# Table of Contents

Adventist Health Overview .......................................................................................................................... 3

Letter from the President.................................................................................................................................. 4

Hospital Identifying Information ..................................................................................................................... 5

Community Health Development Team ......................................................................................................... 6

Invitation to a Healthier Community ............................................................................................................. 7

2018 Community Benefit Update .................................................................................................................. 8

Connecting Strategy and Community Health................................................................................................. 18

Community Benefit & Economic Value for Prior Year .................................................................................. 19
Adventist Health Overview

Adventist Health Bakersfield is an affiliate of Adventist Health, a faith-based, nonprofit integrated health system serving more than 80 communities on the West Coast and Hawaii.

Adventist Health entities include:

- 20 hospitals with more than 3,200 beds
- More than 280 clinics (hospital-based, rural health and physician clinics)
- 13 home care agencies and seven hospice agencies
- Four joint-venture retirement centers
- Compassionate and talented team of 35,000 which includes associates, medical staff physicians, allied health professionals and volunteers

We owe much of our heritage and organizational success to the Seventh-day Adventist Church, which has long been a promoter of prevention and whole person care. Inspired by our belief in the loving and healing power of Jesus Christ, we aim to bring physical, mental and spiritual health and healing to our neighbors of all faiths. Every individual, regardless of his/her personal beliefs, is welcome in our facilities. We are also eager to partner with members of other faiths to enhance the health of the communities we serve.

Our commitment to quality health care stems from our heritage, which dates back to 1866 when the first Seventh-day Adventist health care facility opened in Battle Creek, Michigan. There, dedicated pioneers promoted the “radical” concepts of proper nutrition, exercise and sanitation. Early on, the facility was devoted to prevention as well as healing. They called it a sanitarium, a place where patients—and their families—could learn to be well.

More than a century later, the health care system sponsored by the Seventh-day Adventist Church circles the globe with more than 170 hospitals and more than 500 clinics, nursing homes and dispensaries worldwide. And the same vision to treat the whole person—mind, body and spirit—continues to provide the foundation for our progressive approach to health care.
Dear Friends and Colleagues,

Community is formally defined as a feeling of fellowship with others, as a result of sharing common attitudes, interests, and goals. I couldn’t agree more. At Adventist Health, we’re on a mission to help transform our communities by inspiring health, wholeness and hope. It’s a privilege to serve our community.

We know that wellness is more than just physical, it’s a sum of all the things that make life fulfilling. It’s access to housing, nutritious food, better education and a chance to flourish economically. But no one can drive all these things alone. That’s why we’re reaching out and partnering with organizations across the city and even the county to drive results. We want to be a collaborator in spaces where others already are working. And in areas where there’s a void or need, we’re looking to help convene a group of like-minded individuals to take up the charge and make our community a better place to live.

The efforts to date have required our organization to reach across traditional barriers and step into roles traditionally not held by a healthcare organization. But the social predictors of health --- such as food insecurity, lack of affordable housing, and poverty --- dictate that we make these changes and evolve to address the needs of our community.

In the following pages, you’ll see where we’ve been on our journey, and perhaps more important, where we still want to go.

In Wellness,

Sharlet Briggs, PhD
Market President
Adventist Health Bakersfield
Number of Beds: 254
Mailing Address: PO Box 2615, Bakersfield, CA 93303
Contact Information: https://www.adventisthealth.org/bakersfield/ or 661-395-3000
Existing healthcare facilities that can respond to the health needs of the community:

- San Joaquin Community Hospital
- The AIS Cancer Center
- Quest Imaging
- The Adventist Health Physicians Network
Community Health Development Team

Sharlet Briggs, PhD.
Market President

Kiyoshi Tomono, MS
Partnership Executive

CHNA/CHP contact:
Kiyoshi Tomono
Partnership Executive
PO Box 2615
Bakersfield, CA 93303
Phone: 661-869-6563
Email: Tomonock2ah.org

Request a paper copy from Administration/President’s office. To provide comments or view electronic copies of current and previous community health needs assessments go to:

https://www.adventisthealth.org/about-us/community-benefit/
Invitation to a Healthier Community

Fulfilling the Adventist Health Mission

Where and how we live is vital to our health. We recognize that health status is a product of multiple factors. To comprehensively address the needs of our community, we must take into account health behaviors and risks, the physical environment, the health system, and social determinants of health. Each component influences the next and through strategic and collective action improved health can be achieved.

The Community Health Plan (Implementation Strategy) marks the second phase in a collaborative effort to systematically investigate and identify our community’s most pressing needs. After a thorough review of health status in our community through the Community Health Needs Assessment (CHNA), we identified areas that we could address through the use of our resources, expertise, and community partners. Through these actions and relationships, we aim to empower our community and fulfill our mission, “Living God’s love by inspiring health, wholeness and hope.”

Identified Community Needs

The results of the CHNA guided the creation of this document and aided us in how we could best provide for our community and the most vulnerable among us. As a result, San Joaquin Community Hospital has adopted the following priority areas for our community health investments for 2017-2019:

- Access to Health Care
- Cancer

Additionally, we engage in a process of continuous quality improvement, whereby we ask the following questions for each priority area:

- Are our interventions making a difference in improving health outcomes?
- Are we providing the appropriate resources in the appropriate locations?
- What changes or collaborations within our system need to be made?
- How are we using technology to track our health improvements and provide relevant feedback at the local level?
- Do we have the resources as a region to elevate the population’s health status?

Building a healthy community requires multiple stakeholders working together with a common purpose. We invite you to explore how we intend to address health challenges in our community and partner to achieve change. More importantly though, we hope you imagine a healthier region and work with us to find solutions across a broad range of sectors to create communities we all want for ourselves and our families.
2018 Community Benefit Update

In 2016, Adventist Health Bakersfield, conducted a community health needs assessment and was followed by a 2017 Community Health Plan (Implementation Strategy) that identified the priority needs listed below. The prioritized needs were chosen based on community health data and the voices of our community. Working together with our community is key to achieving the necessary health improvements to create the communities that allow each member to have safe and healthy places to live, learn, work, play, and pray. Below you will find an inventory of additional interventions supporting the health of our communities.

Priority Need - Access to Health Care

“Kaur Care” Sikh Community Health Screenings

**Intervention:** In 2018, Adventist Health Bakersfield partnered with the Sikh Women’s Association to perform biometric screenings (blood pressure and glucose), clinics breast cancer exams, childhood immunizations, flu shots and cervical cancer exams at south Bakersfield gurdwaras. There are estimated to be between 17,000 to 20,000 Sikhs in Kern County. The events included providers from the AIS Cancer Center, dieticians from the Wellness Center, staff with the Childhood Mobile Immunizations program and a physician and medical assistants from Adventist Health Physicians Network (AHPN) primary care clinics. The project was dubbed “Kaur Care,” in honor of Gurbinder Kaur, a young, healthy, vibrant mother who lost her battle to cervical cancer in 2018 at the age of 43. If Gurbinder would have had a routine Pap smear, her cancer very likely would have been caught in the early stages, and today she could be living cancer free.

- **Number of Community Members Served:** 40 women received clinical breast exams, 14 women were screened for cervical cancer and 300 received biometric screenings. 50 flu shots were administered.
St John’s Lutheran Church Men’s Health Screenings

**Intervention:** Adventist Health Bakersfield and AHPN partnered with St. John’s Lutheran Church to provide free biometric screenings (blood pressure, blood glucose, etc.) targeted at men attending Sunday services. This family-friendly event also included activities for kids, so moms and dads were not distracted.

- **Number of Community Members Served:** 50

Children’s Mobile Immunizations Program

**Intervention:** Since 1996, we’ve been providing free immunizations to Kern County children as part of our commitment to community health in partnership with First 5 Kern. Today, we’re the only health care system in the area that offers a mobile immunization clinic. The mobile unit travels to all reaches of Kern County also offering free hemoglobin testing, a key requirement of the WIC food program.

**Number of Community Members Served:** 1,852 children served in 2018.
Adventist Health Bakersfield Farmers Market

Intervention: Launched in Fall 2018, Adventist Health Bakersfield began hosting a farmers market/wellness fair on campus, in a parking lot adjacent to the main hospital. The event was marketed to both the public and to hospital staff. Staff dietitians provided nutritional education. The Chest Pain team provided hands-only CPR and heart health education. Bike Bakersfield provided information about alternative transportation while encouraging physical activity. Bakersfield College provided information about academic program opportunities.

Number of Community Members Served: 1,000 customers served in 2018.

Partners

- Sikh Women’s Association
- St. John’s Lutheran Church
- First 5 Kern
- Bike Bakersfield
- Bakersfield College
## Evaluation Metrics

<table>
<thead>
<tr>
<th>Objective</th>
<th>2017 Baseline Measurement</th>
<th>2018 Performance Target</th>
<th>2018 Actual</th>
<th>Indicator</th>
<th>Data Source</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Immunizations:</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Women &amp; children receiving pre/postnatal screening</td>
<td>367</td>
<td>172</td>
<td>182</td>
<td>Total Patients per year</td>
<td>First 5 Kern monthly reports (for all immunization’s data)</td>
</tr>
<tr>
<td>Clinics held</td>
<td>173</td>
<td>120</td>
<td>164</td>
<td>Number of clinics per year</td>
<td></td>
</tr>
<tr>
<td>Children seen</td>
<td>2,137</td>
<td>2,300</td>
<td>1,852</td>
<td>Patients given vaccines per year</td>
<td></td>
</tr>
<tr>
<td>Drive-thru flu clinic</td>
<td>368</td>
<td>400</td>
<td>315</td>
<td>Total vaccines given</td>
<td>Immunization’s program report</td>
</tr>
<tr>
<td><strong>Chronic disease rate/frequency</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Heart Disease</td>
<td>5.4%</td>
<td>&lt;5%</td>
<td>Percentage of adults who experienced coronary heart disease</td>
<td>All stats in this section taken from healthykern.org</td>
<td></td>
</tr>
<tr>
<td>Stroke</td>
<td>2.7%</td>
<td>&lt;2%</td>
<td>Percentage of adults who experienced a stroke</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Diabetes</td>
<td>10%</td>
<td>&lt;9%</td>
<td>Percentage of adults diagnosed with diabetes</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Priority Need – Cancer –

Facebook Live Events

**Intervention:** In October, Adventist Health Bakersfield partnered with 23 ABC Bakersfield to produce a Facebook Live segment centered on breast cancer. The event was streamed to users’ digital devices and viewers were allowed to ask questions of two breast surgeons live.

- **Number of Community Members Served:** 4,200

---

Cirugia Sin Fronteras (CSF) Health Fair

**Intervention:** Partnered with the CSF Foundation to provide education at a health fair targeted to the uninsured, underinsured and Hispanic populations. Provided cancer education on a variety of topics, and an interactive cancer quiz.

- **Number of Community Members Served:** 1,000
Zero Prostate Cancer Run/Walk

Intervention: Adventist Health participated in the Zero Prostate Cancer Walk/Run, an inaugural event in Bakersfield in 2018. Staff provided onsite education regarding prostate cancer. Event speakers included an AIS Cancer Center oncologist, who talked about the importance of screening and early intervention.

- Number of Community Members Served: 250
VIPink Breast Cancer Event

**Intervention:** This event hosted at the AIS Cancer Center raised awareness around breast cancer and the importance of early screening and detection. Physicians and survivors were highlighted. Reduced-price 3D mammograms were offered.

- Number of Community Members Served: 800
Bakersfield Relay for Life

Intervention: In addition to providing funding for cancer research, Bakersfield Relay for Life offers an opportunity to raise awareness around the numerous forms of the disease. AIS Cancer Center physicians held a question and answer seminar during the event, and staff provided information about prevention from our assigned booth space.

Number of Community Members Served: 800
Campout Against Cancer

Intervention: This event honors survivors, remembers loved ones who have lost the battle, and raises money to improve the quality of life for local cancer patients and their families. AIS Cancer Center staff provided information and screening information at our assigned booth.

- Number of Community Members Served: 500

Partners

- Links for Life
- Cirugia Sin Fronteras
- Zero Prostate Cancer
- American Cancer Society
- Kern County Cancer Fund
## Objective

<table>
<thead>
<tr>
<th>Objective</th>
<th>2017 Baseline Measurement</th>
<th>2018 Performance Target</th>
<th>2018 Actual</th>
<th>Indicator</th>
<th>Data Source</th>
</tr>
</thead>
<tbody>
<tr>
<td>Screenings</td>
<td>2,000</td>
<td>2,857</td>
<td></td>
<td>Number of patients screened for cancer in 2018</td>
<td>The AIS Cancer Center tracking list</td>
</tr>
<tr>
<td>Cancer Prevention and Survivorship Programs</td>
<td>1,300</td>
<td>1,505 Patients</td>
<td></td>
<td>Number of attendees at classes, support groups</td>
<td>The AIS Cancer Center Outreach coordinator</td>
</tr>
<tr>
<td>Cancer rates</td>
<td>5.1</td>
<td>&lt;5%</td>
<td></td>
<td>Adults with cancer</td>
<td>Healthykern.org</td>
</tr>
</tbody>
</table>
Connecting Strategy and Community Health

As hospitals move toward population health management, community health interventions are a key element in achieving the overall goals of reducing the overall cost of health care, improving the health of the population, and improving access to affordable health services for the community both in outpatient and community settings. The key factor in improving quality and efficiency of the care hospitals provide is to include the larger community they serve as a part of their overall strategy.

Health systems must now step outside of the traditional roles of hospitals to begin to address the social, economic, and environmental conditions that contribute to poor health in the communities we serve. Bold leadership is required from our administrators, healthcare providers, and governing boards to meet the pressing health challenges we face as a nation. These challenges include a paradigm shift in how hospitals and health systems are positioning themselves and their strategies for success in a new payment environment. This will impact everyone in a community and will require shared responsibility among all stakeholders.

Population health is not just the overall health of a population but also includes the distribution of health. Overall health could be quite high if the majority of the population is relatively healthy—even though a minority of the population is much less healthy. Ideally such differences would be eliminated or at least substantially reduced.

Community health can serve as a strategic platform to improve the health outcomes of a defined group of people, concentrating on three correlated stages:

1) The distribution of specific health statuses and outcomes within a population;
2) Factors that cause the present outcomes distribution; and
3) Interventions that may modify the factors to improve health outcomes.

Improving population health requires effective initiatives to:

1) Increase the prevalence of evidence-based preventive health services and preventive health behaviors,
2) Improve care quality and patient safety and
3) Advance care coordination across the health care continuum.

Our mission as a health system is Living God’s love by inspiring health, wholeness and hope, we believe the best way to re-imagine our future business model with a major emphasis of community health is by working together with our community.
Community Benefit & Economic Value for Prior Year

Our community benefit work is rooted deep within our mission, with a recent recommitment of deep community engagement within each of our ministries.

We have also incorporated our community benefit work to be an extension of our care continuum. Our strategic investments in our community are focused on a more planned, proactive approach to community health. The basic issue of good stewardship is making optimal use of limited charitable funds. Defaulting to charity care in our emergency rooms for the most vulnerable is not consistent with our mission. An upstream and more proactive and strategic allocation of resources enables us to help low-income populations avoid preventable pain and suffering; in turn allowing the reallocation of funds to serve an increasing number of people experiencing health disparities.

Valuation of Community Benefit

<table>
<thead>
<tr>
<th>Adventist Health Bakersfield</th>
<th>Community Benefit</th>
<th>% of Total Hospital Expense</th>
</tr>
</thead>
<tbody>
<tr>
<td>Traditional charity care</td>
<td>$2,333,109</td>
<td>0.64%</td>
</tr>
<tr>
<td>Public programs - Medicaid</td>
<td>$5,255,182</td>
<td>1.45%</td>
</tr>
<tr>
<td>Medicare</td>
<td>$12,052,332</td>
<td>3.32%</td>
</tr>
<tr>
<td>Other means-tested government programs (Indigent care)</td>
<td>$0</td>
<td>0.00%</td>
</tr>
<tr>
<td>Community health improvement services</td>
<td>$615,920</td>
<td>0.17%</td>
</tr>
<tr>
<td>Health professions education</td>
<td>$3,340,663</td>
<td>0.92%</td>
</tr>
<tr>
<td>Non-billed and subsidized health services</td>
<td>$8,749,840</td>
<td>2.41%</td>
</tr>
<tr>
<td>Generalizable Research</td>
<td>$0</td>
<td>0.00%</td>
</tr>
<tr>
<td>Cash and in-kind contributions for community benefit</td>
<td>$263,305</td>
<td>0.07%</td>
</tr>
<tr>
<td>Community building activities</td>
<td>$177,764</td>
<td>0.05%</td>
</tr>
<tr>
<td>TOTAL COMMUNITY BENEFITS</td>
<td>$32,788,116</td>
<td>9.03%</td>
</tr>
</tbody>
</table>