



**ADVENTIST HEALTH
CLEAR LAKE**

2022 COMMUNITY HEALTH
IMPLEMENTATION STRATEGY

APPROVED APRIL 27, 2023

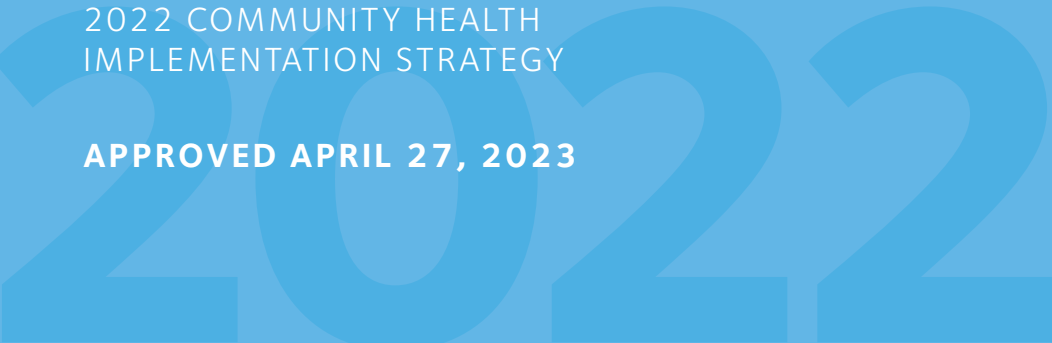


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Purpose & Summary

Non-profit health systems, community-based organizations, and public health agencies across the country all share a similar calling: to provide public service to help improve the lives of their community. To live out this calling and responsibility, Adventist Health Clear Lake (AHCL) conducts a Community Health Needs Assessment (CHNA) every three years, with our most recent report completed in 2022. Now that our communities' voices, stories, and priority areas are reflected in the CHNA, our next step is to complete a Community Health Improvement Plan (CHIP), or as we refer to it in this report, a Community Health Implementation Strategy (CHIS).

The CHIS consists of a long-term community health improvement plan that strategically implements solutions and programs to address our health needs identified in the CHNA. Together with the Adventist Health Well-Being team, local public health officials, community-based organizations, medical providers, students, parents, and members of selected underserved, low-income, and minority populations, Adventist Health Clear Lake intentionally developed a strategic plan to address the needs of our community.

In this CHIS, you will find strategies, tactics, and partnerships that address the following health needs identified in the 2022 Adventist Health Clear Lake CHNA:

Access to Care

Health Risk Behaviors

Mental Health

We hope this report is leveraged by all local partners and community members, empowering them to own the potential of healthy living for all. This report was reviewed and approved by our Hospital Board as well as the Adventist Health System Board on April 27, 2023. The entire report is published online and available in print form by contacting community.benefit@ah.org.

Blue Zones Project Lake County

Across the globe lie blue zones areas – places where people are living vibrant, active lives well into their hundreds at an astonishing rate—and with higher rates of well-being. Attaining optimal well-being means that our physical, emotional, and social health is thriving. Blue Zones Project works with communities to make sustainable changes to their environment, policies, and social networks to support healthy behaviors. Instead of a focus on individual behavior change, it is an upstream solution focused on making healthy options easy in all the places people spend most of their time. Blue Zones Project is committed to measurably improving the well-being of community residents and through their proven programs, tools and resources, utilizes rigorous metrics to inform strategies and track progress throughout the life of the project. This includes well-being data, community-wide metrics, sector-level progress and outcome metrics, transforming community well-being by making changes to environment, policy, worksites and social networks that create healthy and equitable opportunities for all.

Adventist Health Clear Lake proudly sponsors Blue Zones Project Lake County (BZPLC). The BZPLC team wakes up each morning focused on partnering and collaborating with community leaders and organizations active in the sectors of built environment, education, economic and workforce development, mental and physical well-being, policy and public health. Together the BZPLC team and sector leaders develop a community Blueprint that strategically aligns and leverages the actions and resources of the sectors where we live, learn, work and play to help advance the efforts around the community's biggest Social Determinant of Health challenges while connecting them to Health-Related Social Needs organizations.

Equity is a strategic priority woven throughout the Blueprint and programs. Policies and initiatives are developed in a way that honors the local culture that is focused on reaching out to all populations. Each year BZPLC sector leads come together to evaluate and update the Blueprint to ensure community alignment.

To learn more about Blue Zones Project Lake County and how to get involved visit: lakecounty.bluezonesproject.com



What if ...

It's not a prescription that changes your health?

Instead, it's a collaboration between you and your care providers?

And it's community-based organizations working together to support you?

Getting to know our Lake County service area*

Near America's oldest lake and the recreational and outdoor activities it supports, our hospital serves a scenic, rural community with a total population of 69,918. Surrounded by mountainous terrain, Lake County is divided into two main cities, with Clearlake on the south shore and Lakeport on the north shore.

Lake County is home to the following Native American Tribes: Big Valley Rancheria, Elem Indian Colony, Middletown Rancheria, Robinson Rancheria, Scotts Valley Band of Pomo Indians and Upper Lake – Habematoel, whose rich cultures bring vibrance to Lake County.

The community is vibrant with art galleries, festivals, local events and small businesses. Of the total population, 21.09% are Hispanic.

The median household income for the community we serve is \$50,811, and 68.05% of income is spent on housing and transportation. In this community, 23.94% of children live in poverty, compared to 16.80% in California and 17.48% in the country. Additionally, 7.83% of students are unhoused, compared to 4.25% in the state and 2.77% in the country.

For a more detailed look into community member comments, facts and numbers that are captured in the CHNA, please visit adventisthealth.org/about-us/community-benefit. The following pages provide a closer look into our community demographic as well as our approach to the CHIS.



**This service area represents Adventist Health Clear Lake and Sutter Health Lakeside's primary service areas (PSA), accounting for 75% of hospital discharges. Additionally, we took a collaborative approach and expanded our PSA by inviting Steering Committee members to include the zip codes of those they serve, creating the County of Lake CHNA service area.*



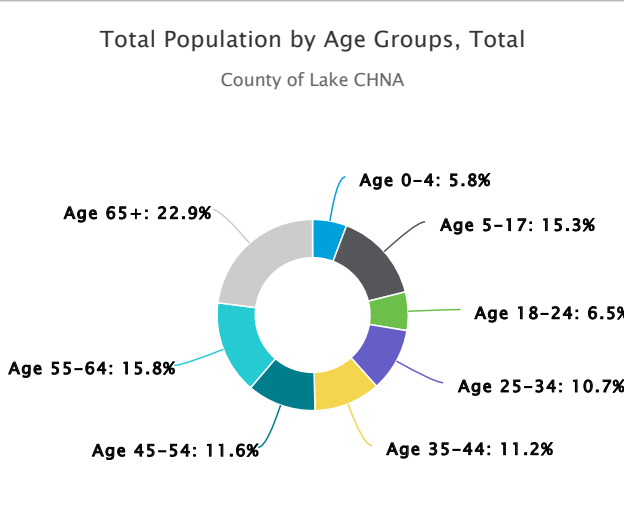
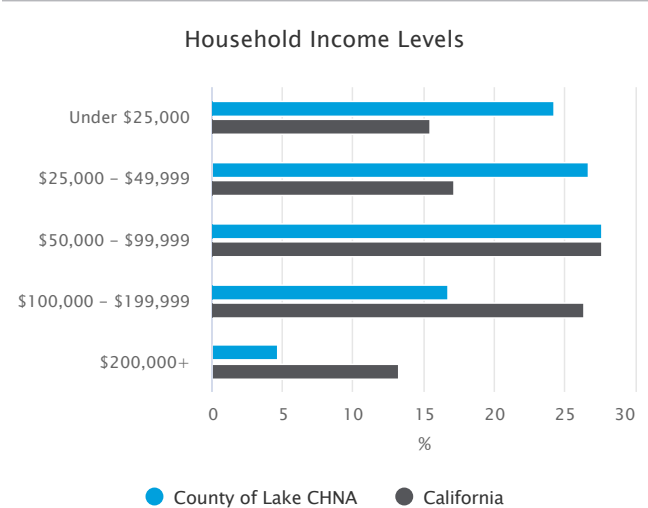
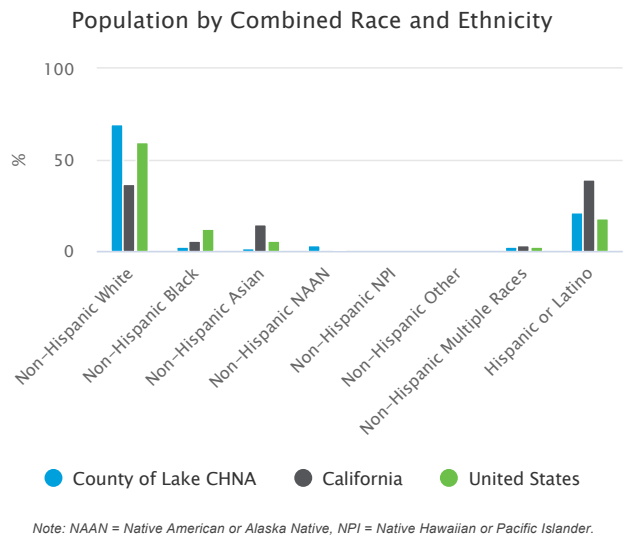
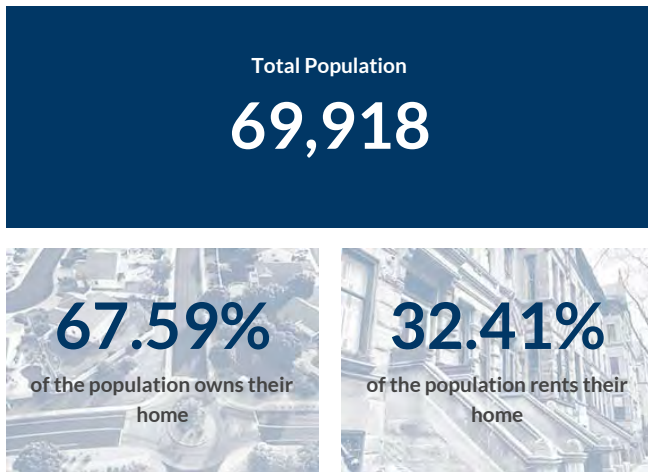
What if our community worked together and made life all-around better? What if we offered various pathways to meet our diverse needs, so every member of our community experienced better health, prosperity and longevity?

Who We Serve

DEMOGRAPHIC PROFILE

The following zip codes represent Sutter Health Lakeside and Adventist Health Clear Lake's primary service area (PSA), accounting for 75% of hospital discharges. Additionally, we took a collaborative approach and expanded our PSA by inviting Steering Committee members to include the zip codes of those they serve.

The County of Lake CHNA market has a total population of 69,918 (based on the 2020 Decennial Census). The largest city in the service area is Clear Lake, with a population of 15,250. The service area is comprised of the following zip codes: 95451, 95443, 95435, 95464, 95493, 95426, 95423, 95485, 95457, 95461, 95469, 95458, 95453, 95422, 95467.



About Us

Adventist Health Clear Lake

Adventist Health Clear Lake is a 25-bed critical access medical center in Clearlake California, at the intersection of hope and healing in Lake County. Adventist Health Clear Lake is situated in one of the most beautiful areas of Northern California and proudly offers primary and specialty care services at locations in neighborhoods from Lakeport to Middletown.



Adventist Health

Adventist Health is a faith-inspired, nonprofit integrated health system serving more than 80 communities on the West Coast and Hawaii. Founded on Adventist heritage and values, Adventist Health provides care in hospitals, clinics, home care agencies, hospice agencies and joint-venture retirement centers in both rural and urban communities. Our compassionate and talented team of 34,000 includes associates, medical staff physicians, allied health professionals and volunteers driven in pursuit of one mission: living God's love by inspiring health, wholeness and hope. Together, we are transforming the American healthcare experience with an innovative, yet timeless, whole-person focus on physical, mental, spiritual and social healing to support community well-being.

Adventist Health's Approach to CHNA & CHIS

Adventist Health prioritizes well-being in the communities we serve across our system. We use an intentional, community centered approach when creating our hospital CHNA's to understand the health needs of each community. After the completion of the community assessment process, we address health needs such as mental health, access to care, health risk behaviors, and others through the creation and execution of a Community Health Implementation Strategy (CHIS) for each of our hospitals and their communities.

The following pages highlight the key findings the Adventist Health Clear Lake CHNA Steering Committee (see page 19 for a list of CHNA Steering

Committee sector participants) identified as their top priority health needs, or as we refer to them in this report, their 'High Priority Needs'. The High Priority Needs are addressed in this Community Health Implementation Strategy.

High Priority Needs

The following pages highlight the High Priority Needs that will be addressed in this Community Health Implementation Strategy.

Access to Care

COMMUNITY VOICES

- Community members raised concerns around receiving adequate and timely treatment.
- People shared that traveling long distances to appointments takes up an entire day, resulting in losing time from work, which affects wages and family time.
- There's a concern around the lack of treatment opportunities in the county, including limited at-home support and long-term residential treatment programs.
- People are frustrated with health professionals who are here to intern and practice, then leave as soon as they have the opportunity.
- Residents noted they really need an urgent care center since everyone goes to the ER, which results in a huge wait and medical bill.



Health care should be accessible to people of all ages, from all walks of life. Currently, that vision remains out of reach.

The data sets speak volumes:

- There are just 67 primary care providers per 100,000 population in our Lake County service area, compared to 104 primary care providers per 100,000 population in the United States.
- 78% of residents in this community live in an area affected by a Health Professional Shortage Area —which is more than three times higher than the rate for all of California.
- Community members reported

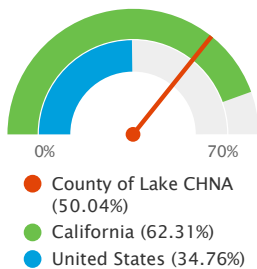
limited healthcare access leads patients to turn to emergency rooms for basic services.

Residents recently voiced concerns about not receiving adequate care, requesting an accessible urgent care center. They shared concerns around the lack of treatment opportunities in the county, including residential treatment programs. There is frustration due to health care providers training locally and then moving on.

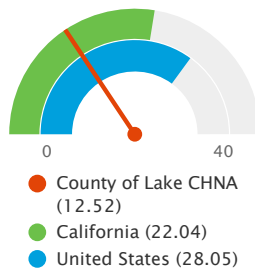
The challenges are many. But quality, affordable care is at the core of healthy lives and communities.

SECONDARY DATA INFOGRAPHIC STATS:

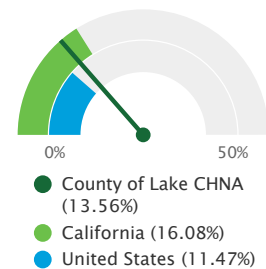
Percentage of Population within Half Mile of Public Transit



Intensive Care Unit Hospital Beds, Rate per 100,000 Population



Population Age 25+ with No High School Diploma, Percent



Health Risk Behaviors

COMMUNITY VOICES

- The community is seen as the poorest and unhealthiest county in California by some residents.
- There is a worry that kids are picking easy and unhealthy items to eat like chips, soda, donuts, and energy drinks.
- Excessive screen time is seen as a problem for many kids.
- Several residents said that marijuana and over-the-counter medicines are a problem. Parents expressed needing education about different drugs to know what to look for, sharing concerns that even things like Tylenol can be misused.
- There is a belief that there are high rates of suicide, alcohol use and drug use in this community.
- Kids not eating healthily in school and families not eating together are seen as problems.

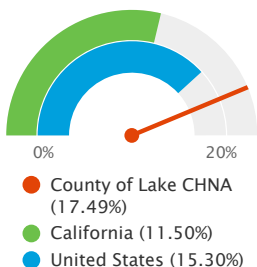


Today, Medicare beneficiaries in our Lake County service area experience substance use disorder at a much higher rate than the rest of the state. Kids of all ages can easily access unhealthy foods such as soda, donuts and chips, and smoking rates are well over the state average. Additionally, statistics show that nearly 15% of infants born in this community have low birth weights, setting the stage for future – and very real – health concerns.

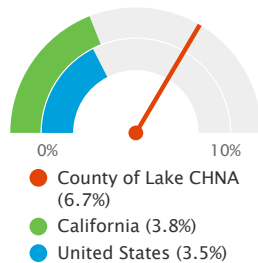
Communities hold the potential for creating opportunities for all. Over time, collective, community-driven changes will give way to healthier environments, activities, attitudes and life-changing engagements.

SECONDARY DATA INFOGRAPHIC STATS:

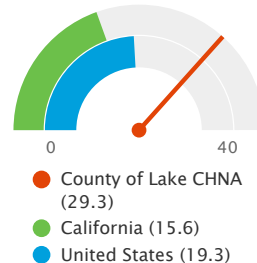
Percentage of Adults who are Current Smokers



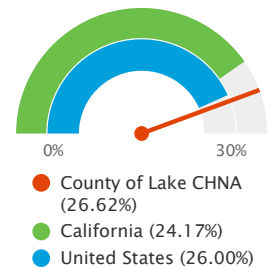
Percentage of Medicare Beneficiaries with a Drug or Substance Use Disorder



Teen birth rate per 1,000 female population, ages 15-19



Percentage of Adults with No Leisure-Time Physical Activity



Mental Health

COMMUNITY VOICES

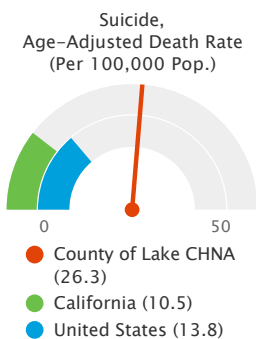
- There is a perceived increase in domestic violence in the area.
- There is a worry that community members are self-medicating to address mental health problems.
- COVID-19 has led to intense isolation, contributing to some people experiencing depression and anxiety, community members say. The problem is compounded by a lack of awareness of where people can seek mental health services.
- Some shared thoughts that the difficulty in accessing mental health services has increased the severity of this problem.
- There is a stigma attached to receiving mental health services, compounding the problem for some.
- Substance abuse, especially when coupled with mental health problems, is seen as leading to long-term health problems for many in this area.



Mental health is undeniably complex, with a wide variety of reactions and responses – from engaging in treatment to fear to avoidance. Families cannot understand what is happening to their loved one, they don't know how to help, and too often, accessing needed services is difficult. The concerns and challenges that come with poor mental health can lead to an increase in domestic violence, anxiety, depression, hopelessness

and substance use. According to a recent survey, 44 % of people surveyed selected mental health as a top concern. Another troubling fact is the rate of deaths by suicide is much higher in our Lake County community (26.3 per 100,000 population) than in California (10.5 per 100,000 population) and in the United States (13.8 per 100,000 population). These few realities alone can make one wonder how to bring health and well-being back to this beautiful place.

SECONDARY DATA INFOGRAPHIC STATS:



Risk Factors - Access to Care - Access to Mental Health Providers

Report Area	Total Population (2020)	Number of Facilities	Number of Providers	Providers, Rate per 100,000 Population
County of Lake CHNA	69,917	2	92	131.27
Lake County, CA	68,163	2	88	129.10
Mendocino County, CA	91,601	14	192	209.60
California	39,538,223	5,078	59,430	150.31
United States	334,735,155	56,424	442,757	132.27



Action Plan for Addressing High Priority Needs

Committee members drew upon a broad spectrum of expertise and possible strategies to improve the health and well-being of vulnerable populations within the community.

The following pages reflect the goals, strategies, actions, and resources identified to address each selected High Priority Need.

ADDRESSING HIGH PRIORITY: ACCESS TO CARE

GOAL	Expanding services to meet the needs of the community's health.				
Priority Area:	Access to Care	Sub-Category:	Availability – Primary Care	Defining Metric:	Primary Care Shortage Areas
Strategy:	Open Rapid Care Clinic/Develop and Launch Job Care				
Population Served:	Total Population				
Internal Partners:	Operations Director Clinic Manager				
External Partners:	Redbud Healthcare District				
Actions: Program/Activity/Tactic/Policy	Organization		Lead		
Open and staff Rapid Care Monday-Friday, 7:30am-6:30pm. Expand to weekend hours in 2023. The services offered are for emergencies that are not appropriate for a visit to the Emergency Department, i.e., allergic reaction; animal and bug bites; body and muscle aches; cold and flu symptoms; coughing and wheezing; cuts and lacerations; diarrhea; ear and eye infections; falls and sprains; headaches, etc.	AHCL		Yvette Jenkins Jennifer Fredrickson		
	Redbud Health District		Conrad Colbrandt		
YEAR ONE	YEAR TWO		YEAR THREE		
<ul style="list-style-type: none"> Open Rapid Care Clinic in Clearlake. Develop plans to expand to Lakeport. Begin developing plans for Job Care services. 	<ul style="list-style-type: none"> Continue development of Job Care – on site occupational health services for employers including employment health testing, screening and first aid and workers compensation injury claims. 		<ul style="list-style-type: none"> Open Job Care. 		

Strategy:	The Live Well Mobile Van/Street Medicine will bring care to the doors of Restoration House, Hope Center, individuals accessing services of mobile shower trailer, and pop-up locations in partnership with community organization and agencies (churches, schools, community events).
Population Served:	Vulnerable population
Internal Partners:	Live Well Integrated Care
External Partners:	Lake County First Protection EMTs; NCO; Lake Family Resource Center, Churches, School District

Actions: Program/Activity/Tactic/Policy	Organization	Lead
We will partner with the mobile shower trailer that travels around Lake County so that unhoused people can take showers and get clean clothes. The street medicine RN will drive the van to the different locations to be available for services as well as emergency situations. Additional sites will be offered in partnership with community organizations.	AHCL	Marylin Wakefield Kelley Boss Jennifer Valadao
	Lake County EMT	
	North Coast Opportunities	
	Lake Family Resource Center	
	Konocti Unified School District	Becky Salato
	Lake County School District	Brock Falkenberg

YEAR ONE	YEAR TWO	YEAR THREE
<ul style="list-style-type: none"> Launch services in 2023. 	<ul style="list-style-type: none"> Partner with county school districts to provide vaccines and medical services. 	<ul style="list-style-type: none"> Increase the number of locations.

ADDRESSING HIGH PRIORITY: HEALTH RISK BEHAVIORS

GOAL	Advocate for smoking and vaping policies and provide cessation support and education for youth.				
Priority Area:	Health Risk Behaviors	Sub-Category:	Tobacco	Defining Metric:	Youth Tobacco Use
Strategy:	Konocti Wellness Center, a clinic on school campus, will provide support services for smoking/vaping cessation and education at the youth level.				
Population Served:	Konocti Unified School District Students				
Internal Partners:	Director, Well-Being				
External Partners:	BZP, Konocti Unified School District, Walmart, Lake County Public Health				
Action: Program/Activity/Tactic/Policy	Organization		Lead		
1.1 Konocti Wellness Clinic as anchor venue for cessation and supportive services (i.e., patches and treatment).	BZP		Greg Damron		
	Konocti Unified School District		Becky Salato		
1.2 Convening of the tobacco policy group.	AHCL		Don Smith		
	Lake County Chamber of Commerce		Laura McAndrews Sammel		
YEAR ONE	YEAR TWO		YEAR THREE		
<ul style="list-style-type: none"> Partnering with BZP. Establish policy for Konocti Wellness Center to meet with school age population. 	<ul style="list-style-type: none"> Provide cessation, education and training services. Measurable reduction in vaping use. 		<ul style="list-style-type: none"> Provide cessation, education and training services. 		
GOAL	Increase healthy food access for underserved community members.				
Priority Area:	Health Risk Behaviors	Sub-Category:	Diet & Nutrition	Defining Metric:	Expenditures on Fresh Fruits/Vegetables
Strategy:	Mountain View Café BZP Approved and Promoted				
Population Served:	Associates and General Public				
Internal Partners:	Nutritional Services Team				
External Partners:	BZP				
Action: Program/Activity/Tactic/Policy	Organization		Lead		
1.1 Establish food-insecurity screenings and referrals through relevant healthcare providers and community-based programs. (Lakeport and Clearlake).	AHCL		Don Smith		
	AHCL Kitchen Lead		Lisa Webster		
2.1 Promote Hospital Mountain View Café to hospital visitors and community as dining option; achieve BZP approved status and offer to the public healthier eating options and education.	BZP Partner		Jamey Gill/Kamlin Fasano		
	County Chamber				
YEAR ONE	YEAR TWO		YEAR THREE		
<ul style="list-style-type: none"> Mountain View Café to become Blue Zones approved and expand greater access through promotion and education. 	<ul style="list-style-type: none"> Source, when possible, locally grown vegetables through partnerships and continue to promote Mountain View Cafe as community resource. 		<ul style="list-style-type: none"> Continue to help serve the public by providing healthier food options. 		

ADDRESSING HIGH PRIORITY: MENTAL HEALTH

GOAL	Elevate existing programs and organizations to have a positive impact on student and staff as well as train faith leaders as certified Mental Health Coach 1 st Responders.
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Priority Area:	Mental Health	Sub-Category:	Health Outcomes – Anxiety & Depression	Defining Metric:	Poor Mental Health (days)
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Strategy:	Work with local faith leaders to offer Mental Health Coaches 1 st Responder Training and Certification
Population Served:	Lake County residents
Internal Partners:	AHCL Live Well
External Partners:	Faith Leaders Light University & American Association of Christian Counselors

Action: Program/Activity/Tactic/Policy	Organization	Lead
1.1 Provide scholarships to enroll faith leaders into Light University accredited training program to become Mental Health Coaches 1 st Responder trained and certified.	AHCL	Don Smith
	Lake County Faith Leaders Network	Don Smith
1.2 Partner with county hospice to provider grief and end of life training seminars.	Lake County Hospice	Rev. Cory Paine
	American Association of Christian Counselors	Phil Smith

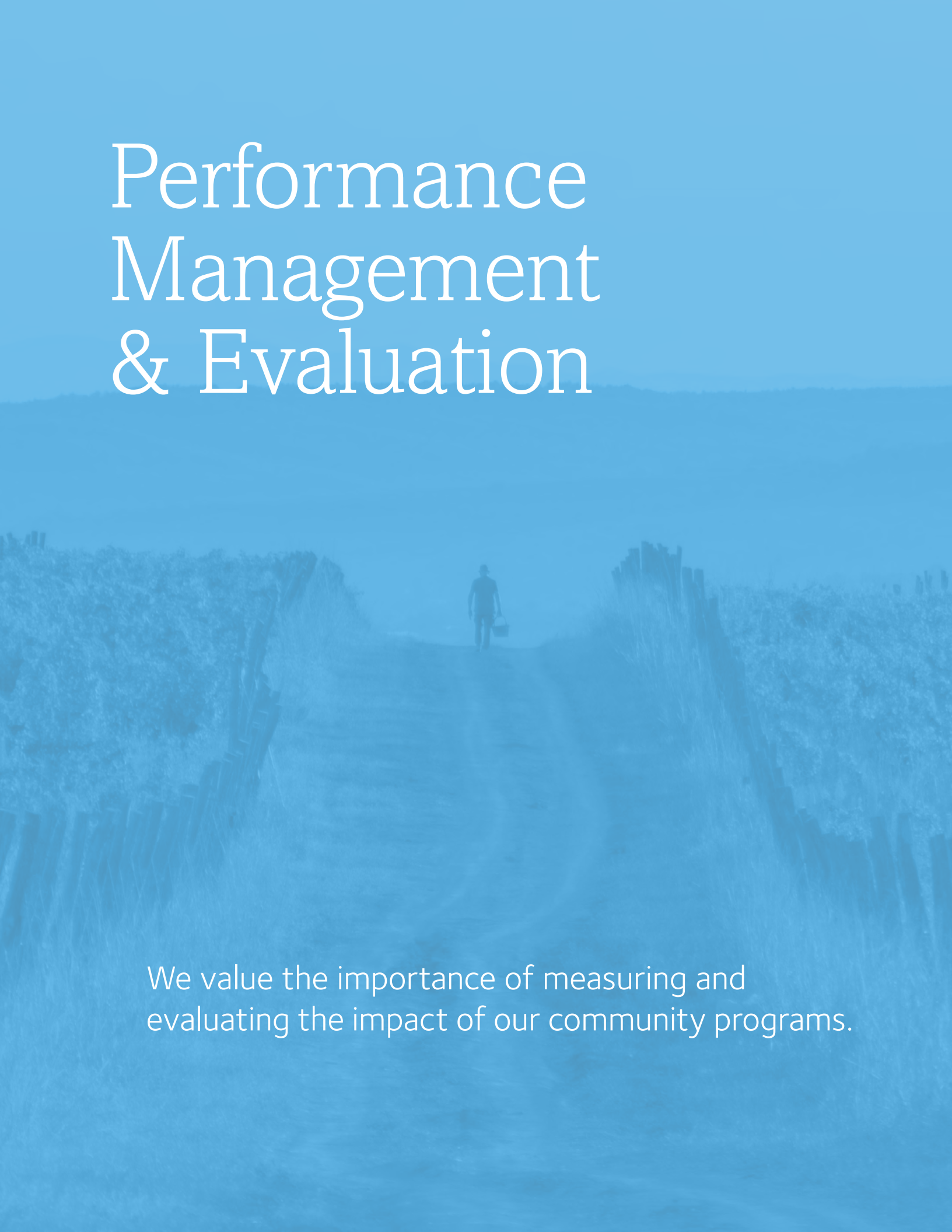
YEAR ONE	YEAR TWO	YEAR THREE
<ul style="list-style-type: none"> Train and certify five faith leaders to be equipped to assess, connect, and bridge the gap between individuals in need of mental health services and Licensed Counselor. 	<ul style="list-style-type: none"> Promote and hold bereavement, grief, loss, isolation, loneliness, and anxiety support groups at local churches for all people in need in our county. 	<ul style="list-style-type: none"> Partner coaches with local law enforcement in assisting with emergency, crisis, and mental health calls.

Strategy:	Adopt Blue Zones proven best practices to support well-being among students and staff
Population Served:	Lake County students and staff
Internal Partners:	AHCL Well-Being Department
External Partners:	BZP, Hope Rising, Konocti Unified School District

Action: Program/Activity/Tactic/Policy	Organization	Lead
1.1 Identify and promote existing well-being initiatives and programs in the school districts and partner, as needed.	AHCL Director, Well-Being	Don Smith
	Konocti Unified School District	Becky Salato
1.2 Engage after-school programs such as Hope Rising’s Smart Start Bright Future to utilize Blue Zones Project best practices.	BZP	Jamey Gill
	Hope Rising	Justin Gaddy

YEAR ONE	YEAR TWO	YEAR THREE
<ul style="list-style-type: none"> One Blue Zones Approved school campus so that student BMI rate, attendance, discipline issues, and smoking rate can begin to be measured. 	<ul style="list-style-type: none"> Demonstrate effectiveness of Blues Zones Approved campus best practices locally and expand number of BZP approved schools. Promote elementary schools’ participation in Blue Zones Challenges. 	<ul style="list-style-type: none"> Continued expansion of BZP Approved school campuses. Increase number of elementary schools participating in Blues Zone Challenges. Increase junior and high school student engagement in BZP Challenges and education.

Performance Management & Evaluation

A person is walking away from the viewer on a dirt path that leads into a field of tall, dry grass. The person is carrying a basket and is wearing a hat. The entire scene is overlaid with a semi-transparent blue filter. The path is the central focus, leading the eye towards the person in the distance.

We value the importance of measuring and evaluating the impact of our community programs.

Performance Management & Evaluation

Adventist Health will support the High Priority Need action plans identified in this CHIS by monitoring progress on an ongoing basis and adjusting the approach as needed over the course of the next three years. There are several resources in place to aid in this. All CHIS programs and initiatives will include a completed logic model to identify intended activities, outputs, and short and long-term outcomes. Establishing core metrics for each program or initiative will allow for the ongoing collection of

performance management data. Actively tracking metric performance leads to the identification of strengths and challenges to the work, the local hospital, the Adventist Health Community Benefit team, and external consultants. Together, we will work to share successes and create performance improvement plans when necessary.

In addition, Adventist Health hospitals where High Priority Needs are shared will have the opportunity

to join a collaborative held by the Adventist Health Well-Being team. The collaborative will be centered on building a common approach that aligns and maximizes community benefit, thus reducing the need to manage this work independently at each hospital. Along with that, where appropriate, evaluation activities designed to measure the overall strength and success of this work at the community level will be incorporated into performance management tracking.

CHIS Development

The development of the CHIS was directly built from the CHNA, whose goal focused on leveraging community stakeholders and data to address the most significant health needs of our community over the next three years. Members of the CHNA Steering Committee—comprised of healthcare, civic, public, and business leaders—led the process of identifying and addressing health needs for a healthier community, completing the final report in fall of 2022.

Collaborating with CHNA Steering Committee members again in early

2023, Adventist Health Community Well-Being Directors facilitated a multi-step process to outline goals and strategies for the CHIS that foster change and positive impact in each of the High Priority Need areas. Each community relied on existing programs and services, and, where necessary, identified new opportunities to pursue collectively.

Once an approach received a consensus, the Community Well-Being Directors worked with Adventist Health leadership and expert consultants to set major

annual milestones for each approach, generating outputs and outcomes that allow for ongoing performance management of this work. For further information on how success will be tracked refer to the Performance Management and Evaluation section above.

Finally, the CHIS was presented to Adventist Health local Hospital Boards for review and feedback. In addition to this collaborative effort, we also welcome feedback at community.benefit@ah.org.



Scan the QR code for the full Secondary Data Report



Significant Identified Health Needs

The Adventist Health Community Well-Being team and community partners collectively reviewed all relevant significant health needs identified through the CHNA process. Using a community health framework developed for this purpose, 12 significant health needs were initially considered. The list of significant needs are as follows:

- Access to Care
- Community Safety
- Community Vitality
- Education
- Environment & Infrastructure
- Financial Stability
- Food Security
- Health Conditions
- Health Risk Behaviors
- Housing
- Inclusion & Equity
- Mental Health

From this group of 12, several high priority health needs were established for Adventist Health Clear Lake. High priority health needs were chosen as they had demonstrated the greatest need based on severity and prevalence, intentional alignment around common goals, feasibility of potential interventions, and opportunities to maximize available resources over a three-year period.

Using the criteria mentioned above, we were able to determine which needs were high priority, as compared to those that were significant needs. The High Priority Needs are the focus of this CHIS. The remaining significant health needs are not addressed directly but will likely benefit from the collective efforts defined in this report. The following table provides additional information on all the significant health needs that were considered.

TABLE OF SIGNIFICANT IDENTIFIED HEALTH NEEDS

High Priority Needs	
Access to Care	See Sections III.C - E
Health Risk Behaviors	See Sections III.C - E
Mental Health	See Sections III.C - E
Lower Priority Needs *please note web address leads to multiple 211 resources within each priority need	
Financial Stability: Employment <small>211lakecounty.org/index.php/employment</small>	Median incomes are much lower than the rest of California, and a high percentage of residents in the Lake County CHNA service area live in poverty (21.05% compared to 13.42% across the US). Focus group members also saw the high cost of living and limited employment options as drivers of financial instability.
Financial Stability: Cost of Living <small>211lakecounty.org/index.php/finance</small>	Median incomes are much lower than the rest of California, and community residents identified problems in paying for food, healthcare, transportation, and housing. 79% of surveyed residents identified the cost of living as a health need.
Health Conditions <small>211lakecounty.org/index.php/health</small>	This region has higher heart disease and diabetes prevalence and cancer mortality rates than the rest of the state. No urgent care is currently available, and residents noted that long travel times to see specialists make it hard to get the medical care they need.
Food Security <small>211lakecounty.org/index.php/food</small>	In the Lake County service area, 74% of school-age children qualify for free and reduced-price school meals, and the rate of people in poverty is very high (21.05%). Residents expressed concerns about the limited availability of reasonably priced, healthy foods.
Community Safety <small>211lakecounty.org/index.php/legal</small>	The violent crime rate in the Lake County CHNA service area surpasses state and federal rates to a noteworthy degree, 536 crimes/100,000 population in the region compared to 418/100,000 in California and 386/100,000 in the US.
Environment and Infrastructure <small>211lakecounty.org/index.php/government</small>	Key Informants noted a lack of access to safe parks and public spaces, an infrastructure designed primarily for cars, limited sidewalks, and poor-quality roads as major built environment issues.
Community Vitality: Civic <small>211lakecounty.org/index.php/utilities 211lakecounty.org/index.php/education</small>	The difficulties attracting new businesses to the area, insufficient high-speed internet access, the relatively low level of education across the population, and lack of overall community development were called out as problems by Key Informants.
Housing: Unhoused <small>211lakecounty.org/index.php/housing 211lakecounty.org/index.php/crisis</small>	Multiple drivers towards homelessness were noted by focus group participants, including limited employment opportunities and the very high cost of living. A lack of community connection and a history of personal trauma were also seen as contributing factors. It was noted that there are not enough housing units, and the cost is prohibitive for many. Homelessness was viewed as a health need by 53% of the surveyed residents in the area.
Housing: Costs <small>211lakecounty.org/index.php/housing</small>	48% of residents indicated that lack of affordable housing was a health problem in their community. Focus group and key informant interviewees noted the high cost of housing, limited housing stock, and an influx of house buyers from urban areas as some of the causes.
Community Vitality: Economic <small>211lakecounty.org/index.php/employment</small>	Difficulty recruiting professionals due to low salaries and limited housing options was noted by Key Informants. Overall, the difficulty of promoting economic development in local towns was also seen as a problem.



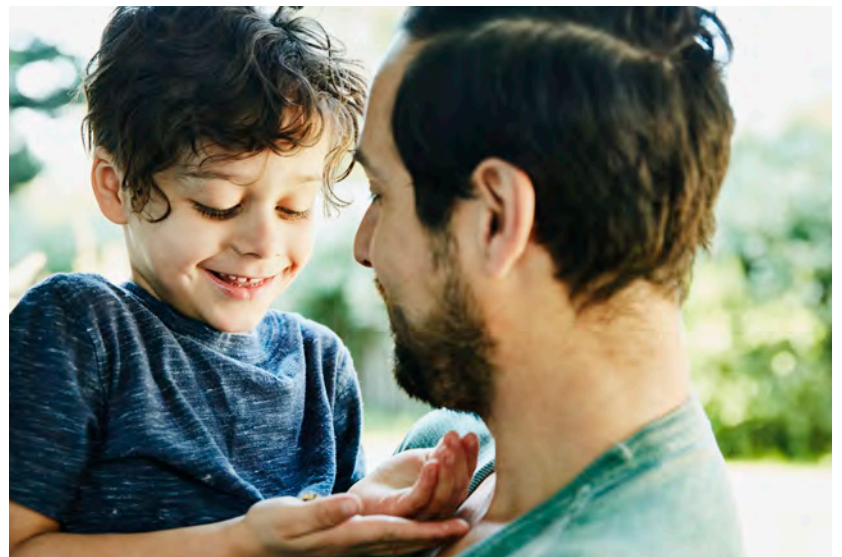
Scan the QR code for the full Secondary Data Report



Community Health Financial Assistance for Medically Necessary Care Commitment

Adventist Health understands that community members may experience barriers in paying for the care they need. That is why we are committed to providing financial assistance to those who may need support in paying their medical expense(s).

Community members can find out if they qualify for financial aid in paying medical bills by completing a financial assistance application. Applications can be filled out at the time care is received or after the bill has been administered. To access the financial assistance policy for more information or contact a financial assistant counselor, please visit <https://www.adventisthealth.org/patient-resources/financial-services/financial-assistance/>.



Glossary of Terms

COMMUNITY ASSET

refers to community organizations, programs, policies, activities or tactics that improves the quality of community life.

DEFINING METRIC

this is the metric used to define the extent of the problem faced by the target population.

FUNDING

can be provided by (but not limited to) government agencies, public organizations, grants and philanthropic giving.

GOAL

there may be several overarching goals to address each prioritized health need. This is the overarching impact we want to achieve.

PARTNERS

describe any planned collaboration between the hospital and other facilities or organizations in addressing health needs.

POPULATION SERVED

who is included within the group to receive services of the program.

**PRIORITIZED HEALTH NEED/
PRIORITY AREA/SIGNIFICANT
HEALTH NEEDS**

a health need that was identified in a community health needs assessment and was then selected by committee as a high priority need to be addressed.

STAKEHOLDER- INTERNAL

colleagues and or board members who work for or with the hospital.

STAKEHOLDER- EXTERNAL

community members or organizations who regularly collaborate with the hospital.

STRATEGY

a specific action plan designed to achieve the expected outcome.

SUB-CATEGORY

if needed, a more granular focus within the identified priority area may be called out.

Approval Page

2023 CHIS Approval

In response to the 2022 Community Health Needs Assessment, this Community Health Implementation Strategy was adopted on April 27, 2023 by the Adventist Health System/West Board of Directors.

The final report was made widely available on May 31, 2023.

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Thank you for reviewing our 2023 Community Health Implementation Strategy.
We are proud to serve our local community and are committed to making it a healthier place for all.

Colleen Assavapisitkul, MSN, RN, CENP, HACP

Adventist Health Clear Lake

