



2016 Implementation Strategy Report for Community Health Needs

Kaiser Permanente – Kern County

Approved by KFH Board of Directors
March 16, 2017

To provide feedback about this Implementation Strategy Report,
email chna-communications@kp.org

**Kaiser Foundation Hospitals
Community Health Needs Assessment (CHNA)
Implementation Strategy Report
2016**

Kaiser Permanente – Kern County
5055 California Avenue
Bakersfield, CA 93309

I. General Information

Contact Person:	Leslie A. Golich, Director of Public Affairs & Brand Communications
Date of Written Plan:	December 12, 2016
Date Written Plan Was Adopted by Authorized Governing Body:	March 16, 2017
Date Written Plan Was Required to Be Adopted:	May 15, 2017
Authorized Governing Body that Adopted the Written Plan:	Kaiser Foundation Hospital/Health Plan Boards of Directors
Was the Written Plan Adopted by Authorized Governing Body On or Before the 15 th Day of the Fifth Month After the End of the Taxable Year the CHNA was Completed?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Date Facility's Prior Written Plan Was Adopted by Organization's Governing Body:	December 4, 2013
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

Kaiser Permanente is a not for profit, integrated health care delivery system comprised of Kaiser Foundation Hospitals, Kaiser Foundation Health Plan, and The Permanente Medical Groups. For more than 65 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. Today we serve more than 10.2 million members in eight states and the District of Columbia. Since our beginnings, we have been committed to helping shape the future of health care. Kaiser Permanente is dedicated to care innovations, clinical research, health education and the support of community health.

III. About Kaiser Permanente Community Benefit

We believe good health is a basic aspiration shared by all, and we recognize that promoting good health extends beyond the doctor's office and the hospital. 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 leverage financial resources with medical research, physician expertise, and clinical practices. Historically, we have focused our investments in three areas—Health Access, Healthy Communities, and Health Knowledge—to address critical health issues in our communities.

For many years, we have worked collaboratively with other organizations to address serious public health issues such as obesity, access to care, and violence. We have conducted Community Health Needs Assessments (CHNA) 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.

In addition, Kaiser Permanente seeks to promote community health upstream by leveraging its assets to positively influence social determinants of health – social, economic, environmental – in the communities we serve.

IV. Kaiser Permanente – Kern County

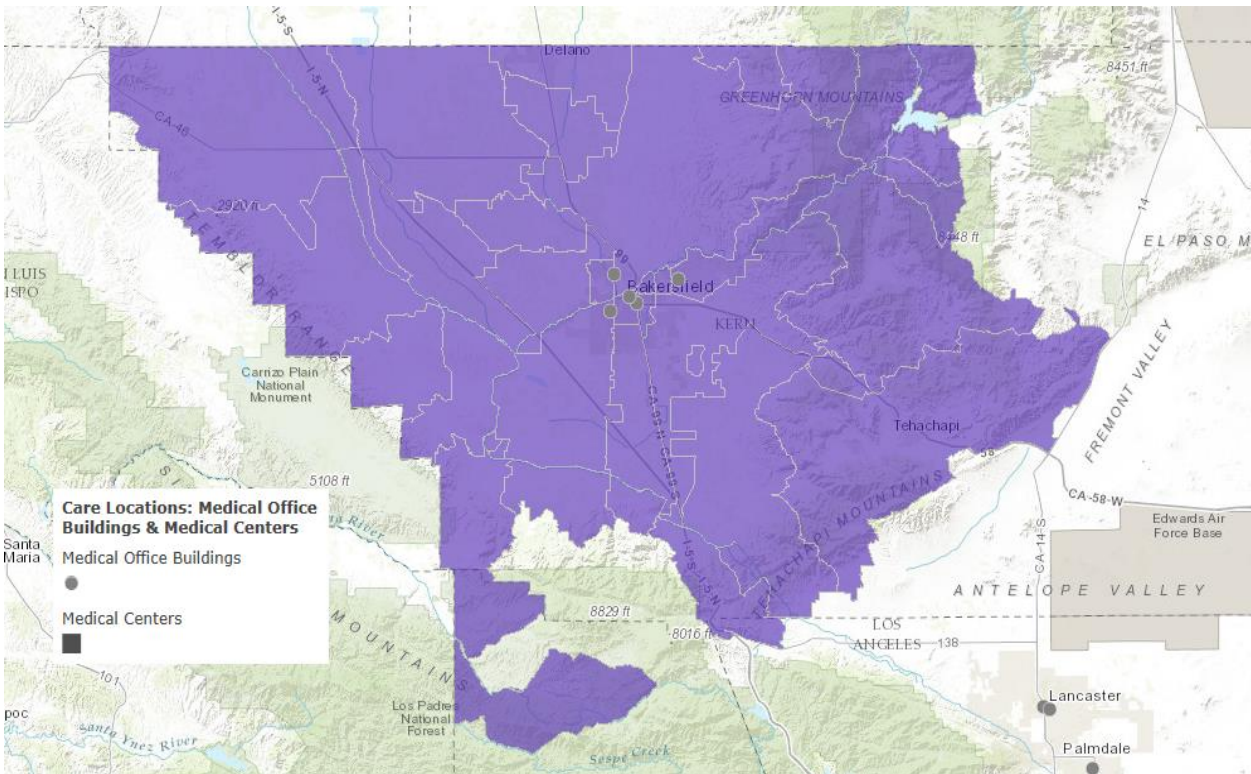
Kaiser Permanente – Kern County has locations in Bakersfield and Tehachapi and covers 23 cities. The service area is presented below by community and Zip code.

Kaiser Permanente – Kern Medical Service Area

City	Zip Code
Arvin	93203
Bakersfield	93301, 93304, 93305, 93306, 93307, 93308, 93309, 93311, 93312, 93313, 93314
Bodfish	93205
Buttonwillow	93206
Caliente	93518
Delano	93215
Fellows	93224
Glennville	93226
Keene	93531
Kernville	93238
Lake Isabella	93240
Lamont	93241

City	Zip Code
Lebec	93243
Lost Hills	93249
Maricopa	93252
McFarland	93250
McKittrick	93251
Shafter	93263
Taft	93268
Tehachapi	93561
Wasco	93280
Wofford Heights	93285
Woody	93287

Map of the Kaiser Permanente – Kern County Service Area



Kern Demographic Data	
Total Population	761,489
Race (Non-Hispanic/Latino)	
White	35%
Black	5%
Asian	4%
Native American/Alaskan Native	<1%
Pacific Islander/Native Hawaiian	<1%
Some Other Race	<1%
Multiple Races	2%
Ethnicity	
Hispanic/Latino	53%

Kern Socioeconomic Data	
Living in Poverty (<200% FPL)	49.17%
Children in Poverty (<100% FPL)	33.45%
Unemployed	10.9%
Uninsured	19.11%
No High School Diploma	28.5%

Note: *Percentages were pulled from the CHNA Platform in May 2016
<http://www.communitycommons.org/groups/community-health-needs-assessment-chna/>

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 the applicable requirements set forth in final regulations released in December 2014. This implementation strategy describes Kaiser Permanente – Kern County’s planned response to the needs identified through the 2016 Community Health Needs Assessment (CHNA) process. For information about Kaiser Permanente – Kern County’s 2016 CHNA process and for a copy of the report please visit www.kp.org/chna.

VI. List of Community Health Needs Identified in 2016 CHNA Report

The list below summarizes the health needs identified for Kaiser Permanente – Kern County’s service area through the 2016 Community Health Needs Assessment process. These health needs are presented in priority order:

1. Overweight and obesity
2. Mental health
3. Access to health care
4. Diabetes
5. Cardiovascular disease
6. Substance abuse
7. Asthma
8. Maternal and infant health
9. Cancer
10. STI/HIV/AIDS
11. Oral health
12. Environmental health

VII. Who was Involved in the Implementation Strategy Development

The Implementation Strategy was developed through a process that involved the Kaiser Permanente – Kern County operational leadership and community partners. The core planning team consisted of the Kaiser Permanente – Kern County service area’s Medical Center Administrative Team (MCAT) and functional area leaders, comprised of stakeholders representing both Kaiser Foundation Hospital/Health Plan and the Southern California Permanente Medical Group (SCPMG) and included:

Julia Bae, MD, Area Medical Director
Melissa Biel, DPA, RN, Biel Consulting, Inc., Consultant
Marvin Campos, MD, Assistant Area Medical Director
Leslie Golich, Director of Public Affairs & Brand Communications
Jill Haley, Director of Hospital/Health Plan Operations
John Holbert, Area Chief Financial Officer
Dina Madden, Assistant Medical Group Administrator

Sherry Mounts, Chief Administrative Officer
Gina Perez, Director of Ambulatory Care Services
Racquel Pina, MD, Chief of Family Medicine
Kristin Weber, Senior Community Benefit Specialist
David E Womack, Senior Vice President and Area Manager

a. Partner Organizations

The following stakeholder organizations collaborated with Kaiser Permanente – Kern County in developing the Implementation Strategy (IS). These partners were able to provide multiple perspectives on strategies to address health needs and opportunities for partnership.

Gay and Lesbian Center of Bakersfield
Kern County Department of Public Health
Kern County Superintendent of Schools
Kern Economic Development Corporation
Kern Family Healthcare
United Way of Kern County

Community Engagement Strategy

While not required by Federal CHNA regulations, Kaiser Permanente encourages all KFH facilities developing Implementation Strategy plans to elicit community input throughout the plan development process. Voluntary Community members and stakeholders 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.

Kaiser Permanente – Kern County identified four priority health needs through the process outlined in Section VIII. The identified needs, outcomes and proposed strategies for this Implementation Strategy were shared with Kaiser Permanente stakeholders and community partners. Questions and feedback on the proposed strategies were discussed. To engage community partners, Kaiser Permanente – Kern County hosted a focus group that included representatives of nonprofit service organizations, health care organizations, including public health, the school district and community development agencies (see table below).

These efforts validated the importance of the priority health needs identified by Kaiser Permanente – Kern County. Participants provided information on existing resources and assets that can be leveraged to address the identified health needs, ideas for needed resources, collaboration opportunities, and ways to track the progress and outcomes of the work. The information obtained from these efforts was used to strengthen the planning undertaken by Kaiser Permanente – Kern County. The group discussed specific ideas to address the identified health needs and identified practical ways to work together. As a result, community-based efforts were identified that Kaiser Permanente – Kern County

considered when identifying strategies designed to address the priority health needs. Additionally, partners were included as part of the planned collaboration to address these needs.

DATA COLLECTION METHOD	TYPE	PARTICIPANTS			
		Total number of participants	Number of residents	Number of organizational reps	Number of county reps
Meeting, focus group, interview, survey, written correspondence, etc.	Respondent's title/role and organization or focus group name				
Focus Group	Community-based organizations, public health and health care agencies, children and youth groups, LGBTQ, development agency,	6	0	4	2

b. Consultant

Biel Consulting, Inc. worked with Kaiser Permanente – Kern County to develop the Implementation Strategy. Biel Consulting, Inc. is an independent consulting firm that works with hospitals to develop, implement and evaluate community benefit programs. www.bielconsulting.com

VIII. Health Needs that Kaiser Permanente – Kern County Plans to Address

a. Process and Criteria Used

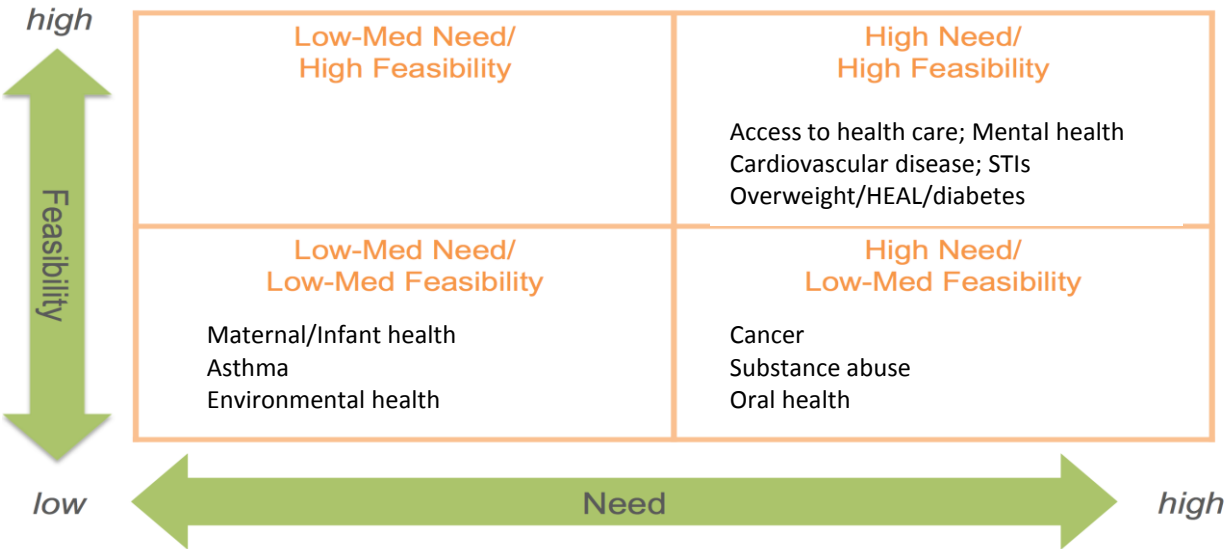
A number of criteria were designed to assess the identified health needs. The criteria included measurements for magnitude of a health problem, severity, and disparities associated with the identified health need. Additional criteria focused on the feasibility of addressing the health needs and included measurements of Kaiser Permanente assets and opportunities to leverage partnerships to address the needs. Definitions and a rating system were developed for the criteria (definitions for the criteria are described in the table below).

Categories	Criteria	Definition
Need	Magnitude/scale of the problem	The health need affects a large number of people within the community.
	Severity of the problem	The health need has serious consequences (morbidity, mortality, and/or economic burden) for those affected.
	Health disparities	The health need disproportionately impacts the health status of one or more vulnerable population groups.
Feasibility	Kaiser Permanente assets	Kaiser Permanente can make a meaningful contribution to addressing the health need because of its relevant expertise and/or unique assets as an integrated health system and because of an organizational commitment to addressing the health need.
	Ability to leverage	Opportunity to collaborate with existing community partnerships

		working to address the health need, or to build on current programs, emerging opportunities, or other community assets.
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The Community Benefit Consultant and Community Benefit Manager applied the criteria to the health needs, by scoring each health need against each criterion on a score of 0-5. Criteria scores were added to create a summary score for ‘need’ and ‘feasibility’. The total scores for each of the criteria determined whether the need was a high or low need and feasibility. Scores above seven signified high need and scores above five signified high feasibility. Based on the summary scores, the health needs were categorized as low to medium need/low to medium feasibility; low to medium need/high feasibility; high need/low to medium feasibility; and high need/high feasibility. Using this information, the health needs were plotted based on the need and feasibility scores. This resulted in the following matrix.

Strategy Grid for Hospital Health Need Selection



The results of the analysis and ratings were presented to the core planning team at a meeting on August 18, 2016. In considering the health needs to select, the planning team considered the KFH capacities, initiatives, and programs that may be available for addressing priority needs, and began to identify additional assets and local strategies for addressing the priority health needs. The core planning team chose to address the health needs identified by the criteria as high need/high feasibility. This discussion resulted in the selection of four health needs: access to care, obesity/HEAL/diabetes, mental and behavioral health, and Sexually Transmitted Infections (STIs). The core planning team had a follow-up meeting on August 30, 2016 to discuss strategies and potential partnerships to address the identified health needs.

b. Health Needs that Kaiser Permanente – Kern County Plans to Address

Kaiser Permanente – Kern County plans to address the following health needs:

Access to Care

Access to comprehensive, quality health care services is important for health equity and for increasing the quality of a healthy life. Health care access is a key requirement for early detection of illnesses, chronic disease management and reduction of Emergency Room usage. Access to affordable, quality

health care is a key driver to health improvement and disease prevention. Access to care was rated by the community as the third highest health need in the service area.

In the Kaiser Permanente – Kern service area, over one-third of the population has Medi-Cal coverage. Over one-fifth of the population (20.8%), based on this data source, is uninsured, which translates to 79.2% who have health insurance. These data were obtained before the full implementation of the Affordable Care Act and the insurance coverage expansion, the percent of residents who are currently uninsured may be lower as a result of Medi-Cal expansion and the availability of health care coverage. Community input on access care noted that the availability of low-cost insurance programs was improving there were still a number of barriers, including transportation, cost, availability of services, and navigating the system. Community stakeholders identified persistent barriers to accessing care for the homeless, non-resident immigrants, the illiterate and other marginalized populations.

Obesity/HEAL/Diabetes

Being overweight or obese affects a wide range of health issues and are major risk factors for diabetes, cardiovascular disease, and other chronic diseases. Overweight and obesity was rated the highest priority need in Kern County. There are extremely high rates of overweight and obesity among adults and teens in the service area. This may have an impact on the high rates of chronic diseases identified in the service area. Overweight/obesity was rated as the top priority health need by the community. In Kern County, 27.2% of the adult population reported being overweight while 15.6% of teens and 18.2% of children in the county are overweight. Hispanic or Latino youth (23.9%) and Black or African American youth (22.5%) have the highest rates of overweight among kids in the school districts served by Kaiser Permanente – Kern. Obesity among adults is 50.4% in Kern County and exceeds the state rate of obesity of 27% and the Healthy People 2020 objective of 30.5% of adult obesity.

Diabetes is a growing concern in the community; 10.3% of adults in Kern County have been diagnosed with diabetes, which is higher than the state rate (8.9%). Diabetes is a condition that when managed can prevent hospitalizations. The diabetes hospitalization rate in the service area is 14.1 per 10,000 population. This rate is lower than the county (16.1) but higher than the state (10.4) rate of hospitalizations for diabetes. The community rated diabetes as the fourth highest health need.

Mental and Behavioral Health

Mental illness is a common cause of disability. Untreated disorders may leave individuals at-risk for substance abuse, self-destructive behavior, and suicide. As a result of community input, mental health was rated as the second highest health need and substance abuse was the sixth rated need. In Kern County, 17.1% of adults experienced serious psychological distress in the past year. 21.4% of adults needed help for emotional, mental health, alcohol or drug issues, and 85.5% of those who sought or needed help did not receive treatment.

Mental health issues and substance abuse were of considerable concern to community stakeholders. These issues are believed to influence the increasing number of homeless in Kern County. As well, cultural beliefs and stigma associated with mental health issues may increase the barriers to obtaining needed care. An issue to Kern County is the lack of resources for mental health/behavioral health care services in the county. This is a countywide issue that needs a comprehensive strategy to increase access.

Sexually Transmitted Infections

STIs continue to be a major public health problem. STIs refer to more than 25 infectious organisms that are transmitted primarily through sexual activity. While the community ranked STIs as the tenth highest need in the service area, STI prevention is an essential primary care strategy for improving reproductive health. Because of the severity of the issues among at-risk populations, STI was selected as a health need Kaiser Permanente – Kern County will address. Rates of Chlamydia in Kern County are 719.5 per 100,000 persons, higher than the state rate (453.4). The rate of Gonorrhea is 176.8 per 100,000 persons, which is higher than the state rate of 116.8. Primary and Secondary Syphilis (16.2) is slightly higher than the state average while Early Latent Syphilis is slightly lower, at 4.6 per 100,000 persons. In 2013 there were a total of 1,208 living cases of HIV/AIDS in Kern County.

IX. Kaiser Permanente – Kern County’s Implementation Strategy

As part of the Kaiser Permanente integrated health system, Kaiser Permanente – Kern County has a long history of working internally with Kaiser Foundation Health Plan, The Southern California Permanente Medical Group (SCPMG), 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.
- ✓ 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

The following represents the goals, strategies and expected outcomes for each of the health needs Kaiser Permanente – Kern County plans to address for the 2017-2019 Implementation Strategy (IS) timeline. Kaiser Permanente – Kern County will draw on a broad array of organizational resources to implement these strategies, such as grant-making, in-kind resources, collaborations and partnerships, as well as several internal KFH programs. For the purpose of this report, examples of resources are provided to illustrate how Kaiser Permanente- Kern County plans to implement the strategies. For examples of how these resources have been deployed to date, please visit the 2016 Community Health Needs Assessment Report (www.kp.org/chna) chapter: Implementation Strategy Evaluation of Impact.

Kaiser Permanente – Kern County 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, Kaiser Permanente – Kern County welcomes future opportunities to enhance its strategic plans by relying on and building upon the strong community partnerships it currently has in place.

Access to Care

Kaiser Permanente – Kern County **long-term goal** for addressing access to care is that all community members have access to timely, coordinated, high quality health care from a trained and diverse workforce. It aims to visualize this goal by organizing its’ strategies around the following **strategic priorities (or intermediate goals)**:

- Increase coverage and access to comprehensive, quality health care services for low-income and uninsured populations.
- Improve the capacity of health care systems to provide quality health care services, including the social and non-medical needs of their patients.

These priorities have guided the development of the following core **strategies** to address access to care in the community.

- Support targeted outreach, enrollment, and retention efforts to increase access to health care coverage, particularly among communities of color and immigrant populations, where disparities in both access to care and health care coverage is greatest.
- Support infrastructure improvements that can sustain the integration of clinical care with mental/behavioral health, oral health, vision care and other health services.
- Provide training for medical providers to deliver culturally competent care to diverse populations. KFH – Kern will address access to care by partnering with community based organizations and clinics to share best practices in LGBT healthcare. Physicians and staff will serve as advisors and mentors to organizations and safety net clinics regarding culturally competent care.
- Support the provision of high quality health care (including preventive services and specialty care) for underserved populations. As part of the largest non-profit health system, Kaiser Permanente – Kern County participates in government-sponsored programs for low-income individuals (i.e. Medi-Cal Managed Care and Medi-Cal Fee-For-Service), provide access and comprehensive health care to low-income individuals and families who do not have access to public or private health coverage through charitable health coverage, and provide financial assistance to low-income individuals who receive care at KFH facilities and can't afford medical expenses and/or cost sharing.
- Support partnerships and networks that sustain and scale change and lift up priorities, evidence and experience of communities, and to share information about what works in improving access to health care for the underserved. KFH – Kern will address access to care by partnering with rural school districts, family resources centers and community based organizations to provide kindergarten students in areas of limited healthcare access with school physicals and immunizations.
- Leverage Kaiser Permanente assets to drive coverage and access to health care for the underserved, build the capacity of the primary care workforce and improve appropriate utilization of health care services.

Successful implementation of these strategies is expected to contribute to the following set of **outcomes** in the community:

- Improved individual/public understanding of health insurance and medical care coverage.
- Enhanced care integration of clinical, mental, dental, vision and complementary health strategies.
- Reduced barriers that impede individuals' ability to seek and obtain health care, and comply with medical treatment regimes.

Obesity/HEAL/Diabetes

Kaiser Permanente – Kern County's **long-term goal** for addressing obesity/HEAL/overweight is that all community members eat healthy and move more as a part of daily life. It aims to visualize this goal by organizing its' strategies around the following **strategic priorities (or intermediate goals)**:

- Improve access to healthy food options in the community.
- Improve linkages between health care services and community-level services.
- Improve access to opportunities for physical activity in the community

These priorities have guided the development of the following core **strategies** to address obesity/HEAL/diabetes in the community.

- Support multi-level, multi-component initiatives in community settings to support access to healthy, affordable food and activity-promoting environments (HEAL Zones).
- Support local governments, schools and/or community based organizations to provide healthy food options (including accessible drinking water) and to adopt healthy food policies, including procurement practices. KFH- Kern will address obesity/HEAL/diabetes in the community by working in partnership with the Kern County Food Policy Council. Kristin Weber, Senior Community Benefit Specialist sits on the steering committee for this comprehensive group of organizations and individuals working to address the food system in Kern County.
- Support the development of 'joint-use' agreements among local governments, school districts and community-based organizations that allow community use of school playgrounds after school hours and expand use of city-owned recreational facilities. KFH – Kern will address obesity/HEAL/diabetes in the community by partnering with school districts by implementing parent and student walking groups lead by KP physicians and staff.
- Support policies that prioritize underserved neighborhoods for park investments and encourage communities to use parks to their full potential.
- Support multi-level, multi component initiatives in school settings to produce significant and measurable impact on the health of students, staff and teachers in K-12 schools within communities. An example for this strategy is the Thriving Schools Initiative, a community based effort to improve healthy eating, physical activity and school climate in K-12 schools in Kaiser Permanente’s service areas, primarily through a focus on policy, systems and environmental changes that support healthy choices and a positive school climate.
- Support partnerships and networks that sustain and scale change and lift up priorities, evidence and experience of communities, and to build the field of healthy eating and active living.
- Leverage Kaiser Permanente assets to drive community health, including healthy eating and active living and champion organizational practice changes within Kaiser Permanente that promote health. Examples include providing healthy vending options at Kaiser Permanente facilities; supporting local restaurants and caterers that meet Kaiser Permanente’s Healthy Picks and that support healthier food in our communities; and supporting the spread of farmers markets.

Successful implementation of these strategies is expected to contribute to the following set of **outcomes** in the community:

- Adoption and implementation of policies and environments that increase availability and enable access to healthy food (including fresh produce and safe drinking water) and/or physical activity.
- Improved capacity, readiness and effectiveness of community-based organizations, community leaders and residents to collaborate and to promote policy, system and environmental change.

Mental and Behavioral Health

Kaiser Permanente – Kern County's **long-term goal** for addressing mental and behavioral health is that all community members have optimal levels of mental health and well-being and access to high quality mental and behavioral health care services when needed. It aims to visualize this goal by organizing its' strategies around the following **strategic priorities (or intermediate goals)**:

- Improve the knowledge, capacity and infrastructure of health care, organizations and communities to address mental and behavioral health.
- Promote positive mental health by fostering community cohesion and social and emotional support.

These priorities have guided the development of the following core **strategies** to address mental and behavioral health in the community.

- Support prevention efforts to increase community awareness and educate youth and adults about the dangers of prescription drugs (including sharing, proper disposal, unintentional overdose, etc.).
- Support integration of health care with community-based mental health services, such as: training of health care providers to identify mental and behavioral health needs, patient navigators who can help patients access services, strengthening of referral networks, training for teachers and parents, and/or co-location of services between primary care and mental health providers. KFHC Kern will address mental and behavioral health by partnering with local organizations such as the Gay and Lesbian Center of Bakersfield, to address the mental and physical health needs of specific target populations.
- Support policies and programs that address early child development and toxic stress, including positive parenting and violence-free homes. KFHC-Kern will address mental and behavioral health by partnering with the Kern County Network for Children to create messaging and education opportunities for providers and community members that address critical child development issues. Kristin Weber, Senior Community Benefit Specialist participates on the organizations child abuse prevention committee.
- Support partnerships and networks that sustain and scale change and lift up priorities, evidence and experience of communities, and to share information about what works in improving behavioral and mental health and to build the field.
- Leverage Kaiser Permanente assets to drive community health and champion organizational practice changes within Kaiser Permanente that promote mental and behavioral health.

Successful implementation of these strategies is expected to contribute to the following set of **outcomes** in the community:

- Improved screening and identification of mental and behavioral needs among patients.
- Improved referrals and coordination among clinical and community resources and programs.

Sexually Transmitted Infections

Kaiser Permanente – Kern County's **long-term goal** for addressing sexually transmitted infections is to improve health and quality of life through prevention, detection, and treatment of risk factors for STIs. It aims to visualize this goal by organizing its' strategies around the following **strategic priorities (or intermediate goals)**:

- Improve patient access to STI preventive services including affordable medications and behavioral counseling and support.

These priorities have guided the development of the following core **strategies** to address sexually transmitted infections in the community.

- Support programs that improve referral of patients to evidence-based health promotion programs that teach self-management and empowerment techniques for STI management and prevention. KFH - Kern will address this need by partnering with the public health department to provide needed resources to the school district and schools in Kern County. Kristin Weber, Senior Community Benefit Specialist, sits on the Kern County STD Task Force.
- Support the development of community-based organizations, leaders, and networks, and build their capacity to advance equity and reduce stigma surrounding STI. KFH – Kern will address this need by partnering with organizations to bring KP’s educational theatre program “What Goes Around”, to schools and community settings in Kern County with the objective of improving the sexual health literacy amongst 14-19 year olds.

Successful implementation of these strategies is expected to contribute to the following set of **outcomes** in the community:

- Improved screening, identification and treatment of STIs through community use of preventive care best practices and disease management.
- Improved capacity, readiness and effectiveness of community-based organizations, community leaders and residents to collaborate and to promote policy, system and environmental change.

In addition to addressing the selected health needs described above, Kaiser Permanente, as an integrated health care delivery system, dedicates resources that target broader health system needs and upstream determinants of health.

Research

Kaiser Permanente conducts, publishes, and disseminates high-quality epidemiological and health services research to improve the health and medical care throughout our communities. Access to reliable data is a significant need of the overall health care system and can also be implemented in service of the identified health needs. Deploying a wide range of research methods contributes to building general knowledge for improving health and health care services, including clinical research, health care services research, and epidemiological and translational studies on health care that are generalizable and broadly shared. Conducting high-quality health research and disseminating its findings increases awareness of the changing health needs of diverse communities, addresses health disparities, and improves effective health care delivery and health outcomes in diverse populations disproportionately impacted by health disparities. Research projects encompass epidemiologic and health services studies as well as clinical trials and program evaluations. They cover a wide range of topics including clinical trials, building scientific expertise in health services and policy, and implementation science to bridge the gap between research and practice.

Our Commitment to Total Health

Kaiser Permanente is aware of the significant impact that our organization has on the health of our communities as a consequence of our business practices including hiring, purchasing, and environmental

stewardship. We have explored opportunities to align our hiring practices, our purchasing, our building and our environmental stewardship efforts with the goal of improving the conditions that contribute to health in our communities. The following strategies are illustrations of the types of organizational business practices we implement to address priority health needs and contribute to community health and well-being.

- **Implement green business and operational practices to address climate and health** by purchasing clean wind and solar energy; and recycling paper, plastic, and aluminum at facilities.
- **Implement healthy food policies to address obesity/overweight** such as healthy vending options at Kaiser Permanente facilities; supporting local restaurants and caterers that meet Kaiser Permanente’s Healthy Picks and that support healthier food in our communities; and supporting the spread of farmers markets.
- **Contribute toward supplier diversity in the community to address economic security** 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/service providers; working with community-based workforce development programs to support a pipeline for diverse suppliers/service providers; and building the capacity of local small businesses, especially those in target neighborhoods/populations, through training on business fundamentals (core competencies, finance, business plans, human resources, marketing, gaining access to equity/debt financing, etc.)
- **Develop the health care workforce to address access to care and economic security** by implementing health care workforce pipeline programs to introduce diverse, underrepresented school age youth and college students to health careers; partnering with local vocational schools, community colleges, workforce investment boards, local hiring halls or community-based workforce development programs to create pipelines from target communities; and providing workforce training programs to train current and future health care providers with the skills, linguistic, and cultural competence to meet the health care needs of diverse communities.

X. Evaluation Plans

Kaiser Permanente – Kern County will monitor and evaluate the strategies listed above for the purpose of tracking the implementation of these strategies as well as to document the anticipated impact. Plans to monitor will be tailored to each strategy and will include the collection and documentation of tracking measures, such as the number of grants made, number of dollars spent, and number of people reached/served. In addition, Kaiser Permanente – Kern County will require grantees to propose, track and report outcomes, including behavior and health outcomes as appropriate. For example, outcome measures for a strategy that addresses obesity/overweight by increasing access to physical activity and healthy eating options might include number of students walking or biking to school, access to fresh locally grown fruits and vegetables at schools, or number of weekly physical activity minutes.

XI. Health Needs Facility Does Not Intend to Address

The health needs that Kaiser Permanente – Kern County does not intend to directly address are: asthma, cancer, cardiovascular disease, environmental health, maternal/infant health, and oral health. For the most part these needs were deemed to be of relatively lower need based on the defined criteria. Taking existing community resources into consideration, Kaiser Permanente – Kern County has selected to concentrate on those health needs that we can most effectively address given our resources. Through the planning process outlined in Section VIII of this report, the health needs Kaiser Permanente – Kern County

is not addressing had lower magnitude and severity ratings. Additionally, community input ranked asthma, maternal/infant health, cancer, oral health and environmental health in the bottom half of the prioritized health needs.

Community feedback indicated that the high priority needs were viewed as influencing a number of lower priority needs. For example, focusing on overweight and obesity may reduce rates of cancer, cardiovascular disease and asthma. In other words, an emphasis on reducing obesity will result in decreased rates of chronic disease, therefore, Kaiser Permanente – Kern County chose to address overweight and obesity and not to focus on the resultant chronic diseases. Kaiser Permanente – Kern County also did not select oral health and environmental health as these needs were considered beyond the immediate scope of the work they are committed to in Kern County. Knowing that there are not sufficient resources to address all the community health needs, Kaiser Permanente – Kern County chose to address those health needs that have the potential for the largest impact.

While this Implementation Strategy Report responds to the CHNA and Implementation Strategy requirements in the Affordable Care Act and IRS Notices, it is not exhaustive of everything we do to enhance the health of our communities. Kaiser Permanente – Kern County will look for collaboration opportunities that address needs not selected where it can appropriately contribute to addressing those needs, or where those needs align with current strategy and priorities.