Delano Regional Medical Center

2020-2022 Implementation Strategy

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Implementation Strategy

Introduction

Delano Regional Medical Center (DRMC) is a 156-bed full-service community and regional teaching hospital governed by the Central California Foundation for Health. Founded in 1974, DRMC serves 10 rural central California towns in Kern County.

In FY19, Delano Regional Medical Center conducted a Community Health Needs Assessment (CHNA) to assess the significant health needs for the hospital service area. The CHNA and the resulting Implementation Strategy identify and address significant community health needs and will help guide the hospital's community health improvement programs and community benefit activities, as well as its collaborative efforts with organizations that share a mission to improve health. This Implementation Strategy explains how Delano Regional Medical Center plans to address the significant health needs identified by the CHNA.

Report Adoption, Availability and Comments

This Implementation Strategy was adopted by the Delano Regional Boards of Directors on May 29, 2019. This report is widely available to the public on the hospital's web site, http://www.drmc.com/about-drmc/community-benefits-reports.php. Written comments on this report can be submitted to DRMC-CHNA@drmc.com.

2019 Community Health Needs Assessment Summary

Delano Regional Medical Center conducted a Community Health Needs Assessment (CHNA) to comply with state and federal regulations guiding tax-exempt hospitals. The Community Health Needs Assessment incorporated demographic and health data for the communities served by the hospital. Significant health needs were identified from issues supported by primary and secondary data sources gathered for the CHNA. The needs were indicated by secondary data sources, a community survey and stakeholder interviews. Health indicators were considered significant health needs when they exceeded benchmark data, specifically county or state rates or Healthy People 2020 objectives. A brief description of the significant health needs listed in alphabetical order follows:

1. Access to care – Health insurance coverage is a key component to accessing health care. The Healthy People 2020 objective is for 100% insurance coverage for all population groups. The service area has 81.8% insurance coverage across all ages, which is lower than Kern County (86.7%), Tulare County (85.1%) and state (87.4%) rates. 5.7% of Kern County adults had difficulty finding a primary-care doctor and 11.3% had difficulty obtaining specialty care. 7.3% of Tulane County adults had

difficulty finding a primary-care doctor and 13.4% had difficulty obtaining specialty care.

2. Alzheimer's disease – The mortality rate from Alzheimer's disease in the service area was 31.1 per 100,000 persons. This is lower than the Kern County rate (50.5) and the state rate (35.5 per 100,000 persons). A community stakeholder noted, "It is very common that families are not able to effectively care for their loved ones due to the high cost of treating or caring for them. A lot of families have to quit their jobs to stay home and care for a loved one because they do not have other options."

3. Birth indicators – 75.4% of women accessed prenatal care in the first trimester. This does not meet the Healthy People 2020 objective of 78% of women entering prenatal care in the first trimester. The infant mortality rate was 6.8 deaths per 1,000 live births in Kern County and 5.8 deaths per 1,000 live births in Tulare County. These rates were higher than the state rate (4.6 deaths per 1,000 live births). The Healthy People 2020 objective is 6.0 deaths per 1,000 births.

4. Chronic diseases – Heart disease and cancer are the top two causes of death in the service area. Stroke is the fourth-leading cause of death and Chronic Lower Respiratory Disease (CLRD) is the fifth-leading cause of death. Kern County has the highest rate of Valley Fever in California. Rates of Valley Fever in Kern County have risen from a low of 106.2 in 2014, to 305.7 cases per 100,000 residents in 2017. The rate of Valley Fever is 58.2 per 100,000 persons in Tulare County.

5. Dental care – 2.4% of county residents have never been to a dentist and 11.8% have not visited a dentist for five or more years. 2.3% of Tulare County residents have never been to a dentist and 12.5% have not visited a dentist for five or more years. Community members explained, "There is a lack of access due to insufficient insurance and Medi-Cal coverage for dental services. There is a lack of dentists who take Medi-Cal, and a lack of specialists. And it is unaffordable."

6. Economic insecurity – Among residents in the service area, 32.1% are at or below 100% of the federal poverty level (FPL) and 65.9% are low-income (200% of FPL or below). These poverty rates are higher than county and state rates. 44.5% of service area children live in poverty. Among service area seniors, 18.8% are living in poverty.

7. Environmental pollution – In 2016, Kern County had 78 days with ground-level ozone concentrations above the U.S. standard of 0.070 parts per million. This is compared to the state, which had 22 days of high ground-level ozone concentrations during the same time period. Stakeholders noted the poor air quality in the county and the high rates of pesticide use, which impact the health of the residents.

8. Food insecurity – Among the population in Kern County, 13.6% experienced food insecurity during the past year. 13% of Tulare County residents experienced food insecurity. Among children in Kern County, 25% lived in households that experienced food insecurity. 26.7% of Tulare County children lived in households

that experienced food insecurity at some point in the year. The rate of food insecurity was higher in Kern County and Tulare County than in the state. Community members noted those who live in rural areas, seniors and children are disproportionately impacted by food insecurity.

9. Housing and homelessness – 45.4% of service area families spend 30% or more of their income on housing. In Kern County, there was a 9% increase in homelessness from 2017 to 2018, and a 46% increase in the number of unsheltered homeless. Tulare County experienced a 6% increase in homelessness from 2016 to 2017 (666 in 2017 vs. 631 in 2016). Tulare County has the largest percentage of their homeless population living in unsheltered situations (84%). Many stakeholders commented there are not enough homeless housing resources in Kern County.

10. Mental health – Among adults in Kern County, 12% had experienced serious psychological distress in the past year. 10.7% of Tulare County adults had experienced serious psychological distress in the past year. Stakeholders commented on the lack of county resources available to address mental health issues. As well, there continues to be a stigma associated with mental illness.

11. Overweight and obesity – In Kern County, 40.7% of adults, ages 20 and older, are obese. 20.6% of Kern County teens are obese. In Tulane County, 34.7% of adults, ages 20 and older, and 30.2% of teens are obese. The Healthy People 2020 objectives for obesity are 30.5% of adults, ages 20 and over, and 16.1% of teens. Stakeholders noted the easy availability of fast food in the community and the high cost of fresh produce and healthy foods.

12. Preventive practices – The Healthy People 2020 objective is for 70% of the population to receive a flu shot. 44.1% of Kern County adults and 44.8% of Tulare County adults received a flu shot. The Healthy People 2020 objective for mammograms is for 81% of women, 50 to 74 years old, to have had a mammogram within the past two years. In Kern County, 78.6% of women obtained a mammogram. 82.6 % of Tulare County women received a mammogram.

13. Sexually transmitted infections (STIs**)** – Rates of STIs are climbing rapidly in Kern County and all STI rates in Kern County exceed state rates. The rate of congenital syphilis is also rising swiftly. In Kern County, there were 172.7 cases per 100,000 births. In Tulare County, the rate of congenital syphilis was 67.8 per 100,000 births. The Healthy People 2020 objective for congenital syphilis is 9.6 cases per 100,000 births. A community stakeholder noted, "We have seen an increase in our population with syphilis. Pregnant women are coming in to have their babies and they test positive for syphilis."

14. Substance use and misuse – In Kern County, 14.6% of adults smoke cigarettes and 14.6% of Tulare County adults smoke cigarettes. These rates are higher than the state rate (12.1%) and the Healthy People 2020 objective (12%). The rate of hospitalizations due to opioid overdose was 11.9 per 100,000 persons in Kern

County and 12.5 per 100,000 persons in Tulare County. This is higher than the state rate (7.6 per 100,000 persons). Community members noted increases in meth and opioid use and the increase in vaping among the youth.

15. Unintentional injuries – Unintentional injury is the third highest cause of death in the service area. The age-adjusted death rate from unintentional injuries in the service area was 35.4 per 100,000 persons. The death rate from unintentional injuries in the service area is lower than the Healthy People 2020 objective of 36.4 deaths for unintentional injuries per 100,000 persons. Stakeholders noted there are high rates of motorcycle collisions and pedestrians being hit by motor vehicles.

16. Violence and injury – In the service area, the age-adjusted death rate from homicides was 12.9 per 100,000 persons. This rate was higher than the state rate for homicides. The Healthy People 2020 objective for homicide is 5.5 per 100,000 persons. Calls for domestic violence are categorized as with or without a weapon. 38.1% of domestic violence calls in Kern County and 24.9% in Tulare County involved a weapon.

Definition of the Community Service Area

Delano Regional Medical Center is located at 1401 Garces Highway, Delano, California, 93215. The service area for the hospital includes six communities consisting of four ZIP Codes in Kern County and two ZIP Codes in Tulare County.

Delano Regional Medical Center Service Area

ZIP Code	Place	County
93215	Delano	Kern
93250	McFarland	Kern
93263	Shafter	Kern
93280	Wasco	Kern
93219	Earlimart	Tulare
93261	Richgrove	Tulare

The population of the Delano Regional Medical Center (DRMC) service area is 131,723. Children and youth, ages 0-17, make up 31.1% of the population and seniors, 65 years and older, account for 6.5% of the population. In the service area, the majority of the population is Hispanic/Latino (81.5%), 8% are White, 3.6% are Black/African American, and the remaining 1.3% of the population is American Indian/Alaskan Native, Native Hawaiian/Pacific Islander, other race/ethnicity, and multiple races. In terms of educational attainment,48.2% of service area residents, who are 25 years old and older, have less than a high school diploma. Among residents in the service area, 32.1% are at or below 100% of the federal poverty level (FPL) and 65.9% are low-income (200% of FPL or below).

Significant Health Needs the Hospital Will Address

This Implementation Strategy describes how Delano Regional Medical Center plans to address the selected significant health needs identified in the 2019 Community Health Needs Assessment. DRMC examined the significant health needs and applied the following criteria to identify the health needs it will address: organizational capacity, established relationships, ongoing investment, and acknowledged competencies and expertise. As a result, DRMC will address the following health needs through a commitment of community benefit programs and charitable resources:

- Access to health care
- Food insecurity
- Chronic diseases (including overweight and obesity)

For each health need the hospital plans to address, the Implementation Strategy describes: actions the hospital intends to take, including programs and resources it plans to commit; anticipated impacts of these actions; and planned collaboration between the hospital and other organizations.

Access to Care

Goal

Increase coverage and access to health care for the medically underserved.

Strategies

DRMC will address access to health care by taking the following actions:
1. Provide financial assistance through both free and discounted care for health care services, consistent with the hospital's financial assistance policy.
2. Connect the medically indigent to resources to access a medical home.
3. Provide free preventive health screenings at community events.

Impact

The anticipated impact of these actions will be to:
➢ Increase availability and access to health care.
➢ Provide financial assistance to qualified patients.
➢ Improve referrals and coordination among health care providers, community resources and services.

Food Insecurity

Goal

Increase access to healthy, affordable food to reduce the impact of food insecurity in the community.

Strategies

DRMC will address food insecurity by taking the following actions:

1. Promote screening for food insecurity at strategic intake points, including the ED and local health clinics and provide information on local food resources.
2. Offer sign-up assistance for public programs that increase access to food.
3. Participate in Waste Hunger Not Food Kern County

Impact

The anticipated impact of these actions will be to:

➢ Increase public awareness of food insecurity and reduce food waste in collaboration with community partners.
➢ Increase awareness and utilization of public program participation in food stamps, WIC benefits, SNAP, CalFresh, and reduced lunch school programs.

Chronic Diseases, including Overweight and Obesity

Reduce the impact of chronic diseases on health and increase the focus on prevention and treatment education.

Strategies

DRMC will address chronic diseases by taking the following actions:

1. Provide diabetes education focused on prevention and disease self-management, healthy lifestyles, nutrition and physical activity.
2. Provide screening for cholesterol, blood pressure, blood glucose and BMI.
3. Distribute glucometers and glucose strips to individuals with diabetes who cannot afford or access these diabetes monitoring resources.
4. Provide public health education in the media and community health awareness events to encourage healthy behaviors and prevent chronic diseases.

Impact

The anticipated impact of these actions will be to:

➢ Increase the identification and treatment of diabetes.
➢ Increase public awareness of chronic diseases and their prevention.
➢ Increase individuals' compliance with chronic disease prevention and management recommendations.
➢ Improve access to healthy food options and increase opportunities for physical activity.

Planned Collaboration

Delano Regional Medical Center will work collaboratively with these community organizations to address the identified health needs:

- ➢ CalFresh
- ➢ Churches/faith community
- ➢ Delano and McFarland Police Departments
- ➢ Delano Chamber of Commerce
- ➢ Delano primary care clinics and prompt care clinics
- ➢ Farmers Markets, food banks and food pantries
- ➢ Kern County Public Health Services Department
- ➢ Local businesses
- ➢ Prison system
- ➢ Schools and school districts
- ➢ WIC

DRMC will continue to look for opportunities to engage additional community partners as a way to leverage resources and support increased participate in decision making.

Evaluation of Impact

Delano Regional Medical Center will monitor and evaluate the programs and activities outlined above. The hospital tracks the implementation of the strategies and documents the anticipated impact. An evaluation of the impact of DRMC's actions to address these significant health needs will be reported in the next scheduled Community Health Needs Assessment.

Needs the Hospital Will Not Address

Taking existing hospital and community resources into consideration, DRMC will not directly address the remaining health needs identified in the CHNA: housing and homelessness, mental health, economic insecurity, substance use and misuse, environmental pollution, sexually transmitted infections, violence and injury, dental care, birth indicators, Alzheimer's disease, unintentional injuries and preventive practices.

DRMC does not have the resources to address all the health needs present in the community. Therefore, it will concentrate on those health needs that can most effectively be addressed given the organization's areas of focus and expertise.