

Adventist Health Tehachapi

2019 Community Plan Update/Annual Report



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Adventist Health Overview

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



OUR MISSION:

Living God’s love by inspiring health, wholeness and hope.

OUR VISION:

Adventist Health will transform the health experience of our communities by improving health, enhancing interactions and make care more accessible.

Adventist Health entities include:

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

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

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

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

Letter from the CEO



Dear Friends and Colleagues,

When I reflect on the health of our community, in many ways, I'm proud.

This community has done something few others would — it committed to building and opening a state-of-the-art hospital in a rural town, helping to increase health access for all for generations to come.

But I also know that there's much work to be done. Our community continues to outpace the county death rate for many conditions, including heart disease, chronic lower respiratory disease and liver disease. Our death rate for diabetes is 14 percentage points higher than the state average.

In many cases, these conditions can be managed or avoided entirely by leading a healthy lifestyle, including a proper diet, exercise and regular wellness checks with a primary care physician.

It's not enough that our community has built a hospital to care for us when we're sick — we need to take the proactive steps to keep ourselves healthy.

At Adventist Health Tehachapi Valley, we don't want to just care for folks when they get sick — we want to keep you all well enough, so you never develop a chronic condition. A big part of that involves outreach events where we can offer fast, effective screenings and provide information about how you can lead a healthier life.

Together, we know we can build a healthier community, and that it starts with each one of us.

Warmly,

A handwritten signature in black ink that reads "Jeff Lingerfelt". The signature is written in a cursive, flowing style.

Jeff Lingerfelt
President Adventist Health Tehachapi Valley

Hospital Identifying Information



Number of Beds: 25

Mailing Address: 111 Magellan Drive, Tehachapi, CA 93561

Contact Information: Kiyoshi Tomono, Partnership Executive, email: tomonock@ah.org

Existing healthcare facilities that can respond to the health needs of the community:

1. **Adventist Health Tehachapi Valley:**
111 Magellan Drive
Tehachapi, CA 93561
2. **Adventist Health Medical Office-Mojave:**
2041 Belshaw St.
Mojave, CA 93501
3. **Adventist Health Medical Office-Tehachapi:**
105 W. "E" Street
Tehachapi, CA 93561
4. **Adventist Health Medical Office-California City:**
9350 N. Loop Blvd. A
California City, CA 935

Community Health Development Team



Jeff Lingerfelt

President Adventist Health Tehachapi
Valley



Kiyoshi Tomono,

Vice President, Partnership

CHNA/CHP contact:

Kiyoshi Tomono
Vice President, Partnership
PO Box 2615
Bakersfield, CA 93303
Phone: 661-869-6187
Email: Tomonock@ah.org

Request a paper copy from Administration/President's office. To provide comments or view electronic copies of current and previous community health needs assessments go to: <https://www.adventisthealth.org/about-us/community-benefit/>

Invitation to a Healthier Community

Fulfilling the Adventist Health Mission

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

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

Identified Community Needs

The results of the 2018 CHNA guided the creation of this document and aided us in how we could best provide for our community and the most vulnerable among us. As a result, Adventist Health Tehachapi Valley has adopted the following priority areas for our community health investments for 2019-2021:

- Access to Health Care
- Asthma
- Cancer

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

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

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

2019 Community Benefit Update

In 2018, Adventist Health Tehachapi, conducted a community health needs assessment and was followed by a 2019 Community Health Plan (Implementation Strategy) that identified the priority needs listed below. The prioritized needs were chosen based on community health data and the voices of our community. Working together with our community is key to achieving the necessary health improvements to create the communities that allow each member to have safe and healthy places to live, learn, work, play, and pray. Below you will find an inventory of additional interventions supporting the health of our communities.

Priority Need – Access to Health Care

Intervention: **Children’s Mobile Immunization Program**

Since 1996, Adventist Health Bakersfield has been providing free immunizations to Kern County children as part of our commitment to community health. Today, we’re the only health care system in the area that offers a mobile immunization clinic. Each year we provide about 16,500 vaccinations to local children under age 18. The program is funded through a grant from First 5 Kern.

- Number of Community Members Served: 2,418

Intervention: **Tehachapi Apple Festival** where health information and free first aid kits were distributed. Community members served: 500

Partners

- **First 5 Kern**
- **Community Action Partnership of Kern**
- **Greenfield Family Resource Center**
- **Tehachapi Unified School District**
- **Kern County Department of Human Services**

2019 Impact

Objective	2018 Baseline Measurement	2019 Performance Target	2019 Actual	Indicator	Data Source
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CMIP					
Increase percentage of kids who are vaccinated at area schools to 96%	1,852	1,152	1,782	Total patients (0-18 years old)	First 5 Kern
	896	N/A	636	Total patients (19+ years old)	First 5 Kern
	164	96	145	Total Clinics	First 5 Kern
	172	20	655	Hemoglobin Testing	First 5 Kern

Priority Need – Cancer

Intervention: **AIS Cancer Center Screenings/Outreach**

Adventist Health AIS Cancer Center values a broad range of partnerships with community organizations to provide effective cancer awareness outreach and screenings. Throughout 2019, the AIS Cancer Center hosted scores of events through the community to provide awareness and access. AIS hosts an annual event called ‘VIPink,’ which focuses on breast cancer awareness. Event includes informative dialogue with clinicians, health professionals, cancer survivors, caregivers, and advocates. Also, in 2019, the AIS Cancer Center held its inaugural ‘Shave the Date’ event around men’s health. The event brought awareness to prostate cancer, testicular cancer, mental health and suicide prevention in addition to general wellness.

- Number of Community Members Served: 6,772

Intervention: **Community Health Fair & Senior Resource Day**

This event was targeted to the public, and specifically seniors, and offered services including blood draw/lab testing and mammogram appointments. The free event also includes preventative and other health-related information.

- Number of Community Members Served: 200

Intervention: **Cancer Support Groups**

Monthly support groups for those diagnosed with and recovering from cancer.

- Number of Community Members Served: 30

Partners

- **American Heart Association Kern County**
- **Kern County Public Health**

- **Community Action Partnership of Kern County (CAPK)**
- **Edible Schoolyard Kern County**

Objective	2018 Baseline Measurement	2019 Performance Target	2019 Actual	Indicator	Data Source
AIS Cancer Center	2,857	200	253	Number of patients screened at community events	AIS Cancer Center
	1,505	3,000	6,519	Number of attendees served at cancer prevention and survivorship programs	AIS Cancer Center
Heart Disease/Stroke					
Provide screening for cholesterol, blood glucose, BMI, blood pressure at various health fairs	N/A	N/A	500	Number of people screened at Downtown Farmers Market, Community Health Fair and Senior Resource Day	Adventist Health Tehachapi

Fair inspires health, wholeness and hope



Nick Smirnoff / For Tehachapi News

Adventist Health Tehachapi Valley hosted its third annual Community Health Fair & Senior Resource Day, this time on the grounds of the new hospital.

Adventist Health promoted the health and wellness of the citizens in the community with everything from free flu shots to various medical screenings. Smoking cessation information along with stroke and cardiac education was available.

A sweet potato fry cooking demonstration by the hospital's chef was a fun feature. People at more than 30 health-related booths were on hand to inform people of all ages about resources for various health and quality-of-life concerns.

One of the highlights this year was the Sidewalk Emergency CPR demonstration put on by Kern County Public Health.

Multiple local sponsors including Adventist Health Tehachapi Valley, Wood Family Funeral Service and The Loop Newspaper helped put on the five-hour event.



Priority Need: Asthma

Intervention: **Downtown Farmers Market**

The Tehachapi Farmer's Market was held on Green Street in Downtown Tehachapi and was open to the public. The market included fresh produce and Adventist Health Tehachapi Valley dietitians were on hand at many markets to help educate shoppers about the importance of a healthful diet. Staff also provided smoking cessation information and offered biometric screening tests.

- Number of Community Members Served: 300

Other Community Benefits

Intervention: **Financial/Volunteer Support of the Homeless Point in Time Count**

Since January 2017, Kern County's homeless population has grown by 95%, largely driven by a dramatic 273% increase in unsheltered people. The Bakersfield Kern Regional Homeless Collaborative attributes these successive annual increases in homelessness to rising housing costs that have exceeded growth in wages, and to a critical shortage of affordable housing that reached a tipping point several years ago, both in Kern County and most other areas of California. The PIT Count has become an enormous management challenge, in terms of financial, logistical, technical, volunteer recruitment, training, and public relations aspects. This is even more challenging in an 8,000-square-mile county with a large urban area, 10 small cities, and more than 30 unique rural communities.

- Number of Community Members Served: 1,580 homeless individuals counted

Intervention: **California Landlords' Summit on Homelessness**

Adventist Health Bakersfield and Adventist Health Tehachapi Valley partnered with the California Landlords' Summit on Homelessness, an innovative landlord outreach program. Low housing supply has consistently been identified as a driver of homelessness. Kern County's own tight rental housing market makes it difficult to place voucher holders in permanent housing. As a result, many landlords have never considered participating in housing voucher programs. This situation was specifically identified as a major barrier facing Kern County's 10-year plan to end homelessness. It is a problem commonly encountered across California.

Additionally, The United States Interagency Council on Homelessness has identified landlord engagement as a crucial element in COVID-19 response. Given Kern County's serious shortage of affordable housing units and persistently low rental vacancy rates, strong landlord relationships are now more important than ever for the continuum of care. CLSH helps to overcome this last mile barrier to housing by educating landlords and property managers on the business and community benefits of renting to tenants currently experiencing homelessness. This opens a supply of units that would otherwise not have been available to voucher holders.

- Number of Community Members Served: 94 people housed, 84 rental housing units pledged



Intervention: City Serve Support Services

Adventist Health Bakersfield and Adventist Health Tehachapi Valley partnered with CityServe, a collaborative network of community organizations and churches connected to enable transformation in our city. CityServe resources local churches with tangible goods and capacity building, so they can reach the most vulnerable in our neighborhoods. When needs are met, relationships can be built that lead to transformation. In just two years, CityServe efforts are making a difference in the lives of families, women, veterans, and children. In 2019, they sent 210 truckloads of surplus goods from major retailers and distributed them to 109 churches in Kern County of all denominations to meet real, felt needs.

- Number of Community Members Served: 20,000 Kern County households impacted

Partners

- **Bakersfield-Kern Regional Homeless Collaborative**
- **Bakersfield Homeless Center**
- **Mission at Kern County**
- **Bakersfield College**
- **City Serve**
- **Income Property Association of Kern County**

2019 Impact

Objective	2018 Baseline Measurement	2019 Performance	2019	Indicator	Data Source
		Target	Actual		
Point in Time Count	1,330	N/A	1,580	Total number of homeless individuals	Bakersfield-Kern Regional Homeless Collaborative
Data to be used to drive work of Bakersfield-Kern Homeless Collaborative	805	N/A	1,004	Number of Unsheltered Individuals	Bakersfield-Kern Regional Homeless Collaborative



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California Landlords Summit	60	75	84	Rental Units Pledged	Income Property Association of Kern
Increase housing supply, a key driver in Kern homelessness	N/A	N/A	94	Clients Housed	Income Property Association of Kern report

City Serve Support Services					
Serve vulnerable families in crisis through collaborative network of churches	210	300	350	Truckloads of goods distributed	City Serve
	18,000	19,000	20,000	Kern households served	City Serve



The Need for CLSH
 Inspiration



“The California Landlords’ Summit on Homelessness was started out of my frustration with being unable to find housing for a homeless former foster youth named Ricky. As part of the Housing Authority’s transitional housing program for foster youth, Ricky had already completed a number of milestones to receive a housing voucher. He found a job, got transportation, and saved up for a deposit. He was ready to transition into independent living, and would have made an ideal tenant for any landlord. Unfortunately, the system failed Ricky at the exact moment he should have become a success. Every voucher recipient has a limited window of time to find housing before they lose their voucher. While searching for housing he encountered landlords that would refuse or delay his application because of his short rental history as a foster youth. The delays added up, so Ricky ended up losing his voucher. Devastated at the prospect of having to start his journey all over again to get another shot at housing, Ricky just lost all hope and wound up back in homelessness. His current whereabouts are unknown. This angered me and I thought we needed to get a meeting with this landlord to explain the programs and advocate for clients like Ricky. My assistant Monique Davis thought we could do a bigger meeting with not just this landlord but a few others that denied participants due to their homeless status. So, the idea for CLSH was born. IPAK began planning a conference for landlords, property managers, and developers that would educate them on the programs available to house homeless clients. We made sure, though, to show them why it was not just a benefit for the community but why it is a sound business decision to work with homeless tenants. We knew this event would be a success, but we were not prepared for how much demand there is for this kind of landlord outreach.”

Mardi Sharples
President, Income Property Association of Kern

Intervention: Mobile Kitchen Project (Edible Schoolyard Kern County)

The Edible Schoolyard Kern County provides hands-on learning experiences in garden and kitchen classrooms, to introduce and reinforce a healthy lifestyle for students in Kern County. In 2019, in partnership with Adventist Health Bakersfield and Kaiser Permanente Kern County, the Edible Schoolyard Kern County launched a mobile kitchen education platform, to bring the same hands-on lessons to remote and rural locations. The goal was to provide a unique experience to 800 students at 8 locations during the first year with opportunities in year 2 to expand outreach to other Boys and Girls Club sites. The program addresses diabetes and adolescent obesity by transferring preventative knowledge and providing farm-to-table experiences that increase student familiarity, recognition, and tasting of fruits and vegetables.

- Number of Community Members Served: 600

Partners

- **Grimm Family Education Foundation (Edible Schoolyard Kern County)**



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- **Kaiser Permanente Kern County**
- **Kern County Public Health Department**
- **City Serve**

2019 Impact

Objective	2018 Baseline Measurement	2019 Performance Target	2019 Actual	Indicator	Data Source
Mobile Kitchen Project					
Change in attitude towards healthy foods	N/A (Program launched in 2018)	N/A	600	Events Attended	Edible School Yard Kern County
				Students Served	Edible School Yard Kern County



Changes in 2019

The Community Health Needs Assessment requires that each hospital listen to the voices of the communities they serve. Beginning in 2018 and continuing through 2019, Adventist Health Tehachapi Valley participated in a collaborative Community Health Needs Assessment which would allow them to align the CHNA assessment period with other Adventist Health facilities as well as enable them to be part of the local Kern County Community Benefit Collaborative.

As Adventist Health Tehachapi Valley was comparing primary data and secondary data from the 2019 CHNA in order to determine primary focus areas for the 2020-2022 Implementation Strategy it became evident that the 2019 community benefit operations would need to reflect immediate changes. Those changes would include focusing on housing/homelessness, food insecurity, preventative practices and overweight/obesity.

Those new priority areas were addressed in 2019 and are included in this report. Asthma had been adopted as a priority but due to the shift in focus areas allowed very few resources to be devoted to asthma. However, a mobile medical unit will be available in rural areas of Kern County starting in 2020.



Connecting Strategy and Community Health

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

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

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

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

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

Improving population health requires effective initiatives to:

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

Our mission as a health system is Living God's love by inspiring health, wholeness and hope, we believe the best way to re-imagine our future business model with a major emphasis of community health is by working together with our community.

Community Benefit

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

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