2023 - 2025

COMMUNITY HEALTH IMPROVEMENT PLAN

Providence Regional Medical Center Everett

Everett, Washington

Photo courtesy of Wendy Fagan

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Providence SWEDISH

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EXECUTIVE SUMMARY

Providence continues its Mission of service in Snohomish County through Providence Regional Medical Center Everett (PRMCE). PRMCE is an acute-care hospital with 595 licensed beds. The hospital has been in Everett, Washington since 1905. The hospital's service area is the entirety of Snohomish County, which includes 800,000 people.

PRMCE dedicates resources to improve the health and quality of life for the communities it serves, with special emphasis on the needs of the poor and vulnerable. During 2021, PRMCE and PMG provided $89 million in Community Benefit in response to unmet needs in Snohomish County.

The Community Health Needs Assessment (CHNA) is an opportunity for PRMCE to engage the community every three years with the goal of better understanding community strengths and needs. The results of the CHNA are used to guide and inform efforts to better address the needs of the community. Using quantitative and qualitative data, the CHNA process relied on several sources of information including state and national public health data, community survey's, hospital utilization data, and qualitative data from interviews with community stakeholders and listening sessions with community members.

PRMCE Community Health Improvement Plan Priorities

As a result of the findings of our 2022 CHNA and through a prioritization process aligned with our Mission, resources, and hospital strategic plan, PRMCE will focus primarily on the following areas for its 2023-2025 community benefit efforts:

1. ### Behavioral health
   Improve access to behavioral health services, including mental health and substance use.

2. ### Access to health care
   Improve access to comprehensive, high-quality, culturally sensitive health care and preventive resources.

3. ### Housing instability and homelessness
   Improve access to safe, quality, affordable housing and reduce the number of individuals and families experiencing homelessness or housing instability.

4. ### Health equity – racism and discrimination
   To be a community partner in undoing institutional racism that prevents our community members from feeling safe, respected, and heard when accessing health services.

INTRODUCTION

Who We Are

Our Mission	As expressions of God's healing love, witnessed through the ministry of Jesus, we are steadfast in serving all, especially those who are poor and vulnerable.
Our Vision	Health for a Better World
Our Values	Compassion — Dignity — Justice — Excellence — Integrity

Providence in northwest Washington has a long history of serving the community beginning when the Sisters of Providence established a hospital in Everett in 1905. Today, Providence cares for the community through a comprehensive network of facilities and services from the beginning to the end of life, including primary and specialty care, hospital care, home care and hospice. By collaborating with our team of compassionate caregivers, we strive to deliver the best in quality and affordable care to our patients and their families. Major programs and services offered in northwest Washington include inpatient acute care, an emergency department serving as a Level II trauma center, behavioral health, cancer services, women's services, rehabilitation, clinical research, chemical dependency, primary care, and specialty care. In northwest Washington, Providence includes:

- Providence Regional Medical Center Everett (PRMCE) is a 595-bed acute care tertiary hospital. It is the only Level II trauma center in Snohomish County and has a large and busy emergency department. PRMCE is split into two campuses: the smaller Pacific Campus includes the Pavilion for Women and Children, and the larger Colby Campus includes an Emergency Department and a Cancer Center. PRMCE serves as a teaching institute for many health professions and has a medical staff of more than 1,350 providers.
- Providence Medical Group Northwest (PMG) is a network of primary care, specialty care, and walk-in services providing care to children and adults in fifteen locations throughout Snohomish County.
- Providence Hospice and Home Care of Snohomish County (PH&HC) provides home care and hospice services in Snohomish County.
- Providence Institute for a Healthier Community (PIHC) is a partnership between Providence, businesses, government, healthcare providers, social service agencies, and other non-profits aimed at encouraging residents to make behavioral changes to improve their overall health and well-being.

Our Commitment to Community

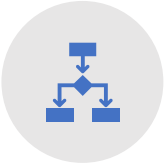
PRMCE dedicates resources to improve the health and quality of life for the communities we serve. During 2021, PRMCE and PMG provided $89 million in Community Benefit[1], including $11.1 million in free and low-cost care, in response to unmet needs and to improve the health and well-being of those we serve in Snohomish County.

[1] Per federal reporting and guidelines from the Catholic Health Association.

Health Equity

As part of Providence St. Joseph Health, we acknowledge that all people do not have equal opportunities and access to living their fullest, healthiest lives due to systems of oppression and inequities. We are committed to ensuring health equity for all by addressing the underlying causes of racial and economic inequities and health disparities. Our Vision is "Health for a Better World," and to achieve that we believe we must address not only the clinical care factors that determine a person's length and quality of life, but also the social and economic factors, the physical environment, and the health behaviors that all play an active role in determining health outcomes.

To ensure that equity is foundational to our CHIP, we have developed an equity framework that outlines the best practices that the hospital will incorporate into the improvement strategies. These practices include, but are not limited to the following:



Address root causes of inequities by utilizing evidence-based and leading practices

Explicitly state goal of reducing health disparities and social inequities

Reflect our values of justice and dignity

Leverage community strengths

Community Benefit Governance

PRMCE further demonstrates organizational commitment to the community benefit process through the allocation of staff time, financial resources, participation, and collaboration with community partners to address identified community need. The PRMCE Chief Executive is responsible for compliance with State and Federal 501r requirements.

PRMCE has staff focused on community benefit activities year-round, as well as during the three-year CHNA and CHIP cycle. Community benefit staff collaborated with the Providence Institute for Healthier Communities strategic oversight committee to prioritize the needs of the community and solicited input to identify strategies to address those needs. The Community Mission Board reviewed and approved the final CHIP and is informed of progress and challenges through periodic reviews. Additionally, the PRMCE leadership team has oversight of the improvement plans to address the community health priorities.

Planning for the Uninsured and Underinsured

Our Mission is to provide quality care to all our patients, regardless of their ability to pay. We believe that no one should delay seeking needed medical care because they lack health insurance. That is why

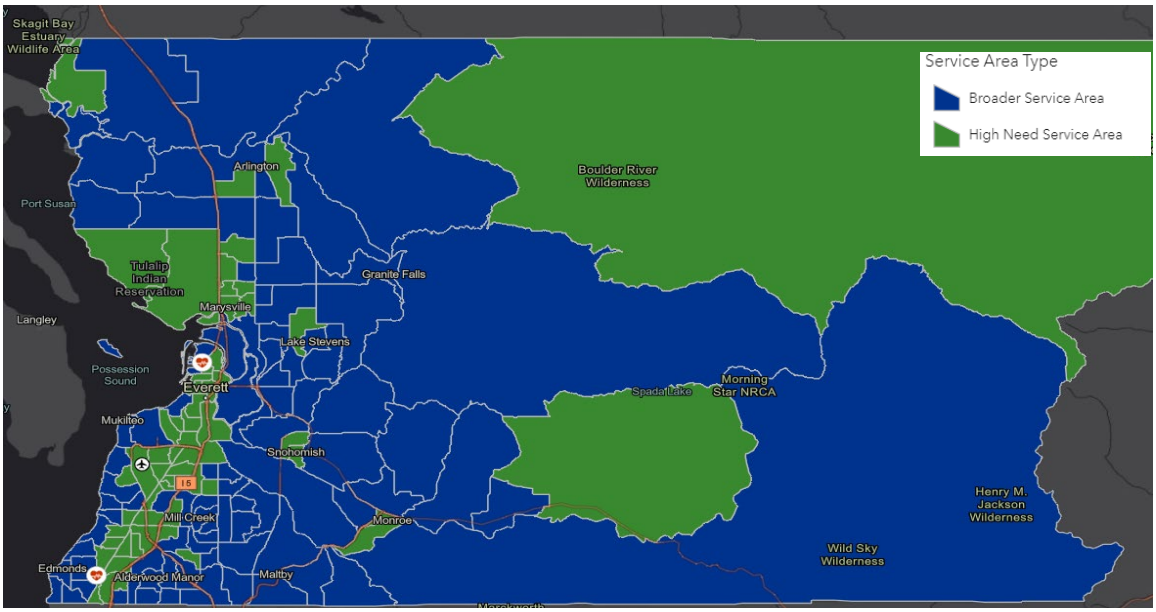
PRMCE has a Financial Assistance Program (FAP) that provides free or discounted services to eligible patients.

One such way PRMCE informs the public of FAP is by posting notices. Notices are posted in high volume inpatient and outpatient service areas. Notices are also posted at locations where a patient may pay their bill. Notices include contact information on how a patient can obtain more information on financial assistance as well as where to apply for assistance. These notices are posted in English and Spanish and any other languages that are representative of 5% or greater of patients in the hospital's service area. All patients who demonstrate lack of financial coverage by third party insurers are offered an opportunity to complete the Patient Financial Assistance Application and are offered information, assistance, and referrals as appropriate to government sponsored programs for which they may be eligible. For information on our Financial Assistance Program visit Financial Assistance Overview | Providence Washington | Providence

OUR COMMUNITY

Description of Community Served

Providence Regional Medical Center's service area is Snohomish County and includes a population of approximately 800,000 people.



Of the residents in Snohomish County, nearly 40% live in a "high need" area, identified by a calculation using lower life expectancy at birth, lower high school graduation rates, and households below 200% of the federal poverty level compared to census tracts across the county. For reference, in 2020, 200% of the federal poverty level represents an annual household income of $52,400 or less for a family of four. These households are more likely to regularly make spending tradeoffs regarding utilities, rent, groceries, medicine, and other basic expenses.
Source: 2019 American Community Survey 5-year estimates

Community Demographics

Population Demographics

The largest proportion of residents are in the 30-39 age group compared to other age groups. The largest racial groups include White (75.4%), Asian (10.8%), and Black/African American (3.1%) with residents reporting two or more races at 6.3%. The Hispanic population represents 10.2% of the total population and 14.6% of the high-need service area.
Source: 2019 American Community Survey 5-year estimates

Socioeconomic Indicators

Table 1. Income Indicators for Snohomish County

Indicator	Snohomish County	Broader Service Area	High Need Service Area	Washington State
Median Income	$85,276	$106,544	$67,999	$73,775
Renter Households with Severe Housing Cost Burden	21.7%	18.1%	23.2%	21.1%
Population below 200% of Federal Poverty Level	18.9%	12.4%	28.7%	20.6%

Source: American Community Survey 2019, 5-year estimates

Full demographic and socioeconomic information for the service area can be found in the 2022 CHNA for Providence Regional Medical Center Everett.

COMMUNITY NEEDS ASSESSMENT PROCESS AND RESULTS

Summary of Community Needs Assessment Process and Results

A CHNA Advisory Committee was established to inform and guide the CHNA process and to identify the top health priorities for the community based on community feedback and health data. The committee was comprised of local community leaders who represent the broad interest and demographics of the community. (See Appendix 4 in the CHNA for a list of participants)

The evaluation portion of the process started with the CHNA Advisory Committee reviewing the qualitative findings from interviews conducted with key community stakeholders and listening sessions with various groups in the community. Listening to and engaging with the people who live and work in the community is important as these individuals have firsthand knowledge of the needs and strengths of the community. These findings were used to frame the discussion of the top health needs. A review of the results from the community-wide Health and Well-Being Monitor™ and other quantitative data was then conducted to validate and enrich the discussion of the qualitative findings.

Significant Community Health Needs Prioritized

Through a facilitated discussion and use of a ranking tool, the CHNA Advisory Group utilized a methodology adopted from the Snohomish Health District's 2018 community health needs assessment comparing local data to state and national data, identifying worsening trends, and evaluating the size and seriousness of the problem. The CHNA Advisory Committee utilized these criteria and added the disproportionate impact on low income and/or BBIPOC communities to rank order nineteen metrics. The results of the ranking and prioritization revealed the following six significant health needs of Snohomish County, in ranked order:

1. Access to health care
2. Housing instability and homelessness
3. Behavioral health – mental health and substance use
4. Health equity – racism and discrimination
5. Food insecurity
6. Economic stability

The PRMCE executive leadership team[2] then scored the significant needs of the community using the following criteria: 1) Alignment with the strategic plan and existing Providence priorities; 2) Availability of resources and/or partnerships, and 3) Confidence in Providence's ability to have a positive impact.

[2] Team consists of Chief Executive, Chief Financial Officer, Chief Mission Officer, Chief Medical Officer, Chief Philanthropy Officer, Chief Nursing Officer, Chief Human Resource Officer, Executive Director Strategy, Executive Director Operations, Director Communications, Manager of Diversity, Equity & Inclusion, Director Administrative Programs.

The results revealed the following priority areas that PRMCE will address as part of the 2023-2025 Community Health Improvement Plan:

1. Behavioral health – mental health and substance use
2. Access to health care
3. Housing instability and homelessness
4. Health equity - racism and discrimination

Needs Beyond the Hospital's Service Program

There are several health needs in our community, however, due to lack of resources and expertise, PRMCE cannot directly address all the needs identified in the CHNA. PRMCE has chosen to concentrate on those needs that can most effectively be addressed given the organization's areas of focus and expertise. Although *food insecurity* and *economic instability* were identified in the CHNA as a significant need for Snohomish County, these needs will not be addressed in the CHIP due to resource restraints and relative low priority assigned to these needs. However, PRMCE may collaborate with local organizations that address these unmet community needs.

COMMUNITY HEALTH IMPROVEMENT PLAN

Summary of Community Health Improvement Planning Process

The CHNA Advisory Committee and the PRMCE Executive leadership team served as the two oversight groups in the development of both the CHNA and the CHIP. The Executive Leadership team has accountability for the ongoing planning, budgeting, and implementation of community benefit activities, and selecting the community health need priorities that PRMCE will focus on for this cycle.

To develop the CHIP, the Executive Leadership Team reconvened in February 2023 to develop draft strategies for each of the four significant needs that PRMCE will address. The CHNA Advisory Committee then met in March to review the draft strategies and provided additional content and feedback from a community perspective. In April, the Community Mission Board reviewed and approved the final plan.

This CHIP is currently designed to address the needs identified and prioritized through the 2022 CHNA process. However, PRMCE acknowledges that implementation strategies may change and therefore, a flexible approach is best suited for the development of its response to the CHNA. For example, certain community health needs may become more pronounced and require changes to the strategies identified in the CHIP.

Addressing the Needs of the Community: Key Community Benefit Initiatives and Evaluation Plan

Community Need #1: Behavioral Health (mental health & substance use)

Long-Term Goal

Improve access to high-quality behavioral health care, including mental health and substance use, that is patient-centered and equitable.

Strategies and Measures

Table 2. Strategies and Measures for Addressing Mental Health and Substance Use

Strategy	Population Served	Strategy Measure	Baseline	2025 Target
Provide options for outpatients with acute psychiatric needs or those needing a step down from inpatient care through partial hospitalization and intensive outpatient program	Adults	Number of adults served in partial hospitalization, intensive outpatient program	NA	750 patients
Increase access to mental health and crisis services for adults and adolescents through timely services at Providence Behavioral Health Urgent Care	Adults and adolescents	Number of visits at Providence (PRMCE and BHUC)	10,600 total visits (pediatric, adult, and BHUC)	2% increase

Strategy	Population Served	Strategy Measure	Baseline	2025 Target
Increase access to substance use treatment options such as Medication Assisted Treatment (MAT) and Naloxone	Patients in ED, PC, or BHUC	Distribution rate of Naloxone and access to MAT for patients with OUD	Naloxone: 58%, MAT: 17%	2% increase
Increase mental health screening, including depression and suicide screenings, in emergency department, primary care and urgent care settings	Patients in ED, PC, or BHUC	Rate of depression screening for PHQ2 and PHQ9	ED: 81% BHUC: 92% PC: 74%	2% increase
Provide financial and in-kind support to community partners focusing on increasing access to behavioral health services	Vulnerable and underserved populations	% of annual donations with primary or secondary need identified as behavioral health	20%	35%

BHUC: Behavioral Health Urgent Care; OUD: Opioid Use Disorder; PC: primary care, ED: Emergency Department
PHQ9: A nationally recognized questionnaire to screen patients for presence and severity of depression (PHQ2 – first 2 questions)

Evidence Based Sources

- Mental Health and Mental Disorders — Evidence-Based Resources - Healthy People 2030 | health.gov
- Drug and Alcohol Use — Evidence-Based Resources - Healthy People 2030 | health.gov
- Strategies | County Health Rankings & Roadmaps
- SAMHSA - Substance Abuse and Mental Health Services Administration

Resource Commitment

PRMCE is committed to investing in activities that serve the mental health needs of our community through staff time and other resources to be determined in the 2023-2025 CHIP cycle. This includes services within PRMCE as well as support and partnerships with community organizations that also work to improve this need. Community benefit grants and donations will utilize an application process with special attention paid to those addressing mental health.

Key Community Partners

PRMCE will collaborate with community partners to support the mental health needs of residents of Snohomish County. Some of the organizations and programs that PRMCE has partnered with include Center for Human Services, Dawson Place Child Advocacy Center, Compass Health, Hero House Northwest, Fairfax Behavioral Health, among others.

Community Need #2: Access to Health Care

Long-Term Goal

Improve access to comprehensive, high-quality, culturally sensitive health care and preventive resources at the right time and in the right location.

Strategies and Measures

Table 3. Strategies and Strategy Measures for Addressing Access to Health Care

Strategy	Population Served	Strategy Measure	Baseline	2025 Target
Develop Access Center to ease the way of patients needing care	Providence Medical Group patients and future patients	Annual preventative and screening metrics	TBD	100% of metrics met
Recruit additional care providers to Increase the available workforce and interest in the health care field	All members of community	Population to provider ratio for primary care	1930:1	At or below WA State
Ensure Medicaid patients are aware of the redetermination requirement and provide support with the process as needed	All PRMCE and PMG patients who currently receive Medicaid benefits	Outreach to Medicaid patients (in person, email, text, MyChart, letters, etc.)	NA	Outreach to 100% of patients in 2023
Provide community health and well-being information, education, and support groups to address care, prevention, and well-being practices	All members of community	Number of events or resource listings	28 events, 2,029 resource listings	10% increase
Provide financial and in-kind support to community partners focusing on increasing access to health care	Vulnerable and underserved populations	% of annual donations with primary or secondary need identified as health care access	20%	35%

Evidence Based Sources

- Rural training in medical education | County Health Rankings & Roadmaps
- Patient navigators | County Health Rankings & Roadmaps
- Access to Primary Care | Healthy People 2020 (archive-it.org)

Resource Commitment

PRMCE is committed to investing in activities that serve the health care access needs of our community through staff time and other resources to be determined in the 2023-2025 cycle. This includes services provided by Providence as well as collaborating with community organizations in support of people in need of access to health care.

Key Community Partners

PRMCE will collaborate with community partners to support the health access needs of residents of Snohomish County. Some of the organizations and programs that PRMCE has partnered with include WSU School of Medicine, SeaMar, Everett Community College, Community Health Center of Snohomish County, The Everett Clinic, Western Washington Medical Group, among others.

Community Need #3: Housing Instability and Homelessness

Long-Term Goal

Improve access to safe, quality, affordable housing and reduce the number of individuals and families experiencing homelessness or housing instability.

Strategies and Measures

Table 4. Strategies and Strategy Measures for Addressing Housing Instability and Homelessness

Strategy	Population Served	Strategy Measure	Baseline	2025 Target
Identify solutions for inpatients experiencing housing instability/homelessness in need of resources to safely discharge home or to an alternative setting	Hospitalized patients experiencing homelessness or barriers to safe housing	Individuals referred to community options	TBD	10% increase
Collaborate with community agencies on programs and interventions to address housing instability and homelessness	Population experiencing housing instability and/or who are housing-cost burdened	% of households that spend 50%+ of income on housing costs	21%	At or below WA State
Provide financial and in-kind support to support community partners focusing on housing instability or homelessness	Vulnerable and underserved populations	% of annual donations with primary or secondary need identified as housing instability or homelessness	35%	35%

Evidence Based Sources

- Housing and Homes — Evidence-Based Resources - Healthy People 2030 | health.gov
- https://www.aha.org/social-determinants-health/populationcommunity-health/community-partnerships
- Medical-legal partnerships | County Health Rankings & Roadmaps
- Legal support for tenants in eviction proceedings | County Health Rankings & Roadmaps
- Home - National Alliance to End Homelessness

Resource Commitment

PRMCE is committed to investing in activities that serve the needs of our community members experiencing housing insecurity and/or homelessness through staff time and other resources to be determined in the 2023-2025 cycle. This includes services provided by Providence as well as collaborating with community organizations. Community benefit grants and donations will utilize an application process with special attention paid to those addressing housing insecurity or homelessness.

Key Community Partners

Providence will collaborate with community partners working in support of safe and affordable housing. Some of the organizations and programs that PRMCE has partnered with include Everett Gospel Mission, Housing Hope, Catholic Community Services, Cocoon House, Everett Public Schools, Interfaith Family Shelter, Mercy Watch, among others.

Community Need #4: Health Equity (Racism and Discrimination)

Long-Term Goal

To be a community partner in undoing institutional racism that prevents our community members from feeling safe, respected, and heard when accessing health services.

Strategies and Measures

Table 5. Strategies and Strategy Measures for Addressing Health Equity - Racism and Discrimination

Strategy	Population Served	Strategy Measure	Baseline	2025 Target
Add an equity framework to root cause analyses for adverse event reporting by utilizing REaL and SDoH data elements	Caregivers and patients impacted by an adverse event	Root cause analysis includes an equity component	None	100% of RCA's have an equity review
Leverage best practices to enhance the care environment (workforce and physical setting) to improve cultural inclusivity	Caregivers and patients	Caregiver diversity	TBD	Diversity of caregivers is similar to county
Implement tools and benchmarks to help people/organizations measure improvement in well-being and feeling of belonging in their community	Community organizations	Community Health & Well-Being Monitor surveys launched	2 surveys	2 or more new community surveys
Create better connections to health care resources, reaching diverse communities where they live, work and play	All members of community	Number of diverse community health and well-being events	15 events	15 or more
Provide health and well-being information that focus on a particular geographic area, well-being topic, or community	All members of communities identified	Number of communities	2 communities	2 or more new communities

Evidence Based Sources

- Culturally adapted health care | County Health Rankings & Roadmaps
- Develop Strategies to Promote Health and Equity | County Health Rankings & Roadmaps

Resource Commitment

PRMCE is committed to investing in activities that improve health equity across our community through staff time and other resources to be determined in the 2023-2025 cycle. This includes services provided by Providence as well as collaborating with community organizations. Community benefit grants and donations will utilize an application process with special attention paid to those addressing health equity.

Key Community Partners

Providence will collaborate with community partners working in support of health equity. Some of the organizations and programs that PRMCE has partnered with include Refugee & Immigrant Services Northwest, WAGRO Foundation, Communities of Color Coalition, Pacific Islander Community Association, NAACP of Snohomish County, Work Opportunities, Snohomish County Latino Association, Project SEARCH, Everett Public Schools, Northwest Justice Project, among others.

2023 CHIP GOVERNANCE APPROVAL

This Community Health Improvement Plan was adopted by the Community Mission Board of the hospital on April 21, 2023. The final report was made widely available by May 15, 2023.

2023 APR 20

Anthony Ohl — Date
Chair, Community Mission Board

4/20/2023

Kristy Carrington — Date
Chief Executive, North Puget Sound Service Area

March 16, 2023

R. Guy Hudson, MD, MBA — Date
Chief Executive, North Division

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To request a printed copy free of charge, provide comments, or view electronic copies of current and previous Community Health Improvement Plans please email CHI@providence.org.