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EXECUTIVE SUMMARY

Mission Hospital has a lengthy history of community service to the residents of south Orange County. As a member of the St. Joseph Health System, Mission Hospital is committed to improving the health status and quality of life of the people it serves. The values of Dignity, Excellence, Service, and Justice are the guiding principles which help to direct the mission of the hospital, and have compelled the Sisters of St. Joseph of Orange and all of their sponsored ministries to dedicate resources to the care of the medically underserved, and to advocate for the alleviation of conditions which limit access to basic health services. Policies have been established which mandate periodic assessments of the health needs of the poor and vulnerable. A specific percentage of net income is allocated to outreach programs to address specific unmet health needs, separate from the ordinary vehicle of acute health care delivery. In FY 11, Mission hospital provided a total of $38,600,000 in community benefit investment, an 18% increase from the prior year. Total dollars of unreimbursed cost to Medicare was $46,411,000 (representing a 41% increase from FY 10). In addition, Mission Hospital provided $5,786,000 in charity care to 6,787 persons representing 8,922 encounters during FY 11. (A 4.7% increase in expenses and a 246% increase in persons served from the previous year).

Mission Hospital provides south Orange County communities with access to advanced care and advanced caring through two convenient locations, Mission Viejo and Laguna Beach. As a not-for-profit, Mission Hospital has been serving the greater needs of the community for nearly 40 years, improving the quality of life in the communities it serves. Mission Hospital in Mission Viejo is an acute care, full-service facility that houses the region’s designated trauma center, one of only three in the county. A complete array of top-quality healthcare services are offered including 24-hour emergency care; Mission Imaging Center offering the most advanced diagnostic care, Mission Heart Center providing cardiac rehabilitation and chest pain center; Mission Stroke Center, providing the region’s most comprehensive and advanced neurological care; Mission Maternity Center including special care for high risk pregnancy; and Mission Women’s Wellness Center offering comprehensive breast, heart and pelvic care. Mission Hospital also offers the highest level of care in orthopedics, rehabilitation, cancer, spine and vascular services. Mission Hospital Laguna Beach’s healthcare services include 24-hour emergency, intensive and medical-surgical care as well as behavioral health and chemical and pain medication dependency treatment.

The hospital has a medical staff of 795 physicians representing 50 specialties and sub-specialties. Currently there are more than 2,700 employees and over 800 volunteers. As the largest medical center in south Orange County, licensed for 552 beds, Mission Hospital is fully accredited by The Joint Commission. Since 1980, the hospital has housed the region’s designated trauma center that served 855 patients this past fiscal year.

Mission Hospital’s full-service facilities provide quality medical care to all residents of south Orange County. Mission Hospital is twice a recipient of the distinguished Ernest A. Codman Award for excellence in quality healthcare presented by The Joint Commission for our Traumatic Brain Injury Protocol and Rapid Response Nursing Team.
Mission Hospital provides south Orange County communities with access to advanced care and advanced caring through two convenient locations, Mission Viejo and Laguna Beach. The hospital’s service area extends from the junction of the 405 and 5 freeways in the north to Camp Pendleton in the south. Geographically, South County is bordered by the Pacific Ocean to the west, the Santa Ana Mountains to the north and east, and the marine base Camp Pendleton to the south. While our service area contains more than 14 cities and unincorporated areas, the Community Benefit Service Area is specifically targeted toward the communities with the greatest number of vulnerable residents. During the 2011 Health Needs Assessment process, the areas chosen for focus in the FY12-14 Community Benefit Plan include: San Clemente, San Juan Capistrano, Laguna Beach, and Lake Forest.

Summary of FY 12 – FY 14 Community Benefit Priorities

In spring 2011, we initiated our Health Needs Assessment process to identify and prioritize our upcoming 3-year Community Benefit Plan. This process was multi-faceted and included a wide variety of stakeholders. We engaged local residents via telephone survey as well as in focus groups, local service providers from a cross-section of disciplines provided their perspectives on the greatest needs in the community, and our ministry’s Community Benefit Committee was highly engaged throughout the process providing oversight and leadership in establishing limits and priorities based on changing resources. In summary, the four areas of focus for Mission Hospital’s FY 12 – FY 14 Community Benefit Plan will be: Affordable Homes, Childhood Obesity, Depression, and Youth Alcohol & Substance Use Prevention.

St. Joseph Health, Mission Hospital anticipates the strategies may change and therefore, a flexible approach is best suited for the development of its response to the St. Joseph Health, Mission Hospital CHNA. For example, certain community health needs may become more pronounced and require changes to the initiatives identified by the St. Joseph Health, Mission Hospital in the CB Plan/Implementation Strategy.
MISSION, VISION AND VALUES

Our Mission
To extend the healing ministry of Jesus in the tradition of the Sisters of St. Joseph of Orange by continually improving the health and quality of life of people in the communities we serve.

Our Vision
We bring people together to provide compassionate care, promote health improvement and create healthy communities.

Our Values
The four core values of St. Joseph Health -- Service, Excellence, Dignity and Justice -- are the guiding principles for all we do, shaping our interactions with those whom we are privileged to serve.

INTRODUCTION – WHO WE ARE AND WHY WE EXIST

Mission Hospital has a lengthy history of community service to the residents of south Orange County. As a member of the St. Joseph Health, Mission Hospital is committed to improving the health status and quality of life of the people it serves. The values of Dignity, Excellence, Service, and Justice are the guiding principles which help to direct the mission of the hospital, and have compelled the Sisters of St. Joseph of Orange and all of their sponsored ministries to dedicate resources to the care of the medically underserved, and to advocate for the alleviation of conditions which limit access to basic health services. Policies have been established which mandate periodic assessments of the health needs of the poor and vulnerable. A specific percentage of net income is allocated to outreach programs to address specific unmet health needs, separate from the ordinary vehicle of acute health care delivery.

ORGANIZATIONAL COMMITMENT

Community Benefit Governance and Management Structure

Mission Hospital demonstrates organizational commitment to the community benefit process through the allocation of staff, financial resources, participation and collaboration. The Community Benefit Committee was engaged in the FY 12- FY 14 planning process in identifying targeted cities and prioritization of programs. This committee has representation of Mission Hospital’s Executive Team via the CEO, Chief Financial Officer, and Vice President of Mission Integration.

Full engagement of the Hospital’s Community Benefit Committee occurred in the review of the 2011 health needs assessment data and committee members actively participated in the prioritization of the initiatives our ministry would dedicate resources based upon feedback from survey data, local focus groups and partners. Together, we identified needs to impact the health and quality of life for residents having the greatest disproportionate unmet needs in south Orange County.

Mission Hospital maintains a Community Benefit Committee as a sub-committee of the ministry’s Board of Trustees in order to oversee and support community benefit issues. In FY07 the Mission Hospital Community Benefit Bylaw and Charter were updated. Specific responsibilities of the Community Benefit Committee include but are not limited to:
1. **Budgeting Decisions**: Review and recommend to the Board of Trustees approval of budget development and disbursement of funds including annually the Community Benefit Budget, which represents an annual allocation of 1.5% of hospital operating expenses, and the Budget Philosophy Analysis, which includes Care for the Poor funds. Additionally, identify potential funding sources and partnerships for community benefit programs.

2. **Health Needs Assessment**: Provide direction and input to the health needs assessment process, conducted at a minimum of every three years.

3. **Geographic/Population Targeting**: Review and approve Mission Hospital’s Community Benefit plan to address the needs of the medically underserved and to identify and respond to the disproportionate unmet health needs of the community.

4. **Program Direction**: Provide direction of all policies, programs and activities that benefit the medically underserved and improve the health status and quality of life of residents in the communities served by the ministry.

5. **Program Content/Design**: Review, approve, and recommend overall program content and design in which Community Benefit/Care for the Poor Funds would be allocated, assuring inclusion and engagement of diverse stakeholders throughout the process.

6. **Program Continuation/Termination**: Review at least annually all Community Benefit programming and make recommendations for continuation or termination based on program outcomes.

7. **Advocacy**: Assist in identification of key local issues for which advocacy efforts will be undertaken and cooperation with advocacy priorities and efforts identified by St. Joseph Health System.

8. **Accountability**: Provide a verbal and written report to the Board of Trustees on at least an annual basis.

9. **Fund Development**: Identify potential funding sources and partnerships for community benefit programs. Provide letters of support or introduction as appropriate.

**PLANNING FOR THE UNINSURED AND UNDERINSURED**

Our mission is to provide quality care to all our patients, regardless of ability to pay. We believe that no one should delay seeking needed medical care because they lack health insurance. That is why St. Joseph Health, Mission Hospital has a **Patient Financial Assistance Program** that provides free or discounted services to eligible patients.

Our Patient Financial Assistance Program helps make our services available to everyone in our community. This includes people who don’t have health insurance and can’t pay their hospital bill and patients who do have insurance but are unable to pay the portion of their bill that insurance doesn’t cover. In some cases, eligible patients may not be required to pay for services; in others, they may be asked to make partial payment.
COMMUNITY:
DEFINITION OF THE COMMUNITY BENEFIT SERVICE AREA

Mission Hospital provides south Orange County communities with access to advanced care and advanced caring through two convenient locations, Mission Viejo and Laguna Beach. The hospital’s service area extends from the junction of the 405 and 5 freeways in the north to Camp Pendleton in the south. Geographically, South County is bordered by the Pacific Ocean to the west, the Santa Ana Mountains to the north and east, and the marine base Camp Pendleton to the south. Our Primary Service Area includes the cities of Mission Viejo, Laguna Beach, Laguna Niguel, San Juan Capistrano, San Clemente, Rancho Santa Margarita, Lake Forest, Laguna Hills, Dana Point Ladera Ranch Trabuco Canyon, Capistrano Beach and Aliso Viejo. This includes a population of approximately 623,000 people, an increase of 4% from the prior assessment. Mission Hospital’s Secondary Service area includes Laguna Woods, Irvine, Foothill Ranch and Silverado. South Orange County is a relatively affluent community with a median household income of $92,124 compared to the Orange County median household income of $58,605 (US Census Quick Facts). The average household size is 2.70 compared to the Orange County wide household size of 3.00.

Demographically, the area is primarily Caucasian (78%), with the Hispanic population growing to 19.2%.

Community Benefit is characterized as programs or activities that promote health and healing in response to identified community needs. In order to accurately define community need, we are using two tools provided by St. Joseph Health System. The first tool, The Community Need Index (CNI) was developed by Dignity Health and Solucient (an information products company). CNI aggregates five socioeconomic indicators that contribute to health disparity (also known as barriers). Barriers include: Income; elder poverty, child poverty and single parent poverty; Culture, non-Caucasian limited English;
Education, % population without HS diploma; Insurance, unemployed and uninsured; and Housing, renting percentage.

CNI demonstrates need at the zip-code level where each zip is assigned a score from 1 (low need) to 5 (high need) for each barrier. For barriers with more than one measure, the average of the measures is used as the barrier score. Once each zip code is assigned a score from 1 to 5 for each of the five barriers, the average score is calculated to yield the CNI. See Supplement 1 for details on the Mission Hospital Community Profile.

Color-Coded Maps
- **Red- Highest Need** (CNI scores: 4.2-5)
- **Pink- High Need** (CNI scores: 3.4-4.1)
- **Yellow- Average Need** (CNI scores: 2.6-3.3)
- **Light Green- Less Need** (CNI Scores: 1.8-2.5)
- **Dark Green- Least Need** (CNI Scores: 1-1.7)

The second tool, Intercity Hardship Index (IHI) was developed by the Urban & Metropolitan Studies Program at the Nelson A. Rockefeller Institute of Government. IHI aggregates six socioeconomic indicators that contribute to health disparity (at the block group level). Indicators include: Income level, per capita Income; Crowded Housing, % of households with 7+ people; Unemployment, % of those 16 and over without employment; Education, % of those 25 and over without a HS diploma; Poverty, % of people living below FPL; and Dependency, % of the population under 18 years and over 64 years. Supplement 1 attached includes detailed community maps at the block group level based on the IHI indicators.

In general, Mission Hospital's primary and secondary service area reflects a high degree of health and quality of life. However, isolated areas of need have been identified in five cities: San Clemente, San Juan Capistrano, Dana Point, Laguna Beach, and Lake Forest.

Although needs were identified in all of these geographic areas, based on Mission Hospital resources and community partnerships. In addition, it is recognized that in order to make significant impact on
addressing unmet needs at the end of the three-year plan, a decision was made to primarily focus on the cities of San Clemente, San Juan Capistrano, Laguna Beach and Lake Forest. This decision was made in partnership with Community Benefit Department Staff, the hospital Executive Team and the Community Benefit Committee.

COMMUNITY NEEDS & ASSETS ASSESSMENT PROCESS AND RESULTS

Summary of Community Needs Assessment Process and Results

From January – May 2011, Mission Hospital conducted its Community Health Needs Assessment in the cities of San Clemente, San Juan Capistrano and Lake Forest (Laguna Beach needs assessment was conducted in 2010 just after purchasing South Coast Medical Center in July 2009). We have a six-step process in conducting our needs assessment and creating the strategic plans that respond to the community needs. The first three steps are described below:

**Community Needs Assessment**

Survey: conducted by Professional Research Consultants (PRC), a third party consulting agency with expertise in public health research, this telephone survey consisted of 146 questions focused on health issues such as general health, chronic disease, injury and violence, health risks, preventive care, access to healthcare services and broad community issues. The survey is modeled after the Centers for Disease Control’s (CDC) Behavioral Risk Factor Surveillance System, which enables us to benchmark our results to statewide and national results. 919 surveys were conducted in each of the three targeted cities and were demographically representative of each of the communities. Validity of results is at a 95% confidence level (and 95% when looking at city-specific data).

Key Stakeholder Panels:

Two panels of key stakeholders were held in San Clemente and San Juan Capistrano to obtain input from local service providers from a cross-section of disciplines who provide services to local residents. 40 people participated in these two panels and representation included the medical field, education, faith-based groups, local resident leaders, non-profit agencies and county-funded programs.

Resident Forums:

Once the PRC surveys were complete, six community forums were conducted with residents in the cities of San Juan Capistrano, San Clemente, and Lake Forest. There were a total of 63 participants across all forums, with each forum ranging in size from 2 to 21 and averaging 10 participants. The majority of participants were women (n = 54). Participants were all adults, mainly residents and a few stakeholders (e.g., service providers, city employees, and hospital employees). The English language forums included mostly stakeholders and to a lesser extent included residents, while the Spanish language forums included mostly residents. Each forum lasted about one and a half hours. Participants identified 25
priority issues. The results aggregated across the forums indicate that the four priority health and quality of life issues perceived by the participants are as follows:

1. Obesity
2. Lack of health insurance
3. Stress and anxiety
4. Access to affordable homes

Other health and quality of life issues included cardiovascular risk, dental services, alcohol and substance abuse, and job training for youth. There were similarities among all forums, such as the perception that the role of economic hardship contributes to poor health and quality of life. There was a notable difference between the English language and Spanish language forums, however, in that the Spanish language forum participants believed unauthorized immigration status is a determinant to health disparity and quality of life.

For the full report, please visit our website at www.mission4health.com
### Identification and Selection of DUHN Communities

#### DUHN Group and Key Community Needs and Assets Summary Table

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<thead>
<tr>
<th>DUHN Population Group or Community</th>
<th>Key Community Needs</th>
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| Residents with incomes under 300% of Federal Poverty Level (across all three cities) | 27% report chronic depression (vs. 15% general population)  
Diabetes rates higher  
Ability to obtain fresh fruits/vegetables at an affordable price (45% vs. 7%)  
Higher rates of overweight/obesity  
Less leisure time (21% vs. 10%)  
Lack of health insurance (40% vs. 10%)  
65% have usual source of primary care (vs. 85%)  
66% Housing >1 family in one home compared to general pop  
23% have no education beyond high school (vs. 10%)  
46% have not achieved their educational/career goals  
Only 61% have educational goals for their child to include college (a 30% difference compared to general pop) |
| San Juan Capistrano high-need neighborhoods | Higher rates of obesity (30% vs. 14% general pop)  
Transportation a significant barrier (15% vs. 4% general pop)  
Usual source of primary care much lower (51% vs. 85% general pop)  
Availability of fresh produce at an affordable price  
Experienced symptoms of chronic depression (27% vs. 12% general pop) |
| San Clemente high-need neighborhoods | Higher skin cancer rates  
Significantly higher rates of domestic violence (15% vs. 7% general pop)  
Transportation a significant barrier  
36% share housing costs (vs. 10% general pop)  
Higher rates of binge drinking |
| Laguna Beach | 85% of residents rate the availability of affordable housing as “fair” or “poor” (US=50%).  
Higher rates of senior population and isolated seniors  
High rate of homeless |
| Laguna Beach Homeless Population | 51% of unsheltered homeless report health is fair/poor (vs. 8% general pop)  
54% report limitation in physical, mental or emotional problem (vs. 24% general pop)  
17% diagnosed with heart disease (vs. 5% general pop)  
Fair/Poor mental health rated by 35% (vs. 8% general pop)  
Chronic depression experienced by 62% (vs. 24% general pop)  
46% had drinking/drug problem (vs. 2% general pop)  
71% have no form of health insurance, including government sponsored programs (vs. 13% general pop)  
The #1 need identified by the homeless during interviews was jobs/job skills |
| Lake Forest high-need neighborhoods | Higher rates of poor mental health (18% vs. 6% general pop)  
Much lower consumption of fresh fruits/vegetables (20% lower than general pop)  
More fast food consumption compared to general population  
21% Unable to purchase needed prescription medication due to cost (vs. 10% general population) |
The community needs, or areas of opportunity identified through the PRC survey were:

**Priority Community Health Needs**

Figure 1 describes the community health needs identified through the SJH, Mission Hospital CHNA. Those needs that the hospital does not plan to address are noted.

![Figure 1](image-url)

<table>
<thead>
<tr>
<th>Health Needs Identified through CHNA</th>
<th>Plan to Address</th>
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<tbody>
<tr>
<td><strong>Access to Healthcare</strong></td>
<td></td>
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<tr>
<td>Lack of insurance &amp; insurance instability</td>
<td>Yes</td>
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<tr>
<td>Having a “medical home”</td>
<td>Yes</td>
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<tr>
<td>Transportation (a priority issue identified in the key informant panels)</td>
<td>Yes</td>
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<tr>
<td><strong>Heart Disease &amp; Stroke</strong></td>
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<tr>
<td>High cholesterol</td>
<td>No</td>
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<tr>
<td><strong>Housing</strong></td>
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<tr>
<td>Affordable housing</td>
<td>Yes</td>
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<tr>
<td>Homeless programs and shelters</td>
<td>Yes</td>
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<tr>
<td><strong>Immunizations</strong></td>
<td></td>
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<tr>
<td>Influenza/pneumonia vaccination</td>
<td>Yes</td>
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<tr>
<td><strong>Physical Activity</strong></td>
<td></td>
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<tr>
<td>Use of parks/recreational facilities</td>
<td>Yes</td>
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<tr>
<td><strong>Mental Health</strong></td>
<td></td>
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<tr>
<td>Service availability and access were priority issues identified in the key informant panels</td>
<td>Yes</td>
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<tr>
<td><strong>Substance Abuse</strong></td>
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<tr>
<td>Alcohol use</td>
<td>Yes</td>
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**Needs Beyond the Hospital’s Service Program**

The following health needs will not be addressed directly through a St. Joseph Health, Mission Hospital initiative or program because they are already addressed by local non-profit organizations that have the resources and expertise.

**Lack of Insurance & Insurance Stability:**
Mission Hospital was instrumental in the development of the Children’s Health Initiative of Orange County (CHIOC), who helps enroll low income children in appropriate health insurance programs. Mission Hospital supports CHIOC through a partnership with the hospital’s Family Resource Centers (FRCs). CHIOC and the FRCs work closely to enroll children and adults into available programs.

**Establishing a Medical Home:**
This need is addressed through our support of Camino Health Center, south Orange County’s only community clinic. Camino Health Center was purchased by the Sisters of St. Joseph of Orange in 1994 in conjunction with the purchase of Mission Hospital. The hospital has financially supported Camino annually with a contribution that ranges from $1.6 - $1.9 million through its Care for the Poor funds.

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1 A number of community health needs are already addressed by other organizations and will not be addressed in the implementation plan report.
While Camino became a free-standing non-profit in 2010 to expand its services as a Federally Qualified Health Center, Mission Hospital continues to support the Center with a significant financial contribution and shared services agreements.

Transportation:
South Orange County has challenging public transportation systems that do not meet the needs of many demographics. To respond to this need, Mission Hospital has partnered with Age Well Senior Services, the south Orange County contractor for Non Emergency Medical Transportation Services for the elderly. With this partnership, seniors 60 and older are able to arrange for free transportation to both of Mission Hospital’s campuses in Mission Viejo or Laguna Beach to obtain needed medical services. There are no limits to the number of rides available to a senior and a companion may ride along free of charge. With the vast health care services offered at both campuses, seniors gain access to needed medical attention without having to worry about transportation.

High Cholesterol:
Mission Hospital does not currently have a specific program to address high cholesterol needs in the community due to limitations in resources and the availability of programs through local non-profit, American Heart Association. However, the Health & Ministry Services division of Community Benefit at Mission Hospital will work with local partners to provide cholesterol screenings in high need areas of the community on an occasional basis. In addition, hospital employees participate in annual American Heart Association Heart Walks to raise awareness and educate the public about heart disease.

St. Joseph Health, Mission Hospital will endorse local non-profit organizations partners to apply for funding through our St. Joseph Health Foundation. Organizations that receive funding provide specific services, resources and meet the needs of the underserved communities that St. Joseph Health, Mission Hospital is unable to serve due to limited resources or lack of expertise in those areas of health.

Affordable Housing:
See “Addressing Needs of the Community: FY12 – FY14 Key Community Initiatives” for the full plan to address affordable housing in south Orange County.

Homeless programs and shelters:
During the 2010 Health Needs Assessment conducted in Laguna Beach, California, the homeless were a unique high need community that required specific, ongoing support. Mission Hospital partnered with the City of Laguna Beach to establish the Alternative Sleeping Location (ASL), an overnight shelter for the city’s homeless. Since that time, we have provided one nutritionally balanced meal to each person staying the night at the shelter to ensure they received one square meal each day. A key need identified by the homeless was the need for job skills and steady work. As part of our FY12-14 plan, we will be working in partnership with the Friendship Shelter and other local providers to develop strategies to address this need.

Influenza/pneumonia vaccinations:
The Health & Ministry Services division of Community Benefit at Mission Hospital provides flu/pneumonia clinics annually to residents in south Orange County. Targeted primarily to those with limited or no health insurance, the hospital provides approximately over 2,000 vaccinations to adults and children in the south Orange County community.
Use of parks/recreational facilities:
See “Addressing Needs of the Community: FY12 – FY14 Key Community Initiatives” section. Use of parks and recreational facilities aligns with our Childhood Obesity Initiative.

Access to Mental Health Services:
In FY12, Mission Hospital was awarded a grant by the St. Joseph Health Foundation to fund a Mental Health Intern Coordinator role through our FRCs. This role oversees 5-10 mental health interns from local universities, expanding our ability to serve residents seeking mental health treatment. The successfulness of this program enabled the FRCs to secure additional funding in FY13.

Alcohol Use:
See “Addressing Needs of the Community: FY12 – FY14 Key Community Initiatives” section. Mission Hospital is addressing alcohol use through its Youth Alcohol & Substance Use Prevention initiative.
COMMUNITY BENEFIT PLANNING PROCESS

Summary of Community Benefit Planning Process

When determining which priorities Mission Hospital would base its coming 3-year Community Benefit plan, we considered the following criteria:

- Relative prevalence of health and quality of life issues in each community (PRC and resident forum data), including whether local residents identify the topic as an issue and has a perceived sense of importance within the community
- Scope of the issue – prevalence and trends in the community when compared to state or national data
- Seriousness – and consequences if left unaddressed
- Availability of community resources to assist in addressing the issue
- Overall alignment with hospital goals and strategic priorities
- Alignment in managing charity care costs

In addition to the above criteria, the Community Benefit Committee also used the following lens to select and prioritize initiatives:

- High impact on poor/vulnerable
- Identified by resident forums and/or PRC data
- At least one issue must address a Quality of Life concern
- Partners/momentum exist to work collaboratively
- There exists a reasonable outcome
- Mission Hospital has capacity/resources to lead
- Alternative resources are not available to lead

Based on these criteria and using all of the data collected through PRC survey, Key Stakeholder Panels and resident forums, the decision was made to focus on four primary initiatives for the coming FY12 – FY14 Community Benefit Plan:

Affordable Homes (Quality of Life concern):

The cost of affordable homes in south Orange County is extremely high, with the average monthly mortgage being $2,000 and average rent at $1,600. In the 2011 Health Needs Assessment, over 33% of low-income residents stated they have considered leaving the area because of the price of housing. In our high need areas, 25% stated they were usually or always worried about being able to make their rent. And 30% of these same residents state that they share housing costs with another person to decrease expenses. Fair Market Rent for a 2 bedroom rental unit is $1,594, an increase of 61% since 2000 (Source: National Low Income Housing Coalition)

A renter household needs an annual income of $63,760 ($30.65 hourly wage) to rent an average two-bedroom apartment without exceeding the HUD-recommended 30% of income on housing. For an extremely low income family, a monthly home expense of $654 or less is considered affordable but the FMR for a 2 bedroom is $1,594. An Orange County minimum wage worker would have to work 153 hours per week to rent a two-bedroom apartment at FMR.

Examples of wages of common service providers: teachers (at Step 5) = $55K - $79K, firemen = $48k -$88k, Assoc. City Planner = $65K. If we are unable to create affordable homes in South County, the communities will struggle to fill the most essential positions that serve the local residents.
Access to Affordable Homes was identified as a top priority community issue in both our 2008 and 2011 Community Health Needs Assessment. As part of our values, we advocate for systems and structures that are attune to the needs of the vulnerable and disadvantaged. Many of our most vulnerable families cannot afford to pay for a decent place to live in South County and there is not enough supply of homes that are affordable to mid to very low income families (including many of our own Mission Hospital employees). To focus on Affordable Homes is also good for the economy and our business. We are able to recruit the best of the country and encourage them to move in our area.

**Childhood Obesity** (a SJHS-wide initiative):
National trends indicate that childhood obesity continues to be on the rise. The 2011 Community Health Needs Assessment data indicates that in the past three years, San Juan Capistrano and San Clemente obesity rates have maintained without a significant increase, in part because of the strategically focused education, programming, and presence of Mission Hospital’s obesity prevention activities.

Obesity rates in Orange County range between 13 – 36%. Community Health Needs Assessment indicates that in Lake Forest, rates are as high as 26% among high-need families, compared to 13.4% in the City of Aliso Viejo. Obesity is a leading cause of many chronic conditions including cancer, heart disease and diabetes. Today’s generation of youth are being diagnosed with Type II Diabetes, typically only seen in adults. Because of the growing population of youth with Type II Diabetes, high cholesterol and blood pressure, many healthcare experts believe that today’s generation may have a shorter lifespan of current adults.

Childhood Obesity was identified as a top priority community issue in 2008 and again during the 2011 needs assessment. In addition, the St. Joseph Health System has identified Childhood Obesity as a health system-wide initiative, where all 15 ministries across three states will focus on this issue to help prevent the long-term effects of obesity and protect our next generation of residents.

**Depression:**
Depression continues to be one of the key needs in both the 2008 and 2011 health needs assessments. With prolonged and severe depression, regular daily activities may be impacted and prevent people from working, taking their children to school, and general self-care. The proportion of those who experience depression is higher in low-income areas than the broader community. 40% of respondents in the 2011 health needs assessment reported that their mental health was not good for at least one day in the last month, and when looking at those who responded “not good for 3+ days”, more respondents live in our high need neighborhoods. In addition, over 18% of the total population reported they experience symptoms of chronic depression.

Untreated clinical depression is a serious problem. Untreated depression increases the chance of risky behaviors such as drug or alcohol addiction. It also can ruin relationships, cause problems at work, make it difficult to overcome serious illnesses, and even result in. Clinical depression, also known as major depression, is an illness that involves the body, mood, and thoughts. Clinical depression affects the way you eat and sleep. It affects the way you feel about yourself and those around you. It even affects your thoughts. People who are depressed cannot simply “pull themselves together” and be cured. Without proper treatment, including antidepressants and/or psychotherapy, untreated clinical depression can last for weeks, months, or years. Appropriate treatment, however, can help most people with depression.

This initiative will focus on improving clinical outcomes for residents seeking services for depression at our two Family Resource Centers. Because the Family Resource Centers has historically had a long wait
list for mental health counseling services and a FY09-11 initiatives focused on Access to Services for Depression, the decision was made to determine how we could better impact our services at the FRC as well as improve performance.

**Youth Alcohol & Substance Use Prevention** (as identified in the 2010 Laguna Beach Health Needs Assessment):
Youth alcohol/substance use is a serious problem that affects the community on multiple levels; the most serious is a recent death of a Laguna Beach high school student who had overdosed. In addition, use of alcohol contributes to poor grades and other health risks, including drunk driving, which impacts community members of all ages. By not addressing this issue on a community-wide basis, the youth of Laguna Beach will continue current risky behaviors which may ultimately impact their success in life. Research shows that the rate of alcohol use in previous 30 days increases from 5% at 12 years of age to 43% at 17 years of age. In youth 12-17, use of one substance substantially increases likelihood of using other substances. Among the 23% of youth ages 12-17 who report using alcohol, level of marijuana use was 32% and level of drug selling was 23%.

Ninth grade youth in Laguna Beach report through the California Healthy Kids Survey that 35% have consumed alcohol within the last 30 days (vs. 23% county-wide). This is a marked increase from 7th graders asked the same question. Laguna Beach has the highest rate of alcohol/drug use in Orange County and the community had begun efforts to address this issue one year prior to Mission purchasing the Laguna Beach campus. During focus groups and informal key informant meetings, residents all spoke to the concern for youth and the desire to address this more formally.

Issues that were not selected for focus in the coming FY12-14 plan included Education, an issue Mission Hospital had been dedicated to for the past decade. While this will not be a primary focus for the ministry in the coming three-year plan, a recent development in a local school district focused on Achievement For All has created opportunities for the work to continue with local partners and residents.

And because Access to Primary Health Care Services is an issue for the most vulnerable residents of our communities, Mission Hospital will continue to focus on this effort through our affiliation with Camino Health Center.

To develop and adopt these four primary Community Benefit initiatives, Mission Hospital staff conducted strategic planning meetings with community partners (described in each initiative below), based upon evidence-based research conducted to ensure our plans would be the best use of resources and methods shown to create change. We also shared the proposed plan with Mission Hospital’s Community Benefit Committee to ensure the committee approved the direction and scope of each project. Going forward, each initiative will be managed with a community-based coalition comprised of key stakeholders that will work collaboratively to accomplish the plan.

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Addressing the Needs of the Community:
FY 12 – FY 14 Key Community Benefit Initiatives

Upon conclusion of the needs assessment process, Mission Hospital developed four primary initiatives to address needs identified. A summary of each initiative including its goal, strategies and measures at the end of the three-year cycle is provided below. Each initiative was developed using evidence-based practices and in conjunction with community members.

Affordable Homes Initiative

**Description:** The cost of affordable homes in south Orange County is extremely high, with the average monthly mortgage being $2,000 and average rent at $1,600. As part of our values, we advocate for systems and structures that are attune to the needs of the vulnerable and disadvantaged. Many of our most vulnerable families cannot afford to pay for a decent place to live in South County and there is not enough supply of homes that are affordable to mid to very low income families (including many of our own Mission Hospital employees).

**Goal:** Increase affordable home, rental and ownership units in South OC (specifically targeting cities of San Clemente, San Juan Capistrano, Dana Point, Mission Viejo and Lake Forest)

**Community Partners:**
- Affordable Housing Clearing House
- City of Dana Point
- City of Mission Viejo
- City of San Clemente
- City of San Juan Capistrano
- Dayle McIntosh Center Independent Living
- Family Assistance Ministries
- Habitat for Humanity of Orange County
- iHOPE
- Kennedy Commission
- Mary Erickson Community Housing
- MDM Associates
- Neighborhood Housing Services of OC
- OC Business Council
- OC Housing Trust
- San Clemente Collaborative
- SJC Housing Advisory Board
- South Shores Church
- St. Joseph Health System
- Urban Land Institute

**Outcome Measure:** Number of new affordable homes, rental and ownership units approved for households with very low to moderate income levels.¹

¹ Very low income is considered less than 50% of Area Median Income (AMI). Moderate income levels are between 81 and 120% of AMI
Scope: This initiative will address households in South Orange County (Mission Viejo, San Juan Capistrano, Dana Point, San Clemente and Lake Forest) earning less than 120% of the area median income that needs access to affordable homes to avoid expending more than 30% of their gross income on gross housing costs.

The Orange County area median income (AMI) is determined by U.S. Department of Housing and Urban Development (HUD) as $87,200 for a family of 4. AMI is used to identify the following 5 Household Income limits:

- Extremely Low Income – less than 30% of AMI: $26,160
- Very Low Income – less than 50% of AMI: $43,600
- Low Income - between 51 and 80% of AMI: $43,600 - $69,760
- Moderate Income – between 81 and 120% of AMI: $69,760 - $104,640
- Above moderate- more than $104,640

Strategies: Based on evidence-based research, the following three strategies have been identified to achieve the greatest potential toward our goal of increasing the number of affordable homes:

1. Increase diversity of sectors (groups/organizations, e.g. developers, local residents, businesses) involved in promoting Affordable Homes developments
2. Increase local resident support for Affordable Homes developments
3. Influence implementation of public sponsored incentives & programs that increase opportunities for Affordable Homes Developments

Strategy Measures:

**Strategy 1: Increase diversity of sectors involved in promoting Affordable Homes developments.**

**Measure:** Number of sectors actively involved in promoting AH

We will identify sectors of AH development stakeholders and potential new partners and will encourage them to participate at coalition-sponsored activities. We will count those encounters and will identify partner sector affiliation. “Actively involved” status: when organizations participate in at least three coalition-sponsored events per fiscal year.

**Strategy 2: Increase local resident support for Affordable Homes developments**

**Measure:** Number of individuals supporting affordable homes at public events and city council meetings

We will count individuals supporting affordable homes developments at coalition-sponsored public events and city council meetings where affordable home developments are discussed (as reported by city partners).

**Measure:** Number of coalition friends supporting affordable homes at coalition-sponsored public events and city council meetings.

Count self identified friends of “SOCAHOC” by city. This can be done by survey at SOCAHOC events or at SOCAHOC social media and or website.

**Strategy 3: Influence implementation of public sponsored incentives & programs that increase opportunities for Affordable Homes Developments**
Measure: Number of city policies passed in cities' housing strategic plans (a weighted score)
Score weight based on number of policies and sites zoned and ready to build written in city’s current Housing Element of their General Plan and also through the coalition’s affordable homes policy survey. We will establish a standard group of policies identified as best practices to encourage AH developments.

Childhood Obesity Initiative

Description: Obesity rates in Orange County range between 13 – 36%. Community Health Needs Assessment indicates that in Lake Forest, rates are as high as 26% among high-need families, compared to 13.4% in the City of Aliso Viejo. Obesity is a leading cause of many chronic conditions including cancer, heart disease and diabetes. Today’s generation of youth are being diagnosed with Type II Diabetes, typically only seen in adults. This initiative includes three evidence-based strategies to address the increases in childhood obesity witnessed across south Orange County: increase healthy practices by families around eating and physical activity; increase implementation of Wellness policies at elementary schools; and increase access to healthy foods and physical activities in underserved neighborhoods (Built Environment).

Goal: To reduce the prevalence of obesity in underserved children 3-11 years old.

Community Partners:

Existing Collaborations:
- Cities of San Juan Capistrano, Lake Forest, San Clemente, Mission Viejo, Aliso Viejo
- South Orange County Childhood Obesity Task Force
- Saddleback Valley Unified School District
- Capistrano Valley Unified School District
- OC Dept of Education
- County of Orange Nutrition and Physical Activity Collaborative
- Boys & Girls Club of Capistrano Valley, San Clemente, and Laguna Beach
- Private/Non-profit fitness and recreation providers
- Women, Infant & Children (WIC) Clinic
- Camino Health Center
- Dr. Ribas’s Health Club
- YMCA
- Western Youth Services

Potential Partners
- OC Dept of Beaches, Harbors and Parks
- Cal Optima Physicians
- Saddleback Recreation

Outcome Measure: Reduction in the prevalence of obesity in children ages 3-11 will be measured by the percent of 5th graders with Body Mass Index (BMI) over the 85th percentile in selected schools in Lake Forest, San Juan Capistrano, and San Clemente as reported on the CA Dept. of Education Physical Fitness Test (Fitnessgram). Schools include: San Juan, Del Obispo, Ambuehl, Kinoshita in San Juan Capistrano; Concordia, Las Palmas, and Marblehead in San Clemente; Aliso, Olivewood and Gates in Lake Forest.
Scope: This initiative is focused on the underserved areas of Lake Forest, San Juan Capistrano, and San Clemente. The residents in these areas have been identified as at or below the poverty level, low levels of education, and multiple families per dwelling. Strategies will be implemented primarily in these three cities and will focus primarily on children ages 3-11 and their caregivers/families.

Strategies: Based on evidence-based research, the following three strategies have been identified to achieve the greatest potential toward our goal

1. Increase regular practice by families around healthy eating and physical activity
2. Increase implementation of comprehensive school/district wellness policies
3. Increase accessible built-community options for
   a. healthy foods
   b. physical activities

Strategy Measures:

Strategy 1: Increase regular practice by families around healthy eating and physical activity
Measure: percent of programs or initiatives that address behavioral change in both healthy eating and physical activity.

Strategy 2: Increase implementation of comprehensive school/district wellness policies
Measure: Increase number of schools who meet the ENACT/School Health Index minimum score (as defined by Obesity Task Force) in targeted schools

Strategy 3: Increase accessible built-community options for healthy foods and physical activities
Measure: Number of new affordable food options and/or accessible physical activity options
Reduce Depression (specific to Family Resource Center clients) Initiative

**Description:** This initiative will focus on improving clinical outcomes for residents seeking services for depression at our two Family Resource Centers. Because the Family Resource Centers has historically had a long wait list for mental health counseling services and a FY09-11 initiatives focused on Access to Services for Depression, the decision was made to determine how we could better impact our services at the FRC as well as improve performance.

**Goal:** Reduce depression among adult Family Resource Center (FRC) clients with mild to severe depression (5 or more on PHQ9 scale)

**Community Partners:** We will be partnering with local graduate schools to provide student interns who in turn will provide individual and group counseling to the community. We will continue our collaboration with Camino Health Center to provide psychotropic medication interventions (as appropriate) for client scoring a 15 or higher on the PHQ-9.

**Outcome Measure:** Percent of FRC clients who show an improvement of at least 5 points on their PHQ9 score.

**Scope:** Population includes individual clients seeking treatment (counseling) ages 18 and over in an individual and/or group setting at the FRCs. Does not include clients seeking couples and family counseling, and/or “others that may be involved in treatment (i.e. secondary clients)” The FRCs provide mental health counseling to the uninsured in the community.

**Strategies:** Based on evidence-based research, the following three strategies have been identified to achieve the greatest potential toward our goal:

- **Strategy 1:** Support the appropriate use of medication
- **Strategy 2:** Engage clients in treatment for depression (beyond crisis)
- **Strategy 3:** Increase timeliness of interventions

**Strategy Measures:**

- **Strategy 1:** Support the appropriate use of medication
  **Measure:** Percent of clients taking medications as prescribed at discharge

- **Strategy 2:** Engage clients in treatment for depression (beyond crisis)
  **Measure:** Percent of clients who complete their identified treatment plan (as recommended by FRC counselor)

- **Strategy 3:** Increase timeliness of interventions
  **Measure:** Average number of days on wait list each quarter
Youth Alcohol & Substance Use Prevention Initiative

**Description:** Youth alcohol/substance use is a serious problem that affects the community on multiple levels. The use of alcohol contributes to poor grades and other health risks, including drunk driving, which impacts community members of all ages. Research shows that alcohol is the gateway to substance use, where teens who use alcohol are three times more likely to use other drugs. Ninth grade youth in Laguna Beach report through the California Healthy Kids Survey that 35% have consumed alcohol within the last 30 days (vs. 23% county-wide). This initiative is designed to prevent Alcohol and Substance Use by addressing issues before youth become involved in these risky behaviors.

**Goal:** Reduce use of alcohol among 9th graders at Laguna Beach Unified School District (LBUSD)

**Community Partners:** The Laguna Beach Community Coalition consists of key stakeholders in the community. Each agency or member is responsible for the programs in their own agency and how those programs can align with the LBCC strategic plan. Mission Hospital is the facilitator of these meetings. The following is a list of members

- Center for Drug Free Communities
- Laguna Beach Community Clinic
- Laguna Beach Unified School District
- Pacific Coast Recovery Center
- Mission Hospital Community Benefit
- California Youth Services
- Community Alliance Network
- Boys & Girls Club of Laguna Beach
- Western Youth Services
- Mothers Against Drunk Driving
- City of Laguna Bch Police Dept
- CSP, Inc.
- Laguna Beach Parents
- LBUSD School Board Members
- Laguna Beach City Council
- Laguna Beach Presbyterian Church

**Outcome Measure:** Percent of 9th graders who report using alcohol in last 30 days

Outcome measure is based on the California Health Kids Survey Data provided to the school district every two years. The California Healthy Kids Survey (CHKS) is the largest statewide survey of resiliency, protective factors, and risk behaviors in the nation. Among other things, CHKS allows schools and districts to monitor whether they are providing the critical developmental supports and opportunities that promote healthy growth and learning. It assesses health risks, specifically relating to alcohol, tobacco, and other drug use; school violence; physical health; resilience and youth development; and school climate.

**Scope:** Scope of project will focus on youth in elementary and middle school to address both internal and external developmental assets at an early age. All youth in Laguna Beach will be eligible for services, but there will be greater focus on youth considered at higher risk for alcohol/substance use.
Strategies: Based on evidence-based research, the following three strategies have been identified to achieve the greatest potential toward our goal:
- Strategy 1: Increase child problem solving skills (one aspect of internal assets)
- Strategy 2: Increase caring relationships at home (one aspect of external assets)
- Strategy 3: Reduce access to alcohol

Strategy Measures:
- **Strategy 1: Increase child problem solving skills (one aspect of internal assets)**
  - Measure: percent of 7th graders who rate high on problem solving skills

- **Strategy 2: Increase caring relationships at home (one aspect of external assets)**
  - Measure: percent of 7th graders who rate high on having a caring relationship with an adult at home

- **Strategy 3: Reduce access to alcohol**
  - Measure: percent of 9th graders who say it is easy or very easy to get alcohol
Other Community Benefit Initiatives

Access To Primary Care
Description: to provide access to essential medical services to south Orange County residents who are uninsured or underinsured.

Goal: provide quality primary health care

Community Partners:
- Camino Board of Directors Strategic Planning Committee
- Camino Health Center Management Team
- Representatives from Mission Hospital’s Community Benefit Committee
- Mission Hospital staff

Scope: Low-income, uninsured, and vulnerable residents living in south Orange County

Outcome Measure:
The number of Federally Qualified Health Center clinical performance measures goals attained.

Strategy 1: Improve Access to Care
Strategy Measure 1: Mean percentile score for the health center for “Appointments” in patient satisfaction survey tool, Avatar.

Strategy 2: Achieve Stage 1 of the “Meaningful Use” Criteria
Strategy Measure 2: The number of Stage 1 “Meaningful Use” components implemented

Strategy 3: Improve diabetic clinical processes
Strategy Measure 3: The percent of adult diabetic patients with a HgA1c less than or equal to seven percent

Other Community Benefit Initiatives

Family Resource Centers

Description: The Family Resource Centers provide an array of social services to uninsured and underinsured in south Orange County. Services include community information & resources, mental health counseling, health insurance application assistance, credit counseling, family advocacy and a variety of educational programs and support groups to enhance family well being.

Community Partners: Raise Foundation, Children’s Bureau, Human Options, Consumer Credit Counseling of Orange County, Neighborhood Housing Services, Woman, Infant & Children’s (WIC) Clinic, Saddleback College, Mission Basilica, Camino Health Center, Orange County Social Services Agency, Children’s Health Initiative of Orange County, Families Forward, Capistrano Unified School District, University of Southern California: Social Work Department

Scope: Low-income and vulnerable residents living in south Orange County
Health & Ministry Services

Description: In collaboration with the partnering congregations, the Health Ministry Partnership provides training, resources, and opportunities for local congregations to extend additional services to their members. Through the Health Ministry Partnership, programs like Friendly Visitors, Prayer Blanket Knitters, free flu clinics, support groups, screenings, and access to free nurse consultations have been made possible.

Community Partners: St. Timothy Parish; Mission Basilica; Laguna Niguel Presbyterian; San Clemente Presbyterian; Laguna Beach Presbyterian; Santiago de Compostela Parish; St. Edward’s Parish; San Felipe de Jesus; St. Clement’s by the Sea Episcopal Church; Saddleback Church; Our Lady of Fatima Parish; Arbor Christina Fellowship; Unitarian Fellowship of Laguna Beach; Laguna Beach Interfaith Council; Aliso Creek Presbyterian; Mission Hospital Spiritual Care Department; St. Nicholas Parish; Latino Health Access.

Scope: Underserved and vulnerable populations in the areas of highest disproportionate need within the Mission Hospital service area (Lake Forest to San Clemente).

Post-Secondary Education

Description: Because health attainment is directly linked with a person’s education level, we maintain relationships in the community and programs that help to enhance today’s youth with opportunities for higher education.

Community Partners: Capistrano Unified School District, Orange County Human Relations Council, Marco Forster Middle School, Center for Educational Partnerships, University of California Irvine (UCI), CREER Comunidad y Familia, Saddleback Community College, St. Margaret’s Episcopal School, Breakthrough Program, UCI Mexican-American Engineers and Scientists’ Chapter

Scope: Children and families from low income and vulnerable communities in the Capistrano Unified School District.

Serving the Needs of the Homeless

Description: Based on the 2010 Health Needs Assessment in Laguna Beach, local homeless residents identified the need for access to medical services as well as job skills/placement.

Key Community Partners: Families Forward, Friendship Shelter, iHOPE, Jamboree Housing, Laguna Beach Interfaith Council, LB Police Department, Community Outreach, OC Health Care Agency

Scope: Chronic and transitional homeless individuals living in Laguna Beach
**Senior Transportation**

**Description**: Transportation services continue to be a need in south Orange County due to the geographic expansion and limited public transportation options. We collaborate to provide free non-emergency medical transportation services to both Mission Hospital campuses to increase access to needed medical services.

**Key Community Partners**: Age Well Senior Services

**Scope**: Seniors 60 years of age and older residing in South Orange County Cities
Supplement 1. Mission Hospital Block Group Level Maps
SUPPLEMENT 2:
MH BLOCK GROUP LEVEL MAPS

February, 2011
Prepared by the St. Joseph Health System Community Health Department
Table of Contents

- Identifying Community Need
  - Intercity Hardship Index-Block Group
    - Overview
    - Methodology
  - Maps
    - MH Community Benefit Service Area by Block Group
    - High Need Areas- Zoomed In
Intercity Hardship Index (IHI)
Intercity Hardship Index (IHI)

- Developed by the Urban & Metropolitan Studies Program at the Nelson A. Rockefeller Institute of Government
- Aggregates six socioeconomic indicators that contribute to health disparity

Indicators
- Income level
  - Per capita Income
- Crowded Housing
  - % of Households with 7+ people
- Unemployment
  - % of those 16 and over without employment
- Education
  - % of those 25 and over without a High School diploma
- Poverty
  - % of people living below the Federal Poverty Level
- Dependency
  - % of the population under18 years and over 64 years
Methodology

- IHI demonstrates need at the block group level where each block group is assigned a score from 1 (least need) to 5 (highest need) for all indicators
  - The indicators were standardized then averaged to create a composite score
  - Using zoom maps, key block group areas of need were identified

- Color-Coded Maps
  - **Red- Highest Need (HI Score: 5)**
  - **Pink- High Need (HI Score: 4)**
  - **Yellow- Average Need (HI Score: 3)**
  - **Light Green- Less Need (HI Score: 2)**
  - **Dark Green- Least Need (HI Score: 1)**
Maps