

**Mission Hospital**  
**Community Benefit Report**  
**Fiscal Year 2008**

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**A. Executive Summary**

**Highlights of Major Community Benefit Activities**

Mission Hospital has a long history of community service to the residents of south Orange County. As a member of the Saint Joseph Health System, Mission Hospital is committed to improving the health status and quality of life of the people it serves. The values of Dignity, Excellence, Service, and Justice are the guiding principles which help to direct the mission of the hospital, and have compelled the Sisters of St. Joseph of Orange and all of their sponsored ministries to dedicate resources to the care of the medically underserved, and to advocate for the alleviation of conditions which limit access to basic health services. Policies have been established which mandate periodic assessments of the health needs of the poor and vulnerable. A specific percentage of net income is allocated to outreach programs to address specific unmet health needs, separate from the ordinary vehicle of acute health care delivery. **For the fiscal year ended June 30, 2008, the amount of dollars spent on community benefit activities overall at Mission Hospital excluding unpaid costs of Medicare (in alignment with CHA guidance) totaled \$33,425,000.**

Mission Hospital is a 341 bed acute care, full service facility serving all of southern Orange County. The hospital has a medical staff of more than 600 physicians representing 50 specialties and sub-specialties. Currently there are more than 1,900 employees and over 1,200 volunteers. Mission Hospital is fully accredited by the Joint Commission on Accreditation of Healthcare Organizations. Since 1980, the hospital has housed the region's designated trauma center that served **992** patients this past fiscal year.

As the largest medical center in the area, Mission Hospital's full-service facilities provide quality medical care to all residents of south Orange County. The hospital's areas of specialization include: trauma and 24-hour emergency care; maternity services , which include high-risk obstetrics, perinatology and a fetal diagnostic center; orthopedic and sports medicine services; Mission Regional Cancer Care Center and Regional Breast Center; Mission Regional Heart Center and Chest Pain Center; Vascular Institute and Stroke Center; Center for Rehabilitation/Sports/Wellness; Mission Health ED Center; Mission Rehabilitation Center; and a health information line and physician referral service.

**Summary of Fiscal Year 2006-2008 Community Benefit Priorities and FY 08 Program Outcomes**

Through three different health needs assessments, one conducted countywide and the remaining two in south Orange County, the hospital and community stakeholders identified eight communities with high needs in our service area. In order to maximize

resources and to ensure significant impact outcomes at the end of the three-year community benefit cycle, three target communities were chosen (San Clemente, Dana Point and San Juan Capistrano) as the focus of the FY06-08 Community Benefit Plan. These three communities housed the most vulnerable segment of the population.

The assessments brought together a variety of demographic, health status and quality of life information utilizing reliable primary and secondary data sources. Through a process of prioritization among various stakeholders, including community residents, 5 key priorities to be addressed were identified (**Access to Health Insurance, Mental Health, Healthy Weight and Recreation, Improving Quality of Life Through Education and Increasing Access and Capacity for Decent and Affordable Housing**). Each of the five key priorities were then evaluated against two separate sets of criteria: one set by the Public Health Institute's "Advancing the State of the Art in Community Benefit", and the second a tool that has been developed and used internally for the past several years for all community benefit programs.

Each of the priorities were then validated through focus groups, feedback from community stakeholders and collaborative partners. These five priorities may be broken down into three categories, **care for the poor, improving community health and building healthy communities**. Below is a description of the key priority program goals as well as an overview of FY 08 outcomes.

**Care for the Poor:** The Care for the Poor programs will include improving the health status of the medically underserved in south Orange County by providing affordable, quality primary care through the Camino Health Center. The Center will specifically work towards increasing access to health care services by adding new services and improve the quality of care provided as measured through patient satisfaction survey tools. A second area of focus in caring for the poor will carry forward the same theme of enhancing access to and utilization of health care services. Strategies that will be implemented will result in an increased awareness of the availability of low cost health insurance, measured by the number of residents enrolled.

#### ***Camino Health Center FY 08 Outcomes***

In FY 08, Camino Health Center provided a total of **25,180** patient visits (excluding WIC clients). A total of **884** patients were served through the mobile medical unit in the cities of San Clemente and Lake Forest, an 83% increase from FY07. Additionally a total of **1,630** Pap Smears were provided, a 45% increase from the FY05 baseline. To ensure the highest quality patient care, Camino Health Center continued to focus on the implementation of the AVATAR Patient Satisfaction survey. In FY 08, the AVATAR survey was also implemented with the WIC clients, and combined results show a score of 85.97.

#### ***Access to Health Insurance FY 08 Outcomes***

In FY 08, a total of **868** children were enrolled in low-cost health insurance programs. Additionally, a total of **535** children, ages 0 to 5, were linked to a medical home (used their health insurance coverage throughout the year), an increase of 44% from FY07.

**Improve Community Health:** Mission Hospital, in concert with its community partners, has also set mental health and obesity issues as a priority for the next three years. The overall mission of the mental health initiative is to increase the awareness of existing mental health services and work towards building the community's capacity for resources that would address issues of depression, domestic violence and substance abuse. Community health will also be improved through promoting healthy lifestyles through nutrition and recreation to reduce the overall incidence of obesity. Youth obesity and diabetes rates will be affected through the mobilization of access to safe recreation and knowledge and skills in developing healthy lifestyle behaviors.

#### ***Mental Health FY 08 Outcomes***

In FY 08, a total of **1,260** bilingual mental health visits were provided, an increase of 53% from FY07. Eighty-four percent of clients attending three or more mental health sessions reported a change/ improvement in their mental health. Additionally, **97%** of clients reported improvement in depression symptoms evidenced by a change in scores from moderate severe to low. To help build capacity of mental health providers in south Orange County, a total of 120 collaborative education programs were held focused on the unique needs of our community. A variety of mental health programs were provided in the community and post tests show that 83% of attendees made a behavior change to promote mental health.

#### ***Obesity Prevention FY 08 Outcomes***

In FY 08, several healthy lifestyle educational classes were provided in the community, which resulted in **98%** of participants making a lifestyle change to achieve a healthy weight. In partnership with the City of San Juan Capistrano, the CHEC Neighborhood Health Committee, CREER and other key San Juan Capistrano residents, improvements were made to local basketball, tennis and indoor soccer courts, helping to increase access to recreation to hundreds of families in the community. This environmental improvement was made possible through funds from the Health Funders Partnership of Orange County. Additionally a total of **130** kids received scholarships to the Boys and Girls Club and the Great Opportunities Swimming Program. In FY 08, great effort went into creating a strategic plan to address the incidence of childhood obesity in south Orange County, which relates to the SJHS Healthiest Communities goal. This plan helped to bring several community stakeholders together to create the South County Obesity Taskforce, which met on a regular basis to track the progress of the plan.

**Create Healthy Communities:** In order to build healthy communities and impact residents living in high need areas, the hospital plans to strengthen the quality of life of families through education and also by increasing the community's capacity for affordable and decent housing. The overall aim of improving quality of life through education is to increase children and adolescents' school success by supporting and creating literate parents who perceive education as a contributing factor to an enhanced quality of life. The hope is to increase the number of high school graduates in two neighborhoods in south Orange County. In the area of affordable and decent housing

the goal is to increase the number of very low to low income housing units in Orange County and to engage community residents as advocates for affordable housing.

### ***Improving Quality of Life through Education FY 08 Outcomes***

In FY 08, Mission Hospital continued to work with the Capistrano Unified School District Adult School in English and Spanish literacy efforts, with a total of **3,488** adults enrolled in English literacy classes and **326** enrolled in Spanish literacy classes. Student evaluations showed **64%** of students meeting their personal goals and **65%** showed a significant learner gain. Our partnership continued with Marco Forster Middle School to provide parents and students with the tools they need to go to college. Students and parents received information on financial aid, college requirements, community resources, and several mental health topics related to teens. A total of 85 students and 18 parents were taken on a trip to the University of California, Irvine. A partnership was established with the Mexican American Engineers and Scientists (MAES) student group and they hosted a science extravaganza day exposing students to math and science careers. Mission Hospital continued to support Project Breakthrough, a program geared towards helping first generation students attend a college or university. A total of 48 students attended the program, an increase of 118% from FY07. The Mission Hospital Homework Club continued to thrive with a total of 25 kids attending the program 3 times a week throughout the entire 2007 school year. A total of **573** volunteer hours were provided to support the program.

### ***Increasing Access and Capacity for Affordable Housing FY 08 Outcomes***

Mission Hospital continued to advocate for affordable housing in south Orange County. Mission Hospital employees submitted a total of **187 letters** to local and state officials supporting affordable housing initiatives. A total of **100** employees and community partners also attended local city council meetings to advocate for the renewal of the lease for the CHEC Family Resource Center and for the City of San Clemente Housing Element. As a result of the housing crisis, our Emergency Rental Assistance Program served **44** people, helping them to be able to remain in their homes. Additionally, a total of **135** people were given information on local housing resources to help their housing situation.

### **FY 08 General Community Benefit Outcomes**

Mission Hospital continued to work in partnership with Orange County Human Relations and the San Clemente Collaborative in improving health and quality of life for residents in the City of San Clemente. Several community forums were held throughout the year focusing on key issues that are important to the community. As a result of this great work, Orange County Human Relations was awarded a planning grant from the St. Joseph Health System Foundation through the Community Building Initiative. A final three-year proposal will be submitted in September 2008.

## **B. Community Needs/Assets and Demographics Assessment**

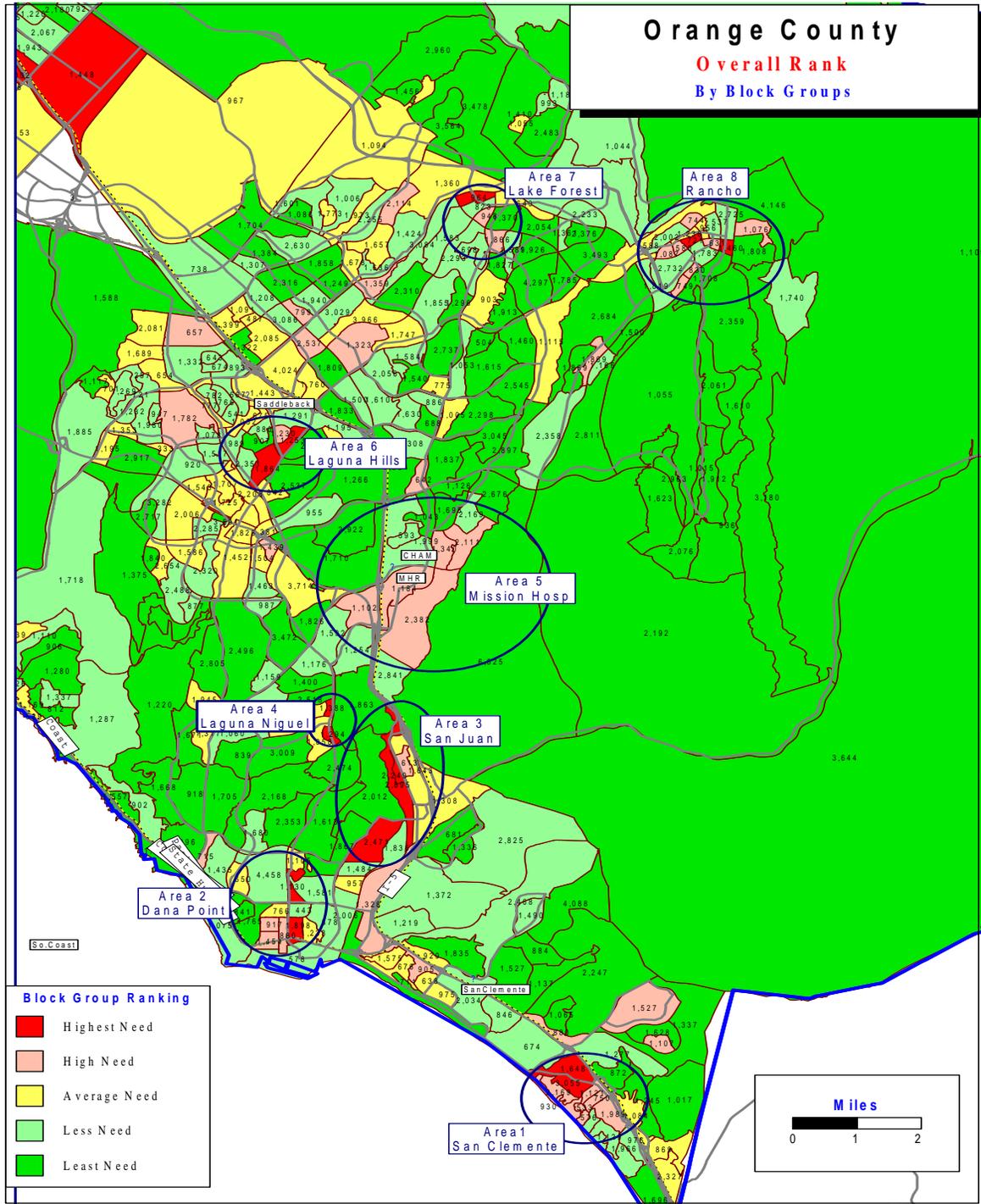
Mission Hospital's "community" is a service area composed of the eleven cities (Mission Viejo, Laguna Niguel, San Clemente, Dana Point, San Juan Capistrano, Laguna Hills,

Irvine, Laguna Beach, Laguna Woods, Aliso Viejo, Rancho Santa Margarita and the unincorporated community of Coto de Caza of South Orange County). This area includes a population of approximately 600,000 people, an increase of 30% from the prior assessment. The hospital's service area extends from the junction of the 405 and 5 freeways in the north to Camp Pendleton in the south. Geographically, South County is bordered by the Pacific Ocean to the west, the Santa Ana Mountains to the north and east, and the marine base Camp Pendleton to the south (an area referred to as the "Y"). The area has seen tremendous growth over the last five years and it is estimated that population will continue. Demographically, the area is 70% Caucasian, a decrease of 12% from prior assessment, with the Hispanic population growing to 17.4%, an increase of 2.4% overall. The Asian population remains stable at around 7% south of the "Y".

Overall, south Orange County enjoys relative affluence. The average household income has increased from \$88,000 to \$116,000 in 2005. Despite the county's affluence, the hospital's 1999, 2001, 2003 and 2005 Community Health Needs Assessments continue to reveal concentrated areas of poverty. These areas continue to be the focus of Mission Hospital's community benefit priorities. Information on differences in health needs assessment results between the county and neighborhood levels has been helpful in the community's ability to identify community benefit priorities.

The health and socioeconomic status of the south Orange County community was measured through a variety of demographic data sets in concert with a set of twenty-five variables. The key drivers of health and quality of life are factors that positively or negatively impact health status. Examples include income, poverty levels, housing, education, marital/household status, rates of teen mothers, children in poverty, number of single parent households, nutrition, access to food, access to health care, and access to social support networks. A composite score based on the twenty-five key drivers for community vulnerability was used to rank order, by block group, those areas of need. Each of the rankings were split into five quartiles and color-coded. Areas were then mapped and identified as highest need (the red areas) and high needs (the pink colored geographic areas).

In general, Mission's service area reflects a high degree of health and quality of life. Among 220,000 households, and a median home value of \$500,000, the average population per household is 2.7 persons. The area south of the "Y" has a fairly low unemployment rate of 4.2% compared to the Orange County rate of 6.0%. In Mission Hospital's service area, almost 7% of households have an income less than \$19,000 and 5.6% of the households have a disposable income of less than \$15,000. When assessing the area, only 7% of the population has not achieved a high school diploma, compared with 20% countywide. Twelve percent of community members in the service area did not visit a doctor over the past twelve months, compared to 15% countywide, and 51% did not visit a dentist, compared to 55% within Orange County. However, when looking at the service areas for Mission Hospital, which are shaded red and pink to indicate areas of highest and high need, eight block groups were identified. The following map identifies these areas in random order.



A composite score based on the Key Drivers for Community Vulnerability and a profile of the red block groups was put together to further analyze the area. The analysis subsequently focused on the most vulnerable communities in South Orange County.

When looking at South Orange County red block groups, eight areas of disproportionate unmet health needs (DUHN) emerged. Following is a list of those areas indicated on the map above, in no particular order.

**Area 1: San Clemente:**

San Clemente, with an estimated vulnerable population of 12,700 individuals, (the highest in number of all eight areas) had a high proportion of female head of households (328). Traditionally, women have a harder time raising a family on their own and require additional government services. This may or may not be the case in San Clemente as there is a military base located there with a high ratio of military wives who lost their husbands in war. Also in San Clemente there are 1,591 adults age 25 and up who never received their High School diploma; approximately 19.5% of the adult population. 23.2% of children in the area are living in poverty compared to those living south of the “Y” (5.6%) or in Orange County (12.6%). Nearly 19% have not visited a doctor over the past twelve months and 59% have not visited a dentist within the same time period. Demographics in the San Clemente areas of vulnerability show that 54.6% of the population is white and 39.6% are Hispanic. Nearly 13% of the households have incomes less than \$19,000. Twenty-three percent of the children live well below the federal poverty guidelines.

**Area 2: Dana Point**

The vulnerable area within Dana Point revealed an unemployment rate that is the highest of the eight areas at 9.0%, compared to south of “Y” at 4.2%, and Orange County at 6.0%. Eight hundred and seventy-five adults are without a high school diploma, which is 21.6% of the adult population. Children living below the poverty level are 18.5% of the age 0-17 population. Children under the age of 5 who would be considered to be living in poverty are 15.8%, compared to the South of “Y” at 5.6%. Thirty-seven percent of these households spend more than 35% of their household income on rent and showed the largest of the six areas in food expenditures away from the home of \$4,160 per year.

**Area 3: San Juan Capistrano**

San Juan Capistrano, with an estimated 8,200 vulnerable residents has the highest average population per household at 4.9 persons, compared to south of the “Y” at 2.7 averages per household, or Orange County with 3.0 average per household. The unemployment of 5.7% is comparable to that of San Clemente and Mission Viejo. The median household income is one of the lowest of the areas at \$48,000, with nearly 13% of the households earning less than \$19,000 per year. Nearly 35% spend more than 35% of their total household income on rent. San Juan also had the highest number of uneducated adults with 2,228 of those 25 years and older without a high school diploma, representing 52.5% of the adult population. 40.4% of children in this area live

in poverty and 48.1% of children under 5 years of age live in poverty. Nearly 21% did not visit a doctor over the past twelve months and 66% have not visited a dentist in the same time period. The demographics of the vulnerable area show that 85.8% of the population is Hispanic and only 12.4% of the residents are White.

#### **Area 4: Laguna Niguel**

Laguna Niguel had the lowest median household income of the eight areas at \$46,094, and an unemployment rate of 7.4%. The percent of households with income less than \$19,000 is also the highest of the eight areas at 16.6%, compared to the south of “Y,” where 6.9% of households made under \$19,000, or to Orange County overall at 10.9%. Thirty-seven percent of the households spend more than 35% of their income on rent and it was noted that 28% of the children are living below the poverty level. The demographic data showed that 50% of the population is Hispanic and 38.1% are white. Twenty-five percent of the vulnerable residents have not visited a doctor over the past 12 months compared to 12% among residents living south of the “Y”.

#### **Area 5: Mission Viejo**

More than 8,000 residents within 3,000 households are considered to be vulnerable and living in the hospital’s primary service area. The unemployment rate of 5% is lower than the other eight areas, but higher when compared to the south of the Y rate of 4.2%. Nine percent of the households have an income of less than \$19,000 and a large number (241) designate a female as the head of the household that has children under 18 years of age. This area is the third highest of the eight areas with a household density of 366 households occupied by five or more persons. Only 11.8% of adults aged 25 and older do not have a high school diploma compared to 19.7% countywide. Four percent of the residents use prescription drugs for anxiety and over 6% purchased prescription drugs for depression, compared to 5% in Laguna Niguel and 4.6% in both San Clemente and Dana Point. The Mission Viejo area also had one of the highest rates of dollars spent on food away from home compared to all other identified vulnerable populations.

#### **Area 6: Laguna Hills**

Laguna Hills, of all eight areas, had the second highest unemployment percent of 8.8%, considerably higher than the county percent of 6.0%. The average number of persons per household is 3.8 persons, the second highest in density after San Juan Capistrano. Some good news is Laguna Hills had the lowest median rent of the eight areas at \$801 per month. This area however, is one of the highest in the use of prescription drugs for anxiety at 4.7% of the residents. The demographic data shows that 60.5% of this population is Hispanic, 27.1% are White, and 12.4% are Other.

#### **Area 7: Lake Forest**

Lake Forest had the second highest percent of households with gross rent more than 35% of their household income (41.3%). Compare this to south of Y households with rent at 34% of their household income, or Orange County with rent at 33.1% of household income. Demographics show that 20.2% of the population is Hispanic, 62% are white and 17.8% are other ethnic groups.

### **Area 8: Rancho Santa Margarita**

The Rancho Santa Margarita area includes nearly 8,000 residents that are vulnerable and in need. The area is second highest in the number of females as the head of households with children under 18, which constitutes approximately 10% of these block group households. Rancho also had the highest of all eight areas of households that spend more than 35% of their gross income on rent, with a median rent of \$1,020 per month. 3.9% of this population purchases prescription drugs for anxiety and 5.8% purchase drugs for depression, the second highest compared to the Mission Viejo area. Demographics show that 30.3% of the population are Hispanic and 57.3% are white.

### **Hospital Review of Findings**

The hospital's Community Benefit/Care for the Poor Committee reviewed the above findings from the quantitative analysis using the "Key Indicators for Community Vulnerability". The members validated the findings regarding the location and size of vulnerable communities based on their knowledge of the region and recommended that the hospital narrow their community benefit efforts for the next three years to the three largest areas of need. The three areas of priority identified by the group were San Clemente, Dana Point and San Juan Capistrano.

Three focus groups consisting of residents from each of these geographic areas were conducted in their native language to develop an understating of needs and priorities towards improving health and quality of life. The major themes that emerged from the group sessions are as follow:

- **lack of information and access to affordable housing;**
- **improved assistance needed in hospital emergency room with bilingual services, assistance completing paper work, and a reduction in waiting time and costs;**
- **decrease in waiting times needed for appointments at the community clinic;**
- **the high cost of health insurance;**
- **tutoring programs could be improved by offering bilingual and low cost tutoring;**
- **recreation and after school programs are too costly and there continues to be a lack of safe places for children to play;**
- **lack of job training programs and most programs are focused on documented residents;**
- **and all three communities expressed the need for low cost Hispanic grocery stores, similar to grocery stores Santa Ana.**

In addition, two of the communities, San Clemente and San Juan Capistrano, indicated that there was a need for increased police patrol in the neighborhoods with bilingual services.

In addition to the focus groups, an in-depth resident survey was replicated from the previous years' CHEC Neighborhood Needs Assessment and conducted in six

deliberately selected neighborhoods in San Clemente. The implementation of this survey was extremely difficult. Several interview teams and leads were created but all were unsuccessful in engaging residents to take the survey. The overall results should be seen as only scratching the surface in this community. Community Forums are being planned for FY07 to solicit additional input from the community and to create action groups to address key issues in San Clemente.

Although only 134 of the 349 needed surveys across all six areas were completed, themes emerged as barriers to achieving health and quality of life.

A total of 44.3% (58) did not have a High School Diploma. Eighty-one percent of the 134 residents surveyed had a total household income of less than \$34,999. 74% of the Spanish speakers had not received a high school diploma, versus 34% of the English speakers.

Residents were also asked to rate a list of potential problems within their neighborhoods and families. Each factor was rated as a “big problem”, “small problem”, or “not a problem”. The following table indicates the rank order of these issues.

<b>Rank Order</b>	<b>Neighborhood Problems</b>	<b>Family Problems</b>
1	Lack of Recreation for teens	Drug Abuse
2	Drug Use	Poor Parenting Skills
3	Dangerous Pedestrian Crossings	Domestic Violence
4	Unemployment	Alcohol Abuse
5	Unsafe Places for Children	Poverty

In addition to this data, it was also revealed that 33.6% of all residents surveyed did not have any health insurance. When broken out by language, 87.9% of the English speakers surveyed had some sort of health insurance. One third of the residents had not visited a doctor for any reason over the past twelve months, and for those that had, the average number of visits was 2.28. 6.9% of residents had been diagnosed with diabetes and 14.6% of respondents with children report that their child has been diagnosed with asthma. Thirty-one residents reported that their mental health had not been good over the past thirty days. Of those who reported that their mental health was not good, the mean number of days was 3.75 days, and 6.5% reported they had suffered poor mental health on all 30 of the past thirty days.

In addition to assessing the needs of residents living in south Orange County, through the key indicators for community vulnerability, focus groups and an in-depth neighborhood survey of San Clemente, the hospital also participated in the Orange County Health Needs Assessment. The data collected represented over 3,300 households throughout the county. The demographic data reflected a community that is 48% white, 33% Hispanic and 15% Asian. Ten percent of all residents live below the poverty level, while 38% of children qualify for the free lunch program. The unemployment rate is relatively low compared to the state, at 2.7% versus 6.2%. 82%

of all adults over the age of 25 have completed high school, and 33% have achieved a bachelor's level in education. Only 11% of residents can afford a median priced home, while 44% spend more than 35% of their income on housing. The countywide survey surprisingly revealed an increase of 88% in homelessness, estimated to be at 35,000 individuals. Seventy percent of the homeless are families with children, 10% are in shelters, and 65% would be considered the working poor who cannot afford to rent in Orange County.

When assessing the health and quality of life of the county, 4.2% of all hospital discharges were comprised of a mental health diagnosis, and 30% of Hispanics were discharged with a diagnosis of diabetes. Health access continues to be a significant issue as 5% of all children are uninsured as well as 10.4% of the adults. The utilization of health services for children through emergency rooms was for injury (32%), digestive disorders (11%) and asthma (8%).

When examining healthy living behaviors for residents of Orange County, 22% of children ages 12-17 are overweight and 36% of those ages 2-5 years are overweight. Sixty percent of children play outdoors less than two hours per day and 33% eat fast food three or more times per week. The needs assessment also showed that nearly 9% of adults are obese, and 53% of them do not exercise moderately. Sadly, 5% of adults expressed using illicit drugs within the past month and 30% of 11<sup>th</sup> grade youth use marijuana on a regular basis. Fifteen percent of adults reported binge drinking and 60% of 11<sup>th</sup> grade youth use alcohol. In addition, 26% of 11<sup>th</sup> grade youth use tobacco and 15% of adults smoke.

During the process of uncovering the health and quality of life needs of the vulnerable populations within Mission Hospital's service area, assets were identified that would be helpful in making an impact in the selected areas of focus for community benefit programming over the next three years. By community, the following table outlines the key needs and assets for each of the three neighborhoods that have been selected as a priority (San Clemente, Dana Point, San Juan Capistrano).

<b>Target Neighborhoods: San Clemente, Dana Point, and San Juan Capistrano</b>	
<b>Key Needs</b>	<b>Key Assets</b>
<b>Access to Healthcare</b>	
<ul style="list-style-type: none"> <li>• Covering uninsured children and adults</li> <li>• Improving access to Camino Health Center</li> </ul>	<ul style="list-style-type: none"> <li>- SJHS Hospital in Orange County</li> <li>- FRCs San Juan Capistrano and Mission Viejo</li> <li>- Churches</li> <li>- Both school districts</li> <li>- Mobile Van Units</li> <li>- Hospital Emergency Rooms</li> <li>- CHOC at Mission</li> </ul>

<b>Improving Community Health</b>	
<ul style="list-style-type: none"> <li>• Increase awareness of mental health services and build community capacity (focus areas are domestic violence, depression, and substance abuse)</li> </ul>	<ul style="list-style-type: none"> <li>- OC Health Care Agency</li> <li>- Both school districts</li> <li>- NAMI</li> <li>- Private practice professionals</li> <li>- Laura's House</li> <li>- Hope's House</li> <li>- Churches</li> <li>- Nicole Brown Foundation</li> </ul>
<ul style="list-style-type: none"> <li>• Promote healthy lifestyles through nutrition and safe recreation to decrease the incidence of youth obesity and diabetes</li> </ul>	<ul style="list-style-type: none"> <li>- Both school districts</li> <li>- City government</li> <li>- Boys &amp; Girls Clubs</li> <li>- ADA</li> <li>- OCHCA</li> <li>- NuPac</li> <li>- Churches</li> </ul>
<b>Build Healthy Communities</b>	
<ul style="list-style-type: none"> <li>• Strengthen families' quality of life through education</li> </ul>	<ul style="list-style-type: none"> <li>- School districts</li> <li>- Volunteers</li> <li>- CUSD Adult School</li> <li>- Serra High School</li> <li>- ELD</li> <li>- Saddleback College</li> <li>- Residents</li> </ul>
<ul style="list-style-type: none"> <li>• Increase the community's capacity for affordable and decent housing</li> </ul>	<ul style="list-style-type: none"> <li>- The Kennedy Commission</li> <li>- OCCCO</li> <li>- Affordable Housing Clearinghouse</li> <li>- OC Human Relations Commission</li> <li>- Freddie Mac</li> <li>- Residents</li> </ul>

The process of prioritization involved many levels of engagement from internal and external stakeholders. Each programmatic element for the next three years needed to address a documented need in one or more of the above health needs assessments. Once a significant need was identified, specific criterion from an existing program evaluation model that the hospital created and has used over the past three years to evaluate the impact of all community benefit programs, was used as a screen. In addition, the ASACB Core Principles were used for assessing where the hospital should focus its efforts. Each recommended area of priority was scored using a Likert Scale of 1 through 4. A score of 1 = definitely not, 2= probably not, 3= probably yes and a 4 = definitely yes. The following table shows how each of the topic areas selected scored and validates why these areas were chosen.

<b>Criterion</b>	<b>Access</b>	<b>Mental Health</b>	<b>Healthy Weight</b>	<b>Education</b>	<b>Affordable Housing</b>
Area has potential for positive impact	4	4	4	3	4
There are resources and financial support needed to sustain the program	3	4	4	3	3
There exists an identified need for the program/service	4	4	4	4	4
The exists broad community support/collaboration	3	3	4	4	3
The program fits within the larger mission	4	4	4	4	4
Meets disproportionate unmet health related need	4	3	4	4	4
Emphasis on primary prevention	4	4	4	2	2
Builds a seamless continuum of care	4	3	2	2	2
Builds community capacity	4	4	4	4	4
Collaborative Governance exists	4	3	4	4	4

### **Organizational Structure/ Community Involvement**

Mission Hospital demonstrates organizational commitment to the community benefit process through the allocation of staff, financial resources, participation and collaboration. Full engagement of the Hospital's Community Benefit Committee, Board of Trustees and Executive Management Team occurred in the review of the health needs assessment data from all three surveys and members actively participated in the prioritization of the programs and services necessary to impact the health and quality of life within the areas with disproportionate unmet needs. In addition to the above groups, the Hospital's Foundation Board and Business Development executive and staff participated in the process. The approved community benefit plan for FY 2006-2008 will continue to be used by the Business Development Department to guide the hospital's strategic plan and goals for the coming fiscal years.

Mission Hospital's Board of Trustees and Community Benefit Committee reviewed and approved the FY 08 Community Benefit report in September 2008.

The Community Benefit/Care for the Poor Committee, a Board of Trustees Committee,, is made up of Board members as well as community members representing community-

based organizations. It exists to oversee the development of policies and programs to benefit the community and to respond to the needs of the poor within the sphere of its influence. The Community Benefit Committee meets six times a year and is chaired by a member of the Board of Trustees and reports to the Board every two months. The Chairman of the Board of Trustees participated in the strategic planning process in collaboration with selected community leaders. The Hospital's President and Chief Executive Officer, Vice President of Mission Integration, Executive Vice President and Chief Operating Officer, and Chief Financial Officer are all active participants of the Committee. Over the past three years, two residents for the targeted neighborhoods have been selected and are currently serving on the committee. One member represents San Juan Capistrano and the other, San Clemente.

In FY07 the Mission Hospital Community Benefit Bylaw and Charter were updated to reflect institutional enhancements related to the ASACB Community Benefit Demonstration. Specific responsibilities of the Community Benefit Committee include but are not limited to:

1. **Budgeting Decisions:** Review and recommend to the Board of Trustees approval of budget development and disbursement of funds including annually the Community Benefit Budget, which represents an annual allocation of 1.5% of hospital operating expenses, and the Budget Philosophy Analysis, which includes Care for the Poor funds. Additionally, identify potential funding sources and partnerships for community benefit programs.
2. **Health Needs Assessment:** Provide direction and input to the health needs assessment process, conducted at a minimum of every three years.
3. **Geographic/Population Targeting:** Review and approve Mission Hospital's Community Benefit plan to address the needs of the medically underserved and to identify and respond to the disproportionate unmet health needs of the community.
4. **Program Direction:** Provide direction of all policies, programs and activities that benefit the medically underserved and improve the health status and quality of life of residents in the communities served by the ministry.
5. **Program Content/Design:** Review, approve, and recommend overall program content and design in which Community Benefit/Care for the Poor Funds would be allocated, assuring inclusion and engagement of diverse stakeholders throughout the process.
6. **Program Continuation/Termination:** Review at least annually all Community Benefit programming and make recommendations for continuation or termination based on program outcomes.
7. **Advocacy:** Assist in identification of key local issues for which advocacy efforts will be undertaken and cooperation with advocacy priorities and efforts identified by St. Joseph Health System.
8. **Accountability:** Provide a verbal and written report to the Board of Trustees on at least an annual basis.

9. **Fund Development:** Identify potential funding sources and partnerships for community benefit programs. Provide letters of support or introduction as appropriate.

The health needs assessment data was shared with a wide variety of external stakeholders including: the members of the South Orange County Community Services Council, the South Orange County Family Resource Center partner members, the Principal and administrative staff of the CUSD Adult school, residents of the CHEC Neighborhood Health Committee, Members of the Hospital's Lung Health Advisory Board, the Community Health Advisory Board, city staff from the City of San Juan Capistrano, the Prop 10 Family Resource Center Coalition members and the Executive Director of the Nicole Foundation. There are a number of planned community benefit activities that have a shared governance model with an emphasis on accountability to the community. For example, the Community Health Advisory Board will provide oversight and direction to the mental health and healthy weight initiatives. The affordable housing initiative currently has in place a governance model that will continue and is collaborative in nature. Each of the governing bodies have participated in identifying appropriate outcome measures and will monitor the impact of each of the strategic plans at least annually.

### **C. FY 06-08 Community Benefit Plan: FY 08 Progress on Programs**

The community benefit activities for fiscal year 2008 built upon existing activities Mission Hospital initiated as a result of a 1995, 1997, 1999, 2001, 2003 and 2005 community health needs assessment, at both the county and neighborhood level. Collaboration and the support of many individuals and groups continue to be the driving force to the community benefit plan's success over the past year. Highlights include progress among promoting community health initiatives, such as mental health programs, as well as building healthy communities through access to safe parks and recreation.

Below is a summary of FY 08 accomplishments for Mission Hospital's key priority initiatives.

#### ***Camino Health Center FY 08 Outcomes***

In FY 08, Camino Health Center provided a total of **25,180** patient visits (excluding WIC clients). A total of **884** patients were served through the mobile medical unit in the cities of San Clemente and Lake Forest, an 83% increase from FY07. Additionally a total of **1,630** Pap Smears were provided, a 45% increase from the FY05 baseline. To ensure the highest quality patient care, Camino Health Center continued to focus on the implementation of the AVATAR Patient Satisfaction survey. In FY 08, the AVATAR survey was also implemented with the WIC clients and combined results show a score of 85.97.

#### ***Access to Health Insurance FY 08 Outcomes***

In FY 08, a total of **868** children were enrolled in low-cost health insurance programs. Additionally, a total of **535** children, ages 0 to 5, were linked to a medical home (used their health insurance coverage throughout the year), an increase of 44% from FY07.

#### ***Mental Health FY 08 Outcomes***

In FY 08, a total of **1,260** bilingual mental health visits were provided, an increase of 53% from FY07. Eighty-four percent of clients attending three or more mental health sessions reported a change/ improvement in their mental health. Additionally, **97%** of clients reported improvement in depression symptoms evidenced by a change in scores from moderate severe to low. To help build capacity of mental health providers in south Orange County a total of 120 collaborative education programs were held focused on the unique needs of our community. A variety of mental health programs were provided in the community and post tests show that 83% of attendees made a behavior change to promote mental health.

#### ***Obesity Prevention FY 08 Outcomes***

In FY 08, several healthy lifestyle educational classes were provided in the community, which resulted in **98%** of participants making a lifestyle change to achieve a healthy weight. In partnership with the City of San Juan Capistrano, the CHEC Neighborhood Health Committee, CREER and other key San Juan Capistrano residents, improvements were made to local basketball, tennis and indoor soccer courts, helping

to increase access to recreation to hundreds of families in the community. This environmental improvement was made possible through funds from the Health Funders Partnership of Orange County. Additionally a total of **130** kids received scholarships to the Boys and Girls Club and the Great Opportunities Swimming Program. In FY 08, great effort went into creating a strategic plan to address the incidence of Childhood Obesity in South Orange County, which relates to the SJHS Healthiest Communities goal. This plan helped to bring several community stakeholders together to create the south County Obesity Taskforce, which met on a regular basis to track the progress of the plan.

### ***Improving Quality of Life through Education FY 08 Outcomes***

In FY 08, Mission Hospital continued to work with the Capistrano Unified School District Adult School in English and Spanish literacy efforts, with a total of **3,488** adults enrolled in English literacy classes and **326** enrolled in Spanish literacy classes. Student evaluations showed **64%** of students meeting their personal goals and **65%** showed a significant learner gain. Our partnership continued with Marco Forster Middle School to provide parents and students with the tools they need to go to college. Students and parents received information on financial aid, college requirements, community resources, and several mental health topics related to teens. A total of 85 students and 18 parents were taken on a trip to the University of California, Irvine. A partnership was established with the Mexican American Engineers and Scientists (MAES) student group and they hosted a science extravaganza day exposing students to math and science careers. Mission Hospital continued to support Project Breakthrough, a program geared towards helping first generation students attend a college or university. A total of 48 students attended the program, an increase of 118% from FY07. The Mission Hospital Homework Club continued to thrive with a total of 25 kids attending the program 3 times a week throughout the entire 2007 school year. A total of 573 volunteer hours were provided to support the program.

### ***Increasing Access and Capacity for Affordable Housing FY 08 Outcomes***

Mission Hospital continued to advocate for affordable housing in south Orange County. Mission Hospital employees submitted a total of **187 letters** to local and state officials supporting affordable housing initiatives. A total of **100** employees and community partners also attended local city council meetings to advocate for the renewal of the lease for the CHEC Family Resource Center and for the City of San Clemente Housing Element. As a result of the housing crisis, our Emergency Rental Assistance Program served **44** people, helping them to be able to remain in their homes. Additionally, a total of 135 people were given information on local housing resources to help their housing situation.

### ***FY 08 General Community Benefit Outcomes***

Mission Hospital continued to work in partnership with Orange County Human Relation and the San Clemente Collaborative in improving health and quality of life for residents in the City of San Clemente. Several community forums were held throughout the year focusing on key issues that are important to the community. As a result of this great work, Orange County Human Relations was awarded a planning grant from the St.

Joseph Health System Foundation through the Community Building Initiative. A final three-year proposal will be submitted in September 2008.

**FY 06 – FY 08 Community Benefits Plan**

Mission Hospital has identified five program areas, which will be the major focus for the hospital in the next three years based on findings from the collective health needs assessments. Significant efforts and resources will be allocated with the expectation of clear and measurable outcomes.

The following tables highlight outcomes for FY 08.

**FY 06 – FY 08 Community Benefit Plan Progress**

<b>#1 Title: 100% Access to health insurance for children.</b>		<b>Focus Area: Healthcare Access</b>
<b>3 Year Outcome Desired:</b> Enhance access to and utilization of health care for the underserved.		
<b>Strategy 1:</b> Enhance access to and utilization of healthcare for the underserved.		
<b>FY '06 Baseline:</b> Currently 1,824 children enrolled through Camino Health Center (CHC) and Family Resource Center (FRC).		
<b>FY 08 Measure</b>		<b>FY 08 Outcome</b>
1. Increase by 5% the #(1701) of new <b>children</b> enrolled in low cost health insurance.	1. Decrease of 49%(868). Attributed to not having a designated CAA FTE to enroll children.	
<b>Strategy 2:</b> Increase community capacity for access to health insurance enrollment to very low-income children.		
<b>FY '06 Baseline:</b> 1,800 enrollments through Mission Hospital Emergency Department, 315 children with a medical home. Over a 12-month period 1,800 children were identified in the ER as self-pay.		
<b>FY 08 Measure</b>		<b>FY 08 Outcome</b>
2. #(370) of children linked to a healthcare home increases by 5% per year.	1. Increased by 44% (535).	

**FY 06 – FY 08 Community Benefit Plan Progress (Continued)**

<b>#2 Title: Strategic Direction for Camino Health Center</b>		<b>Focus Area: Community Clinics</b>
<b>3 Year Outcome Desired:</b> Improve the health status of the medically underserved in South Orange County by providing affordable, quality primary health care.		
<b>Strategy 1:</b> Improve the quality of health services provided at Camino Health Center		
<b>FY '06 Baseline:</b> No measurement system in place, patient satisfaction levels unknown.		
<b>FY '07 Baseline:</b> Patient satisfaction level overall is 86% for patients from Camino Health Center		
<b>FY 08 Measure</b>		<b>FY 08 Outcome</b>
1. <i>Finalize AVATAR Action Plan based on survey results.</i>	1. Combined score through June 08 is 85.97 with an E-gap of +3.26. Were able to integrate WIC clients as well.	
<b>Strategy 2:</b> Enhance access to health care services for the underserved		
<b>FY '06 Baseline:</b> 514 low-income, uninsured patients at mobile medical unit in FY05; 1,124 women received pap-smears in FY05; baseline to be determined for women enrolled in the Cervical Cancer program.		
<b>FY '07 Baseline:</b> WIC Clinic (65,791), Camino Health Center(22,126) , Children’s Dental Clinic (3,438)		
<b>FY 08 Measure</b>		<b>FY 08 Outcome</b>
1. # of Patient encounters provided: Medical Clinic.	1. Provided 25,180 patient encounters. Had a 1.6 FTE vacancy (1.0 FTE MD and .6 Nurse Practitioner).	
2. Increase by 5% the # (145) of low income and uninsured patients served at the mobile medical unit.	2. Increase of 83% (884 visits). The van went out on a regular basis to sites in San Clemente and Lake Forest.	
3. # of women receiving pap smears will increase by 5% (1,182)	3. Increase of 37% (1630).	

**FY 06 – FY 08 Community Benefit Plan Progress (Continued)**

#3 Title: Strategic Direction for Mental Health		Focus Area: Community Health
<p><b>3 Year Outcome Desired:</b> With a special focus on the underserved, create a healthy community through education, prevention, intervention and access to mental health services.</p>		
<p><b>Strategy 1:</b> Increase awareness of mental health issues/community resources: especially around depression, domestic violence and substance abuse.</p>		
<p><b>FY '06 Baseline:</b> Baseline regarding % of at risk clients who have made a behavior change to manage their illness will be determined.</p>		
<p><b>FY '07 Baseline:</b> 1000 mental health counseling sessions, 57% of clients change report change/improvement after attending 3 or more sessions,</p>		
FY 08 Measure		FY 08 Outcome
1. Increase by 5% the # (823) of mental health counseling sessions (FRC).	1. Increased by 53% (1260).	
2. 50% of clients who attend 3 or more mental health sessions report change/improvement.	2. 84% reported change/improvement.	
3. 40% of clients report improvement in depression symptoms evidenced by change in scores from moderate/severe to low in self-assessment depression screening after 4 <sup>th</sup> session.	3. 97% reported improvement in depression symptoms.	
4. 50% of attendees of CHIS mental health programs make a behavior change that promotes mental health at 6-week follow-up.	4. 83% made a behavior change.	

**FY 06 – FY 08 Community Benefit Plan Progress (Continued)**

**Strategy2:** Increase capacity to provide mental health services through collaboration with community partners.

**FY '06 Baseline:** Mental Health Providers Coalition does not exist.

<b>FY 08 Measure</b>	<b>FY 08 Outcome</b>
1. Increase by 25% the # (3) of mental health practitioners and partners who take uninsured clients and promote ongoing mental health services.	1. Decreased by 33%. Have not been able to find additional providers. A survey was conducted to see if providers would be willing to provide a sliding scale, but the rates were still out of reach for our clients.
2. Increase by 5% the #(54) of collaborative activities facilitated by Mission Hospital which increase capacity building efforts for mental health needs including education sessions and strategic planning sessions.	2. Increased by 122% (120)

**Strategy 3:** Increase knowledge/capacity of services relating to mental health.

<b>FY 08 Measure</b>	<b>FY 08 Outcome</b>
1. 80% of attendees report that program gave them the tools needed to cope or address their stress or anxiety at 6-week follow-up.	1. 67% reported receiving tools.

## FY 06 – FY 08 Community Benefit Plan Progress

<b>#3 Title: Obesity Prevention</b> <i>(formerly Healthy Weight and Recreation)</i>		<b>Focus Area:</b> <b>Community Health</b>
<b>3 Year Outcome Desired:</b> To promote healthy lifestyles to the South Orange County communities to help adults and youth achieve lifelong healthy weight.		
<b>Strategy 1:</b> Improve healthy eating and physical activity behaviors among adults and youth to maintain a healthy weight.		
<b>FY '06 Baseline:</b> According to the 2005 Orange County Health Needs Assessment, 10% of adults are obese; 22% of children ages 12-17 are overweight, 36% ages 2-5; and 53% of adults do not exercise moderately and 60% of children play outdoors less than 2 hr/day.		
<b>FY 08 Measure</b>		<b>FY 08 Outcome</b>
1. Maintain baseline% (88%) of people who make lifestyle change that helps to maintain or achieve a healthy weight at 6-week follow-up.	1. 98% made a lifestyle change (e.g., reading nutrition labels and grocery stores, integrating exercise into daily routine).	
<b>Strategy 2:</b> Increase access to healthy foods and opportunities for recreation.		
<b>FY '06 Baseline:</b> Need places to play and neighborhood support to uphold changes. Local youth recreation programs too expensive. Focus groups identified low-cost activities as needed in the community.		
<b>FY 08 Measure</b>		<b>FY 08 Outcome</b>
1. Increase by 100% the # (25) of youth scholarships for physical activity and/or healthy weight programs.	1. Increased by 420% (kids received scholarships to Boys and Girls Club and Great Opportunities swimming program).	

**FY 06 – FY 08 Community Benefit Plan Progress**

<b>#5 Title: Improving Quality of Life Through Education</b>		<b>Focus Area: Healthy Communities</b>
<b>3 Year Outcome Desired:</b> Increase children and adolescents’ school success by supporting and creating literate parents who perceive education as a contributing factor to an enhanced quality of life.		
<b>Strategy 1:</b> Increase levels of adult literacy for Mission Hospital employees and community members		
<b>FY '06 Baseline:</b> 94% of adult students meet personal goals; 79% demonstrate significant learner gain; 4085 enrolled in English Literacy classes; 103 enrolled in Spanish Literacy classes.		
<b>FY 08 Measure</b>		<b>FY 08 Outcome</b>
1. 90% of adult students meet personal goals	1. 64% of students met their personal goals.	
2. 85% of students demonstrate a significant learner gain	2. 65% of students demonstrated a significant learner gain (3-5 points)	
3. # (3,942) enrolled in English literacy classes increases by 5%	3. Decreased by 11%(3,488)- decrease attributed to lack of housing affordability in south Orange County and ICE Raids.	
4. # (348) enrolled in Spanish literacy classes increases by 5%	4. Decreased by 6% (326) -)- decrease attributed to lack of housing affordability in south Orange County and ICE Raids.	
<b>Strategy 2:</b> Identify and case manage/support families at high risk for children ages 12-18 at risk of dropping out of high school.		
<b>FY '06 Baseline:</b> To be determined (52% of residents in San Juan Capistrano do not have a HS Diploma or GED).		
<b>FY 08 Measure</b>		<b>FY 08 Outcome</b>
1. # (497) of volunteer hours supporting Elementary and Jr. High kids increase by 10%	1. Increased by 15% (573). Homework club has become a designated community service site for local high schools.	
2. Of the # of high-risk families identified, 100% of their children remain in school.	2. 100%	

**FY 06 – FY 08 Community Benefit Plan Progress (Continued)**

**Strategy 3:** Provide support services to teens completing their GED into higher education/college

**FY '06 Baseline:** Baselines to be determined; volunteer hours at 248

FY 08 Measure	FY 08 Outcome
1. # of English Learner and AVID Middle School and High School students attending trips to institutions of higher education.	1. 85 students attended the Mexican American Engineers and Scientist program at UC Irvine.
2. Increase by 100% the # (22) of kids attending Breakthrough Program.	2. Increased by 118% (48 new students)
3. # (5) of parents attending trips to institutions of higher education increase by 10%.	3. Increased by 260% (18 parents attended with their children)
<b>Strategy 4:</b> Increase learner persistence among high risk families with children in Jr. High School	
<b>FY '06 Baseline:</b> To be determined 6 Literacy events.	
FY 08 Measure	FY 08 Outcome
1. # of “stop outs” decrease by 12% in selected programs.	1. Measure not implemented.
2. #(16) of events held to increase literacy awareness to increase by 5%	2. 10 events were held, a decrease of 37%.

**FY 06 – FY 08 Community Benefit Plan Progress (Continued)**

<b>#6 Title: Increasing Access to &amp; Capacity for Affordable and Decent Housing</b>		<b>Focus Area: Healthy Communities</b>
<b>3 Year Outcome Desired:</b> Through collaborative efforts increase the affordable and decent housing units in South Orange County, while supporting and educating community members in leadership skills, tenant right and home ownership issues.		
<b>Strategy 1:</b> Increase community involvement of Mission Hospital employees for affordable and decent housing.		
<b>FY '06 Baseline:</b> Currently there exists among hospital employees a very low level of community engagement regarding affordable housing issues.		
<b>FY 08 Measure</b>		<b>FY 08 Outcome</b>
1. 10 employees or community members attend local government meetings or take part in community efforts in which housing issues were addressed		1. 100 employees/ community members attended city council meetings for CHEC Family Resource Center and the San Clemente Housing Element.
2. # (142) of responses of Mission Hospital Employees to legislative alerts thru Cap Wiz increase by 10 %		2. Increased by 31% (187)
3. # of people that receive rental vouchers/rental assistance.		4. 44 people received assistance.
<b>Strategy 2:</b> Employees/community residents increase their knowledge and competency in addressing landlord/tenant/homeowner issues/rights.		
<b>FY '06 Baseline:</b> Employees have expressed a lack of knowledge regarding affordable housing options in the community and are frustrated with ability to access.		
<b>FY 08 Measure</b>		<b>FY 08 Outcome</b>
1. 10 employees per month participate in the collaborative's education programs (in-person & distance learning).		1. 13 employees participated in Mission Hospital Advocacy Council.
<b>Strategy 3:</b> Employees/community residents who have home ownership as a goal, increase their knowledge and are supported in meeting that goal when able/appropriate.		
<b>FY '06 Baseline:</b> Employees with home ownership as a goal have expressed frustration/ lack of knowledge and ability regarding purchasing a home.		

**FY 06 – FY 08 Community Benefit Plan Progress (Continued)**

<b>FY 08 Measure</b>	<b>FY 08 Outcome</b>
1. # of employees/community members that receive information regarding housing issues (e.g., housing options, tenants' rights).	1. 135 received information.
2. # of people referred to housing agencies (that have potential for homeownership)	2. 12 people were referred. Not much interest due to present housing market.

**D. Summary of Other Community Benefit Programs**

Program/Activity Name	FY 08 Outcome Measure	FY 08 Outcome
<p>1. <b>Focus Area: Breast Center</b>  <b>Program Description:</b>            Through a coordinated effort, we are dedicated to the prevention, early diagnosis and treatment of breast cancer for all women in our community and committed to healing the whole person: body, mind and spirit</p>	<p>#(96) of high risk women who obtain genetic counseling and testing increase by 5% each year</p>	<p>Increase of 20% (116) women received genetic counseling and testing.</p>
<p>2. <b>Focus Area: Health Ministry</b>  <b>Program Description:</b>            Create a healthy community by building partnerships between community groups, faith congregations and Mission Hospital, to promote wellness of individuals, families, and community at large by providing health related services and activities that integrate the body/mind/spirit.</p>	<p>90% of at risk patients reached post health screening follow-up with recommendations</p>	<p>100% -Total of 14 at risk clients identified between 3 separate church site Health Screenings. All contacted within 1 week of screening. All followed up with referral/recommendations. Positive change in healthy living habits.</p>

**D. Summary of Other Community Benefit Programs (Continued)**

Program/Activity Name	FY 08 Outcome Measure	FY 08 Outcome
<p>4. <b>Focus Area: Lung Health Services</b>  <b>Program Description:</b>            To optimize lung health and quality of life for south Orange County residents through awareness, prevention, identification, education, and treatment of respiratory conditions</p>	<p>Total number of ER visits for asthma by children decreases by 50% after entry into the Asthma Program.            Total number of hospitalizations for asthma by children decreases by 70% after entry into the Asthma Program.            Total number of days absent from school due to asthma decreases by 50% after entry into the Asthma Program.</p>	<p>ER visits decreased by 78%            Hospitalizations decreased by 71%            Absences from school due to asthma decreased by 67%</p>

## **E. Quantified Progress**

Formal mechanisms used by the hospital to inform and encourage involvement of leaders and employees within the organization of the community's needs occurred through budget philosophy training sessions and individual meetings with department directors as well as presentations during the strategic planning process.

Through improved education of the leadership and staff, there has been an increased involvement of all in meeting the needs of the community. Department Directors are invited to submit an application of their project outlining its purpose, how it meets a community need and the estimated expenses. A review and selection committee comprised of members of the executive team, finance, director level and community benefit committee representation, reviews the project and assesses its fit with the definitions for budget philosophy. Once approved, the expenses are built into the department director's budget for the upcoming fiscal year.

**In FY 08 Mission Hospital contributed a total of \$33,425,000 in Community benefit, an increase of 38% from FY07.** In accordance with the Catholic Healthcare Association guidelines, unpaid costs of Medicare were not counted. There was a 49% increase in Charity Care costs attributed to the new Mission Hospital Financial Assistance Policy.

**Mission Hospital  
Quantifiable Community Benefit Trend  
As of 6/30/08**

	FY 2007	FY 2008
<b>BENEFITS FOR THE LOW-INCOME COMMUNITY</b>		
Charity Care 1 (Financial Assistance)	\$ 3,449,000	\$ 5,162,000
Community Services 2	\$ 986,000	\$ 1,165,000
Unpaid costs of state and local programs	\$ 16,373,000	\$ 23,582,000
<b>A. TOTAL QUANTIFIABLE BENEFITS FOR THE LOW-INCOME COMMUNITY</b>	<b>\$ 20,808,000</b>	<b>\$ 29,909,000</b>

<b>BENEFITS FOR THE BROADER COMMUNITY</b>		
Community Services	\$ 3,312,000	\$ 3,516,000
<b>B. TOTAL QUANTIFIABLE BENEFITS FOR THE BROADER COMMUNITY</b>	<b>\$ 3,312,000</b>	<b>\$ 3,516,000</b>

<b>C. TOTAL QUANTIFIED COMMUNITY BENEFIT (A + B = C)</b>	\$24,120,000	\$ 33,425,000
Percentage of total net patient revenue	7.4%	9.9%
Percentage of total operating expenses	7.8%	10.4%

	FY 2007	FY 2008
<b>BENEFITS FOR THE BROADER COMMUNITY</b>		
<b>Unpaid cost of Medicare</b>	<b>\$30,376,000</b>	<b>\$31,465,000</b>

1 Charity care provided for households at or below the 500% of Federal Poverty Levels, in accordance with Mission Hospital's Financial Assistance Policy.

2 SJHS Foundation (Care for the Poor) Funds included in Community Services for the Low-Income

– FY 07 \$ 986,005

SJHS Foundation (Care for the Poor) Funds included in Community Services for the Low-Income

– FY 08 \$ 1,164,730

## **F. Non-Quantified Progress**

Mission Hospital's employees serve as volunteers in the community in a variety of ways. In addition to their participation in community walks, such as the American Heart Association's Heart and Sole Classic, employees have been committed to helping the underserved families within the area through the Student Angel and Christmas Angel projects. In the Student Angel project, employees or entire departments within the hospital "adopt" a child and outfit him or her for school. During the holiday season, the concept expands to include the "adoption" of an entire family in need. Over the past year more than 100 families and children have been served. Additionally several employees with clinical backgrounds went abroad on ministry missions to help areas that had been victims of natural disasters.

The many community volunteers that assisted in the hospital's efforts evidenced the spirit of giving this past year. The hospital auxiliary consisting of 320 members donated over **70,276** hours of their time. In addition to hospital work, these volunteers staff the Mission Hospital's Thrift and Gift shop, which raises funds to support Camino Health Center and the South Orange County Family Resource Center in Lake Forest.

## **G. Public Process**

Mission Hospital has continued to share the findings of the community needs health assessment and annual results of the community benefit initiatives with the hospital Board of Trustees, Community Benefit Committee, Hospital Leadership Council, Latino Leadership Council and the Foundation Board of Trustees. In addition, the Community Benefit Committee reviews at least bi-annually, year-to-date progress of selected initiatives and provides feedback related to barriers to implementation or potential resources in the community. An in-depth presentation of a selected community benefit program is also provided at each Committee meeting.

Within the organization, employees are included in the public process by sharing knowledge regarding the community benefit activities and their results at mandatory Annual Employee Update (AEU) sessions, articles in the employee newsletter, Mission Knows and presentations at Leadership Council meetings. Opportunities for employees to volunteer in the community are identified as well and efforts will be put into place during the next fiscal year to increase the hospital's employee involvement in community benefit activities.

In order to communicate results externally, Mission continues to produce a community benefits brochure highlighting community benefit programs and activities and their outcomes over the past year. For fiscal year 2008, approximately 1,500 annual reports will be mailed to local legislators, civic leaders, government agencies, community-based organizations and the community at large. "Health Whys" the hospital's community newsletter mailed to 160,000 households within south Orange County, continues to feature regularly a community benefit story highlighting each of the program's successes. In addition, community benefit stories of success were included in the

annual Camino Health Center's fundraising fashion show program. Approximately 400 individuals attended the program. The FY 08 Community Benefit Report will also be posted on the hospital website.