ARIZONA
SPINE & JOINT
HOSPITAL





Arizona Spine and Joint Hospital Community Health Implementation Strategy 2016 – 2018

TABLE OF CONTENTS

Executive Summary	2
Mission, Vision, and Values	4
Our Hospital and Our Commitment	5
Description of the Community Served	7
Implementation Strategy Development Process Community Health Needs Assessment Process CHNA Significant Health Needs Creating the Implementation Strategy Planning for the Uninsured/Underinsured Patient Population	12 13 15 16
2016-2018 Implementation Strategy Strategy and Program Plan Summary Anticipated Impact Planned Collaboration Program Digests	17 20 21 22
Appendices	
Appendix A: Community Board and Committee Rosters	28
Appendix B: Other Programs and Non-Quantifiable Benefits	32
Appendix C: Financial Assistance Policy Summary	33
Appendix D: Community Building Activities	35

EXECUTIVE SUMMARY

Established in 2002, Arizona Spine & Joint Hospital (ASJH) is an award-winning orthopedic specialty hospital offering outpatient and elective inpatient services for orthopedic, spine, podiatry and pain management patients. The hospital is majority-owned and operated by a team of local physicians with a shared mission of delivering superior health care at affordable rates. Our physicians have invested personally, professionally and financially to create a hospital that allows them to focus on what matters most, the patients. Their staff provides care in an environment that promotes wellness and rapid recovery. With four operating rooms and two pain treatment rooms, our 23-bed facility provides patients with the latest technology and all the ancillary services associated with larger, full-service hospitals.

Arizona Spine and Joint Hospital is an affiliate of Dignity Health St. Joseph's Hospital and Medical Center (SJHMC), a tax-exempt 501(c)3 organization. Since 1895, SJHMC has delivered high-quality, affordable, health care services in a compassionate environment that meets each patient's physical, mental and spiritual needs. Upholding the core values of dignity, justice, stewardship, collaboration, and excellence, our healing philosophy serves not just our patients, but our staff, our communities, and our planet.

Dignity Health defines the community served by a hospital as those individuals residing within its primary and secondary service areas. For this report the focus will be on the primary service area of ASJH. The primary service area includes all residents in a defined geographic area surrounding the hospital and does not exclude low-income or underserved populations. The primary service area for ASJH includes the zip codes making up the top 75% of the total patient cases.

The City of Mesa is primarily served by ASJH. Surrounding communities also being served by ASJH include the surrounding communities include Gilbert, Mesa, Tempe, Ahwatukee, Florence Chandler, Sacaton, Apache Junction, Casa Grande, Pinal County, Gila River Indian Reservation, and Guadalupe.

According to the Community Need Index (CNI), a proprietary tool developed by Dignity Health, the primary service area includes both moderate and high-risk areas with significant socio-economic barriers. Zip code areas with the highest risks include zip code areas with the highest risks include 85201, 85202, 85204, 85210, 85132, and 85120.² Arizona Spine & Joint Hospital will adopt its strategic initiatives within these zip codes and collaborate with St. Joseph's Hospital and Medical Center for delivery of these programs.

The 2016-2018 Community Health Improvement Strategy initiative will be entitled, "Growing <u>Together for Healthier Communities</u>". This strategy will provide the infrastructure to address the following goals:

- Provide evidence based prevention programs to address health and social issues that improve a person's health
- Create and increase connections to health and social services to improve health for individuals and their community
- Improve systems of delivery of care and collectively impact the community's health, safety, and well-being by collaborating with all sectors of the community.

A special focus will be emphasized on the key areas that were identified through the 2016 Community Health Needs Assessment (CHNA). The significant community health needs identified are:

- Access to Health Services
- Mental/Behavioral Health and Substance Abuse
- Diet-Related Disease Obesity
- Chronic Health Conditions (Respiratory Illness (Asthma, COPD, Lung Disorders, Cancer)
- Injury and Trauma

Arizona Spine and Joint Hospital, in collaboration with St. Joseph's Hospital and Medical Center, St. Joseph's Westgate, and joint venture Arizona Orthopedic and Surgical Hospital will work closely with Maricopa County Department of Health, Arizona Department of Health and Service, other Hospitals in Maricopa County, along with nonprofit organizations, for profit organizations, concerned citizens and patients to provide comprehensive supports and preventive services for the significant community health needs identified in the 2016 Community Health Needs Assessment. The Arizona Spine and Joint Hospital can serve as the convener, collaborators and lead agency for complex health and social issues impacting the community. It will serve as a "community hub" that will connect the health needs of its patients, community and agencies in an integrated manner through the implementation of the "2MATCH" (To Match through Community Hub) program to further enhance the work in the "Growing Together for Healthier Communities" initiative.

The 2016-2018 Community Health Implementation Strategies will focus on improving access to health and human services through comprehensive integrations of services both in the community and within the clinical settings to create a seamless continuum of care while utilizing the strategies outline in the "National Prevention Strategy America's Plan for Better Health and Wellness" (June 16, 2011) (http://www.surgeongeneral.gov/priorities/prevention/strategy/report.html

This document is publicly available https://www.azspineandjoint.com. The report was presented to the public in an open forum and announced to the public through social media and printed information. Written comments on this report can be submitted to the contacting the Community Health Office by calling 602-406-2288 or e-mail at CommunityHealth-SJHMC@DignityHealth.org.

DIGNITY HEALTH MISSION, VISION AND VALUES

Our Mission

We are committed to furthering the healing ministry of Jesus. We dedicate our resources to:

- Delivering compassionate, high-quality, affordable health services;
- Serving and advocating for our sisters and brothers who are poor and disenfranchised; and
- Partnering with others in the community to improve the quality of life.

Our Vision

A vibrant, national health care system known for service, chosen for clinical excellence, standing in partnership with patients, employees, and physicians to improve the health of all communities served.

Our Values

Dignity Health is committed to providing high-quality, affordable healthcare to the communities we serve. Above all else we value:

Dignity - Respecting the inherent value and worth of each person.

Collaboration - Working together with people who support common values and vision to achieve shared goals.

Justice - Advocating for social change and acting in ways that promote respect for all persons.

Stewardship - Cultivating the resources entrusted to us to promote healing and wholeness.

Excellence - Exceeding expectations through teamwork and innovation.

Hello humankindness

After more than a century of experience, we've learned that modern medicine is more effective when it's delivered with compassion. Stress levels go down. People heal faster. They have more confidence in their health care professionals. We are successful because we know that the word "care" is what makes health care work. At Dignity Health, we unleash the healing power of humanity through the work we do every day, in the hospital and in the community.

Hello humankindness tells people what we stand for: health care with humanity at its core. Through our common humanity as a healing tool, we can make a true difference, one person at a time.

OUR HOSPITAL AND OUR COMMITMENT

HOSPITAL DESCRIPTION

Established in 2002, Arizona Spine & Joint Hospital (ASJH) is an award-winning orthopedic specialty hospital offering outpatient and elective inpatient services for orthopedic, spine, podiatry and pain management patients. The hospital is majority-owned and operated by a team of local physicians with a shared mission of delivering superior health care at affordable rates. Our physicians have invested personally, professionally and financially to create a hospital that allows them to focus on what matters most, the patients. Their staff provides care in an environment that promotes wellness and rapid recovery. With four operating rooms and two pain treatment rooms, our 23-bed facility provides patients with the latest technology and all the ancillary services associated with larger, full-service hospitals.

OUR COMMITMENT

Rooted in Dignity Health's mission, vision and values, Arizona Spine & Joint Hospital is dedicated to improving community health and delivering community benefit with the engagement of its management team, Board of Directors, and in collaboration with the St. Joseph's Hospital and Medical Center's Community Health Integration Network (CHIN). The board and committee are composed of community members who provide stewardship and direction for the hospital as a community resource.

Arizona Spine & Joint Hospital in collaboration with St. Joseph's Hospital and Medical Center (SJHMC) and its affiliates, are committed to meeting the health needs of the community by ensuring implementation of successful programs that meet the specific needs of the people within the community. Success is achieved through assessment of community needs, involvement of key hospital leaders, and implementation of community benefit activities. Organizational and community commitment involves Dignity Health's and ASJH, Executive Leadership Team, Community Health Integration Network, Community Board, ASJH's Board of Directors, and Community Benefit Department.

Executive Leadership Team: The Arizona Spine and Joint Hospital's and St. Joseph's Hospital and Medical Center's Executive Leadership Teams are responsible for reviewing the Community Health Implementation Strategy prior to presentation and approval by the Board of Directors in alignment and collaboration with SJHMC. The Executive Leadership Team's contribution to the implementation strategies include helping to identify prioritized needs, and reviewing alignment of the Community Health Implementation Strategy with the Community Health Needs Assessment (CHNA), the Hospital 's overall strategic plan, and budgeting for resources.

Community Health Integration Network (CHIN): This is a committee of St. Joseph's Hospital and Medical Center's Community Board and is chaired by a member of the Community Board. CHIN is responsible for reviewing the CHNA and CHIS, prior to approval from the board. They, along with representatives from Arizona Spine & Joint Hospital, recommend health priorities and recommend implementation strategies to the Board of Directors, along with SJHMC Community

Board for approval, aid in implementation, and project outcomes from the CHIS. Please refer to Appendix A for a complete list of current board members.

Board of Directors and Community Board: The Arizona Spine and Joint Hospital Board of Directors in collaboration with SJHMC Community Board is responsible for the oversight, adoption of the CHNA, Implementation Strategy and approval of the CHNA and the Community Health Implementation Strategy (CHIS), along with budgeting, monitoring and ensuring the success of the plan's outcomes. The Arizona Spine & Joint Hospital Board of Directors in collaboration with SJHMC Community Board is also committed to bettering the community. Please refer to Appendix A for a complete list of current board members.

SJHMC Community Health Integration/Benefit Department: The Community Health Integration/Benefit Department, under the Vice President of Mission Integration, is accountable for planning, implementing, evaluating, reporting, and ultimately for the success of designated programs. The Community Health Integration/Benefit Department is directly responsible for the CHNA, Community Health Implementation Strategy, Dignity Health Community Grants Program, program implementation, evaluation and monitoring, community collaboration, and reporting of community benefit activities. Key staff positions include: Director of Community Health Integration and Community Benefit, Community Benefit Specialist, and Community Health/Benefit Coordinator.

Arizona Spine & Joint Hospital, along with, St. Joseph's Hospital and Medical Center's community benefit program includes financial assistance provided to those who are unable to pay the cost of medically necessary care, unreimbursed costs of Medicaid, subsidized health services that meet a community need, and community health improvement services. Our community benefit also includes monetary grants we provide to not-for-profit organizations that are working together to improve health on significant needs identified in our Community Health Needs Assessment. Many of these programs and initiatives are described in this report.

Dignity Health Arizona also invested \$421,753.00 in community grants to provide funding for collaborative engagement and programs to the nonprofit community to work on the areas of need identified in the CHNA and Community Health Implementation Strategy.

DESCRIPTION OF THE COMMUNITY SERVED

The geographic area for this CHNA is Maricopa County, the common community for all partners participating in the Maricopa County Coordinated Health Needs Assessment collaborative (CCHNA). However, Arizona Spine and Joint Hospital's primary service area specific information will also be provided when available.

Maricopa County is the fourth most populous county in the United States. With an estimated population of four million and growing, Maricopa County is home to well over half of Arizona's residents. Maricopa County encompasses 9,224 square miles, includes 27 cities and towns, as well as the whole or part of five sovereign American Indian reservations.

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The City of Mesa is primarily served by ASJH. Surrounding communities also being served by ASJH include the surrounding communities include Gilbert, Mesa, Tempe, Ahwatukee, Florence Chandler, Sacaton, Apache Junction, Casa Grande, Pinal County, Gila River Indian Reservation, and Guadalupe.

According to the Community Need Index (CNI), a proprietary tool developed by Dignity Health, the primary service area includes both moderate and high-risk areas with significant socio-economic barriers. Zip code areas with the highest risks include. Zip code areas with the highest risks include 85201, 85202, 85204, 85210, 85132, and 85120.

Demographic and Socioeconomic Profile

Primary Care Area (PCA) Statistical Profiles are revised annually and provide detailed information on the demographics, health resources, hospital utilization, and health status indicators in defined geographic areas throughout Arizona. According to the Arizona Department of Health Services (ADHS), the Phoenix area where Arizona Spine & Joint Hospital is located has been federally designated as a Medically Underserved Area. More than half of the population of Arizona Spine & Joint Hospital's primary service area is adults between 20-64 years of age. Nearly 27% of residents do not have a high school diploma, and approximately 25% are without health insurance. These data show that the population as a whole is majority non-White, and with a median income below Maricopa County and the state of Arizona. Table 1 provides the specific age, sex, and race/ethnicity distribution and data on key socio-economic drivers of health status of the population in Arizona Spine & Joint Hospital's primary service area compared to Maricopa County and the state of Arizona.

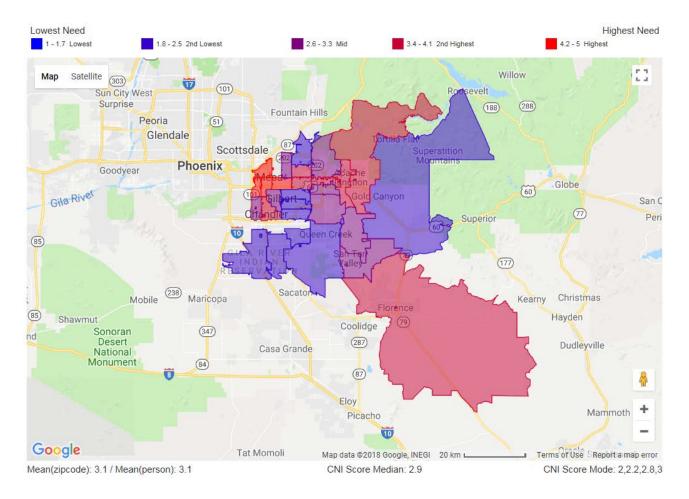
Table 1: Population Demographics

	ASJH PSA	Maricopa County	Arizona
Population: estimated 2017	493,089	3,947,382	6,561,516
Gender			
• Male	49.7%	49.4%	49.7%
• Female	50.2%	50.6%	50.3%
Age			
• 0 to 9 years	14.3%	14.2%	13.9%
• 10 to 19 years	13.4%	14.1%	13.8%
• 20 to 34 years	21.4%	21.3%	20.5%
• 35 to 64 years	22.4.0%	37.4%	37.0%
• 65 to 84 years	16.8%	11.4%	13.1%
• 85 years and over	1.6%	1.6%	1.7%
Race			
• White	77.5%	80.0%	78.9%
Asian/Pacific Islander	2.7%	3.9%	3.1%
Black or African American	4.0%	5.2%	4.2%
American Indian/Alaska Native	2.7%	1.9%	4.4%
• Other	12.2%	6.0%	6.3%
• 2 or more races	4.0%	3.0%	3.1%
Ethnicity			
 Hispanic 	28.3%	29.9%	30.1%
Median Income	\$58,626	\$53,596	\$49,774
Uninsured	13.8%	17.2%	16.8%
Unemployment	7.3%	6.1%	6.3%
No HS Diploma	9.6%	13.6%	14.3%
Limited English Proficiency	3.5%	10%	9.5%
Renters	30.6%	37.5%	35.6%
Medicaid Patients	10.8%	13.8%	20.0%
CNI Score	3.1	3.4	
Medically Underserved Area	Yes		

Community Need Index

One tool used to assess health need is the Community Need Index (CNI) created and made publicly available by Dignity Health and Truven Health Analytics. The CNI analyzes data at the zip code level on five factors known to contribute or be barriers to health care access: income, culture/language, education, housing status, and insurance coverage. Scores from 1.0 (lowest barriers) to 5.0 (highest barriers) for each factor are averaged to calculate a CNI score for each zip code in the community. Research has shown that communities with the highest CNI scores experience twice the rate of hospital admissions for ambulatory care sensitive conditions as those with the lowest scores.

Primary Service Area CNI scores



Zi	Code	CNI Score	Population	City	County	State
	85118	2.2	13607	Gold Canyon	Pinal	Arizona
	85119	3.6	21591	Apache Junction	Pinal	Arizona
	85120	4	30129	Apache Junction	Pinal	Arizona
	85132	4	34794	Florence	Pinal	Arizona
	85140	2.6	45363	San Tan Valley	Pinal	Arizona
	85142	2.4	61080	Queen Creek	Maricopa	Arizona
	85143	3	41570	San Tan Valley	Pinal	Arizona
	85201	4.4	49834	Mesa	Maricopa	Arizona
	85202	4.2	40384	Mesa	Maricopa	Arizona
	85204	4.4	66119	Mesa	Maricopa	Arizona
	85205	3.4	42519	Mesa	Maricopa	Arizona
	85206	3.4	36329	Mesa	Maricopa	Arizona
	85207	2.8	50600	Mesa	Maricopa	Arizona
	85208	3.6	38515	Mesa	Maricopa	Arizona
	85209	3	43057	Mesa	Maricopa	Arizona
	85210	4.8	38049	Mesa	Maricopa	Arizona
	85212	2.6	32638	Mesa	Maricopa	Arizona
	85213	2.8	32932	Mesa	Maricopa	Arizona
	85215	2.2	16940	Mesa	Maricopa	Arizona
	85224	3	45643	Chandler	Maricopa	Arizona
	85225	3.8	73970	Chandler	Maricopa	Arizona
	85233	2.8	39535	Gilbert	Maricopa	Arizona
	85234	2.4	53095	Gilbert	Maricopa	Arizona
	85248	2	35380	Chandler	Maricopa	Arizona
	85249	1.8	46837	Chandler	Maricopa	Arizona
	85295	2.2	48917	Gilbert	Maricopa	Arizona
	85296	2	44414	Gilbert	Maricopa	Arizona
	85298	2	30241	Gilbert	Maricopa	Arizona

85224	2.8	44774	Chandler	Maricopa	Arizona
85225	4	71319	Chandler	Maricopa	Arizona
85226	2.6	39457	Chandler	Maricopa	Arizona
85233	2.8	38565	Gilbert	Maricopa	Arizona
85234	2.6	51866	Gilbert	Maricopa	Arizona
85248	2.2	33226	Chandler	Maricopa	Arizona
85250	2.4	15722	Scottsdale	Maricopa	Arizona
85251	3.2	34971	Scottsdale	Maricopa	Arizona
85253	1.8	16930	Paradise Valley	Maricopa	Arizona
85254	2.2	45803	Scottsdale	Maricopa	Arizona
85255	2.2	43797	Scottsdale	Maricopa	Arizona
85257	4	27742	Scottsdale	Maricopa	Arizona
85258	2.6	23750	Scottsdale	Maricopa	Arizona
85259	2	21524	Scottsdale	Maricopa	Arizona
85260	2.6	37642	Scottsdale	Maricopa	Arizona
85262	1.4	13947	Scottsdale	Maricopa	Arizona
85266	1.6	12822	Scottsdale	Maricopa	Arizona
85268	2	24545	Fountain Hills	Maricopa	Arizona
85282	3.6	50161	Tempe	Maricopa	Arizona
85283	3.8	45033	Tempe	Maricopa	Arizona
85286	2.4	45310	Chandler	Maricopa	Arizona
85296	2	41459	Gilbert	Maricopa	Arizona
85301	5	61086	Glendale	Maricopa	Arizona
85302	3.8	37500	Glendale	Maricopa	Arizona
85303	4.6	33786	Glendale	Maricopa	Arizona
85304	3	26773	Glendale	Maricopa	Arizona
85308	2.6	65035	Glendale	Maricopa	Arizona
85326	4	61835	Buckeye	Maricopa	Arizona
85331	1.6	30097	Cave Creek	Maricopa	Arizona
85338	3	49933	Goodyear	Maricopa	Arizona
85340	3	31650	Litchfield Park	Maricopa	Arizona
85345	4	59844	Peoria	Maricopa	Arizona
85351	2.8	28142	Sun City	Maricopa	Arizona
85374	2.8	46014	Surprise	Maricopa	Arizona
85382	2.4	44000	Peoria	Maricopa	Arizona
85383	1.6	44476	Peoria	Maricopa	Arizona
85392	3.8	39418	Avondale	Maricopa	Arizona
85395	2.6	31175	Goodyear	Maricopa	Arizona
85541	3.2	22408	Payson	Gila	Arizona

Implementation Strategy Development Process

The Arizona Spine & Joint Hospital engages in multiple activities to conduct its community benefit and community health improvement planning process. These include, but are not limited to: conducting a Community Health Needs Assessment with community input at least every three years; using five core principles to guide planning and program decisions; measuring and tracking program indicators; and engaging the Community Health Integration Network (CHIN) and other stakeholders in the development of the annual community benefit plan and triennial Implementation Strategy.

Community Health Needs Assessment Process

In June 2018, Arizona Spine & Joint Hospital approved the 2016 Community Health Needs Assessment (CHNA) that was based on a process conducted with several other hospitals. The CHNA was conducted in 2015 as a collaboration with Maricopa County Department of Public Health (MCDPH) conducted a comprehensive assessment of the health needs of the resident of Maricopa County, as well as those in their the primary and secondary service areas.

The process of conducting this assessment began with a review of approximately 100 indicators to measure health outcomes and associated health factors of Maricopa County residents. The indicators included demographic data, social and economic factors, health behaviors, physical environment, health care, and health outcomes. Health needs were identified through the combined analysis of secondary data and community input. Based on the review of the secondary data, a consultant team developed a primary data collection guide used in focus groups which were made up of representatives of minority and underserved populations who identified community concerns and assets. Surveys were collected from key informants to help determine community needs and priorities. Additionally, meetings were held with stakeholders from the Community Health Integration Network (CHIN) and Arizona's Communities of Care Network (ACCN) to assist with the analysis and interpretation of data findings.

Quantitative data used in the report were high quality, population-based data sources and were analyzed by MCDPH, Office of Epidemiology. Data came from local, state, and national sources such as the Maricopa County Department of Public Health, Arizona Department of Health Services, Arizona Criminal Justice Commission, U.S. Census Bureau, U.S. Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System survey, Youth Risk Behavior survey, and St. Joseph's Hospital and Medical Center's Fiscal Year 2015, Prevention Quality Indicators.

The CHNA utilized a mixed-methods approach that included the collection of secondary or quantitative data from existing data sources and community input or qualitative data from focus groups, surveys, and meetings with community stakeholders. The process was reiterative as both the secondary and primary data were used to help inform each other. The advantage of using this approach is that it validates data by cross-verifying from a multitude of sources.

The complete CHNA report is publicly available at: https://www.azspineandjoint.com.

Process and Criteria for Prioritization

To be a considered a health need, a health outcome or a health factor had to meet two criteria; first, existing data had to demonstrate that the primary service area had a health outcome or factor rate worse than the average Maricopa County rate, demonstrate a worsening trend when compared to Maricopa County data in recent years, or indicate an apparent health disparity; second, the health outcome or factor had to be mentioned in a substantial way in at least two primary data collection sources which were focus groups, surveys, or stakeholder meetings.

The process for prioritization included engagement with both internal stakeholders and community partners from the CHIN and ACCN (See Appendix A for list of participating organizations). The first step of the process was a comprehensive presentation by MCDPH that included an overview of the CHNA findings and key emerging health needs. Throughout the presentation, stakeholders in attendance responded to survey questions that would later be used during strategy sessions to identify health priorities. After completion of the presentation, stakeholders were given the opportunity to provide additional feedback and recommendations. The second step in the process involved review and prioritization of the key emerging health needs outlined in the MCDPH presentation. A Dignity Health Six Sigma expert led the sessions using a 4-square, priority/benefit matrix. The X axis showed the level of effort required to address a particular health need whereas the Y axis showed the benefit to the community by addressing the health need. As participants discussed each health need, consideration was given to the size of the problem, disparity and equity, known effective interventions, resource feasibility and sustainability, and community salience. Through consensus, participants made final recommendations to Arizona Spine & Joint Hospital for priority health needs.

The process for prioritization included engagement with both internal stakeholders and community partners from the CHIN and ACCN (See Appendix A for list of participating organizations). The first step of the process was a comprehensive presentation that included an overview of the CHNA findings and key emerging health needs. Stakeholders in attendance of the January 2016 Arizona Community of Care Network meeting completed a SOAR (Strengths, Opportunities, Aspirations, and Results) Analysis that would later be used during strategy sessions to determine the implementation strategies. The ACCN identified areas and programs that they will collaborate with the hospital and community to create healthier and sustainable communities. CHIN members received an overview of these implementation strategies at the March 2016 meeting, and were given the opportunity to provide feedback and additional comments.

CHNA Significant Health Needs

The following statements summarize each of the CHNA significant health needs, and are based on data and information gathered through the CHNA.

Access to Care

Community members and key informants overwhelmingly felt that access to care is an important issue for the community. Within Arizona Spine and Joint Hospital's primary service area, one out

of every six residents lack health insurance.³ additionally, there are disparities experienced across members of certain racial/ethnic backgrounds, with Hispanics and American Indians being least likely to have insurance. The number of adults reporting they have a usual source of health care is decreasing, with one out of every three reporting they do not have a regular doctor they see for care.

Mental/Behavioral Health and Substance Abuse

Mental health was ranked as the most important health problem impacting the community by key informants and focus group participants. Mental health is among the top ten leading causes of emergency department visits and inpatient discharges for Arizona Spine and Joint Hospital's primary service area. Substance abuse was one of the top concerns for both focus group participants and key informants. Key informants listed alcohol and drug abuse as two of the riskiest health behaviors community members are engaging in.

Obesity (Diet Related Illnesses

Key informants felt that being overweight, poor eating habits and lack of exercise were among the top five risky health behaviors community members were engaging in. According to the 2013 Youth Risk Behavior survey, the number of obese high school students is increasing and now accounts for 13.7% of all students. The percentage of adults that report being overweight and obese on the Behavioral Risk Factor Surveillance System survey is decreasing. However, Hispanic residents continue to experience disparities related to obesity and in 2013, 34.1% reported being obese.

Chronic Conditions

Chronic Conditions identified include: respiratory illnesses (i.e. asthma, COPD, lung disorders), diabetes, cardiovascular disease, and cancer.

- Chronic lower respiratory conditions are the third leading cause of death
- Cardiovascular disease is second leading cause of death for Maricopa County and the primary service area.
- Respiratory Illness Chronic lower respiratory conditions are the third leading cause of death for Oasis Hospital's primary service area.¹⁰
- Diabetes: The number of deaths related to diabetes is decreasing in Maricopa County, but it is still the seventh leading cause of death in SJHMC's primary service area indicating a sustained health need.

Injury and Trauma

Unintentional injury is the sixth leading cause of death for Arizona Spine & Joint Hospital's primary service area. It is also the leading cause of emergency department visits and the second leading cause of inpatient discharges. Males are more likely to suffer from an unintentional injury with the exception of falls which are more prevalent among females. Focus group participants reported neighborhood safety as a significant community health concern. Injuries related to interpersonal violence can be attributed to unsafe neighborhoods and key informants felt neighborhood safety was among the top ten factors that would improve quality of life in the community.

Resources Potentially Available

The needs within the community are great and will require additional resources to assist the hospital and the communities reach its collective goals and objectives. Resources potentially available to address identified needs include services and programs available through Hospital s, government agencies, and community based-organizations. Resources include access to over 40 hospital s for emergency and acute care services, over 10 Federally Qualified Health Centers (FQHC), over 12 food banks, 8 homeless shelters, school-based health clinics, churches, transportation services, health enrollment navigators, free or low cost medical and dental care, and prevention-based community education.

The Arizona Communities of Care Network is a collaborative effort with diverse organizations participating in providing assistance to the community while directly collaborating with the hospital. Information on these efforts can be found by going to:

http://www.dignityhealth.org/stjosephs/about-us/community-benefit/arizona-community-of-care-network
The Health Improvement Partnership of Maricopa County (HIPMC) is also another collaborative effort between MCDPH and a diverse array of public and private organizations addressing healthy eating, active living, linkages to care and tobacco-free living. With more than 70 partner organizations, this is also a valuable to resource to help Arizona Spine and Joint Hospital connects to other community based organizations that are targeting many of the same health priorities. For more information go to:

 $\frac{http://www.arizonahealthmatters.org/index.php?module=Tiles\&controller=index\&action=display\\ \& alias=LandingPage}$

Significant Health Needs Not Being Addressed

The CHNA provides a wide-range of opportunities to serve the community and meet the growing needs it has to continue to be healthy, safe and well. Arizona Spine & Joint Hospital is an award-winning; physician owned and operated orthopedic specialty hospital. Our staff provides high quality care in an environment that promotes wellness and rapid recovery. With 4 operating rooms and 2 pain treatment rooms, the 23-bed facility provides patients with the latest technology and all the ancillary services associated with larger, full-service hospitals.

ASJH works closely with St. Joseph's Hospital and Medical Center as an acute care hospital is not licensed to provide care to children less than fifteen years of age within the hospital setting. With our collaborative engagement with Phoenix Children's Hospital, we are able to work collaboratively to meet the needs listed for children and also collaborate with the community where areas of need are unmet. The services that are not met by Arizona Spine & Joint Hospital and St. Joseph's Hospital and Medical Center are met by other health care facilities or collaborative partnerships within Maricopa County. Currently there are 32 hospitals, 14 specialty hospitals and 53 Federally Qualified Health Centers in Maricopa County that are also providing health and human services.

Creating the Implementation Strategy

As a matter of Dignity Health policy, the hospital's community health and community benefit programs are guided by five core principles. All of our initiatives relate to one or more of these principles:

- Focus on Disproportionate Unmet Health-Related Needs: Seek to address the needs of communities with disproportionate unmet health-related needs.
- **Emphasize Prevention**: Address the underlying causes of persistent health problems through health promotion, disease prevention, and health protection.
- Contribute to a Seamless Continuum of Care: Emphasize evidence-based approaches by
 establishing operational linkages between clinical services and community health
 improvement activities.
- **Build Community Capacity**: Target charitable resources to mobilize and build the capacity of existing community assets.
- **Demonstrate Collaboration**: Work together with community stakeholders on community health needs assessments, health improvement program planning and delivery to address significant health needs.

Planning for the Uninsured/Underinsured Patient Population

Financial Assistance Policy

Arizona Spine and Joint Hospital notifies and informs patients about the Financial Assistance Policy by offering a paper copy of the plain language summary of the Policy to patients as part of the intake or discharge process. At the time of billing, each patient is offered a conspicuous written notice containing information about the availability of the Policy.

Notice of the financial assistance program is posted in locations visible to the public, including the emergency department, billing office, admissions office, and other areas reasonably calculated to reach people who are most likely to require financial assistance from the hospital. The hospital provides brochures explaining the financial assistance program in registration, admitting, emergency and urgent care areas, and in patient financial services offices.

The Financial Assistance Policy, the Financial Assistance Application, and plain language summary of the Policy are widely available on the hospital's web site, and paper copies are available upon request and without charge, both by mail and in public locations of the hospital. Written notices, posted signs and brochures are printed and available online in appropriate languages.

The staff, visitors and community are made aware of the Financial Assistance Policy through a variety of methods, which include, but are not limited to Financial Assistance Policies being posted and made visible throughout the hospital, emergency department and outpatient settings. Information is provided in the prominent languages, English and Spanish in admitting areas of the hospital, outpatient services and community clinics. The Financial Assistance Policy is available on hospital's website. https://www.azspineandjoint.com/financial-assistance/. The hospital's patient financial services work diligently to ensure that patients, visitors and the community are aware of the opportunities available to them through community resources and governmental programs, which include, but not limited to Medicaid (AHCCCS), KidsCare (SCHIP program), Federal Emergency Services, Marketplace, Medicare, and free and federally qualified clinics that can provide assistance beyond Dignity Health Financial Assistance Program.

2016-2018 Implementation Strategy

This section presents strategies, programs and initiatives the hospital intends to deliver fund or collaborate with others to address significant community health needs over the next three years. It includes summary descriptions, anticipated impacts, planned collaboration, and detailed "program digests" on select initiatives.

The strategy and plan specifies planned activities consistent with the hospital's mission and capabilities. The hospital may amend the plan as circumstances warrant. For instance, changes in significant community health needs or in community assets and resources directed to those needs may merit refocusing the hospital's limited resources to best serve the community.

STRATEGY AND PROGRAM PLAN SUMMARY

The following is a summary of the key programs and initiatives that have been a major focus of Arizona Spine and Joint Hospital's over the last year to address the identified and prioritized needs of the community. The key programs are continuously monitored for performance and quality with ongoing improvements to facilitate their success. The Community Health Integration Network (CHIN), Executive Leadership, the Board of Directors, Community Board and Dignity Health receive quarterly reports regarding the success of the key initiatives and community benefit reports.

Below are the major initiatives and key community based programs operated or substantially supported by with St. Joseph's Hospital and Medical Center's Implementation Strategy for 2016-2018 working in collaboration with St. Joseph's Westgate and its Joint Ventures Arizona Spine and Joint Hospital, Arizona Orthopedic and Surgical Hospital, OASIS Hospital and Arizona General Hospital will support the efforts and strategies listed in Health People 2020, CDC's 6/18 Initiative, CDC's National Prevention Strategy, Arizona Department of Health and Human Services Implementation Strategies, and Maricopa County Implementation Strategies. Arizona Spine and Joint Hospital will work closely with St. Joseph's Hospital and Medical Center to refer to programs identified below and also integrate these programs when possible. The community's needs are met in a collaborative environment.

Healthy People 2020 Initiatives are well defined and supported in the current findings of the current 2016 CHNA. In order to create a comprehensive strategy, we categorized the needs according to the Healthy People 2020 and in support of the CDC's National Prevention Strategy and the 6/18 Initiative.

Existing programs with evidence of success and impact are identified within these key strategy areas to meet the community needs identified in the CHNA. Through our work and collaboration with Maricopa County and the State of Arizona's Department of Health and Human Services, we participate in Maricopa County's HIPMC

(http://www.arizonahealthmatters.org/index.php?module=Tiles&controller=index&action=display &id=34698899365112658) to improve the outcomes for programs that are research and evidence-based, provide outcome based, and sustainable interventions. CHIP objectives are collected on an ongoing basis by the Maricopa County Department of Public Health (MCDPH) from organizations participating in the Health Improvement Partnership of Maricopa County (HIPMC). We work

closely with the partners within HIPMC and also contribute through the hospital's programs to improve the community. We also collaborate with our community partners in the Arizona Communities of Care Network where we use the "collective impact and asset-based" strategies for program development and improvement.

Program measurements and outcomes are measured using SMART goals to address the immediate needs and provide a framework to address the preventive factors or social determinants of health. We do this in collaboration with our partnering service lines within the hospital, community partners, the county and State of Arizona.

We will continue to engage and utilize the Collective Impact Model and enhance the collaborations within the Arizona Communities of Care Network and further promote the work within Health Improvement Partnership of Maricopa County (HIPMC)

(http://www.maricopa.gov/publichealth/Programs/OPI/workgroups/), Arizona Health Communities, and the Preventive Health Collaborative of Maricopa County.

Input from internal and external stakeholders resulted in the strategies and recommended programs below.

Initiative 1: Access to Health Care

Strategy

Improve access to health care and social services to individuals who are uninsured/underinsured and low-income residents

Programs | Current and Planned

- ACTIVATE / Prime -- Provides transitional care services for Medicaid and uninsured patients.
- ACTIVATE Resource Room -- Provides assistance in navigating health and human services for individuals
- ACTIVATE/CATCH Provides transitional care services for patients with complex health and social factors
- Department of Economic Security on sight location for assistance with health, housing and food assistance
- Dignity Health Financial Assistance Program
- Keogh Health Connections -- Patient Financial Advisors; Arizona
- Mohammed Ali Parkinson's Promotora (Navigator) Navigation provided to individuals and their caregivers who have individuals diagnosed with Parkinson's disease
- Multiple Scoliosis Navigator National Multiple Scoliosis provides navigation and support for individuals diagnosed with Multiple Scoliosis
- Muscular Dystrophy Navigator Muscular Dystrophy Association provides navigation and support for individuals diagnosed with muscular dystrophy.
- Native Health Collaborative Provides intensive case management to coordinate resources for housing, health, food, employment and other social issues.

- Project Independence & Empowerment (P.I.E.) Provides navigation and resources for individuals with compromised mobility issues.
- Refugee Health Partnership Provides health and social resources to support Refugees.

Initiative 2: Mental & Behavioral Health | Substance Abuse

Strategy

Create awareness and educate community on prescription drug uses and misuse and provide access to Mental and Behavioral Health Services.

Programs | Current and Planned

- HOMeVP Provide support for homeless individuals suffering from chronic health conditions, general mental health and homelessness
- Mental Health First Aid -- A workshop that provides education to the lay person and/or professional about mental health issues.
- Southwest Behavioral Health Services In home behavioral health services and navigation

Initiative 3: Obesity (Diet related Illnesses)

Strategy Reduce obesity by providing support, navigation and prevention approaches

Programs | Current and Planned

- ACTIVATE -- Provides home visiting, disease management and navigation for chronic health conditions
- ACTIVATE Resource Room Provides assistance with nutrition services
- Cancer Nutrition Classes
- Congestive Heart Failure Education and Prevention
- Healthier Living CDSMP / DSMP Stanford model
- Keogh Health Connection Provides navigation and assistance with SNAP benefits
- Million Hearts Campaign –aims to prevent heart attacks and strokes

Initiative 4: Chronic Health Conditions

Strategy Improve access to health assistance, education and prevention services to the broader community with Chronic Health Condition

Programs | Current and Planned

- ACTIVATE provides home visiting, disease management and navigation for chronic health conditions
- ACTIVATE Resource Room assistance with chronic health services
- American Lung Association Better Breathers Club –
- Tobacco Cessation support groups

- Diabetes Center at St. Joseph's Hospital Diabetes medical management, education, prevention and support
- Healthier Living Chronic Disease Self-Management Program provides six 2.5 hour workshops to assist individuals with managing their chronic health conditions.
- Million Hearts Campaign –aims to prevent heart attacks and strokes
- Stroke Prevention and Education including blood clots
- Tobacco Cessation promotion of tobacco cessation,
- AshLine and collaboration with the State Tobacco

Initiative 5: Injury and Trauma

Strategy Improve access to health assistance, education, advocacy and prevention services to the broader community to prevent injury and trauma

Programs | Current and Planned

- Helmet Your Head head and spinal cord injury prevention program
- Think First Program trauma prevention program
- Oliver Otter Water Safety Program for children
- Days on the Lake is a watersports program for individuals who were disabled.
- Driving to Excel driving safety classes for new drivers
- CarFit Senior Driving Classes
- Children Are Priceless Passengers (CAPP)
- Community Falls Prevention Fair
- Parkinson's Center Falls Clinic
- Barrow Fall Prevention
- Arizona Firearm Injury Prevention Coalition
- Boot Camp for New Dads monthly workshop for fathers-to-be
- SMARTR Program violence and trauma prevention program
- ASBI Program
- Wake Up! Trauma Youth Program
- Prescription drug abuse and misuse:

Anticipated Impact

The anticipated impacts of specific, major program initiatives, including goals and objectives, are stated in the program digests on the following pages. Overall, the hospital anticipates that actions taken to address significant health needs will: improve health knowledge, behaviors, and status; increase access to care; and help create conditions that support good health. The hospital is committed to monitoring key initiatives to assess and improve impact. The Community Health Integration Network, hospital executive leadership, Board of Directors, Community Board, and Dignity Health receive and review program updates. The hospital creates and makes public an annual Community Benefit Report and Plan, and evaluates impact and sets priorities for its

community health program by conducting Community Health Needs Assessments every three years.

Planned Collaboration

Since 2012, St. Joseph's Hospital and Medical Center has engaged the community, nonprofit organizations, businesses, local community members, and governmental agencies in the Arizona Communities of Care Network (ACCN). The ACCN is a demonstration in utilizing the "Collective Impact" model and putting it into action. The key intent is to foster collaborations borne of shared responsibility among various organizations and agencies to transform health in our community and to engage the hospital and community in meeting the needs of the poor disenfranchised and underserved. The following are the current Communities of Care who are collaborating with one another and the hospital in creating healthier communities. These collaborations are engaged throughout Maricopa County and within Arizona serving those individuals in most need.

ACTIVATE and ACTIVATE-Prime: This program collaboration is between St. Joseph's Hospital and Medical Center, Arizona Spine and Joint Hospital, Mercy Care Plan, and multiple community resources and partners. This program a model of transitional care has been designed to combine the proven techniques of RED protocols and software, best practices from the Coleman model and a number of innovative features, including an embedded Transitional Care Nurse managed by Foundation for Senior Living (Community Based Organization); an in-hospital beneficiary I caregiver resource center; a community-based Transitional Care Coach; and a 24x7 nurse call-in service. These additional resources and roles strengthen the significant improvements underway within the hospital processes, apply a more holistic model of beneficiary care, provide a strong array of community supports and promote beneficiary empowerment. These services are provided for the uninsured and underinsured populations.

HOMeVP – Health and Housing of Medically Vulnerable People: This is collaboration between St. Joseph's Hospital and Medical Center and the broader community of health and homeless providers to collaborate on complex issues related to individuals within our community who are homeless and nearly homeless and to provide them with education, prevention, healthcare and social services as well as housing them permanently. This group seeks to advocate for systems and sustainable change within Arizona.

Project Independence and Empowerment (PIE): This program is a collaboration between Dignity Health – Barrow Neurological Institute; Arizona Bridge to Independent Living (ABIL); Arizona Spinal Cord Injury (AzSCIA) and the Brain Injury Alliance of Arizona (BIAAZ) The PIE partners will provide services to people with disabilities, and their families, that are transitioning from Arizona Spine & Joint Hospital rehabilitation continuum to the community. This population includes people with physical and cognitive disabilities, including spinal cord injury, brain injury, stroke, and those with chronic health conditions.

Native American Collaborative: This program is collaborative effort between the hospital, Native American Connections, Native Health, and Indian Health Center to meet the needs of displaced native individuals with healthcare, housing, job placement and behavioral health.

Refugee Health Partnership: This collaborative is made up of Catholic Charities Community Services, International Rescue Committee, and ASU School of Social Work. The program is designed to study and identify barriers that newly arrived refugees face in accessing health care and health insurance.

This community health implementation strategy specifies significant community health needs that the hospital plans to address in whole or in part, in ways consistent with its mission and capabilities. The hospital may amend the plan as circumstances warrant. For instance, changes in significant community health needs or in other community assets and resources directed to those needs may merit refocusing the hospital's limited resources to best serve the community. These groups work collectively with the hospital and the community to create long-standing changes that lead to sustainable communities that address not only the health disparities and social determinants of healthy communities, but create equity for all.

Program Digests

The following pages include program digests describing key programs and initiatives that address one or more significant health needs in the most recent CHNA report. The digests include program descriptions and intervention actions, statements of which health needs are being addressed, any planned collaboration, and program goals and measurable objectives.

Mohammed Ali Parkinson's Center PROMOTORES			
Significant Health Needs	□ Access to Health Services		
Addressed	 Mental & Behavioral Health Substance Abuse 		
	□ Obesity (Diet related Illnesses)		
	Chronic Health Conditions		
	☐ Injury and Trauma Prevention		
Program Emphasis	□ Focus on Disproportionate Unmet Health-Related Needs		
	□ Emphasize Prevention		
	□ Contribute to a Seamless Continuum of Care		
	□ Build Community Capacity		
	Demonstrate Collaboration		
Program Description	Trained and certified volunteers deliver in-home educational program to		
	Hispanics who have barriers to healthcare information living with PD.		
	The program comprises 13 weekly visits and educational material for the		
	families. Families are followed for 6 more monthly visits. The entire		
	program is delivered in Spanish.		
Community Benefit	Community Health Improvement Services Community Health		
Category	Education		
Planned Actions for 2016 – 2018			
Program Goal /	Provide in home education to Hispanics living with Parkinson Disease		
Anticipated Impact	and their families who experience barriers to heath education. The		
	education will help people with chronic disease self-management and		
	connect to MAPC programs for continued outreach support.		
Measurable Objective(s)	Provide in home education to 10 families for 12 weeks and 6 monthly f/u		
with Indicator(s)	visits. The trained Promotors will provide training to other community		
	healthcare workers in the community (outside of the MAPC).		

Intervention Actions	Promotors (volunteers) to attend annual national Promotors program and	
for Achieving Goal	to provide training to other Promotors outside the organization (i.e.:	
	Promotors HOPE Network and the Creciendo Unidos promotors group.	
Planned Collaboration	Promotors HOPE Network (AZ), Creciendos Unidos/Growing Together	
	(AZ)	

	Mental Health First Aid		
Significant Health Needs	□ Access to Health Services		
Addressed	 Mental & Behavioral Health Substance Abuse 		
	□ Obesity (Diet related Illnesses)		
	□ Chronic Health Conditions		
	□ Injury and Trauma Prevention		
Program Emphasis	□ Focus on Disproportionate Unmet Health-Related Needs		
	□ Emphasize Prevention		
	□ Contribute to a Seamless Continuum of Care		
	□ Build Community Capacity		
	□ Demonstrate Collaboration		
Program Description	Mental Health First Aid is an 8-hour course that gives people the skills to		
	help someone who is developing a mental health problem or experiencing		
	a mental health crisis. The evidence behind the program demonstrates		
	that it does build mental health literacy, helping the public identify,		
	understand, and respond to signs of mental illness.		
Community Benefit	Community Building Leadership Development and Leadership Training		
Category			
	Planned Actions for 2016 – 2018		
Program Goal /	Train more first aiders – National Council for Behavioral Health priority,		
Anticipated Impact	Be 1 in a million movement.		
Measurable Objective(s)	Provide venue to Mercy Care Plan two-times per year to hold Mental		
with Indicator(s)	Health First Aid Training		
Intervention Actions	Increase awareness of program, Provide information on upcoming		
for Achieving Goal	classes, Connect with partner Hospital s to encourage space lending		
Planned Collaboration	Mercy Care Plan		

		Rx 360
Significant Health Needs		Access to Health Services
Addressed		Mental & Behavioral Health Substance Abuse
		Obesity (Diet related Illnesses)
	□ Chronic Health Conditions	
		Injury and Trauma Prevention
Program Emphasis		Focus on Disproportionate Unmet Health-Related Needs
		Emphasize Prevention
		Contribute to a Seamless Continuum of Care
		Build Community Capacity

	□ Demonstrate Collaboration	
Program Description	RX360 is a Prescription Drug Abuse Reduction Program of research-	
	based, multimedia community education presentations. The	
	presentations are designed to mobilize communities and empower and	
	educate parents and teens about the dangers of drugs and alcohol in	
	today's ever-changing substance abuse landscape.	
Community Benefit	Community Health Improvement Services Community Health	
Category	Education	
Planned Actions for 2016 – 2018		
Program Goal /	Develop materials and implement process to address prescription drug	
Anticipated Impact	use among adults.	
Measurable Objective(s)	Implement nursing projects to improve patient education regarding	
with Indicator(s)	opioids prescribed to trauma patients discharged home from the Hospital.	
	Became Nursing Project for Magnet Status.	
Intervention Actions	Expand to include study of prescribing practices for inpatient trauma	
for Achieving Goal	patients, Review education for patients, and Implement training.	
Planned Collaboration	Maricopa County Department of Public Health	

Diabetes Self-Management Program (DSMP)			
Significant Health Needs	□ Access to Health Services		
Addressed	 Mental & Behavioral Health Substance Abuse 		
	□ Obesity (Diet related Illnesses)		
	□ Chronic Health Conditions		
	□ Injury and Trauma Prevention		
Program Emphasis	□ Focus on Disproportionate Unmet Health-Related Needs		
_	□ Emphasize Prevention		
	□ Contribute to a Seamless Continuum of Care		
	□ Build Community Capacity		
	□ Demonstrate Collaboration		
Program Description	The Diabetes Self-Management Program (DSMP) is a community course		
	for people with Type 2 Diabetes. Small group courses are 6 weeks long,		
	meeting once a week for 2 hours 30 minutes. The sessions are highly		
	interactive, focusing on building skills, sharing experiences and support.		
	The course teaches the life skills needed in the day-to-day management		
	of diabetes.		
Community Benefit	Community Health Improvement Services Community Health		
Category	Education		
	Planned Actions for 2016 – 2018		
Program Goal /	Expand the infrastructure to increase attention to outcomes reporting,		
Anticipated Impact	market and support quarterly evidence-based DSMP to assist in the		
	reduction of readmissions and unnecessary ED visits.		
Measurable Objective(s)	Host DSMP workshop quarterly		
with Indicator(s)			
Intervention Actions	Increase community and Hospital -based referrals		
for Achieving Goal			

Planned Collaboration	Arizona Living Well Institute
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	Chronic Health – Stroke Prevention		
Significant Health Needs	□ Access to Health Services		
Addressed	 Mental & Behavioral Health Substance Abuse 		
	□ Obesity (Diet related Illnesses)		
	□ Chronic Health Conditions		
	□ Injury and Trauma Prevention		
Program Emphasis	□ Focus on Disproportionate Unmet Health-Related Needs		
	□ Emphasize Prevention		
	□ Contribute to a Seamless Continuum of Care		
	□ Build Community Capacity		
	Demonstrate Collaboration		
Program Description	Health promotion and stroke prevention education for seniors,		
	community and employees that identify cardiovascular risk factors,		
	increase the number of individuals who recognize signs and symptoms of		
	stroke, and increase the number of individuals being referred to		
	appropriate professionals to receive medical care and education needs.		
Community Benefit	Community Health Improvement Services Community Health		
Category	Education		
	Planned Actions for 2016 - 2018		
Program Goal /	Reduce the incidence of strokes through greater outreach and educational		
Anticipated Impact	efforts. Increased by 10% stroke outreach, presentations and community		
	blood pressure checks.		
Measurable Objective(s)	Identify 2 underserved populations at risk for stroke for intervention.		
with Indicator(s)			
Intervention Actions	Identify 2 underserved populations at risk for stroke for intervention.		
for Achieving Goal			
Planned Collaboration	American/Arizona Heart/Stroke Associations, public, Hospital staff,		
	senior residential site coordinators.		

	Helmet Your Head
Significant Health Needs	□ Access to Health Services
Addressed	□ Mental & Behavioral Health Substance Abuse
	□ Obesity (Diet related Illnesses)
	□ Chronic Health Conditions
	□ Injury and Trauma Prevention
Program Emphasis	□ Focus on Disproportionate Unmet Health-Related Needs
	□ Emphasize Prevention
	 Contribute to a Seamless Continuum of Care
	□ Build Community Capacity
	Demonstrate Collaboration
Program Description	Helmet Your Head is a safety program developed by Barrow
	Neurological Institute that focuses on the prevention of head and
	traumatic brain injuries and promotes the establishment of safe behaviors

	and helmet usage during recreational activities. This program trains, fits	
	and provides helmets to prevent traumatic brain injury primarily to the	
	vulnerable populations.	
Community Benefit	Community Health Improvement Services Community Health	
Category	Education	
Planned Actions for 2016 - 2018		
Program Goal /	Increase by 10% number of training and helmets distributed.	
Anticipated Impact		
Measurable Objective(s)	Provide two trainings on proper fitting of helmets in FY15. Increase by	
with Indicator(s)	10% helmets for clinical practices, in & outpatient service lines, partners	
	and in vulnerable communities.	
Intervention Actions	Describe the principal program/initiative activities undertaken in FY	
for Achieving Goal	2015.	
	1. Identify 2 sites that are geographic distributed areas for targeted	
	interventions.	
	2. Identify and training partners in each of these sites on how to fit	
	helmets correctly.	
	3. Secure funding for helmet purchases.	
Planned Collaboration	City, state and community private and public safety professions and	
	community members. Limited funding remains from a US Airway grant	
	to provide training, fitting and distribution of helmets for vulnerable	
	populations.	
	1	

Dignity Health Community Grants Program		
Significant Health Needs	□ Access to Health Services	
Addressed	☐ Mental & Behavioral Health Substance Abuse	
	□ Obesity (Diet related Illnesses)	
	□ Chronic Health Conditions	
	□ Injury and Trauma Prevention	
Program Emphasis	□ Focus on Disproportionate Unmet Health-Related Needs	
	□ Emphasize Prevention	
	□ Contribute to a Seamless Continuum of Care	
	□ Build Community Capacity	
	□ Demonstrate Collaboration	
Program Description	Each year the Hospital allocates a percentage (0.05) of the previous	
	year's expenses to support the efforts of other nonprofit organizations in	
	the local communities. An objective of the Community Grants Program	
	is to award grants to nonprofit organizations whose proposals respond to	
	identified priorities in the Community Health Needs Assessment and	
	initiative. Additionally, it is required that a minimum of three	
	organizations work together in a Community of care to address an	
	identified health priority.	
Community Benefit	Cash & In-kind Donations Grants	
Category		
Planned Actions for 2016 - 2018		
Program Goal /	1. To award funds to nonprofit organizations whose proposals align with	

Anticipated Impact	the priorities identified in the CHNA and/or the 2016-2018
	Implementation Strategies.
	2. Fund proposals that best represent the five community benefit core
	principles.
	3. Increase membership of community based partnerships by at least one
	4. Monitor funded initiatives through quarterly reports.
Measurable Objective(s)	100% of agencies awarded a community grant will address an identified
with Indicator(s)	health need as started in the CHNA, initiative, and Implementation
	Strategies.
Intervention Actions	1. Use Request for Proposal process to fund Communities of Care that
for Achieving Goal	address identified needs.
	2. Recruit community leaders to participate in the Community Grants
	Program
	3. Monitor and support funded agencies through reporting and connection
	to needed resources.
Planned Collaboration	Through the grant awards, Dignity Health has the opportunity to
	collaborate with each Community of Care and the associated partners.

APPENDIX A: COMMUNITY BOARD AND COMMITTEE ROSTERS

2018 GOVERNANCE STRUCTURE – Arizona Spine and Joint Hospital

- **Bryce**, Christopher MD
- Feng, Earl MD
- **Sorensen**, Eric, Dignity CFO
- Apodaca, Rudy, Dignity VP
- Socash, Fran, SP Senior VP Operations
- Smith, Charlie, SP Senior VP Operations
- Bond, Johnny, USPI Executive VP
- Smith, Robert "Bob", AZSH CEO
- Thomas, Max, MD (Advisory Member)
- Crowder, Terrence, MD (Advisory Member)
- **Gunzy**, Todd, MD (Advisory Member)
- Dr. Bethel invited

2016-2017 COMMUNITY BOARD MEMBERS – ST. JOSEPH'S HOSPITAL AND MEDICAL CENTER AND ST. JOSEPH'S WESTGATE MEDICAL CENTER

- Aking, MD, Rodd, Family Medicine Physician, Trinity Adult Medicine
- Bayless, Justin, CEO of Bayless Healthcare Group
- Collum, MD, Earle "Smitty" (ex-officio member), Chief of Medical Staff, Medical Director of Department of Pathology St. Joseph's Hospital and Medical Center
- **Davis, J.D. Helen** (ex-officio representative from East Valley Hospital's Community Board) Family law attorney; The Cavan, Law Firm, P.A.
- **Dohoney, Milton,** Assistant City Manager, City of Phoenix
- **Dolan, R.S.M. Sister Sherry**, Sister of Mercy
- Egbo, M.D. Obinna, Physician President/CEO of Zion Medical Group, PPLC
- Garewal, Jr. Harry (Board Chair), Healthcare and business consultant; CEO of Trin and Associates, LLC
- Gentry, Patti (Board Vice Chair) Commercial real estate broker, Arizona Commercial Advisors
- Heredia, Carmen, Chief of Arizona Operations, Valle del Sol (non-profit organization)
- Horn, Rick, Independent financial and retail advisor
- Hughes, R.S.M., Sister Phyllis, Sister of Mercy, healthcare consultant
- **Hunt, Linda** (ex-officio member), President/CEO, Dignity Health in Arizona
- Hutchison, Tami, Vice President, Strategy & Business Development St. Joseph's Hospital and Medical Center
- Kearney, RSM, Sister Kathleen, Psy.D., Sister of Mercy, clinical psychiatrist
- Jackson, Jeff, Chief Financial Officer, Dignity Health St. Joseph's Hospital and Medical Center
- Little, M.D. Andrew, Co-Director, Barrow Interdisciplinary Skull Base Program: Co-Director, Barrow Pituitary Center, Barrow Neurosurgical Associates
- Million, Jean-Pierre, "J.P." Director, CVS Caremark (bioscience and pharmaceuticals)

- Schembs, Jim, Retired corporate CEO
- Silva, Margarita, Immigration attorney; M.Silva Law Firm, PC
- Simkin, Gayle, Infection Control Prevention, Kindred Hospital
- Spelleri, Maria, Executive Vice President and General Counsel, Chicanos Por La Causa, Inc.
- Stoup, David, Co-Chairman/CEO, Healthy Lifestyle Brands (healthcare products and services)
- **Tierney, David**, (Chair Community Health Integration Network CHIN) Construction law attorney; Sacks, Tierney, P.A.
- White, Patty, (ex-officio member) President/CEO, St. Joseph's Hospital and Medical Center
- Yazzie-Devine, Diana, President/CEO, Native American Connections (non-profit organization)

2016-2017 COMMUNITY HEALTH INTEGRATION NETWORK (CHIN) MEMBERS – ST. JOSEPH'S HOSPITAL AND MEDICAL CENTER AND ST. JOSEPH'S WESTGATE MEDICAL CENTER

- Alonzo, Anna, Office Chief Chronic Disease Prevention Programs Arizona Department of Health Services/Bureau of Tobacco and Chronic Disease
- **Battis, Eric**, Chief Operations Officer Adelante Healthcare
- Bauer, John, Director of Finance at St. Joseph's Hospital and Medical Center
- **Bayless, Justin,** Chief Executive Officer, Bayless Healthcare Group
- Bethancourt, Bruce, Chief Medical Officer, St Joseph's Hospital Medical Center
- **Brewer, DeeAnn**, Grants Manager Esperanca
- Brown, Gail, Nurse Practitioner St. Joseph's Hospital and Medical Center
- Brucato-Day, Tina, Hospital Administrator at St. Joseph's Westgate Hospital
- Crittenden, Sonora, Community Benefit Coordinator, St. Joseph's Hospital and Medical Center
- Dal Pra, Marilee, VP of Programs at Virginia G. Piper Charitable Trust
- Flaherty, Charlene, Director of Southwest-Arizona/Nevada Cooperation for Supportive Housing
- Garganta, Marisue, Director of Community Health Integration & Community Benefit at St. Joseph's Hospital and Medical Center
- Goslar, PhD., Pamela, Injury Epidemiologist, St. Joseph's Hospital and Medical Center
- Gunther, Shirley, VP for External Affairs, Dignity Health Arizona
- *Heredia, Carmen, Chief of Arizona Operations Valle Del Sol
- Hesse, Maria, Vice Provost for Academic Partnerships ASU
- Hoffman, Terri, Vice President of Development for St. Joseph's Foundations
- Honeycutt, Robert, President & Chief Executive Officer, ARIZONA SPINE & JOINT HOSPITAL.
- Jewett, Matt, Grants Manager at Mountain Park Health Center
- Kamenca, Andrea, Senior Manager, Telehealth Program Operations
- Lopez, Denise, Community Health Needs Assessment Coordinator, Maricopa County Department of Public Health
- Lundeen, Christine, Chief Innovation Officer Mercy Maricopa, Mercy Maricopa Behavioral Health
- Mascaro, CarrieLynn, Sr. Director of Programs Catholic Charities
- *Mason-Motz, Cassandra, Retired
- McBride, Sr. Margaret, VP Organizational Outreach at St. Joseph's Hospital & Medical Center
- McHorney, Michael, Chief Financial Officer ARIZONA SPINE & JOINT HOSPITAL.
 Mezey, Mary, Manager, Office of Community Empowerment at Maricopa County Dept. of Public Health
- Mitros, Melanie, Director, Strategic Community Partnerships at St. Luke's Health Initiatives (SLHI)
- Pena, Sara, MD, MPH, Associate clinical professor, Department of Family Medicine at the University of Arizona College of Medicine and assistant professor/affiliated faculty of Department of Family Medicine at the Creighton College of Medicine at St. Joseph's Hospital and Medical Center

- Plese, Tara, Chief External Affairs Office, Arizona Alliance for Community Health Centers
- Ranus, Lucy, Program Manager Barrow Prevention & Outreach Barrow Neurological Institute
- Robinson, Kristina, Community Benefit Specialist, St. Joseph's Hospital and Medical Center
- *Simkin, Gail Kindred Hospital
- Smith, Carrie, Chief Operating Officer Foundation for Senior Living (FSL)
- Stack, Susan Director of Transformational Care, St. Joseph's Hospital and Medical Center
- Stutz, Linda, Vice President Care Management at Dignity Health
- ***Tierney David,** Trial Lawyer Sacks Tierney P.A.
- VanMaanen, Pat, Health Consultant at PV Health Solutions

^{*}Indicates St. Joseph's Hospital Community Board Member and/or chair of CHIN

APPENDIX B: OTHER PROGRAMS AND NON-QUANTIFIABLE BENEFITS

The hospital delivers a number of community programs and non-quantifiable benefits in addition to those described elsewhere in this report. Like those programs and initiatives, the ones below are a reflection of the hospital's mission and its commitment to improving community health and wellbeing.

St. Joseph's Hospital and Medical Center, has three pillars: patient care, medical education and research. Physicians and researchers at St. Joseph's are dedicated to investigating and discovering new and powerful therapies with one ultimate goal - to enhance patient care. With both basic research laboratories as well as hundreds of clinical trials, patients have access to state-of-the-art treatments.

Medical education at St. Joseph's includes both educations for medical students through our partnership with Creighton University School of Medicine as well as post-medical school training through residency and fellowship programs. Medical education at St. Joseph's includes both education for medical students through our partnership with Creighton University School of Medicine as well as post-medical school training through residency and fellowship programs, with a specific emphasis on recruiting individuals who are culturally and linguistically diverse to serve the communities reflected within the community. The faculty is training future physicians, today.

The needs of the community exceed the traditional definition of "health" with on ongoing emphasis of the broader definition which includes the social determinants of health such as housing, utilities, food, violence and transportation. Arizona Spine and Joint Hospital continues to address these issues while working with nontraditional partners to build the communities capacity and eliminate the disparities found within those in need. Arizona Spine & Joint Hospital convenes those who are interested in these opportunities for change and creates an infrastructure for thoughtful systems change to occur, i.e. housing expansion, land reuse, protection of environment, transportation enhancements, etc.

Community-Building Activities

Arizona Spine and Joint Hospital in collaboration with St. Joseph's Hospital and Medical Center engages in many community-building activities to improve the community's health and safety by addressing the root causes of health problems such as poverty, homelessness and environmental hazards. The Arizona Communities of Care Network provides the structure and engagement needed to bring the community together to work on complex issues facing our community. HOMeVP (Health and Housing of Medically Vulnerable People) works to reduce and eliminate health and housing disparities and collaborates with more than 30 agencies, state and county. We work closely with Project Cure to provide unused medical supplies and equipment to improve the health of third world countries. The following are organizations we work with to strengthen the community's capacity to promote the health and well-being of its residents by offering the expertise and resources of health care organizations. See Appendix D for a list of such activities.

APPENDIX C: FINANCIAL ASSISTANCE POLICY SUMMARY

ARIZONA SPINE AND JOINT HOSPITAL

Arizona Spine and Joint Hospital seeks to deliver compassionate, high quality, affordable health care and to advocate for those who are poor and disenfranchised.

In furtherance of this mission, Arizona Spine and Joint offers charity care and discounts to eligible patients who may not have the financial capacity to pay for health care services and who otherwise may not be able to receive these services.

The eligibility requirements for charity care and income-based discounts are described in the Financial Assistance Policy. Financial assistance is not a substitute for personal responsibility. Applicants for financial assistance are expected to cooperate with Arizona Spine and Joint Hospital's policies and procedures for obtaining financial assistance, and Arizona Spine and Joint Hospital's billing and collection efforts with regard to any amounts owed after applicable discounts. Applicants who have the financial capacity to purchase health insurance will be provided with information regarding insurance options and encouraged to apply. In addition, applicants who may be eligible for government-sponsored health care programs such as Medicaid or the Children's Health Insurance Program (CHIP) or Medicare will be required to apply for such programs as a means of paying their hospital bills. Submitting an application for government-sponsored health care programs will not preclude a patient's eligibility for financial assistance under this Financial Assistance Policy.

Arizona Spine and Joint Hospital will seek to determine eligibility for financial assistance prior to hospital services being rendered, and will do so after services are rendered when it is not possible to make the determination at an earlier stage. Eligibility is determined based on Federal Poverty Level (FPL). The FPL is defined by the poverty guidelines updated periodically in the Federal Register by the United States Department of Health and Human Services under the authority of subsection (2) of Section 9902 of Title 42 of the United States Code.

Financially Qualified Patients whose Patient Family Income is at or below 200% of the FPL are eligible to receive a 100% discount off of their account balance for Eligible Services received by the patient after payment by any third party(ies).

Financially Qualified Patients whose Patient Family Incomes are above 200% but at or below 500% of FPL are eligible to receive a discount for Eligible Services received by the patient. Upon request, patients with Patient Family Income above 200% but at or below 500% of FPL who receive a discount under this Financial Assistance Policy will also be provided an extended payment plan.

The process for determining eligibility for financial assistance shall reflect Arizona Spine and Joint Hospital's values of human dignity and stewardship. Likewise, Arizona Spine and Joint expects that each applicant for financial assistance will make reasonable efforts to provide Arizona Spine and Joint Hospital with the documentation that is necessary for Arizona Spine and Joint Hospital to make a determination regarding the request for financial assistance and will pursue all other resources to pay for services obtained from Arizona Spine and Joint Hospital. If an applicant fails to

provide information and documentation is necessary to make a determination regarding eligibility, Arizona Spine and Joint Hospital will consider that failure in making its determination.			

APPENDIX D: COMMUNITY-BUILDING ACTIVITIES

The following are organizations we work with on the Community-Building Activities in which Dignity Health provides expertise and resources to promote health and well-being in the community.

Ability 360

Alzheimer's Association Desert Southwest

Chapter

American Cancer Society American Heart Association

American Lung Association in Arizona

American Stroke Association

Angelita's Amigos

Anti-Defamation League Arizona Asthma Coalition Arizona Agency on Aging

Arizona Behavioral Health Association

(ABC Housing)

Arizona Chamber of Commerce

Arizona Chapter of the National Multiple

Sclerosis Society

Arizona Children's Association Arizona Community Foundation

Arizona Dental Association

Arizona Department of Education

Arizona Department of Health Services

Arizona Department of Oral Health Arizona Diamondbacks Charities

Arizona Early Intervention Program

Arizona Firearm Safety Coalition

Arizona First Things First Arizona Kidney Foundation

Arizona Living Well Institute

Arizona State University

Arizona Think First Project

Asian Pacific Community in Action

Assisted Living Arizona Senior Housing

Institute

Association for Supportive Child Care

Autism Speaks

B.R.A.I.N.S Clinic

BHHS Legacy Foundation Black Nurses Association

Boys and Girls Club of Phoenix

Brighter Way Foundation

Cardio Renal Society of America

Catholic Charities Services

Cancer Support Network

Center for African American Health Arizona Center for Health Information & Research

Central Arizona Shelter Services (CASS)

Chicanos Por la Causa

ChildHelp USA

Children's Action Alliance

Children's Museum of Phoenix

Circle of the City – Homeless Respite

City of Glendale

City of Phoenix

Cooperation for Supportive Housing (CSH)

Community Bridges Inc.

Delta Dental of Arizona Foundation

Duet: Partners in Health & Aging

Esperanca

Feeding Matters

Fight Night Foundation

Florence Crittenton Services of Arizona, Inc.

FSL- Foundation for Senior Living

Fresh Start Women's Foundation and Center

Girls Ranch

Golden Gate Community Center

Gompers Rehabilitation Center

Glendale Fire and Police Department Greater Valley Area Health Education

Center (GVAHEC)

HARP Foundation

Health Services Advisory Group (HSAG)

Healthy Lifestars

Homeward Bound

Hospice of the Valley

Human Services Campus

Society of St. Vincent de Paul

Sojourner Center

Southwest Autism Research and Resource

Center (SARRC)

Southwest Center for HIV/ Southwest

Human Development

Special Olympics of Arizona

Injury Free Collation for Kids International Rescue Committee (IRC) Jewish Family and Children's Services Juvenile Diabetes Research Foundation (JDRF)

Keogh Health Connections

Kids Sports Stars

Lodestar Day Resource Center

Maggie's Place

Make-a-Wish Foundation

March of Dimes

Maricopa Association of Governments

Maricopa County Healthcare for the

Homeless

Maricopa County Public Health and Human

Services

Mentor Kids USA

Mercy Housing Southwest

Mid-Western University

Mission of Mercy

Mountain Park Health Center

Muscular Dystrophy Association

NAMI of Southern Arizona

National Kidney Foundation of Arizona

National Safety Council, Arizona Chapter

Native American Connections

Native American Community Health Center,

Inc.

Not My Kid

Parkinson's Association

Parson's Family Health Center

Phoenix Day Center/Health Links

Phoenix Fire Department

Phoenix Indian Health Center

Phoenix Police Department

Phoenix Rescue Mission

Phoenix Sympathy

Project C.U.R.E

Raising Special Kids

Re-Invent Phoenix

Rural Metro

Rvan's House

Safe Kids

Save the Family

STARS (Scottsdale Training &

Rehabilitation Services)

Students Supporting Brain Tumor Research Susan G. Koman Breast Cancer Foundation

Tiger Mountain Community Gardens

The American Indian Prevention Coalition

Touchstone Behavioral Health Center

Tumbleweed Center for Youth Development

UMOM New Day Center

United Way – Valley of the Sun

University of Arizona

Valle Del Sol

Valley Center of the Deaf

Virginia G. Piper Charitable Trust

Vitalyst Health Foundation

Wesley Community Health Center

Women's Health Coalition of Arizona

YMCA

YWCA