Parker Adventist Hospital

COMMUNITY HEALTH IMPLEMENTATION STRATEGY ADOPTED NOVEMBER 2022





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AT A GLANCE SUMMARY:

Community Served



Parker Adventist Hospital, located at E-470 and Parker Road, offers leading medical experts, cutting edge technology and a broad array of clinical services. Parker Adventist Hospital performs complex spine surgery as well as weight-loss, orthopedic and joint replacement surgery. We are a Level II Trauma Center, offer oncology services and are an accredited chest pain center, and primary stroke center. We also provide high-risk pregnancy care and deliver babies as young as 28 weeks. As a regional medical center, we offer the medical care you need, close to home, and are committed to excellence in health care.

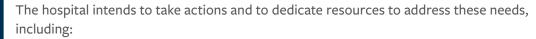
Significant Community Health Needs Being Addressed

The significant community health needs the hospital is helping to address and that form the basis of this document were identified in the hospital's most recent Community Health Needs Assessment (CHNA). Needs being addressed by strategies and programs are:



- Disease & Injury: Suicides
- Risk Behaviors: Substance Use
- Community Capacity Building: Food Security

Strategies and Programs to Address Needs





Disease and Injury: Suicide

Increase identification of suicide risk by implementing Zero Suicide, an evidence-based/ informed mental health/suicide prevention trainings that will result in improved post-discharge patient and community member outcomes including reducing community risk of deaths by suicide.

Risk Behaviors: Substance Use

Increase administration and prescription of alternatives to opioids. Increase the distribution of Naloxone kits to support opioid overdose reversal.

Advance Substance Use Disorder screening, Brief Intervention and Referral to Treatment (SBIRT) services and supports across Centura facilities prioritizing Level 1 and Level 2 designated trauma facilities to improve patient and community outcomes.

Community Capacity Building: Food Security

Increase utilization of and access to affordable, fresh produce and federal food assistance programs and enhancements; and improve production, distribution, and procurement of fresh, affordable and local food in low food access communities.

Planned Collaboration



The hospital will partner with the local health department, community-based organizations, behavioral health providers, and other health systems to deliver on these strategies. In addition, partners funded by the Centura Health Equity and Advancement Fund will collaborate with the hospital to ensure that community members have timely access to services and programs made possible by this fund.

This document is publicly available online at the hospital's website. Written comments on this report can be submitted to Leeroy Coleman, Director Mission Integration (Leeroy Coleman@Centura.org), or Bryan Trujillo, Director Community Health Improvement (HaroldTrujillo@Centura.org)

OUR HOSPITAL AND THE COMMUNITY SERVED

About the Hospital

Parker Adventist Hospital, located at E-470 and Parker Road, offers leading medical experts, cutting edge technology and a broad array of clinical services. Parker Adventist Hospital performs complex spine surgery as well as weight-loss, orthopedic and joint replacement surgery. We are a Level II Trauma Center, offer oncology services and are an accredited chest pain center, and primary stroke center. We also provide high-risk pregnancy care and deliver babies as young as 28 weeks. As a regional medical center, we offer the medical care you need, close to home, and are committed to excellence in health care.

Distinctive Services Noteworthy areas of care include:

Center of Bariatric Surgery

- Nationally Certified Bariatric Program by the Joint Commission
- Metabolic and Bariatric Surgery Accreditation and Quality Improvement Program (MBSAQIP)
- Aetna Institute of Quality for Bariatrics
- Cigna Center of Excellence for Bariatric Surgery Breast Care Center
- Nationally Accredited Breast Care Centers (Parker, Meridian, Southlands)
- Accredited Breast Center of Excellence
- ACR Accredited Breast Ultrasound, Breast MRI and Breast Center of Excellence
- Mammography Quality Standards Act (MQSA/FDA) Certified The Cancer Center at Parker Adventist Hospital
- Accredited Cancer Center by ACR Commission on Cancer
- ACR Accredited for Radiation Oncology Heart Care
- Accredited Chest Pain Center by Society for Cardiovascular Patient Care (SCPC)
- Gold Performance Achievement Award / Get with the Guidelines / Heart Failure
- Gold Quality Achievement Award / STEMI Receiving Center / American Heart Association
- Primary Stroke Center

Neurology Care

- Primary Stroke Center Certification by the Joint Commission
- Gold Plus & Target Stroke Elite Plus Achievement /Get with the Guidelines / American Heart Association & American Stroke Association

Complex Spine Surgery

- Joint Commission Certified Spine Program
- United Health Premium Surgical Spine Specialty Ctr
- Anthem BlueCross BlueShield, Blue Distinction for Spine Surgery
- Highly trained spine surgeons providing complex and complicated surgery including spinal fusion
 Complex Orthopedic Surgery and Joint Replacement Program
- Joint Commission Certified Joint Replacement Program
- Anthem BlueCross BlueShield, Blue Distinction Center for Knee & Hip Replacement
- Highly trained surgeons providing the most complex orthopedic surgeries

Honors

Parker Adventist Hospital typically receives eleven health care honors annually. In addition to receiving Healthgrades Distinguished Hospital Award for Clinical Excellence™, the hospital is also recognized as one of Healthgrades America's 100 Best Hospitals for Critical Care™ for four consecutive years. Parker Adventist is a Five-Star Recipient for the treatment of heart failure, pneumonia, and esophageal/stomach surgeries.

OUR MISSION, OUR VISION, AND OUR VALUES

Mission

We extend the healing ministry of Christ by caring for those who are ill and by nurturing the health of the people in our communities.

Vision

Every community, every neighborhood, every life – whole and healthy.

Compassion

Respect

Integrity

Values

Spirituality

Stewardship

Imagination

Excellence





FINANCIAL ASSISTANCE FOR MEDICALLY NECESSARY CARE

It is the policy of Centura Health to provide, without discrimination, emergency medical care and medically necessary care in Centura Health hospital facilities to all patients, without regard to a patient's financial ability to pay. This hospital has a financial assistance policy that describes the assistance provided to patients for whom it would be a financial hardship to fully pay the expected out-of-pocket expenses for such care, and who meet the eligibility criteria for such assistance. The financial assistance policy, a plain language summary and related materials are available in multiple languages on the hospital's website.



To define Parker Adventist Hospital's service area for the CHNA, we followed a process focused on ensuring that the defined service area was inclusive of medically underserved, low-income and minority populations in the geographical areas from which the hospital draws its patients. We considered four factors:

- Opportunities to viably expand outreach of programs to medically underserved populations
- Inpatient admissions
- Coverage of the County by another Centura facility
- Opportunities for collaboration among facilities and with community-based organizations

The counties of Douglas and Arapahoe were considered as the service area. This includes zip codes: 80011, 80013, 80015, 80016, 80017, 80018, 80103, 80104, 80105, 80108, 80110, 80111, 80112, 80113, 80116, 80118, 80120, 80121, 80122, 80126, 80129, 80130, 80131, 80134, 80135, 80138, 80150, 80155, 80010, 80014, 80124, 80246, 80012, 80109, 80125, 80137, 80165, 80044, 80160, 80163, 80166, 80046, 80151, 80041, 80047, and 80161.

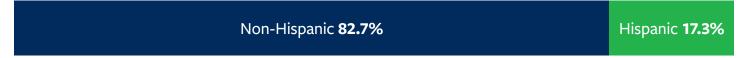
A summary description of the community is below, and additional details can be found in the CHNA report online.

POPULATION DEMOGRAPHICS IN PARKER ADVENTIST HOSPITAL'S SERVICE AREA

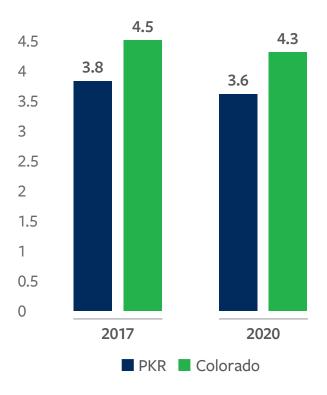
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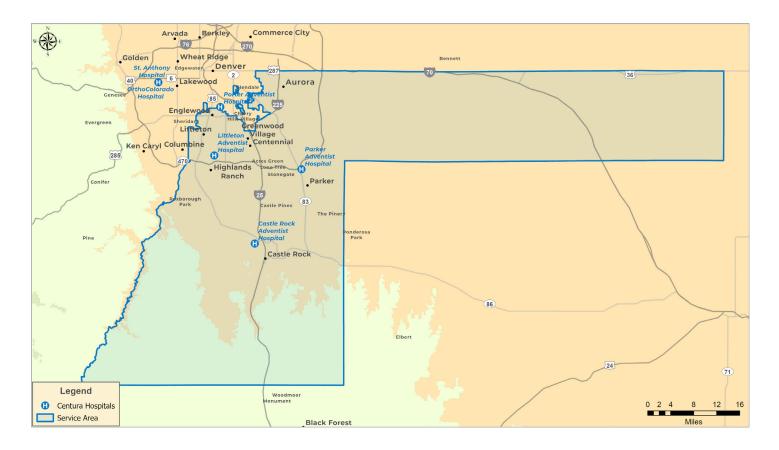


Ethnicity



Ratio of Household Income at 80th Percentile to 20th Percentile





COMMUNITY ASSESSMENT AND SIGNIFICANT NEEDS

The health issues that form the basis of the hospital's community health implementation strategy and programs were identified in the most recent CHNA report, which was adopted in June 2022. The CHNA contains several key elements, including:

- Description of the assessed community served by the hospital;
- Description of assessment processes and methods;
- Presentation of data, information and findings, including significant community health needs;
- Community resources potentially available to help address identified needs; and
- Discussion of impacts of actions taken by the hospital since the preceding CHNA.

Additional detail about the needs assessment process and findings can be found in the CHNA report, which is publicly available on the hospital's website (https://www.centura.org/community-impact/community-benefit) or upon request from the hospital, using the contact information in the At-a-Glance Summary.

Significant Health Needs

The CHNA identified the significant needs in the table below, which also indicates which needs the hospital intends to address. Identified needs may include specific health conditions, behaviors and health care services, and also health-related social needs that have an impact on health and well-being.

| Significant Health Need | Description | Intend to Address? |
|--|--|-----------------------|
| Disease and Injury: Suicide | In Douglas and Arapahoe Counties, suicide and depression rates remain high. We need to remain focused on both prevention and treatment. | Yes |
| Risk Behaviors: Substance Use | In Douglas and Arapahoe Counties, substance use rates have slightly worsened in the last three years. There's a need to focus on opioid addiction intervention and prevention. | Yes |
| Community Capacity Building: Food Security | Although food security has improved, the cessation of benefits and extra services during the COVID pandemic, means that this is likely to worsen again in 2022. | Yes |
| Health Equity | Centura Health has prioritized Diversity, Equity and Inclusion within our system of care and recognize that health equity also needs to be addressed in our communities. We will integrate equity into every strategy used to address our community health priorities. | Yes |
| Access to Care: Primary Care | Douglas and Arapahoe Counties have healthcare provider shortage designations in primary care. | No |

SIGNIFICANT NEEDS THE HOSPITAL DOES NOT INTEND TO ADDRESS

Access to Primary Care

Centura Health's strategic priorities are addressing the community-identified need of access to care for primary care through two large initiatives:

 Aligning and Employing 300+ Physicians Per Year Over Each of the Next Three Years - Focused on Primary Care & In Market Relationships

 Redesigning for Consumer-Driven Access and Care Coordination, including Actualization of Our Digital & Virtual Roadmap

We're not creating implementation plans for this health priority because it's already embedded in our strategic priorities.

2022 IMPLEMENTATION STRATEGY

This section presents strategies and program activities the hospital intends to deliver, fund or collaborate with others on to address significant community health needs over the next three years, including resources for and anticipated impacts of these activities.

Planned activities are consistent with current significant needs and the hospital's mission and capabilities. The hospital may amend the plan as circumstances warrant, such as changes in community needs or resources to address them.

Creating the Implementation Strategy

The hospital is dedicated to improving community health and delivering community benefit with the engagement of its management team, board, clinicians and staff, and in collaboration with community partners.

Parker Adventist Hospital collaborated with both Douglas and Arapahoe County public health to review the qualitative and quantitative health data to prioritize health needs in our communities. This committee was made up of both hospital staff and community stakeholders.

In addition to serving on our Steering Committee, we agreed with the public health departments to align community-based efforts in order to avoid duplication and address community health holistically. We have intentionally aligned strategies, as applicable, to ensure greater movement toward same goals and complementary efforts. In addition to the partnerships with local public health departments, Centura Health sits on the Metro Denver Partnership for Health, a partnership between nonprofit hospitals and public health departments to align efforts across the seven-county region.

Our Steering Committee met to rank and prioritize our strategies and programs, including assets and gaps. Additionally, the hospital provided a summary of our strategies to our community organizations and members to get additional feedback.

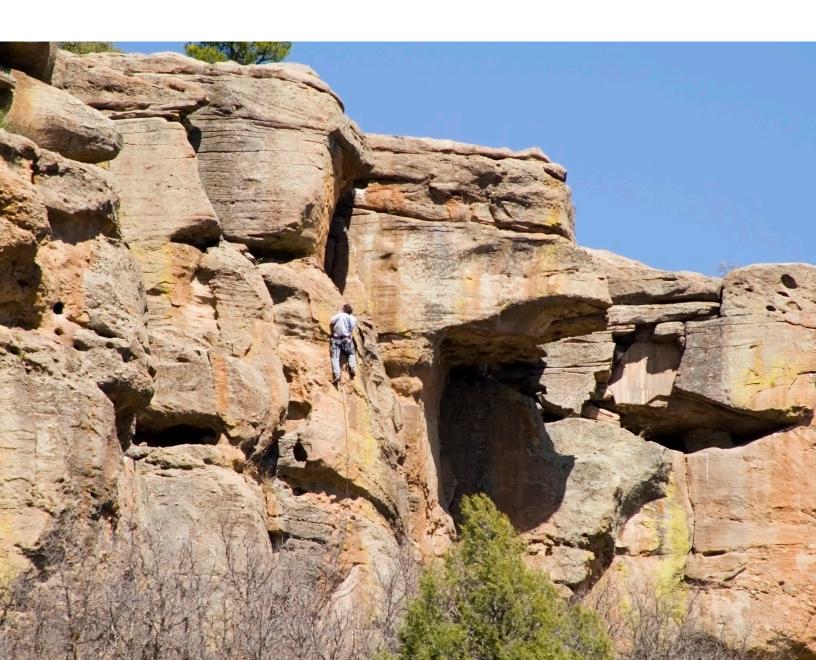
The programs and initiatives described here were selected on the basis of alignment with state driven initiatives, Centura's Social Determinants of Health strategy, existing financial and in-kind investments related to community benefit, and ability to scale high impact programs.

Community Health Strategic Objectives

The hospital believes that program activities to help address significant community health needs should reflect a strategic use of resources and engagement of participants both inside and outside of the health care delivery system.

Centura Health has established four core strategic objectives for community health improvement activities. These objectives help to ensure that our program activities overall address strategic aims while meeting locally-identified needs.

| b↔ | Advance Community Health Alignment and Integration | Create robust alignment with multiple departments and programmatic integration with relevant strategic initiatives to optimize system resources for advancing community health. |
|--------------|--|---|
| θ <u>j</u> θ | Build Capacity for More Equitable Communities | Work with community members and agency partners to strengthen the capacity and resiliency of local ecosystems of health, public health, and social services. |
| | Expand Clinical Community Partnerships and Linkages | Scale initiatives that complement conventional care to be proactive and community-centered, and strengthen the connection between clinical care and social health. |
| <u>:</u> \$: | Inspire, Innovate and Scale High Impact Initiatives | Partner, invest in and catalyze the expansion of evidence- based programs and innovative solutions that improve community health and well-being. |



Strategies and Program Activities by Health Need



Health Need: Disease and Injury: Suicide

Anticipated Impact

- 1. **Zero Suicide:** Increased identification of suicide risk and implementation of best practices and evidence-based/informed mental health/suicide prevention trainings will result in improved post-discharge patient and community member outcomes including reducing community risk of deaths by suicide.
- 2. Communities of Practices: Advancement of school mental wellness best practices through the Centura sponsored Communities of Practice forum and school partnership model will advance youth mental health and well-being outcomes in the communities we served as measured by mental health outcomes data like the Health Kids survey.

| | mental health outcomes data like the Health Kids survey. | | | | | | |
|---|--|----------------------------|-------------------------------------|--|------------------------|--|--|
| Strategy or | Summary Description | Strategic Objectives | | | | | |
| Program | | Alignment & Integration | Clinical – Community Linkages | Capacity for Equitable Communities | Innovation & Impact | | |
| Zero Suicide- Post discharge follow-up program. | Advance the implementation of suicide screening and activation of post-discharge follow-up support access to patients including warm hand-off and referral to the Colorado State Crisis hospital post-discharge follow-up program, crisis service or National Suicide prevention service, and/or through continued expansion of Centura's Caring Contact program. | ~ | ~ | ~ | • | | |
| Zero Suicide Training and Best Practice Implementation. | Advance Zero Suicide, an evidence based best practices framework for decreasing suicide risk in health care systems and their communities. By continuing to advance best practice trainings (Question Persuade Refer, Start, Applied Suicide Intervention Skills Training- ASSIST, Faith, Mental Health First Aid) and practices, the hospital will improve suicide risk identification, post risk identification support and patient and community outcomes. Provide clinical and non-clinical trainings to associates and offer community trainings in suicide prevention or mental wellness will be offered or supported by our system trainers or partners. | | | | | | |

| School Mental Health Community of Practice. | Participate in The School Mental Health Community of Practice monthly virtual meetings. These meetings bring together school districts professionals and community partners interested in advancing best practices and shared learning on implementing school mental health strategies. Sessions start with a brief presentation by a school district and/or community partner that has had success implementing a school mental health strategy. The remainder of the time is dedicated to shared learning and networking through large group and breakout room discussions. | ~ | | ~ | |
|--|---|---|---|---|--|
| School Mental Health Community of Practice Consultation. | School Mental Health Community of Practice Consultation - In first year, identify 2-3 school districts for system pilot on assessment, implementation, sustainability/ scalability. Model to be expanded into other Centura community school districts in years 2 and 3. | • | • | • | |
| Planned Resources | Hospitals and Zero Suicide initiative leadership will designate the staff that they would like to receive trainings. Community Health and facility mission leadership will develop community partnerships to advance training offerings to community members. CoP and CoP consultation programs will include the utilization of technology and platforms like Mighty Networks, Zoom and other platforms to support the forums, record the programs and make the forum information available to all registered participants. | | | | |
| Planned Collaborators | The hospital will partner with organizations like LivingWorks, Colorado Mental Health First Aid, Rocky Mountain Crisis Services, Community Mental Health Centers, the State Office of Suicide Prevention, Faith-based partners, and others to advance Zero Suicide practices and suicide prevention training to our associates and community members. CoP and the CoP consultation program will involve partnerships with youth mental health subject matter experts and consultants, school district and school administrators, counselors, student advisory groups and other key stakeholders. | | | | |



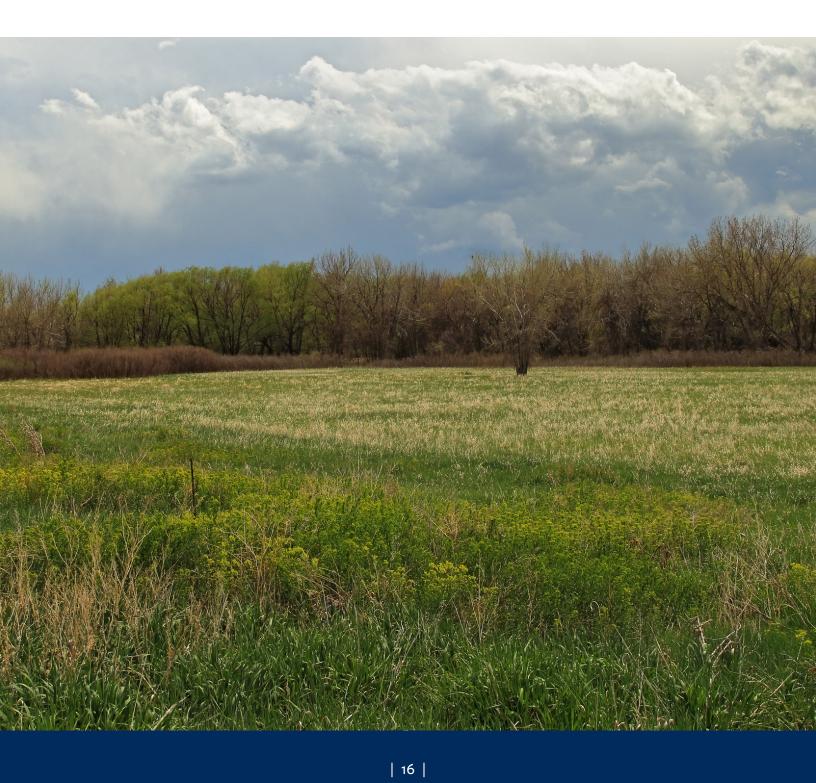
Health Need: Disease and Injury: Substance Use

Anticipated Impact

- 1. Increased Emergency Department MOUD encounters (Buprenorphine inductions); increased administration and prescription of alternatives to opioids. Decrease in the administration and prescription of opioids; Increase the distribution of Naloxone kits to support opioid overdose reversal.
- 2. Advance Substance Use Disorder screening, Brief Intervention and Referral to Treatment (SBIRT) services and supports across Centura facilities prioritizing Level 1 and Level 2 designated trauma facilities to improve patient and community outcomes.

| Strategy or | Summary Description | Strategic Objectives | | | | |
|---|--|----------------------------|-------------------------------------|--|------------------------|--|
| Program | | Alignment & Integration | Clinical – Community Linkages | Capacity for Equitable Communities | Innovation & Impact | |
| Opioid addiction intervention and prevention outcomes initiative. | Optimize provider education and training resources. Collaborate with treatment partners to provide continuity of care and improve transitions back to community for individuals with Opioid Use Disorders. Assure the Emergency Departments have access to ED Medications for Opioid Use Disorder (MOUD) and ED Alternatives to Opioids (Altos) and Naloxone distribution tools to advance care and outcomes for individuals with Opioid Use Disorders at risk of overdose. | | | | | |
| Screening Brief Intervention and Referral to Treatment (SBIRT). | Expand universal prevention and early intervention programming to identify risk-level and provide appropriate care to address behavioral health needs. The Centura Behavioral Health Initiatives team, in collaboration with other key stakeholders, identifies the IT function enhancements to identify patients appropriate for screening, intervention and connection to care. Create standardized behavioral health interventions across trauma centers and identify metrics to track progress. Enhance a behavioral health workforce that supports to advance SBIRT delivery to trauma designated patients and other Centura patients experiencing substance use disorders. | | | | | |

| Planned Resources | Behavioral Health initiative team member will provide project management support. Power BI Dashboard for tracking measure progress. Engagement with EDCVT and Trauma CVT to advance on the identified problem statement and collaborate with community and internal stakeholders to create solutions. |
|-------------------------------|---|
| Planned Collabora- tors | ED Physician leadership, Pharmacy, Trauma, Hospital Transformation Program Quality Leaders, IT leadership groups, Behavioral Health Initiatives leadership team, CVT leadership teams, and regional MOUD providers. |





Health Need: Community Capacity Building: Food Security

Anticipated Impact

Increase utilization of and access to affordable, fresh produce and federal food assistance programs and enhancements; and improve production, distribution, and procurement of fresh, affordable and local food in low food access communities.

| | | | egic Objectives | | |
|--|---|----------------------------|-------------------------------------|--|------------------------|
| Program | | Alignment & Integration | Clinical – Community Linkages | Capacity for Equitable Communities | Innovation & Impact |
| Outreach, education, and de-stigmatization | Implement outreach campaigns among associates and patients, educating them on food insecurity and communities affected most by this issue, and food security programs available for families | • | • | • | |
| Screening and referrals | Administer a Social Determinants of Health screening for patients which determines food insecurity Establish referral pathways to appropriate community-based organizations | ~ | ~ | ~ | ~ |
| Benefits assistance | Support local food businesses' new acceptance of and or maintenance of the Supplemental Nutrition Assistance Program (SNAP), Special Supplemental Nutrition Pro-gram for Women, Infants, and Children (WIC), or their program enhancements by supporting technology, technical assistance, outreach and promotion through community food advocates/navigators | ~ | • | ~ | • |
| Local produce site support | Support local food hubs, develop local produce access with hospital vendors by facilitating connections, promoting local businesses, and by participating in coalitions | ~ | ~ | ~ | ~ |

Planned Resources

The hospital will provide a community health worker model, grants, outreach communications, and program management support for these initiatives.

Planned Collaborators

The hospital will partner with the Colorado Blueprint to End Hunger, Hunger Free Colorado, Nourish Colorado, UnitedWay 211 Colorado, and local community-based organizations to deliver this food security strategy. In addition, partners funded by the Centura Health Equity and Advancement Fund will collaborate with the hospital to ensure that community members have timely access to services and programs that promote food security.



THANK YOU AND RECOGNITION

Our Community Health Needs Assessment is as strong as the partnerships that created it. It is through these partnerships that we were able to ensure we were leveraging the assets in our communities, getting the voices of those who are experiencing challenges with their health and social determinants of health and making a plan to which both the community and hospital are committed. Thank you to the following organizations which committed their time, talent and testimony to this process.

- Douglas County School District
- Town of Castle Rock
- Castle Pines Chamber of Commerce
- Denver Regional Council of Governments
- Doctors Care

- SECOR Cares
- Elbert County Public Health
- Douglas County Government
- Douglas County Housing Partners
- Parker Adventist Hospital Team Members

