2019 Implementation Strategy Report

Kaiser Foundation Hospital: Woodland Hills

License number: 930000358

Approved by Kaiser Foundation Hospitals Board of Director's Community Health Committee

March 18, 2020

KAISER PERMANENTE®

Kaiser Permanente Southern California Region Community Health

Implementation Strategy Report for KFH-Woodland Hills Medical Center

Contents

I. General information

Contact Person:	Ed Essa, Director, Public Affairs and Brand Communications
Date of written plan:	November 21, 2019
Date written plan was adopted by authorized governing body:	March 18, 2020
Date written plan was required to be adopted:	May 15, 2020
Authorized governing body that adopted the written plan:	Kaiser Foundation Hospitals Board of Directors' Community Health Committee
Was the written plan adopted by the authorized governing body on or before the 15th day of the fifth month after the end of the taxable year the CHNA was completed?	Yes ☒ No ☐
Date facility's prior written plan was adopted by organization's governing body:	March 16, 2017
Name and EIN of hospital organization operating hospital facility:	Kaiser Foundation Hospitals, 94-1105628
Address of hospital organization:	One Kaiser Plaza, Oakland, CA 94612

II. About Kaiser Permanente (KP)

Founded in 1942 to serve employees of Kaiser Industries and opened to the public in 1945, Kaiser Permanente is recognized as one of America's leading health care providers and nonprofit health plans. We were created to meet the challenge of providing American workers with medical care during the Great Depression and World War II, when most people could not afford to go to a doctor. Since our beginnings, we have been committed to helping shape the future of healthcare. Among the innovations Kaiser Permanente has brought to U.S. health care are:

- Prepaid health plans, which spread the cost to make it more affordable
- A focus on preventing illness and disease as much as on caring for the sick
- An organized, coordinated system that puts as many services as possible under one roof—all connected by an electronic medical record

Kaiser Permanente is an integrated health care delivery system comprised of Kaiser Foundation Hospitals (KFH), Kaiser Foundation Health Plan (KFHP), and physicians in the Permanente Medical Groups. Today we serve more than 12 million members in eight states and the District of Columbia. Our mission is to provide high-quality, affordable health care services and to improve the health of our members and the communities we serve.

Care for members and patients is focused on their Total Health and guided by their personal physicians, specialists, and team of caregivers. Our expert and caring medical teams are empowered and supported by industry-leading technology advances and tools for health promotion, disease prevention, state-of-the-art care delivery, and world-class chronic disease management. Kaiser Permanente is dedicated to care innovations, clinical research, health education, and the support of community health.

III. About Kaiser Permanente Community Health

For more than 70 years, Kaiser Permanente has provided high-quality, affordable health care services and to improving the health of our members and the communities we serve. We believe good health is a fundamental right shared by all and we recognize that good health extends beyond the doctor's office and the hospital. It begins with healthy environments: fresh fruits and vegetables in neighborhood stores, successful schools, clean air, accessible parks, and safe playgrounds. Good health for the entire community requires equity and social and economic well-being. These are the vital signs of healthy communities.

Better health outcomes begin where health starts, in our communities. Like our approach to medicine, our work in the community takes a prevention-focused, evidence-based approach. We go beyond traditional corporate philanthropy or grant making to pair financial resources with medical research, physician expertise, and clinical practices. Our community health strategy focuses on three areas:

- Ensuring health access by providing individuals served at KP or by our safety net partners with integrated clinical and social services;
- Improving conditions for health and equity by engaging members, communities, and Kaiser Permanente's workforce and assets; and
- Advancing the future of community health by innovating with technology and social solutions.

For many years, we've worked side-by-side with other organizations to address serious public health issues such as obesity, access to care, and violence. And we've conducted Community Health Needs Assessments to better understand each community's unique needs and resources. The CHNA process informs our community investments and helps us develop strategies aimed at making long-term, sustainable change—and it allows us to deepen the strong relationships we have with other organizations that are working to improve community health.

IV. Kaiser Foundation Hospitals – Woodland Hills Medical Center

A. Maps of facility service area

Figure A. KFH-Woodland Hills Service Area: West Ventura Area

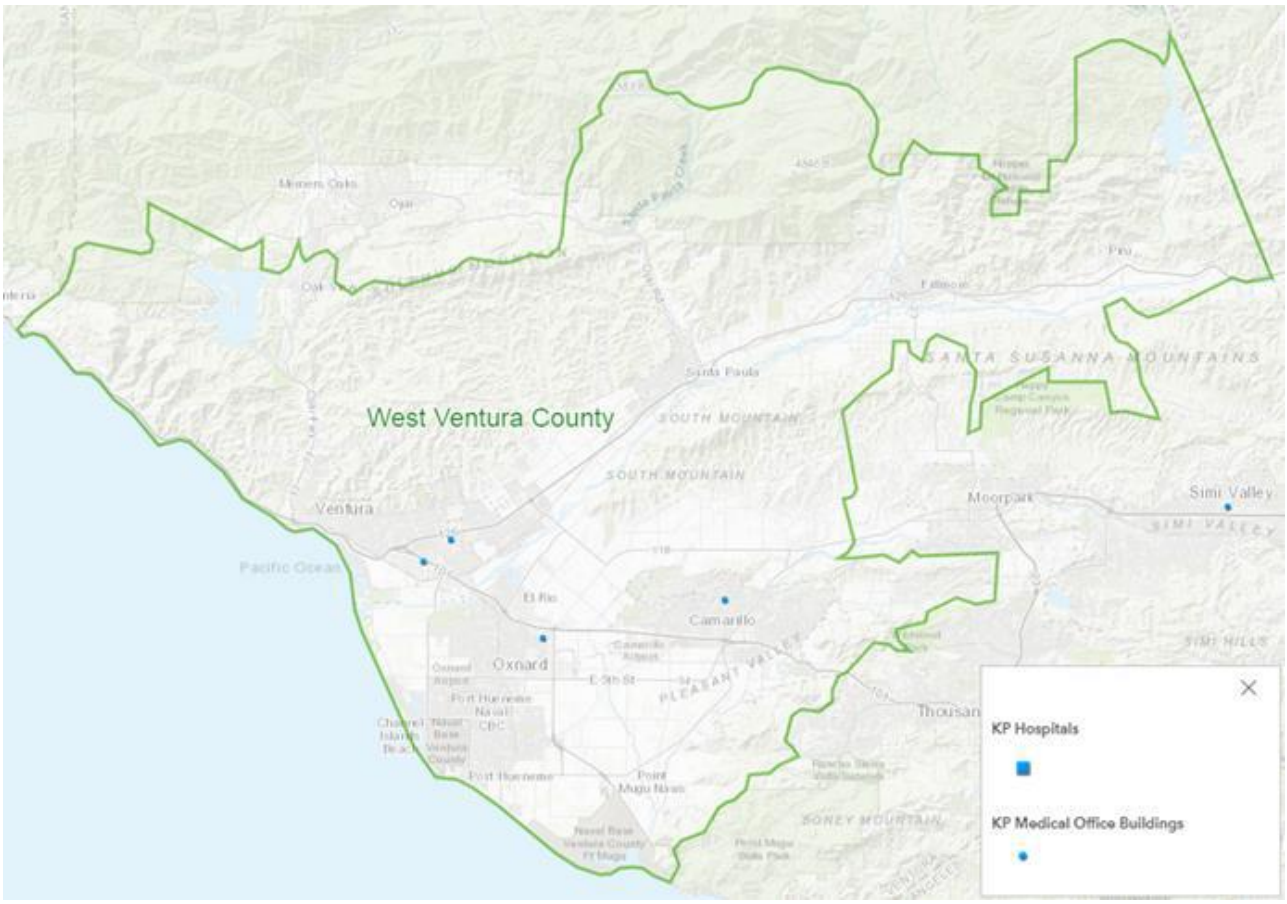
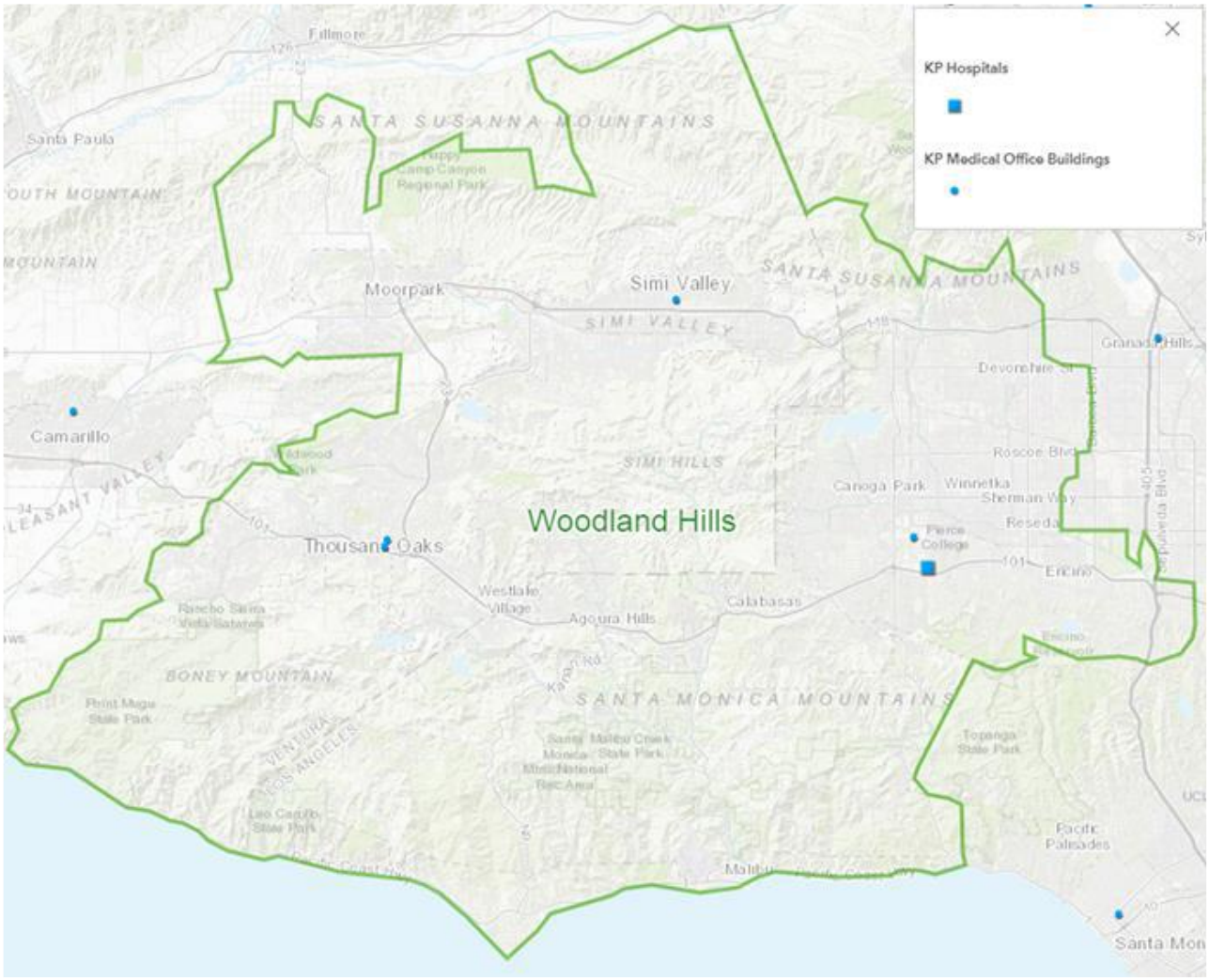


Figure B. KFH-Woodland Hills Service Area: Woodland Hills Area



B. Geographic description of the community served (towns, counties, and/or zip codes)

The KFH-Woodland Hills service area includes the west end of the San Fernando Valley and Ventura County, including the communities of Agoura, Calabasas, Camarillo, Canoga Park, Chatsworth, Encino, Fillmore, Moorpark, Newbury Park, Northridge, Oxnard, Porter Ranch, Reseda, Santa Paula, Sherman Oaks (west), Simi Valley, Tarzana, Thousand Oaks, Topanga, Ventura, Winnetka, and Woodland Hills.

C. Demographic profile of community served

The following tables include race, ethnicity, and additional socioeconomic data for the KFH-Woodland Hills service area. Please note that “race” categories indicate “non-Hispanic” population percentage for Asian, Black, Native American/Alaska Native, Pacific Islander/Native Hawaiian, Some Other Race, Multiple Races, and White. “Hispanic/Latino” indicates total population percentage reporting as Hispanic/Latino.

Table 1. Demographic profile: KFH-Woodland Hills

Race/Ethnicity		**Socioeconomic**	
Total Population	944,593	Living in Poverty (<100% Federal Poverty Level)	10.32%
Asian	11.64%	Children in Poverty	12.59%
Black	3.05%	Unemployment	4.0%
Hispanic/Latino	26.17%	Uninsured Population	10.40%
Native American/Alaska Native	0.20%	Adults with No High School Diploma	10.70%
Pacific Islander/Native Hawaiian	0.12%		
Some Other Race	0.25%		
Multiple Races	2.94%		
White	55.63%		

Table 2. Demographic profile: KFH-West Ventura County

Race/Ethnicity		**Socioeconomic**	
Total Population	502,738	Living in Poverty (<100% Federal Poverty Level)	13.49%
Asian	5.87%	Children in Poverty	20.32%
Black	1.96%	Unemployment	3.8%
Hispanic/Latino	55.40%	Uninsured Population	14.98%
Native American/Alaska Native	0.32%	Adults with No High School Diploma	22.50%
Pacific Islander/Native Hawaiian	0.14%		
Some Other Race	0.12%		
Multiple Races	2.11%		
White	34.08%		

V. Purpose of Implementation Strategy

This Implementation Strategy has been prepared in order to comply with federal tax law requirements set forth in Internal Revenue Code section 501(r) requiring hospital facilities owned and operated by an organization described in Code section 501(c)(3) to conduct a community health needs assessment at least once every three years and adopt an implementation strategy to meet the community health needs identified through the community health needs assessment.

This Implementation Strategy is intended to satisfy each of the applicable requirements set forth in final regulations released in December 2014. This implementation strategy describes KFH Woodland Hills planned response to the needs identified through the 2019 Community Health Needs Assessment (CHNA) process. For information about KFH-Woodland Hills 2019 CHNA process and for a copy of the report please visit www.kp.org/chna.

List of Community Health Needs Identified in 2019 CHNA Report

Below is the list of health needs identified for the KFH Woodland Hills service area through the 2019 Community Health Needs Assessment process:

1. Access to Care
2. Cardiovascular Disease (CVD)
3. Diabetes
4. Economic Security (Housing/Homelessness)
5. Educational Attainment
6. Mental Health
7. Obesity

VI. Who was involved in the Implementation Strategy development

A. Partner organizations

KFH-Woodland Hills engaged the following community partners in the Implementation Strategy plan. These partners represent multiple sub-populations in the community and were able to provide multiple perspectives on developing a strategy to address health needs.

- Valley Care Community Consortium
- Ventura County Department of Public Health
- Tarzana Treatment Center
- West Valley Boys and Girls Club
- Head Start
- One Generation Senior Enrichment Center
- Mammogram Center

B. Community engagement strategy

While not required by Federal CHNA regulations, Kaiser Permanente requires all KFH facilities developing Implementation Strategy plans to elicit community input throughout the plan development

process. Community member and stakeholder engagement in the implementation strategy development process is intended to enable:

- KFH facilities to develop a deeper understanding of community perspective in developing Implementation Strategies, allowing opportunities for increased collaboration, potential impact, and sustainability
- Opportunities to engage community members beyond organizations and leaders with whom facilities may typically collaborate
- Transparency throughout the implementation strategy development process
- Opportunities to inform community leaders about Kaiser Permanente's unique structure and resources to effectively foster meaningful partnerships.

To ensure meaningful engagement, the process began with key informant interviews (internal and external) who have a vast understanding of current community efforts in each health need area. Their support was enlisted to identify additional internal and external partners to engage in the IS planning process and identify strategies. Focus groups with identified partners were conducted. During these engagements, a list of potential strategies based on best-practices, promising practices, and existing KP efforts were provided. Participants were engaged in discussions and activities around how to expand or enhance existing strategies. They were also be asked to consider potential new strategies.

	Method of Data Collection	**Job Title**	**Number of People**	**Notes on Input**
KP Stakeholders				
1	Focus Group	Leadership team	4	Reviewed CHNA findings and recommended staff to follow up with on priority health needs
2	Focus Group	Food Security Workgroup	6	Reviewed strategic priorities and identify existing intervention around screening for food insecurity and providing referrals to community resource, food redistribution, and CalFresh enrollment. Also identified potential opportunities and partnerships to address food security.

	Method of Data Collection	Job Title	Number of People	Notes on Input
3	Key Informant Interview	Center for Health Living	1	Reviewed strategic priorities, identify existing intervention and potential opportunities and partnerships to address economic security and access to care
4	Key Informant Interview	Hospital Administration	1	Reviewed strategic priorities and helped to identify existing intervention and potential opportunities and partnerships to address access to care
5	Key Informant Interview	Social Medicine	1	Reviewed strategic priorities and helped to identify existing intervention and potential opportunities and partnerships to address economic security, access to care, and chronic conditions
6	Key Informant Interview	Physician Champion	1	Reviewed strategic priorities, identify existing intervention and potential opportunities and partnerships to address all priority health need areas

	Method of Data Collection	Job Title	Number of People	Notes on Input
7	Key Informant Interview	Mental Health	1	Reviewed strategic priorities and helped to identify existing intervention and potential opportunities and partnerships to address access to care and mental health
8	Key Informant Interview	Revenue Cycle	1	Reviewed strategic priorities and helped to identify existing intervention and potential opportunities and partnerships to address economic security and access to care
9	Key Informant Interview	Food and Nutrition Services	1	Reviewed strategic priorities and helped to identify existing intervention and potential opportunities and partnerships to address access to care and economic security
Community Organizations				
1	Key Informant Interview	Ventura County Public Health Coordinator	1	Recommended additional external stakeholders to engage, reviewed strategic priorities and helped to identify existing intervention and potential opportunities and partnerships to all priority need areas

	Method of Data Collection	Job Title	Number of People	Notes on Input
2	Key Informant Interview	Executive Director of CBO	1	Recommended additional external stakeholders to engage, reviewed strategic priorities and helped to identify existing intervention and potential opportunities and partnerships to all priority need areas
3	Focus Group	CBOs including: CSUN, Valley Care Community Consortium, Care Development Institute, Tarzana Treatment Center, Head Start, One Generation Senior Enrichment Center, Mammogram Center, West Valley Boys and Girls Club	10	Reviewed existing interventions and helped to identify potential opportunities and partnership

C. Consultant(s) used

A-Cubed Consulting, Inc. (A3) was contracted to conduct the IS Plan for KFH-Woodland. A3 believes in taking a participatory and use-focused approach to evaluation. Those doing the work should be involved in telling the story. A3 also believes the components of organizational development, research, and evaluation each play a pivotal role in the evaluation process. Ama Atiedu, CEO and Project Manager, has over 15 years of experience designing and conducting small and large-scale research and evaluation projects with focuses on public health, nutrition, health care systems, and early childhood education. Other team members supporting KFH-Woodland Hills includes:

- Laura Keene (Keene Insights), Evaluation Consultant'
- Michelle Molina (Connecting Evidence), Evaluation Consultant
- Maddy Frey (Madeleine Frey Consulting, LLC), Evaluation Consultant
- Monica Ray, Project Coordinator & Community Benefit Consultant
- Fiona Asigbee, Statistician

VII. Health needs that KFH-Woodland Hills plans to address

A. Process and criteria used

Before beginning the Implementation Strategy health need prioritization process, KFH-Woodland Hills chose a set of criteria to use in selecting the list of health needs including the severity and magnitude of the need, the extent to which disparities in the need exist across race or place, and the extent which Kaiser Permanente is positioned to meaningfully contribute to addressing the need (e.g. relevant expertise, existing commitments to meet community health needs, unique business assets, etc.). The extent to which community voice spoke to the urgency of the health need through the CHNA and the existence of other community resources dedicated to the need were important additional criteria in making final health need selections. Definitions for criteria used in the health need selection process are presented below:

- **Severity of need:** This refers to how severe the health need is (such as its potential to cause death or disability) and its degree of poor performance against the relevant benchmark.
- **Magnitude/scale of the need:** The magnitude refers to the number of people affected by the health need.
- **Clear disparities or inequities:** This refers to differences in health outcomes by subgroups. Subgroups may be based on geography, languages, ethnicity, culture, citizenship status, economic status, sexual orientation, age, gender, or others.

Leveraging KP Assets: KP can make a meaningful contribution to addressing the need because of its relevant expertise, existing strategies, and/or unique business assets as an integrated health system and because of an organizational commitment to improving community health.

During the CHNA, the following health needs were identified: access to care, cardiovascular disease, diabetes, economic security (housing/homelessness), educational attainment, mental health, and obesity. After careful consideration of the evidence-based strategies for addressing these needs, there was clear alignment of strategies across multiple health needs. Rather than selecting a subset of needs to address in the Implementation Strategy, broader categorizations were used to group needs where strategies overlapped. "Healthy eating, active living" was used to encompass cardiovascular disease, diabetes, and obesity, as healthy eating, active living strategies address the

root causes of these diseases. Rather than creating siloed work streams, pooling efforts under healthy eating, active living will allow for a more holistic approach. Similarly, “economic opportunity” need category was used to encompass educational attainment and housing/homelessness.

B. Health needs that KFH-Woodland Hills plans to address

Access to Care

Access to comprehensive, quality health care services is important for the achievement of health equity and for increasing the quality of life for everyone. Limited access to health care and compromised healthcare delivery impact people's ability to reach their full potential, negatively affecting their quality of life. Healthcare access and delivery, including primary and specialty care, is a health need locally, as demonstrated by high rates of preventable hospital events compared to the state average. Additionally, the community engagement process brought to light many concerns related to access to health and specifically the lacking quality of care. Access to care was selected to be addressed in the Implementation Strategy because secondary data and community engagement revealed that it is a priority health need and KFH-Woodland Hills has existing resources, partnerships, and potential opportunities to address this need.

Healthy Eating, Active Living

Unhealthy diet and lack of physical activity are key contributors of cardiovascular disease, diabetes, and obesity. As such, strategies that support healthy eating and active living can improve these health conditions.

Healthy eating, active living address the root causes of cardiovascular disease, diabetes, and obesity. Cardiovascular disease can refer to a number of different health conditions including stroke, heart attack, arrhythmia, etc. Causes of cardiovascular disease include diabetes, diet, or hereditary factors, among other things. Social predictors that are linked to Heart Attack ER Visits are: fewer bachelor’s degrees, more crowded housing, and less employment. Most recent data indicate that 6.2% of Woodland Hills Service area residents have heart disease. The average heart disease death rate is 104 per 100,000. Black residents of the area die of heart disease at above average rates. During the community engagement process, residents indicated that heart disease was among their primary concerns. Among focus group participants who completed a post focus group survey asking them to identify their level of concern for various health outcomes, cardiovascular disease was among the top 5; with 74% indicating it was a concern for them.

Diabetes remains a major health concern at both a national and local level. If undiagnosed or left untreated, diabetes can lead to a number of serious health complications including kidney failure, heart attack, and stroke. Within the Woodland Hills area, 6.6% of adults aged 18 year or older have been told they have diabetes. Residents in the West Ventura area have a slightly higher percentage of adults being told they have diabetes, at 7.3%. While the social predictors linked to diabetes vary across West Ventura and Woodland Hills areas, lower income was linked to a higher prevalence of diabetes. Additionally, among residents participating in the community engagement process, diabetes was one of the primary concerns and worries experienced impacting daily activities.

Obesity is a concern, as it is a treatable and preventable health outcome that is the impetus to other more chronic health conditions. Specifically, obesity is tied to some of the previous health outcomes

identified, namely diabetes and cardiovascular disease. By assessing upstream factors that are linked to obesity, prevention efforts or resources can be prioritized to address this health outcome. Recent data shows various social predictors are linked to obesity, including more crowded housing, fewer bachelor's degrees, less health insurance, lower income, and less beach/park access. Among adult residents in Woodland Hills, 20.5% are considered to be obese in comparison to 28.1% of residents in West Ventura. Across both Woodland Hills and West Ventura, Black and Hispanic/Latino residents are obese at above average rates. Additionally, among residents participating in the community engagement process, obesity was one of the primary concerns and worries expressed. Several residents shared environmental factors that contribute to this health concern.

Economic Opportunity

Woodland Hills' CHNA identified low educational attainment and housing/homelessness as key issues in the community. These issues impact economic opportunity and the ability to live healthy lives.

Research has increasingly shown how strongly social and economic conditions determine population health and differences in health among subgroups, much more so than medical care. Housing insecurity is linked to several health outcomes, including poor mental health days, obesity, and higher smoking prevalence

Economic opportunity is a health need locally, as marked by the percentage of residents who experienced housing insecurity at some point during the past year, which is higher than the national benchmark. These various housing factors are. Furthermore, economic opportunity, and the related aspects of increased housing prices, was reported as a major burden and cause for concern by all individuals who participated in the community engagement process, as all individuals expressed the severe impact rising housing prices are having on residents.

The literature and research indicate that educational attainment, specifically fewer bachelor's degrees, is linked to poorer health outcomes compared to individuals who have obtained higher education (i.e. Bachelor's Degree or higher). Negative health outcomes linked to lower education level are: poor mental health days, ER heart attack visits, asthma prevalence, smoking prevalence, and pedestrian injuries. Given the wide reach of this social predictor, additional work needs to be done in order to help support the attainment of higher education. Subject matter experts interviewed during the community engagement processes highlighted several barriers in attaining higher education and how this has larger impacts on the long-term health of an individual.

Economic opportunity (education, housing, and employment) are social predictors that greatly impacts one's ability to lead a health life and if not addressed in the Implementation Strategy can exacerbate existing poor health outcomes in the community.

Mental Health

Poor mental health has become an ever-increasing concern and can have severely detrimental effects across all aspects of a person's life. The average suicide rate in the West Ventura area is 11.5 per 100,00 and in Woodland Hills it is 9 per 1000,000. Additionally, when looking at race/ethnicity groups that are most at risk of suicide, across both areas, Whites have above average suicide rates compared to other groups. Mental health has also been identified as a concern by local residents. Through the community engagement process, residents shared concerns about stress and anxiety and described the major impact these factors have on their daily lives. This health need was selected

to be addressed in the Implementation Strategy because of the urgency of the need and the existing efforts already being conducted around this issue in the service area.

VIII. KFH-Woodland Hills Implementation Strategies

A. About Kaiser Permanente's Implementation Strategies

As part of the Kaiser Permanente integrated health system, KFH-Woodland Hills has a long history of working internally with Kaiser Foundation Health Plan, the Southern California Permanente Medical Group, and other Kaiser Foundation Hospitals, as well as externally with multiple stakeholders, to identify, develop and implement strategies to address the health needs in the community. These strategies are developed so that they:

- Are available broadly to the public and serve low-income individuals
- Are informed by evidence
- Reduce geographic, financial, or cultural barriers to accessing health services, and if they ceased would result in access problems
- Address federal, state, or local public health priorities
- Leverage or enhance public health department activities
- Advance increased general knowledge through education or research that benefits the public
- Otherwise would *not* become the responsibility of government or another tax-exempt organization

KFH-Woodland Hills is committed to enhancing its understanding about how best to develop and implement effective strategies to address community health needs and recognizes that good health outcomes cannot be achieved without joint planning and partnerships with community stakeholders and leaders. As such, KFH-Woodland Hills welcomes future opportunities to enhance its strategic plans by relying on and building upon the strong community partnerships it currently has in place.

KFH-Woodland Hills will draw on a broad array of strategies and organizational resources to improve the health of vulnerable populations within our communities, such as grant making, leveraged assets, collaborations and partnerships, as well as several internal KFH programs. The goals, strategic priorities, strategies (including examples of interventions), and expected outcomes are described below for each selected health need.

B. 2019 Implementation Strategies by selected health need

Health Need #1: Access to Care

Long Term Goal	All community members have access to high quality health care services from a trained and diverse workforce in a coordinated delivery system.
Strategic priorities (intermediate goals)	1. Increase coverage, access, and utilization of health care services for populations that are underserved and uninsured. 2. Improve and build the current and emerging workforce to meet the primary care needs of the community

	3. Improve the capacity of healthcare systems to provide quality healthcare services, including interventions to address social determinants of health. 4. Reduce barriers to accessing care for populations that are underserved.
Strategies & Sample Interventions	1.1 Provide access and comprehensive health care to low-income individuals and families who do not have access to public or private health coverage. o The Kaiser Permanente Medicaid program provides high-quality medical care services to Medicaid eligible participants who would otherwise struggle to access care. o The Kaiser Permanente Medical Financial Assistance program provides temporary financial assistance to low-income individuals who receive care at Kaiser Permanente facilities and who cannot afford medical expenses and/or cost sharing. o The Kaiser Permanente Charitable Health Coverage program provides access to comprehensive health care to low-income individuals and families who do not have access to public or private health coverage 1.2 Support access to care for patients through collaboration among community clinics, clinic networks, and other safety net providers. o With support of grant funding, Regional Associations of California (Essential Access Health) strengthen the capacity of California's community clinics and health centers and to advance local health delivery system transformation through statewide policy. 2.1 Support and implement physician and other pipeline and training programs, using evidence-based, culturally competent and patient-centered population management modules. o The Kaiser Permanente Graduate Medical Education (GME) recruits and prepares the physician workforce of the 21st century by optimizing the unique clinical and educational opportunities within Kaiser Permanente's integrated model of care, which is now considered the gold standard for improving the entire U.S. health care system. As part of their training, residents participate in rotations at school-based health centers, community clinics, and homeless shelters. o KFH-Woodland Hills offers workforce development and training programs in the health care sector to reach underserved youth and young adult 3.1 Design, pilot and implement systems for screening community members with social (non-medical) needs and refer to community-based programs. o The Kaiser Permanente Thrive Local initiative integrates the social determinants of health into ongoing care plans by screening and connecting

	low-income individuals and families to community and government resources (e.g., KP Educational Outreach Programs). ○ KFH-Woodland Hills will screen individuals for food insecurity where vulnerable populations seek care in various departments. 3.2 Strengthen the capacity and infrastructure of community clinics to effectively prevent and manage chronic disease, including cardiovascular health and diabetes. ○ Transforming Cardiovascular Care in our Communities (TC3) supports community clinics, public hospitals and health systems to reduce cardiovascular disease by implementing innovative population health management practices ○ Kaiser Permanente will explore opportunities to support community clinics as they address chronic disease prevention and management. 4.1 Address barriers to quality, culturally appropriate care by providing language and literacy interpretation, transportation, non-traditional access points, and/or other supportive services. ○ With support of grant funding, collaborate with community organizations to reduce barriers to accessing medical care for vulnerable populations including seniors, homeless, and low-income residents and in high-need areas (e.g. Simi Valley Behavioral Health, Target clinics)
Expected outcomes	Sustained and/or enhanced availability of services and financial resources to support coverage and access to quality healthcare for uninsured and underinsured community members. Improved referrals and coordination between healthcare providers and community resources and programs. Sustained and/or enhanced training and workforce development programs in primary healthcare. Improved healthcare provider capacity to screen their members and patients for non-medical social needs. Improved referral and coordination between healthcare and community-based providers to address the social needs of communities. Reduced barriers to access healthcare through the provision of transportation options, language services, and/or other supportive services.

Health Need #2: Healthy Eating, Active Living

Long Term Goal	All community members have optimal levels of health and well-being through access to healthy food and physical activity opportunities.
Strategic priorities (intermediate goals)	1. Reduce food insecurity and improve access to healthy foods. 2. Improve prevention and management of chronic disease, including cardiovascular health, diabetes, and obesity. 3. Improve environments and opportunities that enable daily physical activity.
Strategies & Sample Interventions	1.1 Design, pilot and implement programs and systems for promoting, screening and/or enrolling community members in food benefit programs. o KFH-Woodland Hills will screen for food insecurity in various departments, including Pediatrics, Case Management, Social Medicine, Nutrition and Revenue Cycle. o The Kaiser Permanente Food for Life initiative includes the CalFresh enrollment campaign which utilizes multi-modal outreach to increase CalFresh enrollment for eligible community members. 1.2 Support programs that procure, recover and/or redistribute food to food insecure communities. o The Kaiser Permanente Food Recovery and Food Redistribution program envision foodservices as the source of nutritious meals for patients, staff and the broader community by distributing food to food insecure communities. o KFH-Woodland Hills partners with Food Finders to donate our daily food excess to those in need. o With support of grant funding, the California Association of Food Banks Farm to Family utilizes advocacy and outreach efforts to procure and provide fresh produce to food banks serving individuals and families who are food insecure. 1.3 Support the capacity of communities and anchor organizations to adopt and implement policies and programs to ensure access to healthy foods. o With support of grant funding, collaborate with community organizations and schools to adopt and implement policies and programs to increase access to healthy foods on their sites 2.1 Provide opportunities for increasing awareness of prevention and management of chronic disease, including cardiovascular health, diabetes, and obesity. o KFH-Woodland Hills will continue to offer education (workshops and programs) through Center for Healthy Living, some of which are open to the community. 3.1 Support the capacity of communities and anchor organizations to adopt and implement policies and programs to ensure access to safe spaces and physical activity opportunities.

	○ The Kaiser Permanente Operation Splash program enables low income, underserved youth and families to be physically active by providing greater access to community pools through free swim classes. ○ With support of grant funding, LA's Best provides safe and supervised after-school education and recreation programs for children ages five to twelve through established nutrition and physical activity programs at 200 sites.
Expected outcomes	Increased number of community members screened for food insecurity and enrolled in food benefit programs. Improved availability of free and healthy food for food insecure individuals and families. Reduced food waste and carbon emissions. Improved policies and practices that create healthy food and physical activity environments for students, staff and their families.

Health Need #3: Economic Opportunity

Long Term Goal	All community members experience improved economic security and access to social services, including affordable housing, educational attainment, training and employment.
Strategic priorities (intermediate goals)	1. Preserve and improve the availability of affordable housing and improve care coordination to serve individuals experiencing homelessness and to prevent displacement. 2. Improve educational attainment and employment opportunities.
Strategies & Sample Interventions	1.1 Enhance the infrastructure and capacity of service providers to serve individuals at risk or experiencing homelessness. ○ With funding support, KFH-Woodland Hills will collaborate with community organizations to provide housing navigation support for individuals at risk or experiencing homelessness. 1.2 Support and participate in collaboratives that support coordination and funding of resources (such as health services and housing) for individuals at risk or experiencing homelessness. ○ Kaiser Permanente, Southern California is a key partner in the United Way Funder's Collaborative (Home for Good), which brings together stakeholders, funders, and leaders all working to address housing affordability and homelessness. The collaborative was a key contributor to

	the development of the county's Coordinated Entry System (CES) lead agencies that connect homeless individuals to services. 2.1 Support the long-term economic vitality of communities through procurement, hiring and workforce development, and/or small business development impact investing. o The Kaiser Permanente Social Enterprises strategy works competitive, revenue-generating businesses with the social mission to hire and provide training to people who are striving to overcome employment barriers, including homelessness, incarceration, substance abuse, mental illness, and limited education. o The Kaiser Permanente, High Impact Hiring is a talent-sourcing strategy that aligns business needs with positive community impact. High Impact Hiring creates career opportunities for people with employment barriers, focusing on specific populations of disadvantaged people or specific geographic areas. o With funding support, KFH-Woodland Hills will continue to collaborate with community organizations to increase education and career pathways opportunities for youth.
Expected outcomes	Increased access to education and employment opportunities. Improve economic security and promote health through leveraging KP assets to drive community health and champion organizational practice changes within KP.

Health Need #4: Mental Health

Long Term Goal	All community members have optimal levels of mental health and well-being through improved equitable access to evidence-based, high quality, appropriate care and reduced effects of stigma.
Strategic priorities (intermediate goals)	1. Improve access and connection to mental health care in clinical and community settings 2. Improve and build the current and emerging mental health workforce to meet community needs. 3. Reduce mental health stigma and improve knowledge, capacity, and resilience in individuals, communities, and organizations.
Strategies & Sample Interventions	1.1 Support the infrastructure and capacity building of community organizations and clinics to improve access to quality mental health care. o With the support of grant funding, Children Now Improving California Students' Readiness to Learn will map the current state and district school-based health policy efforts and develop a list of policy options to improve

	school-based mental health services. Partner organizations will receive resources and technical assistance on best policies/ practices related to school discipline, teacher credentialing, mental health, school attendance, and Local Control Funding Formula ○ With the support of grant funding, KFH-Woodland Hills will continue to collaborate with community organizations to expand access to quality mental health resources and programs. 2.1 Support the education and training of licensed mental health professionals to be culturally competent. ○ With the support of grant funding, Hathaway-Sycamores Child and Family Services So. California Child Welfare Collaborative Phase 2 will provide training for group home foster care providers in Southern California so that they can become certified as Short Term Residential Therapeutic Programs. 3.1 Support efforts to improve the community and social support system's knowledge, attitudes, beliefs and perceptions about mental health, trauma and resilience. ○ With the support of grant funding, the Children's Partnership Advancing Health Equity for California's Children will provide families with culturally-informed materials and toolkits to help connect them to/keep health coverage, understand benefits available to them, and get needed care. ○ With the support of grant funding, the Village Family Services Mental Health & Wellness for Homeless Transition Age LGBTQ Youth Project seeks to reduce mental health stigma and improve resilience of LGBTQ youth providing and linking LGBTQ youth to services promoting health, wellness, and healthy social engagement in a community environment, while striving to decrease incidence of homelessness for LGBTQ youth. 3.2 Support the enhancement of organizational culture, practices and policies in schools and other institutions to be trauma-informed ○ The Kaiser Permanente Public Good Projects' Action Minded campaign is a digital community health intervention using education, social engagement and multi-media tools to engage the general public, issue-advocates and community partners in reducing stigma towards mental health conditions
Expected outcomes	Enhanced capacity in clinical and community-based settings to address community mental health needs. Improved use of screening tools [in specific settings, e.g. schools] to identify mental health issues and connect individuals to appropriate resources. Improved understanding of and attitudes toward mental health care among individuals

and organizations.

C. Our commitment to Community Health

At Kaiser Permanente, our scale and permanence in communities mean we have the resources and relationships to make a real impact, and wherever possible, our regions and facilities collaborate with each other and with key institutions in our communities, such as schools, health departments, and city/county governments to create greater impact. The CHNA/IS process presents the opportunity to reinforce and scale national and regional strategies to address health needs that impact all of our communities, even if those health needs are not prioritized locally. The following strategies illustrate the types of organizational business practices as well as regional efforts that we implement to address multiple health needs and contribute to overall community health and well-being:

- **Reduce our negative environmental impacts and contribute to health at every opportunity.** We have optimized the ways in which we manage our buildings; purchase food, medical supplies and equipment; serve our members; consume energy; and process waste. The following strategies illustrate several of our practices that enable us to operate effectively while creating a healthier environment for everyone. Our Environmentally Preferable Purchasing Standard prioritizes the procurement of products with fewer chemicals of concern and less resource intensity, thus encouraging suppliers to increase the availability of healthier products. We are building renewable energy programs into our operations, with plans to be carbon neutral in 2020. We recognize that mitigating the impacts of climate change and pollution is a collective effort, and we are therefore proud to work with like-minded organizations and individuals, including the United Nations, Health Care Without Harm, government entities, as well as other influencers that advocate for environmental stewardship in the healthcare industry and beyond.
- **Deploy research expertise to conduct, publish, and disseminate epidemiological and health services research.** Conducting high-quality health research and disseminating its findings increases awareness of the changing health needs of diverse communities, addresses health disparities, and improves effective health care delivery and health outcomes in diverse populations disproportionately impacted by health disparities. Kaiser Permanente's Department of Research and Evaluation, Kaiser Foundation Research Institute, and Nursing Research Programs deploy a wide range of research methods, including clinical research, health care services research, and epidemiological and translational studies on health care that are generalizable and broadly shared, helping build a knowledge base that improves health and health care services.
- **Implement healthy food policies to address obesity/overweight**, such as purchasing sustainable, locally produced fruits and vegetables; supporting local restaurants and caterers that meet KP's Healthy Picks and to make more available healthier food options in our communities; and supporting vendors that hire under/unemployed residents (with living wages and benefits) in the food production/distribution process. We also partner with school districts and city governments to support them in adopting and implementing healthy food procurement policies.
- **Contribute toward workforce development, supplier diversity, and affordable housing to address economic security.** We support supplier diversity by implementing policies and

standards to procure supplies and services from a diverse set of providers; working with vendors to support sub-contracting with diverse suppliers; partnering with community-based workforce development programs to support a pipeline for diverse suppliers; and building the capacity of local small businesses through training on business fundamentals. We also seek to reduce homelessness and increase the supply of affordable housing by strengthening systems to end homelessness and shaping policies to preserve and stimulate the supply of affordable housing.

- **Support community members directly through ongoing engagement and direct services.** The Kaiser Permanente Educational Theater (KPET) uses live theatre, music, comedy, and drama to inspire children, teens, and adults to make healthier choices and better decisions about their well-being around topics such as: reading and literacy, conflict management, healthy eating and active living, bullying, and sexually transmitted infections. KPET is provided free of charge to schools and the general community.

IX. Evaluation plans

Kaiser Permanente has a comprehensive measurement strategy for Community Health. Our vision at Kaiser Permanente is for our communities to be the healthiest in the nation. To that end, we are committed to pursuing a deep and rigorous understanding of the impact of our community health efforts. We monitor the health status of our communities and track the impact of our many initiatives on an ongoing basis. And we use our measurement and evaluation data, and information gathered through our Community Health Needs Assessments, to improve the effectiveness of our work and demonstrate our impact. The Community Health Needs Assessments can help inform our comprehensive community health strategy and can help highlight areas where a particular focus is needed and support discussions about strategies aimed at addressing those health needs.

In addition, KFH Woodland Hills will monitor and evaluate the strategies listed above for the purpose of tracking the implementation and documenting the impact of those strategies in addressing selected CHNA health needs. Tracking metrics for each prioritized health need include the number of grants made, the number of dollars spent, the number of people reached/served, collaborations and partnerships, and metrics specific to KFH leveraged assets. In addition, KFH Woodland Hills tracks outcomes, including behavior and health outcomes, as appropriate and where available.

X. Health needs KFH-Woodland Hills does not intend to address

While all the health needs prioritized in the 2019 Community Health Needs Assessment process are important to address, the implementation strategy planning process requires KFH-Woodland Hills to conduct a selection process based on critical criteria including health need severity, magnitude, inequity, and the extent to which KFH-Woodland Hills is in a position to meaningfully address the need. KFH-Woodland Hills plans to address all the needs identified in the CHNA: access to care and mental health are needs directly addressed through evidenced based and promising strategies and economic opportunity will be an overarching health need that includes educational attainment and housing/ homelessness. Similarly, the healthy eating, active living health need will address the root causes of obesity, cardiovascular disease, and diabetes.