



ADVENTIST HEALTH  
TULARE

IMPLEMENTATION STRATEGY  
Year Two Update, FY 2024  
Period: 1/1/24- 12/31/24

2024



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# Purpose & Summary

Non-profit health systems, community-based organizations, and public health agencies across the country all share a similar calling: to provide public service to help improve the lives of their community. To live out this calling and responsibility, the Central Valley Network (CVN) comprised of Adventist Health's four hospitals located in Hanford, Tulare, Reedley and Selma conducts a Community Health Needs Assessment (CHNA) every three years, with our most recent report completed in 2022. Part of that process is engaging our community through focus groups, key informant interviews and surveys. Represented and vulnerable populations included: Aging, civic government and leadership, community-based organizations focusing on healthcare consumer, law enforcement, low-income, medically under-served, minority populations, substance abuse, transportation and unhoused populations.

Now that our communities' voices, stories, and priority areas are reflected in the CHNA, our next step is to complete a Community Health Improvement Plan (CHIP), or as we refer to it, a Community Health Implementation Strategy (CHIS).

The CHIS consists of a long-term community health improvement plan that strategically implements solutions and programs to address our health needs identified in the CHNA. Together with the Adventist Health Well-Being team, local public health officials, community-based organizations, medical providers, students, parents, and members of selected under-served, low-income, and minority populations, the CVN intentionally developed a strategic plan to address the needs of our community.

In this Implementation Strategy, Year Two Update, FY 2024 also known as the Community Health Plan Update, FY 2024 you will find strategies, tactics, and partnerships you will find strategies, tactics, and partnerships that address the following health needs identified in the 2022 CVN CHNA:

**Financial Stability**

**Food Security**

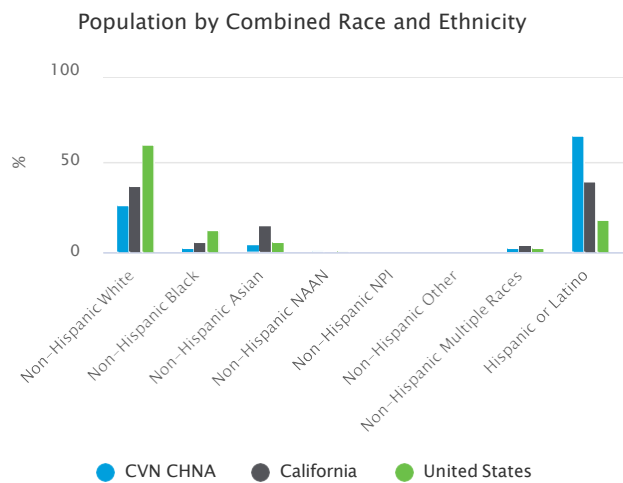
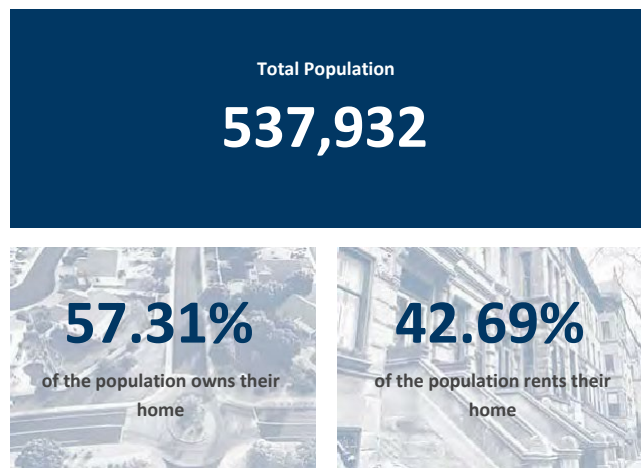
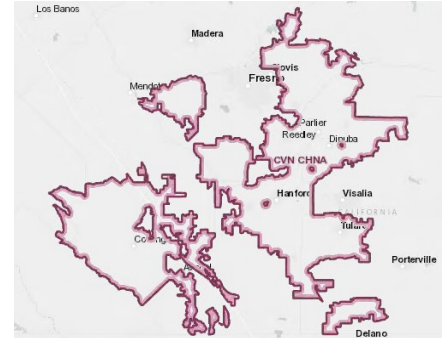
**Mental Health**

# Who We Serve

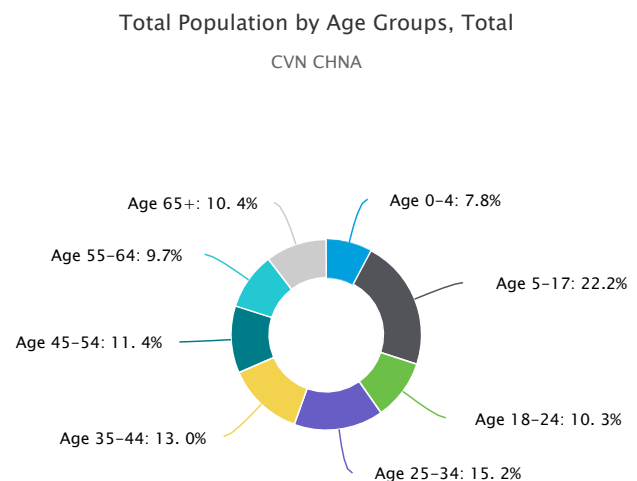
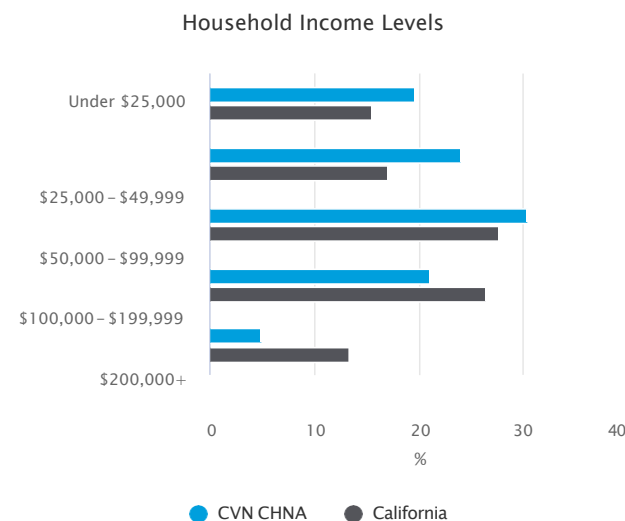
## DEMOGRAPHIC PROFILE

The following zip codes represent Adventist Health Central Valley Network's primary service area (PSA), accounting for 75% of hospital discharges. Additionally, we took a collaborative approach and expanded our PSA by inviting Steering Committee members to include the zip codes of those they serve.

The CVN CHNA market has a total population of 537,932 (based on the 2020 Decennial Census). The largest city in the service area is Tulare, with a population of 59,312. The service area is comprised of the following zip codes: 93219, 93648, 93625, 93646, 93609, 93647, 93631, 93657, 93245, 93234, 93239, 93654, 93204, 93618, 93230, 93615, 93662, 93212, 93630, 93619, 93210, 93656, 93274.



Note: NAAN = Native American or Alaska Native, NPI = Native Hawaiian or Pacific Islander.



# About Us

## Adventist Health Tulare

Located at the foot of the Sierra Nevada mountains and in the heart of the San Joaquin Valley, Tulare is a small agricultural town. Serving the town and the surrounding rural communities of Tulare County since 1971, Adventist Health Tulare is a 101-bed hospital dedicated to providing the highest level of clinical quality and safety while offering a vast range of services to those in need.



## Adventist Health

Adventist Health is a faith-inspired, nonprofit integrated health system serving more than 80 communities on the West Coast and Hawaii. Founded on Adventist heritage and values, Adventist Health provides care in hospitals, clinics, home care agencies, hospice agencies and joint-venture retirement centers in both rural and urban communities. Our compassionate and talented team of 34,000 includes associates, medical staff physicians, allied health professionals and volunteers driven in pursuit of one mission: living God's love by inspiring health, wholeness and hope. Together, we are transforming the American healthcare experience with an innovative, yet timeless, whole-person focus on physical, mental, spiritual and social healing to support community well-being.

## Adventist Health's Approach to CHNA & CHIS

Adventist Health prioritizes well-being in the communities we serve across our system. We use an intentional, community centered approach when creating our hospital CHNA's to understand the health needs of each community. After the completion of the community assessment process, we address health needs such as mental health, access to care, health risk behaviors, and others through the creation and execution of a Community Health Implementation Strategy (CHIS) for each of our hospitals and their communities.

The following pages highlight the key findings the CVN CHNA Steering Committee identified as their top priority health needs, or as we refer to them in this report, their 'High Priority Needs'. The High Priority Needs are addressed in the Community Health Implementation Strategy and are

reported on yearly basis through the annual community health plan update. This is year two of a three-year strategy to improve the health our community. We invite you to learn about the actions, activities and programs that have been implemented in 2024.

The background of the slide is a solid blue color. Overlaid on this background is a faint, light-colored image of several hands of different skin tones cupping a heart shape in the center. The hands are positioned around the heart, with fingers pointing outwards, creating a sense of care and support.

# Action Plan for Addressing High Priority Needs

The following pages reflect the goals, strategies, actions, and resources that Adventist Health Tulare provided in 2024 to address each selected High Priority Need.

## ADDRESSING HIGH PRIORITY: Financial Stability

<b>GOAL</b>	Advocate for and collaborate with internal and external partners to identify community members experiencing poverty and connect them to support services to lessen financial burden.
<b>Strategy 1:</b>	Partner with external partners to provide financial literacy programs.
<b>Action 1: Program/Activity/Tactic/Policy</b>	
<ul style="list-style-type: none"><li>Introduce Valley Strong Bank to School districts and other community partners to share their financial literacy program.</li><li>Create partnerships with other banks to identify educational needs such as loan acquirement, business plans, etc.</li></ul>	
<b>FY 2024 YEAR TWO</b>	
Expand program in other communities.	
<b>Strategy 2:</b>	Provide space to collaborate with external partners to provide resources for the community.
<b>Action 2: Program/Activity/Tactic/Policy</b>	
Coordinate and socialize a resource center with external partners. Open a resource center in Tulare utilizing space allocated.	
<b>FY 2024 YEAR TWO</b>	
Expand services and increase community involvement.	
<b>COMMUNITY IMPACT Financial Stability SUMMARY</b>	
<p>In August 2024, Adventist Health held a Back-to-School Wellness Fair at a Tulare clinic and provided several community resources including financial literacy documents, free medical and dental exams and provided each student with a free backpack and haircut. Over 200 participants attended to receive these services.</p> <p>Student athletes in Tulare County were offered free sports physicals at 3 events organized by Adventist Health. Schools require a sports physical for student athletes of all ages in order to determine a student's medical eligibility to play on a sports team. Sports physicals include a basic medical screening that checks a student's height and weight, blood pressure and vision. Physicals usually take 30-45 minutes, and each student received a "swag bag" that included a water bottle and school supplies. These free sports physicals address issues with access to care in Tulare where 61.12% live in a population affected by a health professional shortage area as well as the childhood poverty rate at 22.61% as compared to the national childhood poverty rate of 16.66%.</p> <p>Salt &amp; Light is an organization that addresses homelessness in Tulare County, providing case management services, permanent housing in a 75-home neighborhood built specifically for their neighbors, and other resources to help transition back into the workforce. Adventist Health has partnered with Salt &amp; Light to provide medical care via Mobile Care clinic monthly. Associates donated presents to the neighbors in our yearly adopt a family program, providing 52 families with gifts they wouldn't be able to afford on their own.</p> <p>Adventist Health Tulare partnered with Parallon to assist community members in the enrollment and approval process for individual or family medical insurance coverage.</p>	

**ADDRESSING HIGH PRIORITY: Food Security**

<b>GOAL</b>	Strive to give access to current food distribution programs to the community identified by clinical screenings.
<b>Strategy 1:</b>	Increase clinical screenings to identify patients in need of current food distribution programs.
<b>Action 1: Program/Activity/Tactic/Policy</b>	
<ul style="list-style-type: none"> <li>Build relationships with external partners who already have an established distribution program.</li> <li>Increase screenings for food insecurities at clinical visits.</li> </ul>	
<b>FY 2024 YEAR TWO</b>	
Build on workflow to create awareness of all programs available to the community and implement in 50% of our clinics.	
<b>Strategy 2:</b>	Expand food program in all clinics (such as Nutrible, food banks).
<b>Action 2: Program/Activity/Tactic/Policy</b>	
Implement food programs to aid vulnerable patients, such as Nutrible. Expand to all clinics serving lower income families.	
Expand food program in the clinics as available	
<b>COMMUNITY IMPACT Food Security SUMMARY:</b>	
<p>Adventist Health has created a list of all food distribution locations and dates to provide for any patient who is identified in need of food security.</p> <p>Adventist Health Clinics are continuing a standard of practice to evaluate patients to determine food insecurity. Once identified, a list of resources is provided to the patient.</p> <p>The Care Coordination team identifies patients who enter through the Adventist Health emergency department or is an inpatient that is in need of multiple social determinants of health. Community Health Workers are assigned the patient to assist with follow up of care and provide any resources that may be needed to sustain the wellbeing of the patient, including food resources, transportation, referral assistance, and assistance with the removal of general access barriers. In 2024, the average workload per staff member per month (Hanford only) Care Transitions Coordinators:</p> <ul style="list-style-type: none"> <li>756 average patient cases</li> <li>165 minutes per patient between inpatient and outpatient work</li> <li>1,200 calls per day/ month</li> </ul>	
<b>STRATEGY THAT CHANGED DURING THE YEAR:</b>	
It was determined that Nutrible was not feasible as a food distributor due to varying factors.	

[ADVENTISTHEALTH:INTERNAL]



## ADDRESSING HIGH PRIORITY: Mental Health

<b>GOAL</b>	Provide mental health awareness and access to our communities.
<b>Strategy 1:</b>	Work with internal and external stakeholders to provide educational awareness.
<b>Actions 1: Program/Activity/Tactic/Policy</b>	
<ul style="list-style-type: none"><li>Create a Behavioral Health Collaborative between Kings, Tulare and Fresno County Behavioral Health Departments. Roll out initiatives created by the collaborative to provide awareness amongst adults and children.</li><li>Utilizing current programs such as: Kings County Mobile Crisis Unit</li></ul>	
<b>FY 2024 YEAR TWO</b>	
Implement strategies and programs identified by collaborative.	

<b>Strategy 2:</b>	Create awareness and increase Adventist Behavioral Health virtual visits utilizing the Bridge program to help identify patients seen through emergency departments.
<b>Actions 2: Program/Activity/Tactic/Policy</b>	
Provide educational materials to providers about Behavioral Health Virtual Care services. Increase knowledge and awareness about virtual visits.	
<b>FY 2024 YEAR TWO</b>	
Implement strategy in clinics and increase virtual visits.	

<b>COMMUNITY IMPACT SUMMARY Mental Health</b>	
Behavioral Health Collaborative continues to meet quarterly. Continues to address concerns over access to care and recruitment of providers.	
Working specifically with Champions Recovery organization to focus on substance abuse and mental health, utilizing their programs and resources. Adventist Health Substance abuse navigators and Community Health workers work closely with champions case management to align their services with our patients.	
Substance abuse navigators are active in the community, providing education on prevention of abuse and resources for additional help.	
<b>ADVENTIST HEALTH COMMUNITY IMPACT IN THE NEWS:</b>	
We are increasing healthcare access in Central California by adding a new mobile care unit to provide various services, including health screenings, preventive health visits, immunizations, and school and sports physicals. Our goal is to expand our fleet to meet the needs of community members in our area who experience homelessness, transportation barriers, food insecurity, and other social health issues.	
"Many would not have healthcare if it weren't for the commitment of this team and the support of so many community partners of taking healthcare across Central California," Jason Wells, president of Adventist Health's Central California Network, said. "It works to build a beautiful clinic, and people will come, but we have also learned that taking the clinic to the people has been a tremendous blessing to many communities."	
Thank you to Bank of America, Leprino Foods Company Foundation, Facility Designs, Tulare Hospital Community Health Foundation, Adventist Health Volunteers, and the Mackey Family for helping make this unit possible.	
<a href="https://vimeo.com/1015467697?share=copy">https://vimeo.com/1015467697?share=copy</a>	
2024 Community Impact Additional Narrative	
The Adventist Health Tulare Family Medicine Residency program is 36 months in duration and follows a block rotation	

schedule. Each year has 13 four-week blocks of “traditional” rotations, with longitudinal experiences throughout the training in Health Systems Management/Q1 (3 years), and Behavioral Health (3 years). Our residency clinic also is part of the longitudinal experience that crosses all three years of training. In 2024, the Family Residency program graduated six residents. We are pleased to announce that three Tulare Family Medicine Residency program graduates stayed in the Central Valley to work in Adventist Health's rural clinic. The other three will provide care in Selma, Riverside, and North Carolina.

# Significant Identified Health Needs

The Adventist Health Community Well-Being team and community partners collectively reviewed all relevant significant health needs identified through the CHNA process. Using a community health framework developed for this purpose, 12 significant health needs were initially considered. The list of significant needs are as follows:

- Access to Care
- Community Safety
- Community Vitality
- Education
- Environment & Infrastructure
- Financial Stability
- Food Security
- Health Conditions
- Health Risk Behaviors
- Housing
- Inclusion & Equity
- Mental Health

From this group of 12, several high priority health needs were established for CVN. High priority health needs were chosen as they had demonstrated the greatest need based on severity and prevalence, intentional alignment around common goals, feasibility of potential interventions, and opportunities to maximize available resources over a three-year period.

Using the criteria mentioned above, we were able to determine which needs were high priority, as compared to those that were significant needs. The High Priority Needs are the focus of the implementation strategy and this accompanying Community Health Plan Update, 2024. The remaining significant health needs are not addressed directly but will likely benefit from the collective efforts defined in this report.

TABLE OF SIGNIFICANT IDENTIFIED HEALTH NEEDS

<b>Financial Stability</b>
<b>Food Security</b>
<b>Mental Health</b>
<b>Lower Priority Needs that will not be addressed directly by Adventist Health Tulare due to limited resources, expertise and feasibility of viable interventions</b>
Housing
Health Risk Behaviors
Health Risk Condition
Access to Care
Environment & Infrastructure
Inclusion and Equity
COVID
Education
Community Vitality
Community Safety



Scan the QR code for the full Secondary Data Report





## Community Health Financial Assistance for Medically Necessary Care Commitment

Adventist Health understands that community members may experience barriers in paying for the care they need. That is why we are committed to providing financial assistance to those who may need support in paying their medical expense(s).

Community members can find out if they qualify for financial aid in paying medical bills by completing a financial assistance application. Applications can be filled out at the time care is received or after the bill has been administered. To access the financial assistance policy for more information or contact a financial assistant counselor, please visit us at: [Adventist Health - Help Paying Your Bill](#).





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Thank you for reviewing our Implementation Strategy Year Two Update, FY 2024.  
We are proud to serve our local community and are committed to making it a healthier place for all.  
To provide feedback on this community benefit report or other reports referenced, please email [community.benefit@ah.org](mailto:community.benefit@ah.org). You may also request a copy free of charge.

To review this report as well as our most recent Community Health Needs Assessment and Community Health Implementation Strategy, please visit:

<https://www.adventisthealth.org/central-valley/about-us/community-benefit/> or  
<https://www.adventisthealth.org/about-us/community-benefit/>