

# 2022 Community Health Needs Assessment



Kaiser Permanente Vacaville Medical Center

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# Kaiser Permanente Vacaville Medical Center 2022 Community Health Needs Assessment

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# Kaiser Permanente Vacaville Medical Center 2022 Community Health Needs Assessment

## Summary

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

Every three years Kaiser Permanente Vacaville Medical Center conducts a community health needs assessment (CHNA). The CHNA process is driven by a commitment to improve health equity and is intended to be transparent, rigorous, and collaborative. Our Community Health team has identified and prioritized needs unique to our service area, based on community-level secondary data and input from those who represent the broad interests of the community. Wherever possible, we have applied a racial equity analysis to data collection and analysis.

For the 2022 CHNA, Kaiser Permanente Vacaville Medical Center has identified the following significant health needs, in priority order:

1. Access to care
2. Housing
3. Income & employment
4. Mental & behavioral Health
5. Community safety
6. Transportation

To address those needs, Kaiser Permanente Vacaville Medical Center has developed an implementation strategy (IS) for the priority needs it will address, considering both Kaiser Permanente's and the community's assets and resources. The CHNA report and three-year IS are publicly available at <https://www.kp.org/chna>.

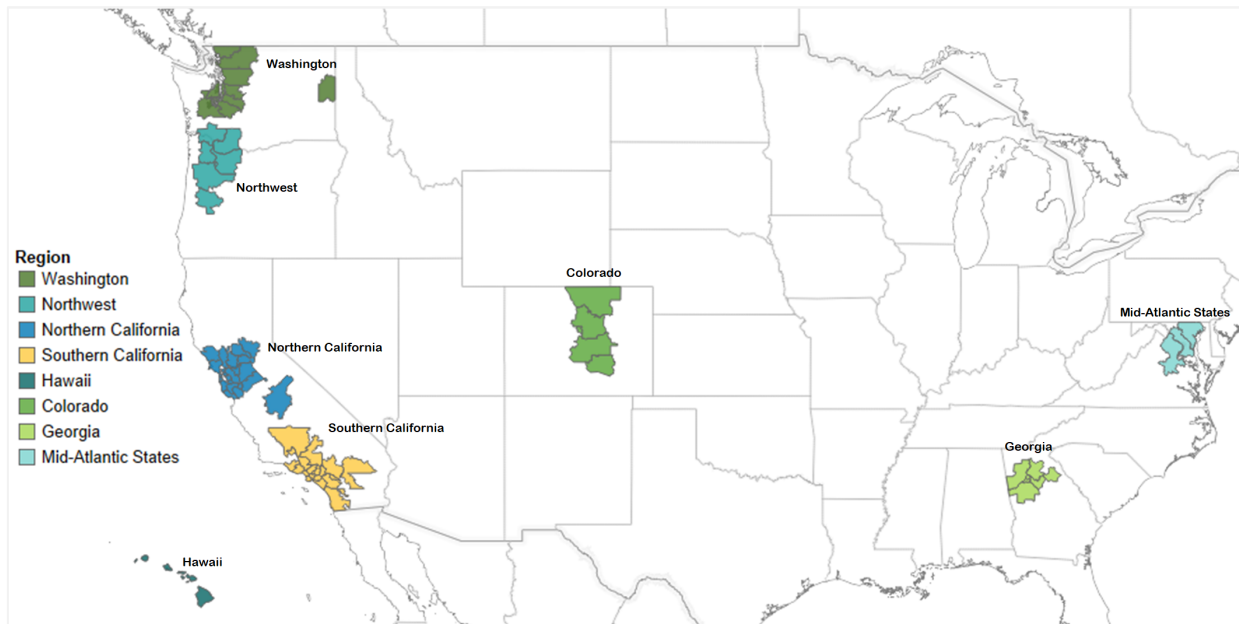
# Introduction/background

## About Kaiser Permanente

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

Kaiser Permanente is committed to helping shape the future of health care. Founded in 1945, Kaiser Permanente has a mission to provide high-quality, affordable health care services and to improve the health of our members and the communities we serve. We currently serve 12.5 million members in 8 states and the District of Columbia. Care for members and patients is focused on their total health and guided by their personal Permanente Medical Group physicians, specialists, and team of caregivers. Our expert and caring medical teams are empowered and supported by industry-leading technology advances and tools for health promotion, disease prevention, state-of-the-art care delivery, and world-class chronic disease management. Kaiser Permanente is dedicated to care innovations, clinical research, health education, and the support of community health.

Kaiser Permanente regions and CHNA service areas



## About Kaiser Permanente Community Health

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

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

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

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

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

## Kaiser Permanente's approach to community health needs assessment

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

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

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

## Community served

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

### Vacaville service area

 Kaiser Permanente hospital    Kaiser Permanente medical offices





## Vacaville service area demographic profile

Total population:	313,886
American Indian/Alaska Native	0.5%
Asian	11.2%
Black	10.7%
Hispanic	30.3%
Multiracial	5.5%
Native Hawaiian/other Pacific Islander	0.7%
Other race/ethnicity	0.4%
White	40.8%
Under age 18	23.4%
Age 65 and over	14.6%

## Impact of structural racism in our communities

Hundreds of public health departments and other government agencies across the U.S. have declared racism a public health crisis. By structuring opportunity and assigning value based on how a person looks, racism operates at all levels of society and denies many individuals and communities the opportunity to attain their highest level of health. Racism is a driving force in social determinants of health like housing, education, and employment, and is a barrier to achieving health equity.

The inequality and disparities that have existed for people of historically underrepresented groups, such as communities of color, women, and low-income communities, have been made more visible by the COVID-19 pandemic. Data show that Hispanic, Black, and Indigenous populations are disproportionately affected by the disease and its economic impacts. In addition to the health crisis and amplification of existing health disparities, COVID-19 has also brought troubling reports of bias and discrimination against Asian Americans and others.

Since summer 2020, we've witnessed a raising of the consciousness of Americans and the world to a reality that we can no longer ignore: the treatment of Black Americans in our country is unacceptable. This is a moment in time when we must stand together against the racism and social injustice that remain endemic in our society and create long-term trauma that damages individuals' and communities' physical, mental, and social health. By pairing an acknowledgment of history with community-level data, we can work together to address the impacts of racism and discrimination.

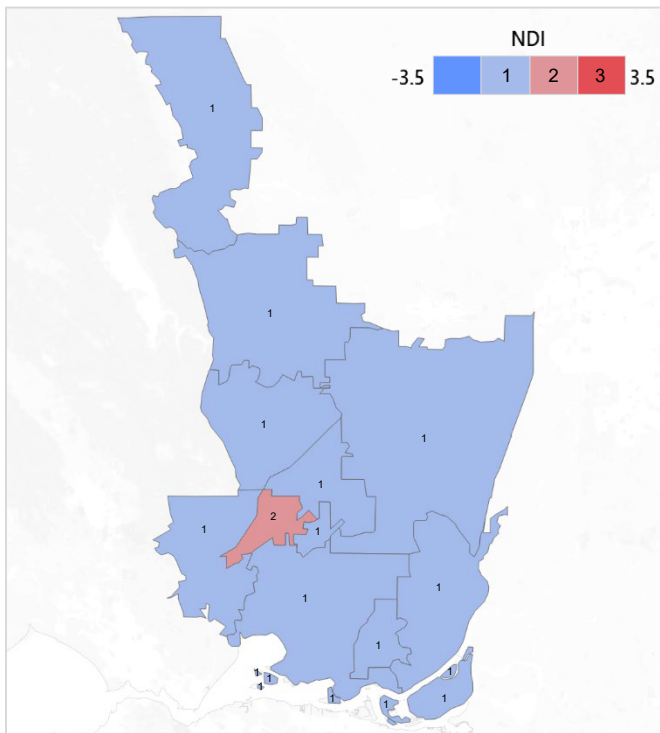
## Neighborhood disparities in the Vacaville service area

The Neighborhood Deprivation Index (NDI) is a validated scale comprised of several of the social factors associated with lack of opportunity to be as healthy as possible. These measures are proxies for underlying determinants that disproportionately affect communities of color, including lack of employment opportunities, racist policies and practices, and unequal treatment by educational and criminal justice systems.

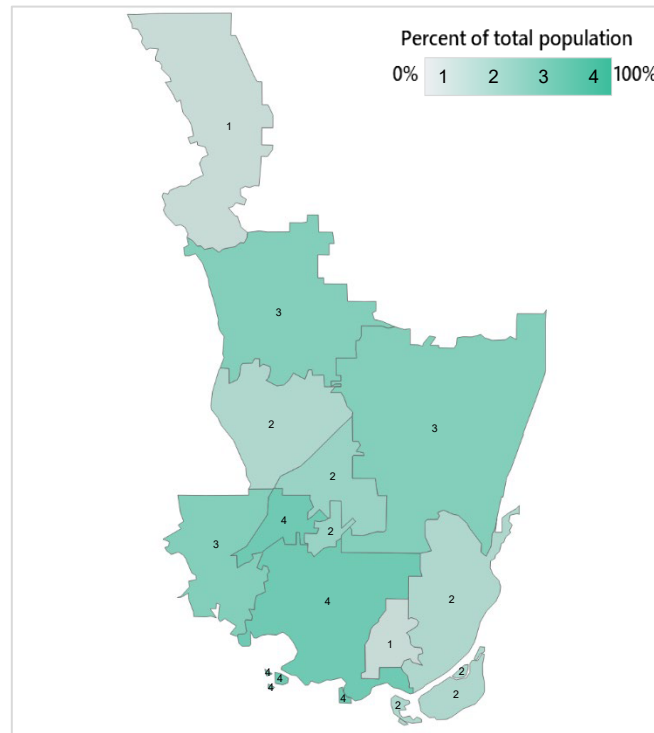
The map on the left shows the NDI for ZIP codes in the Vacaville service area. Areas with the highest NDI often are those with the highest proportion of people of color, shown in the map on the right.

### VACAVILLE SERVICE AREA

Neighborhood Deprivation Index



People of color





## Kaiser Permanente's CHNA process

The CHNA process allows Kaiser Permanente to better understand the unique needs, stories, and opportunities to advance health and health equity in each of our communities. We are committed to gathering community perspectives on the disproportionate impacts of the COVID-19 pandemic as well as the impact of structural racism. Wherever possible, we have applied a racial equity analysis to data collection and analysis.

Identifying the highest priority needs for CHNA with an equity lens informs our community investments and helps us develop strategies aimed at making long-term, sustainable change, allowing us to deepen the strong relationships we have with other organizations that are working to improve community health. For the purposes of the CHNA, Kaiser Permanente defines a “health need” as a health outcome and/or the related conditions that contribute to a defined health need.

## Hospitals and other partners that collaborated on the CHNA

### Hospitals

Partnership Health Plan, North Bay Healthcare, Sutter Health

### Other organizations

Community Health Insights, Solano County Public Health

## Consultants who were involved in completing the CHNA

Harder+Company Community Research (Harder+Company) is a nationally recognized leader in high quality evaluation for learning and action with a team of over 45 researchers throughout California, reflecting the major regions of the state. The firm's staff offer deep experience assisting hospitals, health departments, and other health agencies on a variety of efforts: including conducting needs assessments, developing and operationalizing strategic plans, engaging and gathering meaningful input from community members, and using data for program development and implementation. Harder+Company offers considerable expertise in broad community participation which is essential to the CHNA processes. The firm is supporting the following Kaiser Permanente service areas: Downey, Fontana and Ontario, Los Angeles, Redwood City, Roseville, Sacramento, San Diego, San Francisco, San Rafael, Santa Rosa, South Bay, South Sacramento, South San Francisco, Vacaville, Vallejo, and West Los Angeles.

## Methods used to identify and prioritize needs

### Secondary data

Kaiser Permanente's innovative approach to CHNA includes the development of a free, web-based data platform. The data platform provides access to a core set of approximately 100 publicly available indicators to understand health using the County Health Rankings population health

framework, which emphasizes social and environmental determinants of health. The data platform is available to the public at [kp.org/chnadata](https://kp.org/chnadata). Specific sources and dates of secondary data are listed in Appendix A.

### Community input

In addition to reviewing the secondary data available through the Community Health Data Platform and other local sources, each Kaiser Permanente service area collected primary data through key informant interviews with individuals and groups of individuals. To identify issues that most impact the health of the community, Kaiser Permanente Fresno Medical Center Community Health reached out to local public health experts, community leaders with expertise on local health needs, and individuals with knowledge and/or lived experience of racial health disparities. If available, insights from community partners' data collection were also considered in the assessment of needs. For a complete profile of community input, see Appendix B.

### Written comments

Kaiser Permanente provides the public an opportunity to submit written comments on the service area's previous CHNA reports through [CHNA-communications@kp.org](mailto:CHNA-communications@kp.org). This email will continue to allow for written community input on the service areas' most recently conducted CHNA report.

As of the time of this CHNA report development Kaiser Permanente Vacaville Medical Center had not received written comments about the previous CHNA report. Kaiser Permanente will continue to track any submitted written comments and ensure that relevant submissions will be considered and addressed by the appropriate Kaiser Permanente Vacaville Medical Center staff.

### Identifying priority health needs

Each Kaiser Permanente service area analyzed and interpreted the primary and secondary data and used a set of criteria to determine what constitutes a health need in the community, including severity and magnitude of the need and evidence of clear disparities or inequities. Once all the community health needs were identified, they were prioritized, based on the criteria, resulting in a list of significant community health needs.

In conjunction with this report, Kaiser Permanente Vacaville Medical Center has developed an implementation strategy (IS) for the priority health needs it will address. These strategies will build on Kaiser Permanente's assets and resources, as well as evidence-based strategies, wherever possible. The IS will be filed with the Internal Revenue Service using Form 990 Schedule H. Both the CHNA and the IS will be posted publicly on our website, <https://www.kp.org/chna>.

## Identification and prioritization of the community's health needs

### Process for identifying community needs in the Vacaville service area

Before beginning the prioritization process, Kaiser Permanente Vacaville Medical Center Community Health chose a set of criteria to use in prioritizing the list of health needs:

- **Severity and magnitude of need:** Includes how measures compare to national or state benchmarks, relative number of people affected, impact of the pandemic on the need.

- **Community priority:** The community prioritizes the issue over other issues
- **Clear disparities or inequities:** Differences in health factors or outcomes by geography, race/ethnicity, economic status, age, gender, or other factors

Measures in the Community Health Data Platform were clustered into 16 potential health needs, which formed the backbone of a prioritization tool to identify significant health needs in each service area. The prioritization tool aligned data collection methods with the set of criteria and could be customized to reflect important considerations in each community.

For secondary data, a score was assigned to each need (4: very high, 3: high, 2: medium, 1: lower) based on how many measures were more than 20 percent worse than national and/or state benchmarks. Themes from key informant interviews and other data sources were identified, clustered, and assigned scores on the same scale. Both the data platform and primary data informed scores for geographic, racial/ethnic, and other disparities.

In conversations with Kaiser Permanente Vacaville Medical Center Community Health stakeholders, each data collection method was assigned a weight, based on rigor of the data collection method, relative importance in ranking of needs (such as clearly identified racial disparities), and other considerations. Weighted values for each potential need were summed, converted to a percentile score for easy comparison, and then ranked highest to lowest to determine the six significant health needs.

## Description of prioritized significant health needs in the Vacaville service area

**1. Access to care:** Access to comprehensive, quality health care services — including having insurance, local care options, and a usual source of care — is important for ensuring quality of life for everyone. Insurance by itself does not guarantee access to appropriate care, and many community members experience barriers related to language, transportation options, and differential treatment based on race, as well as access to fewer health care resources. In the Vacaville service area, significant racial/ethnic and other disparities in access to care indicate that there is an urgent need for more linguistically and culturally responsive care. There are disparities such as infant mortality rates for Black infants that are over twice that of white infants and unequal access to a usual source of care for Latinx residents compared to white residents. Interviewed community leaders shared that in addition to these disparities, there are insufficient specialty care options, too few providers for Medi-Cal and uninsured populations, and health services which have limited hours of operation and are inaccessible via public transportation. They also identified strategies to address access to care such as supporting vulnerable communities in accessing care; enhancing training for providers on culturally and linguistically responsive care; expanding access to specialty care providers across hospital systems; and strengthening cross-sector collaboration and coordination to integrate and improve care for individuals across providers.

**2. Housing:** Having a safe place to call home is essential for the health of individuals and families. American families' greatest single expenditure is housing, and for most homeowners, their most significant source of wealth. Housing costs have soared in recent years, with many families experiencing difficulty paying for housing. Black and Latinx renters in particular are more likely to live in cost-burdened households and face housing instability. In the Vacaville service area, housing has become increasingly expensive as wages have remained stagnant. Other disparities such as a lack of affordable housing options for low-income households and seniors and high-cost burden for Black and Native American renters

in particular also exist. The Interviewed community leaders shared that the high cost of housing has led to the displacement of long-term residents and younger families who can no longer afford to live and work in the area. They also identified strategies to address housing such as expanding housing stock to include more affordable options; addressing barriers to economic security by increasing local wages; and collaborating across sectors towards advocacy and systems change efforts.

**3. Income & employment:** Economic opportunity provides individuals with jobs, income, a sense of purpose, and opportunities to improve their economic circumstances over time. People with steady employment are less likely to have an income below poverty level and are more likely to be healthy. Those not having enough resources to meet daily needs such as safe housing and enough food to eat are more likely to experience health-harming stress and die at a younger age. In the Vacaville service area, an increasing cost of living amid stagnant wages has put pressure on workers with low income, who often have to choose whether to prioritize housing, food, or health care. There are disparities such as lower per capita incomes for Black and Latinx residents and high rates of child poverty in the county's more rural areas. The interviewed community leaders shared that frontline workers such as migrant seasonal farm workers and those in the hospitality industry have been disproportionately impacted by economic insecurity. They also identified strategies to address income and employment such as expanding job training with local companies; subsidies to ease economic pressures for low-income families; and addressing the root of economic insecurity issues through advocacy and systems change efforts.

**4. Mental & behavioral Health:** Mental health affects all areas of life, including a person's physical well-being, ability to work and perform well in school, and to participate fully in family and community activities. Anxiety, depression, and suicide ideation are on the rise due to the COVID-19 pandemic, particularly among Black and Latinx Americans. Communities across the country are experiencing a critical lack of capacity to meet the increased demand for mental health services. In the Vacaville service area, rates of death due to suicide, alcohol related disease, and drug overdoses per 100,000 are higher than state averages. There are disparities such as high rates of suicide attempts among LGBTQ+ students compared to straight students and lower rates of receiving sought-after treatment for behavioral health issues among Latinx and multiracial residents compared to white and Black residents. The interviewed community leaders shared that there are insufficient mental health services to meet the needs of the community, including for moderate mental health needs, on-site services, specialty care, and mental health services for underinsured individuals. They also expressed an urgent need for more linguistically and culturally responsive services. They identified strategies to address mental and behavioral health such as applying place-based and community specific strategies; hiring mental health providers who are culturally- and linguistically-responsive to the communities they serve; and expanding the use of peers and trusted messengers in delivering care.

**5. Community safety:** The level of risk of violence and injury in a community affects the ability of its residents to prosper and thrive. People can be victims of violence, witness violence or property crimes, or hear about crime and violence from others. Community safety also reflects injuries caused by accidents — unintentional injuries are the leading cause of death for children, youth, and younger adults and account for nearly 30 percent of emergency department visits in the U.S. In the Vacaville service area, rates of violent crime are worse than state and national averages, and disproportionately impact Black, Latinx, and Asian communities because of structural racism and socioeconomic disparities. These community members are less likely to feel safe in their neighborhoods than their white neighbors. There are also disparities related to police brutality and uneven policing practices that disproportionately target Black communities. Interviewed community leaders expressed a worrying increase in domestic violence since the start of the pandemic, concerns about the impact of social isolation on vulnerable older adults, and fears for youth's

vulnerability for gang involvement as they seek social reconnection. They also identified strategies to address community safety such as investing in systems that address health needs through a lens of diversity, equity, inclusion, and trauma-informed care; expanding the use of peers and trusted messengers in designing and implementing programs; and focusing on place-based and community-specific strategies already underway in the community.

**6. Transportation:** People are healthier in communities that are walkable, bikeable, and transit-oriented. Yet many urban and suburban neighborhoods lack sidewalks, safe crossings, and consistent access to affordable public transit, and people with lower incomes are more likely to be transit-insecure. Those who rely on public transit to access health care services often face long travel distances and wait times for connections, leading to missed appointments. In the Vacaville service area, dispersed patterns of urban development means that many residents must commute long distances alone to work. The car-dependent nature of the area means there are disparities such as disproportionate impacts on older adults and lower-income communities who rely on public transportation. Interviewed community leaders shared that the county's public transportation infrastructure is small, unreliable, and available at limited times. They also identified strategies to address transportation such as more frequent buses; additional funding for bus passes and gas cards for community members in need; and expanding home-visiting programs to bring services directly to house-bound seniors.

### Health need profiles

Detailed descriptions of the significant health needs in the Vacaville service area follow.

# Health need profile: Access to care

Access to comprehensive, quality health care services — including having insurance, local care options, and a usual source of care — is important for ensuring quality of life for everyone.

The Affordable Care Act (ACA) helped extend insurance coverage to many previously uninsured individuals and families, especially in Medicaid expansion states. Still, families with low income and people of color are more likely to be uninsured, and even with the ACA, many find insurance to be unaffordable.

Health insurance coverage increases use of preventive services and helps ensure people do not delay seeking medical treatment. Having an adequate number of primary care resources in a community also is important, including federally qualified health centers (FQHCs), which serve patients regardless of ability to pay.

Insurance by itself does not guarantee access to appropriate care, and many community members experience barriers related to language, transportation options, and differential treatment based on race, as well as access to fewer health care resources.

Furthermore, the COVID-19 pandemic has disrupted health care for millions of Americans as health care resources were diverted from primary and preventive care, with telehealth becoming an increasingly important source of care. Existing racial and health inequities have been brought to light by the pandemic, with people of color accounting for disproportionate shares of COVID-19 cases, hospitalizations, and deaths.

Access to quality health care includes affordable health insurance, utilization of preventive care, and ultimately reduced risk of unnecessary disability and premature death. Importantly, it is also one of the key drivers in achieving health equity. Across many measures of access to care, the Vacaville service area is performing better than state and national averages. For example, just 2 percent of children in the area are uninsured, compared to 3 percent statewide and 5 percent nationwide. There are 86.5 primary care physicians per 100,000 people, compared to a state average of 79.8. Furthermore, trailing indicators of access to care such as rates of pre-term (8.2) and low birth weight births (6.7) are similar to the state averages.

Yet these indicators overshadow the fact that there are significant disparities in access to care across Solano County. Infant mortality, at 5.6 deaths per 1,000 live births, is high compared to the state average of 4.0 – but most notably, the mortality rate of Black infants (8.2 per 1,000 live births) is over twice that of white infants (Solano Public Health 2022). Just 80 percent of Latinx residents have a usual source of care, compared to 88 percent of white residents (Racecounts.org 2022). Solano County residents are also enrolled in Medicaid and other public health insurance programs at lower rates than the state average (34 percent versus 38 percent statewide), and there are significant disparities across the service area.

Interviewed community leaders identified access to care as a primary concern in the Vacaville service area. While there may be adequate primary care provider coverage in the region, there are insufficient specialty care options for people with autism and those with moderate mental health needs, and too few providers for Medi-Cal and uninsured populations. Health services in the area often have limited hours of operation and are inaccessible via public transportation, which disproportionately impacts residents with lower incomes and those living in rural areas of the service area.

Even with coverage, there can be challenges in accessing appropriate care as evidenced by the health disparities experienced by Black and Latinx populations. Interviewees spoke to an urgent need for more linguistically and culturally responsive care and forms of communication (e.g., radio, newspaper, television). As one leader reflected, “Language access ... is much greater than translating information. The information needs to be accessible in a format and in a place that people get their information.” Another leader shared, “we need doctors that look like us.” Relatedly, the community leaders felt that there is need for additional education about the importance of preventative care, enhanced awareness of existing services, and support with service navigation to address inequities in access to care.

The interviewed community leaders emphasized the impact of structural racism and systemic inequities on health and the importance of addressing the social determinants of health that affect access to care. Strategies shared by these community leaders for addressing access to care included supporting vulnerable communities in accessing care through outreach campaigns and expanding appointment times; enhancing training for providers on culturally and linguistically responsive care for Black, Latinx, and Asian communities; expanding access to specialty care providers across hospital systems; and strengthening cross-sector collaboration and coordination to integrate and improve care for individuals across providers.

The Vacaville service area has numerous assets at its disposal to improve access to care. The interviewed community leaders consistently praised resources such as local community clinics that provide much needed services for low-income residents. The UniteUs referral system is enabling organizations to connect and share referrals. Additionally, many local community-based organizations are working together to maximize their resources and ensure whole-person care.

If you have a moderate to higher income and you're well-insured, your access to quality care ... and your ability to get it in a timely fashion goes way up ... People that have less resources should not have to wait longer ... or have limited choices of care.

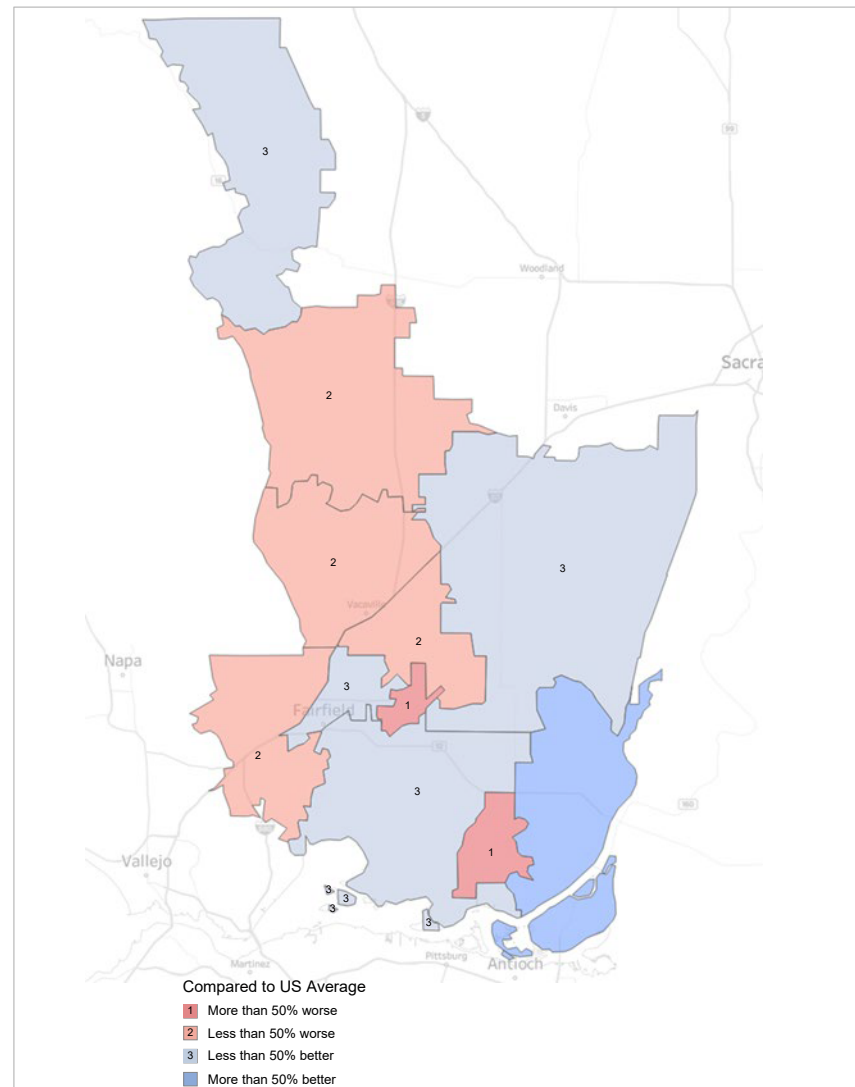
– Nonprofit leader

It's not just about getting folks enrolled and into the system ... There needs to be a tremendous amount of support to help individuals continue to navigate and understand how to utilize their services so that they can feel strengthened and able to manage things on their own.

– Nonprofit leader

### MEDICAID/PUBLIC INSURANCE ENROLLMENT, VACAVILLE SERVICE AREA, 2015-2019

Areas shaded red (1) are ZIP codes with the lowest enrollment rates in the service area.



Source: [Kaiser Permanente Community Health Data Platform](#)



# Health need profile: Housing



Having a safe place to call home is essential for the health of individuals and families.

American families' greatest single expenditure is housing, and for most homeowners, their most significant source of wealth. Because of historic discriminatory lending policies and some current lending practices, people of color — especially Black community members — have been denied the opportunity to purchase a home, leading to enduring inequities.

Housing costs have soared in recent years, with many families experiencing difficulty paying for housing. Black and Hispanic renters in particular are more likely to live in cost-burdened households and face housing instability. Job loss associated with the COVID-19 pandemic, coupled with expiration of the national eviction moratorium, has made many renters' situation even more precarious.

Homelessness across the U.S. was on the rise before the pandemic, including for families with children. In 2020, the number of single adults living outdoors exceeded the number living in shelters for the first time, and even more moved outside because of the pandemic, leading to a crisis in street homelessness in many American cities.

Access to safe, secure, and affordable housing is an important social determinant of health. Families with fewer financial resources are more likely to experience sub-standard housing conditions and the associated risks. California has some of the highest cost real estate in the country. A mix of rural and suburban areas, the Vacaville service area performs better than the state on many measures of housing affordability. It boasts a better homeownership rate (63 percent versus 55 percent statewide), a better housing affordability index (119.9 versus 88.1 statewide), and similar median rental costs (\$1,686). Yet housing in the Vacaville service area has become increasingly expensive as wages have remained stagnant. This has disproportionate impacts on communities of color and households with lower incomes, including seniors.

Over a third of households (35 percent) experience moderate or worse housing cost burden, defined as housing costs greater than 30 percent of income. An increasing cost of living in the region amid stagnant wages has put particular pressure on low-income workers, who often have to choose whether to prioritize housing, food, or health care. The legacy of structural racism means a lack of affordable housing also disproportionately impacts Black, Indigenous, and other communities of color in the region: 62 percent of Black and Native American renters in Solano County are burdened with high housing costs, compared to 48 percent of white renters (Racecounts.org 2022).

Interviewed community leaders shared that while some new housing is being developed across the Vacaville service area, little of it is affordable. They expressed concerns that housing in the area has become increasingly expensive as households with higher incomes are pushed out of housing markets in more costly neighboring counties and that local wages have not kept pace. The high cost of housing has led to the displacement of long-term residents and younger families who can no longer afford to live and work in the area. Rising costs and a lack of affordable housing options for seniors suggests that this population is increasingly at risk of experiencing homelessness, particularly in areas such as Winters.

Affordable housing is lacking in this area, and I fear that it's only going to get worse as people from other areas of the Bay Area ... are moving into Solano County and the real estate market and rentals are increasing in terms of cost.

- Nonprofit leader

Strategies shared by the community leaders to address housing needs in the Vacaville service area include expanding the housing stock to include more low-income, affordable, and workforce housing; offering transitional workforce housing to attract physicians and clinicians to the region; and addressing barriers to economic security by increasing wages for nonprofit workers and expanding job training with local companies. The community leaders also expressed the need to strengthen cross-sector collaboration and coordination between health providers and service providers to improve care for people experiencing or at risk of homelessness.

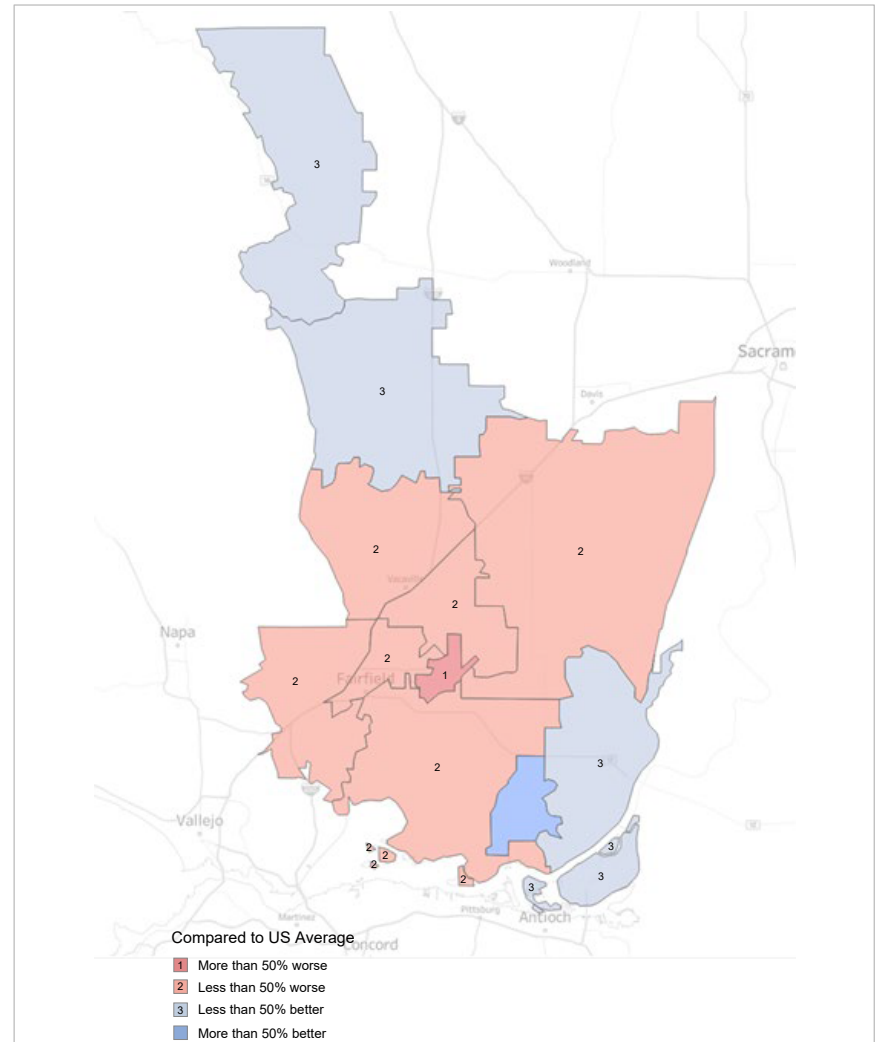
Housing affordability is a complex issue, one which the interviewed community leaders felt required cross-sector collaboration and a focus on advocacy and systems change efforts. Fortunately, as one leader shared, the desire to collaborate is a key asset among Solano County community groups: “We have a long tradition [...] of working together. We like working in partnership with one another, and we have built relationships over time that allow us to do that.”

When people have safe and secure housing that's clean and in a safe community... [they] are better able to focus on other aspects of their life and their health and wellbeing.

- Nonprofit leader

### MODERATE HOUSING COST BURDEN, VACAVILLE SERVICE AREA, 2015-2019

Areas shaded red (1) are ZIP codes with the highest moderate housing cost burden in the service area.



Source: [Kaiser Permanente Community Health Data Platform](#)

# Health need profile: Income & employment



Economic opportunity provides individuals with jobs, income, a sense of purpose, and opportunities to improve their economic circumstances over time.

People with steady employment are less likely to have an income below poverty level and more likely to be healthy.

Currently around 11 percent of people living in Kaiser Permanente communities — and 14 percent of children — live in poverty. Those not having enough resources to meet daily needs such as safe housing and enough food to eat are more likely to experience health-harming stress and die at a younger age.

Americans with lower incomes are more likely to live in neighborhoods lacking access to healthy food and safe physical activity and have higher exposure to environmental pollutants. Compared to white Americans, those who identify as Black, Hispanic, or American Indian are more likely to have lower incomes, fewer educational opportunities, and shorter life expectancies.

Income inequality has been increasing over recent decades. During the first year of the COVID-19 pandemic, higher levels of economic inequality were associated with higher levels of COVID incidence and deaths.

Income and employment are two of the most widely recognized social determinants of health. A stable source of income improves access to needed health care, the ability to secure safe housing, and allows individuals to pursue a fulfilling lifestyle. However, not all members of our communities have equal opportunity to attain the education and training necessary to maintain rewarding employment that supports a living wage. Racism and unjust market forces dramatically impact economic prospects, and in turn, health.

On several measures of economic prosperity, the Vacaville service area performs favorably relative to state and national benchmarks. For instance, just 11 percent of Vacaville children live in poverty, compared to 17 percent of children across the state. The unemployment rate of 15 percent is better than the state average of 16 percent, and 90 percent of residents have access to high-speed internet, slightly better than the state average of 86 percent.

However, there remains substantial room for improvement – particularly given the significant disparities in economic circumstances facing some residents. In rural Rio Vista, 41 percent of children live in poverty. There are substantial geographic disparities across the service area in the percent of public school students eligible for free- or reduced-price lunch (see map on second page). Access to income and employment opportunities are generally uneven across the area – while U.S. Department of Housing and Urban Development’s jobs proximity index for Solano County as a whole is comparable to the state average at 47, in the county’s more rural areas it’s as low as 23.9 and 33.2. Furthermore, there are significant racial disparities in per capita income, with Black and Latinx residents earning \$15,000 and \$23,000 less than white residents, respectively (Racecounts.org 2022).

Further, due to the COVID-19 pandemic, illness and social policies limiting which business and services were open to the public negatively impacted employment and wages – especially for those in the service sector. Many families were unable to pay rent or medical bills, lost wealth, and accrued household debt. Interviewed community leaders consistently emphasized that the same communities of color that have been historically impacted by redlining and poor job prospects were further disadvantaged during the pandemic.

More people of color are experiencing economic disparity ... Our institutions are not designed for equity and COVID came in and ... [put a] spotlight on how everything is inequitable. And so now it’s our charge to go in and design towards equity, which again is hard and takes a lot of money and time and patience and relationships and collaboration.

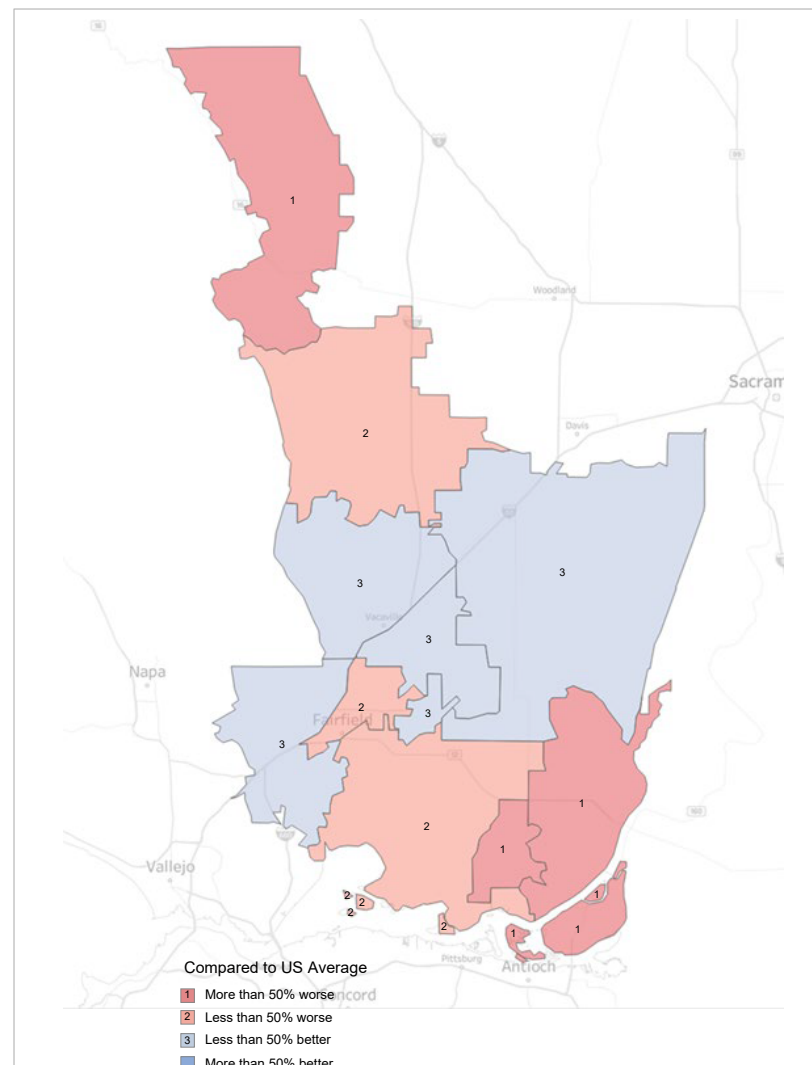
– Nonprofit leader

Interviewed community leaders shared concerns that frontline workers such as migrant seasonal farm workers and those in the hospitality industry have been disproportionately impacted by economic insecurity. An increasing cost of living in the Vacaville service area amid stagnant wages has put pressure on workers with lower incomes, who often have to choose whether to prioritize housing, food, or health care. The community leaders also emphasized that economic insecurity is therefore at the root of more downstream concerns such as poor living conditions and health outcomes.

The community leaders also offered strategies for improving the economic situation in the service area. In particular, they advocated for expanding job training with local companies and expanding the housing stock to include more low-income, affordable, and workforce housing. Health care subsidies for families with lower incomes can ease economic pressures. Finally, the interviewees emphasized the need to fund advocacy and systems change efforts to address the root of economic insecurity issues in the region.

### FREE AND REDUCED PRICED SCHOOL MEALS, VACAVILLE SERVICE AREA, 2017-2018

Areas shaded **red (1)** are ZIP codes with **more students eligible for free or reduced priced school meals** than the national average.



Source: [Kaiser Permanente Community Health Data Platform](#)

Economic security ... manifests itself in the schools as behavior issues ... [It] is simply a symptom of larger issues that may be going on in the family that are connected to living in poverty, or to living in households that are struggling.

– Education sector leader

# Health need profile: Mental & behavioral health KAISER PERMANENTE®

Mental health affects all areas of life, including a person's physical well-being, ability to work and perform well in school and to participate fully in family and community activities.

Anxiety, depression, and suicide ideation are on the rise due to the COVID-19 pandemic, particularly among Black and Hispanic Americans.

Those facing challenges related to lower economic opportunity often experience high levels of stress in their daily lives, coupled with fewer resources for coping. Children and youth experiencing stress have an increased likelihood of poorer mental and physical health.

Deaths of despair — those due to suicide, drug overdose, and alcoholism — are on the rise, and men, American Indian/Alaska Native people, and those who are unemployed people are at greater risk.

Communities across the country are experiencing a critical lack of capacity to meet the increased demand for mental health services. At the same time, rapid adoption of digital platforms for behavioral health services has helped reduce barriers to in-person mental health care.

Mental and behavioral health is the foundation for healthy living and encompasses mental illness, substance use, and overdoses, and access to service providers for preventive care and treatment. The Vacaville service area is performing worse than the state average across several measures of mental and behavioral health. While the average number of self-reported mentally unhealthy days among adults is on par with the state average at 3.7 days per month, rates of both suicide deaths and deaths of despair (e.g., death due to suicide, alcohol related disease, drug overdoses) per 100,000 population are higher than state averages (12.4 versus 10.5 and 17.1 versus 14.1, respectively). Nearly half of gay, lesbian, and bisexual students in Solano County seriously considered attempting suicide in the past year, compared to 14 percent of straight students (Kidsdata.org 2022).

Vacaville boasts a greater number of mental health providers per capita than the state (374.3 per 100,000 versus 352.3 statewide). However, interviewed community leaders stated that there are still insufficient mental health services to meet the needs of the community, including for moderate mental health needs, on-site services, specialty care, and services for underinsured people. They also shared that there is an urgent need for more linguistically and culturally responsive services for Black, Latinx, and Native American communities, where there are high levels of anxiety and depression due to experiences of discrimination and historical trauma. Black and Native American students are more likely to experience feelings of depression than their peers (see chart on next page). The impacts of structural racism within these communities have also led to stigma around mental health concerns and a distrust of providers, especially since there are limited providers who are from the communities they serve and who can speak the various languages of these communities. Just 56 percent of Solano County adults who sought treatment for self-identified mental/emotional or alcohol/drug issues in the past year received help, and this was true for just 46 percent of Latinx residents and 36 percent of those who identify with 2 or more races (Racecounts.org 2022).

The COVID-19 pandemic has notably impacted the mental health of community members. Interviewees described how the resulting social isolation, stress, and anxiety poses particular concerns for the mental health of frontline workers and seniors. These trends and the nature of the pandemic have also resulted in a need for newer models of service delivery. As one community leader reflected, “we still need more bilingual mental health professionals, but we also need different types of support than we needed before the pandemic. So, a combination of telehealth, in-person support, group support. I really believe that the use of peers is a big, important part of it. I mean, if we've learned anything from COVID, it's the importance of trusted messengers.”



The interviewed community leaders also talked about the specific impacts of isolation and loss experienced by youth due to the COVID-19 pandemic and the ongoing need for youth-specific services. One key resource in the service area has been school-based mental wellness centers that meet the needs of youth where they are.

Many community leaders thought that the key to improving the mental health in their community was to apply place-based and community specific strategies such as having clinicians on site at schools and local service organizations. The community leaders shared the importance of hiring mental health providers who are culturally and linguistically responsive to the communities they serve and encouraged the expanded use of peers and trusted messengers in delivering care.

The Latinx community don't ... trust the system because if they don't have a bilingual therapist that speaks their own language, how they can understand it, how they can communicate their feelings?

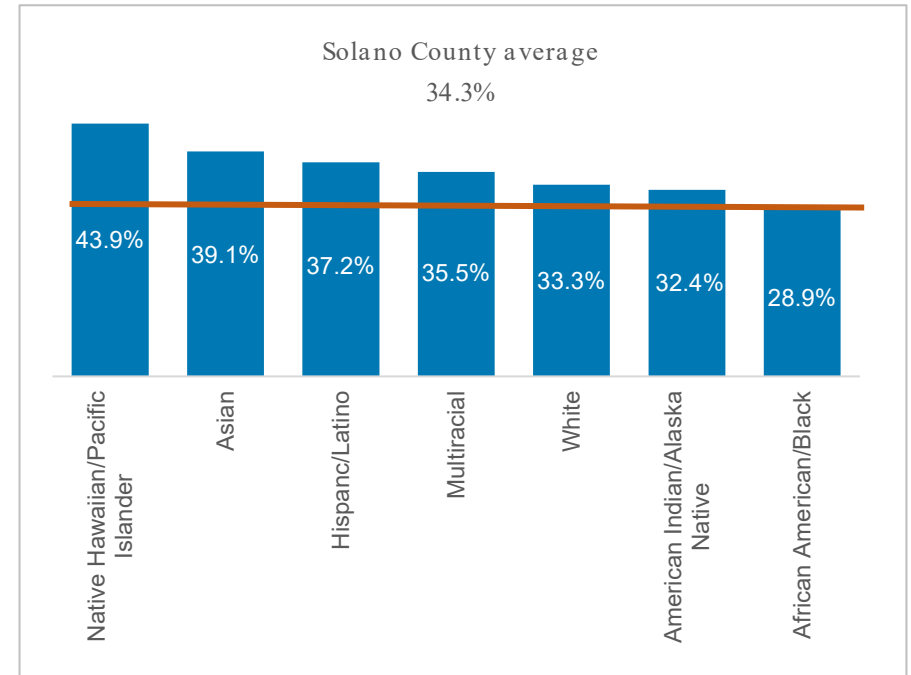
– Nonprofit leader

Mental health is ... heavily underdiagnosed and very, very heavily undertreated in our county. We do not have enough in the way of mental health resources to provide the necessary level of care for all of those with identified diagnosed conditions, never mind to identify and diagnose the conditions in those who would benefit from treatment.

– Public health leader

### STUDENTS WITH DEPRESSION-RELATED FEELINGS, BY RACE/ETHNICITY, SOLANO COUNTY, 2017-2019

The estimated percentage of public-school students in grades 7, 9, and 11, and non-traditional programs who, in the previous year, felt so sad or hopeless almost every day for 2 weeks or more that they stopped doing some usual activities, by race/ethnicity.



Source: Kidsdata.org, WestEd, California Healthy Kids Survey (CHKS) & Biennial State CHKS. California Dept. of Education (Aug. 2020).

# Health need profile: Community safety

The level of risk of violence and injury in a community affects the ability of its residents to prosper and thrive.

People can be victims of violence, witness violence or property crimes, or hear about crime and violence from others. Children and adolescents exposed to violence are at risk for poor long-term behavioral and mental health outcomes. Within families, intimate partner violence (IPV) and child maltreatment frequently occur together, each with adverse health effects. One in four American women reports IPV during her lifetime.

Communities that have been systematically marginalized experience higher rates of violence, including deaths and injuries from firearms. Chronic stress from living in unsafe neighborhoods can have long term health effects, and fear of violence can keep people indoors and isolated. In addition, the physical and mental health of youth of color — particularly boys and young men — is disproportionately affected by juvenile arrests and incarceration related to local policing practices.

Community safety also reflects injuries caused by accidents — unintentional injuries are the leading cause of death for children, youth, and younger adults and account for nearly 30 percent of emergency department visits.

Community safety - including access to safe spaces, freedom from domestic and community violence, and a positive law enforcement presence - has significant effects on health and well-being. Conversely, violence-related trauma in particular has long-lasting impacts on health. In the Vacaville service area, rates of violent crime are 12 percent worse than the state average and 24 percent worse than the national average. Black, Latinx, and Asian communities in particular are disproportionately impacted by violence because of structural racism and socioeconomic disparities such as community trauma, stress, and economic insecurity. In Solano County, these community members are less likely to feel safe in their neighborhoods than white community members (see chart on second page; Racecounts.org 2022).

Community safety in the Vacaville service area is a concern for interviewed community leaders, particularly in light of the COVID-19 pandemic. Interviewed community leaders noted a worrying increase in domestic violence since the start of the pandemic and reflected on the unintended impacts job loss and the shift to remote work have had on individuals abused by their partners. They expressed that social isolation poses a safety concern for older adults, who without regular social interaction, are at greater risk for both scams and falls. The interviewed community leaders also shared concern that youth might be vulnerable to gang involvement as they seek social reconnection.

Crime is an ongoing concern for the interviewed community leaders as economic insecurity exacerbated by the pandemic causes desperation among people already struggling to meet their basic needs. Community leaders in rural areas like Rio Vista noted an increase in housing insecurity and crime as people experiencing homelessness are pushed from more urban areas. While pedestrian accident deaths are lower than the state average, access to safe, well-lit, and walkable spaces is still a need across the Vacaville service area, according to the interviewed community leaders.

There is also a growing concern in the area related to police brutality and uneven policing practices that disproportionately target Black communities. In Solano County, Black youth are 1.8 times more likely to be arrested for status offenses than Latinx and white youth and Black civilians are over twice as likely to be injured in law enforcement incidents than white civilians (Racecounts.org 2022). Furthermore, Black residents are incarcerated at 3 times the rate of their white and Latinx counterparts (Racecounts.org 2022). This, coupled with the ongoing and public nature of nationwide incidents of police brutality against Black people, impacts the mental health and well-being of Black community members in the Vacaville service area.



The interviewed community leaders consistently emphasized the impact of structural racism and systemic inequities on health and the importance of addressing the social determinants of health that affect the safety of communities. Strategies shared by these leaders for addressing community safety included investing in systems that address health needs through a lens of diversity, equity, inclusion, and trauma-informed care; expanding the use of peers and trusted messengers in designing and implementing programs; and focusing on place-based and community-specific strategies already underway in the community.

The Vacaville service area has numerous assets at its disposal to improve community safety. The community leaders shared that local service organizations have been effective in fostering a resilient community, including Solano HEALS (Health Equity for African American/Black Lives), local organizations aimed at ending poverty, after school programs for youth, and a strong County Behavioral Health department.

I'm worried that as young people start to emerge from 15 months of isolation, that if they don't come out of that isolation and find belonging in healthy places, that they'll find belonging in things like gangs.

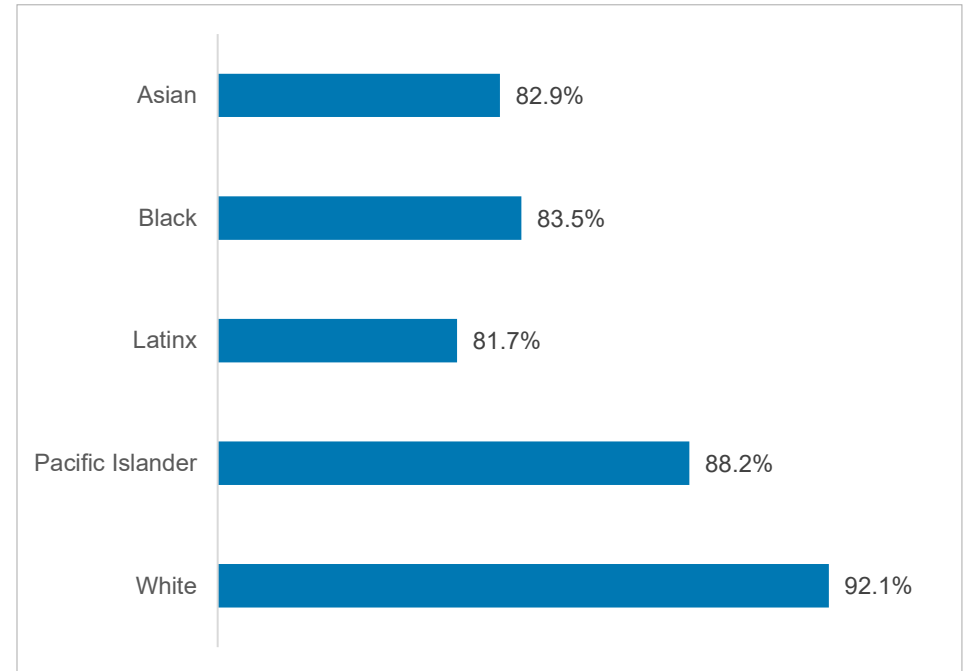
- Nonprofit leader

The community already has the answers and it's just our job to support them and not create barriers for them ... Shift the power over to the community because they're the ones who are working, living, breathing this every day ... They're the ones that already have the ideas but maybe need a little extra assistance and support in making those ideas come to life.

- Public health leader

### ADULTS WHO FEEL SAFE IN THEIR NEIGHBORHOOD, SOLANO COUNTY, 2011-2019

The number of adults who reported feeling safe in their neighborhood all or most of the time, per 100 adults.



Source: RaceCounts.org

# Health need profile: Transportation



People are healthier in communities that are walkable, bikeable, and transit-oriented. Yet many urban and suburban neighborhoods lack sidewalks, safe crossings, and consistent access to affordable public transit, and people with lower incomes are more likely to be transit-insecure. Those who rely on public transit to access health care services often face long travel distances and wait times for connections, leading to missed appointments.

The U.S. transportation system relies largely on motorized transportation, with numerous implications for health. Nearly three-quarters of workers living in Kaiser Permanente communities drive alone to work. The health impacts of heavy dependence on automobiles include air pollution, traffic crashes, and physical inactivity.

Having a lower income and lacking reliable transportation are both associated with prescription medication nonadherence. When limited access to public transit is combined with lack of safety promoting infrastructure, such as protected bike lanes and streets free of potholes, people without their own cars can feel trapped by an inability to get around.

In the Vacaville service area, 77 percent of workers over the age of 16 drive alone to work via car, truck, or van. While this rate is similar to the state average of 74 percent, just 4 percent of workers in the area travel via alternate modes of transportation such as transit, cycling, or walking, compared to 8 percent statewide. Inadequate transportation infrastructure can prevent people from using more active modes of transportation, and it can also make walking and cycling unsafe for those who do use those modes to get around. Among local workers, 15 percent drive alone with commutes over an hour long – 75 percent worse than the state average of 11 percent. Long commutes are also associated with reduced physical activity and increased body mass index and blood pressure, leading to detrimental health effects.

Transportation in the Vacaville service area was a concern for interviewed community leaders. They shared that Solano County’s public transportation infrastructure is small for the county’s size. Reliable and timely access to transportation is a significant factor in a community’s ability to access jobs, grocery stores with healthy food options, and health care services. The public transportation system plays an important role in ensuring that those who are unable to drive have access to these critical resources. Local transit is not reliable, according to the interviewed community leaders, and is available at limited times, resulting in a time-consuming way to get around. As one public health leader shared, “to get from one [town] to the other, it can take our folks up to 3 hours ... on public transportation.” The car-dependent nature of the area disproportionately impacts older adults and lower income communities who rely on public transportation.

Solano County’s geography and public transit system means that transportation is a challenge for many residents in the Vacaville service area, particularly older adults, individuals with disabilities, and lower-income households with limited access to private transportation. The community leaders expressed particular concern about the lack of transportation options in remote areas like Rio Vista and for seniors with mobility problems. This is especially problematic for seniors who may need to visit pharmacies to obtain their medications but are unable to get to a bus stop and have nobody to drive them.

Solano, even though it's a medium sized county, Vacaville, Fairfield and Vallejo are the 3 main towns ... To get from one to the other, it can take our folks up to 3 hours ... on public transportation.

– Public health leader

Strategies shared by these community leaders for addressing transportation in the Vacaville service area include more frequent buses, more funding for bus passes and gas cards to share with community members in need, and expanding home-visiting programs to bring services directly to house-bound seniors. Telehealth may also offer opportunities to bring care directly to those who need it, but the digital divide may complicate this option for seniors and those with limited technical know-how.

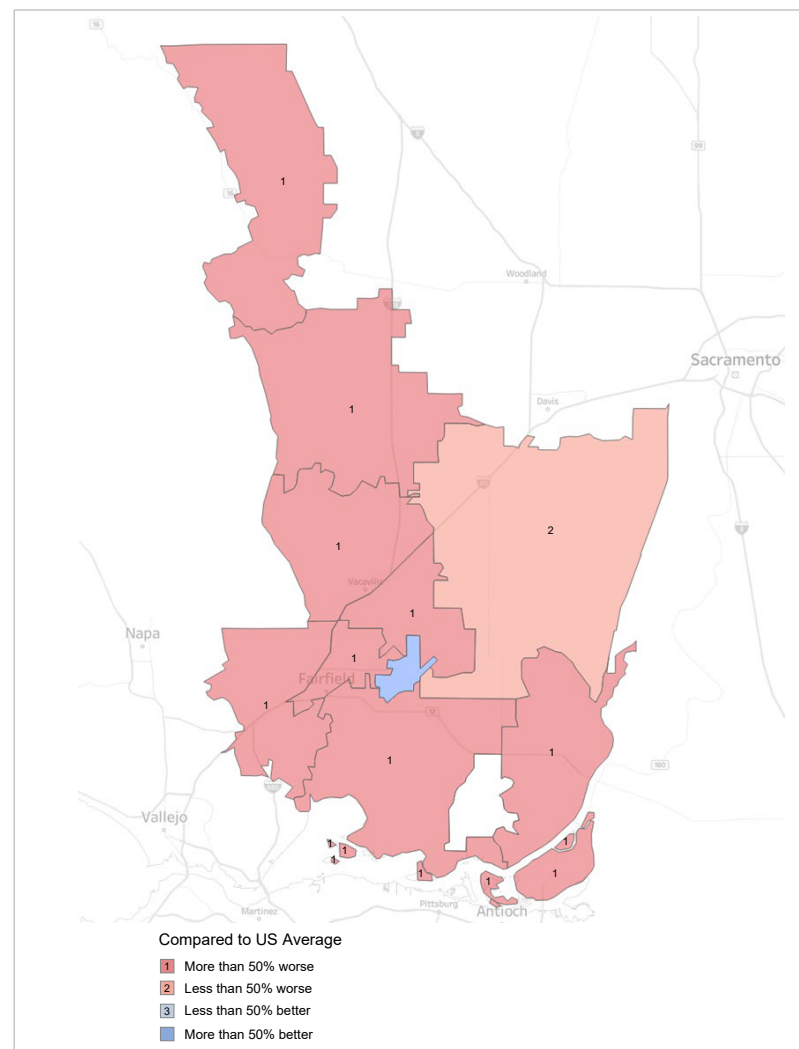
The Vacaville service area has numerous assets at its disposal to improve local transportation options. The community leaders shared that newer transportation options such as Uber Health and Gogo Grandparents are an asset, as are options offered by Partnership Health Plan for its patients. While there is room for improvement, they acknowledged that the existing transit system does offer a basic level of service to much of the county. As one interviewee shared about Solano Transportation Authority, “they’ve done a pretty good job of making sure that if you really need to get to some place, that you can for not much money.”

Individuals who are economically strained are more likely to have transportation issues. We don't have a good transportation system that brings people from their homes to health care.

– Public health leader

## WORKERS DRIVING ALONE TO WORK WITH LONG COMMUTES, VACAVILLE SERVICE AREA, 2015-2019

Areas shaded red (1) are ZIP codes with the highest rates of workers driving alone with a commute time longer than 60 minutes.



Source: [Kaiser Permanente Community Health Data Platform](#)

### Community resources potentially available to respond to health needs

The CHNA process included an identification of existing community assets and resources to address health needs. The Vacaville service area includes community-based organizations, government departments and agencies, hospital and clinic partners, and other community members and organizations that address many community health needs.

Examples of key resources available to respond to the identified health needs of the community are listed in Appendix C.

## Kaiser Permanente Vacaville Medical Center 2019 Implementation Strategy evaluation of impact

In the 2019 IS process, all Kaiser Permanente service areas planned for and drew on a broad array of resources and strategies to improve the health of our communities, such as grantmaking, in-kind resources, and partnerships, as well as several internal Kaiser Permanente programs including Medicaid, the Children's Health Insurance Program (CHIP) and other government-sponsored programs, charitable health coverage, medical financial assistance, health professional training, and research. In addition to our direct spend, we also leveraged assets from across Kaiser Permanente to help us achieve our mission to improve the health of communities. This comprehensive approach includes activities around supplier diversity, socially responsible investing, and environmental stewardship.

Kaiser Permanente Vacaville Medical Center's 2019 Implementation Strategy (IS) report identified activities to address significant health needs prioritized in the 2019 CHNA report. The impact of those activities is described in this section; the complete 2019 IS report is available at <https://www.kp.org/chna>.

### Kaiser Permanente Vacaville Medical Center 2019 Implementation Strategy priority health needs

1. Mental Health and Well Being
2. Community and Family Safety
3. Economic Opportunity
4. Access to Care and Coverage

### 2019 Implementation Strategy evaluation of impact by health need

Grants to community-based organizations are a key part of the contributions Kaiser Permanente makes each year to address identified health needs, and we prioritize work intended to reduce health disparities and improve health equity. Kaiser Permanente also serves the community through programs to improve access to care, including Medicaid, charitable health coverage, and medical financial assistance. At the time this CHNA report was completed, Kaiser Permanente Vacaville Medical Center Community Health had information on the impact of these activities from 2020 and 2021 and will continue to monitor strategies implemented in 2022.

Kaiser Permanente Vacaville Medical Center addresses community health needs in multiple ways, including grantmaking, access to care programs, and socially responsible investing. Several of those activities during 2020-2021 are highlighted in the table below.

Additionally, the Kaiser Permanente Northern California Region has funded significant contributions to the East Bay Community Foundation in the interest of funding effective long-term, strategic community benefit initiatives. During 2020-2021 a portion of money managed by this foundation was used to award 12 grants totaling \$781,203 in service of 2019 IS health needs in the Vacaville service area.

One example of a key accomplishment in response to our 2019 IS includes funding Positive Behavioral Interventions and Supports (PBIS) programming in schools to address the mental health and wellbeing of school communities. In 2021, the Solano County Office of Education was awarded \$150,000 over 2 years to facilitate a PBIS initiative with the Dixon Unified School District and the Vallejo City Unified School District. Prior to the COVID-19 pandemic, 58 percent of Dixon Unified School District students and 72 percent of Vallejo City Unified School District students were identified as being socioeconomically disadvantaged and having higher than California state average of chronic absenteeism (California 10 percent, Dixon 11 percent, Vallejo 24 percent) and suspension rates (California 3 percent, Dixon 7 percent, Vallejo 10 percent). Ten schools across the 2 districts with an expected reach of 10,000 students will implement the PBIS framework, aimed at establishing a positive school climate as well as providing direct access to comprehensive behavioral and social health services for school community.

As the health and economic toll of COVID-19 continued to mount, Kaiser Permanente accelerated efforts to broaden the scope of our care and services to address all factors that affect people's health. For example, in 2020 Kaiser Permanente provided grants totaling \$6.3 million to strengthen COVID-19 prevention and response for people experiencing homelessness across our regions and service areas. In 2021, Kaiser Permanente continued to play a critical leadership role in responding to the evolving needs of our members and community during the pandemic. For example, Kaiser Permanente allocated approximately \$191,900 in the Vacaville service area to deploy grassroots strategies to increase uptake in COVID-19 vaccines among communities disproportionately impacted by the pandemic, remove barriers to vaccine access, and address misinformation about vaccine safety and efficacy. With these investments, Touro University California brought COVID-19 vaccines and education to individuals and families living in the ZIP code areas most impacted by COVID-19 through its 21 pop-up clinics held in the Vacaville service area, which provided 549 vaccinations to individuals (>12yrs).

## Kaiser Permanente Vacaville Medical Center 2019 IS priority health needs and strategies

### Mental Health and Well Being

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During 2020-2021, 22 grants were awarded to community organizations, for a total investment of \$419,154 to address mental health and well-being in the Vacaville service area.

#### *Examples and outcomes of most impactful strategies*

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##### Bridges to Wellness

Caminar was awarded \$20,000 to strengthen the connectivity and provision of care within health care and the social services safety net. The Bridges to Wellness program is expected to serve 140 people currently or previously experiencing homelessness in Solano County and will provide free health and wellness education and activities in group and individual settings.

##### Positive Behavioral Interventions and Supports

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The Solano County Office of Education was awarded \$150,000 over 2 years to facilitate a Positive Behavioral Interventions and Supports (PBIS) initiative with the Dixon Unified School District and the Vallejo City Unified School District. Ten schools across the 2 districts with an expected reach of 10,000 students will implement the framework, aimed at establishing alternatives to suspension and other disciplinary measures through effective preventative behavioral interventions.

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## Community and Family Safety

During 2020-2021, 7 grants were awarded to community organizations, for a total investment of \$185,681 to address community and family safety in the Vacaville service area.

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### *Examples and outcomes of most impactful strategies*

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#### Kroc Center After School Program

The Salvation Army, Del Oro Division was awarded \$20,000 to increase high school graduation rates for underrepresented youth in Solano County. The Kroc Center After School Program is expected to improve the behavioral and physical wellbeing of 95 at-risk youth aged 6 – 17 by providing adult-supervised activities such as homework completion, arts and crafts, and structured group-based activities in an after-school setting.

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## Economic Opportunity

During 2020-2021, 28 grants were awarded to community organizations, for a total investment of \$360,326 to address mental health and well-being in the Vacaville service area.

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### *Examples and outcomes of most impactful strategies*

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#### Students Overcoming Adversity and Recidivism (SOAR) Solano County Project

The Solano Community College Education Foundation was awarded \$20,000 to support the employment needs of previously incarcerated and/or system-impacted community college students. The Students Overcoming Adversity and Recidivism (SOAR) Solano County Project will work in partnership with other community agencies to provide wraparound services to help 100 unemployed and underemployed community college students who face barriers to employment prepare and apply for quality jobs, secure employment, and thrive at work.

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#### Ending Homelessness for the Low-Income in Solano County

SHELTER, Inc. was awarded \$25,000 to end homelessness for low-income individuals earning 31-50 percent of Area Median Income (AMI) in Solano County. The project will provide evidence-based prevention, diversion, and housing stabilization strategies to 9 precariously housed households in Solano County whose income level disqualifies them from receiving other types of state and local housing and homelessness assistance.

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#### Improving Economic Security with the Family Strengthening Fund

The Children's Network of Solano County was awarded \$25,000 to support the staff time, technology upgrades, and operational supports needed to implement a data collection system that integrates their Family Strengthening Fund partners with the Unite Us referral platform. The funds will support The Children's Network of Solano County and their partners to improve the lives of 1,000 low-income children and their families by assisting them to navigate and access essential services including medical care, housing, food, and other basic necessities.

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## Access to Care and Coverage

**Care and coverage:** Kaiser Permanente Vacaville Medical Center ensures health access by serving those most in need of health care through Medicaid, the Children’s Health Insurance Program (CHIP) and other government-sponsored programs, charitable health coverage, and medical financial assistance.

	Individuals served		Amount	
	2020	2021	2020	2021
Medicaid, CHIP and other government-sponsored programs	18,613	21,428	\$17,549,629	\$6,085,637
Charitable Health Coverage	49	40	N/A	\$191
Medical Financial Assistance	4,649	3,528	\$4,385,728	\$3,498,675
<b>Total care &amp; coverage</b>	<b>23,311</b>	<b>24,996</b>	<b>\$21,935,357</b>	<b>\$9,584,503</b>

**Other access to care and coverage strategies:** During 2020-2021, 31 grants were awarded to community organizations, for a total investment of \$896,279 to address access to care and coverage in the Vacaville service area.

*Examples and outcomes of most impactful other strategies*

### Access to Care and Basic Needs

Dixon Family Services was awarded \$25,000 to provide culturally competent and bilingual access to health and other supportive services for vulnerable families and individuals. The Access to Care and Basic Needs program will increase access to comprehensive health care and coverage, increase access to social services, and reduce food insecurity for 120 low-income families and individuals who are struggling amid the COVID-19 pandemic.

### COVID-19 Vaccine Equity in Dixon

Community Medical Centers, Inc. was awarded \$77,000 to increase vaccination rates among the communities hardest hit by the pandemic and address inequitable access barriers that prevent timely vaccination. The funding will enable CMC to leverage strategic and program support to address gaps in their current capacity to provide underserved patients with access to vaccinations, education, and to reduce their barriers to obtaining the vaccines, including transportation, insurance, and technology access. An estimated 2,600 underserved individuals will be served by the program.

### Yolo County Thrive 211 Partnership 2021

Yolo County was awarded \$100,000 over two years to leverage 211 services to provide resource navigation for clients with social needs not addressed within the Thrive Local network. The program is expected to reach about 9,600 individuals in the Yolo County region.

## Appendix

- A. Secondary data sources
- B. Community input
- C. Community resources

## Appendix A: Secondary data sources

### Kaiser Permanente Community Health Data Platform

<b>Source</b>	<b>Dates</b>
1. American Community Survey	2015 - 2019
2. Behavioral Risk Factor Surveillance System	2020
3. CDC, Interactive Atlas of Heart Disease and Stroke	2016 - 2018
4. Center for Medicare & Medicaid Services	2018
5. CMS National Provider Identification	2019
6. Dept of Education ED Facts & state data sources	Varied dates
7. EPA National Air Toxics Assessment	2014
8. EPA Smart Location Mapping	2013
9. Esri Business Analyst	2020
10. Esri Demographics	2020
11. FBI Uniform Crime Reports	2014 - 2018
12. Feeding America	2018
13. FEMA National Risk Index	2020
14. Harvard University Project (UCDA)	2018
15. HRSA Area Resource File	2019
16. HUD Policy Development and Research	2020
17. National Center for Chronic Disease Prevention and Health Promotion	2018
18. National Center for Education Statistics	2017 - 2018
19. National Center for Health Statistics	2018
20. National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention	2018
21. NCHS National Vital Statistics System	2015 - 2019
22. NCHS US Small-area Life Expectancy Estimates Project	2010 - 2015
23. NCI State Cancer Profiles	2013 - 2017
24. NCI United States Cancer Statistics	2013 - 2017
25. NHTSA Fatality Analysis Reporting System	2014 - 2018
26. US Geological Survey; National Land Cover Database	2016
27. USDA Food Environment Atlas	2016

### Additional secondary data sources

<b>Source</b>	<b>Dates</b>
1. Advancement Project California, RACE COUNTS, racecounts.org	2022
2. American Community Survey	2011 - 2015
3. California Department of Justice	Varied dates
4. California Department of Public Health	2016 - 2018
5. California Health Interview Survey	2011 - 2019
6. California Healthy Kids Survey	2017 - 2019
7. HUD Comprehensive Housing Affordability Strategy	2013 - 2017
8. Vera Institute of Justice	2018

## Appendix B. Community input

	Data collection method	Affiliation	Number	Perspectives represented	Role	Date
1	Key informant interview	Aldea Children & Family Services	1	Low-income families, medically underserved, communities of color	Leader	8/11/2021
2	Key informant interview	Caminar	1	People experiencing homelessness	Leader	8/30/2021
3	Key informant interview	Community Medical Centers	2	Low-income, medically underserved, communities of color	Leaders	8/17/2021
4	Key informant interview	Napa Community Health Initiative	1	Low-income, medically underserved, communities of color	Leader	8/12/2021
5	Key informant interview	Napa/Solano Area Agency on Aging	1	Seniors	Leader	8/11/2021
6	Key informant interview	OLE Health	1	Low-income, medically underserved, communities of color	Leader	8/24/2021
7	Key informant interview	Rio Vista CARE	1	Low-income families, children, rural communities	Leader	8/18/2021
8	Key informant interview	Solano County Office of Education	1	School-aged youth	Leader	8/2/2021
9	Key informant interview	Solano County Public Health	2	Public health	Representatives	8/12/2021 9/1/2021
10	Key informant interview	Solano Family Justice Center	1	Low-income, communities of color, domestic violence survivors	Leader	8/18/2021
11	Key informant interview	The Leaven	1	Low-income, communities of color, youth, medically underserved	Leader	8/13/2021

Note: additional community input in the form of interviews and focus groups was collected by Community Health Insights on behalf of Sutter Health and shared with Harder+Company Community Research as part of a regional CHNA collaboration.

## Appendix C. Community resources

Identified need	Resource provider name	Summary description
Multiple needs	Caminar (Resource Connect Solano)	Caminar is a nonprofit, community-based agency that has been empowering and supporting individuals and families to move toward resilience, wellness, and independence for more than 50 years. They deliver high-quality prevention, treatment, and recovery services to those with complex mental health, substance use, and co-occurring needs.
	Dixon Family Services	Dixon Family Services is a community-based organization serving Dixon and the surrounding rural areas providing social health services and resources including employment, financial stability, improved nutrition, escape from domestic violence, sobriety, emotional wellness, positive parenting skills, safe and healthy homes, and family cohesiveness.
	Food Bank of Contra Costa and Solano	The Food Bank of Contra Costa and Solano distributes food into the community by operating free food programs, partners with 260+ local partners to decrease community food insecurity. CalFresh Team assists individuals with the CalFresh application process and identify local food sources.
	Napa/Solano Area Agency on Aging	Napa/Solano Area Agency on Aging advocates for and enhances the quality of life, health, independence, and dignity of older adults in Napa and Solano counties. They provide leadership in addressing issues that relate to older adults, develop community-based systems of care that provide services which support independence, and promote citizen involvement in the planning and delivery of services.
	Legal Services of Northern California	Legal Services of Northern California provides quality legal services in the realm of housing, health insurance, public benefits, and other civil legal issues affecting low-income Californians to empower people to identify and defeat the causes and effects of poverty within communities.
	Solano Pride Center	Solano Pride Center works to ensure that lesbian, gay, bisexual, transgender, queer, questioning, and intersex individuals in Solano County have a network of resources and tools to meet their needs. They offer community building, recreational, and information activities, including an information and referral line, a speaker's bureau, and weekly groups for women, men, and youth.
	Unite Us	The Unite Us care coordination platform offers health care and social service providers a way to build and scale networks, collectively track outcomes, identify service gaps and at-risk populations, and empower community members to take ownership of their own health.
	Vacaville Neighborhood Boys and Girls Club	The Vacaville Neighborhood Boys & Girls Club is one of the most influential youth development organizations in the Vacaville community and its vision is that all Club members graduate from high school with a plan for the future, demonstrating good character and citizenship, and leading a healthy lifestyle.
Access to care	Health centers (various)	There are 4 Federally Qualified Health Centers (Community Medical Centers, OLE Health, La Clínica de la Raza, and Winters Healthcare) that serve the Vacaville service area with multi-lingual and accessible medical, dental, behavioral, and other health services.

Identified need	Resource provider name	Summary description
	Napa Community Health Initiative (CHI)	CHI improves the health of children, families, and seniors by providing access to care through health insurance enrollment, patient education, and advocacy in Napa and Solano counties.
	Solano County Public Health	The mission of Solano County Public Health is to optimize the health of the community through individual and population-based services which promote health and safety through prevention and treatment of disease and injury.
	Solano HEALS (Health Equity for African American/Black Lives)	The mission of Solano HEALS is to promote equity in healthy births for Black babies and their families in Solano County.
Community safety	Solano Family Justice Center	Solano Family Justice Center offers victims of child abuse, domestic violence, elder abuse and sexual assault an opportunity to build hope and new futures through education, intervention, and collaboration with public and private organizations throughout Solano County.
	The Leaven	The Leaven brings after-school mentoring and tutoring programs to low-income neighborhoods throughout Solano County where high dropout rates and gangs threaten the community. Their learning centers are situated in the apartment complexes where their students and families live, providing a safe place for children to engage in mentorship and tutoring programs.
Housing	Eden Housing	Eden Housing creates and sustains high-quality affordable housing communities that advance equity and opportunity for all. They serve very low, low and moderate-income families, seniors, veterans, people living with physical, mental, or developmental disabilities, and the formerly homeless.
	Shelter, Inc.	Shelter, Inc. provides eviction prevention services, interim housing resources, offers financial assistance and wrap around services as part of long-term housing supports, and works directly with formerly incarcerated people to assist them access and sustain housing in Solano County.
Mental & behavioral health	Aldea	Aldea Children & Family Services improves people's mental health so they can strengthen their relationships and become engaged in the community. Through critical mental health, treatment foster care and adoption, and support services, Aldea helps more than 3,900 people annually in Napa and Solano counties who face obstacles to accessing and receiving effective treatment.
	Drug Safe Solano	Drug Safe Solano envisions a Solano County where all residents have equitable access to opportunities that enable them to lead healthy lives within a safe and healthy community free of misuse of drugs. They seek to decrease stigma through resources and education, prevent opioid overdoses and deaths, and expand access to treatment.
	Rio Vista CARE	Rio Vista CARE is a regionally based low-cost counseling and family resource center serving the small towns and rural areas surrounding the Delta. They offer family counseling, school-based individual counseling, and support groups.