

Implementation Strategy 2020–2022



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INTRODUCTION

MarinHealth Medical Center, formerly known as Marin General Hospital, is an independent, not-for-profit organization that has been meeting the community's healthcare needs since 1952. Owned by the Marin Healthcare District, the 235-bed hospital is the only full-service, acute care hospital in the county. The publicly elected Marin Healthcare District Board of Directors works closely with the MarinHealth Medical Center Board of Directors to oversee operations of the hospital.

MarinHealth Medical Center operates the county's only Designated Trauma Center, hospital labor and delivery services, heart surgery, and inpatient psychiatric programs. In keeping with the values and needs of its community, MarinHealth Medical Center is dedicated to treating the whole patient—mind, body, and spirit. Its mission is to provide exceptional healthcare services in a compassionate and healing environment.

In 2019, MarinHealth Medical Center conducted a Community Health Needs Assessment (CHNA) to assess the significant health needs for the hospital service area. The CHNA and the resulting Implementation Strategy identify and address significant community health needs. These reports help guide the hospital's community health improvement programs and community benefit activities, as well as its collaborative efforts with organizations that share a mission to improve health. This Implementation Strategy explains how MarinHealth Medical Center plans to address the significant health needs identified by the CHNA.

Report Adoption, Availability, and Comments

This Implementation Strategy was adopted by the MarinHealth Medical Center Board of Directors on September 3, 2019. This report is available to the public on the hospital's web site, www.mymarinhealth.org. Written comments on this report can be submitted to community.benefit@mymarinhealth.org.

DEFINITION OF THE COMMUNITY SERVICE AREA

MarinHealth Medical Center is located at 250 Bon Air Road, Greenbrae, CA 94904. The hospital service area comprises all of Marin County and includes the cities of: Belvedere, Corte Madera, Fairfax, Larkspur, Mill Valley, Novato, Ross, San Anselmo, San Rafael, Sausalito, Tiburon, and the coastal towns of Stinson Beach, Bolinas, Point Reyes, Inverness, Marshall, and Tomales.



The population of Marin County is 260,814. In the county, 22% of the population is youth, ages 19 and under, 50% of the population is adults, and 28% of the population is ages 60 and over. The median age is 46.1, which is an older population than other Bay Area counties. The majority of the population in Marin County is non-Hispanic White (71.9%); 15.6% of the population is Hispanic/Latino, 5.6% of the population is Asian, and 2.3% of the population is Black/African American. The remaining 4.6% of the population is multiple races, other races, Native Alaskans, Native Hawaiians, and/or Native Americans. In Marin County, 8.1% of Marin's population lives below 100% of the Federal Poverty Level (FPL). In the county, 9.9% of children live in poverty. The unemployment rate in the county is 2.2%; 6.9% of the population has no high school diploma; and 6.4% of the population is uninsured.

MarinHealth Medical Center conducted a Community Health Needs Assessment (CHNA) to comply with state and federal regulations guiding tax-exempt hospitals. The CHNA incorporated demographic and health data for the communities served by the hospital. Significant health needs were identified from secondary data sources, focus groups, and community stakeholder interviews. Health indicators were considered significant health needs when they exceeded benchmark data, specifically county or state rates or Healthy People 2020 objectives, and when identified as themes in a majority of key informant interviews, group interviews, and focus groups.

A brief description of the community needs listed in priority order follows:

- Economic Security: Economic security means having the financial resources, public supports, and career and educational opportunities that are necessary to live your fullest life. While Marin County ranks among the top in the country in terms of economic wealth and community resources, 50% of residents spend 30% or more of household income on rent.¹ Importantly, many residents expressed that the county's riches are unevenly distributed and not available to all. These divides are particularly stark along lines of race/ethnicity and citizenship status. For example, roughly 60% of Black and Hispanic populations in Marin County are living below the 250% federal poverty line compared to 21% of the White population.² Further, U.S. born residents in Marin County have an average annual wage of \$75,493 compared to \$23,742 for undocumented immigrants.³ In focus groups, participants connected economics and health by reporting the necessity of working multiple jobs and the long commutes needed to get from where they can afford to live to where jobs are available. These factors can lead to mental and physical health issues.
- Education: Educational attainment is a primary factor that influences individual health. It can shape the economic opportunities that impact health outcomes, as well as inform people how to live a healthy lifestyle. While some educational outcomes are higher for Marin County when compared to California, disparities—particularly among English language learners, African Americans, and Latino students—indicate that educational equality is a high concern in the county. Among White third graders, 76% demonstrate English and language arts proficiency compared to 32% of Latino students and 27% of African Americans.⁴ Among 16-24 year olds, college attendance among Whites is 80% compared to 47% for Black/African Americans and 37% for Hispanic/Latinos.5 Many community members signaled educational equity and increased health awareness as strategies necessary to advancing health goals.
- Mental Health/Substance Use: Marin County residents demonstrate high need in addressing mental health issues, indicated by rates of suicide, medication for mental health issues, and substance abuse treatment. Fifteen percent of Marin County adults take daily prescriptions for mental health issues, which is higher than the California rate of 11%.6 In Marin County, mental health issues frequently coexist with substance use. In the service area, 21% of adults report excessive drinking, higher than in California (18%).7 The suicide rate is particularly high among non-Hispanic White and non-Hispanic Black residents, at 13 per 100,000 and 12 per 100,000 respectively; this is roughly twice the rate of suicide among Hispanic/Latinos in the region.8

¹ American Community Survey. (2012-16).

³ USC Dornsife, Center for the Study Immigrant Integration. Sanchez et al 2016. https://dornsife.usc.edu/csii/publications/

⁴ California Healthy Kids Survey, Marin County Elementary Main Report 2017-18. Healthy People 2020.

Retrieved from http://www.healthymarin.org/indicators/index/dashboard?alias=hp2020

⁵ American Community Survey. (2012-16).

⁷ Behavioral Risk Surveillance Task Force. (2017).

⁸ CDPH. (2010-12). (Death Master Files, pulled from 2015 Pathways to Progress)

In focus groups, community members discussed the stigma around mental illness, a lack of access to mental health providers, and limited treatment options for people who are experiencing homelessness as major concerns.

- Access to Care: Access to healthcare includes insurance coverage, physician access, and availability and affordability of emergency and specialty health services. Access to quality healthcare is important to overall health, disease prevention, and reducing unnecessary disability and premature death. Almost half of undocumented immigrants (48%) lack insurance coverage compared to 6% among U.S. born citizens.9 Group interview participants were aware of the disparity and reported that the county continues to work toward providing affordable and culturally competent care for all residents, especially those who are undocumented. Racial minority groups and lower income individuals also face greater challenges in obtaining affordable care.
- Housing/Homelessness: Marin County's high cost of housing exacerbates issues related to healthcare access and affordability, which in turn has a negative impact on health outcomes in the area. Focus group participants shared that, in some neighborhoods, residents fear displacement due to rising housing costs and gentrification. These circumstances are exacerbated by racial inequities since a quarter of Black or Latino residents in Marin own homes compared to two-thirds of White residents.¹⁰ Further, housing costs present unique challenges for older adults who wish to age in place but who often live on a fixed income and may require additional services and supports as their needs change. Additionally, homelessness exposes individuals to increased health risks, especially as 63% of Marin's homeless population is unsheltered, 11 and service providers have difficulty linking persons who are experiencing homelessness to supportive housing and healthcare services. Racial minorities are disproportionately represented among persons experiencing homelessness, 12 and the portion of youth experiencing homelessness has increased in recent years. Twenty-nine percent of those experiencing homelessness are between 18-24 years old, an increase from 6% in 2013.13
- Healthy Eating and Active Living: Rates of obesity and diabetes are lower in Marin County compared to California. However, there is a high prevalence of youth in the service area who are overweight or obese, especially among Black (18%), Hispanic (20%), and Native American/ Alaska Native populations (24%).¹⁴ Disparities also exist in rates of cancer. There are higher rates of cancer in Whites compared to Asian and Pacific Islanders. 15 Black residents have the highest rate of cardiovascular disease at 174 per 100,000 persons, compared to 112 per 100,000 persons among Whites.¹⁶ This is also true for strokes, as Blacks have a rate of 53 per 100,000 persons compared to 23 per 100,000 persons among Whites.¹⁷ Healthy lifestyle choices greatly affect the rates of chronic conditions like cardiovascular disease, stroke, and cancer. Focus group participants noted the lack of resources for education around diabetes management. They also expressed that access to healthy food is a top concern.¹⁸

⁹ USC Dornsife, Center for the Study Immigrant Integration. Sanchez et al 2016. https://dornsife.usc.edu/csii/publications/

¹¹ Point in Time Homeless Count. (2015). Marin Homeless Census and Survey.

¹² Ibid.

¹³ Point in Time Homeless Count. (2015). Marin Homeless Census and Survey.

¹⁴ FITNESSGRAM® Physical Fitness Testing (2016-17)

¹⁵ CDPH 2010-12 (Death Master Files, pulled from 2015 Pathways to Progress)

¹⁸ Burd-Sharps, S. & Lewis, K. (2012). A Portrait of Marin: Marin County Human Development Report 2012

- Maternal and Infant Health: Maternal and infant health describes the health concerns of mothers and their newborn children, and many of the indicators in this category are predictive of health outcomes over the life course. The county has a lower maternal mortality rate, but still struggles with many issues relating to child health and development. In interviews, service providers highlighted the racially concentrated nature of maternal and infant health concerns. Eighty-three percent of African American mothers and 88% of Latina mothers receive first trimester prenatal care compared to 94% of Whites.¹⁹ Further, African Americans have higher rates of pregnancy-related death and lower rates of prenatal care than other ethnicities.²⁰ Additionally, the Marin County Hispanic/Latino population has a teen birth rate 20 times higher than their White counterparts.²¹ Focus group participants expressed the need for improved childcare and better educational options.
- Violence/Injury Prevention: Violence and injury prevention includes health-related indicators that include crime, physical abuse, falls, and accidents. These health-related events are concentrated among certain populations. Marin County has several issues related to violence and injury that present distinct challenges. Crime rates are unevenly distributed across racial groups and neighborhoods. For example, juvenile felony arrests occurred at a rate of 43 per 100,000 persons among the Black/African American population compared to 10 per 100,000 persons among Hispanic/Latinos, and 2 per 100,000 persons among Whites.²² Community residents expressed concern that crime reporting had decreased as a result of recent Immigration and Customs Enforcement (ICE) raids and that some youth in the Canal Area cities feel pressured to join gangs. Finally, older adults face unique challenges related to physical accidents, as falls are the leading cause of fatal injuries. Twenty percent of seniors reported a fall each year.²³
- Oral Health: Oral health is a key indicator of overall health. The impact of untreated oral health conditions disproportionally affects the most vulnerable populations and contributes to conditions such as cardiovascular disease, and poor pregnancy and birth outcomes. Although tooth decay and gum disease are preventable, inadequate access to dental insurance and dental providers, and underutilization of dental care, are affecting the oral health of Marin County residents. For example, 43% of adults in Marin County do not have dental insurance compared to the state average of 39%.²⁴ The incidence rate of oral cavity and pharynx cancer is 14 per 100,000 persons, which is higher than the California average of 10 per 100,000 persons.²⁵ Denti-Cal reimbursement rates are low, indicating an opportunity for improving utilization. Key informant and focus group participants reported that dental insurance is difficult to obtain, and specialty care, like oral surgery, is not affordable.

¹⁹ Centers for Disease Control and Prevention, Birth Certificate Data 2008-17

²⁰The California Pregnancy Associated Mortality Review. Retrieved from https://www.cdph.ca.gov/Programs/CFH/DMCAH/ CDPH%20Document%20Library/PAMR/CA-PAMR-Report-1.pdf

²¹ Family Health Outcomes Project, California Maternal Child and Adolescent Health

²² Kidsdata.org, California Dept. of Justice, Criminal Justice Statistics Center. 2016.

²³ California Health Interview Survey (2011-12).

²⁴ California Health Interview Survey (2014-15).

²⁵ National Cancer Institute (2011-15).

Social Connection: Social connections can directly impact mental health, and their influence on lifestyle have important consequences for physical health. Only 18% of residents feel they have insufficient social and emotional support compared to the California average of 25%.²⁶ However, economic inequality and the county's rapidly aging population increase the risk of social isolation. For example, 54% of individuals over 65 years of age reported eating alone, and 44% reported living alone.²⁷ Further, the lack of alternative forms of transportation in rural towns, and racial segregation in parts of Marin County, create barriers to community cohesion. Racial and ethnic minority students report bullying and a lack of connection to their schools; White 7th graders are three times more likely to feel connected to their schools than African Americans, and 50% more likely than Latinos.²⁸ Key informants reported that language barriers lead to further isolation among immigrant communities. Populations such as the LGBTQ community and people experiencing homelessness report a lack of safe and welcoming social spaces. Finally, at both ends of the age spectrum, youth and older adults desire social connection; youth want opportunities for positive mentorship and older adults desire more community events.

²⁶ Behavioral Risk Factor Surveillance System.

²⁷ American Community Survey. (2011-14).

²⁸ California Healthy Kids Survey, Marin County Elementary Main Report 2017-18. Healthy People 2020. Retrieved from http:// www.healthymarin.org/indicators/index/dashboard?alias=hp2020

This Implementation Strategy details how MarinHealth Medical Center plans to address the significant health needs identified in the 2019 CHNA. The hospital plans to build on previous CHNA efforts and existing initiatives, while also considering new strategies and efforts to improve health. The hospital used the following criteria to determine the significant health needs MarinHealth Medical Center will address in the Implementation Strategy:

- Existing Infrastructure: There are programs, systems, staff, and support resources in place to address the issue.
- Established Relationships: There are established relationships with community partners to address the issue.
- Ongoing Investment: Existing resources are committed to the issue. Staff time and financial resources for this issue are counted as part of our community benefit effort.
- Focus Area: Competencies and expertise to address the issue have been acknowledged and the issue fits with the organizational mission.

For the Implementation Strategy, MarinHealth Medical Center will address: access to healthcare, healthy eating and active living, housing and homelessness, mental health/substance use, and violence/injury prevention through a commitment of community benefit programs and charitable resources. For each health need the hospital plans to address, the Implementation Strategy describes actions the hospital intends to take, including programs and resources it plans to commit, and anticipated impacts of these actions.

Access to Care

MarinHealth Medical Center will address access to care by taking the following actions:

- Provide free and discounted care for healthcare services, consistent with the hospital's financial assistance policy.
- Provide medications for uninsured patients.
- Support primary care and specialty care services for the uninsured provided by the MarinHealth Medical Network.
- Provide transportation support to increase access to healthcare services.
- Provide grant funding and in-kind support to community organizations to support access to healthcare.

Anticipated Impact

MarinHealth Medical Center will conduct these strategies with the overarching goal of increasing access to healthcare for the medically underserved.

- Increase enrollment in health insurance.
- Provide financial assistance to qualified patients.
- Increase access to primary and specialty healthcare services.
- Support access to healthcare services by providing transportation assistance.

Collaborative Partners (Access to Care)

- Buckelew Programs
- Coastal Health Alliance
- County of Marin Department of Health and Human Services
- Healthy Marin Partnership
- Marin Center for Independent Living
- Marin Community Clinics
- MarinHealth Medical Network
- Operation Access
- RotaCare San Rafael
- Whistlestop

Healthy Eating and Active Living

MarinHealth Medical Center will address healthy eating and active living by taking the following actions:

- Offer community health education, health screenings, and immunizations.
- Provide fitness, wellness, and healthy lifestyle programs.
- Offer community access to Registered Dietitian Nutritionists for healthy eating consultations.
- Provide support groups to assist those with chronic diseases and their families.
- Provide public health education in the media and community health awareness events to encourage healthy behaviors and prevent chronic diseases.
- Provide grant funding and in-kind support to community organizations to support healthy eating and active living.
- Engage in advocacy to promote policies that address healthy eating and physical activity in the community.
- Actively participate in the county's Healthy Eating Active Living (HEAL) Built Environment Task Force.

Anticipated Impact

MarinHealth Medical Center will conduct the above referenced strategies with the overarching goal of reducing the impact of chronic diseases on health and increasing the focus on healthy eating and active living.

- Increase the prevention, identification, management, and treatment of chronic diseases.
- Increase individuals' compliance with healthy eating and active living recommendations.
- Advocate for policies to improve healthy eating and increased physical activity.

Collaborative Partners (Healthy Eating and Active Living)

- Academy of Nutrition and Dietetics
- American Cancer Society
- American Diabetes Association
- American Heart Association
- Centers for Disease Control Diabetes Prevention Program
- CERES Community Project
- Community health centers and community clinics
- County of Marin Department of Health and Human Services
- Extrafood.org
- Meals in Marin
- School districts and schools
- Sunflower Wellness
- West Marin Senior Services
- Whistlestop
- Women, Infants & Children (WIC) nutrition education program

Housing and Homelessness

MarinHealth Medical Center will address housing and homelessness by taking the following actions:

- Connect homeless patients in the ED/hospital to recuperative care and other appropriate service providers along the continuum of care.
- Participate in community-wide efforts to collaboratively address housing and homelessness.
- Provide grant funding and in-kind support to community organizations that focus on housing and homelessness.
- Engage in advocacy to promote policies that address housing and homelessness.
- Support Housing First programs.

Anticipated Impact

MarinHealth Medical Center will conduct the above referenced strategies with the overarching goal of improving health and healthcare delivery to persons experiencing homelessness.

- Improve consistent access to healthcare, mental health, and substance use services.
- Increase access to community-based services.
- Acquire housing and benefit enrollment for homeless individuals.

Collaborative Partners (Housing and Homelessness)

- County of Marin Department of Health and Human Services
- Homeward Bound
- Marin County's Whole Person Care
- Ritter Center
- St. Vincent de Paul Society of Marin County
- Buckelew Programs
- · City of San Rafael
- LifeLong Medical
- Marin Housing Authority
- Marin Center for Independent Living
- Opportunity Village Marin

Mental Health and Substance Use

MarinHealth Medical Center will address mental health and substance use by taking the following actions:

- Offer community health education, community lectures, presentations, and workshops.
- Support multisector collaborative efforts that support access to mental health and substance use services.
- Provide a free transportation shuttle for seniors to access behavioral health services.
- Increase community awareness of prevention efforts and availability of resources to address mental health and substance use concerns.
- Provide grant funding and in-kind support to community organizations to support mental health and substance use awareness and access to care.

Anticipated Impact

MarinHealth Medical Center will conduct the above referenced strategies with the overarching goal of increasing awareness of and access to mental health and substance use services.

- Increase availability of mental health and substance use services in community settings.
- Improve screening and identification of mental health and substance use needs.
- Improve coordination among healthcare providers and community resources and programs.
- Increase social supports and connections for persons with mental health and substance use needs.

Collaborative Partners (Mental Health and Substance Use)

- Community health centers and community clinics
- Community Institute for Psychotherapy
- County of Marin Department of Health and Human Services
- Marin City Health and Wellness Center
- County of Marin Behavioral Health and Recovery Services
- Marin Treatment Center

Violence and Injury Prevention

MarinHealth Medical Center will address violence and injury prevention by taking the following actions:

- Offer community health education, community lectures, presentations, and workshops to reduce unintended injuries.
- Support multisector collaborative efforts that focus on violence and injury prevention.
- Increase community awareness of prevention efforts and availability of resources.
- Provide grant funding and in-kind support to community organizations to support violence prevention and injury prevention.

Anticipated Impact

MarinHealth Medical Center will conduct the above referenced strategies with the overarching goal of reducing the impact of violence and injury in the community.

MarinHealth Medical Center anticipates the following impact from these efforts:

- Increase availability of violence and injury prevention services and training in community settings.
- Improve screening and identification of injury-related risk factors.
- Improve coordination of services among healthcare providers and community-based resources.
- Increase social supports and connections for persons who are victims of violence or have experienced an injury.

Collaborative Partners (Violence and Injury Prevention)

- A Matter of Balance fall prevention program
- California Highway Patrol Golden Gate Division
- Community health centers and community clinics
- ConcussionSmart Marin
- County of Marin Department of Health and Human Services
- Law enforcement agencies
- Marin County Coalition to End Human Trafficking
- Marin County Public Schools
- Schurig Center for Brain Injury Recovery

EVALUATION OF IMPACT

MarinHealth Medical Center will monitor and evaluate the programs and activities outlined above. The hospital anticipates the actions taken to address significant health needs will improve health knowledge, behaviors, and status, increase access to care, and help support good health. The hospital is committed to monitoring key initiatives to assess impact and has implemented a system to track the implementation of the activities and document the anticipated impact. Our reporting process includes the collection and documentation of tracking measures, such as the number of people reached/served, increases in knowledge, or changes in behavior as a result of planned strategies, and collaborative efforts to address health needs. An evaluation of the impact of the hospital's actions to address these significant health needs will be reported in the next scheduled Community Health Needs Assessment.

NEEDS THE HOSPITAL WILL NOT ADDRESS

MarinHealth Medical Center has chosen to concentrate on those health needs that can most effectively be addressed given the organization's areas of focus and expertise. Knowing that there are not sufficient resources to address all of the community health needs, MarinHealth Medical Center chose to address those health needs that have the potential for the largest impact. Taking existing hospital and community resources into consideration, MarinHealth Medical Center will not directly address the remaining health needs identified in the CHNA: economic security, education, maternal and infant health, oral health, and social connections.



This Implementation Strategy responds to state and federal requirements but it is not exhaustive of everything we do to enhance the health of Marin County. MarinHealth Medical Center will continue to look for collaborative opportunities that address community needs.



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