, seniors and disabled adults via a network of nearly 30 organizations throughout urban and rural Fresno County. CHS has invested more than \$365,000 in this program over the past three years.

Catholic Charities Rural Outreach and Diaper Supply Program

CHS provided funding to support Catholic Charities' diaper supply program. In addition to diapers, families of children ages 0-3 received shelf-stable and fresh food items. CHS also supported Catholic Charities' Rural Outreach program, which provided assistance to families and children in need during the ongoing COVID-19 and financial crises.

Backpack Pantry Program at Yokomi Elementary

CHS funded more than \$36,000 to establish a Backpack Pantry Program at Yokomi Elementary School in downtown Fresno. CHS contributions provided students and their families impacted by the pandemic and experiencing chronic hunger with backpacks to take home twice a month filled with nutritious food.

Sweet Potato Project

CHS supported the West Fresno Family Resource Center's Sweet Potato Project, a prevention program for African American youth, ages 12-15, that improves economic security and addresses socioeconomic challenges. The Sweet Potato Project provides mentorship to students while they learn leadership and entrepreneurial skills in partnership with Fresno State's Lyles School of Business and Jordan College of Agricultural Sciences and Technology. Students practice these skills by growing, harvesting and selling their own sweet potatoes.

Obesity/Healthy Eating and Active Living/Diabetes

Response to Need

Community Diabetes Education

Community Diabetes Education provided care to persons who were otherwise unable to receive diabetes self-management education, including bilingual services to a high concentration of Spanish-speaking patients. As an accredited Sweet Success program affiliate, the Diabetes Education Center provided education targeted to women diagnosed with diabetes during pregnancy. Community members received education on healthy eating habits and controlling diabetes during pregnancy

HealthQuest Seminars

Live, online health education featured health professionals during eight seminars discussing topics related to identified health needs, including nutrition and chronic disease awareness and treatment.

MedWatch Today Television Series

CHS produces a weekly television show, *MedWatch Today*, as part of their commitment to increasing public awareness of timely health topics. The series featured topics that included diabetes prevention and management, COVID-19, heart disease, mental health and many more. *MedWatch Today* airs Saturdays on KSEE24, an NBC affiliate, and Sundays on CBS47. In FY22, *MedWatch Today* produced 20 original episodes, featured nearly 50 physicians and was watched by more than 20 million people on TV or online.

Neighborhood Dance Fitness

CHS provided funding support for Every Neighborhood Partnership's Dance Fitness program, ensuring low-income communities receive the tools they need to lead an active lifestyle. Participants enjoyed exercising in safe places with consistent schedules.

Community Collaboration

CHS staff participated in the Fresno Community Health Improvement Partnership's (FCHIP) Diabetes Collaborative and the Fresno County Food Security Network.

Maternal and Infant Health

Response to Need

Pediatric Asthma Program

CHS provided a respiratory care practitioner at a southcentral Fresno clinic, one of the city's most underserved areas. Parents received two, hour-long sessions with additional education as needed. Education was provided in English and Spanish. In FY22, 113 persons were served.

Mother's Resource Center

The Mother's Resource Center offered a variety of breastfeeding and parent education classes to new parents, regardless of where they delivered their babies. Classes included preparation for childbirth, breastfeeding support, Mommies Making Milk and Mama's Café Club, a postpartum resource/support network for all breastfeeding moms. Classes were offered in English and Spanish.

SIDS Prevention and Education Program

CHS supported BLACK Wellness and Prosperity Center's ongoing outreach efforts to combat sudden infant death syndrome (SIDS) through education on safe sleep practices.

Community Collaboration

CHS staff participated in the California Preterm Birth Initiative.

Mental Health and Resiliency

Response to Need

Youth Mental Health Program

CHS supported Care Fresno's Youth Mental Health program. Care Fresno's staff live and work in socio-disadvantaged neighborhoods and apartment complexes in southwest Fresno. Staff worked closely with children and families, providing academic, social and emotional assistance.

Clovis Unified School District's Social Emotional Wellness Curriculum

CHS provided \$50,000 as part of its multi-year funding to the Foundation for Clovis Schools as part of Clovis Unified School District's social emotional wellness curriculum, including *Specialized Suicide Prevention and Intervention Training* programs. Funds were aimed at K-12 students and their families during the COVID-19 crisis and beyond and provided additional mental health intervention training to educational professionals, including school psychologists. Efforts were focused on addressing social and emotional issues in response to incidents of suicide and attempted suicide, anxiety over LGBTQ+ and racial issues and increased involuntary mental health holds among youth.

To prevent student self-harm, Applied Suicide Intervention Skills Training (ASIST) was provided to school staff. The skills training allowed staff to better recognize when someone may be thinking about suicide and know to connect with that person to support them.

Birney Elementary Resiliency and Reading Program

CHS invested \$22,747 in Birney Elementary School's technology and reading program, which is located in a low socioeconomic area of central Fresno. The funds were used in the Title 1 school to

purchase iPads, iMacs, headphones and other tech accessories. In addition, digital workshop and classroom library materials were used as incentives as part of the school's mental health, resilience and reading programs.

Bridge Program

CHS provided 396 individuals with 752 buprenorphine medication encounters to suppress cravings and withdrawal symptoms from opioid use. The treatment provided patients with immediate attention in the hospital setting, rather than being referred to a rehabilitation center, which may take weeks or months. Additionally, the Bridge Program provided educational information to the greater community about substance abuse.

Marjaree Mason Center's Domestic Violence Victim Safe House

CHS provided \$5,000 to help fund maintenance and upkeep for Marjaree Mason Center's Safe House. The community refuge provides safe lodging for adults and children fleeing domestic violence.

Valley Caregiver Resource Center (VCRC)

CHS provided funding for respite to low-income caregivers who otherwise would be unable to take a break. Caregivers supported by VCRC provide healthcare, grooming, medication assistance and feeding to their adult patient loved one who has suffered traumatic brain injuries.

CASA of Fresno & Madera Counties

CHS financially supported CASA of Fresno & Madera Counties to recruit, train and support advocates who speak out for the best interests of abused and neglected children in the foster care system.

Community Collaboration

CHS staff participated in the Fresno County Trauma-informed Network of Care and the Trauma and Resiliency Network.

Other Community Benefit Services

CHS provided community benefit services in addition to those programs that focused on addressing priority health needs.

Health Professional Education

Definition: Education programs for physicians, nurses, nursing students and other health professionals.¹

Graduate Medical Education

CHS has more than 300 residents training in nine specialties and more than 50 fellows training in 18 subspecialties in partnership with UCSF Fresno. In addition, third- and fourth-year medical students are trained annually on a rotating basis in CMC's hospitals. Rotating medical students include those in UCSF's San Joaquin Valley Program in Medical Education (SJV PRIME). SJV PRIME trains local students to provide culturally-competent, accessible care in the San Joaquin Valley. More than one-third of graduating residents stay in the Central Valley to practice medicine, making this program critical to addressing the region's access to care issues.

CHS has an agreement with the California Health Sciences University (CHSU), a private institution offering doctoral degrees through its College of Osteopathic Medicine, which allowed CHSU's medical students to rotate through CMC's facilities as part of their training.

CHS, in association with the Trauma Research and Education Foundation of Fresno, funded a Pre-Medical Surgical Internship Program (PSI) student stipend.

Nursing

CHS had 1,357 nursing students participate in hospital clinical rotations, including those from Fresno Community College, California State University, Fresno, Gurnick Academy, West Hills College, San Joaquin Valley College, Fresno Adult School, Madera Community College and National University.

¹ Community benefit category definitions source: Catholic Health Association (2020) *A Guide for Planning and Reporting Community Benefit*. <https://www.chausa.org/communitybenefit/a-guide-for-planning-and-reporting-community-benefit>

Sonography Programs

Community offers two sonography programs at CRMC to help address the healthcare provider shortage throughout the region: the Diagnostic Medical Sonography Program and the Advanced Cardiac Sonography Program. The 18-month Diagnostic Medical Sonography Program is one of California's few hospital-based sonography programs and is the Central Valley's only multidisciplinary Commission on Accreditation of Allied Health Education Programs (CAAHEP)-accredited sonography program. The Advanced Cardiac Sonography Program is an 18-month hybrid program designed to create a career track for sonographers practicing at an advanced level in the echocardiography laboratory by providing a CAAHEP-accredited educational pathway for clinical and administrative advancement.

Other Health Professional Education

Health professions students were educated and performed their clinical hours and/or internship rotations at CMC facilities. Clinical rotations were provided for pharmacy students, dental residents and UCSF Fresno provided training in three physician assistant residency programs, including acute care/trauma surgery, emergency medicine and orthopedic surgery.

Clinical Pastoral Education of Central California (CPECC)

The nonprofit CPECC training center, started by CHS in collaboration with partner hospitals and faith groups, provided classroom instruction and hospital experiences in Fresno, primarily at Community Regional Medical Center. CHS supported this program to train chaplains to work with underserved, rural populations like farmworkers, providing spiritual and emotional support. As a result, CPECC chaplains provided spiritual and resiliency support to labor support staff and temporary migrant laborers. In addition, monthly informational events were presented.

Research

Definition: Research is the study or investigation to generate generalizable knowledge made available to the public. Research includes the communication of findings and observations, including publication in a journal. Internally funded research and research funded by tax-exempt or government entities are eligible for reporting.

As part of the comprehensive medical education program conducted in partnership with UCSF Fresno, research studies were conducted at CHS facilities and in the community during FY22. Studies conducted by CHS and UCSF Fresno researchers addressed specific San Joaquin Valley issues including methamphetamine exposure and birth outcomes, pre-term birth among Hmong, Latino and Black populations and environmental chemicals and pregnancy effects.

Cash and In-Kind Donations

Definition: Funds and in-kind services donated to community groups and nonprofit organizations.

Cash Donations

Funds were donated to nonprofit community groups and local organizations. The support of these organizations furthered the health system's mission and addressed the community health needs identified through the CHNA. In FY22, CHS provided funds to more than 35 organizations.

CHS supported humanitarian efforts in Armenia through the International Patient Services Program. CHS provided financial and in-kind support for medical missions to Armenia. Support included providing healthcare professionals, medical equipment and supplies that go to primarily rural areas with little access to healthcare services.

In-Kind Donations

CHS employees represented the hospital on community boards and committees that focused on improved health equity and the social determinants of health.

Community Benefit Operations

Definition: Direct and indirect costs associated with assigned staff, community health needs assessments, community benefit planning, tracking, reporting, evaluating and operations.

In FY22, community benefit operations included:

- Community benefit staff salary, benefits and expenses
- Administrative support for community benefit
- Community benefit consultants
- Community Health Needs Assessment

Community Building Activities

Definition: Activities that support community assets by offering the expertise and resources of the hospital organization. These activities may address the root causes of health problems or the determinants of health, such as education, homelessness, poverty and the environment.

Environmental Improvements

The CHS sustainability team sought innovative ways to reduce and recycle clinical and nonclinical waste, including paper, sharps, disposable lead wires and cloth towels from operating rooms. CHS green efforts diverted waste from local landfills. Additionally, reclaimed water is utilized for nearly all landscaping irrigation, recycling millions of gallons of water a year. CHS also has 110 clean vehicle charging stations available on its campuses.

Workforce Development

Project SEARCH is a dedicated program focused on providing education and training to young adults with intellectual and developmental disabilities. Since 2017, CHS has served as a vocational training site for disabled adults through Project SEARCH. Participants receive experience necessary to find and maintain employment. In FY22, 45 students worked alongside CHS staff in clinical and nonclinical areas including NICU, antepartum, postpartum, environmental services, materials management, kitchen and plant operations.

Financial Summary of Community Benefit

The CHS financial summary of community benefit for FY22 (September 1, 2021, to August 31, 2022) is summarized in the table below. The community benefit costs comply with Internal Revenue Service instructions for Form 990 Schedule H. The methodology for calculating shortfalls in government-funded public programs is based on the allowable cost-to-charge ratio.

Community Benefit Categories	Net Benefit
Charity Care/Financial Assistance ¹	\$15,030,000
Unreimbursed Cost of Care for Patients with Government-funded Insurance ²	\$213,920,000
Education and Research ³	\$38,915,718
Other for the Broader Community ⁴	\$669,891
Total Quantifiable Community Benefit	\$268,535,609

¹ Financial Assistance includes traditional charity care write-offs to eligible patients at reduced or no cost based on the individual patient's financial situation.

² Unpaid costs of public programs include the difference between costs to provide a service and the rate at which the hospitals are reimbursed.

³ Costs related to the health professions education programs and medical research that the hospitals sponsor.

⁴ Includes non-billed programs such as community health education, screenings, support groups, support services, cash and in-kind donations and community benefit operations.

Community Benefit Plan FY23

Significant Needs the Hospitals Intend to Address

CHS intends to take actions to address the following health needs that were identified in the FY22 CHNA and **detailed in the FY23-FY25 Implementation Strategy:**

- **Access to Healthcare**
Including access to local primary, preventative and specialty care services, including HIV/AIDS/STIs
- **Chronic Diseases**
Including diabetes, heart disease, stroke, hypertension, cancer, asthma, obesity, nutrition and physical activity
- **Economic Stability**
Including food insecurity, crime and violence, homelessness and Internet access
- **Maternal and Child Health**
- **Mental Health**
Including Adverse Childhood Experiences (ACEs) and substance abuse

Access to Healthcare

Goal: Increase access to healthcare services, including primary care, preventative care and specialty care services, including HIV/AIDS/STIs, for medically underserved residents.

Strategies

1. Provide health insurance enrollment assistance for persons who are uninsured or underinsured.
2. Provide transportation support to increase access related to healthcare services.
3. Partner with Family Health Care Network's Special Services Clinic to administer the federal Ryan White HIV/AIDS Program and provide healthcare and case management services for patients and their families.
4. Provide in-hospital testing and examinations for those who have experienced sexual assault and rape through the Sexual Assault Forensic Examiners (SAFE) Program.
5. Offer education and environmental modifications to reduce the incidence of injury, disability and death due to trauma through the Trauma Prevention Program.
6. Work in collaboration with community agencies to increase access to healthcare services, including primary care, specialty care and mental health services.
7. Provide cash and in-kind support to nonprofit community organizations that provide programs and services to expand healthcare access.

Chronic Diseases

Goal: Reduce the impact of chronic diseases on health and increase the focus on chronic disease prevention and treatment education, including through nutrition and physical health.

Strategies

1. Provide diabetes self-management education through the Community Diabetes Education (CDE) program. Host the Sweet Success program, which supports women diagnosed with diabetes during pregnancy.
2. Facilitate health education workshops and presentations on chronic disease prevention, treatment and management, including physical activity, exercise and nutrition.
3. Participate in health and wellness fairs and offer preventive screenings.
4. Provide public health education in the media and at community health awareness events to encourage healthy behaviors and prevent chronic diseases.
5. Provide support groups to assist those with chronic diseases.
6. Work in collaboration with community agencies to address the causes and management of chronic diseases.
7. Provide cash and in-kind support to nonprofit community organizations that provide chronic disease-focused programs and services.

Economic Stability

Goal: Increase access to resources to address homelessness, crime and violence, food insecurity and access to the internet.

Strategies

1. Connect residents to linguistically and culturally appropriate services, including internet access resources, housing resources and food availability.
2. Facilitate violence prevention and family stabilization initiatives.
3. Work in collaboration with community organizations and agencies to address the impact that economic stability has on health and wellness.
4. Provide cash and in-kind support to nonprofit community organizations that provide programs and services that address food insecurity, crime and violence, homelessness and internet access.

Maternal and Child Health

Goal: Improve the health of new mothers, infants, adolescents and teens through preventive and postpartum practices.

Strategies

1. Provide community health promotion and education programs targeting maternal, adolescent and teen health issues.
2. Support breastfeeding initiatives.
3. Facilitate increasing access to HPV vaccinations and HPV vaccination training.
4. Encourage screenings for developmental milestones and for prenatal and postpartum depression.
5. Offer education and support for parents through Community's Mother's Resource Center.
6. Work in collaboration with community agencies and healthcare providers to increase access to prenatal care, safe birthing options and comprehensive child healthcare.
7. Provide cash and in-kind support to nonprofit community organizations that provide programs and services to improve maternal and child health.

Mental Health

Goal: Increase access to mental health services, including Adverse Childhood Experiences (ACEs) and substance abuse, in the community.

Strategies

1. Help individuals and families connect to needed resources (food, housing, navigating parenting, relationships, etc.) to reduce mental health crises.
2. Provide appropriate medications in the emergency departments to support patients experiencing withdrawal symptoms from substance abuse through the Bridge Program.
3. Offer community health education, lectures, presentations and workshops focused on mental health topics, including ACEs, relational health and positive coping skills.
4. Increase access to mental health screening, including ACEs screening and psychosocial distress screening.
5. Work in collaboration with community agencies to increase access to mental healthcare services, address trauma and build resilience.
6. Provide cash and in-kind support to nonprofit community organizations that provide mental health services, programs and resources.

Evaluation of Impact

CHS is committed to monitoring and evaluating key initiatives to assess the programs and activities outlined in this Community Benefit Plan. We collect, document and track measures, such as the number of people reached/served and collaborative efforts to address health needs. An evaluation of the impact of CHS' actions to address these significant health needs will be reported in the next scheduled CHNA in 2025.

Other Health Needs Identified in the CHNA Not Primarily Addressed

Community is dedicated to ensuring the region's identified health needs are addressed whenever possible. Taking into consideration our existing health system and community resources, CHS will primarily focus our resources on the five previously identified health needs and will not primarily address the other needs identified in the CHNA including child care, education, tobacco/nicotine and transportation. CHS does not intend to directly emphasize environmental conditions outside of the ongoing efforts to identify innovative ways to reduce and recycle clinical and nonclinical waste, and utilize reclaimed water for landscaping irrigation. Additionally, CHS does not intend to specifically emphasize COVID-19 interventions but will continue to deliver acute medical care and be a community resource for COVID-19. CHS will strive to impact the other identified health needs as they fall within our areas of focus and expertise and as resources allow. We will continue to look for opportunities to partner with other organizations that are addressing these needs where we can make a meaningful contribution.