

# Adventist Health Portland

2019 Community Plan Update/ Annual Report



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## Adventist Health Overview

Adventist Health Portland is an affiliate of Adventist Health, a faith-based, nonprofit, integrated health system headquartered in Roseville, California. We provide compassionate care in more than 80 communities throughout California, Hawaii, Oregon and Washington.



### **OUR MISSION:**

Living God’s love by inspiring health, wholeness and hope.

### **OUR VISION:**

We will transform the health experience of our communities by improving health, enhancing interactions and making care more accessible.

Adventist Health entities include:

- 21 hospitals with more than 3,200 beds
- More than 280 clinics (hospital-based, rural health and physician clinics)
- 13 home care agencies and seven hospice agencies
- Four joint-venture retirement centers
- Compassionate and talented team of 35,000 includes associates, medical staff physicians, allied health professionals and volunteers

We owe much of our heritage and organizational success to the Seventh-day Adventist Church, which has long been a promoter of prevention and whole person care. Inspired by our belief in the loving and healing power of Jesus Christ, we aim to bring physical, mental and spiritual health and healing to our neighbors of all faiths. Every individual, regardless of his/her personal beliefs, is welcome in our facilities. We are also eager to partner with members of other faiths to enhance the health of the communities we serve.

Our commitment to quality health care stems from our heritage, which dates back to 1866 when the first Seventh-day Adventist health care facility opened in Battle Creek, Michigan. There, dedicated pioneers promoted the “radical” concepts of proper nutrition, exercise and sanitation. Early on, the facility was devoted to prevention as well as healing. They called it a sanitarium, a place where patients—and their families—could learn to be well.

More than a century later, the health care system sponsored by the Seventh-day Adventist Church circles the globe with more than 170 hospitals and more than 500 clinics, nursing homes and dispensaries worldwide. And the same vision to treat the whole person—mind, body and spirit—continues to provide the foundation for our progressive approach to health care.

## Letter from the President



Dear Friends and Colleagues,

For 127 years, Adventist Health Portland has been serving greater Portland with health, healing spiritual care and community engagement. We have always sought to bring more than sick care to this community, and that commitment continues to this day.

Our team seeks to care for the whole person in life-transforming ways. Our understanding of body, mind and spirit makes us unique and confirms our commitment to our mission – Living God’s love by inspiring health, wholeness and hope.

As Jesus ministered to people, He cared for their physical needs and then went on to address their emotional and spiritual health. Our mission calls us to do the same. We are expanding our mission focus from “healthcare” and “healing” to “health”. Health calls us to think broadly about the people and the communities we serve. We continue to provide health care and healing but are also challenging ourselves to think about how we can help each person we encounter to achieve optimal personal health. This means engaging with our communities to understand how we can support population health improvement, as well as creating an optimal work environment for our team members to support a balanced approach to life.

One of the things we’re most proud of is our exceptional team of medical providers. Our providers have the challenge and privilege to help make life-changing decisions each day through mission inspired, compassionate care. Adventist Health Medical Group providers partner with their patients to serve as a wellness resource and make a positive impact through the conversations they have. Our nursing staff maintains the highest certifications because they know every member of our community deserves the best care. And the rest of our team members do their very best work in support of the those providing direct patient care.

We continue to look for opportunities to expand our mission. We have a huge houselessness problem in our community, and the related food insecurities surround us. OHSU Adventist Health Portland has partnered with several community organizations to be part of the solution. It feels like we’ve only made a dent, and through further integration and involvement we seek to change even more lives and make a measurable, demonstrable difference.

Thank you for partnering with us in our commitment to Live God’s love.

In service,

A handwritten signature in black ink that reads "Joyce Newmyer". The signature is written in a cursive, flowing style.

Joyce Newmyer, President

## ADVENTIST HEALTH PORTLAND



***Portland Adventist Medical Center (dba Adventist Medical Center, and Adventist Health Portland)***

***Number of Beds:*** 302

***Mailing Address:*** 10123 SE Market St., Portland, OR 97216

**Contact Information:**

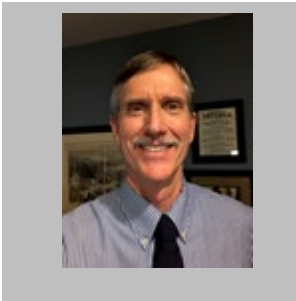
Existing healthcare facilities that can respond to the health needs of the community:

- Oregon Health Sciences University (OHSU)
- Legacy Health
- Kaiser Permanente
- Providence Health & Services
- Coalition of Community Health Clinics
- County Health Departments, etc.

## Community Health Development Team



Terry Johnsson, DMin  
Vice President, Mission Integration



Edward Hoover, MA  
Manager, LivingWell/Community Wellness



C.J. Anderson  
Marketing & Communication Manager

### CHNA/Implementation Strategy contact:

Ed Hoover, or Terry Johnsson  
10123 SE Market St.

To request a copy, provide comments or view electronic copies of current and previous community health needs assessments:

<https://www.adventisthealth.org/about-us/community-benefit/>

## Invitation to a Healthier Community

### Fulfilling the Adventist Health Mission

Where and how we live is vital to our health. We recognize that health status is a product of multiple factors. To comprehensively address the needs of our community, we must take into account health behaviors and risks, the physical environment, the health system, and social determinant of health. Each component influences the next and through strategic and collective action improved health can be achieved.

The Community Health Plan (Implementation Strategy) marks the second phase in a collaborative effort to systematically investigate and identify our community's most pressing needs. After a thorough review of health status in our community through the Community Health Needs Assessment (CHNA), we identified areas that we could address using our resources, expertise, and community partners. Through these actions and relationships, we aim to empower our community and fulfill our mission, "to share God's love by providing physical, mental and spiritual healing."

### Identified Community Needs

The results of the CHNA guided the creation of this document and aided us in how we could best provide benefit to our community and the most vulnerable among us. As a result, Adventist Health Portland has adopted the following priority areas for our community health investments for 2017-2019:

- **Chronic Disease**
- **Access to Care**
- **Behavioral Health/Addictions**
- **Social Determinants of Health**

Additionally, we engage in a process of continuous quality improvement, whereby we ask the following questions for each priority area:

- Are our interventions making a difference in improving health outcomes?
- Are we providing the appropriate resources in the appropriate locations?
- What changes or collaborations within our system need to be made?
- How are we using technology to track our health improvements and providing relevant feedback at the local level?
- Do we have the resources as a region to elevate the population's health status?

Building a healthy community requires multiple stakeholders working together with a common purpose. We invite you to explore how we intend to address health challenges in our community and partner to achieve change. More importantly though, we hope you imagine a healthier region and work with us to find solutions across a broad range of sectors to create communities we all want for ourselves and our families.

## 2019 Community Benefit Update

In 2016 Adventist Health Portland conducted a community health needs assessment and was followed by a 2017 Community Health Plan (Implementation Strategy) that identified the priority needs listed below. The prioritized needs were chosen based on community health data and the voices of our community. Working together with our community is key to achieving the necessary health improvements to create the communities that allow each member to have safe and healthy places to live, learn, work, play, and pray. Below you will find an inventory of additional interventions supporting the health of our communities.

### Priority Need - Chronic Disease

**Objective 1:** Reduce local cancer deaths through prevention, early detection and patient support efforts for the following cancer types: Breast, Colorectal, Lung and Skin. (Previously Objectives 1-3)

**Intervention:** Continue to develop funding and outreach partnerships to improve **mammography screening** for those not covered by insurance. Number of Community Members Served with special grant: 73 Mammography screens in 2019 (an increase each year beginning in 2016).

**Intervention:** Continue provider education and outreach to qualifying Smokers for **Low-dose Lung CT Scan Program**. Number of Community Members Served in 2019: 695 LDCT Scans (a significant increase over both 2017 and 2018.)

**Intervention:** Provide free **skin cancer screening** and interactive educational activity at a single day Compassion Connect Clinic in Sandy, OR. Number of guests served: 48 skin cancer quizzes returned (60% scored 100%) and 15 skin cancer screens. Impact Your Health Clinic skin cancer screening clinic cancelled due overall event postponement to 2020.

**Intervention:** Support the community education and mammography screening work of **Komen Foundation** at the Race for the Cure. Also provide practical nutrition support (bananas) to approximately 3,000 Race for the Cure participants in 2019.

**Intervention:** Community **Colorectal/Digestive Health Outreach** Activities in March 2019, plus Sunny City event and Compassion Sandy Clinic in the summer. (Included in Objective 6). Interactive display and Media provided coverage of the importance of colorectal screening and other preventive measures. While participation in other educational activities was higher, **166 participants took the Gut Check Challenge post-education quiz; 76% scored 100% on the quiz.**



**Intervention:** Provide **Cancer Navigator** and other **support services** to help patients better navigate treatment and the stress often connected with cancer care. 85 persons/families





served in 2019 (the position was vacant for part of the year. The FREE Cancer Support Group served 104 in 2019.

**Objective 2:** Reduce deaths from Heart Disease

**Intervention:** Provide opportunities for young people/adults to get exercise and make/enjoy fresh fruit smoothies and spin art using new Bike Blender. Also focused on fresh herbs and healthy, low-sodium recipes to help reduce High BP. 2019 Montavilla Street Fair and Slavic Festival. Number of Community Members Served: Approx. 2,000 contacts (Attendance much higher)

**Intervention:** Conduct FREE **Community Heart Health Education** series in February featuring providers from Northwest Cardiovascular Institute (Included in Objective 6). Number of contacts: 155

**Intervention:** Supported community fitness events that also raise funds for Heart health research and services. AH Portland joined with OHSU for the 2019 American Heart Association Heart Walk.



**Objective 3:** Provide Healthier futures for babies and families

**Intervention: Car Safety Seat Project.** Number of Families Served with free/subsidized car seats: 11 Families. In July 2019, also co-hosted a brief **Safety Seat Clinic** in partnership with OHSU. 21 families visited and checked 32 car seats. They found a 96% misuse rate upon arrival. The clinic also provided low cost car seat distribution for 7 additional children who were identified as low income.

**Objective 4:** Promote & support the adoption of healthier lifestyles to prevent/manage/help reverse chronic diseases.

**Intervention: Additional Community Classes, & support groups on lifestyle and health conditions, e.g. nutrition, cooking, sleep, diabetes, smoke-free support, driver safety, etc).** Approximate number of Community Members Served: 1000 encounters

**Intervention:** In late 2018 a **LivingWell Fitness Trail** was established around the hospital campus, and in the Tunnel system to promote outdoor physical activity and build community. (Also Social Determinants, Objective #3). With extremely limited promotion in 2019, there were 358 logged visits using the QR fit code feature. Many more use the walking path around the campus, but do not necessarily log in.





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**Intervention: Health for Life Publication** - Quarterly health publication that covers a variety of relevant health topics and community wellness-related news. Number of Community Members Served: Average 97,869 households touched in 2019.

**Intervention: VegFest 2019** – Two-day event with Interactive education/materials about plant-based nutrition and other lifestyle factors related to health/chronic disease prevention/spiritual wellbeing. Estimated Community Members Served: 1,100+ (Attendance was much higher)

**Intervention: Social Media-related Educational Outreach** (Podcasts, Blog) also 14 media appearances (TV and print). Estimated Number of Community Members Served: 500,000 media impressions

**Objective 5:** Train Healthcare professionals in the science and application of Plant-based Nutrition and Lifestyle Medicine

**Intervention:** Co-sponsored the **10<sup>th</sup> Northwest Health & Nutrition Conference** at the Oregon Convention Center and donated CME services. Number of Community Members\* Served: **241 in 2019**.

\* A mix of MD, ND, DO, DC, NP, PA, RN, RD and other participants



### Community Partners

- **American Cancer Society**
- **American Heart Association**
- **Compassion Connect (with area churches)**
- **OHSU**
- **Northwest VEG and other Conference Partners**
- **Goodskin Dermatology**

### 2019 Evaluation Metrics

Objective	2017 Baseline Measurement	Performance 2019 Actual	Indicator	Data Source
#Grant Mammograms	39	73	screens	Rad records
#LivingWell Trail visits	New in late 2018	358	logins	QR site
#Smoker CT Scans	45	695	screens	Rad records



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# H&NC Attendees	247	241	Attendees	NWVeg
#Free Skin CA screens	None	15	screens	Goodskin
#Car seats	9	18 (plus 32 seat checks)	Car seats	FBP/OHSU

**Program highlight – Pedal-Powered Health!**

At the 2019 Montavilla Street Fair, and the Portland Slavic Festival, Adventist Health incorporated a new addition to our summer health outreach efforts. We purchased a pedal-powered blender and spin art bike. It was an attempt to provide a **fun exercise activity**, a delicious experience of **creating & enjoying healthy fruit smoothies** on a hot day, and the creative experience of **creating colorful spin art**. The best part of the project was that the community got involved in creating the pedal power for the smoothies and spin art on top of enjoying the “fruit” of their labor. In fact, both kids and adults lined up to pedal the bike, and to help each other with the selection of colors. One enthusiastic black boy even jumped in and got actively involved with serving the guests smoothies for quite a while. The events also incorporated custom herb seed packets for growing fresh herbs, low sodium recipes incorporating those herbs, plus a unique measuring spoon. Exercise, fresh fruit, fun, creative arts, growing fresh herbs, helping each other = a simple recipe for helping build healthy hearts and a healthier community...Portland-style.



**Priority Need - Access to Care**

**Objective 1:** Strengthen the continuum of health care and create additional healthcare access points with a focus on low-income adults, ages 19– 64, and those living below 200% of the FPL.

**Intervention:** Continue work with **Compassion Connect** providing free community medical/dental, and social support clinics to address the need for access to health care specifically in our East County service area. (They serve a much larger area and number of people, including locations in 4 states). This is Compassion Sandy and multiple mini-clinics in 2019.

**Total Medical services:** 195

**Total Dental Services:** 293

**Approximate Community Guests:** 629

**Total Community Volunteers:** 864



**Intervention: Impact Your Health Portland** free clinic offering free dental care, vision, general medical care, and health education services to uninsured and under-insured people in the Portland metro area. Number of Community Members Served: 674 guests served by 650 volunteers in 2018. No event hosted in 2019 due to multiple factors.

**Intervention: CCC Housing Is Health Clinic.** Number of Community Members Served: New clinic opened in July 2019. Community members served: 649 Medical visits. (July -December)

**Objective 2:** Continue to assist the uninsured/underinsured by removing undesirable barriers to receiving appropriate health care or being crushed by unmanageable health care bills.

**Intervention:** Adventist Health Financial Assistance Policy updated regularly, and ongoing Patient Enrollment Assistance into means tested programs.

**Intervention:** Help fund **Project Access NOW** which helps identify & enroll needy community members in health insurance, provides actual insurance assistance, and works with community partners to provide/coordinate medical services for those in need until they can enroll in a Marketplace insurance plan. **The mission of Project Access NOW is “...to improve the health of our community by creating access to care and services for those most in need.”** In 2018-2109, PANOW enrolled 16,132 in health insurance, provided 4,511 health referrals and served 4,335 with their Classic Plan – a 61% increase over 2017-2018. AH Portland had 437 PANOW-specific encounters

**Intervention:** Provided **FREE** medical transport services for 65 Oncology patients in 2019, most with multiple visits for treatment.

**Objective 3:** To establish practices and processes, as well as develop capacity to help provide **more culturally responsive whole-person healthcare services** to selected communities within our service area.

**Intervention:** AH Portland has continued to work on increasing the diversity of our workforce as opportunities arise. This includes hiring more Russian-speaking staff/navigators to better serve the needs of the Slavic community over recent years.

**Objective 4:** Train/mentor multiethnic young people, and more seasoned adults to be whole-person health care workers serving our community.

**Intervention: Training of Clinical and Community Chaplains** of diverse cultural backgrounds

- Clinical Pastoral Education Students (12 CPE students trained in 2019)



- Spiritual Care Volunteers (14 volunteers regularly engaged in 2019)
- Area Pastors (12 on-call chaplain/pastors engaged)

**Intervention: Student Healthcare Leaders Program** for High School age students in partnership with local schools. The number of participating schools has increased in 2019. Total: 28 students from 11 High Schools, plus Home School students. (Four new High Schools represented in 2019).



### Community Partners:

- **Greater Portland Area SDA Churches**
- **Compassion Connect (with area churches)**
- **Adventist Medical Evangelism Network (AMEN)**
- **Central City Concern (and other healthcare partners)**
- **Portland Adventist Community Services (PACS)**
- **Project Access NOW**
- **Selected area schools – David Douglas High, Portland Adventist Academy, etc.**

### 2019 Evaluation Metrics

Objective	2017 Baseline Measurement	Performance 2019 Actual	Indicator	Data Source
Expanded Clinic Services/locations	5 sites	8 sites	Services, locations	IYHP, Comp Connect, CCC
Build Student Healthcare Leaders/Connections	Getting started	11 High Schools engaged in 2019	Schools engaged	SHL data
Continue Charity Care, etc.	Variable	Variable	Unpaid bills	Financials



## Program Highlight – Project Access NOW

Project Access NOW (PANOW) first heard of a client who was needing specialty services. This client was established with Native American Rehabilitation Association (NARA) for primary care and was subsequently referred due to an arthritis condition. This condition was causing joint pain and swelling of her hands, fingers, and wrists; affecting her everyday life including the ability to work. The client needed further evaluation from a specialist and a treatment plan as the previous treatment did not seem to work anymore. She knew without any type of assistance that she could not afford to pay out of pocket to see a specialist. Fortunately, she heard about Project Access NOW and was able to get connected with Adventist Health Arthritis and Bone.

The client was seen by Dr. Kevin Khaw who was able to diagnose her, create a new treatment plan, and prescribe her medications through the PANOW Pharmacy Bridge Program. The client was grateful to have an exact diagnosis and an effective follow up plan to control her medical condition. The client never imagined a program like Project Access NOW existed nor that could help her due to her legal and unemployment status. Thankfully, 10 years later she continues to receive ongoing care at Adventist and cannot imagine what her condition would be like if it weren't for the services, she was able to receive through this partnership. Source: Project Access NOW

## Priority Need – Behavioral Health/Addictions

**Objective 1:** Continue funding & leadership support for the **UNITY Center for Behavioral Health** (a partnership) which opened in 2017. The acute (85 adult beds) and emergency behavioral health services provided fill a huge community need. In 2019, they had 10,900 Emergency BH visits from 5,675 unique patients (Approx. 30/day). Of those, 1,894 admitted for inpatient care at Unity Center. Average LOS is 14 days, with more serious cases staying much longer while awaiting other placement.

**Objective 2:** Expand access to outpatient, intermediate mental health care on AH Campus and at satellite medical clinics.

**Intervention:** In 2019, AH Portland continued to adjust and develop the **Outpatient Emotional Wellness Clinic** offerings to meet changing community need. This included services at the main Clinic on the hospital campus as well as some of our Medical Clinics in the area. The Number of Community Members Served in 2019: 4,109

**Objective 3:** Provide additional Behavioral Health and related services on Eastside in partnership with other groups like Central City Concern.

**Intervention:** For three years, AH Portland helped fund the building of the **CCC Eastside Health Center** and housing facility. It opened in July 2019. Number of Community Members Served in 2019: 649



Medical, 400 Substance Use Disorder (SUD), 335 Medication support/opioid use disorder, 129 Recuperative Care program (5 from Adventist), 67 Dual SUD & MH (basic and Intense)

**Objective 4:** Serve 2,000 residents via First Friday, Soup & Salad, Grief Support, Bible Study group and PrayerWorks/AMEN Programs to address emotional, spiritual and social needs.

**Intervention:** Further develop/promote First Friday Program, etc. Number of Community Members Served in 2019: 2,520 attended FF meetings. Soup & Salad gathering: 1,020 meals served.

**Intervention:** Weekly Grief recovery and Bible study groups, Grieving through the Holiday, and Resilience in Grief Program: Community encounters in 2019: Approx. 110

**Intervention:** PrayerWORKS online prayer community: 24,720 web-based prayer interactions in 2019.

### Community Partners

- **Central City Concern, plus AH Portland, CareOregon, Kaiser Permanente Northwest, Legacy Health, OHSU, Providence Health & Services**
- **UNITY Center for Behavioral Health partners (AH, Legacy Health, OHSU, Kaiser Permanente)**
- **Area churches in First Friday Project including Pleasant Valley Church, Sunnyside SDA Church, Oasis Christian Center, Ohana Christian Fellowship, ROC Fellowship, and Sharon SDA Church**
- **KPDQ 93.9/The Fish 104.1 FM (First Friday, Festival of Thanksgiving, etc.)**

### 2019 Evaluation Metrics

Objective	2017 Baseline Measurement	Performance 2019 Actual	Indicator	Data Source
UNITY Center	N/A opened in 2017	10,900 ED visits	Operating	UNITY
AHMG Emotional Wellness Center	N/A	4,109	Operating	AHMG
CCC Eastside Health Center	N/A	Opened July 2019 649 Medical/400 SUD, etc.	Operating	CCC
AH/P Spiritual Care projects	Nearly 2,000	2,630, plus 24,720 prayer	Participation #	AH/P Spirit Care



### Program highlight – First Friday

He was 93 years old, and a World War II Vet. Mike (not his real name) was at the hospital for some lab work when a poster in the hall caught his attention. It was an invitation to the hospital’s new First Friday program and the light Soup & Salad meal beforehand. (First Friday was created to help fill the need for more safe places where people of all ages and walks of life could come to build friendships, and to be encouraged through inspirational music and stories of God’s love at work). Curious, Mike’s wife called for more information. “How much did it cost?” she asked. She was told that there was no cost, and that they were very much welcome to attend. Not long after, Mike and his wife found themselves at the hospital and were serendipitously seated at a table with three Korean War vets. Fast friendships were made that night, and all committed to meet monthly at “The Veterans Table”. In the ensuing 3 ½ years, First Friday became such an important part of his life that Mike only missed three First Friday sessions due to illness. In fact, at one point he was honored with a gift blanket as a reminder of the warmth of his contribution to the First Friday family.

Mike passed to his rest in November 2019 at 96 years old. His wife said that she felt that he would have passed away much earlier if not for his First Friday experience. She reported that he started taking his medications more faithfully after that first session because he feared getting sick and missing his friends and the blessings he received. Mike’s presence is missed, but the power of good food, friends and words of inspiration and hope remain.

### Priority Need - Social Determinates of Health

**Objective 1:** Improve Housing/Social Services for Special Need groups on the Eastside of Portland.

**Intervention:** Helped fund Central City Concern’s **Housing is Health Initiative** - Three comprehensive housing projects (331 units) in East Portland for medically fragile and those in recovery. Also includes a medical clinic, counseling and other support services. The Blackburn Center opened in July 2019. It, and the other two new **Housing is Health Initiative** projects which opened a little earlier, were partly funded by Adventist Health, OHSU, along with many others. They now serve the housing and health needs of an often challenging and historically underserved but important part of our community in East Portland.



**Intervention:** Fund Housing/M meal Vouchers with City Team Ministries. Persons served: Approximately 182 individuals in 2019.





**Objective 2:** Improve Nutrition and Reduce Food Insecurity for needy Mid-county residents.

**Intervention:** AH staff and volunteers deliver nutritious meals to needy seniors and other individuals in 2019 in partnership with East Portland **Meals on Wheels**. Number of meals delivered in 2019: 1,423 meals.

**Intervention: Market Street Community Garden.** With the goal of increasing access to fresh produce for refugees and others as well as helping build community, Adventist Health partnered with Outgrowing Hunger to establish a community garden adjacent to AH Portland main campus. Students were also involved in learning gardening. The Garden opened in Spring 2019. Community Members Served in 2019: 55 families, and others fed through the main garden.



**Intervention: Collect food/clothing donations** from special hospital-sponsored events and classes. Donations funneled through **Portland Adventist Community Services and Portland Rescue Mission** to assist needy community members. Over 1,900 pounds of food, and 3,000 pairs of socks were collected in 2019 from the Celebration of Thanksgiving alone! More food was collected at cooking schools and donated to PACS.

**Objective 3:** Community and relationship building with a health promotion focus

**Intervention:** Engage with selected **Special Neighborhood-building Events**, including the following:

- Gladstone Community Festival
- Sandy Mountain Festival
- Compassion Sandy
- Montavilla Street Fair
- Portland Slavic Festival
- National Night Out
- SunnyCity Festival
- Festival of Thanksgiving (1,600)
- Estimate of Community Members Served: 5,100+

**Intervention:** Established **QR Fit Trail** in 2018 to help bring together area residents and AHP staff around outdoor fitness activities. (See Chronic Disease, Objective 6). 2019 Community interactions: 358 recorded w/QR Codes

**Community Partners**

- **Central City Concern** (and partners mentioned earlier)



- **Outgrowing Hunger**
- **Portland Adventist Community Services (PACS)**
- **Meals on Wheels People – Cherry Blossom Site**
- **City of Sandy and various Neighborhood Associations**
- **Afisha**
- **Cherry Blossom Estates – Low Income Housing**
- **Sunnyside SDA Church**
- **Immigrant and Refugee Community Organization (IRCO)**

**Evaluation Metrics**

Objective	2018 Baseline Measurement	Performance 2019 Actual	Indicator	Data Source
New housing for BH/Recovery clients	Limited	2019 - New housing for 331 opened	New housing	CCC
New community garden	Garden in planning	Garden opened in 2019 – 55 families engaged, plus others	New garden	GROW Portland
Meals on Wheels	Two routes	Continue two routes – 1,423 meals	Meals served	MOW Driver
Community-building projects	7 local events	8 local events 5,100+ interactions	# of events, # interactions	tally



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**Program Highlight: Adventist’s Market Street Garden**

In 2019 the new garden at Adventist Hospital provided 51 refugee families and 4 American families with a total of 42,000 sf of growing space. Hailing from Bhutan, Nepal, Burma, Congo, Burundi, Rwanda, Mexico, and Russia, gardeners emphasized the production of hard-to-find, culturally specific produce items such as mustard greens, black nightshade, African eggplant, amaranth greens, and unique herbs from around the world.



Because most of the gardeners live multi-generationally in cramped apartments, the garden became a de-facto back yard and park, as well as a food production facility. It also serves an important role in allowing individuals to develop and grow their community leadership skills. Ally, a leader in the Congolese community, and Murego, a respected elder in the Rwandan community, have forged important ties between their historically antagonistic cultures through a series of joint garden classes and shared farming and food distribution collective.



Individual family leaders are also able to provide and abundance of traditional foods for their clans. Zawadi is a woman from Congo who created a livelihood in the refugee camps by farming with her 9 children. Today she grows food at this garden which supports 17 family members, providing the bulk of their produce needs from June through October.

In 2020 the garden is at full capacity, and now that the local refugee community has become excited about gardening again Outgrowing Hunger is looking for additional locations!



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## Changes in 2019

During 2019, we spent time with our new Community Health Needs Assessment (CHNA) that was completed in mid-year. The Steering team and Advisory Group had multiple discussions about areas we felt should continue working, and other new areas we might want to pursue in 2020 and beyond. Our new Community Health Improvement Strategy (CHIS) currently builds on our past work in the areas of Chronic Disease, Access to Care, Behavioral Health & Addictions, and Access to Housing and Healthy Nutrition. We recognize though that as our new partnership develops with OHSU Health and the world changes, we will likely be coming back and making revisions. That is the dynamic nature of the exciting and challenging world of community health.

## Connecting Strategy and Community Health

As hospitals move toward population health management, community health interventions are a key element in achieving the overall goals of reducing the overall cost of health care, improving the health of the population, and improving access to affordable health services for the community both in outpatient and community settings. The key factor in improving quality and efficiency of the care hospitals provide is to include the larger community they serve as a part of their overall strategy.

Health systems must now step outside of the traditional roles of hospitals to begin to address the social, economic, and environmental conditions that contribute to poor health in the communities we serve. Bold leadership is required from our administrators, healthcare providers, and governing boards to meet the pressing health challenges we face as a nation. These challenges include a paradigm shift in how hospitals and health systems are positioning themselves and their strategies for success in a new payment environment. This will impact everyone in a community and will require shared responsibility among all stakeholders.

Population health is not just the overall health of a population but also includes the distribution of health. Overall health could be quite high if the majority of the population is relatively healthy—even though a minority of the population is much less healthy. Ideally such differences would be eliminated or at least substantially reduced.

Community health can serve as a strategic platform to improve the health outcomes of a defined group of people, concentrating on three correlated stages:

- 1) The distribution of specific health statuses and outcomes within a population;
- 2) Factors that cause the present outcomes distribution; and
- 3) Interventions that may modify the factors to improve health outcomes.

Improving population health requires effective initiatives to:

- 1) Increase the prevalence of evidence-based preventive health services and preventive health behaviors,
- 2) Improve care quality and patient safety and
- 3) Advance care coordination across the health care continuum.

Our mission as a health system is to share God's love by providing physical, mental and spiritual healing and we believe the best way to re-imagine our future business model with a major emphasis of community health is by working together with our community.



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and spiritual healing

## Community Benefit

Our community benefit work is rooted deep within our mission, with a recent recommitment of deep community engagement within each of our ministries.

We have also incorporated our community benefit work to be an extension of our care continuum. Our strategic investments in our community are focused on a more planned, proactive approach to community health. The basic issue of good stewardship is making optimal use of limited charitable funds. Defaulting to charity care in our emergency rooms for the most vulnerable is not consistent with our mission. An upstream and more proactive and strategic allocation of resources enables us to help low-income populations avoid preventable pain and suffering; in turn allowing the reallocation of funds to serve an increasing number of people experiencing health disparities.