



COMMUNITY BENEFIT REPORT
September 2019 – August 2020

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The Office of Statewide Health Planning and Development
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Our Mission and Vision

Mission

To improve the health status of the community. To promote medical education.

Vision

To serve the community as the provider, practice location and employer of choice – establishing Community Medical Centers (CMC) as the leader in clinical excellence, technological innovation, quality service, superb facilities and compassionate care.

Commitment to Diversity

As a locally owned and operated healthcare network, CMC respects and celebrates the Central Valley's rich and diverse heritage. Our commitment to diversity and inclusion is a cornerstone of our patient care and work culture. All are welcome as valued members of our community whether patient, employee, physician, student or visitor.

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I. Introduction and Organizational Overview

Who we are

Community Medical Centers (CMC) is a locally owned, not-for-profit, public-benefit organization based in Fresno, California. Established in 1897, CMC is now the region's largest healthcare provider and private employer. We operate a physician residency program with one of the nation's top-rated medical schools, the University of California, San Francisco.

With more than 8,600 employees, 1,400 affiliated physicians and nearly 700 volunteers, CMC serves a 15,000-square-mile area that includes Fresno, Madera, Kings and Tulare counties — and beyond.

CMC operates its facilities under two hospital licenses; Community Regional Medical Center (CRMC) and Clovis Community Medical Center (CCMC). Fresno Heart & Surgical Hospital and Community Behavioral Health Center operate under the Community Regional license. CMC also operates several long-term care, outpatient and other healthcare facilities.

CMC is home to the only Level 1 trauma center and comprehensive burn center between Los Angeles and Sacramento. We serve as the area's main "safety net" provider, caring for our region's most vulnerable populations.

This consolidated report is submitted on behalf of the system of hospitals and providers that are part or partners of the CMC system.

Hospital campuses

Clovis Community Medical Center
Community Regional Medical Center
Community Behavioral Health Center
Fresno Heart & Surgical Hospital

Outpatient centers

Advanced Medical Imaging
Community Cancer Institute
Deran Koligian Ambulatory Care Center
Marjorie E. Radin Breast Care Center

Long-term care center

Community Subacute & Transitional Care Center

Hospitality home

Terry's House

Affiliations

California Health Sciences University
Central California Faculty Medical Group
Community Care Health
Community Health Partners
Community Medical Providers
Samuel Merritt College
Santé Physicians
University of California, San Francisco, School of Medicine
University of the Pacific

Specialty centers

Advanced Diagnostic Testing Center
Bob Smittcamp Family Neuroscience Institute
Disease Management Center
Deran Koligian Ambulatory Care Center
Leon S. Peters Burn Center
Leon S. & Pete P. Peters Future Generations Center
Leon S. Peters Rehabilitation Center
Marjorie E. Radin Breast Care Center
Primary Stroke Center
 Community Regional Medical Center
Surabian Dental Care Center
Table Mountain Rancheria Trauma Center
Wound Care Centers
 Clovis Community Medical Center
 Community Regional Medical Center

Accreditation

Every three years, the Joint Commission inspects participating hospitals to gauge the quality of care. CMC's hospitals are fully accredited.

Governance

CMC is governed by a volunteer Board of Trustees comprised of local civic leaders and physicians who collectively represent nearly 124 years of service to the organization. The Trustees set the vision and policy direction for the organization and approve the organization's strategic, business and financial plans.

II. Commitment to Community Benefit

CMCs' commitment to community benefit is demonstrated at every level of the organization. Evidence of our mission is the continual investment in improving the health of those we serve and in the community that our more than 10,000 employees, physicians and volunteers and nearly 300,000 patients call "home." Over the past two decades, no other hospital organization in the San Joaquin Valley has invested more to ensure healthcare access to all people of this growing region.

The Board of Trustees reviews the community needs assessment, the annual community benefit report and our impact on the areas of greatest need. Senior management encourages initiatives to expand access to healthcare services in our community and is committed to investing in and partnering with local, non-profit organizations working in socio-economically disadvantaged neighborhoods and rural populations. A multi-stakeholder committee ensures the Board and Senior Management directives are fulfilled and approves financial allocations to community benefit programs, outreach and education.

Many CMC leaders and staff members participate in a wide array of community-service oriented groups, extending our community benefit outreach far beyond dollars invested.

Community benefit and community service are at the heart of our healthcare system.

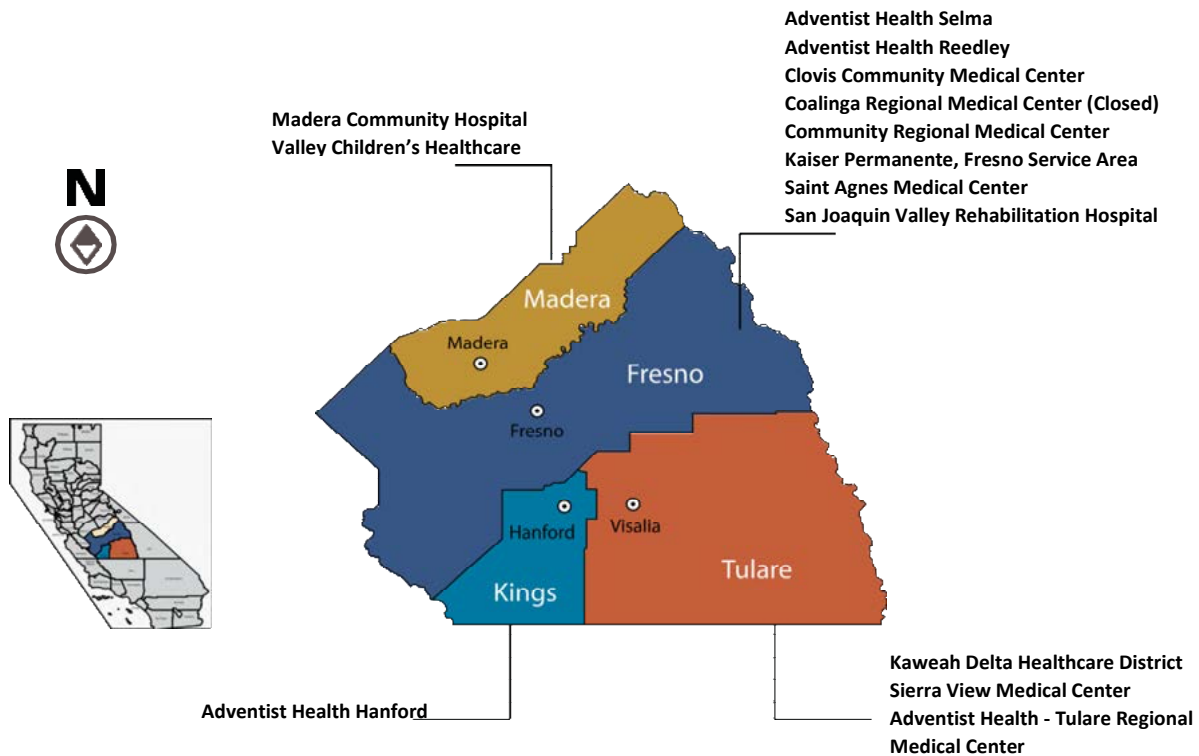
III. CMC’s Service Area: A Look at Our Unique Region

CMC is located in the heart of California’s San Joaquin Valley, an area often referred to as “Appalachia of the West” because of our similarities with that region’s poverty, unemployment and health disparities. Our community is incredibly diverse and we care for patients from around the world in our Level 1 trauma center and comprehensive burn center. Our trauma and burn centers serve nine counties including Fresno, Kern, Kings, Madera, Merced, San Joaquin, Stanislaus, Tulare, and Tuolumne. We are located near major interstate highways and three popular National Parks.

From the 2019 Community Health Needs Assessment, the following demographic information helps paint a picture of our region and the people we serve.

Community Profile

According to the U.S. Geological Survey, the Central Valley, covers about 20,000 square miles and is in one of the most notable land depressions in the world. Occupying a central position in California, it is bounded by the Cascade Range to the north, the Sierra Nevada to the east, the Tehachapi Mountains to the south and the Coast Ranges and San Francisco Bay to the west. The Central Valley can be divided into two large parts: the northern one-third, known as the Sacramento Valley and the Southern two-thirds, called the San Joaquin Valley. The San Joaquin Valley can be split further into the San Joaquin Basin and the Tulare Basin. The Community Health Needs Assessment (CHNA)-participating hospitals are located in the heart of the Central Valley, within four adjoining counties—Fresno, Kings, Madera and Tulare.



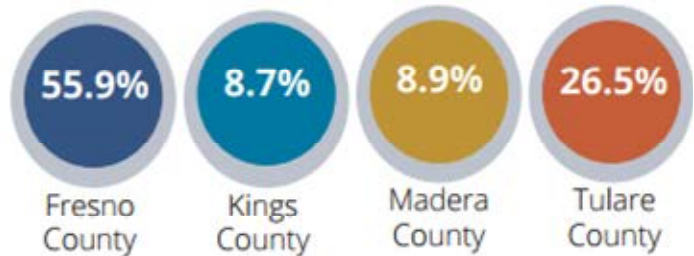
Population Characteristics

According to the U.S. Department of Health & Human Services Administration for Children & Families, in 2016 there were about 1.7 million persons living in the Fresno, Kings, Madera and Tulare counties.¹ Fresno County comprised 56% of population while Kings County was fourth with 8.7% of the total population.

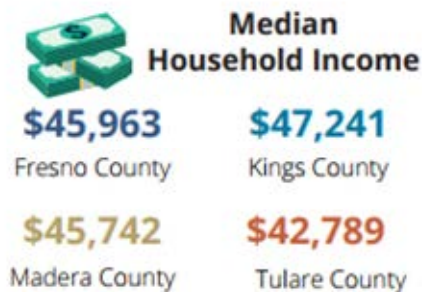
In 2016, approximately

1,722,556

lived in the four-county region. Fresno County comprised the largest portion.



In 2016, the median household income for the four-county region was between \$46,000 and \$43,000—with Fresno County having the highest incomes and Tulare County the lowest. Across the region 46% of housing is renter occupied, in alignment with the California 45.9% average.

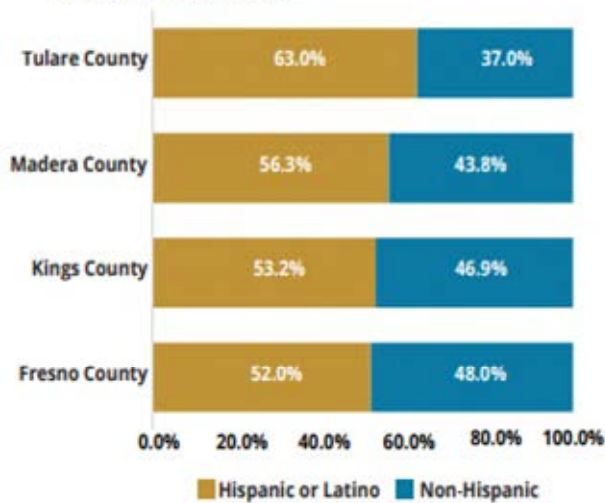


The average percentage of renter-occupied housing across the region is **46%**. This is in alignment with the state average of **45.9%**.

When it comes to ethnicity, the majority of residents in the four-county region identify as Hispanic or Latino. Tulare County has the highest percentage of individuals identified as Latino with 63%. Tulare County also has the largest segment of the population considered to be linguistically isolated at 15%.

¹ Data Source: Community Commons (2018). U.S. Department of Health and Human Services, Administration for Children and Families. Retrieved May 2018 from <https://engagementnetwork.org/assessment/>

By ethnicity, the majority identify as Hispanic or Latino, in every county.



Kings and Tulare Counties have the largest populations of families/households with children under 18 years with 47% and 48% respectively.

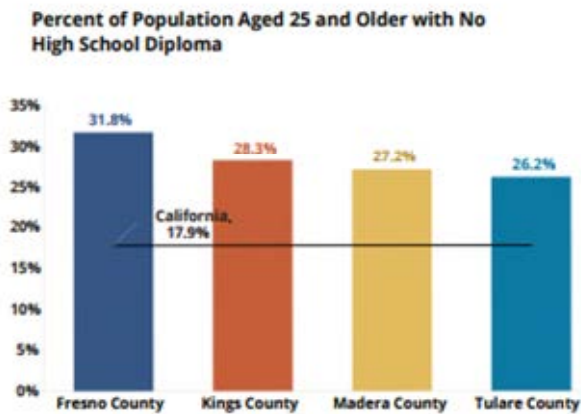
Health Indicators: Education

Education is an important factor in health status. Graduation from a high school or a post-secondary education, such as receiving a Bachelor’s or Associates degree is linked to better health outcomes.

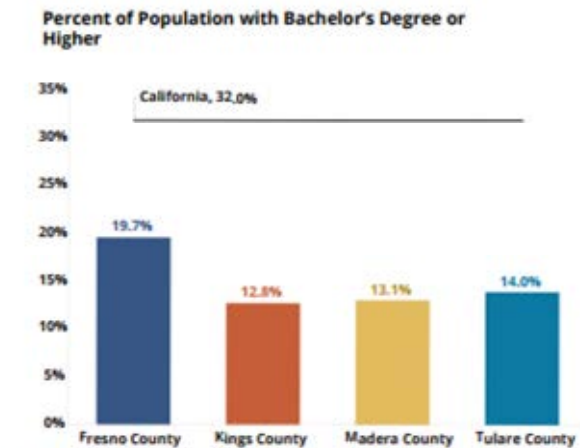
High school graduation rates in our four-county region surpassed the 17.9% statewide graduation rate with Fresno County having the greatest discrepancy at 31.8%.² But when comparing to post-secondary education, the four-county region is below the state average with Kings County having the least amount of people earning a Bachelor’s degree or higher. According to the 2016 American Community Survey, 12.8% of Kings County residents received a Bachelor’s degree or higher, compared to 32% in California as a whole.³

² Data Source: Community Commons (2018). U.S. Census Bureau, American Community Survey 2012-16. Retrieved May 2018 from <https://engagementnetwork.org/assessment/>

³ Data Source: Community Commons (2018). U.S. Census Bureau, American Community Survey 2012-16. Retrieved May 2018 from <https://engagementnetwork.org/assessment/>



Data Source: Community Commons (2018). US Census Bureau, American Community Survey, 2012-16. Retrieved May 2018 from <https://engagementnetwork.org/assessment/>

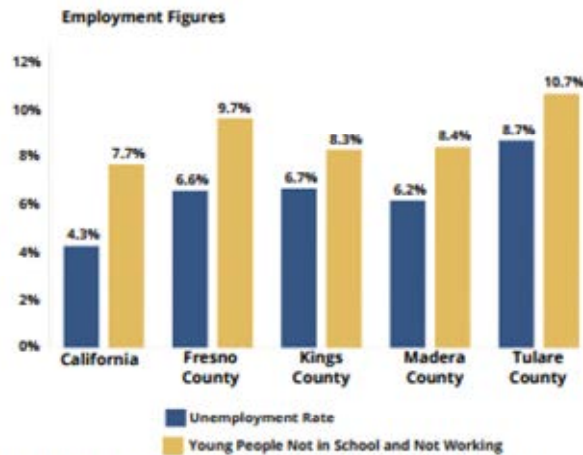


Data Source: Community Commons (2018). US Census Bureau, American Community Survey, 2012-16. Retrieved May 2018 from <https://engagementnetwork.org/assessment/>

Health Indicators: Employment

Unemployment can lead to financial instability and serve as a barrier to health access and utilization. Many secure health coverage through an employer; however, even with Medicaid expansion, lack of employment may prevent some from affording medical office co-pays or medications.

When analyzing employment figures, Tulare County has the highest rate of unemployed adults in the four-county region at 8.7%, compared to the 4.5% state average. Young adults in Tulare County also face the highest unemployment rates in the region at 10.7% compared to the 7.7% California average.⁴



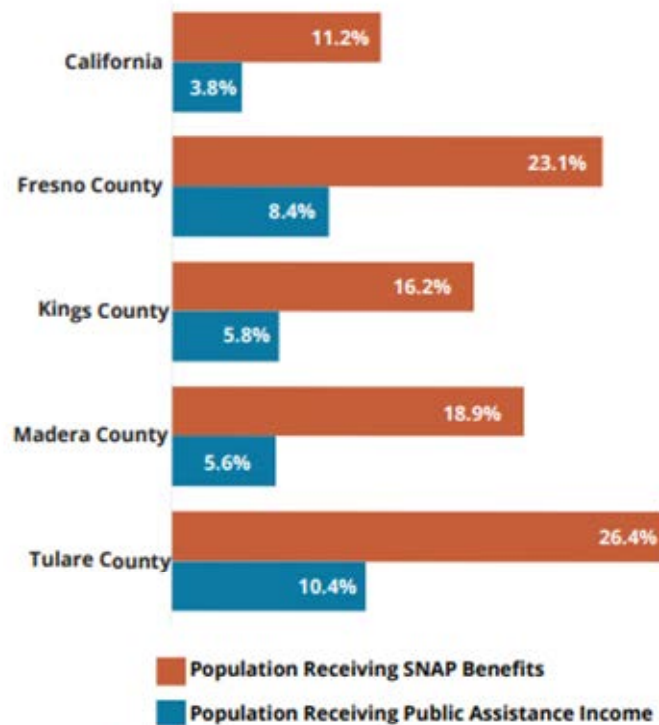
Data Sources: Community Commons (2018). US Census Bureau, American Community Survey, 2012-16. US Department of Labor, Bureau of Labor Statistics, 2018 - August. Retrieved May 2018 from <https://engagementnetwork.org/assessment/>

⁴ Data Sources: Community Commons (2018). U.S. Census Bureau, American Community Survey 2012-16. U.S. Department of Labor Statistics 2018. Retrieved May 2018 from <https://engagementnetwork.org/assessment/>

Health Indicators: Measures of Poverty

Poverty is a strong risk factor for disease and death, especially among children. Children who grow up in poverty are eight times more likely to die from homicide, five times more likely to have a physical or mental health problem and twice as likely to be killed in an accident.

Public assistance information is relevant because it provides an assessment of vulnerable populations, which are more likely to have multiple issues with health access, health status and social support needs. Across the four-county region, Tulare County has the largest population receiving public assistance income in the form of the Temporary Assistance to Needy Families (TANF) and the Supplemental Nutrition Assistance Program (SNAP). In Tulare County, 26.4% of residents receive SNAP compared to 11.2% in California. In California, 3.8% of residents receive public income assistance compared to 10.4% of residents in Tulare County.⁵



Data Sources: Community Commons (2018). US Census Bureau, American Community Survey, 2012-16. US Census Bureau, Small Area Income & Poverty Estimates, 2015. Retrieved May 2018 from <https://engagementnetwork.org/assessment/>

Access to Care

Access to care is arguably the most critical component of measuring community health. Access can be measured at the individual level, such as health insurance coverage and at the system level including availability of primary healthcare and medical professional shortages, etc. When an

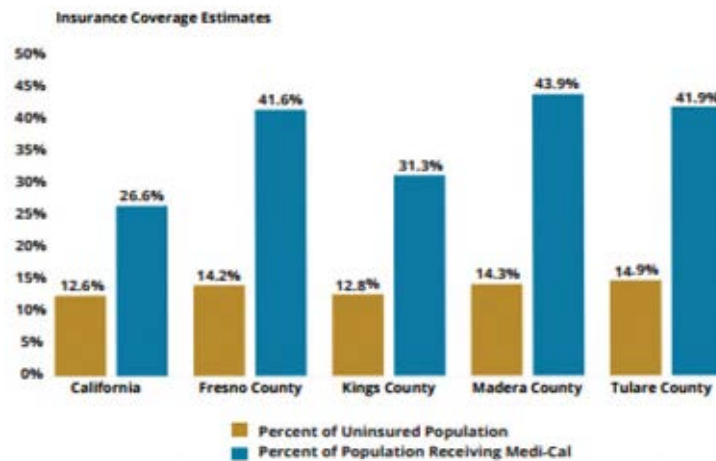
⁵ Data Sources: Community Commons (2018). U.S. Census Bureau, American Community Survey 2012-16. U.S. Census Bureau, Small Area Income & Poverty Estimates 2015. Retrieved May 2018 from <https://engagementnetwork.org/assessment/>

individual has the ability and means to secure timely treatment and quality comprehensive care is readily available and affordable, then access to care is the highest.

Insurance coverage is an important factor determining community health. Lack of coverage results in barriers to accessing primary care, specialty care and other health services. Medi-Cal population rates provide a glimpse of vulnerable residents likely to experience multiple social and economic challenges when accessing care.

In the four-county area, 43.9% of Madera County residents receive Medi-Cal, compared to 26.6% of residents. Tulare County residents experience the highest uninsured rates in the region at 14.9% compared to 12.6% in California.⁶

CRMC has one of the highest Medi-Cal discharge rates in California. In 2019, 81% of CMC patients were covered by government insurance and 43% received Medi-Cal benefits.

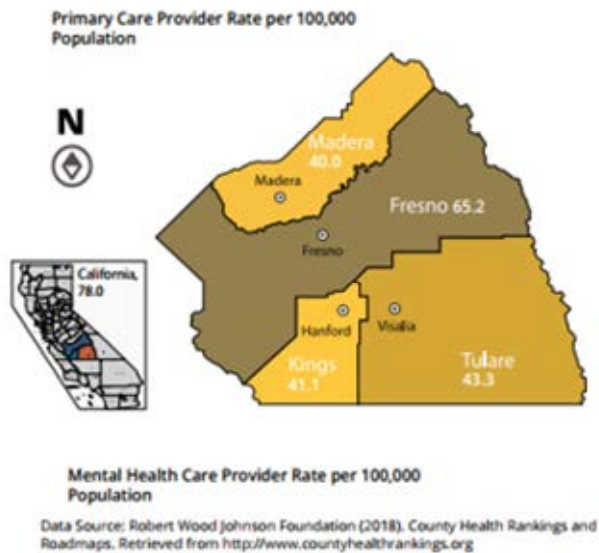


Data Source: Community Commons (2018). US Census Bureau, American Community Survey, 2012-16. Retrieved May 2018 from <https://engagementnetwork.org/assessment/>

The Central San Joaquin Valley has one of the lowest ratio of physicians per 100,000 population in California. Fresno County has 65.2 primary care providers for every 100,000 people, while Madera County has the lowest rate, with 40 primary care providers per 100,000.⁷ All counties in our region fall below the statewide rate of 78 primary care providers per 100,000.

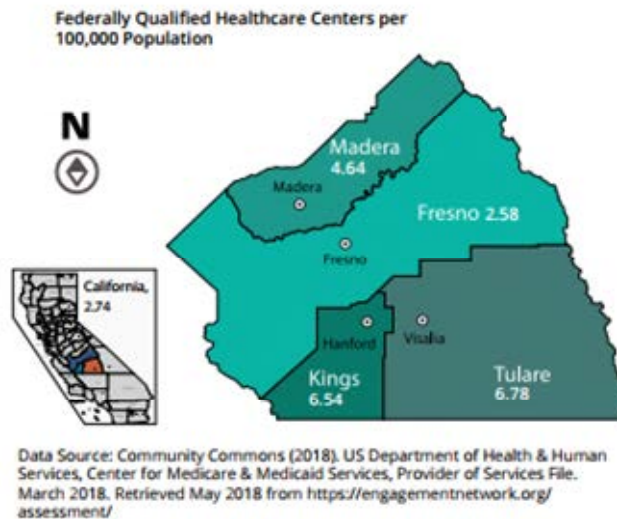
⁶ Data Source: Community Commons (2018). U.S. Census Bureau, American Community Survey, 2012-16. Retrieved May 2018 from <https://engagementnetwork.org/assessment/>

⁷ Data Source: Robert Wood Johnson Foundation (2018). County Health Rankings and Roadmaps. Retrieved from <https://countyhealthrankings.org>



Community Health Centers (CHCs) are community assets providing timely health care to vulnerable populations in areas designated as medically underserved. CHCs include Federally Qualified Health Centers (FQHCs), FQHC look-alikes, Migrant Health Centers, Rural and Frontier Health Centers and Free Clinics. CHCs are an essential safety-net segment. In many California counties, these clinics provide a significant proportion of comprehensive primary care services to those who receive partial health coverage subsidies and to the uninsured.

Across the region, Tulare County has the highest number of FQHCs to population with 6.78 clinics for every 100,000 people. Fresno County has the lowest rate at 2.58 per 100,000 persons, in line with the statewide rate of 2.74 FQHCs per 100,000.⁸



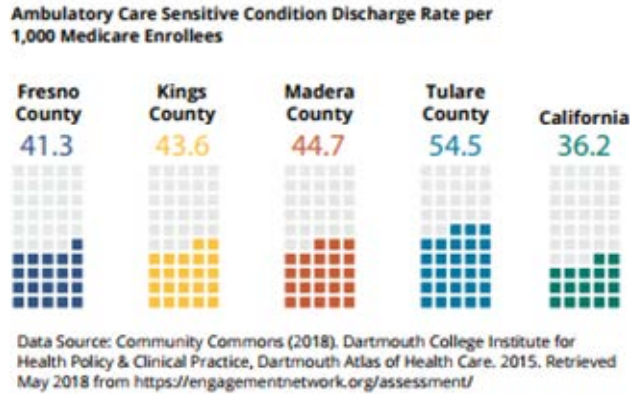
Preventable Hospital Events

This indicator reports the discharge rate for conditions that are ambulatory care sensitive (ACS). ACS conditions include pneumonia, dehydration, asthma, diabetes and other preventable conditions if adequate primary care resources are available and accessed by those patients. This indicator is

⁸ Data Source: Community Commons (2018). U.S. Department of Health & Human Services, Center for Medicare & Medicaid Services, Provider of Service File. March 2018. Retrieved May 018 from <https://engagementnetwork.org/assessment/>

relevant because analysis of ACS discharges demonstrates a possible “return on investment” from interventions that reduce admissions through better access to primary care resources.

Tulare County has the highest discharge rate for ACS, compared to the other counties at 54.5 per 1,000 Medicare enrollees.⁹ The California baseline is 36.2 ACS per 1,000 Medicare patients.

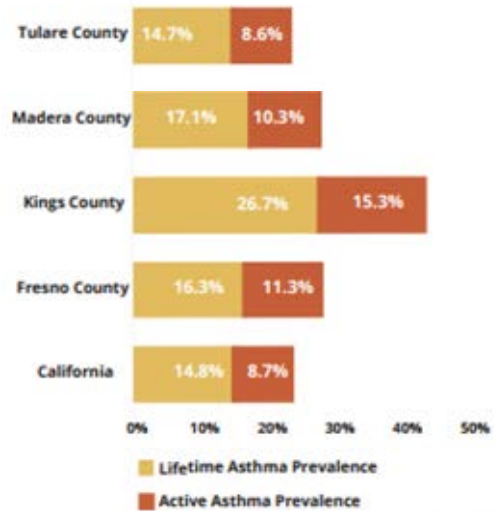


Air quality is of great concern to many area residents and can have detrimental effects on respiratory health. In the region, Fresno County has the highest emergency department visit rates (67.4 visits per 100,000 persons) and hospitalizations (7.4 hospitalizations per 100,000 persons)

	California	Fresno County	Kings County	Madera County	Tulare County
Asthma ED Visits, Rate per 100,000	45.8	67.4	65	60.2	40.5
Asthma Hospitalizations, Rate per 100,000	4.8	7.4	4.0	6.0	4.5
Asthma Hospitalizations Age 0-4, Rate per 10,000	19.6	38.1	22.2	31.9	16.8
Asthma Hospitalizations Age 5-17, Rate per 10,000	7.7	16.0	9.3	9.6	5.7

Data Sources: California Department of Public Health, California Breathing, County Asthma Data Tool, 2015-2016. Retrieved from <https://www.cdph.ca.gov/Programs/CCDPHP/DEOD/EBIB/CPE/Pages/CaliforniaBreathingData.aspx>. Lucile Packard Foundation for Children's Health (2018). Percentage of children diagnosed with asthma, 2013 - 2014. Retrieved from <https://www.kidsdata.org/?site=full>.

Asthma Estimates



Data Source: California Department of Public Health, California Breathing, County Asthma Data Tool, 2015-2016. Retrieved from <https://www.cdph.ca.gov/Programs/CCDPHP/DEOD/EBIB/CPE/Pages/CaliforniaBreathingData.aspx>

⁹ Data Source: Community Commons (2018). Dartmouth College Institute for Health Policy & Clinical Practice, Dartmouth Atlas of Health Care. 2015. Retrieved May 2018 from <https://engagementnetwork.org/assessment/>

related to asthma. Kings County has the highest lifetime and active asthma prevalence (26.7%) and the lowest hospitalization rate at 4.0 per 100,000¹⁰.

Mortality

The leading causes of death in the United States are overwhelmingly the result of chronic and preventable diseases. Nearly 75% of all deaths in the United States are attributed to 10 causes, with the top three of these accounting for over 50% of all deaths. According to the Centers for Disease Control and Prevention (CDC), the top three causes of death in the U.S. in 2016 were from heart disease, cancer and unintentional injuries.

Within the four-county region, cancer and heart disease occupy the first and second spots for leading causes of death from 2011-2016. Kings County has the highest mortality rate from all cancers in the region at 152.2 per 100,000 (age-adjusted). During the same period, mortality rates for all cancers in California was 140.2 per 100,000. Tulare County had the region's highest rate for coronary heart disease at 120.5 per 100,000 (age-adjusted). The state's heart disease mortality rate was 89.1 per 100,000 and notably, all counties surpassed the state average for this indicator.¹¹

¹⁰ Data Sources: California Department of Public Health, California Breathing. County Asthma Data Tool, 2015-2016. Retrieved from <https://www.cdph.ca.gov/Programs/CCDPHP/DEODC/EHIB/CPE/Pages/CaliforniaBreathingData.aspx>. Lucile Packard Foundation for Children's Health (2018). Percentage of children diagnosed with asthma, 2013-2014. Retrieved from <https://www.kidsdata.org/?site=full>.

¹¹ Data Source: California Department of Public Health, County Health Status Profiles 2018, Individual County Data Sheets. 2011-2016 Death Files. Retrieved from <https://www.cdph.ca.gov/Programs/CHSI/Pages/Individual-County-Data-Sheets.aspx>

Top Ten Leading Causes of Death (Age-Adjusted Rates per 100,000 Population)

Rank	California	Fresno County	Kings County	Madera County	Tulare County
1	Malignant Neoplasms (All Cancers) 140.2	Malignant Neoplasms (All Cancers) 141.9	Malignant Neoplasms (All Cancers) 152.2	Malignant Neoplasms (All Cancers) 140.6	Malignant Neoplasms (All Cancers) 138.4
2	Coronary Heart Disease 89.1	Coronary Heart Disease 108.1	Coronary Heart Disease 91.6	Coronary Heart Disease 91.7	Coronary Heart Disease 120.5
3	Stroke 35.3	Stroke 44.7	Chronic Lower Respiratory Disease 41.0	Accidents (Unintentional Injuries) 45.8	Stroke 40.9
4	Alzheimer's Disease 34.2	Accidents (Unintentional Injuries) 43.8	Alzheimer's Disease 40.3	Alzheimer's Disease 41.5	Chronic Lower Respiratory Disease 39.8
5	Chronic Lower Respiratory Disease 32.1	Alzheimer's Disease 37.6	Accidents (Unintentional Injuries) 38.6	Stroke 41.1	Accidents (Unintentional Injuries) 39.0
6	Accidents (Unintentional Injuries) 30.3	Chronic Lower Respiratory Disease 33.8	Stroke 34.1	Chronic Lower Respiratory Disease 37.3	Alzheimer's Disease 28.5
7	Diabetes 20.7	Diabetes 26.4	Diabetes 24.7	Diabetes 20.8	Diabetes 26.5
8	Influenza/Pneumonia 14.3	Influenza/Pneumonia 18.6	Chronic Liver Disease and Cirrhosis 17.6	Chronic Liver Disease and Cirrhosis 20.7	Influenza/Pneumonia 22.6
9	Drug-Induced Deaths 12.2	Chronic Liver Disease and Cirrhosis 16.4	Influenza/Pneumonia 17.4	Influenza/Pneumonia 13.7	Chronic Liver Disease and Cirrhosis 18.4
10	Suicide 10.4	Drug-Induced Deaths 15.9	Drug-Induced Deaths 13.3	Motor Vehicle Traffic Crashes 17.1	Motor Vehicle Traffic Crashes 17.9

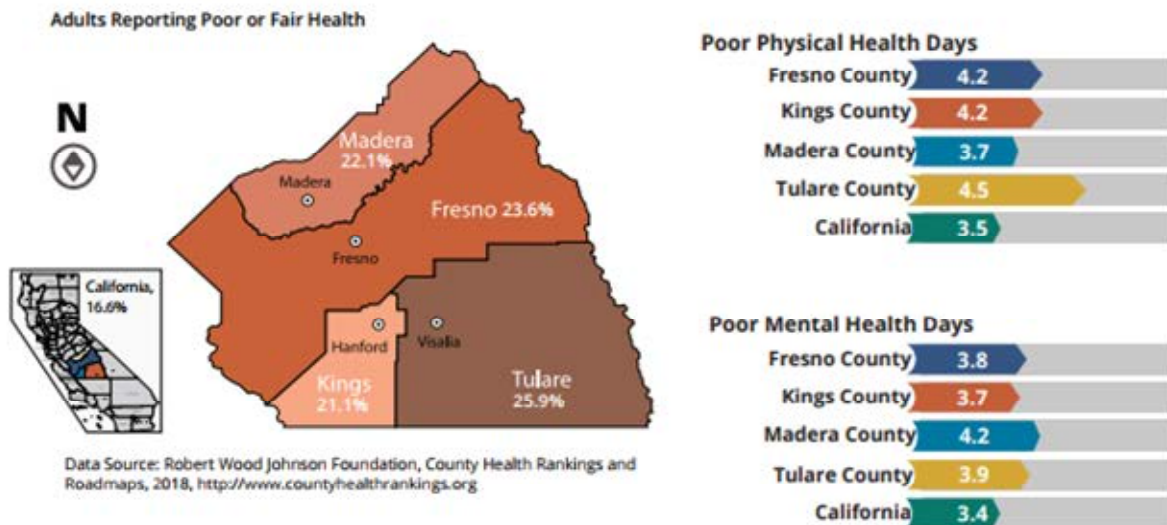
Note: Shaded rows indicate commonalities among the counties for mortality rankings. Bold numbers on these rows indicate the county with the highest rate per 100,000. Data Source: California Department of Public Health, County Health Status Profiles 2018, Individual County Data Sheets. 2011-2016 Death Files. Retrieved from <https://www.cdph.ca.gov/Programs/CHSI/Pages/Individual-County-Data-Sheets.aspx>

Health Status

Health status is comprised of several factors including healthy life expectancy, years of potential life lost, self-assessed health status, chronic disease prevalence, functioning measures, physical illness and mental well-being. These measures go hand-in-hand with health behaviors such as physical activity, nutrition, smoking and alcohol consumption. Measuring health behaviors provides a deeper understanding of health status.

Tulare County had the largest proportion of adults who rate their health as "fair" or "poor," at 25.9% while Kings County had the lowest rate at 21%. Tulare County also had the highest number of poor physical health days within a reported 30-day period at 4.5 days. Madera County had the highest

number of reported poor mental health days in a 30-day period at 4.2 days.¹² All counties in our region had higher numbers of adults reporting poor or fair health compared to the statewide average of 16.6%.



Chronic Disease

Chronic diseases such as heart disease, stroke, cancer, type 2 diabetes, obesity and arthritis are among the most common, costly and preventable of all health problems. As of 2012, the CDC estimated that nearly half of all U.S. adults, or 117 million people, had one or more chronic health conditions.

Fresno County’s Medicare population had the lowest rates of depression in the region (13.0%), which was also lower than the state average (14.3%). In the region, Fresno County had the lowest heart disease rates (26.5%) and lowest percentage of Medicare population with high blood pressure (55.9%). Medicare populations in Tulare County had the highest percentages in the state and region of obesity (33.4%) and high blood pressure (60.3%). Tulare County’s Medicare population also had the highest depression rate in the region (14.3%), in line with the state average.

¹² Data Source: Robert Wood Johnson Foundation, County Health Rankings and Roadmaps, 2018, <http://www.countyhealthrankings.org>

Chronic Disease Indicators	Fresno County	Kings County	Madera County	Tulare County	California
Adults with a Body Mass Index Greater than 30	28.5%	24.1%	26.1%	33.4%	22.5%
Medicare Population with Depression	13.0%	13.9%	13.3%	14.3%	14.3%
Medicare Population with Heart Disease	26.5%	32.5%	27.9%	30.2%	23.6%
Medicare Population with High Blood Pressure	55.9%	59.1%	57.1%	60.3%	49.6%
Medicare Population with Diabetes	30.9%	33.0%	30.7%	32.3%	25.3%

Data Sources: Community Commons (2018). Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion. 2015. Centers for Medicare and Medicaid Services. 2015. Retrieved May 2018 from <https://engagementnetwork.org/assessment/>

Sexually Transmitted Infections

Sexually transmitted infections (STIs) are passed from one person to another through intimate physical contact and from sexual activity. STIs are very common. In fact, the CDC estimates that every year in the U.S. there are 20 million new infections. Understanding STI rates is important because these indicate poor health status, lack of sexual health education and prevalence of unsafe sex practices.

Fresno County had the highest state and regional incidence per 100,000 population for chlamydia (664) and gonorrhea (204.8). In the region, Fresno County had the highest HIV prevalence (215.4).¹³

Rate per 100,000 Population	Fresno County	Kings County	Madera County	Tulare County	California
Chlamydia Incidence	664	569.7	495.5	569.7	506.2
Gonorrhea Incidence	204.8	158.3	114.8	150.7	164.9
HIV Prevalence	215.4	121.8	133.7	87.1	376.4

Data Sources: Community Commons (2018). US Department of Health & Human Services, Health Indicators Warehouse. Centers for Disease Control and Prevention, National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention. 2016. Retrieved May 2018 from <https://engagementnetwork.org/assessment/>

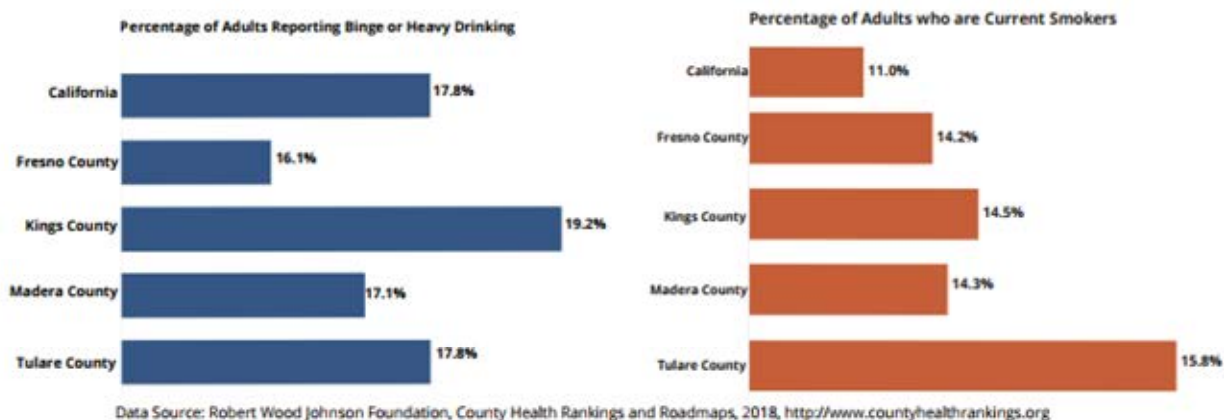
Alcohol and Tobacco Use

Alcohol and tobacco use has major adverse impacts on individuals, families and communities. The effects of abuse are cumulative, contributing to costly social, physical, mental and public health problems.

According to Robert Wood Johnson’s County Health Rankings and Roadmaps 2018 data, Kings County had the highest percentage of adults surveyed in our region who reported being engaged in binge or heavy drinking within the last 30 days (19.2%). Fresno County had the lowest percentage of

¹³ Data Sources: Community Commons (2018). US Department of Health & Human Services, Health Indicators Warehouse. Centers for Disease Control and Prevention, National Center for HIV/AIDS, Viral Hepatitis, STD and TB Prevention. 2016. Retrieved May 2018 from <https://engagementnetwork.org/assessment/>

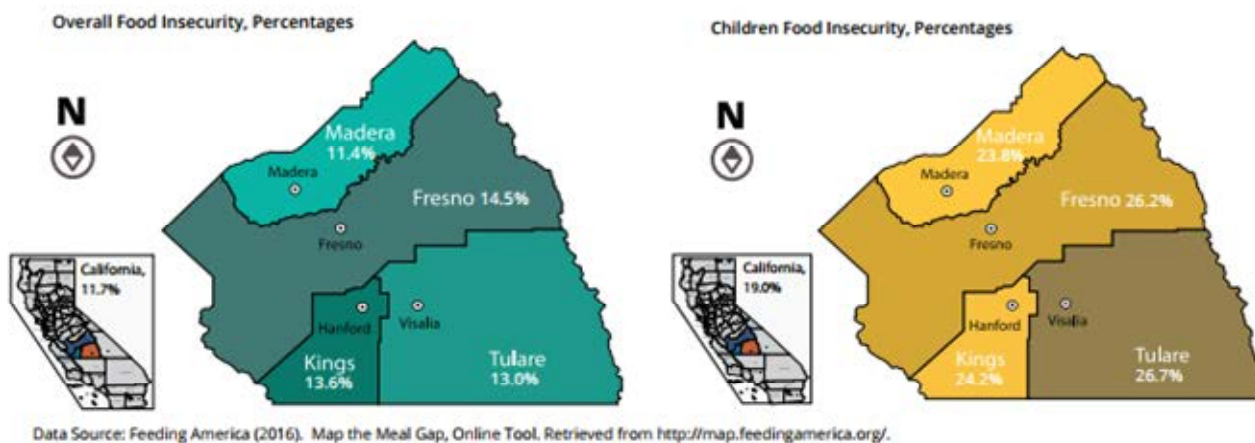
adults in our region who engaged in binge or heavy drinking (16.1%). The California average is 17.8%. Tulare County had the highest percentage of adults who identify as current smokers (15.8%), while Fresno County had the lowest (14.2%). Comparatively, the statewide average is 11%.¹⁴



Food Insecurity

The U.S. Department of Agriculture defines food insecurity as a lack of consistent access to enough food for an active, healthy life for all household members. Food insecurity may reflect a household’s need to choose between important basic needs, such as housing or medical bills and purchasing nutritionally adequate foods.

In the four county region, food insecurity rates for adults are higher than the California (11.7%) and the U.S. (12.9%) rates. Fresno County has the highest rate of adults experiencing food insecurity (14.5%), while Tulare County has the highest food insecurity rate among children (26.7%).¹⁵



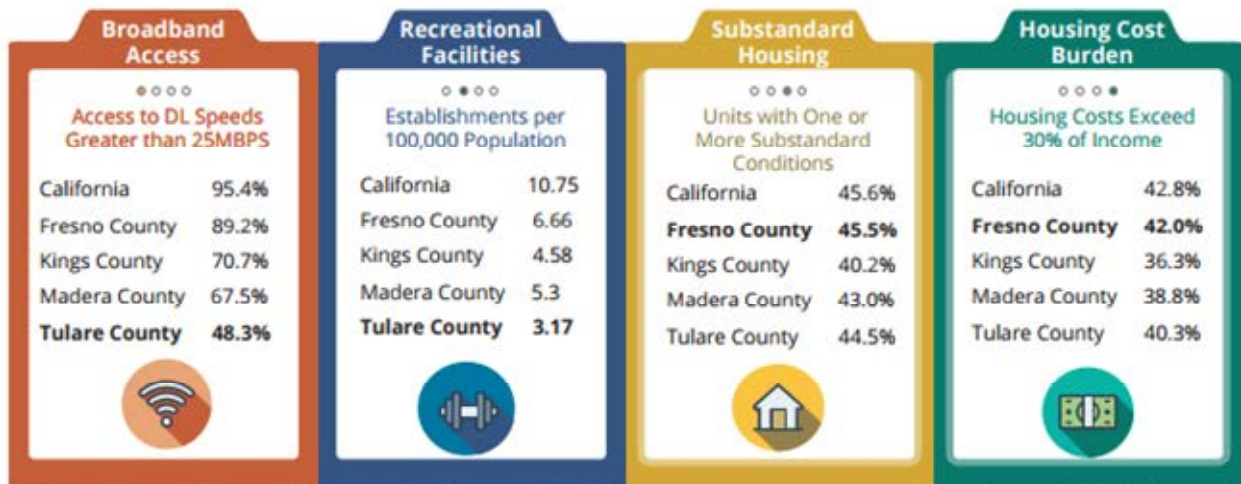
¹⁴ Data Source: Robert Wood Johnson Foundation, County Health Rankings and Roadmaps, 2018, <http://www.countyhealthrankings.org>

¹⁵ Data Source: Feeding America (2016). Map the Meal Gap, Online Tool. Retrieved from <http://map.feedingamerica.org/>

Built Environment

The term "built environment" refers to human-made spaces where people live, work and recreate daily. Built environments include, recreational facilities and fitness centers, quality housing and broadband internet access. High-speed internet access provides increased employment and education opportunities. Access to recreational facilities encourages physical activity and other healthy behaviors. Finally, affordable quality housing has a major impact on overall health. High housing costs may force trade-offs between housing and other needs, such as food or healthcare.

Across the four-county region, Tulare County has the lowest access to high-speed internet (48.3%) and the fewest recreational facilities at only 3.17 establishments per 100,000 persons. In Fresno County, 42% of residents experience the highest housing cost burden in the region, paying more than 30% of their income for housing. Fresno County also experiences the highest incidence of substandard housing with 45.5% of housing considered substandard.¹⁶



Data Sources: Community Commons (2018). National Broadband Map. 2016. US Census Bureau, County Business Patterns. Additional data analysis by CARES. 2016. US Census Bureau, American Community Survey. 2012-16. Retrieved May 2018 from <https://engagementnetwork.org/assessment/>

To view the full, comprehensive 2019 Community Health Needs Assessment, [click here](#).

¹⁶ Data Sources: Community Commons (2018). National Broadband Map. 2016. US Census Bureau, County Business Patterns. Additional data analysis by CARES. 2016. US Census Bureau, American Community Survey. 2012-16. Retrieved May 2018 from <https://engagementnetwork.org/assessment/>

IV. Identified Community Health Needs

In compliance with federal regulations and to serve our mission of improving the health of our region, CMC participates in the joint-hospital triennial CHNA to identify the area's most pressing health needs in Fresno, Madera, Kings and Tulare Counties.

The [2019 Community Health Needs Assessment](#) (CHNA) consists of primary data from more than 1,000 participants in individual interviews, multi-language focus groups and online surveys. Participants included representatives from and users of health improvement programs aimed at low-income and vulnerable populations and serving children, homeless, LGBTQ+, veterans, seniors and Native American communities, as well as African American, Hmong, Latino and Spanish-speaking populations. Secondary data was collected using government and other resources, such as the California Department of Public Health, Health Resources and Services Administration and the Robert Wood Johnson's County Health Rankings and Roadmaps.

The identified 13 major health needs are:

- Access to Care
- Asthma
- Cancer
- Climate and Health
- CVD/Stroke
- Economic Security
- HIV/AIDS/STIs
- Maternal and Infant Health
- Mental Health
- Obesity/HEAL (healthy eating and active living)/Diabetes
- Oral Health
- Substance Abuse/Tobacco
- Violence and Injury Prevention

In collaboration with Saint Agnes Medical Center and Valley Children's Healthcare, CMC invited public health and community-based organization leaders from the four-county region to prioritize our area's health needs. These leaders, most of whom also participated in the primary data gathering, ranked the most pressing needs based on the following criteria:

- Severity, magnitude, urgency
- Feasibility and effectiveness of possible interventions
- Potential impact on greatest number of people
- Potential health need score (based on primary data)
- Measurable and achievable outcomes in a 3-year span
- Existing resources/programs

The process concluded with the following health needs in order of importance:

Rank	Potential Health Need	Description
1	Access to Care	Healthcare facilities, healthcare coverage and primary care providers
2	Obesity/HEAL/Diabetes	Obesity, diabetes, healthy eating and active living
3	Maternal and Infant Health	Prenatal care, breastfeeding and birth outcomes
4	Mental Health	Depression, suicidal ideation and mental health provider rate
5	Economic Security	Poverty, education, public assistance and homelessness
6	Oral Health	Access to dentists
7	Substance Abuse/Tobacco	Mortality from drug overdose, excessive drinking and tobacco use
8	Violence and Injury Prevention	Unintentional injuries and violence
9	Climate and Health	Air quality, water quality and pollution
10	CVD/Stroke	Cardiovascular disease
11	Asthma	Asthma prevalence, emergency department visits, hospitalizations and mortality from chronic lower respiratory disease
12	HIV/AIDS/STIs	HIV, AIDS and sexually transmitted infections
13	Cancer	Cancer and mortality

NOTE: Fresno, Kings, Madera and Tulare County health needs ranking process included healthcare, public health and community-based organization leads from each county. The needs ranking, based on primary and secondary data gathering phases of the 2019 CHNA, reflect the health needs' collective order of importance. Please note: These health needs were identified and prioritized prior to the COVID-19 public health emergency.

V. Meeting Community Needs

CMC's efforts to improve the community's health status are varied and wide-ranging. From sophisticated medical research that addresses the Valley's unique health needs to home visits for asthma patients, CMC strives to respond to the most pressing health needs in our region. The CHNA provides us with a "roadmap" for our community health improvement efforts.

Below is a snapshot of CMC's signature community benefit programs for Fiscal Year 2020. This report and our future Fiscal Year 2021 community benefit activities address [CMC's 2019 Implementation Plan](#). Activities related to these two reports are in response to the 2019 CHNA identified health needs.

In good faith, CMC strives to serve the identified health needs directly or as a subject matter expert. While CMC participates in local and regional collaborative efforts around all 13 identified health needs, CMC's Implementation Plan primarily focuses on addressing the top five healthcare needs identified.

COVID-19 Community Benefit Impact

In early March 2020, shelter-in-place orders due to COVID-19 were mandated by county and state public health authorities in CMC's service area. These orders significantly altered our internal and external clinical and community-based activities. All CMC facilities implemented strict limits on visitors and persons accompanying patients. These limits impacted several community benefit activities including: student nursing in-service education, in-facility vocational trainings, in-person support groups and others. COVID-19 restrictions gave way to innovative patient and general public outreach efforts with the use of online meeting platforms, social media and video messaging. CMC also collaborated with a broad partnership of community groups and area hospitals to help meet the immediate needs of families impacted by the pandemic.

In this report, COVID-19 impacts to CMC community benefit activities will be addressed for each impacted program.

Health Need 1 – Access to Care

Graduate Medical Education

CMC shares a strong partnership with the University of California, San Francisco Fresno. UCSF Fresno, established in 1975, helps address the region's need for physicians and increase access to care and specialties. Through the partnership, CMC has more than 200 residents training in eight specialties, a dental oral maxillofacial surgery resident and more than 50 fellows training in 18 subspecialties. In addition, more than 300 third- and fourth-year medical students are trained annually on a rotating basis in our hospitals. Rotating medical students include those in UCSF's

San Joaquin Valley Program in Medical Education (SJV PRIME), which launched in 2019 with six medical students. Twelve medical students were enrolled in the program in 2020. The SJV PRIME trains local students to provide culturally competent, accessible care in the San Joaquin Valley. UCSF Fresno provides training in 19 fellowships:

- Acute Care Surgery
- Advanced Cardiovascular Imaging
- Cardiovascular Disease
- Community Pediatrics
- Emergency Medicine Education
- Emergency Ultrasound
- Gastroenterology
- Head and Neck Oncology and Microvascular Reconstruction
- Hematology/Oncology
- HIV
- Hospice and Palliative Care
- Hospital Medicine
- Infectious Diseases
- Interventional Cardiology
- Maternal Child Health
- Pulmonary/Critical Care
- Sleep Medicine
- Surgical Critical Care
- Wilderness Medicine

UCSF Fresno has eight medical residency programs:

- Emergency Medicine
- Family and Community Medicine
- Internal Medicine
- Obstetrics/Gynecology
- Orthopaedic Surgery
- Pediatrics
- Psychiatry
- Surgery

UCSF Fresno also provides training in three physician assistant residency programs, including acute care trauma; emergency medicine and orthopedic surgery.

Nearly 50% of graduating residents stay in the Central Valley to practice medicine, making this program critical to addressing the region's access to care issues detailed in this report.

During the last 10 years, CMC has invested nearly \$540 million in total medical education operating expenses. CMC invests more than \$51 million annually in the education program, of which only about \$14.6 million is reimbursed annually through federal GME funding.

As part of the comprehensive medical education program, 320 research studies were conducted at CMC facilities and in the community during Fiscal Year 2020. Studies conducted by CMC and UCSF researchers address specific Valley issues including methamphetamine exposure and birth outcomes, environmental chemicals and pregnancy effects and pre-term birth among vulnerable populations including Hmong, Latinos and African Americans.

Nursing In-Service Education

Through partnerships with over 20 universities, colleges and adult schools, CMC is a regional leader in the training of future generations of health professionals. Nursing staff at CMC sub-acute and

acute care facilities provide hands-on teaching in a wide variety of medical disciplines including labor and delivery, oncology, burn, neurology, dialysis, emergency medicine, behavioral health, medical-surgical care, intensive care and more.

On average, there are over 100 students working toward professional licensure who round alongside our nurses daily. These nursing students are enrolled in programs including Registered Nurse, Associate, Bachelor's or Master's degree in nursing, Family Nurse Practitioner and Clinical Nurse Specialist. Students come from the following higher education institutions:

Aspen University	San Joaquin Valley College
Brandman University	University of Colorado, Denver
California State University, Fresno	University of Missouri Sinclair School of Nursing
College of the Sequoias	University of Phoenix
Fresno Adult School	University of South Alabama
Fresno City College	University of Texas-Arlington
Grand Canyon University	Walden University
Gurnick Academy of Medical Arts	West Coast University
Madera Community College	West Hills Community College
Samford University	Western Governors University

In Fiscal Year 2020, CMC nurses provided close to 75,000 hours of hands-on, in-service education to nursing students in CMC facilities. Students learn and work alongside our nurses as part of their degree and or licensure program.

Due to COVID-19, additional persons entering CMC facilities were strictly limited as of early March 2020. CMC visitor restrictions halted all nursing student education activities from mid-March to early June 2020.

Fresno Medical Respite Center

CMC is a hospital partner in the Fresno Medical Respite Center established in July 2011. The center provides 12 beds for homeless men and women at the Fresno Rescue Mission in downtown Fresno.

The Respite Center offers a 'safe discharge' place for homeless patients to continue their recovery. Research shows homeless patients stay 4.5 days longer in hospitals, post inpatient stay, compared to patients with social support. The center provides a safe alternative, reducing a patient's hospital length of stay. Respite beds are available to patients from all local area hospitals.

CRMC's home health clinical staff and case managers provide Respite Center patients with coordinated healthcare and linkages to social and community resources. In Fiscal Year 2020, CRMC contributed \$102,000 to the Fresno Medical Respite Center and provided care to nearly 240 patients—saving over 3,000 in-patient days. Since the program's launch, CMC has contributed more than \$636,000 in funding.

Homeless Patient Discharge (SB 1152)

As the region's safety net hospital system, CMC has consistently served homeless patients with quality care and dignity. In compliance with [California Senate Bill 1152](#), as of January 2019, all state hospitals are tasked with tracking the number of homeless people served and implementing a comprehensive discharge plan. The plan requires all discharged patients receive weather-appropriate clothing and shoes, transportation, medication and connections to a safe destination within 30 miles of the hospital.

In Fiscal Year 2020, CMC served more than 4,000 homeless patients in over 10,000 encounters, providing each one with a safe and dignified discharge. Throughout the year, CMC staff donate new shoes and gently used clothing for homeless patients who need weather appropriate attire before being discharged.

Hospital Presumptive Eligibility

In partnership with Fresno County's Department of Social Services (DSS), CMC continues to provide in-hospital enrollment for uninsured patients who "presumptively" qualify for Medi-Cal. Through the Hospital Presumptive Eligibility (HPE) program, CRMC admitting staff enroll patients in Medi-Cal coverage who likely qualify for the program based on their current enrollment in other social and public assistance programs.

HPE enrollment provides uninsured patients "real time" coverage for their visits and any care appointments up to 90 days prior. Once a patient is enrolled via HPE, the patient has 60 days to provide qualifying documentation to Fresno County DSS in order to receive permanent coverage.

In Fiscal Year 2020, CRMC and CCMC admitting staff enrolled nearly 1,800 uninsured persons in Medi-Cal through the HPE program.

Health Need 2 – Obesity/Healthy Eating Active Living/Diabetes

Community Diabetes Education

CMC's Community Diabetes Education (CDE) serves patients from Fresno and five area counties at its downtown CRMC campus. The center is the only American Diabetes Association-recognized education program in Fresno County. It provides care to a high percentage of patients who are otherwise unable to receive diabetes self-management education, including bilingual services to a high concentration of Spanish-speaking patients.

The CDE is also one of two California Public Health Department-accredited *Sweet Success* affiliates in Fresno County. The *Sweet Success* program targets women diagnosed with diabetes during pregnancy. The program is staffed by registered nurses and registered dietitians – all are Diabetes Care and Education Specialist-certified. CDE staff provide education to women and their families on healthy eating habits and controlling diabetes during pregnancy. Last year the CDE provided

diabetes management education and services to more than 1,600 patients, with over 5,500 visits—55% of these patients were covered by Medi-Cal.

Community Diabetes Education staff participated in:

- Monthly training for the California Diabetes and Pregnancy Program *Sweet Success* program
- Monthly hands-on training for UCSF Fresno Medical Education students, family health and internal medicine interns, residents and faculty
- Diabetes Medication Management Clinic at CRMC's North Medical Plaza, providing patients with medication support to improve blood glucose levels
- Medical resident teaching
- Registered Nurse residency training
- Fresno Community Health Improvement Partnership's (FCHIP) Diabetes Collaborative monthly meetings as subject matter experts

Bariatric Support Groups

To support patients and families of individuals who have undergone or are considering bariatric surgery, CMC hosts a series of no-cost, virtual support groups. Topics for CMC's bariatric support groups include: exercise and nutrition, wellbeing, chair yoga and a general support convening. Each interactive session is hosted by a Registered Dietician or Licensed Clinical Social Worker. Sessions are open to the public, regardless of where they receive or plan to receive bariatric treatment. In Fiscal Year 2020, CMC hosted 64 support groups that were either 30 minutes or 1 hour in duration.

Know Your Numbers Community Health Fairs

CMC is a partner in Centro La Familia's Latino Health Workgroup which increases awareness and resources to low-income people living with chronic disease in the Central Valley. The workgroup comprises healthcare, public health, health plan and non-profit organizations. In November 2019, the workgroup hosted a no-cost, *Know Your Numbers* or *Conozca sus Números* bilingual screening and resource health fair on CRMC's campus. At this free event, CRMC Community Diabetes Education staff provided on-site blood sugar testing. Event partners also offered blood pressure, A1c, retinal eye exams and body mass index screenings, as well as health information booths. More than 50 families participated in the event.

Fresno Diabetes Collaborative

The Fresno Diabetes Collaborative works to provide local resources and awareness on diabetes self-management and prevention. Since December 2016, CMC has led FCHIP's monthly Diabetes Collaborative workgroup. The Collaborative engages a broad group of community partners including healthcare providers, public health, clinics, health educators and health plans. In addition to CMC, Valley Children's Healthcare and Saint Agnes are also active FCHIP participants.

CMC helped write a grant proposal that that resulted in a \$75,000 award in 2020 to hire 8 *promotoras* or community health workers. The grant, in collaboration with local non-profit Every

Neighborhood Partnership, educates trusted neighborhood community leaders on the *promotora health promotion model* with a focus on access to care and chronic disease management. *Promotoras* engage Latino, Hmong and African American families and individuals at risk of developing diabetes and chronic disease conditions in southeast and southwest metropolitan Fresno. Due to COVID-19 health restrictions, health access and chronic disease management trainings are conducted online. The grant runs through June 2021.

Since March 2017, CMC hosts the www.fresnodiabetes.org on its web servers and leads all website administrator duties. The redesigned site provides information in English and Spanish of all relevant programs provided by collaborative partners. This includes links to a diabetes risk quiz to identify the prevalence of diabetes and encourage people to take control of their health.

The Collaborative's resource workgroup, in partnership with Tulare County's Alliance for Management & Education of Diabetes (TAME), hosted the annual Fresno/Tulare Diabetes Symposium for the second year in a row. The symposium provides continuing medical education for physicians and allied medical providers caring for diabetes patients. The event, initially planned in March 2020, included education on engagement strategies for disengaged patients and insulin medication therapies. Due to COVID-19, the event was postponed and rescheduled as an online seminar series with trainings held in September and October 2020. Over 100 physicians, nurses, dietitians and allied health professionals from Fresno, Tulare and Kings counties participated in the trainings.

In response to diabetes-specific needs during the COVID-19 health emergency, collaborative partners drafted a patient resource guide. The online guide, available at www.fresnodiabetes.org, provides information on no-cost, low-cost and discounted community resources in Fresno County. The guide provides information on resources available in both English and Spanish. These diabetes-specific resources include: food access, discount medication programs, healthcare support services, glucose monitoring devices and online physical fitness, mental health, support groups and self-management classes. This information was shared with local organizations and agencies and was a welcomed tool as patients learned to navigate their health needs online while sheltering-in-place.

Neighborhood Dance

CMC provided Every Neighborhood Partnership (ENP) \$8,500 for its Neighborhood Dance Fitness program. The program was created in July 2018 after a series of community meetings with southeast and southwest Fresno neighborhood parents, local non-profit organizations and healthcare providers. Participants expressed the need to exercise in safe spaces with consistent class schedules. The group sought funding for a program to train leaders to become neighborhood dance class instructors. Program funding helped pay for an instructor to teach neighborhood leaders Latin dance fitness routines and purchase sound systems for 12 sites.

In Fiscal Year 2020, the program continued classes in 14 sites including Fresno Unified elementary and high schools, community centers and a local playground. All Neighborhood Dance classes are held in southeast and southwest Fresno and are free and open to the public. The majority of dance

fitness participants are Latino and African American. From January 2020 to March 2020, neighborhood dance instructors led 164 in-person classes, attended by more than 1,200 participants. At the time, instructors provided up to 10 classes per week.

In response to the COVID-19 health emergency, instructors learned to use *Facebook Live* to host free, live-streamed classes. Between March 2020 and August 2020, over 250 Facebook Live neighborhood fitness classes were led by ENP dance fitness instructors. In that time, ENP's neighborhood fitness Facebook page grew from 69 users to over 400. The online dance classes average 130 weekly users. Participants' reported results include increased self-esteem, a heightened sense of community and weight loss.

Since the program's launch, more than 50 neighborhood leaders have been trained to lead dance fitness classes. CMC helped to jumpstart this program with an \$11,000 initial investment; to date, CMC's program contributions total \$29,500.

Health Need 3 – Maternal and Infant Health

Mother's Resource Center

CMC is a champion of breastfeeding education for mothers-to-be and provides support services for new mothers throughout the Central Valley. Services range from prenatal breastfeeding education to outpatient consultations following delivery.

In Fiscal Year 2020, the Mother's Resource Center provided more than 10,000 inpatient breastfeeding consultations by international board-certified lactation consultants. The Center's 3M Club (Mommies Making Milk) had more than 670 participant moms whose babies were in the NICU. Participating in the in-hospital 3M Club remains a huge influence on the health and longevity of breastfeeding for these tiny patients.

Since June 2017, the Center hosts breastfeeding classes in both English and Spanish. In Fiscal Year 2020, the Center offered support and education in an outpatient group setting to nearly 80 new parents who were either returning to work, are parents to twins or have special needs babies. CMC's total investments in outreach and education for new mothers and their families in Fiscal Year 2020 was nearly \$160,000.

Due to COVID-19 restrictions, the Mother's Resource Center offered in-person, private education sessions up until March 2020. The center continues offering breastfeeding education classes over the phone or via secure video chat.

Additional Support for Families of Children 0 to 3

CMC also contributed \$5,000 to Central California Food Bank's programs assisting families with young children. CMC's funding helped augment an existing diaper supply program by also providing

food for these families. In addition to diapers, the families of nearly 5,800 children ages 0 to 3 also received shelf-stable and fresh food items. CMC home health nurses also helped deliver boxes of food to homebound patients with injuries or health conditions that put them at greater risk during the COVID-19 pandemic.

Health Need 4 – Mental Health

Involuntary Mental Health Holds

Mental health challenges in the Central Valley are well-documented. Fragmented public services, limited private sector resources and increasing demands for mental healthcare have put pressure on all parts of the care continuum. This is visible at CMC’s two emergency rooms.

CRMC and CCMC Emergency Departments continue offering crisis intervention and provide 5150/1799 “involuntary hold” protocols in conjunction with Fresno County Department of Behavioral Health. Case managers coordinate patient care with CMC’s Behavioral Health Center and Fresno County’s Behavioral Health services. Case managers connect patients to social and community support services.

In Fiscal Year 2020, CRMC’s Emergency Department received 4,042 patients placed under involuntary holds requiring case management services—338 of these were pediatric patients. CCMC’s Emergency Department received 1,344 patients under involuntary mental health holds—151 of these were pediatric patients.

Community Conversations on Mental Health

CMC is an active partner in the ‘Community Conversations on Mental Health’ collaborative. The cross-sector collaborative, consisting of behavioral health, healthcare, mental health providers, non-profit organizations and law enforcement seeks effective service delivery to families and individuals suffering from mental health illnesses. In addition to CMC, participating hospitals include Valley Children’s Healthcare, Saint Agnes and Kaiser Permanente.

The collaborative developed a county behavioral health screening that identifies vulnerable families and individuals needing appropriate community resources. Fresno County’s Multi-Agency Access Program (MAP) screening tool helps link those in need to a variety of social and health services. The 80-question screening identifies immediate and long-term needs. MAP serves families at eight sites in Fresno County and operates a mobile bus to serve rural areas including Huron, Cantua Creek, Mendota, Five Points and others. In Fiscal Year 2020, the MAP collaborative assisted over 3,600 individuals with more than 10,000 client contacts. CMC case management and public affairs staff serve on the collaborative providing technical assistance and expertise.

Since November 2017, CMC has hosted a MAP site at the CRMC downtown hospital campus. In Fiscal Year 2020 more than 160 individuals and families received assistance at the CRMC MAP site.

Families and individuals at the downtown site were linked to a wide variety of services including housing, health coverage renewal, emergency and long-term housing assistance, emergency food aid and energy assistance. COVID-19 visitor restrictions at CRMC resulted in the closure of the in-hospital MAP site in March 2020. Plans to re-open the site will be revisited when public health restrictions are lifted. In Fiscal Year 2019, the MAP point at CRMC served 200 families.

Mental Wellness and Resiliency Programs at Clovis Unified School District

CMC has contributed over \$200,000 since 2018 to the Foundation for Clovis Schools for mental health programs aimed at Clovis Unified K-12 students and families. Efforts to address social and emotional issues among the district's youth are in response to incidents of suicide, anxiety over racial issues and increased mental health involuntary holds among the area's youth.

CMC funding increased access to mental wellness services to students suffering from isolation and anxiety during COVID-19 distance learning. CUSD psychologists hold virtual "check-ins" with students who may experience stress, depression or anxiety while learning virtually. These connections are provided as one-on-one virtual sessions. On average, psychologists make 280 daily connections with students needing mental or emotional support.

To help students struggling with isolation and anxiety as a result of distance learning, CUSD psychologists developed a series of informative videos. The "Together, we've got this!" video series provides students and families with resources on staying connected with others at a distance, healthy conversations and tips for easing anxiety. The online videos are available in English, Spanish, Hmong and Punjabi on the district's website.

CUSD also provides "virtual calming rooms" open to students and families. These virtual spaces developed during the current COVID-19 distance learning period, provide individuals with tools and strategies to help manage emotions. The calming rooms are gaining popularity and the district is seeing increased use by both students and parents.

As a result of CMC's funding, CUSD created the West Wellness Center at Clovis West High School during the 2019-2020 school year. The center provides resources and tools to help students identify and manage their emotional well-being with evidence-based curriculum. Between October 2019 and March 2020, more than 70 students received direct assistance from the center.

CMC's funding directly supported CUSD's Project SMART at Clovis Community's Day School, a mentoring program for at-risk students in fourth to eighth grade. Project SMART mentoring helps students with interpersonal skills development, academic tutoring and counseling. The program has resulted in reduced juvenile delinquency and increased academic achievement.

Spiritual and Mental Health Resiliency targeting Hard-to-Reach Populations

CMC provided \$15,000 to the Clinical Pastoral Education of Central California (CPECC) to provide spiritual and social support services to rural isolated groups such as farm and construction workers

throughout the Central Valley and the state. Spanish-language assistance is provided to workers from Mexico and Central America.

Between January and August 2020, CPECC chaplains provided spiritual and resiliency support to 500 farm labor support staff and nearly 6,000 temporary migrant laborers employed under H-2A visas. Foreign H-2A workers labor in agricultural and farming operations in the Valley and throughout the state are often in socially and geographically isolated situations. CPECC chaplains provide spiritual support in dealing with drug and alcohol addiction, conflict management, short and long term illness and grief and bereavement. In Fiscal Year 2020, CPECC chaplains made over 6,500 in-person and phone connections with farm workers struggling with isolation and depression.

As a result of COVID-19, CPECC's chaplains adjusted farm worker outreach strategies to ensure safe connections with workers needing mental wellness and spiritual support. CPECC chaplains established phone and texting as a primary contact method. For workers with links to social media, CPECC chaplains opened a private Facebook group. The group provides Spanish-language videos containing encouraging messages, health education and community resources. Currently, the private group has 3,000 active Spanish-language users.

Boys and Young Men of Color Initiative

CMC provided \$1,500 to Youth Leadership Institute's (YLI) mental health and resiliency programs targeting at-risk boys and young men of color in southwest Fresno. Between April and August 2020, YLI provided weekly mentorship, life skills development and intergenerational group healing through its *Healing Circles* to nearly 40 young men. Participants included youth who identified as Latino, African American and Asian Pacific Islanders living in southwest Fresno.

As a result of COVID-19 in-person gathering restrictions, YLI's *Healing Circles* are conducted online. The "safe space" and confidential gatherings host between 5 and 10 young men who connect virtually to discuss personal hardships. The young men are led by peer counselors and mentors who provide encouragement, guidance and support. YLI also hosts weekly online journaling, meditation and social interaction sessions to motivate human connections during the pandemic. YLI staff report witnessing increased engagement, decreased anxiety, boosts in morale and positive mental health days among boys and young men participating in the virtual sessions.

Youth Mental Health and Resiliency Connections

CMC provided \$5,000 to Care Fresno's childhood resiliency efforts. Care Fresno's staff live and work in socio-disadvantaged neighborhoods and apartment complexes in southwest Fresno. Staff work closely with children and families providing academic, social and emotional assistance.

Due to COVID-19 gathering restrictions, Care Fresno modified its in-person outreach to children, teens and families served in southeast and southwest Fresno. From March to August 2020, Care Fresno staff contacted families for mental health and resource connections via phone, text and social media. Care Fresno staff were in constant communication with the families of 260 children providing emotional support and linkages to utility and food assistance. In total, Care Fresno made

over 1,400 connections with parents and children. Care Fresno serves Latino, African American and Southeast Asian families.

Care Fresno's in-neighborhood *Care Club*, which provides academic tutoring to low-income students, modified its outreach during COVID-19. Instead of in-person group settings, Care Fresno tutors deliver homework and reading packets to students requiring additional academic instruction. Tutors connect with students either in-person, at the required 6-foot distance while wearing masks, or via phone, text and social media.

CMC funding provides support for Care Fresno's Care Club and mental health support for families living in the following Fresno neighborhoods: Courtyard at Central Park, King's Palace Apartments, Summerset Village Apartments, Cedar and Sequoia Courts.

Health Need 5 – Economic Security

Local closures due to COVID-19 public health directives resulted in widespread business shutdowns, significant job losses and furloughs. Local needs served by community non-profit organizations and hospitals included rental/housing, utility and food emergencies. CMC received multiple urgent requests for food access aid by the Central California Food Bank and Fresno Metro Ministry who were seeing a more than 40% increase in need. Food assistance organizations reported that close to 25% of those seeking aid were requesting it for the first time.

Fresno Metro Ministry

CMC contributed \$100,000 to Fresno Metro Ministry's *Food to Share* program. The program operates a fleet of trucks that collect excess food from local farmers, grocers, food processors and school districts. The collected food, including fresh produce and packaged food items, is redistributed to low-income neighborhoods classified as "food deserts" due to lack of accessible grocery stores.

Prior to COVID-19, *Food to Share* distributed an estimated 1 million pounds of food. CMC's contribution will assist the program in adding a significant increase in food collection sites to address the community's pressing need. Fresno Metro Ministry partnerships have secured food distributions to several rural communities including Mendota, San Joaquin, Biola, Orange Cove, Parlier and others.

Fresno Economic Opportunities Commission

In August 2018, CMC provided \$25,000 to Fresno Economic Opportunity Commission for its *Food Express Bus* serving healthy meals to low-income children during school breaks. The bus provides meals to children up to the age of 18, who may otherwise go hungry.

During the COVID-19 shutdown between April 2020 and August 2020, the *Food Express Bus* served

nearly 100,000 meals to children in the following southeast and southwest Fresno neighborhoods: Manchester Mall, Cary Park, Kaiser Park, West Fresno Library and Neighborhood Thrift. Working collaboratively, project funders included Valley Children’s Healthcare, Saint Agnes Medical Center and Fresno County Office of Education.

Project SEARCH

CMC proudly serves as a vocational training site for disabled adults through Project SEARCH. The program is a collaboration with Best Buddies, a non-profit organization that helps adults with intellectual and developmental disabilities. Project SEARCH participants receive the experience necessary to find and maintain employment. The program allows participants to learn and work alongside CMC staff in several clinical and non-clinical areas including: NICU, antepartum, postpartum, environmental services, materials management, kitchen and plant operations. In Fiscal Year 2020, CMC hosted 12 Project SEARCH participants. Nine Best Buddy participants gained employment as a result of their experience at CMC—and five currently work at CMC facilities.

Due to COVID-19 hospital visitor restrictions, Project SEARCH participants were able to train at CMC facilities up until mid-March 2020. The program is tentatively scheduled to resume sometime in calendar year 2021.

Patient Financial Navigator Program

In May 2019, Community Cancer Institute (CCI) hired a Financial Counselor to help cancer patients and families needing support to navigate the costs of care. The Financial Counselor meets with patients, reviews their treatment plan and provides a guide to help patients ensure they can receive the care they need without worrying about finances. The counselor helps patients understand their insurance coverage and also links patients to community financial and social resources. In Fiscal Year 2020, CCI’s Financial Counselor provided assistance to nearly 500 patients; more than 50 of those receiving aid were covered by Medi-Cal. Financial assistance is provided in both English and Spanish.

Health Need 7 – Substance Abuse and Tobacco

Bridge Opioid Treatment Program

CRMC is one of nearly 50 clinical sites in the state of California participating in the opioid treatment *Bridge* program. The medication for the evidence-based addiction treatment is accessible 24 hours a day, 7 days a week at CRMC’s emergency department. The *Bridge* program provides individuals with Buprenorphine medication to suppress cravings and withdrawal symptoms.

The treatment provides patients with immediate attention in the emergency room setting, rather than being referred to a rehabilitation center, which in many cases can take weeks or months. In Fiscal Year 2020, the program provided treatment to 20-30 patients a month. Since the program’s launch, more than 300 patients have received treatment.

Health Need 8 – Violence and Injury Prevention

Trauma Prevention Program

As the only Level 1 trauma center and comprehensive burn center between Los Angeles and Sacramento, CRMC's skilled and dedicated physicians and staff provide trauma services to patients well beyond the hospital's typical service area.

Since 2015, CRMC has employed a full-time injury prevention specialist. The prevention specialist identifies the most common causes of injury and death seen at the trauma center by using the hospital's trauma registry. The injury specialist identifies the top injury causes and provides community-wide prevention information and support. Through education and environmental modification, the specialist works to reduce the incidence of injury, disability and death due to trauma. In Fiscal Year 2020, CRMC's trauma program led the following outreach and education programs:

- **School Outreach-** CRMC's trauma and injury prevention program specialist partners with law enforcement and other community entities to educate teens on the dangers of distracted and reckless driving, bicycle and pedestrian safety, concussion awareness and drowning prevention. Through a variety of curriculum and programs including *Impact Teen Drivers* and *Reality Tour*, the trauma prevention specialist provided education to nearly 150 middle and high school students from Fresno area schools.
- **Car Seat Safety Checks-** CRMC provided group and individual car seat safety and education trainings throughout the year. These trainings are provided to parents in both English and Spanish. Safety education trainings included proper car seat installation and child placement related to legal age and weight requirements. CRMC's trauma prevention team held a public event and distributed nearly a dozen car seats to low-income families. Due to COVID-19 restrictions, some planned community-wide events were cancelled.
- **Older Adult Driving Safety-** In response to increased vehicular accidents among older adults, CRMC's trauma prevention team offered no-cost driver safety classes. CRMC hosted AARP's free *Smart Driving* class in October 2019. Nearly 20 older adults and their caregivers attended.

Sexual Assault Forensic Examiners (SAFE) Program

The CRMC Emergency Department operates the Sexual Assault Forensic Examiners (SAFE) program. SAFE provides round-the-clock, in-hospital testing and examinations for sexual assault and rape victims. Specially-trained nurses collect, preserve and securely store evidence obtained from adult and pediatric victims and suspects. CRMC nurses also serve as expert court witnesses.

In conjunction with the Children's Health Center located on CRMC's campus, SAFE staff provide comprehensive follow-up evaluations for child victims of sexual abuse. Program nurses also assist in

connecting victims and families to counseling services. In Fiscal Year 2020, CRMC SAFE nurses provided assistance to 109 patients.

Health Need 9 – Climate and Health

In-Hospital Green Initiatives

CMC’s sustainability team continuously seeks innovative ways to reduce and recycle clinical and non-clinical waste—including paper, sharps, disposable lead wires and cloth towels from operating rooms. The sustainability team is made up of CMC employees who volunteer their time to research and set up programs to make the hospital greener. Participating members come from clinical, quality, materials management, nutrition and other CMC departments.

In Fiscal Year 2020, CMC’s green efforts diverted nearly 452,000 pounds of waste from local landfills through its recycling program. Reclaimed water is also utilized at CCMC for all its landscaping irrigation – recycling an average of 3.5 million gallons of water each month through a collaboration with the City of Clovis. CMC has also increased the number of rechargeable car stations at its facilities by installing 59 new charging stations at CRMC, CCMC and corporate administrative office building parking lots. In total, CMC has 134 clean vehicle charging stations available to the public, employees and physicians, free of charge. CMC’s clean energy efforts are in response to California’s 50 percent renewable energy mandate by 2045.

Personal Protective Equipment (PPE)

CMC’s green hospital efforts during the COVID-19 public health emergency targeted increased hospital waste, specifically increased use of one-time personal protective equipment (PPE). CMC’s waste reduction efforts diverted over 95,000 pounds of PPE from local landfills. The diverted waste was collected from CMC facilities in just four months, from May to August 2020.

Health Need 10 – Cardiovascular Disease/Stroke

Women’s Heart Health Fair

In Fiscal Year 2020, CMC donated \$5,000 to the UCSF Women’s Heart Fair. The annual heart fair offers free health screenings, lectures and prizes and is open to the public. Due to COVID-19 restrictions on public gatherings, the fair scheduled late February 2020 was postponed to Spring 2021.

Health Need 11 – Asthma

Pediatric Asthma Program

CMC's Pulmonary Rehabilitation program provides disease management education and support for parents. A respiratory care practitioner assists parents at a southcentral Fresno clinic, one of the city's most underserved areas. Parents receive two, one-hour sessions with additional education as needed. Patients receive an individualized "Asthma Action Plan," addressing lung physiology, asthma attack symptoms and triggers, effective management strategies and proper medication and inhaler use.

In Fiscal Year 2020, the program served 139 patients and provided Spanish and English health education. In March 2020, the program adopted social distancing and masking protocols in response to COVID-19. Since July 2020, the program offers telehealth visits to patients and families.

Health Need 12 – HIV/AIDS/Sexually Transmitted Infections

Special Services Clinic

CMC serves as grant administrator for the federal Ryan White HIV/AIDS Program providing life-saving care for Central Valley HIV/AIDS patients. CMC partners with Family Health Care Network's (FHCN) Special Services Clinic to provide vital and timely healthcare and case management services for patients and families. FHCN's clinical staff and physicians provide patients with direct medical care and case management while CMC serves as the fiscal and reporting entity. In Fiscal Year 2020, the Special Services Clinic provided care to nearly 1,500 patients with over 9,300 visits under the federal Ryan White grant.

Health Need 13 – Cancer

Cancer Support Groups

CCI hosts several support groups for cancer survivors and their families. The support groups, held in both English and Spanish, are open to all persons touched by cancer, regardless of where they receive cancer care. CCI support groups host cohort cancer and wellbeing support sessions including: women for unity, mindfulness meditation, prostate, brain tumor, breast and head and neck cancer. In Fiscal Year 2020, CCI held 44 in-person support groups. Each support group session runs between one and two hours.

As a result of COVID-19 hospital restrictions, CCI's cancer support groups were moved to a virtual platform. From June to August 2020, CCI hosted 49 support groups both in-person and virtually.

Community Building Activities

CMC recognizes that health and wellbeing cannot be achieved by one sole entity. Positive outcomes in the region's identified health needs require wide-reaching collaboration. CMC joined Valley Children's Healthcare, Saint Agnes Medical Center and Kaiser Permanente, community clinics, health plans, the public health department, local organizations and others to address pressing health issues. CMC participated in several community-wide health initiatives and activities, including:

Fresno Community Health Improvement Partnership (FCHIP)

CMC joined the FCHIP leadership team in January 2017. This steering committee provides guidance and direction for five workgroups that include the Diabetes Collaborative, Fresno Food Security Network, Health Literacy and Empowerment, Land Use and Planning, Trauma and Resilience and the Fresno County Tobacco Coalition.

In May 2020, CMC contributed \$5,000 to support the collaborative work that FCHIP leads in Fresno County, with particular focus on the area's top identified health needs. In addressing those needs, FCHIP's Diabetes Collaborative, Food Security and Trauma and Resilience workgroups have made meaningful advances toward improving the health of vulnerable populations in the county, with particular emphasis in southeast and southwest metropolitan Fresno.

FCHIP Food Security Workgroup

The FCHIP Food Security Workgroup expands access to healthy food through direct community food distributions to a network of 49 non-profit organizations serving low-income residents. These food deliveries are made to metropolitan Fresno areas classified as "food deserts." Families pick up food items either on a weekly or monthly basis at neighborhood churches, community centers, public housing complexes and others. Distributed food includes fresh fruits, vegetables and a variety proteins and staples recovered from schools, grocers, farmers, processors and backyard gleanings.

Cooking Matters classes host between 8-10 residents who learn to cook healthy and affordable dishes from local chefs and nutritionists. Residents taking the classes report increased healthy eating behaviors and confidence in cooking nutritious meals. *Cooking Matters* classes are led in both English and Spanish and taught by Fresno City College and Fresno State dietetics students as well as Fresno County Department of Public Health and Fresno Metro Ministry staff.

Despite being the top agricultural producer in the nation, Fresno is the third highest U.S. city¹⁷ facing food hardship. Many Fresno County communities and rural areas lack access to fresh, healthy and affordable food. With this in mind, FCHIP's Food Security workgroup established the *YoVille Garden Farm* project—a joint community project mainly tended by Latino and African American community members. The community garden, in partnership with the Fresno Housing Authority, is located in a

¹⁷ Data Source: Food Research & Action Center (2018). Average Annual Food Hardship Rate by Metropolitan Statistical Area, 2016-2017. <https://frac.org/wp-content/uploads/food-hardship-july-2018.pdf>

seven-acre lot adjacent to a 69-unit low-income housing complex in southwest Fresno. The garden, opened to the public in October 2019.

YoVille Garden features organic, sustainable and self-sufficient gardening techniques. The grounds contain native hedgerows, fruit trees, a greenhouse, walking paths and composting sites. Located in an economically disadvantaged city area, the *YoVille Garden* is a community gathering and engagement hub. Since its opening, more than 1,100 residents have engaged in garden activities; 62 gardening plots have been established and 14 active gardeners tend the grounds.

FCHIP Trauma and Resilience Workgroup

FCHIP's Trauma and Resilience Workgroup works to create a trauma-informed community to support vulnerable residents who have experienced *Adverse Childhood Experiences (ACEs)*. According to the CDC, ACEs can have negative, long-term impact on health in adulthood, including obesity and detrimental health behaviors such as alcohol and drug abuse.¹⁸ Understanding the root causes of ACEs is the first step towards healing. New research shows that adults who have suffered past trauma can restore their brains and bodies many years after suffering ACEs.

In Fiscal Year 2020, over 900 leaders from local healthcare, K-12, higher education, government, non-profit agencies and residents received the workgroup's Community Resilience Initiative (CRI) trainings. The CRI curriculum is a two-part training focusing on the brain science behind trauma and resilience and prevention strategies addressing trauma's hidden effects.

Fresno Madera Continuum of Care (FMCoC)

FMCoC is a two-county, cross-sector collaborative that identifies and petitions state and federal funding for housing assistance and resources for homeless individuals. Created in 2002, FMCoC partners meet monthly and participants include county social service agencies, Native American, veteran and senior-serving organizations, health care providers, Saint Agnes Medical Center, the Hospital Council, corrections and mental health service providers. The collaborative effort has overseen the local distribution of millions of dollars to assist in emergency and long-term housing for vulnerable individuals, families and veterans.

CMC participates as an FMCoC voting member helping guide program funding for rapid rehousing efforts, emergency shelters and the annual *Point In Time* count – an annual census of homeless individuals. During the COVID-19 pandemic, the FMCoC collaborative secured \$2.5 million from the CARES Act's Emergency Solutions grants. These funds will help local agencies serving homeless individuals and families with rapid rehousing, infection prevention and mitigation efforts, emergency shelter and quarantine lodging assistance.

¹⁸ Adverse Childhood Experiences (ACEs) Vital Signs. <https://www.cdc.gov/vitalsigns/aces/index.html>

VI. Community Health Education and Support

The following inventory of community benefit activities includes educational programs and support provided by physicians, staff and volunteers of CMC.

Chronic Kidney Disease: Dialysis Options

CMC is among the largest providers of dialysis services in the Central Valley, annually serving over 10,000 patient visits. CMC offers dialysis services to all age groups and ethnic backgrounds and provides English and Spanish educational materials. CMC's prime dialysis education program, *Options*, a patient-centered information and support service for individuals with chronic kidney disease. CMC participates in the National Kidney Foundation's Kidney Early Evaluation Program or *KEEP Healthy* community-based initiative to educate the public about kidney health, risk factors and steps to reduce risk.

On November 2019, volunteers and employees from CCMC Dialysis Center and CRMC's Outpatient Dialysis Center teamed up with the National Kidney Foundation, Fresno's Mexican Consulate and Family Health Care Network to inform Latino, Spanish-speaking patients about renal failure risks including diabetes and high blood pressure. Participants received on-site kidney screenings, body mass index, blood pressure checks and kidney health information. The event served 55 participants.

HealthQuest Series

CMC's in-person *HealthQuest* seminars feature physicians and medical experts discussing public interest health topics. *HealthQuest* in-person lectures are held on CCMC and CRMC campuses and are provided to the public at no charge.

In Fiscal Year 2020, CMC hosted six *HealthQuest* lectures on topics related to regional identified health needs. These seminars included: cancer awareness, diabetes prevention and management, heart disease and stroke. On average, *HealthQuest* seminars are attended by 150 participants.

During COVID-19, CMC's *HealthQuest* series moved to an online platform. Since May 2020, *HealthQuest* hosted seven virtual health educational seminars. Topics for *HealthQuest's* online seminars included heart health, asthma and allergies and immune system-boosting simple exercises. On average, *HealthQuest* hosted 159 individuals for the online health class.

MedWatch Today Television Series

In an effort to increase public awareness of timely health topics, CMC produces a weekly television show, *MedWatch Today*. The series features topics that include mental health, pediatric asthma, heart disease, diabetes prevention and management and many others. The show airs Saturdays on NBC 24 and Sundays on CBS 47.

In Fiscal Year 2020, *MedWatch Today* produced and broadcast 30 segments that addressed 9 of the 13 regional identified health needs. A total of 14.1 million households viewed *MedWatch Today*

content in Fiscal Year 2020, with an average of 5,227 households tuning in per episode. Additionally, consumers have viewed more than 4,400 hours of *MedWatch Today* content online as an on-demand video health education resource.

Spanish Health Education Segments

CMC strives to provide timely and relevant health information to Spanish-speaking audiences. CMC produced five educational videos including: gestational diabetes awareness, influenza prevention, swimming safety, and bicycle and pedestrian safety.

In response to COVID, CMC produced several informational Spanish-language videos on proper mask usage and care; social distancing while shopping and domestic violence awareness during shelter-in-place restrictions. All segments were broadcast on our community partners' social media pages and distributed to Central Valley community-serving agencies and organizations via collaborative partner email distribution lists reaching more than 1,000 representatives from local community benefit organizations.

Kerman High Medical ROP

CMC contributed \$7,500 worth of hospital-grade medical equipment to Kerman High School's medical Regional Occupational Program (ROP). Medical equipment provided included: IV poles and pumps, a gurney, EKG and ultra sound machines, surgical equipment, wheelchairs and other items. Kerman High medical pathway instructors use the equipment for hands-on lessons that accompany textbook instruction. Since the addition of the medical equipment, instructors report increased student enrollment in the medical education pathway program. In the 2019-2020 school year, the ROP medical program grew from 22 students to 88 current participants, many from underserved households and English language learners.

Due to COVID-19 school distance learning directives, Kerman medical career instructors recorded instructional videos using the CMC-donated medical equipment. Taped videos included "how-to" lessons on wheelchair and gurney transport, proper patient placement and care using a medical lift and dressing changes. Kerman High instructors teamed-up with Clovis East teachers to collaboratively create the videos. Students from both high schools are now able to view the video lessons as part of their distance-learning curriculum.

Fresno Area College Night

Community Care Health (CCH), a CMC subsidiary and insurance plan, funded Fresno County Superintendent of Schools' annual Fresno Area College Night for 5,000 high school students and parents. General college planning information was provided on topics that included the college admissions process, financial aid and scholarships. Event breakout sessions were available in English, Spanish and Hmong. The free event, held September 2020, was open to high school students, many who are first in their family to attend college.

Central Unified Scholarships

In Fiscal Year 2020, CCH committed to providing scholarship funds for low-income seniors from Central Unified. CCH funding, with that of other community partners, will enable the Foundation for Central Schools to provide six \$2,500 scholarships for low-income students. Scholarships will help students pay for college, vocational or trade school needs.

Pediatric Health Education Fair

CRMC's pediatric health department hosted *Fall-O-Ween*, a free neighborhood-centered fall festival on the hospital's downtown campus. More than 300 parents and children were invited on campus to enjoy music, games, treats and receive bilingual health prevention education on asthma, bicycle and pedestrian safety, burn safety and others. The event targeted southeast and southwest Fresno elementary and middle schools in economically-disadvantaged neighborhoods. Invited schools included Jefferson, Yokomi, Vang Pao, Lowell and Birney elementary schools. The majority of the students that attend these schools are of African American, Latino and Southeast Asian backgrounds.

End-of-the-Year Contributions

CCH funding provided Thanksgiving meals to needy families in partnership with Catholic Charities. As part of Catholic Charities' 10th Annual Turkey Drive, nearly 1,200 low-income families received a turkey holiday meal box in 2019. CCH also funded Catholic Charities' "Adopt a Family" holiday gift program for low-income children and families. The program gifts children jackets, blankets and other winter weather items during its end-of-year festivities.

Volunteer Services

Volunteers are an essential part of CMC's mission to improve the health of those we serve and of our community. At CRMC, 400 volunteers provided nearly 17,600 hours of service to the hospital and our patients before COVID-19 visitor restrictions were imposed in March, suspending volunteer activities. This equated to 14.9 full time employees in Fiscal Year 2020 for the 6.5 months that volunteers were allowed in the hospital.

At CCMC, nearly 260 volunteer chaplains, adults, guild members, youth and student volunteers provided over 13,700 hours of service, equating to an average of 12.3 full time employees during the 6.5 months volunteers were working in the hospital during Fiscal Year 2020.

Our visitor and volunteer restrictions currently remain in effect.

COVID-19 Public Education

CMC led a multi-lingual public education campaign to inform the public on COVID-19 prevention and symptoms. In coordination with Fresno County Department of Public Health, CMC produced multi-platform educational materials including English and Spanish-written online articles and videos. Topics included the importance of proper hand sanitation, social distancing, mask usage, mental health resiliency during shelter in place orders and others. CMC's communications team also designed a series of infographics highlighting best mask usage and social distancing practices to

avoid COVID-19. These infographics were translated into Spanish, Hmong and Punjabi. The COVID-19 educational graphics were distributed to more than 1,000 community leaders from non-profit organizations, public health agencies, health plans and local school districts via FCHIP's list serve and Central Valley Community Foundation's weekly COVID-19 informational call for Valley non-profits.

On-site Blood Drives

During the COVID-19 public health emergency, the Central Valley saw serious declines in local blood supplies. To help increase the availability of blood resources in our region, CMC organized a series of blood drive events on our campuses. In Fiscal Year 2020, CMC hosted three events on the following campuses: Clovis Community Medical Center, Community Regional Medical Center and Fresno Heart & Surgical Hospital. Nearly 130 CMC employees participated in the volunteer blood drives, which produced blood units for distribution throughout the Central Valley region.

Sponsorships, Support and Civic Leadership

As the Valley's leading healthcare institution, we take seriously the responsibility of civic leadership. We are also mindful that those who contribute financial gifts to our organization expect careful and detailed stewardship of those funds. Community contributes to a wide range of community organizations whose work helps extend our care into neighborhoods across the Valley, including:

Alliance for Medical Outreach and Relief
Alzheimer's Association
American Heart Association
American Lung Association
American Cancer Society
Best Buddies (Fresno)
California State University, Fresno
Care Fresno
Catholic Charities Diocese of Fresno
Central California Blood Center
Central California Food Bank
Central California Women's Conference
Central Valley Community Foundation
Central Valley Opioid Safety Coalition
Clinical Pastoral Education of Central California
Every Neighborhood Partnership
Exceptional Parents Unlimited
Foundation for Clovis Unified School District
Fresno Area Hispanic Foundation
Fresno Center for Non-Violence
Fresno Community Health Improvement Partnership (FCHIP)
Fresno County Farm Bureau
Fresno County Office of Education
Fresno Economic Opportunities Commission
Fresno First Step Homes
Fresno Metro Ministry
Fresno Police Chaplaincy
Fresno Rescue Mission
Fresno Rotary "Project Niño"
Hinds Hospice
Susan G. Komen Race for the Cure
Marjaree Mason Center
West Fresno Family Resource Center
Youth Leadership Institute

CMC is proud of its accomplishments to date, but is also mindful of unmet challenges. Community staff and physicians contribute thousands of hours as volunteers for civic, cultural, social justice, religious and health groups, often serving in leadership positions and as mentors.

A partial list of these community-service oriented groups and organizations:

- American Cancer Society
- American Heart Association
- Boy Scouts of America, Troop 257
- California Association of Healthcare Leaders
- California Partnership for the San Joaquin Valley
- California State University Fresno, University Advisory Board
- Camp Sunshine Dreams
- Central California Big Band Dance Society
- Central California Chapter of the Project Management Institute
- Central California Emergency Management Taskforce
- Central California Society for the Prevention of Cruelty to Animals
- Central California Women’s Conference
- Central Valley Latino Leadership Academy
- Central Valley Lioness Lions Club
- Chrysalis House Fresno
- Church of Jesus Christ of Latter-Day Saints, Elders Quorum
- Clovis Chamber of Commerce
- Clovis Unified School District Vaping Workgroup
- Clovis Rotary Club
- Common Threads
- Council of Indian Organizations
- Every Neighborhood Partnership
- Fresno Barrios Unidos
- Fresno Chamber of Commerce
- Fresno Community Health Improvement Partnership (FCHIP)
- Fresno Council for Child Abuse Prevention
- Fresno County Bar Association’s Pro Bono Services
- Fresno County Economic Development Corporation
- Fresno Rescue Mission
- Fresno Rotary Club
- Fresno State Project Management Institute
- Healthcare and Public Health Sector Coordinating Council
- Healthy Communities Access Program (HCAP)
- InfraGard Sacramento Member Alliance
- Leadership Fresno
- Leukemia & Lymphoma Society
- Maddy Institute, California State University, Fresno

- Marjaree Mason Center
- Mayor's Community Advisory Board Panel
- Minas vs. Cancer
- Poverello House
- RAD-AID (Aid to Jamaica and Guyana)
- Sierra Foothill Conservancy
- Valley Teen Ranch

VII. Community Benefit Contributions Fiscal Year 2020

CMC has historically spent more on uncompensated community benefit than all other Fresno-area hospitals combined — in some years, nearly double the combined total of other area hospitals.

In Fiscal Year 2020, CMC had annual operating expenses of approximately \$1.8 billion. Net uncompensated community benefit totaled over \$175 million, or 10% of CMC’s total operating expenses. This figure is also in light of COVID-19, which at times significantly hindered our intended outreach due to mandatory sheltering-in-place orders and a “no visitor” hospital policy still in effect at the time of publication. The single largest unreimbursed cost in the list below — care for Medi-Cal patients — is net of funding from the “provider fee” program, DSH payments and the private hospital fund.

BENEFIT	CONTRIBUTION
UNREIMBURSED COST OF DIRECT MEDICAL CARE FOR THE POOR AND UNDERSERVED	
Charity care	
➤ CMC financial assistance healthcare services to low-income patients	\$12,975,000
Unreimbursed cost of caring for Medi-Cal patients	
➤ unpaid portion of government-funded healthcare coverage	\$114,240,000
MEDICAL EDUCATION	
➤ unreimbursed costs of training medical residents and fellows	\$46,090,000
NURSING EDUCATION	
➤ daily in-service nurse to student education training for professional nursing licensure (20% of total investment reported)	\$905,000
CONTINUING MEDICAL EDUCATION	
➤ costs for continuing physician and allied healthcare professional medical training	\$385,000
COMMUNITY BENEFIT CONTRIBUTIONS & OUTREACH	
➤ direct investments addressing 2019 Community Health Needs Assessment identified regional health needs	\$662,000
TOTAL QUANTIFIABLE COMMUNITY BENEFITS	\$ 175,257,000

VIII. Definition of Terms

Community Benefit

Community Benefit activities provided by non-profit hospitals include all uncompensated or subsidized activities that address local priority health needs.

Community Health Needs Assessment (CHNA)

The [2019 Community Health Needs Assessment](#) is a triennial report conducted in CMC's service area of Fresno, Kings, Madera and Tulare counties. The CHNA is made of primary and secondary data. Primary data includes individual surveys and focus groups targeting vulnerable community group members as well as insights from local public health, healthcare, community organization and agency leads on the region's most pressing health needs. Secondary information includes health status data from county, state and federal agencies. The CHNA identifies the region's most serious health needs. The report is a collaborative effort facilitated by the Hospital Council of Northern and Central California.

Health professions education activities

Educational programs that result in a degree, certificate, or training necessary to be licensed to practice as a health professional, as required by state law, or continuing education necessary to retain state license or certification by a board in the individual's health profession specialty.

Nonprofit (not for-profit)

A nonprofit hospital is considered a charitable organization, conducting business for the benefit of the general public without a profit motive.

Prioritized Health Needs

The top-ranked health needs identified for Fresno, Kings, Madera and Tulare counties as a result of the regional CHNA process.

Tracked Investments

CMC uses CBISA software, an industry-recognized platform, to track direct and indirect community benefit programs and activities.