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I. Introduction and Background

A. About Kaiser Permanente

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

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

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

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

B. About Kaiser Permanente Community Health

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

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

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

For many years, we’ve worked side-by-side with other organizations to address serious public health issues such as obesity, access to care, and violence. We’ve conducted Community Health Needs Assessments to better understand each community’s unique needs and resources. The CHNA process informs our community investments and helps us develop strategies aimed at making long-term, sustainable change—and it allows us to deepen the strong relationships we have with other organizations that are working to improve community health.

C. Purpose of the Report
Since 1996, Kaiser Foundation Hospitals (KFH) in Northern and Southern California have annually submitted to the Office of Statewide Health Planning and Development (OSHPD) a Consolidated Community Benefit Plan, commonly referred to as the SB 697 Report (for Senate Bill 697 which mandated its existence). This plan fulfills the 2018 year-end community benefit reporting regulations under California Health and Safety Code, Section 127340 et seq. The report provides detailed information and financial data on the Community Benefit programs, services, and activities provided by all KFH hospitals in California.
II. Overview and Description of Community Benefit Programs Provided

A. California Kaiser Foundation Hospitals Community Benefit Financial Contribution
In California, KFH owns and operates 36 hospitals: 21 community hospitals in Northern California and 15 in Southern California, all accredited by the Joint Commission on Accreditation of Healthcare Organizations (JCAHO). KFH hospitals are located in Anaheim, Antioch, Baldwin Park, Downey, Fontana, Fremont, Fresno, Irvine, Los Angeles, Manteca, Modesto, Moreno Valley, Oakland, Ontario, Panorama City, Redwood City, Richmond, Riverside, Roseville, Sacramento, San Diego, San Francisco, San Jose, San Leandro, San Rafael, Santa Clara, Santa Rosa, South Bay, South Sacramento, South San Francisco, Vacaville, Vallejo, Walnut Creek, West Los Angeles, and Woodland Hills.

In 2018, Kaiser Foundation Hospitals in Northern and Southern California Regions provided a total of $1,220,499,099 in Community Benefit for a diverse range of community projects, medical care services, research, and training for health and medical professionals. These programs and services are organized in alignment with SB697 regulations:

- Medical Care Services for Vulnerable Populations
- Other Benefits for Vulnerable Populations
- Benefits for the Broader Community
- Health, Research, Education and Training

A breakdown of financial contributions is provided in Tables A and B.

Note that ‘non-quantifiable benefits’ will be highlighted in the Year end Results section of KFH Community Benefit Plan, where applicable.
Table A – Total Community Benefits Provided in 2018 across California KFH

<table>
<thead>
<tr>
<th>Medical Care Services for Vulnerable Populations</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Medi-Cal shortfall¹</td>
<td>$740,302,826</td>
<td></td>
</tr>
<tr>
<td>Charity care: Medical Financial Assistance Program²</td>
<td>$252,514,999</td>
<td></td>
</tr>
<tr>
<td>Grants and donations for medical services³</td>
<td>$24,632,288</td>
<td></td>
</tr>
<tr>
<td><strong>Subtotal</strong></td>
<td><strong>$1,017,450,114</strong></td>
<td></td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Other Benefits for Vulnerable Populations</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Watts Counseling and Learning Center⁴</td>
<td>$3,171,145</td>
<td></td>
</tr>
<tr>
<td>Educational Outreach Program</td>
<td>$977,755</td>
<td></td>
</tr>
<tr>
<td>Summer Youth and INROADS programs⁵</td>
<td>$3,423,227</td>
<td></td>
</tr>
<tr>
<td>Grants and donations for community-based programs⁶</td>
<td>$30,937,535</td>
<td></td>
</tr>
<tr>
<td>Community Benefit administration and operations⁷</td>
<td>$12,672,094</td>
<td></td>
</tr>
<tr>
<td><strong>Subtotal</strong></td>
<td><strong>$51,181,755</strong></td>
<td></td>
</tr>
</tbody>
</table>

| Benefits for the Broader Community⁸           |                     |                  |
| Community health education and promotion programs | $1,028,815          |                 |
| Kaiser Permanente Educational Theatre        | $5,732,278          |                 |
| Community Giving Campaign administrative expenses | $656,149           |                 |
| Grants and donations for the broader community⁹ | $3,975,643         |                 |
| National board of directors fund             | $742,683            |                 |
| **Subtotal**                                  | **$12,135,568**     |                 |

| Health Research, Education, and Training      |                     |                  |
| Graduate Medical Education                    | $83,120,684          |                 |
| Non-MD provider education and training programs¹⁰ | $24,019,233       |                 |
| Grants and donations for the education of health care professionals¹¹ | $1,706,941         |                 |
| Health research                               | $30,884,804          |                 |
| **Subtotal**                                  | **$139,731,662**     |                 |

**TOTAL COMMUNITY BENEFITS PROVIDED IN 2018**  

**$1,220,499,099**
### TABLE A ENDNOTES

1. Amount includes hospital-specific, unreimbursed expenditures for Medi-Cal Managed Care members and Medi-Cal Fee-for-Service beneficiaries on a cost basis.

2. Amount includes unreimbursed care provided at this facility to patients who qualify for the Medical Financial Assistance and Indigent Care programs on a cost basis.

3. Figures reported in this section for grants and donations for medical services consist of charitable contributions to community clinics and other safety-net providers; community health partnerships and collaboratives; and special Request for Proposals to support specific health issues such as childhood obesity, asthma, etc. The amount reported reflects hospital-specific, unreimbursed expenditures. When hospital-specific expenditures were not available, dollars were allocated to each hospital based on the percentage of Health Plan members.

4. Watts Counseling and Learning Center’s service expenses are divided among three hospitals: KFH-Downey, KFH-South Bay, and KFH-West Los Angeles.

5. Figures reported in this section are hospital-specific, unreimbursed expenditures. When hospital-specific expenditures were not available, dollars were allocated to each hospital based on the percentage of Health Plan members, or a related denominator such as the number of Summer Youth students hired.

6. Figures reported in this section for grants and donations for community-based programs consist of charitable contributions made to external nonprofit organizations for a variety of programs and services that address the nonmedical needs of vulnerable populations. The amount reflects hospital-specific, unreimbursed expenditures. When hospital-specific expenditures were not available, dollars were allocated to each hospital based on the percentage of Health Plan members.

7. The amount reflects the costs related to providing a dedicated community benefit department and related operational expenses.

8. Figures reported in this section are hospital-specific, unreimbursed expenditures. When hospital-specific expenditures were not available, dollars were allocated to each hospital based on the percentage of Health Plan members, or several related denominators such as the number of Educational Theatre performances or health education programs.

9. Figures reported in this section for grants and donations for the broader community consist of charitable contributions made to external nonprofit organizations to educate health care consumers in managing their own health and making informed decisions when obtaining services; and to develop, produce, or communicate health care–related public policy information for a variety of programs and services aimed at general well-being of the community. The amount reflects hospital-specific, unreimbursed expenditures. When hospital-specific expenditures were not available, dollars were allocated to each hospital based on the percentage of Health Plan members.

10. Amount reflects the net expenditures for health professional education and training programs.

11. Figures reported in this section for grants and donations for the education of health care professionals consist of charitable contributions made to external nonprofit organizations, colleges, and universities to support the training and education of students seeking to become health care professionals. The amount reflects hospital-specific, unreimbursed expenditures. When hospital-specific expenditures were not available, dollars were allocated to each hospital based on the percentage of Health Plan members.
Table B – Community Benefits Provided in 2018 by KFH Service Area

<table>
<thead>
<tr>
<th>NORTHERN CALIFORNIA HOSPITALS</th>
<th>SOUTHERN CALIFORNIA HOSPITALS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Antioch</td>
<td>Anaheim</td>
</tr>
<tr>
<td>Fremont</td>
<td>Baldwin Park</td>
</tr>
<tr>
<td>Fresno</td>
<td>Downey</td>
</tr>
<tr>
<td>Manteca</td>
<td>Fontana</td>
</tr>
<tr>
<td>Modesto</td>
<td>Irvine</td>
</tr>
<tr>
<td>Oakland</td>
<td>Los Angeles</td>
</tr>
<tr>
<td>Redwood City</td>
<td>Moreno Valley</td>
</tr>
<tr>
<td>Richmond</td>
<td>Ontario</td>
</tr>
<tr>
<td>Roseville</td>
<td>Panorama City</td>
</tr>
<tr>
<td>Sacramento</td>
<td>Riverside</td>
</tr>
<tr>
<td>San Francisco</td>
<td>San Diego (2 Hospitals)</td>
</tr>
<tr>
<td>San Jose</td>
<td>South Bay</td>
</tr>
<tr>
<td>San Leandro</td>
<td>West Los Angeles</td>
</tr>
<tr>
<td>San Rafael</td>
<td>Woodland Hills</td>
</tr>
<tr>
<td>Santa Clara</td>
<td></td>
</tr>
<tr>
<td>Santa Rosa</td>
<td></td>
</tr>
<tr>
<td>South Sacramento</td>
<td></td>
</tr>
<tr>
<td>South San Francisco</td>
<td></td>
</tr>
<tr>
<td>Vacaville</td>
<td></td>
</tr>
<tr>
<td>Vallejo</td>
<td></td>
</tr>
<tr>
<td>Walnut Creek</td>
<td></td>
</tr>
<tr>
<td><strong>Northern California Total</strong></td>
<td><strong>$735,665,834</strong></td>
</tr>
</tbody>
</table>
B. Medical Care Services for Vulnerable Populations
For the purpose of this plan, KFH has quantified the unreimbursed costs of medical services provided in its hospitals to the underinsured and uninsured through government programs funded at the federal and state levels as well as Kaiser Permanente's own charity care programs. Government-funded programs include Medi-Cal Managed Care, Medi-Cal Fee-For-Service, and Healthy Families Program. KFH provides charity care through its Charitable Health Coverage and Medical Financial Assistance programs. Services provided to prepaid Medicare, Major Risk Medical Insurance Program (MRMIP), and Access for Infants and Mothers (AIM) beneficiaries are not reported.

C. Other Benefits for Vulnerable Populations

Watts Counseling and Learning Center (SCAL)
Since 1967, the Watts Counseling and Learning Center (WCLC) has been a valuable community resource for low-income, inner-city families in South Central Los Angeles. WCLC provides mental health and counseling services, educational assistance to children with learning disabilities, and a state-licensed and nationally accredited preschool program. Kaiser Permanente Health Plan membership is not required to receive these services and all services are offered in both English and Spanish. This program primarily serves the KFH-Downey, KFH-South Bay and KFH-West LA communities.

Educational Outreach Program (SCAL)
Since 1992, Educational Outreach Program (EOP) has been empowering children and their families through several year-round educational, counseling, and social programs. EOP helps individuals develop crucial life-skills to pursue higher education, live a healthier lifestyle through physical activity and proper nutrition, overcome mental obstacles by participating in counseling, and instill confidence to advocate for the community. EOP primarily serves the KFH-Baldwin Park community.

Youth Employment Programs (NCAL and SCAL)
Youth workforce programs focus on providing underserved diverse students with meaningful employment experiences in the health care field. Educational sessions and motivational workshops introduce them to the possibility of pursuing a career in health care while enhancing job skills and work performance. These programs serve as a pipeline for the organization and community-at-large, enhancing the future diversity of the health care workforce.

D. Benefits for the Broader Community

Community Health Education and Health Promotion Programs (NCAL and SCAL)
Health Education provides evidence-based clinically effective programs, printed materials, and training sessions to empower participants to build healthier lifestyles. This program incorporates tested models of behavior change, individual/group engagement and motivational interviewing as a language to elicit behavior change. Many of the programs and resources are offered in partnership with community groups, community clinics, libraries, nonprofit organizations, cable television channels, and schools.
Kaiser Permanente Educational Theatre (NCAL and SCAL)

Since 1986, KPET has been using live theatre, music, comedy, and drama to inspire children, teens, and adults to make healthier choices and better decisions about their well-being. Its award-winning programs are as entertaining as they are educational and were developed with the advice of teachers, parents, students, health educators, medical professionals, and professional theatre artists. Professional actors who are also trained health educators deliver all performances and workshops. KPET programs share health information and develop individual and community knowledge about leading healthier lives. KPET is provided free of charge to schools and the general community. In addition to performances and classroom workshops, KPET supplies schools and organizations with supplementary educational materials - including workbooks, parent and teacher guides, and student wallet cards - to reinforce the messages presented in the programs.

E. Health Research, Education, and Training Programs

Graduate Medical Education (GME)

The mission of Kaiser Permanente GME is to recruit and prepare the physician workforce of the 21st century by optimizing the unique clinical and educational opportunities within our integrated model of care, which is now considered the gold standard for improving the entire U.S. health care system. Residents trained in our healthcare settings utilize technology to provide evidence-based, patient-centered care in a team-based model, employ population management strategies, and cultivate their skills in cultural sensitivity, effective communication and leadership. As part of their training, residents participate in rotations at school-based health centers, community clinics, and homeless shelters.

Non-MD Provider Education and Training Programs

Kaiser Permanente provides education, training, residencies, internships, and/or scholarships and stipends for non-physician health care professionals in nursing, pharmacy, physical therapy, psychology, and radiology. This includes Northern California Region’s Kaiser Permanente School of Allied Health Sciences, which offers 18-month training programs in sonography, nuclear medicine, and radiation therapy and Southern California Region’s Hippocrates Circle Program, which was designed to provide youth from underrepresented communities and diverse backgrounds with an awareness of career opportunities as a physician.

Health Research

Kaiser Permanente conducts, publishes, and disseminates high-quality epidemiological and health services research to improve health and medical care throughout our communities. Our Division of Research, Department of Research & Evaluation (NCAL), Department of Research and Evaluation (SCAL), Kaiser Foundation Research Institute, and Nursing Research Programs deploy a wide range of research methods, including clinical research, health care services research, and epidemiological and translational studies on health care that are generalizable and broadly shared, helping build a knowledge base that improves health and health care services.
III. KFH-Riverside Community Served

A. Kaiser Permanente’s Definition of Community Served
Kaiser Permanente defines the community served by a hospital as those individuals residing within its hospital service area. A hospital service area includes all residents in a defined geographic area surrounding the hospital and does not exclude low-income or underserved populations.

B. Map and Description of Community Served
The KFH-Riverside service area includes Corona, Eastvale, Hemet, Jurupa Valley, Lake Elsinore, Menifee, Murrieta, Norco, Quail Valley, Riverside, Romoland, Temecula, Wildomar, and Winchester.
KFH-Riverside Service Area Map
C. Demographic Profile of the Community Served

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

<table>
<thead>
<tr>
<th>Race/Ethnicity</th>
<th>Socioeconomic</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total Population 1,401,966</td>
<td>Living in Poverty (&lt;100% Federal Poverty Level) 14.43%</td>
</tr>
<tr>
<td>Asian 7.30%</td>
<td>Children in Poverty 18.91%</td>
</tr>
<tr>
<td>Black 5.17%</td>
<td>Unemployment 4.3%</td>
</tr>
<tr>
<td>Hispanic/Latino 43.60%</td>
<td>Uninsured Population 13.38%</td>
</tr>
<tr>
<td>Native American/Alaska Native 0.39%</td>
<td>Adults with No High School Diploma 17.50%</td>
</tr>
<tr>
<td>Pacific Islander/Native Hawaiian 0.28%</td>
<td></td>
</tr>
<tr>
<td>Some Other Race 0.18%</td>
<td></td>
</tr>
<tr>
<td>Multiple Races 3.10%</td>
<td></td>
</tr>
<tr>
<td>White 39.98%</td>
<td></td>
</tr>
</tbody>
</table>
IV. Description of Community Health Needs Addressed by KFH-Riverside

The following are the health needs that KFH-Riverside is addressing during the 2017-2019 Implementation Strategy Period. For information about the process and criteria used to select these health needs and the health needs that were not selected (and the rationale), please review the 2019 CHNA Report and 2017-2019 Implementation Strategy Report at: http://www.kp.org/chna.

A. Access to Care
The ability to access medical care is a wide-reaching construct that includes aspects such as the presence of health insurance, the affordability of seeking treatment, the availability of health care providers who can provide treatment, the ability to get to places where treatment is provided, and other issues around accessibility. Many people in the KFH-Riverside service area still lack health insurance (18% are uninsured), and those that have it are often unclear on how to navigate the health care system and how to use it. Even those with health insurance who know how to get care can struggle to receive the care they need due to a shortage of providers; the local ratio of primary care providers to patient population is nearly half the state average (40.2 providers per 100,000 population, versus the state average of 77.2 per 100,000). This health need was selected because of its high priority ranking and KFH-Riverside’s wealth of existing resources and connections to address this issue.

B. Mental and Behavioral Health
Mental health is the state of well-being in which every individual realizes his or her own potential, can cope with normal stresses of life, and is able to contribute to his or her community. Mental health includes not only the absence of negative mental health states (e.g., anxiety, depression, etc.) but also the presence of positive mental health states (e.g., satisfaction, self-worth, etc.) Suicide is the 10th leading cause of death in America. Suicide mortality rates in the Riverside service area are on par with national rates (nearly 10 per 100,000 population). Mental health issues are closely related to other issues such as substance use and abuse and smoking. There is a serious lack of mental health care providers; there are about 68.4 providers per 100,000 people in the KFH-Riverside service area (compared to the state average of 157 per 100,000). KFH-Riverside has a history of collaboration between existing resources and connections to address this need.

C. Obesity/HEAL/Diabetes
Excess weight is a major problem in the U.S. Being overweight, or, at a more extreme level, obese, can cause many health issues and exacerbate many existing conditions. Obesity is caused, in part, by an imbalance of energy output to energy intake; that is, eating too much or eating unhealthy food, while not obtaining enough exercise. Diabetes is the 7th leading cause of death in America. 95% of people with diabetes have type 2 diabetes, which is highly associated with obesity/overweight. Over 60% of local adults are overweight or obese. Obesity is a risk factor for many of the other health issues that were identified (e.g., cardiovascular disease, cancer, diabetes, etc.), and thus, is a good place to start to reduce those issues as well. KFH-Riverside will strive to
encourage healthy eating and active living in order to reduce the number of people who are overweight or obese or are at risk of having diabetes. KFH-Riverside will continue to collaborate with existing resources and connections to address this need.
V. 2018 Year-End Results for KFH-Riverside

A. 2018 Community Benefit Financial Resources Provided by KFH-Riverside

Total Community Benefit expenditures are reported as follows:

- Quantifiable Community Benefit such as facility use and in-kind donations are included if funded by KFH, provided in a KFH facility, or are part of a KFH Community Benefit Plan.
- Medical care services for vulnerable populations include unreimbursed inpatient costs for participation in Kaiser Permanente-subsidized and government-sponsored health care insurance programs.
- The unreimbursed portion of medical, nursing, and other health care professional education and training costs are included.

Resource allocations are reported, as follows:

- Financial expenditures are reported in exact amounts, if available, by hospital service area.
- If exact financial expenditure amounts were not available by hospital service area, then regional expenses were allocated proportionally on the basis of KFHP membership or other quantifiable data, such as the number of Kaiser Permanente Educational Theatre performances presented or Summer Youth students employed within each hospital area’s community at large.
### Table C: KFH-Riverside 2018 Year-End Community Benefit Expenditures

<table>
<thead>
<tr>
<th>Category</th>
<th>2018 Totals</th>
</tr>
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<tbody>
<tr>
<td><strong>Medical Care Services for Vulnerable Populations</strong></td>
<td></td>
</tr>
<tr>
<td>Medi-Cal shortfall(^1)</td>
<td>$20,096,563</td>
</tr>
<tr>
<td>Charity care: Medical Financial Assistance Program(^2)</td>
<td>$7,847,957</td>
</tr>
<tr>
<td>Grants and donations for medical services(^3)</td>
<td>$131,559</td>
</tr>
<tr>
<td><strong>Subtotal</strong></td>
<td><strong>$28,076,079</strong></td>
</tr>
<tr>
<td><strong>Other Benefits for Vulnerable Populations</strong></td>
<td></td>
</tr>
<tr>
<td>Summer Youth and INROADS programs(^5)</td>
<td>$57,696</td>
</tr>
<tr>
<td>Grants and donations for community-based programs(^6)</td>
<td>$476,516</td>
</tr>
<tr>
<td>Community Benefit administration and operations(^7)</td>
<td>$561,304</td>
</tr>
<tr>
<td><strong>Subtotal</strong></td>
<td><strong>$1,095,516</strong></td>
</tr>
<tr>
<td><strong>Benefits for the Broader Community(^8)</strong></td>
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</tr>
<tr>
<td>Community health education and promotion programs</td>
<td>$80,963</td>
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<tr>
<td>Kaiser Permanente Educational Theatre</td>
<td>$441,419</td>
</tr>
<tr>
<td>Community Giving Campaign administrative expenses</td>
<td>$13,301</td>
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<tr>
<td>Grants and donations for the broader community(^9)</td>
<td>$102,762</td>
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<tr>
<td>National board of directors fund</td>
<td>$24,028</td>
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<tr>
<td><strong>Subtotal</strong></td>
<td><strong>$662,473</strong></td>
</tr>
<tr>
<td><strong>Health Research, Education, and Training</strong></td>
<td></td>
</tr>
<tr>
<td>Graduate Medical Education</td>
<td>$3,558,854</td>
</tr>
<tr>
<td>Non-MD provider education and training programs(^10)</td>
<td>$561,988</td>
</tr>
<tr>
<td>Grants and donations for health research, education, and training(^11)</td>
<td>$58,980</td>
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<tr>
<td>Health research</td>
<td>$687,714</td>
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<tr>
<td><strong>Subtotal</strong></td>
<td><strong>$4,867,536</strong></td>
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<tr>
<td><strong>Total Community Benefits Provided</strong></td>
<td><strong>$34,701,604</strong></td>
</tr>
</tbody>
</table>
**Table C Endnotes**

1. Amount includes hospital-specific, unreimbursed expenditures for Medi-Cal Managed Care members and Medi-Cal Fee-for-Service beneficiaries on a cost basis.

2. Amount includes unreimbursed care provided at this facility to patients who qualify for the Medical Financial Assistance and Indigent Care programs on a cost basis.

3. Figures reported in this section for grants and donations for medical services consist of charitable contributions to community clinics and other safety-net providers; community health partnerships and collaboratives; and special Request for Proposals to support specific health issues such as childhood obesity, asthma, etc. The amount reported reflects hospital-specific, unreimbursed expenditures. When hospital-specific expenditures were not available, dollars were allocated to each hospital based on the percentage of Health Plan members.

4. Figures reported in this section for grants and donations for community-based programs consist of charitable contributions made to external nonprofit organizations for a variety of programs and services that address the nonmedical needs of vulnerable populations. The amount reflects hospital-specific, unreimbursed expenditures. When hospital-specific expenditures were not available, dollars were allocated to each hospital based on the percentage of Health Plan members.

5. The amount reflects the costs related to providing a dedicated community benefit department and related operational expenses.

6. Figures reported in this section are hospital-specific, unreimbursed expenditures. When hospital-specific expenditures were not available, dollars were allocated to each hospital based on the percentage of Health Plan members, or a related denominator such as the number of Summer Youth students hired.

7. Figures reported in this section are hospital-specific, unreimbursed expenditures. When hospital-specific expenditures were not available, dollars were allocated to each hospital based on the percentage of Health Plan members, or several related denominators such as the number of Educational Theatre performances or health education programs.

8. Figures reported in this section for grants and donations for community-based programs consist of charitable contributions made to external nonprofit organizations to educate health care consumers in managing their own health and making informed decisions when obtaining services; and to develop, produce, or communicate health care–related public policy information for a variety of programs and services aimed at general well-being of the community. The amount reflects hospital-specific, unreimbursed expenditures. When hospital-specific expenditures were not available, dollars were allocated to each hospital based on the percentage of Health Plan members.

9. Amount reflects the net expenditures for health professional education and training programs.

10. Figures reported in this section for grants and donations for the education of health care professionals consist of charitable contributions made to external nonprofit organizations, colleges, and universities to support the training and education of students seeking to become health care professionals. The amount reflects hospital-specific, unreimbursed expenditures. When hospital-specific expenditures were not available, dollars were allocated to each hospital based on the percentage of Health Plan members.
B. 2018 Examples of KFH-Riverside Activities Addressing Selected Health Needs

All Kaiser Foundation Hospitals (KFH) carefully consider the evidence-base when determining which goals, strategies, and related activities would be most effective in addressing priority health needs. It’s anticipated that successful implementation of key activities (programs, grants, collaboration, and/or in-kind assets), tied to key goals and strategies, can contribute toward improving the priority health needs in the community. For information on the goals and strategies that were selected for each health need, please refer to the KFH-Riverside Implementation Strategy Report, posted on the internet at http://www.kp.org/chna.

Mechanisms for monitoring progress are tailored to each activity and may include the collection and documentation of tracking measures such as number of grants made, number of dollars spent, number of people reached/served, and number and role of KFH volunteers. KFH also conduct evaluation of larger grant initiatives to understand both progress and outcomes. In addition to internal monitoring and evaluation, KFH requires grantees to propose, track, and report outcomes of the projects for which they have received funding.

The below tables provide highlights for a select number of programs, grants, collaboration and/or assets that aims to address the identified health needs for KFH-Riverside. The examples provided below are illustrations and not an exhaustive list. Where appropriate, summative information is provided for programs that have been implemented in multiple years.

The total number and amount of paid grants to address a health need include those that are awarded to organizations providing programs serving the KFH-Riverside service area and may also serve other KFH service areas. Grant examples denoted with (~) provide services and/or programs in multiple Kaiser Foundation Hospital service areas. Grant examples denoted with (*) were distributed from the Kaiser Permanente Southern California Charitable Contribution Fund, a Donor Advised Fund (DAF) administered by the California Community Foundation; accordingly, grant amounts were not included in the community benefit totals for 2018 (Tables B and C). For individual grant examples spanning two years (2017-2018), the cited payment amount represents the total dollars paid over the two-year time period.

In addition to the below examples, which address specific health needs, Kaiser Permanente, Southern California implements additional community programs that address multiple health needs:

- Educational Theatre brings free, live theatrical programs to schools and communities. The programs are designed to inspire children, teens and adults to make healthier choices and informed decisions about their health by focusing on topics such as health reading and literacy, conflict management, healthy eating and active living, bullying, and sexually transmitted infections. All performances are delivered by professional actors who are also trained health educators. In 2018, Educational Theater provided 143 events in 35 schools in the KFH-Riverside communities, reaching 15,991 youth and 655 adults.
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<th>Need</th>
<th>Summary of impact</th>
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<tr>
<td><strong>Access to Care</strong></td>
<td>During 2017 and 2018, Kaiser Permanente paid 16 grants, totaling $1,262,667 addressing the priority health need in the KFH-Riverside service area. In addition, a portion of money managed by a donor advised fund at California Community Foundation was used to pay 6 grants, totaling $941,667 that address this need.</td>
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<tr>
<th>Top 3-5 Examples of most impactful efforts</th>
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<tr>
<td><strong>Providing Affordable Healthcare</strong></td>
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<td>In 2018, KFH-Riverside provided $20,096,563 in medical care services to 34,389 Medi-Cal recipients (both health plan members and non-members) and $7,847,957 in medical financial assistance (MFA) for 8,138 beneficiaries.</td>
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| **Building Primary Care Capacity** |
| The California Primary Care Association (CPCA) provides education, training, and advocacy to their member community health centers to best serve their low-income, underserved, and diverse patients. In 2018, Kaiser Permanente paid $126,666 to CPCA to: |
| - Hold statewide convenings and conferences and topic-specific peer networks to support over 1,200 California community health centers. |
| - Provide 90 in-person and web-based trainings to over 4,400 attendees and 2,890 individual instances of technical assistance. |

<p>| <strong>Preserving and Expanding California Coverage Gains</strong> |
| Insure the Uninsured Project (ITUP) works to preserve and expand access to health care and coverage in California and to reduce access barriers for uninsured and underinsured populations. Over two years (2017-2018), Kaiser Permanente paid $150,000 to ITUP to: |
| - Conduct and disseminate health policy research. |
| - Convene 13 regional statewide work groups to provide attendees with real-time updates on state and federal health care policy issues, emerging issues, and local collaboration opportunities. |
| - Provide technical assistance to safety net providers and other stakeholders navigating health reform challenges. |
| - Serve as a bridge between health policy and the health care sector to reach 19 million Californians. |</p>
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| **Integrating Health Care**   | Riverside Free Clinic provides primary care, oral health and mental health for     | **Integrating Health Care**<br>• Coordinate medical, dental, and mental health services to 300 patients.  
|                               | the uninsured, working poor, and homeless through aspiring physicians, dentists,    | • Identify social service needs and provide resources.                                                      
|                               | and mental health professionals. In 2018, Kaiser Permanente paid $10,000 to       | • Provide opportunities for student interns to develop patient care skills, health education teaching and gain practical clinical experiences. |
|                               | Riverside Free Clinic to:                                                          |                                                                                                           |
|                               | • Coordinate medical, dental, and mental health services to 300 patients.          |                                                                                                           |
|                               | • Identify social service needs and provide resources.                             |                                                                                                           |
|                               | • Provide opportunities for student interns to develop patient care skills, health|                                                                                                           |
|                               | education teaching and gain practical clinical experiences.                        |                                                                                                           |
| **Increasing Access to Care via KP Asset** | Our core functions across KP are using their assets to drive Access to Care in | **Increasing Access to Care via KP Asset**<br>• Expertise: Eighteen Family Medicine Residents at KFH-Riverside provided clinical support at two local community clinics. They also supported our Thriving Schools by presenting at 11 school educational events on healthy eating, active living and diabetes prevention and career day events. |
|                               | the KFH-Riverside service area. For example:                                      |                                                                                                           |
|                               | • Expertise: Eighteen Family Medicine Residents at KFH-Riverside provided clinical |                                                                                                           |
|                               | support at two local community clinics. They also supported our Thriving Schools by |                                                                                                           |
|                               | presenting at 11 school educational events on healthy eating, active living and    |                                                                                                           |
|                               | diabetes prevention and career day events.                                        |                                                                                                           |
| **Mental and Behavioral Health** | During 2017 and 2018, Kaiser Permanente paid 24 grants, totaling $1,064,541       | **Strengthening Mental Health Policies and Practices in Schools**<br>Children Now educates policymakers, school district leaders, and other key stakeholders about best practices and policy solutions to address suspension and expulsion policies that disproportionately impact students of color, improve school climate, and increase students’ access to mental health services. Over two years (2017-2018), Kaiser Permanente paid $150,000 to Children Now to:  
<p>|                               | addressing the priority health need in the KFH-Riverside service area.            | • Inform over 200 key legislators and stakeholders.                                                      |
|                               |                                                                                   | • Support the California Department of Education in the development of the Whole Child Resource Map.     |
|                               |                                                                                   | • Lead committees for both the State School Attendance Review Board and the Superintendent’s Mental Health Policy Workgroup. |</p>
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|      |                   | **Supporting Social and Emotional Wellness in Schools**  
Kaiser Permanente Thriving Schools initiative supports and strengthen strategies that promote the social and emotional wellness among students, teachers, and staff. Over two years (2017-2018), Kaiser Permanente paid Jurupa Unified School District $90,000 to:  
- Train staff at Ina Arbuckle Elementary school on the Strengthening Families framework and the 5 protective factors, as well as the centralized referral process and supports available to students, families, and school communities.  
- Train staff at Jurupa Valley High on trauma informed care.  
- Place 21 master level interns at the school district to provide social emotional wellness support. This resulted in over 500 mental health referrals, a 100% increase from the previous school year. |  |
|      |                   | **Expanding Behavioral Health Consultations**  
North County Health Services provides behavioral health consultation along with medical and dental care services to underserved individuals at the Perris Health Center. In 2018, Kaiser Permanente paid $25,000 to North County Health Services to:  
- Provide behavioral health services to 700 patients.  
- Increase access to behavioral health services through a same-day direct warm hand off referral from a primary care provider.  
- Improve operational process to screen and identify behavioral health conditions, including substance abuse. |  |
|      |                   | **Advancing Trauma Informed Care Delivery**  
KFH-Riverside’s Community Health Manager has participated in the Riverside Resilience Initiative, a collaborative which began in 2016. The collaborative has hosted educational training webinars, town hall meetings, and learning workshops. Community leaders formed two workgroups to work on:  
- Strategies around innovative approaches to collecting ACEs data  
- Activate policy and practice change to advance trauma informed care delivery |  |
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| **Obesity/ Diabetes** | During 2017 and 2018, Kaiser Permanente paid 14 grants, totaling $884,000 addressing the priority health need in the KFH-Riverside service area. In addition, a portion of money managed by a donor advised fund at California Community Foundation was used to pay 18 grants, totaling $2,981,380 that address this need. | **Supporting Mental and Behavioral Health via KP Assets**  
Our core functions across KP are using their assets to drive Mental & Behavioral Health. For example:  
- Facilities: KFH-Riverside conference room space was made available to the National Alliance for Mental Illness (NAMI) who provide the 10-week series Family to Family and Peer to Peer sessions at no cost to the community. During 2017-18, a total of 623 individuals participated in the weekly series. |
| **Advocating for Maternal, Infant, and Child Health** | The California WIC Association (CWA) supports efforts to increase local WIC agencies' capacity, increase state and federal decision makers' understanding of WIC services, and increase the capacity of community health centers to build a breastfeeding continuum of care in low-income communities. Over two years (2017-2018), Kaiser Permanente paid $100,000 to CWA to:  
- Pilot two video conferencing projects increasing awareness and consideration within the CA WIC community.  
- Collaborate with health centers to share WIC staff for nutrition and breastfeeding counseling (Watts Health Care and clinics in San Diego).  
- Work to strengthen ties with CPCA and present at CPCA’s annual conference.  
- Visit all CA legislators with 44 appointments and drop-in visits.  
- Provide extensive information to legislators on nutrition and breastfeeding counseling, food benefits, local economic impacts to grocers, health outcomes, access to Farmers markets, and updates on immigration threats.  
- Participate in Capitol WIC Education Day in Sacramento with 50 attendees from 30 WIC agencies from all over the state. |
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| **Supporting Healthy Eating and Active Living** | The Riverside Community Health Foundation HEAL Zone site focuses on school and community strategies that address healthy eating and physical activity opportunities through policy, environmental, and system (PSE) changes. In 2018, Kaiser Permanente paid $333,333 to the Riverside Community Health Foundation to:  
- Use HEAL Rx (in EMR) and provide or refer patients to additional support and education. They also give patients food vouchers that can be redeemed at local markets/stands.  
- Conduct four 8-week diabetes management workshops at one clinic.  
- Train 13 people from four churches on Body & Soul Framework.  
- Assist resident efforts to pave an alleyway, add safety features at one intersection, paint a mural at Eastside Health Center, and complete the Eastside Art Corridor Safe Routes Survey.                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
| **Fighting Food Insecurity**               | California Association of Food Banks’ (CAFB) Farm to Family program's goal is to improve health food access by providing fresh produce to food banks, CalFresh outreach and enrollment, advocacy to support anti-hunger policies, and technical assistance to members. In 2018, Kaiser Permanente paid $95,000 to CAFB to:  
- Distribute 250,000 pounds of subsidized fresh fruits and vegetables to 11 member food banks.  
- Maintain the State Emergency Food Assistance Program to provide food and funding of emergency food to food banks.                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
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### Increasing Access to Healthy Local Foods
KFH-Riverside’s Community Health Manager serves on the Riverside Food Systems Alliance Advisory Committee. Accomplishments in 2017-2018 includes:
- NextGen Farmer training program
- Riverside Food Rescue and Waste Ambassador Program
- Partnership with the Farmworker Institute of Education and Leadership Development (FIELD) to expand their charter school in the Eastside Riverside neighborhood

These projects aim to create a food system that makes healthy local foods available for all, especially the most under-resourced in our region.

### Preventing Obesity and Diabetes
Our core functions across KP are using their assets to drive the prevention of Obesity and Diabetes. For example:
- Facilities: The partnership with 100 Mile Club and KHF-Riverside continues to reach local students and families using the Thrive Path to walk or run. The monthly meet-ups reach over 100 participants from 7 area school districts and private schools. In 2017-2018 an estimated 2,300 walkers have benefited from this safe environment to be physically active.
- Facilities: The community garden club at Murrieta Medical Office Building has been a year-round project for staff and community members. In collaboration with UC Cooperative Extension’s Master Gardener Program, volunteer sessions are educational including tips for planting, harvesting, and soil management including healthy eating demonstrations.

### Practicing Food Recovery and Redistribution
Kaiser Permanente envisions food services not only as the source of nutritious meals for their patients, staff and guests, but as a resource for local communities. Over two years (2017-2018), Kaiser Permanente partnered with Food Finders to recover 20,214 lbs of food and distribute to organizations serving individuals in the KFH-Riverside region who face food insecurity.