# 2019 Implementation Strategy Report

Kaiser Foundation Hospital: Panorama City

License number: 9300000358

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

March 18, 2020

**KAISER PERMANENTE®**

Kaiser Permanente Southern California Region Community Health

Implementation Strategy Report for KFH-Panorama City

## Contents

## I. General information

| | |
|---|---|
| Contact Person: | Cynthia Cifuentes, Sr. Public Affairs Director<br><br>Cynthia.LCifuentes@kp.org |
| Date of written plan: | December 16, 2019 |
| Date written plan was adopted by authorized governing body: | March 18, 2020 |
| Date written plan was required to be adopted: | May 15, 2020 |
| Authorized governing body that adopted the written plan: | Kaiser Foundation Hospitals Board of Directors' Community Health Committee |
| Was the written plan adopted by the authorized governing body on or before the 15th day of the fifth month after the end of the taxable year the CHNA was completed? | Yes ☒          No ☐ |
| Date facility's prior written plan was adopted by organization's governing body: | March 16, 2017 |
| Name and EIN of hospital organization operating hospital facility: | Kaiser Foundation Hospitals, 94-1105628 |
| Address of hospital organization: | One Kaiser Plaza, Oakland, CA 94612 |

## II. About Kaiser Permanente (KP)

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

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

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

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

## III. About Kaiser Permanente Community Health

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

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

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

For many years, we've worked side-by-side with other organizations to address serious public health issues such as obesity, access to care, and violence. And we've conducted Community

Health Needs Assessments to better understand each community's unique needs and resources. The CHNA process informs our community investments and helps us develop strategies aimed at making long-term, sustainable change—and it allows us to deepen the strong relationships we have with other organizations that are working to improve community health.

IV. Kaiser Foundation Hospitals – Panorama City

A. Map of facility service areas

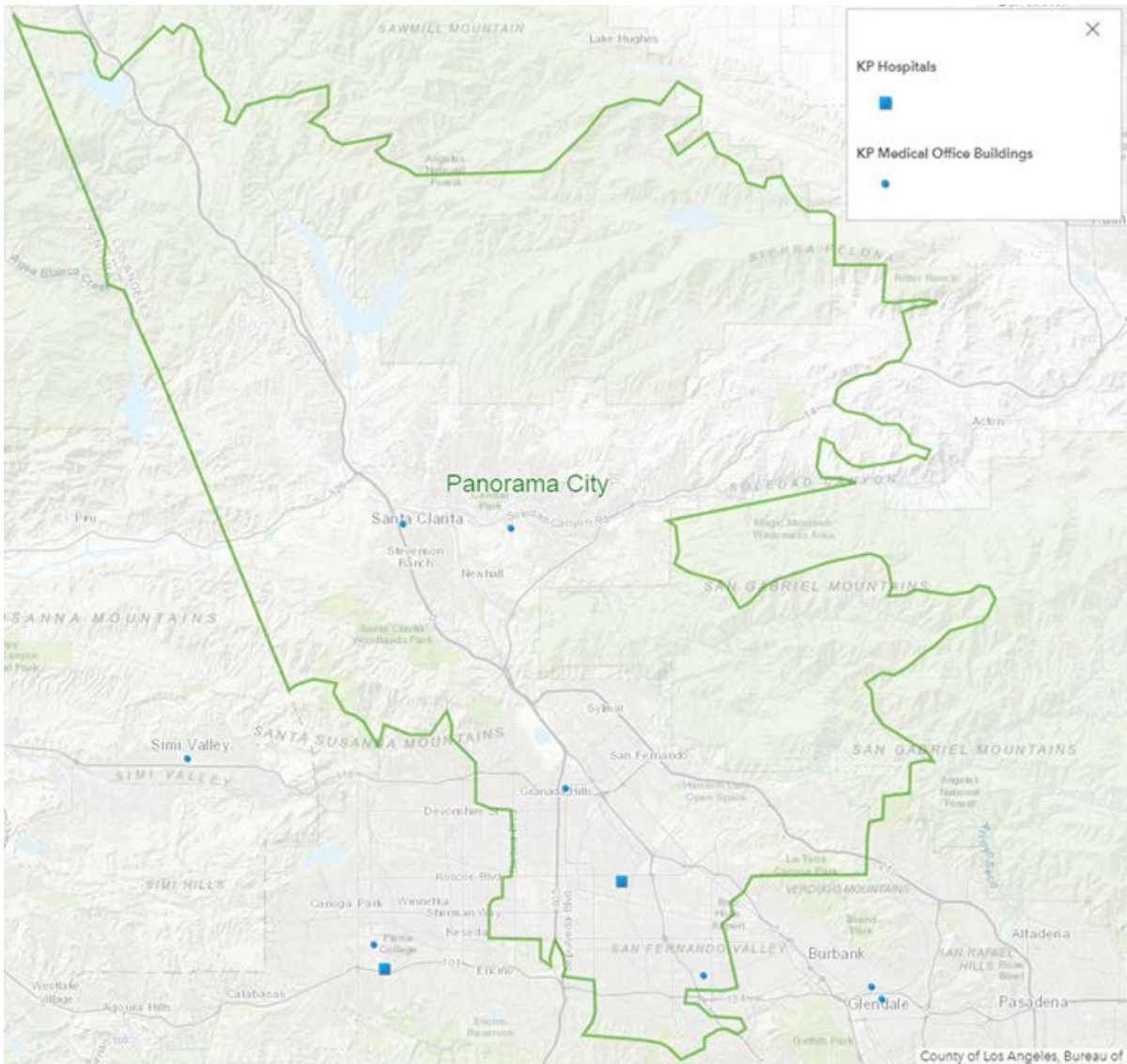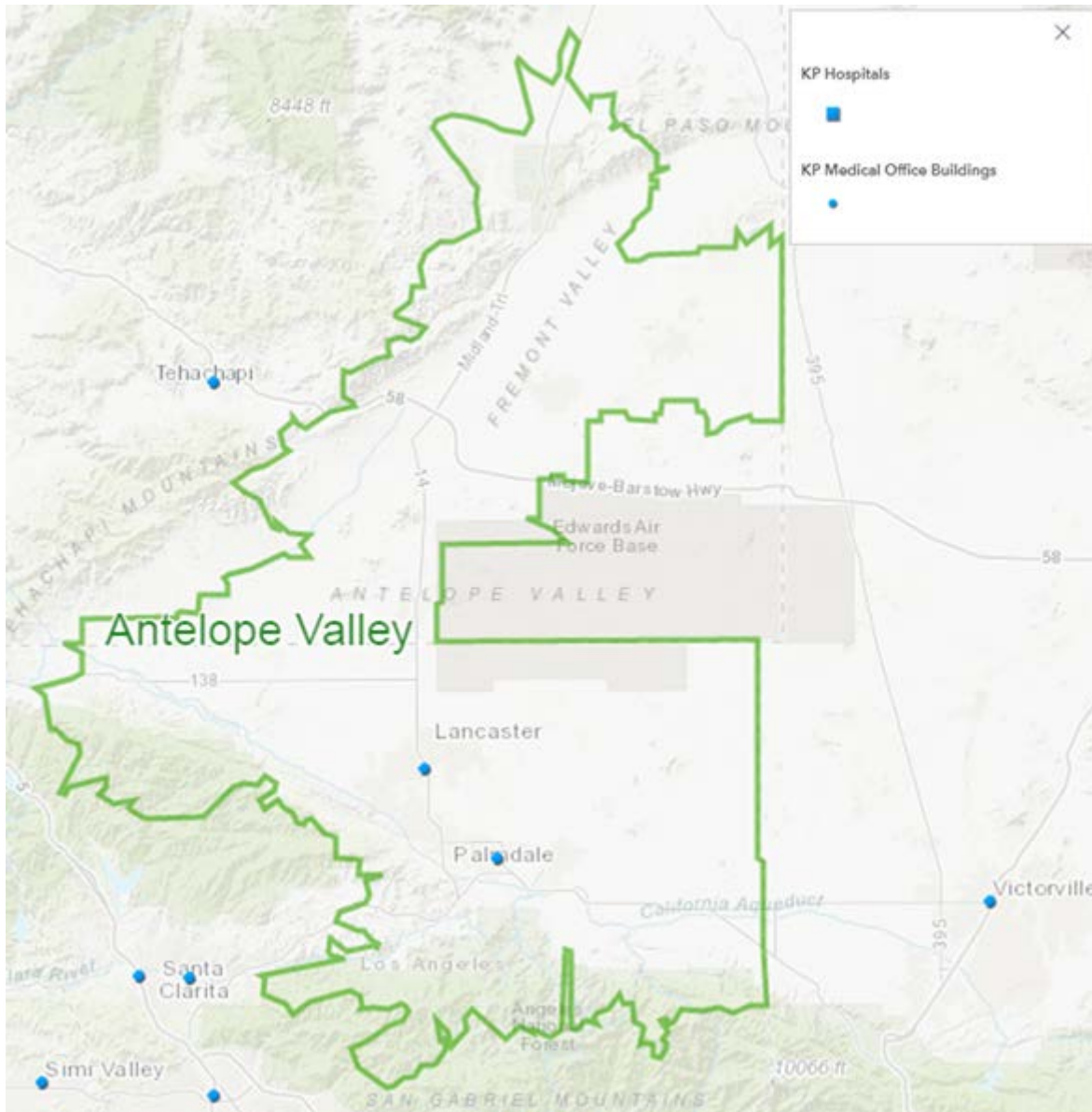*Figure A. KFH-Panorama City Service Area*

*Figure B. KFH-Antelope Valley Service Area*



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

The communities served by KFH-Panorama City Medical Center Service Area are tremendously diverse with respect to demographic and socio-economic composition, geography and topography. KFH-Panorama City Medical Center Service Area is part of an integrated delivery system that serves the communities of the East San Fernando Valley, Santa Clarita Valley, and Antelope Valley in addition to 4 zip codes in Kern County. For the purposes of this report, the KFH-Panorama City Medical Center Service Area distinguishes between the two sub-service areas of Panorama City Service Area and the Antelope Valley Service Area.

The Panorama City Service Area includes Agua Dulce, Arleta, Canyon Country, Castaic, Frazier Park, Granada Hills, Lake View Terrace, Mission Hills, Newhall, North Hills, North Hollywood, Pacoima, Panorama City, San Fernando, Santa Clarita, Saugus, Sherman Oaks, Stevenson Ranch, Sun Valley, Sunland, Sylmar, Tujunga, Universal City, Valencia, and Van Nuys.

The Antelope Valley Service Area includes Acton, California City, Elizabeth Lake, Hi Vista, Juniper Hills, Lake Hughes, Lake Los Angeles, Lancaster, Littlerock, Llano, Mojave, Palmdale, Pearblossom, Quartz Hill, Rosamond, and Valyermo.

C. Demographic profile of community served

The following tables include race, ethnicity, and additional socioeconomic data for the KFH-Panorama City and KFH-Antelope Valley service areas. Please note that "race" categories indicate "non-Hispanic" population percentage for Asian, Black, Native American/Alaska Native, Pacific Islander/Native Hawaiian, Some Other Race, Multiple Races, and White. "Hispanic/Latino" indicates total population percentage reporting as Hispanic/Latino.

*Table 1. Demographic Profile: KFH- Panorama City*

| Race/Ethnicity | | Socioeconomic data | |
|---|---|---|---|
| Total Population | 1,232,358 | Living in Poverty (<100% Federal Poverty Level) | 16.36% |
| Asian | 8.78% | Children in Poverty | 22.78% |
| Black | 3.73% | Unemployment | 4.1% |
| Hispanic/Latino | 51.47% | Uninsured Population | 16.03% |
| Native American/Alaska Native | 0.17% | Adults with No High School Diploma | 22.30% |
| Pacific Islander/Native Hawaiian | 0.13% | | |
| Some Other Race | 0.26% | | |
| Multiple Races | 2.26% | | |
| White | 33.19% | | |

*Table 2. Demographic Profile: KFH- Antelope Valley*

| Race/Ethnicity | | Socioeconomic data | |
|---|---|---|---|
| Total Population | 424,496 | Living in Poverty (<100% Federal Poverty Level) | 21.99% |
| Asian | 3.69% | Children in Poverty | 29.93% |
| Black | 14.61% | Unemployment | 4.4% |
| Hispanic/Latino | 45.64% | Uninsured Population | 12.77% |
| Native American/Alaska Native | 0.31% | Adults with No High School Diploma | 21.70% |
| Pacific Islander/Native Hawaiian | 0.15% | | |
| Some Other Race | 0.24% | | |
| Multiple Races | 2.58% | | |
| White | 32.77% | | |

Source: American Community Survey, 2012-2016

V. Purpose of Implementation Strategy

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

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

List of Community Health Needs Identified in 2019 CHNA Report

Below is the list of health needs identified for the KFH Panorama City service area through the 2019 Community Health Needs Assessment process:

1. Access to Care

2. Economic Security

3. Heart Disease and Stroke

4. HIV/AIDS/STIs

5. Maternal and Infant Health

6. Mental and Behavioral Health

7. Obesity/Diabetes/Healthy Eating Active Living

VI. Who was involved in the Implementation Strategy development

A. Partner organizations

KFH-Panorama City engaged the following community partners in the development of the Implementation Strategy plan. These partners represent multiple sub-populations in the community and were able to provide multiple perspectives on developing a strategy to address health needs.

- Antelope Valley Partners for Health
- Dignity Health – Northridge Hospital Medical Center
- Providence Holy Cross Medical Center
- Providence St. Joseph Medical Center
- Valley Presbyterian Hospital
- Valley Care Community Consortium

B. Community engagement strategy

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

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

KFH Panorama City identified four priority health needs through the engagement process. The identified needs, outcomes, and proposed strategies for this Implementation Strategy Report were shared with Kaiser Permanente stakeholders and community partners. Questions and feedback on the proposed strategies were gathered. KFH Panorama City conducted key informant interviews, launched an online survey, and conducted a focus group to allow key internal and community stakeholders to provide input on the Implementation Strategy. Key Informant Interviews and Survey respondents included representatives from Kaiser Permanente. Focus Group participants included representatives from Kaiser Permanente, local hospitals, and community health consortia representing local nonprofit organizations, public health, health care organizations, schools, and colleges.

The stakeholder input validated the importance of the priority health needs identified by KFH Panorama City. Community stakeholders provided information on available community resources and identified collaborative opportunities to collectively address the KFH Panorama City identified health needs. For example, local hospitals were asked to share their prioritized health needs and potential strategies for addressing them. As a result, KFH Panorama City considered this information when designing strategies to address the priority health needs.

| | Method of Data Collection | Job Title | Number of People | Notes on Input |
|---|---|---|---|---|
| **KP Stakeholders** | | | | |
| 1 | Key Informant Interview | Department Administrator, Social Medicine | 1 | Recommended follow up on interventions for mental health and economic security, specifically around homelessness. |
| 2 | Key Informant Interview | Department Administrator, Geriatrics, Palliative Care, Special Needs Plan, & Transitional Care Center | 1 | Provided input on KP operational practices. Recommended follow up on interventions connecting patients to resources that address their non-medical needs. |

| | Method of Data Collection | Job Title | Number of People | Notes on Input |
|---|---|---|---|---|
| 3 | Focus Group | Chief Operating Officer, Chief Nurse Executive, Asst Medical Group Administrator, Asst Area Medical Director, Sr Public Affairs Director | 5 | Provided input on KP operational practices and focus areas. Recommended interventions related to economic security, specifically workforce development and homelessness. |
| 4 | Focus Group | Chief Operating Officer, Area Medical Director, Chief Administrative Officer, Asst Medical Group Administrator, 2 Asst Area Medical Directors, Asst Administrator Outside Medical, Sr Public Affairs Director, Asst Public Affairs Director, Physician in Charge of MOB | 10 | Provided input on KP operational practices and focus areas. Recommended interventions related to access to care, obesity/HEAL/diabetes as well as economic security, specifically workforce development. |
| 6 | Survey | Physicians | 2 | Provided input on KP operational practices and focus areas. Recommended interventions and partnerships related to obesity/HEAL/diabetes. |
| **Community Organizations** | | | | |
| 7 | Focus Group | Community Benefit Managers from local hospitals and Executive Directors for community health consortia representing nonprofit organizations, public health, health care organizations, schools, and colleges | 5 | Sharing CHNA top health needs, strategic priorities, and opportunities for collaboration |

| | Method of Data Collection | Job Title | Number of People | Notes on Input |
|---|---|---|---|---|
| 8 | Survey | Community Benefit Managers from local hospitals and Executive Directors for community health consortia representing nonprofit organizations, public health, health care organizations, schools, and colleges | 6 | Sharing CHNA top health needs, strategic priorities, and opportunities for collaboration |

C. Consultant(s) used

Kaiser Permanente contracted with EVALCORP Research and Consulting to prepare the Implementation Strategy Report for the Panorama City/Antelope Valley service area. All EVALCORP staff hold advanced degrees and have completed graduate level courses in program evaluation, applied research methods, data collection tool development, data analysis, and advanced statistics. Staff working on the project have a cumulative total of over 50 years of evaluation and research experience and have engaged in over 20 strategic planning and needs assessment projects.

VII. Health needs that KFH Panorama City plans to address

A. Process and criteria used

Before beginning the Implementation Strategy health need prioritization process, KFH-Panorama City chose a set of criteria to use in selecting the list of health needs including the severity and magnitude of the need, the extent to which disparities in the need exist across race or place, and the extent which Kaiser Permanente is positioned to meaningfully contribute to addressing the need (e.g. relevant expertise, existing commitments to meet community health needs, unique business assets, community perception of urgency, existing promising interventions and prevention measures, the ability to address multiple health needs, etc.). The extent to which community voice spoke to the urgency of the health need through the CHNA and the existence of other community resources dedicated to the need were important additional criteria in making final health need selections. Definitions for criteria used in the health need selection process are presented below:

● **Severity of need:** This refers to how severe the health need is (such as its potential to cause death or disability) and its degree of poor performance against the relevant benchmark.
● **Magnitude/scale of the need:** The magnitude refers to the number of people affected by the health need.
● **Clear disparities or inequities:** This refers to differences in health outcomes by subgroups. Subgroups may be based on geography, languages, ethnicity, culture, citizenship status, economic status, sexual orientation, age, gender, or others.

- **Leveraging KP Assets:** KP can make a meaningful contribution to addressing the need because of its relevant expertise, existing strategies, and/or unique business assets as an integrated health system and because of an organizational commitment to improving community health.
- **Community prioritizes the issue over other issues:** This refers to the way community members perceive the urgency of addressing this issue.
- **Existing attention/resources dedicated to the issue:** This refers to the ability to enhance or build from existing efforts toward addressing this issue.
- **Effective and feasible interventions exist:** This refers to the existence and awareness of known interventions that have been applied elsewhere that are feasible to apply to the given service area.
- **A successful solution has the potential to solve multiple problems:** This refers to the ability for an intervention to address factors that contribute to more than one health priority.
- **Opportunity to intervene at the prevention level:** This refers to the ability to utilize prevention efforts that would have an impact on incidence and severity of the issue.

B. Health needs that KFH Panorama City plans to address

**Access to Health Care.** Access to comprehensive quality health care is important for the achievement of health equity and for increasing the quality of life for everyone. Limited access to health care can dramatically impact people's health outcomes. Access to certain kinds of care, such as maternal and infant health care, can impact the health outcomes of certain demographics more than others. Additionally, access to preventative care and treatment, such as for the prevention and treatment of STDs and HIV, reduces the spread of disease in communities and improves the health status of those throughout the service area. Through the community engagement process, health insurance, transportation, childcare, and awareness of available resources were identified by community members as some of the many mechanisms that would enable people to access necessary care. This health need was selected so that the promising interventions and practices available in the service area would reach all of those in the community and increase health outcomes overall.

**Economic Security.** Economic insecurity exists in both the Panorama City and Antelope Valley service areas. The experience of economic insecurity impacts local health needs, including asthma, poor mental health, obesity, diabetes, stroke, and cancer. In the Antelope Valley service area for example, on average, 22% of the population lives below the poverty level, and some subgroups in the service area, such as Latinos, experience higher levels of poverty (24%) than others. Through the community engagement process revealed that social and economic conditions greatly impact service area residents' ability to maintain a healthful lifestyle and prevent and manage chronic health conditions. For example, economic challenges contribute to lower educational attainment, which impact health outcomes across the life course and keeps residents at low income levels. Many residents must commute multiple hours a day in order to make a livable wage and pay for high living costs. This prevents many residents from having the time to exercise and cook healthy meals at home. Focusing on economic opportunity as a health need helps to draw connections between socioeconomic status, health, and illness and provides opportunities to intervene in areas where low income would otherwise result in worse health outcomes.

**Mental Health and Behavioral Health.** Mental health is an important component of a person's overall health and well-being. In fact, mental health issues can result in a 61% reduction in life expectancy. In the Panorama City and Antelope Valley service areas, 12% of residents report experiencing a mental health problem. Available data suggests White residents in the service areas are disproportionally impacted and die from suicide at nearly 70% above the service area average. In focus groups conducted during the community engagement process, community members emphasized the lack of available mental health services, especially for children in the Antelope Valley service area. Focusing on healing trauma and teaching coping skills is an important step for alleviating health issues that are exacerbated by stress. This health need was selected so that children, youth, adults, and older adults can have their mental and emotional health challenges alleviated and help build their resiliency.

**Obesity/Diabetes/Healthy Eating Active Living.** Access to supermarkets that carry affordable and healthful food options, safe outdoor recreational spaces, and preventative health care are important factors for preventing and managing chronic diseases like diabetes and obesity. Through the community engagement process, stakeholders emphasized that many Panorama City and Antelope Valley service area residents do not have access to these resources, especially those in minority communities, which contributes to higher rates of obesity. Challenges with food insecurity prevent community members from getting essential nutrients and instead encourage consumption of calorie dense foods that contribute to metabolic disorders. This is supported by the secondary data which indicates that Black and Latino residents in the Antelope Valley service area are disproportionately impacted, as they are obese at above average rates (31% and 12%, respectively) when compared to other ethnic and racial groups. In the Panorama City service area, Black and Latino residents are similarly impacted by obesity (39% and 25%, respectively). Addressing this health need by enhancing access to healthful foods and exercise is essential for preventing metabolic disorders and reducing multiple disease risk factors.


VIII. KFH Panorama City's Implementation Strategies

A. About Kaiser Permanente's Implementation Strategies

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

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

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

KFH Panorama City will draw on a broad array of strategies and organizational resources to improve the health of vulnerable populations within our communities, such as grant making, leveraged assets, collaborations and partnerships, as well as several internal KFH programs. The goals, strategic priorities, strategies (including examples of interventions), and expected outcomes are described below for each selected health need.

B. 2019 Implementation Strategies by selected health need

*Health Need #1: Access to Health Care*

| Long Term Goal | All community members have access to high quality health care services from a trained and diverse workforce in a coordinated delivery system. |
|---|---|
| Strategic priorities | 1. Increase coverage, access, and utilization of health care services for populations that are underserved, uninsured, and/or underinsured.<br><br>2. Improve and build the current and emerging workforce to meet the primary care needs of the community.<br><br>3. Improve the capacity of healthcare systems to provide quality healthcare, including interventions to address the social determinants of health. |
| Strategies & Core Interventions | 1.1 Provide access and comprehensive health care to low-income individuals and families who do not have access to public or private health coverage.<br>• The Kaiser Permanente Medicaid program provides high-quality medical care services to Medicaid eligible participants who would otherwise struggle to access care.<br>• The Kaiser Permanente Medical Financial Assistance program provides temporary financial assistance to low-income individuals who receive care at Kaiser Permanente facilities and who can't afford medical expenses and/or cost sharing.<br>• The Kaiser Permanente Charitable Health Coverage program provides access to comprehensive health care to low-income individuals and families who do not have access to public or private health coverage.<br><br>1.2 Support access to care for patients through collaboration among community clinics, clinic networks, and other safety net providers.<br>• With support of grant funding, Regional Associations of California (Essential Access Health) strengthen the capacity of California's community clinics and |

health centers and to advance local health delivery system transformation through statewide policy.

- As a long-time member providing funding over the years, continue to support a coalition of public and private community partners in Service Planning Area (SPA) 2 led by Valley Care Community Consortium, to advocate, plan, assess needs, and facilitate development of effective programs and policies to improve the health of the residents in the San Fernando and Santa Clarita Valleys.
- Kaiser Permanente Board Placement Program engages providers and leaders in serving on Federally Qualified Health Centers boards of directors where they share best practices, expert knowledge, and provide governance support, including serving on quality improvement and strategic planning committees.

2.1 Support and implement physician and other pipeline and training programs, using evidence-based, culturally competent and patient-centered population management modules.

- With the support of grant funding, the California Primary Care Association supports building capacity for the primary care workforce by developing a comprehensive curriculum and training program for health centers desiring to implement or sustain residency training programs and partnerships.
- Kaiser Permanente's workforce development programs encourage high school and community college students to explore health care career options at an early age among underserved, diverse populations.
- KFH-Panorama City participates on the Antelope Valley Unified High School District Career Technical Education Advisory committee as well as William S Hart High School College & Career Readiness Committee by providing input on healthcare workforce needs and opportunities to collaborate.

3.1 Design, pilot and implement systems for screening community members with social (non-medical) needs and refer to community-based programs.

- The Kaiser Permanente Thrive Local initiative integrates the social determinants of health into ongoing care plans by screening and connecting low-income individuals and families to community and government resources.

3.2 Strengthen the capacity and infrastructure of community clinics to effectively prevent and manage chronic disease, including cardiovascular health and diabetes.

- Transforming Cardiovascular Care in our Communities (TC3) supports community clinics, public hospitals, and health systems to reduce cardiovascular disease by implementing innovative population health management practices.
- With the support of grant funding, the International Pre-Diabetes Center provides Federally Qualified Health Centers with training on evidence-based, nationally accredited, diabetes self-management education and training for vulnerable populations.

| | |
|---|---|
| Expected outcomes | KP aims to achieve its strategic priorities through interventions, that if successfully implemented, could result in a set of expected outcomes, such as:<br>• Sustained and/or enhanced availability of services and financial resources to support coverage and access to quality healthcare for uninsured and underinsured community members.<br>• Sustained and/or enhanced training and residency programs in primary healthcare.<br>• Improved healthcare provider capacity to screen their members and patients for non-medical social needs.<br>• Improved referral and coordination between healthcare and community-based providers to address the social needs of communities. |

*Health Need #2: Economic Security*

| | |
|---|---|
| Long Term Goal | All community members experience improved economic security and access to social services, including affordable housing, educational attainment, training and employment, and healthy foods. |
| Strategic priorities | 1. Preserve and improve the availability of affordable housing and improve care coordination to serve individuals experiencing homelessness and to prevent displacement.<br><br>2. Improve educational attainment and employment opportunities. |
| Strategies & Core Interventions | 1.1 Enhance the infrastructure and capacity of service providers to serve individuals at risk or experiencing homelessness.<br>• With support of capital grant funding, LA Family Housing Corporation will build a new health care center that is part of a larger regional hub in the San Fernando Valley that includes Permanent Supportive Housing.<br>• With the support of grant funding, The People's Concern provides housing and supportive services at their Kensington Campus for homeless individuals living in the Antelope Valley.<br>• With the support of grant funding, Bridge to Home is expanding their winter shelter to a year round crisis and bridge housing operation in alignment with the Coordinated Entry System ensuring those experiencing homelessness in the Santa Clarita Valley have access to housing, case management, healthcare services, behavioral health services, housing navigation, and employment assistance. |

1.2 Support and participate in collaboratives that support coordination and funding of resources (such as health services and housing) for individuals at risk or experiencing homelessness.

- Kaiser Permanente, Southern California is a key partner in the United Way Funder's Collaborative (Home for Good), which brings together stakeholders, funders, and leaders all working to address housing affordability and homelessness. The collaborative was a key contributor to the development of the county's Coordinated Entry System (CES) lead agencies that connect homeless individuals to services.
- As a long-time participant in the San Fernando/Santa Clarita Valley Homeless Coalition and Antelope Valley Homeless Coalition, Kaiser Permanente collaborates and provides funding to various SPA 1 & 2 partner organizations supporting the coordination of health services and housing for homeless individuals such as Los Angeles Family Housing and Northeast Valley Health Corporation.

2.1 Support the long-term economic vitality of communities through procurement, hiring and workforce development, and/or small business development impact investing.

- The Kaiser Permanente Inner City Capital Connections (ICCC) provides training, education and mentorship to small businesses helping to grow revenue, increase jobs, and improve their capacity and access to new sources of capital.
- The Kaiser Permanente Social Enterprises strategy works with competitive, revenue-generating businesses with the social mission to hire and provide training to people who are striving to overcome employment barriers, including homelessness, incarceration, substance abuse, mental illness, and limited education.
- The Kaiser Permanente, High Impact Hiring is a talent-sourcing strategy that aligns business needs with positive community impact. High Impact Hiring creates career opportunities for people with employment barriers, focusing on specific populations of disadvantaged people or specific geographic areas.

| | |
|---|---|
| Expected outcomes | KP aims to achieve its strategic priorities through interventions, that if successfully implemented, could result in a set of expected outcomes, such as:<br><br>• Enhanced availability of housing assistance and programs, such as eviction prevention and defense, rental assistance programs, and other supportive services.<br>• Improved coordination of housing resources and services for individuals experiencing and/or at risk of homelessness.<br>• Improved employment opportunities for hard to hire community members.<br>• Improved access to training and workforce development opportunities underserved community members. |

*Health Need #3: Mental and Behavioral Health*

| Long Term Goal | All community members have optimal levels of mental health and well-being through improved equitable access to evidence-based, high quality, appropriate care and reduced effects of stigma. |
|---|---|
| Strategic priorities | 1. Improve access and connection to mental healthcare in clinical and community settings.<br><br>2. Improve and build the current and emerging mental health workforce to meet community needs.<br><br>3. Reduce mental health stigma and improve knowledge, capacity and resilience in individuals, communities, and organizations. |
| Strategies & Core Interventions | 1.1 Support the infrastructure and capacity building of community organizations and clinics to improve access to quality mental health care.<br>• With the support of grant funding, Children Now Improving California Students' Readiness to Learn will map the current state and district school-based health policy efforts and develop a list of policy options to improve school-based mental health services. Partner organizations will receive resources and technical assistance on best policies/ practices related to school discipline, teacher credentialing, mental health, school attendance, and Local Control Funding Formula.<br><br>1.2 Support the integration of mental health care, case management, and navigation services into clinical care and community settings.<br>• With the support of grant funding, the Child & Family Center provides school based mental health support and counseling for children showing early signs of behavioral health problems in elementary schools in the Santa Clarita Valley.<br><br>2.1 Support the education and training of licensed mental health professionals to be culturally competent.<br>• With the support of grant funding, Hathaway-Sycamores Child and Family Services will provide training for group home foster care providers in Southern California so that they can become certified as Short Term Residential Therapeutic Programs.<br>• With support of grant funding, the Tarzana Treatment Center seeks to improve and build the current and emerging mental health workforce to serve Latino community members by educating and training mental health professionals and interns in best practices for clinical cultural competency.<br><br>2.2 Support the utilization of pipeline and training programs to increase the number of licensed and diverse mental health professionals. |

| | |
|---|---|
| | • Kaiser Permanente Medical Exploring post in the Antelope Valley provides hands-on learning experiences by exposing high school students to health careers options including mental health professional opportunities.<br><br>3.1 Support efforts to improve the community and social support system's knowledge, attitudes, beliefs and perceptions about mental health, trauma and resilience.<br>• With the support of grant funding, the Children's Partnership Advancing Health Equity for California's Children will provide 500 families with culturally-informed materials and toolkits to help connect them to/keep health coverage, understand benefits available to them, and get needed care.<br>• With the support of grant funding, the Mental Health America of Los Angeles – Antelope Valley Mental Health First Aid (MHFA) Project seeks to reduce mental health stigma by providing MHFA training diverse individuals in areas with high homeless populations in the Antelope Valley.<br>• With the support of grant funding, The Children's Center of Antelope Valley and the LA County Department of Mental Health Antelope Valley Health Neighborhood formed the Antelope Valley Maternal Mental Health Network, which conducts maternal health analysis and provides outreach and training to medical and mental health providers as well as non-clinical groups, and facilitates community-based support groups for the area.<br>• The Kaiser Permanente Public Good Projects' Action Minded campaign is a digital community health intervention using education, social engagement and multi-media tools to engage the general public, issue-advocates and community partners in reducing stigma towards mental health conditions.<br><br>3.2 Support the enhancement of organizational culture, practices and policies in schools and other institutions to be trauma-informed.<br>• With the support of grant funding, College of the Canyons is implementing Early Childhood Mental Health Consultation at its on-site pre-school ensuring school policies are in alignment to creating a positive school climate while providing training for faculty on how to support the socioemotional development of the child. |
| Expected outcomes | KP aims to achieve its strategic priorities through interventions, that if successfully implemented, could result in a set of expected outcomes, such as:<br>• Enhanced capacity in clinical and community-based settings to address community mental health needs.<br>• Increased number and diversity of individuals in the mental health workforce.<br>• Increased number of culturally competent individuals in the mental health workforce.<br>• Improved understanding of and attitudes toward mental health care among individuals and organizations. |

*Health Need #4: Obesity/Diabetes/Healthy Eating Active Living*

| Long Term Goal | All Community Members eat healthy and move more as part of daily life. |
|---|---|
| Strategic priorities | 1. Reduce food insecurity in the community and improve access to healthy foods.<br><br>2. Improve environments and opportunities that enable daily physical activity. |
| Strategies & Core Interventions | 1.1 Support the capacity of communities and anchor organizations to adopt and implement policies and programs to ensure access to healthy foods.<br>• The Kaiser Permanente Healthy Eating Active Living (HEAL) Initiative, in partnership with Alliance for a Healthier Generation, supports Title 1 schools with the adoption and implementation of policies and practices to continuously improve the school's culture and practices around health.<br>• With the support of grant funding, Meet Each Need with Dignity (MEND) operates their Pathways to Wellness program providing case management, healthy food through their foodbank, CalFresh enrollment assistance, healthy cooking and nutrition classes, as well as grocery store tours to increase individuals and families access to healthy foods.<br>• Kaiser Permanente Panorama City hosts a weekly farmers market open to the public, which provides access to largely locally-grown fruits and vegetables. The farmers market accepts WIC and CalFresh electronic benefit transfers. The markets also work to educate the public on the benefits of healthy eating and active living.<br><br>1.2 Design, pilot and implement programs and systems for promoting, screening and/or enrolling community members in food benefit programs.<br>• The Kaiser Permanente Food for Life initiative delivers a multi-pronged approach to improve food security, such as the CalFresh enrollment campaign utilizes multi-modal outreach to increase CalFresh enrollment for eligible community members.<br>• With support of grant funding, the California Food Policy Advocates increase access to food sources for underserved community members by increasing the number of households and individuals that are enrolled in CalFresh and supporting the acceptance of this benefit among food relators.<br><br>1.3 Support programs that procure, recover and/or redistribute food to food insecure communities.<br>• The Kaiser Permanente Food Recovery and Food Redistribution program envision foodservices as the source of nutritious meals for patients, staff and the broader community by distributing food to food insecure communities.<br>• With support of grant funding, the California Association of Food Banks Farm to Family utilizes advocacy and outreach efforts to procure and provide fresh produce to food banks serving individuals and families who are food insecure. |

| | |
|---|---|
| | 2.1 Support the capacity of communities and anchor organizations to adopt and implement policies and programs to ensure access to safe spaces and physical activity opportunities.<br>• The Kaiser Permanente Healthy Eating Active Living (HEAL) Initiative, in partnership with Alliance for a Healthier Generation, supports Title 1 schools with the adoption and implementation of policies and practices to continuously improve the school's culture and practices around health.<br>• The Kaiser Permanente Operation Splash program enables low income, underserved youth and families to be physically active by providing greater access to community pools through free swim classes.<br>• With support of grant funding, LA's Best provides safe and supervised after-school education and recreation programs for children ages five to twelve through established nutrition and physical activity programs. |
| Expected outcomes | KP aims to achieve its strategic priorities through interventions, that if successfully implemented, could result in a set of expected outcomes, such as:<br>• Increased number of community members screened for food insecurity and enrolled in food benefit programs.<br>• Improved availability of free and healthy food for food insecure individuals and families.<br>• Improved policies and practices that create healthy school environments for students, staff and their families.<br>• Improved effectiveness of community-based organizations, community leaders, and residents to collaborate and to promote policy, system, and environmental change. |

C. Our commitment to Community Health

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

• **Reduce our negative environmental impacts and contribute to health at every opportunity.** We have optimized the ways in which we manage our buildings; purchase food, medical supplies and equipment; serve our members; consume energy; and process waste. The following strategies illustrate several of our practices that enable us to operate effectively while creating a healthier environment for everyone. Our Environmentally Preferable Purchasing Standard prioritizes the procurement of products with fewer chemicals of concern and less resource

intensity, thus encouraging suppliers to increase the availability of healthier products. We are building renewable energy programs into our operations, with plans to be carbon neutral in 2020. We recognize that mitigating the impacts of climate change and pollution is a collective effort, and we are therefore proud to work with like-minded organizations and individuals, including the United Nations, Health Care Without Harm, government entities, as well as other influencers that advocate for environmental stewardship in the healthcare industry and beyond.

- **Deploy research expertise to conduct, publish, and disseminate epidemiological and health services research.** Conducting high-quality health research and disseminating its findings increases awareness of the changing health needs of diverse communities, addresses health disparities, and improves effective health care delivery and health outcomes in diverse populations disproportionately impacted by health disparities. Kaiser Permanente's Department of Research and Evaluation, Kaiser Foundation Research Institute, and Nursing Research Programs deploy a wide range of research methods, including clinical research, health care services research, and epidemiological and translational studies on health care that are generalizable and broadly shared, helping build a knowledge base that improves health and health care services.

- **Implement healthy food policies to address obesity/overweight**, such as purchasing sustainable, locally produced fruits and vegetables; supporting local restaurants and caterers that meet KP's Healthy Picks and to make more available healthier food options in our communities; and supporting vendors that hire under/unemployed residents (with living wages and benefits) in the food production/distribution process. We also partner with school districts and city governments to support them in adopting and implementing healthy food procurement policies.

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

- **Support community members directly through ongoing engagement and direct services.** The Kaiser Permanente Educational Theater (KPET) uses live theatre, music, comedy, and drama to inspire children, teens, and adults to make healthier choices and better decisions about their well-being around topics such as: reading and literacy, conflict management, healthy eating and active living, bullying, and sexually transmitted infections. KPET is provided free of charge to schools and the general community.

IX. Evaluation plans

Kaiser Permanente has a comprehensive measurement strategy for Community Health. Our vision at Kaiser Permanente is for our communities to be the healthiest in the nation. To that end, we are committed to pursuing a deep and rigorous understanding of the impact of our community health efforts. We monitor the health status of our communities and track the impact of our many initiatives on an ongoing basis. And we use our measurement and evaluation data, and information gathered

through our Community Health Needs Assessments, to improve the effectiveness of our work and demonstrate our impact. The Community Health Needs Assessments can help inform our comprehensive community health strategy and can help highlight areas where a particular focus is needed and support discussions about strategies aimed at addressing those health needs.

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

X. Health needs KFH-Panorama City does not intend to address

While all the health needs prioritized in the 2019 Community Health Needs Assessment process are important to address, the implementation strategy planning process requires KFH-Panorama City to conduct a selection process based on critical criteria including health need severity, magnitude, inequity, and the extent to which KFH-Panorama City is in a position to meaningfully address the need (see Section VII.A for a full description of selection criteria). Health needs that were not elevated across these critical criteria were not selected for the implementation strategy plan. Health needs not selected include: Heart Disease and Stroke, Maternal and Infant Health, and STDs/HIV/AIDS. These unselected health needs will be addressed through strategies for other selected health needs (such as access to care and food insecurity) that act as drivers for these health outcomes. See Section VIII for a full description of these strategies.