



Annual Report and Plan for Community Benefit MemorialCare Saddleback Medical Center Fiscal Year 2023 (July 1, 2022 - June 30, 2023)

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Contents

About Saddleback Medical Center	2
Mission and Values	4
Governance	4
Caring for our Community	6
Community Health Needs Assessment	8
Addressing Priority Health Needs	10
Financial Summary of Community Benefit	16
Community Benefit Plan FY24	17
Significant Needs the Hospital Intends to Address	17
Evaluation of Impact	21
Needs the Hospital Will Not Address	21
Contact Information	22

About Saddleback Medical Center

MemorialCare

MemorialCare Saddleback Medical Center (SMC) is a member of MemorialCare, an integrated, nonprofit health system headquartered in Orange County, California. MemorialCare includes top hospitals – Saddleback Medical Center, Orange Coast Medical Center, Long Beach Medical Center and Miller Children's & Women's Hospital Long Beach. The system also includes MemorialCare Medical Group and Greater Newport Physicians, as well as MemorialCare Select Health Plan and numerous outpatient ambulatory surgery, medical imaging, urgent care, breast health, physical therapy, dialysis and primary care and specialty care centers.

Saddleback Medical Center

SMC is a full service, nonprofit hospital with 248-licensed beds that provides a wide range of services and innovative specialty programs through its Centers of Excellence, which include the MemorialCare Heart & Vascular Institute, the MemorialCare Cancer Institute, the MemorialCare Breast Center, the MemorialCare Joint Replacement Center, Spine Health Center, robotic-assisted surgery program and The Women's Hospital. SMC is continually honored for exceptional medical expertise that offers high quality, compassionate care for patients and families at every stage of their lives.

In June 2023, the Women's Hospital at Saddleback Medical Center celebrated the opening of its new Obstetric Emergency Department. The new center will work in conjunction with the main Emergency Department to fill a gap in emergency maternity care in South Orange County. It will provide high-quality maternity care to patients who experience obstetric or non-obstetric issues while pregnant or newly postpartum.

Awards

Saddleback Medical Center is the recipient of the following awards and accolades:

- U.S. News & World Report Best Hospitals:
 - High-performing rankings in Abdominal Aortic Aneurysm Repair, Congestive Heart Failure, Heart Attack, Hip Fracture, Kidney Failure, Knee Replacement, Maternity, Pneumonia, Spinal Fusion, Stroke and Transcatheter Aortic Valve Replacement (TAVR).
- Healthgrades 2023 Awards include:
 - America's 250 Best Hospitals
 - America's 100 Best Gastrointestinal Care and Gastrointestinal Surgery
 - o Top 5%
 - Overall Gastrointestinal Services

- Gastrointestinal Medical Treatment and Surgery
- o Top 10%
 - Overall Pulmonary Care
 - Gastrointestinal Services
 - Gastrointestinal Medical Treatment and Surgery
- Care Excellence
 - Pulmonary Care
 - Gastrointestinal Care
 - Critical Care
 - Gastrointestinal Surgeries
- Five-Star Recipient for Coronary Bypass Surgery, Treatment of Heart Attack, Total Knee Replacement, Total Hip Replacement, Spinal Fusion Surgery, Upper Gastrointestinal Surgery, Gallbladder Removal Surgery, Treatment of Hip Fracture, Sepsis, Chronic Obstructive Pulmonary Disease, Bowel Obstruction, Gastrointestinal Bleed, Pneumonia, and Respiratory Failure.
- The Orange County Register's Best of Orange County ranked among the Best Hospitals in Orange County and a Top Workplace.
- Magnet® designated by American Nurses Credentialing Center (ANCC) for nursing excellence.
- Geriatric Emergency Department Accreditation by the American College of Emergency Physicians and recognized as an Age Friendly Health System Committed to Care Excellence Hospital.
- American Heart Association/American Stroke Association Care Gold Plus and Thrombectomy-Capable Stroke Center Certification.
- Received an "A" Safety Grade from Leapfrog Group, an independent national organization committed to health care quality and safety, for the sixth consecutive time.
- The Intensive Care Unit and its team were awarded a Silver-Level Beacon Award for Excellence from the American Association of Critical-Care Nurses.
- Center of Excellence by the Society for Obstetric Anesthesia and Perinatology.

Mission and Values

Mission

To improve the health and well-being of individuals, families and our communities.

Vision

Exceptional People. Extraordinary Care. Every Time.

Values

The iABCs of MemorialCare

The iABCs are a statement of our values—Integrity, Accountability, Best Practices, Compassion and Synergy. They remind us of our commitment to the highest standard of patient care and the active communication of clinical outcomes.

Integrity

Always holding ourselves to the highest ethical standards and values. Doing the right thing, even when no one is watching.

Accountability

Being responsible for meeting the commitments we have made, including ethical and professional integrity, meeting budget and strategic targets, and compliance with legal and regulatory requirements.

Best Practices

Requires us to make choices to maximize excellence, and to learn from internal and external resources about documented ways to increase effectiveness and/or efficiency.

Compassion

Serving others through empathy, kindness, caring and respect.

Synergy

A combining of our efforts so that together we are more than the sum of our parts.

Governance

The MemorialCare Orange County Board of Directors guides the direction of community benefit, with assistance from the Community Benefit Oversight Committee (CBOC).

Board of Directors

Barry Arbuckle, PhD
Sharon Cheever – MHS Board Chair
Tom Rogers – Chair
Thomas Feldmar – Vice Chair

Julio Ibarra, MD – Secretary
Catherine Han, MD
Dale Vital
David Wolf
Frank Marino, MD
Lalita Komanapalli, MD
Michael Moneta, MD
Resa Evans
Rhonda Longmore-Grund
Tam Nguyen, MD

Community Benefit Oversight Committee

The CBOC (Community Benefit Oversight Committee) is an advisory committee for the hospital's community benefit programs and reports to the Board of Directors. The CBOC reviews and validates legal and regulatory compliance specific to community benefit mandates, assures community benefit programs and services are effectively meeting identified community health needs, with emphasis on populations with unmet health needs, and increases transparency and awareness of community benefit activities. The members of the CBOC include:

- LaVal Brewer, President & CEO of South County Outreach
- Susie Caskey, Community Member
- Roneet Cooper, Social Worker, Coordinated Health Services, Saddleback Medical Center
- Beth Krom, Former Irvine Mayor and City Councilmember
- Kristen Pugh, Vice President, Advocacy & Government Relations, MemorialCare
- Donna Rane-Szostak, Laguna Woods Community Member
- Suzie Swartz, Saddleback Valley Unified School District Board Member
- Elizabeth Tsai, Physician, MemorialCare

Caring for our Community

Saddleback Medical Center recognizes its obligation to provide services above and beyond its role as a healing facility. In 1997, a group of physicians helped launch one new, unified brand name for a nonprofit integrated health system with hospitals and ambulatory sites of care. They knew they could help make clinical care across Orange County and Los Angeles County significantly better – by working together as a system. They created best practices and committed to using evidence-based medicine throughout a new system, called MemorialCare. Since then, year over year, MemorialCare consistently excels in improving integration and collaboration to improve patient care.

This report demonstrates tangible ways in which SMC is fulfilling its mission to improve the health and well-being of our community and provide extraordinary care. SMC provides financial assistance to those in the community who cannot afford services, or whose health insurance does not cover all services rendered. In addition, SMC invests in the community to increase access to health care services and improve health.

Service Area

Saddleback Medical Center is located at 24451 Health Center Drive, Laguna Hills, in Orange County, California. The service area includes 28 ZIP Codes, representing 17 cities or communities in Orange County. This primary service area was determined by averaging total inpatient ZIP Codes over three years and represents 88% of ZIP Codes of patient origin.

Saddleback Medical Center Service Area

Geographic Areas	ZIP Codes
Aliso Viejo	92656
Capistrano Beach	92624
Dana Point	92629
Foothill Ranch	92610
Irvine	92602, 92603, 92604, 92606, 92612, 92614, 92618, 92620
Ladera Ranch	92694
Laguna Beach	92651
Laguna Hills	92653
Laguna Niguel	92677
Laguna Woods	92637
Lake Forest	92630
Mission Viejo	92691, 92692
Rancho Santa Margarita	92688
San Clemente	92672, 92673

Geographic Areas	ZIP Codes
San Juan Capistrano	92675
Trabuco Canyon	92679
Tustin	92780, 92782

Community Snapshot

The population of SMC's service area is 984,079. Children and youth make up 20.5% of service area population, 62.6% are adults, and 16.9% are seniors, ages 65 and older. The service area has a higher percentage of seniors than found in the county (15.7%) and the state (15.2%). More than half of the population are White residents (52.4%). At 21.9% of the population, Asian residents are the second largest race and ethnic group in the service area. Latinos or Hispanic residents make up 19.1% of the population in the service area. Black or African American residents are 1.6% of the population. The remaining races and ethnicities comprise 4.6% of the service area population.

65% of residents in the service area speak English only in the home. Spanish is spoken in 13.6% of the homes in the service area. An Asian or Pacific Islander language is spoken in 13.2% of service area homes. 7.3% of residents in the service area speak an Indo-European language in the home. Among area residents, 7.3% are at or below 100% of the federal poverty level (FPL) and 16.6% are at 200% of FPL or below (low-income). In the service area, 7.7% of children. 8.1% of seniors, and 20.7% of female head of households with children live in poverty. In the service area, 11.9% of adults are high school graduates. 63.7% of the population in the service area has graduated college, higher than the rate for the county (48.6%) and the state (41.8%). Among service area residents, 95.3% of the population have health insurance.

Community Health Needs Assessment

Saddleback Medical Center completed a Community Health Needs Assessment (CHNA) in FY22 as required by state and federal law. The CHNA is a primary tool used by the hospital to determine its community benefit plan, which outlines how it will give back to the community in the form of health care and other community services to address unmet community health needs. The assessment incorporated components of primary data collection and secondary data analysis that focused on the health and social needs of the service area.

The CHNA examined up-to-date data sources for the service area to present community demographics, social determinants of health, health care access, maternal and infant health, leading causes of death, disability and disease, COVID-19, health behaviors, mental health, substance use, and preventive practices. When applicable, these data sets were presented in the context of Orange County and California and were compared to the Healthy People 2030 objectives.

Targeted interviews were used to gather information and opinions from people who represent the broad interests of the community served by the hospital. Twelve (12) interviews were completed from November 2021 to January 2022. Interviewees included individuals who are leaders and/or representatives of medically underserved, low-income, and minority populations, and local health or other departments or agencies that have current data or other information relevant to the health needs of the community. Input was obtained from the Orange County Health Care Agency.

Priority Health Needs

Health needs were identified from secondary data using the size of the problem (relative portion of population afflicted by the problem) and the seriousness of the problem (impact at individual, family, and community levels). The analysis of secondary data yielded a preliminary list of significant health needs, which then informed primary data collection. The primary data collection process was designed to validate secondary data findings, identify additional community issues, solicit information on disparities among subpopulations, ascertain community assets to address needs and discover gaps in resources.

The identified significant needs included (in alphabetical order):

- Access to care
- Chronic diseases
- COVID-19
- Food insecurity

- Housing and homelessness
- Mental health
- Overweight and obesity
- Preventive practices
- Senior health
- Substance use

The identified significant health needs were then prioritized with input from the community. The community stakeholders were asked to rank order the health needs according to highest level of importance in the community. Among key stakeholder interviewees, housing and homelessness, mental health, access to care, COVID-19 and substance use were ranked as the top five priority needs in the service area.

The complete CHNA report and the prioritized health needs can be accessed at www.memorialcare.org/about-us/community-benefit. Please send your feedback to communitybenefit@memorialcare.org.

Addressing Priority Health Needs

In FY23, Saddleback Medical Center engaged in activities and programs that addressed the priority health needs identified in the FY23-FY25 Implementation Strategy. SMC has committed to community benefit efforts that address access to care, behavioral health, chronic diseases, and preventive practices with a focus on older adults, the social determinants of health and health equity. Selected activities and programs that highlight the hospital's commitment to the community are detailed below.

Access to Care and Preventive Practices

Access to care is a key determinant of health that provides preventive measures and disease management, reducing the likelihood of hospitalizations and emergency room admissions. Preventive health care includes screenings, check-ups, and counseling to prevent illness, disease, or other health problems. Individuals, who receive services in a timely manner, have a greater opportunity to prevent or detect disease during earlier, treatable stages.

Response to Need

Financial Assistance

The Patient Financial Assistance Program was available to everyone in the community. This included people without health insurance and patients with insurance who were unable to pay the portion of their bill that insurance did not cover.

Health Education, Resources and Community Outreach

SMC provided support and services for community residents that removed barriers to care and increased access to health care and preventive measures. General health and wellness education, social media postings, blogs, podcasts, and informational articles were presented on topics that included: cardiac health, nutrition, safety, Respiratory syncytial virus (RSV), women's health, men's health, and successful aging. Over 80,000 encounters were provided.

Parents-to-be were provided with education, advice, strategies, and tools through prenatal, childbirth and parenting classes. 7,100 community encounters were provided. Topics included healthy pregnancy, childbirth, maternal support, childcare and breastfeeding support.

Breastfeeding support was provided by lactation experts through phone consultations for 3,967 encounters.

Newsletters

The CareConnection quarterly newsletter was made available to community residents to provide

health education messages and notify the community of free classes, support groups, and screenings offered by the hospital. Newsletters were mailed to households and the information was also posted on the website at www.memorialcare.org.

SMC published the *Village Breeze* newsletter for Laguna Woods Village residents, providing health messaging for older adults. And Saddleback Medical Center physicians appeared on local television twice a month providing timely health care information.

55+ Senior Programs

Seniors participated in seminars that included Stroke Awareness and Prevention, Holiday Blues, Mindfulness, Neurobics, Delirium, Medicare and Social Security, Spine, and Joints. Additionally, a Health Expo geared specifically for seniors reached 596 community members.

At the Laguna Woods Health Fair, 100 seniors received blood pressure screenings and education on the Hospital Elder Life Program (HELP).

Support Services

The hospital offered services to increase access to care and support preventive health care.

- Transportation was provided to 243 people who could not easily access medical care and appointments. 164 older adults were provided with senior medical transportation.
- 2,144 uninsured or underinsured persons were assisted with health insurance enrollment.
- Patient Financial Services educated 250 individuals on financial assistance programs.
- The Compassionate Care program provided free prescriptions, home health medications, recuperative care and/or transportation for 53 community members.
- The High-Risk Pharmacy Discharge program delivered prescriptions to patients who could not afford the cost of the medication prior to discharge so they would be able to leave the hospital with their prescriptions.

Social Work Care Management

High-risk seniors were supported by a licensed Social Worker after discharge from the hospital. The Social Worker provided needed care management, supplies, and home care services based on an individualized care plan.

Behavioral Health (Mental Health and Substance Use)

Positive mental health is associated with improved health outcomes. The need to access mental and behavioral health services was noted as a high priority among community members.

Response to Need

Behavioral Health Integration Program

MemorialCare health system recognized that physical and mental health should be coordinated in primary care settings. As a result, the Behavioral Health Integration program was launched in 2018. The project has grown to include nine MemorialCare Medical Group Primary Care sites of care throughout our service areas. The primary care physicians screen for mental health conditions and coordinate care options for patients with behavioral health needs. The program included:

- An embedded clinical social worker at each location
- Instant referral to needed services
- Access to a trained psychiatrist via Telehealth
- Tele-video visits to patients enrolled in the program
- Online patient self-management tools through SilverCloud

SilverCloud

In response to the unprecedented need for mental health and mental wellbeing services, MemorialCare offered a free online resource to the entire community. SilverCloud is an ondemand, virtual mental health platform that offers digital behavioral health care via evidence-based content, programs, and support. The online psychoeducational and therapeutic program aims to help manage anxiety, depression, stress, and sleep. Using online programs, the platform is customizable and designed to meet a person's unique mental health goals. The program does not require a doctor's order, can be completed at any pace by participants and is accessible any time on smartphone, tablet, and computer devices.

Be Well OC Mental Health and Wellness Campus

MemorialCare partnered with Be Well OC to open a mental health and wellness campus in Orange. The 60,000 square foot state-of-the-art facility provides best-in-class mental health and substance use disorder services to all Orange County residents who are referred for care. The first of three planned campuses, the facility in Orange features a crisis stabilization center for mental health needs, and a recovery station for substance use disorders. Other services include withdrawal management, adult residential treatment, and an integrated support center.

Friendship Shelter

The SMC grant program provided funding for Friendship Shelter's Housing Focused Shelter program, including voluntary psychiatric care. 212 unique program participants received services that addressed many intersecting social determinants of health including economic stability, health care access, transportation, food security, and social supports. In addition, housing locators

and housing coordinators succeeded in placing 84 program clients into permanent housing, with an emphasis on cultivating and sustaining long-term relationships with clients and landlords. In all, nearly 7,500 instances of service provision and/or engagement between clients and staff occurred over the year.

Support Services

Unused prescription drugs can be obtained illegitimately and lead to substance abuse. The Outpatient Pharmacy maintained a drug take back repository, which received unused drugs from the community and appropriately destroyed them.

Chronic Diseases

Chronic diseases are long-term medical conditions that tend to progressively worsen. Chronic diseases, such as cancer, heart disease, diabetes, and lung disease, are major causes of disability and death. Chronic diseases are also the causes of premature adult deaths. The hospital serves a community with a high percentage of seniors who suffer from dementia and Alzheimer's disease.

Response to Need

Health Education, Resources and Community Outreach

SMC provided health education classes, social media posts, blogs, podcasts, and articles in regional publications that focused on chronic disease prevention, management, and treatment. Presentations and information were provided on heart health, cancer, diet and exercise, Alzheimer's disease, spine health, osteoporosis, immunotherapy, healthy habits, GERD, weight loss, hospice and palliative care, and other disease-related topics.

Support Groups and Counseling Services

Families, patients, and caregivers participated in bereavement support, as well as cancer support groups, which resulted in 910 encounters. In addition, 37 individuals were provided with oncology counseling and therapy sessions.

Helping Hand Worldwide, Inc. (HHWW)

The SMC grant program provided funding for HHWM's refrigerated Mobile Food Pantry Program. The Mobile Food Pantry Program provided accessible community food distribution for seniors and families among cities in the hospital service area while eliminating thousands of pounds of food waste that would otherwise be sent to landfills. The program provided 1,455 older adults and families with fresh food at on-site distribution locations as well as a Mobile Food Pantry available 7 days a week. Through a survey of clients, 97% reported the fresh food improved their health, reduced stress, and increased energy levels due to healthy eating, having access to fresh fruit, vegetables, and proteins.

Other Community Benefit Services

Saddleback Medical Center provided community benefit services in addition to those programs that focused on addressing priority health needs.

Health Professions Education

Nursing Education

425 nursing students participated in precepted clinical rotations at MemorialCare Saddleback Medical Center.

HELP Program

HELP is an evidence-based, innovative model of hospital care designed to prevent delirium and functional decline among patients. There were 277 nursing students trained in the HELP program to provide targeted interventions, which are Daily Visitation, Mealtime Assistance, Therapeutic Activities, Sleep Promotion, and Early Mobilization.

Other Health Professions Education

SMC staff provided precepting for 148 health professionals. Students were educated and performed their clinical hours and/or internship rotations in the following clinical areas:

- Genetics
- Imaging
- Occupational therapy
- Paramedics
- Pathology
- Pharmacy technician
- Physician assistant
- Physical therapy
- Respiratory therapy
- Sonographer
- Speech therapy
- Sterile processing technician

Cash and In-Kind Donations

Cash Donations

Saddleback Medical Center supported community organizations through cash donations that addressed community health needs.

In-Kind Donations

SMC donated 4 Abbott ID Now instruments (used for rapid Covid-19 testing) and 28 accompanying testing kits.

SMC employees represented the hospital on community boards and collaborative committees that focused on increased access to health and social services, improved safety, and senior health issues.

Grant Program

SMC provided grant funds to support community-based organizations that addressed identified health needs and served vulnerable populations within the hospital service area. Grants were provided to:

- Friendship Shelter
 - Purpose: Providing housing focused shelter program, as well as voluntary psychiatric care.
- Helping Hand Worldwide, Inc.
 - Purpose: Refrigerated mobile food pantry providing fresh donated food to lowincome senior communities and families.

Community Benefit Operations

In FY23, community benefit operations supported:

- Administrative support
- Community benefit consultants

Community Building Activities

Economic Development

The hospital supported economic development groups that focused on issues that impacted community health improvement and safety, including:

- Laguna Hills Chamber of Commerce
- San Clemente Chamber of Commerce
- Orange County Business Council

Workforce Development

- Saddleback Medical Center provided 63 high school students with observational roles in the Laboratory.
- Through the Medical Magnet Program, 13 high school students explored various disciplines within the medical field, both in the classroom and off-site in a hospital facility.

Financial Summary of Community Benefit

The Saddleback Medical Center financial summary of community benefit for FY23 (July 1, 2022 to June 30, 2023) is summarized in the table below. The Hospital's community benefit costs comply with Internal Revenue Service instructions for Form 990 Schedule H. Costs are determined as part of the VHA Community Benefit package and are based on the Hospital's overall cost to charge ratio.

Community Benefit Categories	Net Benefit
Charity Care/Financial Assistance ¹	\$3,075,250
Unpaid Costs of Medi-Cal ²	\$11,837,340
Education and Research ³	\$7,230,740
Other for the Broader Community ⁴	\$955,920
Total Community Benefit Provided Excluding Unpaid Costs of Medicare	\$23,099,250
Unpaid Costs of Medicare ³	\$20,943,570
Total Quantifiable Community Benefit	\$44,042,820

¹ Financial Assistance includes traditional charity care write-offs to eligible patients at reduced or no cost based on the individual patient's financial situation.

² Unpaid costs of public programs include the difference between costs to provide a service and the rate at which the hospital is reimbursed.

³ Costs related to health professions education programs and medical research that the hospital sponsors.

⁴ Includes non-billed programs such as community health education, screenings, support groups, support services, cash and in-kind donations and community benefit operations.

Community Benefit Plan FY24

As a result of the FY22 Community Health Needs Assessment (CHNA), Saddleback Medical Center selected significant health needs it will address through its FY23-FY25 Implementation Strategy. The plan outlines the health needs the hospital will and will not address and the strategies it will use to address the selected health needs.

Significant Needs the Hospital Intends to Address

Saddleback intends to take actions to address the following health needs:

- Access to care
- Behavioral health (mental health and substance use)
- Chronic diseases
- Preventive practices

Using the lens of the social determinants of health and health equity, SMC will provide some additional attention to food insecurity as well as bringing community awareness to housing and homelessness as applied to these priority health needs.

Health Need: Access to Care

Goal: Increase access to health care for the medically underserved.

Strategies and Programs

Financial Assistance

Provide financial assistance through free and discounted care for health care services, consistent with the hospital's financial assistance policy.

Transportation and Prescription Medication Support

Provide transportation support for patients who cannot access health services because of lack of transportation. Provide low-income residents with low-cost or no-cost prescription medications.

Community Support

Provide cash and in-kind donations to nonprofit community organizations dedicated to increasing access to health care.

Social Determinants of Health and Health Equity

Work in collaboration with community agencies to address the health care needs of older adults. Collaborate with agencies to address the impact that social determinants of health and health

equity have on health care access.

Health Need: Behavioral Health (Mental Health and Substance Use)

Goal: Increase access to mental health and substance use services in the community.

Strategies and Programs

Health Education and Awareness

Increase community awareness of prevention efforts and availability of resources to address mental health and substance use and misuse concerns. Offer community health education, lectures, presentations, and workshops focused on mental health and substance use topics.

Community Screenings and Home Support

Participate in health and wellness fairs that include screenings for anxiety and depression. Provide mental health support for home-bound seniors.

Community Support

Provide cash and in-kind donations to nonprofit community organizations dedicated to increasing behavioral health awareness and services.

Collaborations

Support multisector collaborative efforts to increase access to behavioral health services.

Social Determinants of Health and Health Equity

Work in collaboration with community agencies to address the impacts that the social determinants of health and health equity have on behavioral health services.

Health Need: Chronic Diseases

Goal: Reduce the impact of chronic diseases on health and increase the focus on chronic disease prevention and treatment education.

Strategies and Programs

Health Education and Screenings

Offer health education workshops and presentations on chronic disease prevention, treatment, and management. Provide wellness fairs for older adults, including screenings.

Flu Vaccinations

Provide flu vaccinations, free to the public, in areas easily accessible to the general public.

Media and Health Awareness

Provide public health education in the media and community health awareness events to encourage healthy behaviors and prevent chronic diseases.

Support Groups

Offer support groups to assist those with chronic diseases and their families.

Collaboration

Work in collaboration with community agencies to address chronic disease prevention and treatment among older adults.

Community Support

Provide cash and in-kind donations to nonprofit community organizations dedicated to chronic disease prevention and treatment.

Social Determinants of Health and Health Equity

Work in collaboration with community agencies to address the impacts that the social determinants of health and health equity have on chronic diseases.

Health Need: Preventive Practices

Goal: Improve community health through preventive health practices.

Strategies and Programs

Health Education

Offer health education and resources focused on healthy living and disease prevention.

Screenings and Vaccines

Provide free health screenings to promote preventive care. Provide flu vaccinations, free to the public, in areas easily accessible to the general public.

Older Adult Services and Injury Prevention

Work in collaboration with community agencies to provide preventive services to older adults. Reduce injuries and falls among older adults through balance improvement and fall prevention classes.

Media and Health Awareness

Provide public health education in the media and community health awareness events to encourage healthy behaviors and promote preventive health care.

Community Support

Provide cash and in-kind donations to nonprofit community organizations to increase/expand preventive health services.

Social Determinants of Health and Health Equity

Work in collaboration with community agencies to address the impacts that the social determinants of health and health equity have on access to preventive practices.

Evaluation of Impact

SMC is committed to monitoring and evaluating key initiatives to assess the programs and activities outlined in this Implementation Strategy. We have implemented a system for the collection and documentation of tracking measures, such as the number of people reached or served, and collaborative efforts to address health needs. In addition, through our grants program, we track and report program outcomes. An evaluation of the impact of SMC's actions to address these significant health needs will be reported in the next scheduled CHNA.

Needs the Hospital Will Not Address

Since SMC cannot directly address all the health needs present in the community, we will concentrate on those health needs that can most effectively be addressed given our areas of focus and expertise. Taking existing hospital and community resources into consideration, SMC will not directly address the remaining health need identified in the CHNA, which was overweight and obesity.

Contact Information

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Community Benefit Contact

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