2024 - 2026 Community Health Improvement Plan

Responding to the 2023 Community Health Needs Assessment

Washington Hospital Healthcare System

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Introduction

The Community Health Improvement Plan (CHIP) describes how Washington Hospital Healthcare System (WHHS) plans to address health needs identified in the 2023 Community Health Needs Assessment (CHNA). This implementation plan lays out a plan of work to implement strategies that will improve the health of District residents in fiscal years 2024 through 2026.

The 2023 CHNA and the 2024 – 2026 Community Health Improvement Plan were undertaken by the hospital to understand and address community health needs, and in accordance with California state law and Internal Revenue Service regulations pursuant to the Patient Protection and Affordable Care Act of 2010. WHHS reserves the right to amend this plan as circumstances warrant. Beyond the initiatives and programs described, the hospital also addresses community health needs by providing health care to the community, regardless of patients' ability to pay.

WHHS welcomes comments from the public on the 2023 Community Health Needs Assessment and 2024 – 2026 Health Improvement Plan. Feedback may be submitted through the online Contact form (www.whhs.com/contact-us/) or emailed directly to communityoutreach@whhs.com.

Executive Summary

Washington Hospital Healthcare System is a District hospital, opened in 1958. The District encompasses 124 square miles of Southern Alameda County and is governed by an elected Board of Directors consisting of five members. WHHS serves the residents of Fremont, Newark, Union City, part of southern Hayward and unincorporated Sunol. The District's population is approximately 350,145.

Each year, WHHS provides a host of innovative and impactful community benefit programs and services for underserved and underinsured residents. The hospital's community benefit programs and activities are designed to:

- Meet the specific healthcare needs of targeted populations
- Expand availability of healthcare to those most in need
- Provide health information and education resources
- Teach participants about healthier lifestyles and the importance of staying healthy.

Washington Hospital Healthcare System conducted research for the 2023 Community Health Needs Assessment in 2022. The health system's goal was to gather community feedback, understand existing data about health status, and prioritize local health needs. Community input was obtained during the summer and fall of 2022 through key informant interviews with local health and community experts, focus groups with community leaders and representatives, and focus groups with community residents. Secondary data were obtained from a variety of sources and were gathered in fall and winter of 2022–2023.

Eight health needs were identified in the 2023 CHNA. The full 2023 Community Health Needs Assessment conducted by WHHS is available at: https://www.whhs.com/about-us/community-connection/community-health-needs-assessment/

Significant Health Needs Identified in the 2023 CHNA

The following significant health needs were identified in the 2023 CHNA (listed in priority order):

- ***Behavioral Health:*** Community members considered behavioral health an important priority, as evidenced by the fact that it was discussed at length in almost all key informant interviews and focus groups. The community noted the lack of access to behavioral health services and facilities, including information about how to access existing resources. Not surprisingly, pandemic isolation was a big concern, especially for older adults, those with medical vulnerabilities, and LGBTQIA+ residents who may already have felt disconnected from their families and are seeking connection at community centers. Parents expressed concern about alcohol and drug use by their children. In addition, adult binge drinking and 7th grade binge drinking were both found to be higher in Newark than in the county as a whole.

- ***Housing & Homelessness:*** With the cost of housing so expensive in the Bay Area, the community identified lack of adequate housing as a pressing health need. Community members described seeing more people struggling with their living expenses, as a direct result of housing consuming so much of a household's budget. The number of homeless people in Alameda County has increased in the last two years by 22 percent. This trend was also evident in Fremont and Union City, where the increase in people who are unsheltered was greater than in the county. Community members also noted a sizable increase in people living in cars and encampments. Compounding the problem, emergency shelter space was limited by COVID restrictions and the need for social distancing. This reduction in the number of beds has disproportionately impacted those who are escaping domestic abuse. We also know that some populations, especially Black residents, are overrepresented in the homeless population.

- ***Economic Security:*** The community described the high cost of living as a barrier to healthy living, and particularly highlighted the difficulty individuals with health issues, disabilities, or those experiencing homelessness have in securing employment. Focus group members also reported a sharp rise in food insecurity in summer 2022, due to inflation and the cost of living. Overall, study participants expressed concern about an increase of residents losing their housing due to economic difficulties. While most data indicators, including measures of poverty, are favorable for cities in WHHS's service area, per capita income in Newark and Union City is lower (by 6 percent and 13 percent, respectively) than the average for Alameda County. Data also show inequities by race. Overall, black, indigenous, and people of color (BIPOC) District residents have lower incomes than other racial and ethnic groups and have a higher proportion of their population living in poverty. Finally, the proportion of youth neither in school nor working is higher in Newark and Union City than in the county overall.

- ***Diabetes & Obesity:*** The community expressed the need not only for access to healthy food in grocery stores, but also for nutrition education in schools and communities. Additionally, participants called out the need for recreation programs to prevent diabetes and for safe spaces to recreate and walk in their neighborhoods. Diabetes and obesity met the threshold for a health need because the statistical data showed that the proportion of children who are overweight in Newark and Union City is higher than in the county and state overall. Notably, the incidence of adults with diabetes is worse in all three cities in the District, and rates of diabetes ED visits and hospitalization are issues in Union City and Newark. Also, there are inequities by race for adult obesity and diabetes.

- ***Heart/Stroke:*** Cerebrovascular conditions such as stroke, heart disease, and heart attack are among the top causes of death in the county. The community did not discuss heart and stroke issues specifically, but they did call out the need for recreation programs to prevent heart problems and for nutritional education for older adults. However, the quantitative data analyzed in the CHNA revealed significant disparities in the incidence of cardiac related conditions in the District. Most notably, compared to other cities in the District and the county, Union City residents have dramatically worse rates of cardiac-related emergency department visits (stroke, hypertension, and heart failure), hospitalizations (heart disease, hypertension), and mortality (acute myocardial infarction, heart disease, and ischemic heart diseases). While stroke mortality has been decreasing in Fremont and Newark, it continues to increase in Union City, where it is higher than the Healthy People 2030 benchmark.

- ***Healthcare Access & Delivery:*** Access to healthcare and difficulty receiving care were prominent areas of focus in the community input we received. The high cost of insurance and healthcare services was reported as being unaffordable, even for those who have coverage. Also, some community members who are employed, but have trouble making ends meet, find it difficult to qualify for Medi-Cal. Residents perceive that overall there is a relative lack of health-care facilities in southern Alameda County compared to other areas of the county. Monolingual Spanish-speaking residents described problems communicating with doctors and being unable to participate in some community health programs. Communication is also difficult for non-verbal residents, including those who are deaf/hard of hearing. LGBTQIA+ community members described recent improvements in health care delivery, but also stressed that more health professionals need to become culturally competent to serve this population. Cultural competency in healthcare is also important for those in the service area from non-Western cultures. In some cultures, for example, families make health decisions together, but clinicians often do not include family members in discussions.

- ***Respiratory Health:*** Statistical analysis of quantitative health data qualified respiratory health as a need in Union City. Rates of visits to the emergency department for chronic obstructive pulmonary disease (COPD) and asthma hospitalizations among adults were both higher in Union City than in Alameda County.

- ***Cancer:*** Cancer qualifies as a health need because of the racial/ethnic disparities that are evident in the data. The overall cancer incidence rate in the service area is worse than the Alameda County average. Data also show that the overall incidence rate for certain types of cancer is higher for White, Black, and Latinx residents than for residents of the county as a whole.

2024 – 2026 Community Health Improvement Plan

The Community Health Improvement Plan describes how WHHS plans to address the health needs identified in the 2023 CHNA and reduce health disparities that the data reveal. The CHIP describes actions WHHS intends to take, including:

- Programs and resources it will commit to improve the health of District residents
- Collaborations it will pursue with other organizations in the community to improve health outcomes

WHHS leadership and Community Outreach staff reviewed the 2023 CHNA report and based upon the data and findings selected five community health needs that the hospital can most effectively address. The following health needs will be the primary area of focus for health improvement for 2024-2026:

- Behavioral Health
- Diabetes & Obesity
- Heart/Stroke
- Healthcare Access & Delivery
- Cancer

Please note that the Ongoing Initiatives listed in the following section is not an exhaustive inventory of all the health-education outreach activities that WHHS is engaged in. The list is intended to highlight initiatives that are current priority areas. Likewise, WHHS may begin additional education and prevention programs in the next three years, as health needs evolve in the District.

Plan for Addressing Selected Health Needs

Behavioral Health Initiatives

Ongoing Initiatives

- **Staff City of Fremont Mobile Evaluation Team with a WHHS social worker**
- **Convene South County Partnership**
- **Provide community health education presentations at health fairs, senior centers, schools, faith communities, and in Health & Wellness programming**
- **Host external advocacy groups at WHHS facilities (Narika, SAVE, Codependents Anonymous)**
- **Host WHHS support group for bereaved community members**
- **Partner with BAWAR and SAVE on patient advocacy for intimate partner violence cases that present in the ED**

New Initiatives

- **Conduct targeted outreach and education in Newark USD and New Haven USD on fentanyl use and Naloxone reversal agent for opioid overdose with Haller's Pharmacy**
- **Provide targeted education on Mental Health and Wellbeing in schools across the District**
- **Collaborate with Alameda County Behavioral Health Service Agency on opening an Outpatient Behavioral Health Clinic**
- **Launch a pilot program with a Substance Use Navigator in the Emergency Department**

Diabetes and Obesity Initiatives

Ongoing Initiatives

- **Provide community health education presentations at health fairs, senior centers, schools, faith communities, and in Health & Wellness programming**
- **Offer affordable wellness and exercise classes for community members**
- **Host Diabetes Matters and diabetes support group**

New Initiatives

- **Implement an on-site farmer's market**
- **Develop "Farmacy" partnership with TCV Food Bank and Mobile Pantry**
- **Update diabetes website and online toolbox to include more healthy eating videos, translated materials, and culturally relevant nutrition education**

- Conduct targeted outreach and education in Newark USD and New Haven USD on Nutrition and Healthy Eating
- Host Diabetes Health Fairs in Danielson and Nakamura Clinics
- Provide focused diabetes education with partners that serve the Black and Asian communities, especially faith communities

Heart/Stroke Initiatives

Ongoing Initiatives

- Provide community health education presentations at health fairs, senior centers, schools, faith communities, and in Health & Wellness programming on the following topics: Hypertension, Stroke, Vascular Conditions, Heart Disease and Heart Attack, Cholesterol
- Host Mended Hearts support group and stroke support group

New Initiatives

- Convene Union City Heart Health Summit, which will include education on prevention and treatment of heart conditions and clinical screenings for cholesterol, blood pressure, and aneurysm
- Offer Stroke and Heart Disease Education for families in New Haven USD Schools

Healthcare Access & Delivery Initiatives

Ongoing Initiatives

- Pursue Trauma Service Designation, with trauma patients expected in 2024
- Promote Health Insurance Information Service, including services to find a doctor and navigate the healthcare system
- Continue the free Community Lymphedema Garment Program for underserved patients
- Partner with ReCARES on community DME program for patients without means

New Initiatives

- Establish a Patient Family Advisory Council comprised of former patients and family members to drive positive changes in patient experience
- Increase culturally competent delivery of care for all populations (disability community, non-English-speaking, and non-verbal communities)
- Educate WHHS staff across the health system on diversity, equity and inclusion best practices
- Increase appropriate use of translation technologies
- Broaden Health & Wellness seminar offerings and in-person speaking events to include topics in different languages

Cancer Initiatives

Ongoing Initiatives

- Provide community health education presentations at health fairs, senior centers, schools, faith communities, and Health & Wellness programming
- Host Cancer Support Group and Breast Cancer Support Group
- Promote free mammogram partnership with Tiburcio Vasquez Health Center
- Increase use of lung cancer screening tool for Low Dose CT through PCPs and pulmonologists
- Continue annual free skin cancer screening events

New Initiatives

- **Complete expansion of the UCSF-Washington Cancer Center by early 2025**
- **Work with UCSF to increase access to more cancer trials**
- **Expand clinic partnerships for free mammogram program**
- **Offer smoking and vaping health education in schools across the District**
- **Create local partnerships with advocacy groups and faith organizations to reach underserved racial and ethnic groups (Tiger Lily Foundation, Afghan Coalition, Promotoras)**
- **Host Men's Health Summit in partnership with non-profits and faith organizations, with a particular emphasis on promoting preventative screenings for prostate cancer for the Black community.**

Increased Focus on Union City for 2024-2026 Outreach Work

When looking at key statistics, it is clear that the health of District residents in Union City has failed to keep pace with Fremont and Newark. The CHNA compared each city's statistics to Alameda County averages for 25 indicators related to four major health needs: Behavioral Health, Diabetes & Obesity, Heart/Stroke, and Respiratory Health. Fremont did better than the county on all 25 indicators. Newark did better than the county on all but six of the 25 statistics. Union City only did better than the county on about half (12) of the 25 statistics.

Community outreach work over the next three years will include additional efforts in Union City to address disparities on the following heath conditions: stroke, hypertension, heart disease, acute myocardial infarction, diabetes, asthma/COPD, childhood obesity, school-age depression and alcohol/drug use. This work will be implemented in collaboration with key community partners and stakeholders throughout Union City. Some partners we plan to engage with specifically for outreach in Union City are:

- Union City Department of Human Services
- Union City Family Center
- New Haven Unified School District
- East Bay Agency for Children
- Filipino Advocates for Justice
- Centro de Servicios
- East Bay Regional Park District
- Our Lady of the Rosary Church
- St. Anne's Catholic Church
- Southern Alameda Co. Buddhist Church

Community Needs that WHHS Plans to Address through Partnership

No health system by itself can directly address all of the health needs present in its community. Many of the social determinants of health that affect residents' wellbeing are beyond the scope of WHHS's activities. For three of the eight community health needs identified in the 2023 CHNA, WHHS will support residents' health by collaborating with community-based organizations that more directly address these social issues.

- **Housing & Homelessness**: While WHHS plans to address this need through Healthcare Access & Delivery and Behavioral Health strategies, staff will also work with other community organizations in the housing and homelessness space. Below are some examples of partner organizations that WHHS collaborates with:
  - Abode Services
  - Alameda County Social Services Agency

- Bay Area Community Services (BACS)
- Fremont Family Resource Center
- Union City Family Center

- **Economic Security:** WHHS plans to address this need through Healthcare Access & Delivery strategies and through work with other community organizations. Below are some examples of partner organizations that WHHS will work with on Economic Security:
  - Avanzando
  - Bay Area Community Services (BACS)
  - Centro de Servicios
  - Citizens for Better Community
  - CURA
  - Daily Bowl
  - Fremont Education Foundation
  - Fremont Family Resource Center
  - Fremont Unified School District
  - Mission Valley ROP
  - New Haven Schools Foundation
  - New Haven Unified School District
  - Newark Education Foundation
  - Ohlone College
  - Second Chance
  - Tri-City Volunteers
  - Union City Family Center

- **Respiratory Health:** The quantitative data included in the 2023 CHNA showed very few disparities in the incidence of respiratory related health conditions. For most conditions such as asthma, the incidence in the District was very similar to the county average. However, we recognize that the community continues to have concerns about respiratory health following the COVID-19 pandemic, and we intend to continue working on this issue with partner organizations within the District and countywide. Partners will include:
  - Alameda County Asthma Coalition
  - Alameda County Healthy Homes Alliance
  - American Lung Association
  - Breathe California
  - Tobacco Control Coalition of Alameda County

Approval by the Board of Directors

The Washington Township Health Care District Board of Directors adopted the 2024-2026 Health Improvement Plan on November 8, 2023.