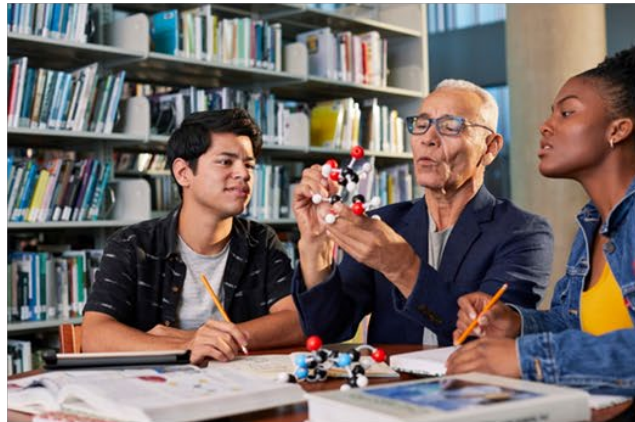


# 2022 Implementation Strategy



Kaiser Permanente Fontana Medical Center  
Kaiser Permanente Ontario Medical Center

License number: 240000159

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

September 27, 2022

# Kaiser Permanente Fontana Medical Center Kaiser Permanente Ontario Medical Center 2022 IMPLEMENTATION STRATEGY

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## General information

Contact Person	Heather N. Raymond, Public Affairs Director
Date of written plan	May 24, 2022
Date written plan was adopted by authorized governing body	September 27, 2022
Date written plan was required to be adopted	May 15, 2023
Authorized governing body that adopted the written plan	Kaiser Foundation Health Plan, Inc., Kaiser Foundation Hospitals, Board of Directors, Community Health Committee
Was the written plan adopted by the authorized governing body on or before the 15 <sup>th</sup> day of the fifth month after the end of the taxable year the CHNA was completed?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Date facility's prior written plan was adopted by organization's governing body	March 18, 2020
Name and EIN of hospital organization operating hospital facility	Kaiser Foundation Hospitals, 94-1105628
Address of hospital organization	One Kaiser Plaza, Oakland, CA 94612

# Kaiser Permanente Fontana and Ontario Medical Centers 2022 Implementation Strategy

## Summary

Kaiser Permanente is an integrated health care delivery system comprised of Kaiser Foundation Hospitals, Kaiser Foundation Health Plan, and physicians in the Permanente Medical Groups. For 75 years, Kaiser Permanente has been committed to shaping the future of health and health care — and helping our members, patients, and communities experience more healthy years. We are recognized as one of America's leading health care providers and not-for-profit health plans.

Every three years Kaiser Permanente Fontana and Ontario Medical Centers conduct a community health needs assessment (CHNA) and identifies significant health needs. To address those needs, Kaiser Permanente Fontana and Ontario Medical Centers have developed an implementation strategy (IS) for the priority needs it will address, considering both Kaiser Permanente's and the community's assets and resources. The CHNA-IS process is driven by a commitment to improve health equity and is intended to be transparent, rigorous, and collaborative.

For the 2023-2025 IS, Kaiser Permanente Fontana and Ontario Medical Centers have identified the following significant health needs to be addressed in the IS, in priority order:

1. Access to care
2. Housing
3. Income & employment
4. Education
5. Mental & behavioral health
6. Food insecurity

Kaiser Permanente Fontana and Ontario Medical Centers' CHNA report and three-year IS are publicly available at <https://www.kp.org/chna>.

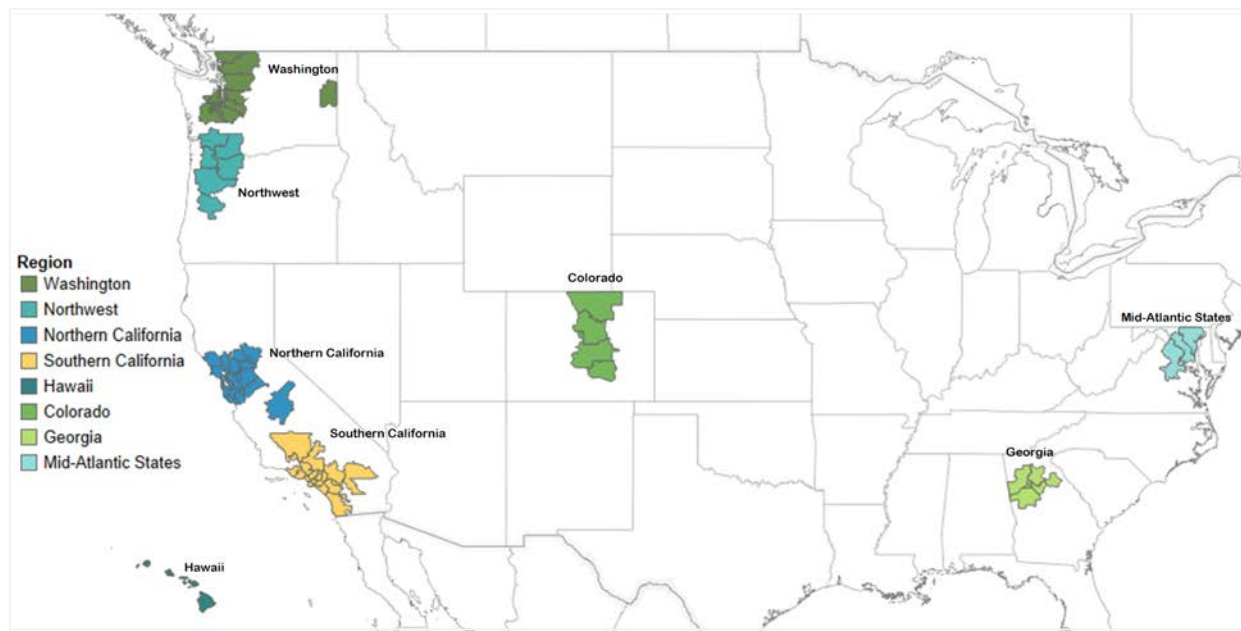
# Introduction/background

## About Kaiser Permanente

Kaiser Permanente is an integrated health care delivery system comprised of Kaiser Foundation Hospitals, Kaiser Foundation Health Plan, and physicians in the Permanente Medical Groups. For 75 years, Kaiser Permanente has been committed to shaping the future of health and health care — and helping our members, patients, and communities experience more healthy years. We are recognized as one of America’s leading health care providers and not-for-profit health plans.

Kaiser Permanente is committed to helping shape the future of health care. Founded in 1945, Kaiser Permanente has a mission to provide high-quality, affordable health care services and to improve the health of our members and the communities we serve. We currently serve 12.5 million members in 8 states and the District of Columbia. Care for members and patients is focused on their total health and guided by their personal Permanente Medical Group 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.

Kaiser Permanente regions and CHNA service areas



## About Kaiser Permanente Community Health

At Kaiser Permanente, we recognize that where we live and how we live has a big impact on our health and well-being. Our work is driven by our mission: to provide high-quality, affordable health care services and to improve the health of our members and our communities. It's also driven by our heritage of prevention and health promotion, and by our conviction that good health is a fundamental right.

As the nation's largest nonprofit, integrated health system, Kaiser Permanente is uniquely positioned to improve the health and wellbeing of the communities we serve. We believe that being healthy isn't just a result of high-quality medical care. Through our resources, reach, and partnerships, we are addressing unmet social needs and community factors that impact health. Kaiser Permanente is accelerating efforts to broaden the scope of our care and services to address all factors that affect people's health. Having a safe place to live, enough money in the bank, access to healthy meals, and meaningful social connections is essential to total health. Now is a time when our commitment to health and values compel us to do all we can to create more healthy years for everyone. We also share our financial resources, research, nurses and physicians, and our clinical practices and knowledge through a variety of grantmaking and investment efforts.

As we reflect on how 2020 changed the world, we must recognize that communities everywhere are coping with unprecedented challenges magnified by the COVID-19 pandemic and a renewed struggle for racial equity and social justice.

Through our continued focus on expanding our community health approach we laid the foundation for an acceleration of work to meet the challenges posed by the public health crises we now face. We dedicated ourselves to improving the social health of our 12.5 million members and the millions of people who live in the communities we serve.

Learn more about Kaiser Permanente Community Health at <https://about.kaiserpermanente.org/community-health>.

## Kaiser Permanente's approach to community health needs assessment

The Affordable Care Act (ACA) was enacted in March 2010 to make health insurance available to more people, expand the Medicaid program, and support innovative medical care delivery to lower health care costs. The ACA also requires that nonprofit hospitals conduct a community health needs assessment (CHNA) every three years and develop an implementation strategy (IS) in response to prioritized needs.

Kaiser Permanente's CHNA process is driven by a commitment to improve health equity. Our assessments place a heavy emphasis on how the social determinants of health — including structural racism, poverty, and lack of access to health-related resources such as affordable housing, healthy food, and transportation — are affecting the health of communities. By analyzing community-level data and consulting individuals with deep and broad knowledge of health disparities, the Community Health team in each KP service area has identified and prioritized needs unique to the community served. Each service area has developed an IS for the priority needs it will address, considering both Kaiser Permanente's and the community's assets and resources.

The Kaiser Permanente Fontana and Ontario Medical Centers 2022 CHNA report and three-year IS are available publicly at <https://www.kp.org/chna>. In addition, the IS will be filed with the Internal Revenue Service using Form 990, Schedule H.



## Fontana and Ontario service areas demographic profile

	Fontana	Ontario
Total population:	1,442,989	864,492
American Indian/Alaska Native	0.4%	0.2%
Asian	5.1%	12.1%
Black	8.5%	6.2%
Hispanic	56.7%	55.6%
Multiracial	2.2%	2.1%
Native Hawaiian/other Pacific Islander	0.3%	0.2%
Other race/ethnicity	0.2%	0.2%
White	26.7%	23.4%
Under age 18	27.6%	23.9%
Age 65 and over	11.8%	11.6%

## Community health needs

### Significant health needs identified in the Kaiser Permanente Fontana and Ontario medical centers 2022 CHNA report

Each Kaiser Permanente service area analyzed and interpreted the primary and secondary data to determine what constitutes a health need in the community. Once all the community health needs were identified they were prioritized, resulting in a list of significant community health needs in the Fontana and Ontario service areas, listed below.

1. Access to care
2. Housing
3. Income & employment
4. Education
5. Mental & behavioral health
6. Food insecurity



## Kaiser Permanente's implementation strategy process

Identifying the highest priority needs with an equity lens informs our community investments and helps us develop strategies aimed at making long-term, sustainable change, allowing us to deepen the strong relationships we have with other organizations that are working to improve community health.

To identify the significant health needs that Kaiser Permanente Fontana and Ontario Medical Centers will address in the 2022 three-year Implementation Strategy, Kaiser Permanente Fontana and Ontario medical centers Community Health considered a set of criteria that includes:

- Severity and magnitude of need: How health measures compare to national or state benchmarks, the relative number of people affected, impact of COVID-19 on the need
- Community priority: The community prioritizes the issue over other issues
- Clear disparities or inequities: Differences in health factors or outcomes by geography, race/ethnicity, economic status, age, gender, or other factors
- Leveraging Kaiser Permanente assets: Kaiser Permanente can make a meaningful contribution to addressing the need

## Health needs Kaiser Permanente Fontana and Ontario medical centers plan to address

The health needs in the Fontana and Ontario service areas that will be addressed during 2023-2025 are:

**1. Access to care:** Access to comprehensive, quality health care services – including having insurance, local health care options, and a usual source of care – is important for ensuring quality of life for everyone. Insurance alone does not guarantee access to appropriate care, and many community members experience barriers related to language, transportation options, and differential treatment based on race, as well as access to fewer health care resources. In the Fontana service area, there was a lower rate of primary care physicians per 100,000 population (57.5 per 100,000) compared to the Ontario service area (60.7 per 100,000) and state average (79.8 per 100,000). Fontana and Ontario both had higher infant death rates (5.7 and 5.4 per 1,000 births) compared to the state average of 4.0 per 1,000 births. Furthermore, key informant interviewees contextualized these findings by explaining the way that several social determinants of health, such as economic security and transportation impact access to care. Lastly, racial and geographic disparities persist across San Bernardino County. For example, rural residents in the high desert and easternmost parts of San Bernardino County may have limited access to specialty care and mental health providers. Additionally, some communities avoid accessing care due to historic mistreatment and distrust with the health care system (e.g., undocumented people).

**2. Housing:** Having a safe place to call home is essential for the health of individuals and families. American families' greatest single expenditure is housing, and for most homeowners, their most significant source of wealth. Housing costs have soared in recent years, with many families having trouble paying for housing. In the Fontana and Ontario service areas, there is a shortage of affordable housing and renters must now make 2.1 times the minimum wage to afford rent. Interviewees noted that the lack of affordable housing has driven some families to share homes to save money, resulting in overcrowded living conditions. Many individuals are at-risk for homelessness because of the rising cost of rent, health care costs and unexpected job loss (particularly during the COVID-19 pandemic). While people experience homelessness across the county, the majority of people experiencing homelessness are located in the east region of the county, specifically the city of San Bernardino.

**3. Income & employment:** Economic opportunity provides individuals with jobs, income, a sense of purpose, and opportunities to improve their economic circumstances over time. People with steady employment are less likely to have an income below the poverty line and are more likely to be healthier than people with unstable employment. Furthermore, individuals who do not have enough resources to meet basic needs such as safe housing and sufficient food are more likely to experience toxic stress and increased mortality. In the Fontana service area, income and employment emerged as an area of high need with worse ratings compared to both state and national averages. For example, the Fontana service area has an unemployment rate of 18 percent compared to the Ontario service area rate (16 percent) and state rate (13 percent). There are racial disparities in income. Both the Fontana and Ontario service areas have a high population of residents who are Black, Indigenous or People of Color and of those residents, Latino/a individuals are the least likely to earn a living wage. In addition to the service areas' unemployment rates, commuting to work may also impose a barrier to employment. Key informant interviewees noted that employment and sustainable wages are a challenge within the county. When residents are underemployed, they have issues with paying for housing, food, and transportation. Within the county, the median household income varies. The median household income in the Ontario service area is \$81,682, compared to \$62,855 in the Fontana service area and \$82,053 in the state.

**4. Education:** Education supports the upward social mobility of the community by providing access to more resources and better paying jobs. There is a well-documented correlation between higher levels of education and better health. However, for some communities, access to, and support for education has been challenging, leading to long term health negative effects. Both the Fontana and Ontario service areas fall below the state average (51 percent) for preschool enrollment. In the Fontana service area, 36 percent of children were enrolled in preschool compared to 48 percent in the Ontario service area. Furthermore, adults in the Fontana and Ontario service areas are less likely to earn a high school diploma than the adults statewide. The statewide average of adults without a high school diploma is 18 percent compared to 22 percent in the Fontana service area and 18 percent in the Ontario service area. There are also geographic disparities related to education. The Central region of the county has the highest rate of adults without a high school diploma (26 percent) while the West region has the highest percentage of preschool enrollment at 47 percent. School closures and the shift to online learning in response to COVID-19 exacerbated existing educational disparities. Interviewees discussed the salience of the "digital divide" during this time, where students living in the most rural areas of the county struggled to have reliable internet access which impacted their ability to pursue educational goals when learning moved online during the pandemic.

**5. Mental & behavioral Health:** Mental health affects all areas of life, including a person's physical well-being, ability to work and perform well in school, and to participate fully in family and community activities. Across mental and behavioral health indicators such as number of poor mental health days, deaths of despair, and number of mental health providers, San Bernardino County rates for mental and behavioral health are comparable to the state and national averages. For example, indicators such as the number of deaths of despair for Fontana (34.2 per 100,000) and Ontario (33.2 per 100,000) are similar to the state average of 34.4 per 100,000. However, other indicators of mental and behavioral health suggest relatively higher levels of need. For example, the Fontana service area reports more poor mental health days compared to the Ontario service area. Similarly, both service areas report more poor mental health days compared to the state and national benchmarks. Key informants contextualized these findings suggesting that COVID-19 had an extreme impact on well-being. For youth, mental health issues were exacerbated by the pandemic as a result of school closures, social distancing measures and extended periods of distance learning. Furthermore, geographic disparities highlight that there was limited access to mental health services in more rural areas such as the Mountains and High Desert.

**6. Food insecurity:** Many people do not have enough resources to meet their basic needs, including enough food to eat to lead an active and healthy life. In San Bernardino County, 11 percent of the population and 15 percent of children are food insecure (Feeding America, 2019). Furthermore, 21 percent of residents in the Fontana service area have low access to grocery stores compared to 19 percent in the Ontario service area and 12 percent in the state. Key informants added that San Bernardino County is home to a large number of fast-food chains making it easier to purchase fast food than food from the grocery store for some residents. In addition, an increase in food prices made it harder for people to afford food which further contributed to food security challenges. Data support this statement, as there has been a well-established connection between food security and rates of obesity such that low access to food leads to a greater consumption of non-nutritious foods, obesity, and chronic health conditions for low income communities. For many school districts in San Bernardino County, more than 40 percent of students are overweight or obese. According to San Bernardino County Community Indicators, in 2019, an average of 43 percent of San Bernardino County students in the grades tested were overweight or obese (had an unhealthy body composition), compared to 38 percent statewide. This is an increase from 2018, when 41 percent of students in San Bernardino County were considered overweight or obese. Finally, the pandemic stay at home order also lead to children and youth sitting for long periods of time in front of the computer and less active time outside.

## Kaiser Permanente's approach to implementation strategies

As the nation's largest nonprofit integrated health care organization, Kaiser Permanente is mission-driven to improve health and well-being in the communities we serve. The COVID-19 pandemic has underscored deep-seated inequities in health care for communities of color and amplified the social and economic disparities that contribute to poor health outcomes.

We will continue to work to improve the conditions for health and equity by addressing the root causes of health, such as economic opportunity, affordable housing, health and wellness in schools, and a healthy environment. We carry out work in our focus areas through a lens that includes deepening our commitment to equity and inclusion.

Kaiser Permanente strategic focus areas include:

### Increasing health access

- **Charity care:** Transforming Charitable Health Coverage and Medical Financial Assistance approaches to continue supporting coverage and care needs for our communities and patients
- **Medicaid:** Growing our Medicaid participation in a financially sustainable way through innovative operating models that support whole person care and coverage
- **Safety Net Partnerships:** Ensuring that communities have access to a strong safety net that can equitably meet patients' needs and improve health outcomes

### Social health needs

- **Thrive Local:** Establishing bi-directional electronic community networks that enable health care providers, safety net clinics, social service agencies, government programs, and other participants to make, receive, and track patient and client referrals
- **Food for Life:** Transforming the economic, social, and policy environments to improve health and food security for the communities we serve
- **Intergenerational healing and trauma:** Acknowledging and addressing trauma across the life course, including trauma related to exposure to racism

### Improving community conditions

- **Economic opportunity:** Increasing income, improving financial security, and reducing economic inequities through our business operations and community partnerships
- **Housing for Health:** Transforming housing and homelessness systems to improve housing stability for the communities we serve
- **Thriving Schools:** Fostering healthier school environments for students, staff, and teachers
- **CityHealth:** Advancing local policies that improve conditions for health
- **Environmental stewardship:** Reducing and eliminating environmental contributors to disease and illness

## Kaiser Permanente Fontana and Ontario Medical Centers implementation strategies

Kaiser Permanente Fontana and Ontario medical centers Community Health has identified the strategic focus, strategies, and expected impact for each priority health need, described in the table below. While we recognize that IS strategies can address multiple health needs, each strategy in the table is associated with the needs where we expect to see the greatest impact.

To implement the strategies identified, Kaiser Permanente Fontana and Ontario Medical Centers will draw on a broad array of organizational resources, such as grantmaking and leveraged assets, as well as internal Kaiser Permanente programs. Kaiser Permanente Fontana and Ontario medical centers Community Health also recognizes the importance of joint planning and collaboration with community stakeholders and leaders and welcomes opportunities to build on the strong partnerships we currently have in place.

Priority health need	Expected impact	Focus	Strategy
1. Access to care	Increased access to care for low-income at-risk populations	Medicaid & Charity Care	Charitable Health Coverage: Provide access to comprehensive health care and to coverage for low-income individuals and families who do not have access to public or private health coverage
			Medicaid: Provide high-quality medical care services to Medicaid participants who would otherwise struggle to access care
			Medical Financial Assistance: Provide temporary financial assistance to low-income individuals who receive care at KP facilities and can't afford medical expenses and/or cost sharing
			Support organizations that build capacity, provide information about coverage options, assist with eligibility screening, application and enrollment, and advocate for increasing coverage options for low-income individuals
	Improved quality of care for patients of safety net organizations	Safety Net Partnerships	Provide core support to safety net organizations, allowing these organizations to implement initiatives appropriate for the needs of their population (e.g., expansion of specialty care, providing more virtual care for nonsurgical specialties)
	All people have access to a robust network of community organizations to meet their social health needs	Thrive Local: Community Network Development	Support partnerships with local, regional, or national organizations to grow networks of community based organizations that address social health needs and coordinate care
	All people have access to safe, affordable, and stable housing and homelessness becomes a rare, brief occurrence	Housing for Health: Transform Care	Support improved access and quality of medical care for persons experiencing homelessness

Priority health need	Expected impact	Focus	Strategy
2. Housing	All people have access to safe, affordable, and stable housing and homelessness becomes a rare, brief occurrence	Housing for Health: Increase Affordable Housing Supply	Provide resources for preserving or enhancing the supply of affordable housing
		Housing for Health: Prevent Homelessness	Support evidence-based housing stabilization assistance
			Support expansion of housing-related legal support for at-risk tenants
		Housing for Health: Strengthen Homeless Systems of Care	Support system-level approaches to reducing homelessness (e.g., achieving quality data)
		Housing for Health: Transform Care	Support improved coordination among Continuum of Care programs, social service organizations, and housing providers
Homelessness Prevention	Support the capacity of homeless service providers to serve individuals at risk or experiencing homelessness		
3. Income & employment	Reduced structural barriers and improved opportunities for inclusive economic mobility	Economic Opportunity: Diverse Small Business	Strengthen credible sources of lending for businesses for small business recovery and growth, including loan guarantee pools
			Support organizations advocating for policies to increase small businesses' access to affordable capital, strengthen infrastructure, and address systemic financial inequities
			Support organizations that provide culturally and linguistically relevant training and technical assistance to small businesses and entrepreneurs of color
		Economic Opportunity: Individual Financial Health	Improve individual financial health by supporting housing, workforce development, or other organizations that embed or enhance financial coaching services
Economic Opportunity: Quality Jobs & Careers	Support programs that improve high school attendance, achievement, and/or graduation for students of color in low-income areas		

Priority health need	Expected impact	Focus	Strategy
4. Education	Reduced structural barriers and improved opportunities for inclusive economic mobility	Economic Opportunity: College & Career Readiness	Support the Kaiser Permanente Health Equity Scholars program
	Dismantled discriminatory practices and policies that contribute to health disparities, racial trauma, income inequality and educational achievement gaps.	Equity: CBO Leadership and Capacity Building	Support grassroots and advocacy organizations and initiatives
		Equity: Community Power Building	Support to Black, Indigenous, People of Color (BIPOC)-led organizations, with an emphasis on Black-led
5. Mental & behavioral health	Safe, healthy, and supportive learning environments for all students, staff, and teachers	Thriving Schools: Broad reach: Provide resources and support for all	Extend school and district adoption and integration of Kaiser Permanente Thriving Schools initiatives, tools, and resources
		Thriving Schools: Intensive support: Partner with select schools and districts	Provide funding to schools and districts to fill gaps identified in a Healthier Generation assessment or to implement the Healthier Generation Thriving Schools Integrated Approach
			Provide mini-grants to schools and districts for infrastructure gaps and supplementary training
	A systemwide approach to preventing and mitigating the negative impacts of trauma	Intergenerational Trauma and Healing	Support Black, Indigenous, People of Color (BIPOC)-led organizations that advance best practices for preventing and/or mitigating the impacts of ACEs, toxic stress, and trauma for communities disproportionately experiencing inequities
		Mental Health & Wellness	Support efforts to improve the community and social support system's knowledge, attitudes, beliefs and perceptions about mental health, trauma and resilience
	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.	Mental Health & Wellness	Support pipeline, training, and pathway programs to increase the number of licensed and diverse mental health professionals to be culturally competent
			Support the capacity of community-based organizations to improve access and delivery of quality mental health care services
Safe, healthy, and supportive environments for all	Mental Health & Wellness	Support organizations, schools, neighborhoods, and households with mitigating the risk factors for childhood/adolescent obesity (social isolation, trauma, grief, depression, anxiety, decreased sleep, increased screen time, physical inactivity, unhealthy eating) which were exacerbated by the pandemic as a result of school closures, social distancing measures and extended periods of distance learning	



Priority health need	Expected impact	Focus	Strategy
6. Food insecurity	All people have access to a robust network of community organizations to meet their social health needs	Thrive Local: CBO Capacity Development	Support community based organization capacity building, including but not limited to, staffing, training, leadership development, and policy advocacy
		Thrive Local: Maximizing the Value of the Network	Strengthen community networks by supporting community or navigation centers, community advisory councils, and interoperability with other systems
	All people have consistent access to affordable healthy food	Food for Life: Meal/Nutrition Distribution	Support organizations that distribute food such as medical tailored meals, prepared food, produce, or other food and meals to school children, families, and those in underserved communities
		Food for Life: Increasing Purchasing Power	Support organizations that increase enrollment in programs that extend food dollars such as in the Supplemental Nutrition Assistance Program (SNAP), Special Supplemental Nutrition Program for Women, Infants and Children (WIC), and federal school meal programs

Kaiser Permanente Fontana and Ontario Medical Centers will monitor and evaluate the strategies listed above to track implementation and document the impact of those strategies in addressing significant health needs. Tracking metrics for each prioritized health need include the number of grants made, the number of dollars spent, the number of community-based organizations supported, and the number of people reached/served.

In addition to the strategies developed as part of the CHNA/IS process, many health needs are addressed by Kaiser Permanente business practices that contribute to community well-being, including environmentally responsible purchasing, waste reduction, and purchase of clean energy for facilities. We procure supplies and services from a diverse set of providers and partner with workforce development programs to support a pipeline for diverse suppliers, and we build the capacity of local small businesses through training on business fundamentals. We also conduct high-quality health research and disseminate findings intended to increase awareness of the changing health needs of diverse communities, address health disparities, and improve effective health care delivery and health outcomes.

## Health needs Kaiser Permanente Fontana and Ontario Medical Centers do not plan to address

Kaiser Permanente Fontana and Ontario Medical Centers are addressing all of the significant needs identified in the 2022 CHNA.