Community Health Needs Assessment

2024-2026 **IMPLEMENTATION STRATEGY**

WATSONVILLE COMMUNITY HOSPITAL

March 27, 2024

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IDENTIFYING SIGNIFICANT HEALTH NEEDS

About Watsonville Community Hospital

Watsonville Community Hospital is a public, non-profit community healthcare provider; a 106-bed acute care facility serving Watsonville and the surrounding culturally diverse tri-county area along California's Central Coast. The hospital offers a wide range of quality medical and surgical services including cardiac care, diagnostic imaging, emergency services, maternity services, orthopedics, pediatrics, rehabilitation services, robotic surgery, urology, vascular surgery, and wound care. With 650 employees and more than 300 physicians, the hospital strives to exceed patient expectations, deliver the highest quality care, and be a place of healing, caring and connection for patients and families in the community we call home.

Watsonville Community Hospital's Most Important Work 2023 Patient Data	
33,390	Emergency Room visits
1,971	Surgeries
834	Babies delivered
50,581	Scans (X-rays, MRIs, CT scans, ultrasounds)
225,946	Lab tests
9,879	Rehab sessions (physical, occupational & speech therapy)
5,331	Wound care procedures

Our Mission

We are the trusted, equitable healthcare partner and provider our diverse families, friends and neighbors deserve.

Our Vision

To be our community's champion and advocate for health and wellness to improve the lives of our community for generations to come.

Our Values

We put people first. We put the health and wellbeing of people first in every decision and every experience.

We strive for excellence. As stewards of our community's health, we commit to providing the highest quality of care and exceeding expectations.

We earn trust. We work as a team to earn the trust of everyone we interact with.

We are family. We embrace the family traditions, cultures and diversity of our community every day.

In 2022 Watsonville Community Hospital returned to its roots as a non-profit hospital, following more than 20 years of for-profit ownership. We are now a community-owned, district hospital governed by the Pajaro Valley Health Care District, whose geographic boundaries span from Aptos in the north to Las Lomas in the south.

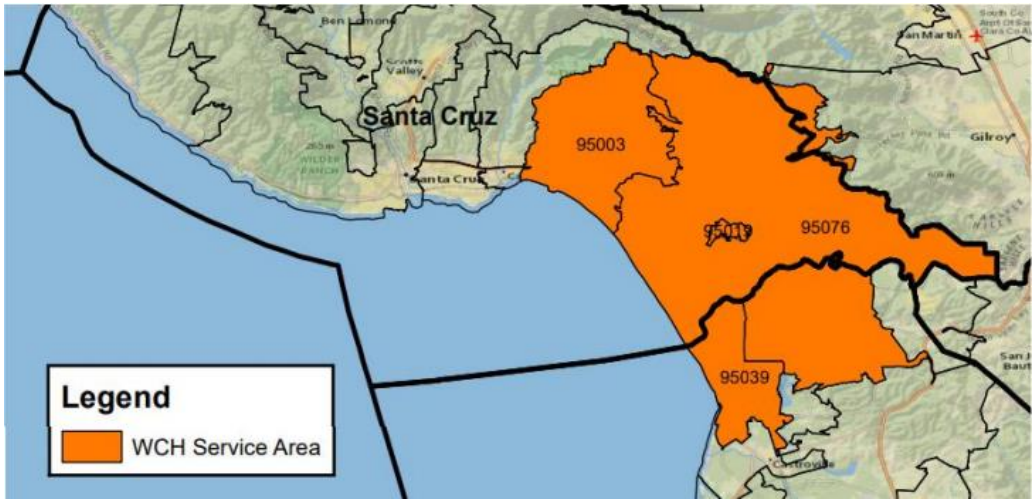
As a non-profit, we have a clear focus on serving the community of the Pajaro Valley, meeting its healthcare needs, and working to improve health equity and wellness for all. One of the first steps is gaining a clear understanding of the health needs of our community. To that end, we have conducted a Community Health Needs Assessment (CHNA). This assessment was completed in early December 2023 and formally adopted by the Pajaro Valley Health Care District Hospital Corporation board on December 27, 2023.

OUR COMMUNITY HEALTH NEEDS ASSESSMENT (CHNA)

Watsonville Community Hospital recently embarked on a comprehensive Community Health Needs Assessment (CHNA) process to identify and address the key health issues for our community.

Definition of the Community Served

Watsonville Community Hospital's community, as defined for the purposes of the CHNA and this Implementation Strategy, include each of the residential ZIP Codes that comprise the hospital's Primary Service Area (PSA), including: 95003, 95019, 95039 and 95076, in southern Santa Cruz County and northern Monterey County in California. This community definition, determined based on the residences of most recent patients of Watsonville Community Hospital, is illustrated in the following map.



How CHNA Data Were Obtained

The CHNA incorporated data about the community from multiple sources, including both primary and secondary data:

- An online survey of physicians and other health providers, public health representatives, social services providers and a variety of other community leaders & service providers (the PRC Online Key Informant Survey)
- A review of existing secondary data, including vital statistics, public health, census, and other data

The CHNA allowed for extensive comparison to benchmark data at the state and national levels.

The assessment was conducted on behalf of Watsonville Community Hospital by PRC, a nationally recognized healthcare consulting firm with extensive experience conducting Community Health Needs Assessments in hundreds of communities across the United States since 1994.

Identifying & Prioritizing Health Needs

Areas of Opportunity

Significant health needs (or “Areas of Opportunity”) were determined in our CHNA after consideration of various criteria, including: standing in comparison with benchmark data; the preponderance of significant findings within topic areas; the magnitude of the issue in terms of the number of persons affected; the potential health impact of a given issue; and those areas of greatest concern to the community key informants who provided input.

Prioritized List of Health Needs

Prioritization of the health needs identified in the CHNA (“Areas of Opportunity”) was determined based on a prioritization exercise conducted among providers and other community leaders (representing a cross-section of community-based agencies and organizations) as part of the Online Key Informant Survey. In this process, these key informants were asked to rate the severity of a variety of health issues in the community. Insofar as these health issues were identified through the data above and/or were identified as top concerns among key informants, their ranking of these issues informed the following priorities:

1. Social Determinants of Health
2. Diabetes
3. Mental Health
4. Nutrition, Physical Activity & Weight
5. Substance Use
6. Oral Health
7. Access to Health Care Services
8. Heart Disease & Stroke
9. Injury & Violence
10. Tobacco Use
11. Cancer

ADDRESSING THE SIGNIFICANT HEALTH NEEDS

HOSPITAL-LEVEL COMMUNITY BENEFIT PLANNING

This summary outlines Watsonville Community Hospital's plan (Implementation Strategy) to address our community's health needs by 1) sustaining efforts operating within a targeted health priority area; 2) developing new programs and initiatives to address identified health needs; and/or 3) promoting an understanding of these health needs among other community organizations and within the public itself.

Priority Health Issues to Be Addressed

In consideration of the top health priorities identified through the CHNA process — and taking into account hospital resources and overall alignment with the hospital's mission, goals and strategic priorities — it was determined that Watsonville Community Hospital would focus on developing and/or supporting strategies and initiatives to improve:

- Social Determinants of Health
- Diabetes
- Mental Health
- Nutrition, Physical Activity & Weight
- Substance Use

We arrived at addressing these top health needs by carefully assessing the Top 5 Areas of Opportunity identified in the CHNA and considering what Watsonville Community Hospital could reasonably affect, within its scope.

Issues That Will Not Be Addressed & Why

In acknowledging the wide range of priority health issues that emerged from the CHNA process, Watsonville Community Hospital determined that it could only effectively focus on those which it deemed most pressing, most under-addressed, and/or most within its ability to influence.

Health Priorities Not Chosen for Action	Reason
Area of Opportunity Outside the Top 5 of the CHNA Report	
Oral Health	***Watsonville Community Hospital*** *is not an oral healthcare provider. In the absence of services and expertise, this is not an area where we have the potential to make a great impact.*
Access to Healthcare Services	***Watsonville Community Hospital*** *is a safety net hospital for many, helping low-income community members gain access to healthcare services. However, given limited resources, this plan will focus on 4 of the top 5 health priorities identified in the CHNA.*
Heart Disease & Stroke	***Watsonville Community Hospital*** *is taking action to address this health need through the opening of a new cardiac catheterization lab (bringing less invasive cardiac procedures close to home for the community) and through several stroke response measures, including rigorous measurement and improvement of how quickly we identify and respond to stroke in our patients. We believe this plan's focus, however, should be on the Areas of Opportunity that ranked highest in this report.*
Injury & Violence Prevention	***Watsonville Community Hospital*** *believes that this priority area falls more within the purview of the county health department and other state and local organizations.*
Tobacco Use	***Watsonville Community Hospital*** *believes that this priority area falls more within the purview of the county health department and other community organizations. Our focus is more on addressing larger substance use disorders.*
Cancer	***Watsonville Community Hospital*** *does not have an oncology unit or cancer center. In the absence of resources, services, and expertise, this is not an area we believe we can make the most impact.*

2024 - 2026 IMPLEMENTATION STRATEGY

Action Plans

The following displays outline Watsonville Community Hospital's plans to address those priority health issues chosen for action in the FY2024 - FY2026 period.

Priority Area #1: Social Determinants of Health	
Community Health Need	Social Determinants of Health (SDOH) are the conditions in the environments where people are born, live, learn, work, play, worship, and age that affect a wide range of health outcomes and risks, and can contribute to health disparities and inequities. According to Healthy People 2030, just promoting healthy choices won't eliminate health disparities. Instead, organizations need to take action to improve the conditions in people's environments. By approaching how we treat patients – with whole-person care – we can identify and understand the outside challenges impacting their health, and work to resolve at least some of those challenges within our scope and through partnerships.
Goals	• Improve our patients' access to programs and resources that can directly impact SDOH, including safe shelter, housing, transportation, and access to healthy food • Improve coordination of care, working collaboratively with our community partners and our local Medi-Cal managed care plan, Central California Alliance for Health, to improve health outcomes
Target Population	Low-income, Medi-Cal patients, with a focus on those who frequent our Emergency Department repeatedly due to poor SDOH and/or substance use
Partnering Organizations	• Central California Alliance for Health (CCAH) • Partner agencies in our community who provide a myriad of social services

Priority Area #1: Social Determinants of Health

Action Plan

Strategy 1: Identify high-risk patients to help them move from having repeated health problems (physical, mental, or substance use) to gaining access to services, programs and/or treatment options that can help address the SDOH that are hindering their good health.

- Educate and empower nurses and physicians to identify SDOH in their clinical evaluations of patients so they can red-flag patients for referral to our internal specialized case management/social services team members

Strategy 2: Implement two specific programs in partnership with CCAH to maximize our ability to identify high-risk patients and connect them with programs that can directly impact their life circumstances and challenges.

- Meet regularly with CCAH Interdisciplinary Team to identify high utilizers of the ED and complex patients to ensure patients receive proper post-acute follow-up care through services offered by CCAH or with an Enhanced Case Management (ECM) provider after discharge.
- Push out daily data to CCAH -- through SCHIO (Serving Communities Health Information Organization) soon -- enabling CCAH to further evaluate their members' needs and support them through post-acute follow-up care and services provided by assigned ECM partners, allowing a smooth transition of care.

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Priority Area #2: Diabetes	
Community Health Need	Prevalence of diabetes in south Santa Cruz County is above both the CA and national averages, affecting 11-12% of the population. Many of our patients are either pre-diabetic or diabetic, giving us a unique opportunity to educate people about risk factors and how to delay or prevent the disease's onset. We also have an opportunity as a local healthcare leader, to educate the broader community.
Goals	• Improve inpatient education for pre-diabetic and diabetic patients, as well as access to care/services • Raise awareness in the community of the risks and indicators of diabetes
Target Populations	• Patients who are pre-diabetic or diabetic • Residents of the Pajaro Valley Health Care District who are predisposed to diabetes
Partnering Organizations	• Community Health Trust of Pajaro Valley • Additional partners to be determined
Action Plan	**Strategy 1:** Act as a convener of community partners; critically assess existing programs to build on successes and expand reach. • Work collaboratively with Community Health Trust of Pajaro Valley to reignite hospital-based diabetes education and explore opportunities for shared success • Explore other partnership opportunities to improve access to care services for patients **Strategy 2:** Given that many who are predisposed to diabetes are also often faced with one or more social determinant of health such as low income, lack of education, employment challenges, housing burden, lack of access to healthy foods and/or safe, accessible places to exercise (built environment), it is often difficult to get to the doctor or educate oneself about health risks. Our strategy will be to look for opportunities to meet this population where they are with diabetes education and screening.

Priority Area #3: Mental Health	
Community Health Need	In recent years, we've seen significant increases in mental health disorders in youth, including depression, anxiety, and suicidal ideation, and low-income youth are at an even higher risk. There is a need to improve access to mental health interventions for youth.
Goals	• Streamline mental health service provision to youth in crisis • Reduce overall time in the Emergency department and expedite transfer to appropriate facility
Target Population	Youth who are in crisis and eligible for a 5585 hold. A 5585 hold is implemented when a patient exhibits danger to self or others, or is gravely disabled (unable to avail themselves of food, clothing, or shelter because of their mental disorder). A 5585 hold allows for involuntary detainment of a minor experiencing a mental health crisis for a 72-hour psychiatric hospitalization.
Partnering Organizations	• County of Santa Cruz Health Services Agency, Behavioral Health Services division • Pacific Clinics, contracted through Santa Cruz County
Action Plan	**Strategy 1:** Become the primary Emergency department in Santa Cruz County for youth on 5585 hold and provide crisis intervention, assessment, safety planning, and/or placement assistance. Work collaboratively with Pacific Clinics onsite to provide necessary short-term psychiatric services. **Strategy 2:** Connect youth in crisis and their families with local resources for continued mental health treatment and follow up, post crisis management.

Priority Area #4: Nutrition, Physical Activity & Weight	
Community Health Need	Food insecurity in our community affects one in four people and at the same time 26% are obese. Several factors have converged, including lack of nutrition education, low proximity to grocery stores, the high price of healthy food (and relative low price of fast food), and a built environment that does not offer enough safe places to play and be active. While this is a far-reaching problem, we have the opportunity to impact a part of the community with whom we interface (pre- and post-natal women), who can subsequently impact other parts of the community (their family members).
Goals	• Help pre- and post-natal patients choose healthy foods to reduce health risks and improve overall health of mothers, babies and their families • Educate pre- and post-natal patients about the myriad resources available to them to maintain good nutrition and healthy habits
Target Population	Pre- and post-natal women
Partnering Organizations	• Second Harvest Food Bank Santa Cruz County • Salud Para La Gente
Action Plan	**Strategy 1:** Provide ready access to free, healthy food by offering a food pantry in the hospital, accessible throughout pregnancy and after delivery. Solicit new funding to ensure this food pantry can remain open and available for years to come. **Strategy 2:** Partner with Salud Para La Gente and other OB/GYNs to ensure early patient education about the food pantry and importance of good nutrition during and after pregnancy **Strategy 3:** Solicit partnerships to ensure additional resources are displayed and made available to patients visiting the food pantry

Priority Area #5: Substance Use	
Community Health Need	Synthetic opioids like fentanyl are readily available locally in many forms and are one of the leading causes of overdose. Our county has a higher rate of overdose deaths than the state of CA. With limited treatment, ED visits related to substance use disorder (SUD) are high, but this gives us a unique opportunity to interface with members of our community suffering from SUDs.
Goals	• Support patients, whether in the ED or inpatient, who have a SUD, to ensure safety while under our care and referrals post-discharge for continued support • Raise awareness in our community about SUDs and the risks of overdose
Target Populations	• Patients with SUDs • Community members at risk for SUDs • Partners in our region who provide programs and treatment for SUDs
Partnering Organizations	• International Overdose Awareness Day/Pennington Institute • County of Santa Cruz Health Services Agency • HIP and a myriad of local SUDs support and treatment providers
Action Plan	**Strategy 1:** In the ever-changing landscape of addictive/illegal drugs, stay at the forefront of what's next in SUDs, to ensure we are prepared to support our community **Strategy 2:** Ensure standardized protocols and appropriate physician & staff education related to SUDs patients **Strategy 3:** Continue to build community partnerships to support community education about the risks and results of substance use **Strategy 4:** Act as the convener of professionals in emergency response, public health, and community-based clinics and SUDs programs to host an Overdose Awareness Day event that leverages partnerships and common goals to maximize the impact on stemming the tide of overdose deaths in our community

Implementation Strategy Adoption

On March 27, 2024, the Board of the Pajaro Valley Health Care Hospital Corporation, dba Watsonville Community Hospital, unanimously voted in favor of approving this Implementation Strategy to undertake the outlined measures to better address the significant health needs of our community.

This Implementation Strategy document is posted on the hospital's website, along with the CHNA.