2023-2025

IMPLEMENTATION STRATEGY

FOR THE 2022 COMMUNITY HEALTH NEEDS ASSESSMENT | HOSPITAL EDITION

SAN ANTONIO REGIONAL HOSPITAL

SAN ANTONIO
REGIONAL HOSPITAL

Dear Community Member:

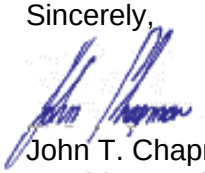
Welcome to San Antonio Regional Hospital's 2023-2025 Implementation Strategy for the 2022 Community Health Needs Assessment (CHNA). The comprehensive assessment conducted every three years guides our efforts to increase our community's health and wellness by providing various health programs and services. For more than a century, our efforts to improve the health outcomes of our community have been at the core of San Antonio Regional Hospital's mission. This triennial CHNA helps us further evaluate and prioritize the community's needs.

Our previous implementation strategies included health education seminars and screenings for breast, colon, and prostate cancer; health counseling and screening at community centers; preventative services such as flu vaccines, diabetes education, and obesity management; and direct medical care for low-income, uninsured and under-insured residents. Guided by the 2022 CHNA, today, our hospital's planning efforts resulted in a strategy designed to address some of the most pressing health needs in the communities we serve such cardiovascular health, maternal, infant and child health and mental health. In addition, we will continue to demonstrate our commitment to improving health in surrounding communities and populations by providing organized and sustainable programs and services such as the ones mentioned above.

Like many industries, healthcare is continually evolving. There is ongoing innovation to create new technologies and methods to treat illness and injuries. But over the last several years, there has been a growing movement toward population health management. Population health goes beyond measuring the health of a population, and healthcare goes beyond treating illness and injury. San Antonio Regional Hospital is committed to engaging with the community to improve population health by increasing health awareness and providing education, as well as resources to prevent chronic illnesses.

San Antonio Regional Hospital's mission is to "improve the health and well-being of the people we serve." Our vision is to "be a leader in creating healthy futures through excellence and compassion." We believe the best way to achieve our vision of the future is by working collaboratively together with our community and key stakeholders. We hope you will share our belief in the power of community engagement.

Sincerely,



John T. Chapman
President and Chief Executive Officer

Table of Contents

Contents

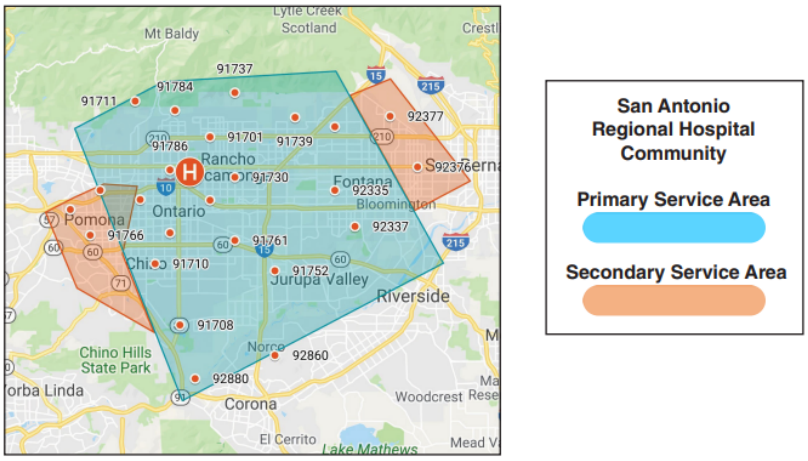
INTRODUCTION

San Antonio Regional Hospital (SARH) in Upland, California was founded in 1907 by Dr. William Howard Craig with only 18 beds and 5 physicians to meet the healthcare needs of local residents. Today, SARH is a 363-bed nonprofit, acute care, regional medical facility with satellite locations across the Inland Empire. The award-winning hospital offers a comprehensive range of general medical and surgical services, along with the latest technological advances in cardiac care, cancer care, orthopedics, neurosciences, women's health, maternity and neonatal care, and emergency services. SARH is continually growing with its community. Given its broad geographic reach, and the depth and breadth of its services and programs, supported by the latest medical science and technology, SARH is a hospital of the future, offering state-of-the-art healthcare services in a healing environment focused on the patient, family and community. SARH's unwavering mission - to improve the health and well-being of the people it serves and vision of being a leader in creating healthy futures through excellence and compassion - not only manifests through patient care but also through the services provided outside of the hospital setting and voices coming from the community. SARH has opened urgent cares in Rancho Cucamonga, Fontana, Eastvale, and Ontario to increase access to care. These facilities provide outpatient care in a close, convenient setting for the region's growing population. In 2019, the Scheu Building, a 60,000-square-foot two story ambulatory care facility, opened directly across the street from the hospital, which houses City of Hope's comprehensive cancer center on the first floor and the hospital's outpatient services and programs on the second floor. In 2016 the Lewis-San Antonio Healthy Communities Institute (HCI) was established by Randall Lewis (a local community visionary, innovator and philanthropist) in collaboration with SARH to positively impact the health of the Inland Empire region. The goals of the institute are to address specific areas of workforce development by providing mentorship and training for all healthcare students and professionals as a response to the high prevalence of chronic diseases and low number of healthcare professionals in the region.

San Antonio Regional Hospital's strategic approach to community and health equity is driven by the triennially conducted Community Health Needs Assessment (CHNA), which helps leadership evaluate and prioritize the community's needs. From previous CHNA implementation strategies, SARH has provided critical health education seminars and screenings for breast, colon and prostate cancer, health counseling and screening at community centers, preventative services such as flu vaccines, diabetes education, obesity management programs, and direct medical care for underserved populations. Guided by the 2022 CHNA, SARH's planning efforts for the next several years resulted in a strategy designed to address some of the most pressing health needs in the communities we serve, such as cardiovascular disease and diabetes, maternal, infant and child health, as well as mental and behavioral health. The Population Health strategy is focused on an increased community outreach presence guided by Community Health Equity data and the hospital's Health Equity, Diversity and Inclusion Council (HEDI). Included in this strategy are efforts to connect with key community partners, such as members of the housing and behavioral health community and San Bernardino County leadership, to leverage existing resources and collectively enhance care within the most vulnerable populations. The strategy is aligned with SARH's goal of reducing readmissions in the Emergency Department while improving the health of each individual throughout their continuum of care.

COMMUNITY PROFILE

Figure 1: SARH Primary and Secondary Service Areas



As a regional healthcare provider, San Antonio Regional Hospital is committed to maintaining the highest quality of care for those it serves and seeks to address distinct health challenges in the community by delivering essential patient care services to promote healthier lifestyles, early detection of diseases, and enhanced access to basic healthcare services. SARH's service region includes a diverse population of 962,906 people including those who may be marginalized, disadvantaged, and disenfranchised. San Antonio Regional Hospital resides in the City of Upland, California located in the "West End" of San Bernardino County. However, like many hospitals, San Antonio's "service area" is defined as the geographic area from which it receives the majority of its hospital admissions. The total service area is divided into "primary" and "secondary" areas, with the primary service area accounting for approximately 80% of the hospital's admissions and the majority of SARH's planning efforts. As illustrated on the map above, SARH's primary service area, denoted in blue, is comprised of the cities of Chino, Claremont, Eastvale, Fontana, Montclair, Ontario, Rancho Cucamonga, and Upland. San Antonio's secondary service area, shaded in orange, extends to Pomona on the west, Chino Hills to the southwest, Corona and Norco on the southeast, and Rialto at the eastern edge of the service area. While the Inland Empire is a maturing economic market, many individuals and families remain at significant financial risk during a medical crisis. Additionally, Health disparities among the Hispanic/Latinx communities became apparent during the COVID-19 pandemic. Research has shown that this is often due to an inability to access health insurance or the result of inadequate insurance coverage. The hospital's financial assistance policy provides relief to the families who would otherwise face medical bankruptcy. In 2021, $1.5M in financial assistance was provided for patients entering the hospital's Emergency Department who were either treated and released or required an inpatient stay. The hospital absorbed $35M in unreimbursed costs incurred in providing care and treatment for Medi-Cal patients, while other uncompensated care totaled $13.3M in order to treat patients. In addition to its compassionate, direct care, SARH reaches out to its community in a variety of ways that go well beyond the traditional care provided by an acute care hospital. An inventory of these programs and services is later described in this document. SARH understands the power of collaboration and has built strong partnerships with other health and social service providers to develop community-based programs with defined goals and measurable outcomes. These partnerships help to leverage the community's resources to achieve the maximum benefit for its residents.

2022 COMMUNITY HEALTH NEEDS ASSESSMENT PROCESS

San Antonio Regional Hospital conducted a Community Health Needs Assessment (CHNA) in 2022. The Assessment identified the health-related needs of the community including low-income, minority, and medically underserved populations.

In order to assure broad community input, San Antonio Regional Hospital collaborated with a diverse group of stakeholders to identify the top health and well-being needs of Inland Empire residents. Key stakeholders included representation not only from the hospital, public health and the broad community, but from low-income, minority and other underserved populations.

The 2022 Community Health Needs Assessment includes burden of disease data, vital conditions data and hospital utilization data along with information gathered through key informant interviews and facilitated listening sessions with community residents. To aid San Antonio Regional Hospital in understanding the data collected, an online platform, called IP3 | Assess, was launched to support and engage hospital staff and community members towards collective action.

Public Health and Prevention

Public health is defined as the health of a population as a whole. The regional CHNA took this "population level" approach in identifying priorities to support vibrant health in the community.

The 2022 regional CHNA was strategically designed as a collaborative process that included county public health departments, a local Medi-Cal managed care organization (Inland Empire Health Plan), local hospitals, community clinics and other community-based organizations working towards health improvement in the Inland Empire region.

Many of the essential public health approaches have been intentionally adopted in this regional hospital CHNA process:

- Assess and monitor community needs and assets, population health status and factors that influence health.
- Investigate, diagnose and address health problems and hazards affecting the population.
- Communicate effectively to inform and educate people about health, factors that influence it and ways to improve it.
- Strengthen, support and mobilize communities and partnerships to improve health.
- Build and maintain a strong organizational infrastructure for public health.

As we work to address the health issues, social conditions and inequities identified in the CHNA, taking a public health approach will be critical.

The 2022 CHNA process followed these steps:

Key data were collected for the 2022 Inland Empire CHNA Stakeholder Committee's review. Quantitative data was integrated into the IP3 | Assess platform, which has two frameworks that are used to identify specific levers that stakeholders can pull to improve community health through collective action.

1. The **Burden of Disease framework** focuses on 12 health conditions, which were reduced to 10 for the purposes of this CHNA. (The domains of cardiovascular disease

and diabetes were combined into one, and brain health was not included due to a dearth of indicators.)
2. The **Vital Conditions for Well-Being framework** highlights seven conditions vital to the well-being of people and places (social and environmental drivers of health).

After reviewing the data, the 2022 Stakeholder Committee used a five-question poll to rank disease and condition priorities for collective action in the Inland Empire. Additionally, the stakeholders selected four populations for special focus to address health disparities in their communities.

Based on the poll, the Stakeholder Committee selected the following priorities and populations for focus in the 2022 CHNA:

1. Burden of disease framework
    a. Cardiovascular disease and diabetes
    b. Mental and behavioral health
    c. Maternal and infant health

2. Vital Conditions
    a. Basic needs for health and safety
    b. Humane housing
    c. Meaningful work and wealth

3. Populations of focus (addressing health disparities)
    a. Communities of color
    b. Individuals with low income and those living in poverty
    c. Seniors
    d. Communities in remote and rural areas

After this meeting, representatives of San Antonio Regional Hospital, Montclair Hospital Medical Center, Redlands Community Hospital and the Hospital Association of Southern California met again to select priorities for their primary service areas (PSAs). They validated that the above priorities and populations were also the most important for their service areas.

Vision for Collaboration

The 2022 CHNA and all the corresponding data represent just one element in the stewardship required for health and well-being transformation in the Inland Empire. As the stakeholders continue to meet this year and beyond, they intend to leverage collaborations and innovations forged during the COVID-19 disruption to develop and implement collaborative, measurable action plans that address the priorities identified in this regional CHNA and tracked through IP3 | Assess platform.

Stakeholders recognize that this collaboration, which will enhance the vital condition of belonging and civic muscle, forms the foundation for all efforts leading to healthy, vital conditions and lives. Building a community engagement process that includes civic participation from diverse communities in solving problems and taking collective responsibility for each other is crucial to positive change. That work is the very definition of stewardship.

Health Equity as an Emerging Issue

In 2020, the COVID-19 pandemic increased public awareness of the health and socioeconomic inequities in health care and the rest of society. The pandemic turned the spotlight on millions of

people who live in poverty, do not make a livable wage, live in substandard housing and lack access to healthy food and affordable transportation, childcare, health care and other basic services.

The pandemic led to catastrophic job loss, unprecedented unemployment rates and severe economic hardship in renter households. In 2016, the percentage of home evictions in the United States hovered around 3.7 million. In 2020, more than 40 million people were at risk of eviction, and more than 75% of them were people of color. Eviction has been linked to increased hospitalizations in children, substance use, physical and sexual abuse and depression and anxiety ("Eviction and Health: A Vicious Cycle Exacerbated by a Pandemic," Health Affairs, April 1, 2021)

Health inequities were widespread before they were highlighted by the COVID-19 pandemic. Policies and practices at every level of society have created deep-rooted barriers to good health. Many neighborhoods and communities have experienced generations of isolation from the opportunities that others experience. The inequities are reflected in differences in length of life, quality of life, rates of disease, disability and death, severity of disease and access to treatment. However, the political will to address these injustices is growing.

Health equity is achieved when every person has the opportunity to "attain his or her full health potential," notes the Centers for Disease Control and Prevention (CDC). To build vibrant communities, we must increase opportunities for everyone to live the healthiest life possible - no matter who we are, where we live or how much money we earn.

Burden of Disease and Vital Conditions

The following indicators for each burden of disease and vital condition priority note some of the specific causal factors in San Antonio Regional Hospital's primary service area. The information below also highlights opportunities for improvement identified by comparing the hospital PSA results to the state benchmarks.

BURDEN OF DISEASES

Infant and Maternal Health

- High infant death rate
- High percentage of low birthweight babies
- High rate of tobacco uses during pregnancy
- High rate of pre-term births

Cardiovascular Disease and Diabetes

- High obesity rate
- High cholesterol rate
- HPSA (Health Profession Shortage Area – Primary Care)
- High rate of hypertension deaths
- High rate of smoking
- High stroke rate
- High rate of heart disease
- High diabetes rate
- Low diabetes management rate in Medicare beneficiaries

Mental and Behavioral Health

- Shortage of mental health providers
- HPSA (Health Professional Shortage Area) – Mental Health
- High rate of substance use disorder death
- High rate of depression in Medicare beneficiaries

VITAL CONDITIONS

Basic Needs for Health and Safety

- HPSA (Health Professional Shortage Area) – mental health
- HPSA (Health Professional Shortage Area) – dental
- High rate of premature death
- High population of people with diabetes
- Lower life expectancy

Humane housing

- Low rate of multi-family housing

Meaningful Work and Wealth

- Lack of high-paying jobs
- Low median household income

Further details about San Antonio's 2022 CHNA can be found on the following link:
https://www.sarh.org/about-us/community-connection/community-benefit/

Priority issues that will be addressed by San Antonio Regional Hospital will address the following Priority Issues in 2023-2025:

1. **Maternal and Infant Health:** The 2022 CHNA, key informants revealed that the region is seeing high infant death rate, high rate of pre-term births, high rate of tobacco use during pregnancy and below benchmark in early prenatal care, particularly in populations that identify as Black/African American.
2. **Mental and Behavioral Health:** The 2022 CHNA revealed that community members are unable to identify resources or access to preventative care and mental health services.
3. **Cardiovascular Disease and Diabetes:** The 2022 CHNA revealed in primary data collection that community members feel management of health is the most pressing health issue as it enables one to stay healthy and increases longevity. Chronic illnesses associated with cardiovascular disease and diabetes continue to be an increasing health risk across the nation and in our community, both for adults and children.

SARH'S IMPLEMENTATION STRATEGY

Everyone participating in the CHNA recognized that the causes of community health needs are both complex and challenging to articulate. Equally challenging is the task of addressing these needs in meaningful and impactful ways. With the completion of the CHNA and the prioritization process, the CHNA team embarked on the next step to develop a strategy to address the top burden of diseases through the critical vital conditions explained in this document.

This Implementation Strategy provides information on how San Antonio Regional Hospital plans to address critical health needs identified in the 2022 CHNA. The hospital plans to build on previous CHNA efforts and existing initiatives, while also considering new strategies and efforts to improve health through upstream and downstream interventions, with specific health indicators.

MATERNAL & INFANT HEALTH

Link to 2022 CHNA:
Key informants revealed that the region is seeing high infant death rate, high rate of pre-term births, high rate of tobacco use during pregnancy and below benchmark in early prenatal care, particularly in populations that identify as Black/African American.

GOAL
Increase support to parents and caregivers, socially and emotionally with family-focused activities, education and services.

STRATEGIES

San Antonio Regional Hospital plans to address access to care by taking the following actions:

Access to Primary Care:

- Provide financial assistance to persons who have healthcare needs and are uninsured, underinsured, ineligible for a government program, or otherwise unable to pay for medically necessary care based on their individual financial situation.
- Provide transportation support to increase access to primary care.
- Provide telehealth programs to inpatients and in the Emergency Department.
- Apply for grants for Doula programs to increase access to doula services to support women with high risk of poor birth outcomes.

Access to Preventative Care:

- Expand educational awareness opportunities with the Healthy Beginnings program –one of the hospital's longstanding maternal and infant health initiatives. Healthy Beginnings provide new mothers with breastfeeding education and newborn follow-up care 1 to 3 days after discharge. In tandem with our behavioral health initiatives, Healthy Beginnings is key to reducing adverse childhood events (ACE's), a growing leading cause of addiction and mental health.
- Increase awareness of the hospital's contracted laborist program which is available 24/7 to take care of unassigned patients who are in labor.
- Partner with the San Bernardino County Black/Infant Health Program to extend services for black infants.
- Promote the Women's Health and Birthing Center which will offer post-delivery care and post-partum care education.

- Actively participate in the Inland Empire Fatherhood Coalition and Maternal Health Network to stay current on issues surrounding maternal health.
- Research Title X Family Planning Services from the U.S. Department of Human and Health Services, Office of Population Affairs.
- Increase substance use treatment and recovery services for families impacted by substance use who need support and compassion.

EVALUATION METRICS

Objective	Baseline Measurement	Performance Target	Indicator	Data Source
To increase mothers who will attend their prenatal and post-partum care appointment.	Enrollment of Healthy Beginning participants.	Increased participation by 20%	Number of infant mortality rate	SBC Dept. of Public Health
To increase the healthy birth weight of newborn babies.	Proportion of total Healthy Beginning participants with healthy newborn birth weights.	Increased participation by 20%	Number of pre-term births	SBC Dept. of Public Health
To reduce the number of mothers who smoke during pregnancy.	Proportion of mothers enrolled in Healthy Beginnings have joined a smoking cessation program	Increased participation by 20%	Number of tobacco use during pregnancy	SBC Dept. of Public Health

IMPACT

San Antonio Regional Hospital anticipates the following impact from these efforts:

- Increased access to health care.
- Strengthened availability of financial assistance to qualified patients.
- Support access to health care services by providing transportation services.

PLANNED COLLABORTATIONS

In order to accomplish the planned activities above, San Antonio Regional Hospital plans to collaborate with:

- Community-based organizations
- Community health clinics
- Local OBGYN providers
- San Bernardino County Black/Infant Health Program
- San Bernardino County Father Involvement Coalition
- San Antonio Regional Hospital's Healthy Beginnings Program
- Churches
- Community groups / organizations

MENTAL AND BEHAVIORAL HEALTH

Link to 2022 Community Health Needs Assessment:
The CHNA revealed that community members are unable to identify resources or access to preventative care and mental health services.

GOAL: Increase access to preventative care as well as increase awareness of mental health care resources, services and education.

STRATEGIES

San Antonio Regional Hospital plans to address mental health by taking the following actions:

Access to Primary Care:

- SARH President & CEO leading Behavioral Health Collaborative with Regional CEOs through the Hospital Association of Southern California to improve the acute behavioral healthcare needs in San Bernardino and Riverside Counties.
- Provide financial assistance to persons who have healthcare needs and are uninsured, underinsured, ineligible for a government program, or otherwise unable to pay for medically necessary care based on their individual financial situation.
- Provide a telepsych program for inpatients and in the Emergency Department.
- Provide transportation support to increase access to primary care.
- Collaborate with acute behavioral health care providers.
- Collaborate with addiction treatment centers.
- Provide Behavioral Health Specialist in San Antonio Regional Medical Group current and future primary care clinics.

Access to Preventative Care:

- Expand mental resiliency training and other health education related to mental-health across the Wellness Starts with You program – a program designed to support adolescent health and well-being.
- Obtain feedback on program support for patients from the hospital's Health Equity, Diversity and Inclusion Council, Community Advisory Committee.
- Collaborate with the Inland Empire Harm Reduction Program.
- Implement the Cal Bridge Behavioral Health Navigator Program.
- Promote the drug take-back programs with receptacles near SARH.
- Collaborate with the San Bernardino County on implementing a self-help mental health program – CredibleMinds.

EVALUATION METRICS

Objective	Baseline Measurement	Performance Target	Indicator	Data Source
To increase awareness of mental/behavioral health services and resources.	52% have increased knowledge of mental/behavioral health resources available.	Increase to 65% who have demonstrated knowledge	Number of participants in programs	SARH Population Health Tracking Sheet
To increase mental health education related to	Education activities have occurred in five zip codes	Increase education to 700 residents in seven zip codes.	Number of presentations and	SARH Population Health Tracking Sheet

substance use disorders, addictions and behavioral health support	reaching 500 community members.		workshops delivered	
To improve communication materials of mental/behavioral health information, treatments, and services.	Connect 500 community members to mental/behavioral health information	Increase community connection to resources by 20%	Number of exhibits/resources	SARH Population Health Tracking Sheet

IMPACT

San Antonio Regional Hospital anticipates the following impact from these efforts:

- Increased awareness and treatment of mental health and behavioral health issues.
- Increased access to mental health services and resources in the community.

PLANNED COLLABORATION

- Chaffey Joint Union High School District, Mental Health Taskforce
- City of Rancho Cucamonga Mental Health Taskforce
- Hospital Association of Southern California
- Inland Empire Harm Reduction Program
- Inland Empire Health Plan
- National Alliance on Mental Illness (NAMI)
- SARH's Health Equity, Diversity and Inclusion Council and Community Advisory Committee
- San Bernardino County Department of Behavioral Health
- San Bernardino County Superintendent of Schools
- Upland Unified School District
- Churches
- Community groups / organizations

CARDIOVASCULAR DISEASE & DIABETES

Link to 2022 Community Health Needs Assessment:
Primary data collection revealed that community members feel management of healthy is the most pressing health issue as it enables one to stay health and increases longevity. Chronic illnesses associated with cardiovascular disease and diabetes continue to be an increasing health risk across the nation and in our community, for both adults and children.

GOAL: Reduce the impact of cardiovascular disease and diabetes and increase the focus on cardiovascular disease and diabetes prevention and treatment education.

STRATEGIES

San Antonio Regional Hospital plans to address cardiovascular disease and diabetes by taking the following actions:

Access to Primary Care:

- Provide financial assistance to persons who have healthcare needs and are uninsured, underinsured, ineligible for a government program, or otherwise unable to pay for medically necessary care based on their individual financial situation.
- Create a new Cardiac Observation Unity
- Increasing advanced cardiac imaging combined with new state-of-the-art technologies such as TAVRs and EP mapping and ablations.
- Provide transportation support to increase access to primary care.
- Collaborate with Cedars Sinai Medical Center to treat advanced Congestive Heart Failure.
- Communicate hospital services to include but not limited to the following:
    - Heart Institute
    - Diabetes Education Program
    - Community Cardiovascular Workshop Series
    - Electrophysiology program

Access to Preventative Care:

- Expand the Community Health Improvement Program (CHIP).
- Expand cardiovascular and diabetes education, screening and treatment.
- Re-instate the Know Your Numbers program, helping community members know their health status as it relates to cardiovascular disease and diabetes.
- Expand health education with the Generations Ahead program – a program focused on addressing the health needs of our community members over the age of 55.
- Communicate cardiovascular disease and diabetes to the community in innovative ways, such as social media, community health awareness events, health fairs/screenings, and marketing materials.

EVALUATION METRICS

Objective	Baseline Measurement	Performance Target	Indicator	Data Source
To reduce avoidable readmissions in the ED.	81% have demonstrated reduction in unnecessary hospitalizations	84% have demonstrated reduction in unnecessary hospitalizations (3% increase)	Number of participants in cardiovascular disease and diabetes management	Community Health Improvement Program (CHIP) SARH Population Health Tracking Sheet
To increase patient adherence to medication to maintain cardiovascular health.	82% have demonstrated increased adherence to medication	86% have demonstrated increased adherence to medication (3% increase	Number of health coaches in CHIP	Community Health Improvement Program (CHIP) SARH Population Health Tracking Sheet
To increase cardiovascular health education.	Education activities have occurred in five zip codes reaching 500 community members.	Increase education to 700 residents in seven zip codes.	Number of presentations and workshops delivered	SARH Population Health Tracking Sheet
To improve overall cardiovascular health status.	87% have demonstrated an improved health status.	92% have demonstrated an improved health status (5% increase)	Number of participants with improved overall health status.	Community Health Improvement Program (CHIP)

				SARH Population Health Tracking Sheet
To improve communication materials of cardiovascular health information, treatments, and services.	Connect 500 community members to cardiovascular health information	Increase community connection to resources by 20%	Number of exhibits/resources	SARH Population Health Tracking Sheet

IMPACT

San Antonio Regional Hospital anticipates the following impact from these efforts:

- Increased identification and treatment of cardiovascular disease and diabetes.
- Increased public awareness of and access to cardiovascular disease and diabetes prevention.
- Increased compliance with medications associated with cardiovascular disease and diabetes management recommendations.

PLANNED COLLABORATIONS

- American Heart Association
- Cedars Sinai Medical Center
- Chaffey Joint Union High School District
- Community Clinics
- Community-based organizations
- Fire and police departments
- Local Hospital Collaboratives
- Ontario-Montclair School District
- San Bernardino County Department of Public Health
- Upland Unified School District

Needs the Hospital Will Not Address

Taking existing hospital and community resources into consideration, SARH will not directly address the remaining health needs identified in the CHNA such as housing, dental workforce, and economic insecurity. SARH has insufficient resources to effectively address all the identified needs and in some cases, the needs are currently addressed by other community stakeholders. San Antonio Regional Hospital will focus on health needs that can most effectively be addressed given the organizations strategic plan and alignment with the CHNA. SARH will be working collaboratively with HASC/CLC and other hospital sand community organizations to collectively address the other identified needs from the CHNA.

VITAL CONDITIONS

Vital conditions of basic needs for health and safety, humane housing, meaningful work and wealth will be tracked and monitored closely to ensure persons from the most vulnerable communities are receiving adequate access to primary and preventative care. The Chief Executive Officer, Members of the Board of Trustees, Department of Population Health, Community Health Improvement Program, Patient Access Services, Department of Health Information Technology, and community collaboratives will work together to provide all patients

and community members from San Antonio Regional Hospital's primary and secondary service areas access to health services.

EVALUATION OF IMPACT

San Antonio Regional Hospital will monitor and evaluate the programs and activities outlined above. The hospital anticipates the actions taken to address critical health needs will improve health knowledge, behaviors, and outcomes, increase access to care, and help support overall health and well-being. The hospital is committed to monitoring key initiatives to assess impact and has implemented a system to track the implementation of the activities and document the anticipated impact, which includes monitoring of the vital conditions described in the 2022. An evaluation of the impact of the hospital's actions to address these critical health needs will be reported in the next scheduled CHNA.

STRATEGIC PARTNER LIST

San Antonio Regional Hospital supports local partners in our joint efforts to promote a healthier community. Partnership is not used as a legal term, but as a description of the relationships and connectivity that are necessary to collectively improve the health of our region. One of the hospital's objectives is to work in partnership with organizations that share our values and priorities to improve the health status and quality of life of the community we serve. This is an intentional effort to avoid duplication and to leverage the successful work already in existence in the community. Many important systematic efforts are underway in our region. We are working closely with multiple nonprofit agencies and organizations to provide quality care for the underserved in our region. These strategic partnerships include members of the Health, Equity, Diversity and Inclusion, Community Advisory Committee, but not limited to the following:

American Cancer Society
American Heart Association
California State University, San Bernardino
Cedars Sinai Medical Center
Chaffey College
Chaffey Joint Union High School District
City of Chino
City of Eastvale
City of Fontana
City of Hope
City of Montclair
City of Ontario
City of Rancho Cucamonga
City of Upland
Claremont Graduate University
County of San Bernardino Department of Behavioral Health
County of San Bernardino Department of Black/Infant Health
County of San Bernardino Department of Public Health
County of San Bernardino Department of Superintendent of Schools
El Sol Neighborhood Center
Kaiser Permanente
Keck Graduate Institute
Hospital Association of Southern California
Inland Empire Community Foundation
Inland Empire Health Plan
Inland SoCal United Way
Lewis Management Corporation

Loma Linda University
Mercy House
Ontario-Montclair School District
Trevor Project
Upland Unified School District
West End Reach Out

APPROVAL FROM GOVERNING BODY

San Antonio Regional Hospital's 2022 CHNA was completed on adopted by the Board of Trustees on August 4, 2022 and may be viewed via the hospital's website (www.sarh.org). The completed 2022 CHNA may be downloaded using the following link:

https://www.sarh.org/about-us/community-connection/community-benefit/

San Antonio Regional Hospital's 2023-2025 CHNA Implementation Strategy was completed on May 17, 2023 and approved by the Board of Trustees on July 28, 2023. This report will be widely available to the public on the hospital's website. For further information or questions about the CHNA and CHNA implementation strategy, please contact:

Aileen O. Dinkjian, EdD, MPH
Associate Vice President, Population Health
Executive Director, Lewis-San Antonio Healthy Communities Institute
999 San Bernardino Road, Upland, CA 91786
(909) 920-4829
adinkjian@sarh.org