2023 - 2025

COMMUNITY HEALTH IMPROVEMENT PLAN

Providence Hood River Memorial Hospital

Hood River, Oregon

To provide feedback on this CHIP or obtain a printed copy free of charge, please email Joseph Ichter, DrPH, at Joseph.Ichter@providence.org.

Providence

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EXECUTIVE SUMMARY

Providence continues its mission of service in Hood River through Providence Hood River Memorial Hospital (PHRMH). PHRMH is a critical access hospital with 25 licensed beds, founded at its current campus location in 1932 and located in the heart of Hood River, Oregon. The hospital's service area is the entirety of the Columbia Gorge including Hood River, Wasco, Sherman, Gilliam and Wheeler counties on the Oregon side and Klickitat and Skamania counties on the Washington side. The area serves more than 91,000 people.

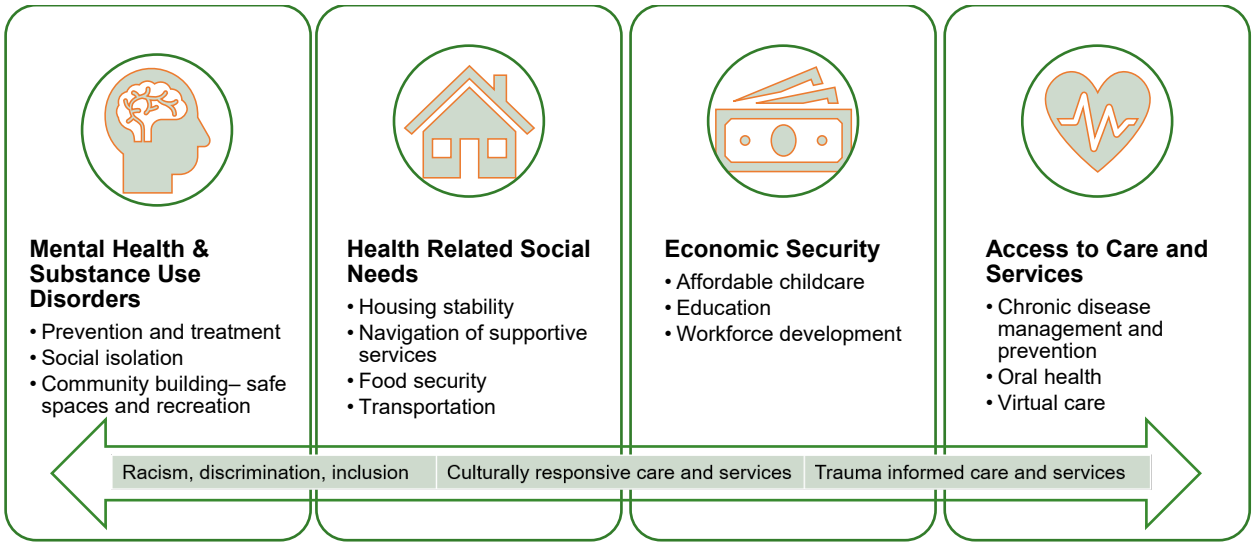
PHRMH dedicates resources to improving the health and quality of life for the communities it serves, with special emphasis on the needs of people experiencing social inequities and health disparities. During 2021 the hospital provided $22,199,271 in community benefit in response to unmet needs.

The Community Health Needs Assessment (CHNA) is an opportunity for PHRMH 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. Through a mixed-methods approach, using quantitative and qualitative data, the CHNA process relied on several sources of information: state and national public health data, interviews with key stakeholders, listening sessions with community members, data from a community survey and hospital utilization data.

Providence Hood River Memorial Hospital Community Health Improvement Plan Priorities

A wide spectrum of significant health needs was identified in the 2022 CHNA, some of which are most appropriately addressed by other community organizations. The following graphic summarizes Providence Oregon's priority areas, and PHRMH will focus on the following bolded pillars for its 2023-2025 community benefit efforts:

Oregon Region 2022 CHNA Priorities



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 Hood River Memorial Hospital (PHRMH) is a critical-access hospital, founded at its current campus location in 1932 and located in the heart of Hood River, Oregon. The hospital has 25 licensed beds, a staff of more than 610, and professional relationships with more than 154 physicians/providers. Major programs and services offered to the community include the following: primary care, cancer care, sports medicine care, heart care, home health, weight management, hospice, health insurance enrollment and retirement or assisted living options.

Our Commitment to Community

PHRMH dedicates resources to improve the health and quality of life for the communities we serve. During 2021, PHRMH provided $22,199,271 in community benefit[1] in response to unmet needs and to improve the health and well-being of those we serve in the Columbia Gorge region.

Health Equity

At Providence, 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." 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 Community Health Improvement Plan (CHIP), we have developed an equity framework that outlines the best practices that each of our hospitals will implement when completing a CHIP. These practices include, but are not limited to the following:

[1] Community benefit giving and reporting is based on Oregon Health Authority instructions for 2021.

Figure 1. Best Practices for Centering Equity in the CHIP

Community Benefit Governance

PHRMH demonstrates organizational commitment to the community benefit process through the allocation of staff time, financial resources, participation, and collaboration with community partners. The PHRMH administration is responsible for coordinating implementation of state and federal 501r requirements, as well as providing the opportunity for community leaders and internal hospital executive management team members, physicians/providers, and other staff to work together in planning and implementing the Community Health Improvement Plan (CHIP) in conjunction with the Providence Community Health team.

As a primary source of community benefit advice and local leadership, PHRMH's Service Area Advisory Council (SAAC) plays a pivotal role in supporting the hospital's board of trustees to oversee community benefit issues. Acting in accordance with a board-approved charter, the SAAC is charged with identifying policies and programs that address identified needs in the service area particularly for underserved populations, overseeing development and implementation of the Community Health Needs Assessment (CHNA) and CHIP reports, and overseeing and directing the community benefit activities.

The SAAC charter calls for a minimum of 15 members including members of the hospital administration. Current membership includes six community members and seven hospital administrative staff members. Efforts are underway to recruit new community members to the SAAC with a specific emphasis on diversity, equity, and inclusion. A majority of members have knowledge and experience with the populations most likely to have disproportionate unmet health needs. The SAAC meets six times annually, with an additional four to six education and workshop sessions focused on community health.

Planning for the Uninsured and Underinsured

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

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

One way PHRMH informs the public of our FAP is by posting notices on site at the hospital. The notices are posted in high volume inpatient and outpatient service areas. Notices also are posted at locations where a patient may pay their bill. Notices include information about how to 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. Notices and information also are available on our website in multiple languages. For information on our Financial Assistance Program click https://www.providence.org/obp/or.

OUR COMMUNITY

Description of Community Served

PHRMH's service area includes seven counties in the Columbia River Gorge with a population of more than 91,000 people. The ministry's primary service area is Hood River County with a total population of 24,057 people.

FIGURE 1-MAP OF COLUMBIA GORGE REGION

Community Demographics

POPULATION AND AGE DEMOGRAPHICS

With 23,209 residents in Hood River County, 51.1% are adults ages 20-60 as depicted in Table 1 below. The next largest demographic group is the child and adolescent population (ages 0-19) at 26.4%. The senior population consisting of those 60 and older, account for 22.5% of the total population in the county.

Table 1: Hood River County Population Age Range

Population Age Range	Percentage
% Population Ages 0 - 9	12.2%
% Population Ages 10 - 19	14.2%
% Population Ages 20 - 29	11.7%
% Population Ages 30 - 39	12.9%
% Population Ages 40 - 49	13.5%
% Population Ages 50 - 59	13.0%

% Population Ages 60 - 69	12.9%
% Population Ages 70 - 79	5.8%
% Population Ages 80+	3.8%

Source: 2019 American Community Survey 5-Year Estimates

POPULATION BY RACE AND ETHNICITY

According to U.S. Census data, in 2020, 93% of Hood River County residents identify as white, 1.8% identify as Asian, 1.2% identify as American Indian or Alaska Native, 0.8% identify solely as Black or African American, 0.3% identify as Native Hawaiian and Other Pacific Islander, and 2.9% identify as two or more races. In terms of ethnic composition, 66% describe themselves as white alone (not Hispanic or Latinx), and 34% of residents describe themselves as Hispanic or Latinx. Community partners recognize that this count could be skewed due to fear of filling out the census because of immigration status and safety factors. There are 22.8% of people ages 5 and up who speak a language other than English at home. Current data demonstrates that Hood River County has the largest population of individuals identifying as Hispanic or Latinx in the Columbia Gorge region as compared to surrounding counties.

SOCIOECONOMIC INDICATORS

Table 2. Income Indicators for the Hood River Service Area

Indicator	Hood River County	Oregon
Median Income Data Source: 2019 American Community Survey, 5-year estimate	$70,774	$62,818
Percent of Renter Households with Severe Housing Cost Burden Data Source: 2019 American Community Survey, 5-year estimate	17.5%	24%

According to the most recent data (2019), Hood River County's median household income ($70,774) is higher than Oregon's median income of $62,818. Additionally, the Columbia Gorge has a severe housing cost burden, which is defined as households spending 50% of income or more on housing costs. Approximately 17.4% of renter households in Hood River County experience a severe housing cost burden.

Low-income households have an increased chance of experiencing severe housing cost burden, which is defined as renter households that spend 50% or more of their income on housing. In Oregon, 24% of residents experience severe housing cost burden compared to 17.5% in Hood River County.

Full demographic and socioeconomic information for the service area can be found in Providence Hood River Memorial Hospital's 2022 CHNA.

COMMUNITY HEALTH NEEDS ASSESSMENT PROCESS AND RESULTS

Summary of Community Needs Assessment Process and Results

In the Columbia Gorge, PHRMH participated a group called the Gorge Collaborative to produce a comprehensive assessment of our communities' most pressing needs, share our findings with the broader public and develop new relationships leading to a healthier community. The Gorge Collaborative is a partnership of six not-for-profit health systems and one public health department located across Hood River and Wasco counties in Oregon and Klickitat and Skamania counties in Washington. This collaborative is dedicated to advancing health equity in the Columbia Gorge region, serving as a platform for collaboration around health improvement plans and activities to ensure the well-being of local communities.

Through a mixed-methods approach, using quantitative and qualitative data, the CHNA provided a holistic sense of existing community needs and assets. Primary data was gathered via eight listening sessions with 66 community members from diverse backgrounds, 11 stakeholder interviews with representatives from various local organizations, and 1,297 responses from a community health survey that was administered in English and Spanish. Secondary data was collected from U.S. Census Bureau, Centers for Disease Control and Prevention, Oregon Health Authority, County Health Rankings & Roadmaps, local hospital data and other local public records. Below is a short list of highlights from our quantitative and qualitative data collection:

- A primary strength within the service area is strong community partnerships between non-profits, health care, school districts, faith-based organizations, community and civic groups, and social support organizations, all working together to address community needs.
- The need for stable and affordable housing was the single highest concern of nearly every stakeholder and listening session completed during this process. Interviewees and survey respondents emphasized the connection between housing stability and economic security, as the cost of housing in the Columbia Gorge continues to increase without a corresponding increase in average household income.
- Of survey respondents, 69% reported feeling socially isolated or lonely at least some of the time over the last year, with 9% feeling isolated or lonely "all of the time." This highlights the profound impacts the pandemic has had on the mental health and well-being of communities in the Columbia Gorge.
- Suicide is the leading cause of death among Oregonians ages 10 to 24 and is the second leading cause of death for Washington teens ages 15 to 19. Among gorge high schoolers, 48% experience depression, and 24% have considered death by suicide. These rates are higher than both Washington and Oregon state averages.

The Gorge Collaborative used a Health Equity Framework and a modified Mobilizing for Action through Planning and Partnerships (MAPP) model to create the CHNA. Through this collaborative model, the following priority areas were agreed upon: Homelessness and Housing Instability, Access to Health Care Services, Economic Insecurity, Chronic Health Conditions, Access to Behavioral Health, Food Insecurity, Access to Dental Care, and Affordable Childcare and Pre-Schools.

Significant Community Health Needs Prioritized

A wide spectrum of significant health needs was identified in the 2022 CHNA, some of which are most appropriately addressed by other community organizations. The following graphic summarizes Providence Oregon's priority areas, and PHRMH will focus on the following bolded pillars for its 2023-2025 Community Benefit efforts:

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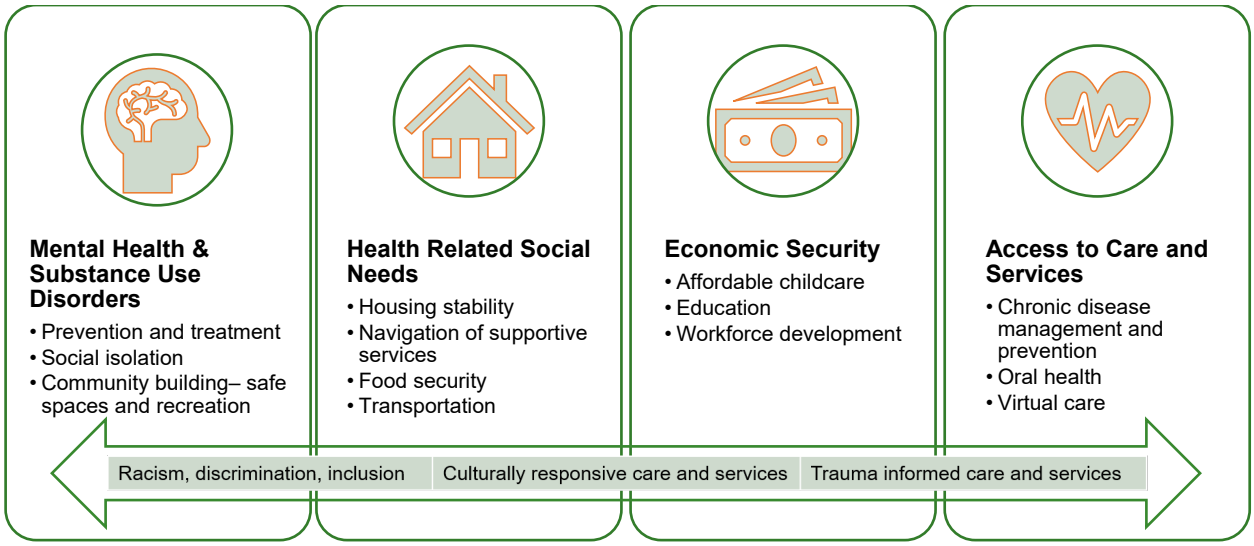


Needs Beyond the Hospital's Service Program

Due to the scope and depth of health and social needs as identified by the CHNA, PHRMH's limited resources are not sufficient to meet all those needs. The PHRMH administration continues to advocate for community solutions with community partners and agencies that may be better suited to provide support for those needs. We are committed to continuing our Mission through community benefit grant-making and ongoing partnerships. The sheer strength of community partnerships helps to ensure that these needs will not be overlooked community wide.

The following community health needs identified in the PHRMH CHNA will not be addressed in the CHIP, along with an explanation:

Economic Security: PHRMH will not directly address economic security due to finite resources, which will be concentrated on the other three need areas. While there is no specific initiative to address economic security, our work related to addressing health-related social needs will support meeting families' basic needs, which is connected to economic security.

While not constituting a direct intervention, PHRMH will collaborate with community partners that address health and social needs to coordinate care and referrals that may positively affect these unmet needs.

COMMUNITY HEALTH IMPROVEMENT PLAN

Summary of Community Health Improvement Planning Process

This CHIP was developed by the Providence Community Health service area lead for PHRMH in collaboration with members from the Service Area Advisory Council (SAAC). A subcommittee consisting of community members, stakeholders and the hospital's chief executive was convened to identify priority areas and strategies. The SAAC subcommittee helped to provide local insights on existing strategies to address priority needs before being submitted to the SAAC for commentary. The CHIP was vetted and approved by the SAAC membership before being published.

Addressing the Needs of the Community: 2023- 2025 Key Community Benefit Initiatives and Evaluation Plan

COMMUNITY NEED ADDRESSED #1: ACCESS TO MENTAL HEALTH AND SUBSTANCE USE DISORDERS

Long-Term Goal(s)/ Vision

To ensure equitable access to high-quality, culturally responsive, and linguistically appropriate mental health services, especially for populations with low incomes.

Table 1. Strategies and Strategy Measures for Addressing Access to Mental Health and Substance Use Disorder Services

Strategy	Population Served	Strategy Measure	Baseline	2023-2025 Target(s)
1. Provide counseling service to youth in the Columbia Gorge.	Children and young adults ages 4-26	# of individuals served through program. # of services provided	24 individuals 351 services	2023 - 63 individuals; 921 services
2. Facilitate "Valle Verde – Mental Health Promotion" program sessions within the Columbia Gorge community.	Youth ages 14-17 Adults ages 18+ Seniors ages 65+	# of program cohorts provided in the community. # of individuals served through each cohort.	0 Cohorts 0 Individuals	2023 - 2 Cohorts; 30 Individuals 2024 – 1 Cohort; 15 Individuals
3. Provide culturally specific mental health support to	Children and young adults ages 0-18	# of individuals served	180 Individuals	2023 - 252 Individuals 2024 – 40% Increase

	children in the Columbia Gorge				
4.	BOB Program - Caring Contacts Peer Support connects patients to community resources and BH programs while providing needed support services along the way	Adults recently discharged from the ED in behavioral health crisis	# of calls made	78 calls	2023 - 78 calls 2024 – 78 calls 2025 -78 calls

Resource Commitment

PHRMH will contribute funding, staff time for direct services, and partnership development to advocate for and address community needs. Additionally, PHRMH serves as a hub for stakeholders and offers meeting spaces and technology for collaborative efforts.

Key Community Partners

The Next Door Inc., SafeSpaces, Mid-Columbia Center for Living, CultureSeed

COMMUNITY NEED ADDRESSED #2: HEALTH RELATED SOCIAL NEEDS - HOMELESSNESS AND HOUSING INSTABILITY

Long-Term Goal(s)/ Vision

Participating in local coalitions to ensure coordination of homeless support services and that there are increased connections to supportive services for people experiencing homelessness.

Table 2. Strategies and Strategy Measures for Addressing Homelessness and Housing Instability

Strategy	Population Served	Strategy Measure	Baseline	2023-2025 Target(s)
1. Grant to Mid-Columbia Community Action Council (MCCAC) to strengthen coordinated services for unstably housed and houseless communities in the Mid-Columbia Region	Vulnerable adults and families	# of individuals served # services provided	27 individuals 14 services	2023 – 10% increase 2024 – 15% increase

2. Increase availability of short-term lodging and supportive services in Klickitat and Skamania Counties	Vulnerable adults and families	# of individuals served	300 individuals	2023 - 300+ individuals 2024 – 300+ individuals

Resource Commitment

PHRMH will continue providing funding, in-kind support to community partners and staff to advocate for community needs. Additionally, PHRMH serves as a hub for stakeholders and offers meeting spaces and technology for collaborative efforts.

Key Community Partners

Mid-Columbia Community Action Council, Hood River County Emergency Services, and the United Way of the Columbia Gorge.

COMMUNITY NEED ADDRESSED #3: ACCESS TO CARE AND SERVICES

Long-Term Goal(s)/ Vision

To increase the number of people in the community who report being able to access primary health care services and the number of people who report receiving culturally responsive care.

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

Strategy	Population Served	Strategy Measure	Baseline	2023-2025 Target(s)
1. Patient Support Program – Safe and secure discharge from hospital	Low income, rural populations	# of clients served # of vouchers approved for health related social needs	114 clients 216 vouchers	2023 -114 clients; 216 vouchers 2024 – 114 clients; 216 vouchers 2025 – 114 clients; 216 vouchers

2. Increase patient access to medication through Medication Assistance Program	Rural populations	# of clients served # of applications supported	145 clients 601 applications	2023 – 145 clients; 601 applications 2024 – 145 clients; 601 applications 2025 – 145 clients; 601 applications
3. Support health care needs of older adults through volunteer program	Seniors ages 65+	# individuals served # of Service encounters	55 individuals 48 services	2023 – 10% increase 2024 -20% increase 2025 – 30%
4. Athletic Trainer for evaluation and treatment of injured high school athletes.	Adolescents	# of registered active athletes # of evaluations/treatments	928 athletes 200 evaluations/ treatments	2023 – 923 athletes; 200 evaluations 2024- 928 athletes; 200 evaluations 2025 – 928 athletes; 200 evaluations

Resource Commitment

PHRMH is committed to providing staffing, funding and other resources as needed to support continued program offerings to patients and Columbia Gorge communities.

Key Community Partners

Patient Support Program, AGE+, One Community Health, Columbia Gorge Health Council, Pacific Source CCO

COMMUNITY NEED ADDRESSED #4: HEALTH RELATED SOCIAL NEEDS - FOOD INSECURITY

Long-Term Goal(s)/ Vision

To increase the percentage of people who have access to affordable, nutritious food to live their fullest and most productive lives.

Table 4. Strategies and Strategy Measures for Addressing Food Insecurity

Strategy	Population Served	Strategy Measure	Baseline	2023-2025 Target(s)
1. Increase capacity of Meals on Wheels program	Adults 60+ years of age	# of meals delivered	2400 meals a year	2023 – 5% increase 2024 – 7% increase 2025 – 10% increase
2. Fish Food Bank	Rural populations	# of clients served	14,683 clients	2023 - 14,683 clients 2024 - 14,683 clients 2025 -14,683 clients

Resource Commitment

PHRMH is prepared to invest in supporting the Meals on Wheels programming, depending on identified program needs, and will consider state and federal funding possibilities.

Key Community Partners

Hood River Valley Adult Center, Meals on Wheels, FISH Food Bank, Washington Gorge Action Programs

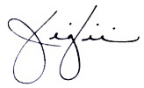
Other Community Benefit Programs

Table 5. Other Community Benefit Programs in Response to Community Needs

Initiative (Community Need Addressed)	Program Name	Description	Population Served (Low Income, Vulnerable or Broader Community)
1. Access to health care services	Hood River County School District(HRCSD): School Nurse Program	Program protects and promotes student health, facilitates optimal development, and advances academic success	Vulnerable
2. Access to health care services	Hood River County Education Foundation: Scholarships for health care professions	Provided eight (8) scholarships for graduating HRVHS seniors and three (3) graduates currently enrolled in higher education with an intention to become health care professionals	Broader community
3. Access to health care services	One Community Health Influenza Vaccination Campaign	Influenza vaccine provided at low or no cost to community members who lack health insurance	Low income
4. Access to health care services	Columbia Gorge Community College (CGCC) Foundation	Provide scholarships for CGCC to 10 medical assistant (MA) and 20 certified nursing assistant I (CNA I) students	Low income
5. Access to health care services	Columbia Gorge Community College (CGCC)	Provide scholarships for CGCC to 10 medical assistant (MA) and 20 certified nursing assistant I (CNA I) students	Low income
6. Access to health care services	Hood River Family Medicine Residency Program	Four full-time primary care residents providing health care services at the local Federally Qualified Health Center	Low income
7. Multiple	Collective impact specialist with United Way	Secure over $26 million in grant funding for multiple collaborative projects with 85+ community partners	Broader community

2023- 2025 CHIP GOVERNANCE APPROVAL

This Community Health Improvement Plan was adopted by the Hood River Service Area Advisory Council of the hospital on April 21, 2023. The final report was made widely available by May 15, 2023.

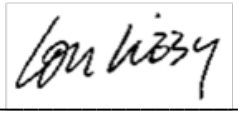


4/27/2023

Jeanie Vieira — Date
Chief Executive, Columbia Gorge Service Area

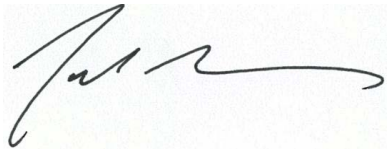
4/27/2023

William Olson — Date
Chief Executive, Oregon Region



4/27/2023

Louis Libby — Date
Chair, Oregon Community Ministry Board



4/27/2023

Joel Gilbertson — Date
Chief Executive, Central Division

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