

## Community Benefit Plan Progress Report 2012

*Based on the Community Benefit Plan 2010 – 2012*

**Responding to the 2010-2012 Needs Assessment**



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## Sutter Health:

### Building Healthier Communities and Caring for Those in Need

Sutter Medical Center, Sacramento is affiliated with Sutter Health, a not-for-profit network of 48,000 physicians, employees, and volunteers who care for more than 100 Northern California towns and cities. Together, we're creating for a more integrated, seamless and affordable approach to caring for patients.

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#### **It's better for patients:**

We believe this community-owned, not-for-profit approach to health care best serves our patients and our communities – for multiple reasons. First of all, it's good for patients. According to the Journal of General Internal Medicine (April 2000), patients treated at for-profit or government-owned hospitals were two-to-four times more likely to suffer preventable adverse events than patients treated at not-for-profit institutions.

#### **Our stockholders are our communities:**

Investor-owned, for-profit health systems have a financial incentive to avoid caring for uninsured and underinsured patients. They also have a financial incentive to avoid hard-to-serve populations and "undesirable" geographic areas such as rural areas. In many Northern California's underserved rural locales, Sutter Health is the only provider of hospital and emergency medical services in the community.

#### **Providing charity care and special programs to communities:**

Our communities' support helps us expand services, introduce new programs and improve medical technology. Across our network, every Sutter hospital, physician organization and clinic has a special story to tell about fulfilling vital community needs.

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**Our Commitment to Community Benefit:** Meeting the health care needs of our communities is the cornerstone of Sutter Health's not-for-profit mission. This includes directly serving those who cannot afford to pay for health care and supporting programs and services that help those in financial need.

In 2012, our network of physician organizations, hospitals and other health care providers invested \$795 million in health care programs, services and benefits for the poor and underserved. This includes:

- The cost of providing charity care
- The unpaid costs of participating in Medi-Cal
- Investments in medical research, health education and community-based public benefit programs such as school-based clinics and prenatal care for patients.

Sutter Health's commitment to delivering charity care to patients continued to grow, reaching another all-time high of \$153 million in 2012 – or an average of nearly \$3 million per week.

# Executive Summary

Providing community benefits demonstrates our commitment to enhance the well-being of residents in our region, and creates access to healthcare for individuals, children and families who struggle against barriers such as poverty, disability and isolation. Sutter’s Community Benefit programs help people get healthy and stay healthy.

We have launched many programs to enhance health-related awareness and access; and we have partnered with organizations working on the front lines in response to behavioral issues and medical conditions afflicting the residents in our region. Our Community Benefit programs are designed to help the people who need it most.

As a health care organization our hospitals are open 24 hours a day and serve anyone who walks through the door, but we know that’s not enough to promote active, healthy communities. As a partner in building a healthier community, we must also reach into the community to locate the areas of need and provide services and resources to address those needs.

The Sutter Health Sacramento Sierra Region (SHSSR) considers five principles described in “Advancing the State of the Art in Community Benefit: A User’s Guide to Excellence and Accountability,” developed by the Public Health Institute when developing community benefit programs:

- Disproportionate unmet health-related needs - We strive to build and support programs that serve the people who need it most.
- Primary prevention - We develop programs that focus on keeping families healthy.
- A seamless continuum of care - We work to ensure our programs and services are linked.
- Capacity building - We seek to build the capacity of existing community assets.
- Collaborative approach - We can’t do it alone, so whenever possible, we partner with existing community and government agencies.

2012 Community Benefit Value	Sutter Health Sacramento Sierra Region
Benefits for the Poor and Underserved	\$159,840,171
Benefits for the Broader Community	\$6,413,342
<b>Total Quantifiable Community Benefit</b>	<b>\$166,253,513</b>

*The financial numbers above reflect the community benefit values for Sutter Health Sacramento Sierra Region (SHSSR), the legal entity that includes Sutter Medical Center, Sacramento. Other Sutter Health affiliates that are a part of SHSSR are Sutter Amador Hospital, Sutter Auburn Faith Hospital, Sutter Davis Hospital, Sutter Roseville Medical Center, and Sutter Solano Medical Center.*

## I. 2012 Report on Community Benefit Plan

The following pages will provide a progress report on the community benefit programs and activities conducted during the reporting year Sutter Medical Center, Sacramento. These programs were created in response to the 2010 Community Needs Assessment – a collaborative report that helps our partners, other health providers, public agencies and leaders identify and prioritize priority needs as they relate to the health of our communities.

The 2010 – 2012 priority needs for Sutter Medical Center, Sacramento are:

1. Ensuring Access to Primary Care and Mental Health Services
2. Preparing Our Community for Healthy Futures

For more information about the **2010 – 2012 Community Needs Assessment**, including quantitative and qualitative data, please visit our website at [www.HealthyLivingMap.com](http://www.HealthyLivingMap.com).

For more information on the **Community Benefit Plan 2010 – 2012** that this progress report pertains to, visit our website at [www.CheckSutterFirst.org/community](http://www.CheckSutterFirst.org/community)

## Ensuring Access to Primary Care and Mental Health Services

<b>Link to Community Needs Assessment</b>	The <b>Interim Care Program (ICP)</b> and <b>ICP Plus</b> helps Sutter Medical Center, Sacramento fulfill its mission to provide access to care for vulnerable and traditionally underserved residents. The ICP is a temporary respite program for discharged homeless patients. The program is designed to offer homeless patients a clean and safe place to heal for up to six weeks providing comprehensive wrap-around services like behavioral health services, permanent housing and supported entry into a ‘medical home’ in the community. Recent enhanced services include transition/processing meetings on-site each week facilitated by a counseling intern to address mental health issues and concerns.
<b>Program Description</b>	<p>Started in 2004, the ICP links homeless adults to vital community services while giving them a place to heal. The program offers three meals per day, medical follow up and case management. Patients are referred from the hospital to the Interim Care Program when they are well enough to go home, but need ongoing rest and follow-up treatment. Patients come for various reasons including wound care, recovery from surgery, or injury from an accident. Clients can stay in the program up to six weeks, depending on their medical condition.</p> <p>ICP Plus is a program designed for homeless patients discharging from SMCS, and is an enhanced version of the ICP, with patients needing a greater level of support and special resources. Services include liaison with discharge planners, nurse management, ongoing wrap around case management service, including, but not limited to housing assistance, insurance enrollment, substance abuse treatment, and provision of a safe clean place for people to heal for up to six weeks.</p>
<b>Goals and Objectives</b>	The clients who are enrolled in the ICP are homeless adult individuals who otherwise would be discharged to the street or cared for in an inpatient setting only. The program is designed to offer clients up to six weeks during which they can focus on recovery and developing a plan for their housing and care upon discharge. The program offers three meals per day, medical follow up and case management.
<b>Strategy</b>	<p>This innovative community partnership provides temporary respite housing in Sacramento that offer homeless men and women a place to recuperate from their medical conditions, link them to vital community services, and provide them a place to heal.</p> <p>WellSpace Health, a Federally Qualified Health Center, provides on-site nursing and social services to support clients in their recuperation and help them move out of homelessness. WellSpace case manager links clients with mental health services, substance abuse recovery, housing workshops and provides disability application assistance. The Salvation Army provides 18 beds in a designated wing of the shelter where clients have three meals a day and a safe, clean place to recover from their hospitalizations. The wing is wheelchair accessible, has six rooms – each with three hospital beds, and a place for residents to store their medications and wound care supplies.</p>
<b>Baseline Information</b>	Without the Interim Care Program, many of these patients would either be held in the hospital longer than necessary, at great cost to the hospital, or would be discharged to the streets. By connecting with these patients and providing them with wrap-around services, we are able to link a vulnerable and often underserved population with the resources they so desperately need. Often times, the intervention of a program like the ICP sets these patients on a positive course and breaks the cycle of homelessness, untreated mental illness and substance abuse.
<b>Affiliate’s Contribution or Program Expense</b>	ICP - \$78,000    ICP Plus - \$150,000

<b>Results (continued)</b>	More than 928 patients have successfully discharged from this program, with an average length of stay of 23 days. ICP provides. 81% reduction in inpatient bed days and 33% reduction in ED visits.
<b>Amendment to Community Benefit Plan</b>	N/A

## Ensuring Access to Primary Care and Mental Health Services

<b>Link to Community Needs Assessment</b>	The <b>T3 program (Triage, Transport and Treatment)</b> connects patients to the services they need at the easiest level of care and right intensity of support.
<b>Program Description</b>	Sutter Medical Center, Sacramento is a founding partner of T3, a program launched in 2006 that provides services to patients who seek emergency department care for needs that are best addressed through preventive measures and by primary care providers. This program is a model for the kind of change being called for in various health care reform plans.
<b>Goals and Objectives</b>	Moving these patients from the emergency department improves the patients' health by providing them with the appropriate care in the right setting, while reducing the wait for those seeking care for real medical emergencies, and dramatically reducing costs to our health care system.
<b>Strategy</b>	T3 provides services to patients who seek emergency department care for needs that are best addressed through preventive measures and by primary care providers. This program is a model for the kind of change being called for in various health care reform plans.
<b>Baseline Information</b>	A huge obstacle for healthcare providers, including Sutter Medical Center, Sacramento, is the inappropriate use of the Emergency Department. This issue is not only problematic for the healthcare provider, but also for the patients who are not receiving the appropriate care in the appropriate place, at the appropriate time. Programs like T3 seek to connect people who frequently and inappropriately use the Emergency Department to the correct resources, including housing and mental health services, which is key to the population who utilizes T3.
<b>Affiliate's Contribution or Program Expense</b>	\$750,000
<b>Results</b>	T3 is a Sacramento and Placer County program designed collaboratively by SAFH, SRMC, SMCS and WellSpace Health. T3 meets the needs of 233 active clients who are seeking ED treatment for non-urgent issues by bringing them out of the ED and ensuring that they are engaged in comprehensive health, behavioral health, and ancillary services in the community. While persons served may be directed to seek urgent care in the ED following admission to T3, these admissions are medically necessary due to the medical complexity attending T3 clients. Meanwhile, routine medical care occurs in a 'medical home' in the community. More than \$1.5M savings in reduced cost for first 850 T3 clients, with 65% reduction in ED utilization.
<b>Amendment to Community Benefit Plan</b>	N/A

## Ensuring Access to Primary Care and Mental Health Services

<b>Link to Community Needs Assessment</b>	The <b>Emergency Department Navigator program</b> seeks to connect with patients who are inappropriately accessing care at the Sutter Medical Center, Sacramento Emergency Department.
<b>Program Description</b>	ED Navigators attend to patients in the Emergency Department (upon referral from SHSSR employee and after patient agreement) to provide assistance in identifying primary care providers and to determine other client needs. Often, these patients are connected with programs like T3.
<b>Goals and Objectives</b>	The goal of the ED Navigator is connect patients with the appropriate resources and medical care.
<b>Strategy</b>	Emergency Department Navigators are employees of WellSpace and reside in the Emergency Department to direct those who need medical homes or access to services, to the right care in the right place at the right time.
<b>Baseline Information</b>	The ED Navigator is a visible ED-based staff member who is able to provide referrals to treatment for those who do not have urgent needs. For referrals to Effort clinics, the Navigator use their tablet PC to make appointments on the spot and provide referrals with an appointment card listing provider, visit date and location. Referrals sources will include: The T3 program for persons who are frequent non-urgent users; Effort clinics for persons needing a medical home; County clinic(s) for persons needing CMISP; Other community clinics based on clinical or other socio-cultural need.
<b>Affiliate's Contribution or Program Expense</b>	\$150,000
<b>Results</b>	WellSpace Health houses Emergency Department Navigators in SMCS EDs from 12 noon-8:30 pm every day of the year. Rather than focusing on frequent users, these Navigators approach all ED users to assess and address health access needs, including: ensuring access to services at The Effort and other community health settings; directing and providing functional support for benefits acquisition; engaging hard-to-meet GMC providers; assistance with securing benefits, housing, and other ancillary supports. To date, ED Navigators provided 1,059 referrals to insurance, medical, income, housing and other services.
<b>Amendment to Community Benefit Plan</b>	N/A

## Ensuring Access to Primary Care and Mental Health Services

<b>Link to Community Needs Assessment</b>	The <b>Serial Inebriate Program (SIP)</b> was launched in 2006, to address the health, safety, and housing needs of chronic homeless adults living on the streets of Sacramento.
<b>Program Description</b>	<p>The Serial Inebriate Program (SIP) is a result of a partnership between Sutter Medical Center, Sacramento and the Downtown Sacramento Partnership (DSP) Navigators. Using a model with great success, the DSP Navigators reach out and build a one-on-one rapport with homeless adults living on downtown streets. The Navigators gradually develop relationships and eventually connect individuals with local community service programs. The Navigators don't move on at that point; they continue working closely with each individual, facilitating access to care and finding ways to improve their living conditions. Another SIP partner is the Sacramento district attorney's office and the downtown community prosecutor, which both work with SIP patients and homeless adults who have been arrested repeatedly for public intoxication.</p> <p>Though other cities are beginning to offer similar programs, the Sacramento programs offer a unique twist. The SIP unites downtown and midtown Sacramento businesses, nonprofit organizations, government, enforcement agencies and Sutter Medical Center, Sacramento in a truly collaborative effort.</p>
<b>Goals and Objectives</b>	The goal of the SIP is to move homeless men and women off the streets, and connect them with the medical services and housing resources they wouldn't otherwise have access to. The SIP program provides early intervention and a lasting solution, by linking the homeless to housing, primary care, substance abuse resources and mental health services. Instead of relying on police or other non-profit agencies that work to alleviate homelessness and the problems associated with it, the SIP is a partnership that helps break the cycle and help these men and women move off the streets and on with their lives.
<b>Strategy</b>	To qualify, individuals have been arrested, taken to detox centers or emergency departments more than 25 times in a 12-month period. The program consists of a partnership between Sutter Medical Center, Sacramento, Sacramento's Navigator program (sponsored by the Downtown Partnership, an organization that supports the business community), and Sacramento Self Help Housing.
<b>Baseline Information</b>	For many years, homelessness seemed to be an eternal, incurable epidemic. In recent years, however, the connection between homeless and hopeless has begun to give way. The shift has come about through an innovative idea that is appearing in a growing number of cities, including Sacramento. The approach offers chronically homeless adults an important ingredient missing in past programs—the opportunity to move into permanent housing and medical homes.
<b>Affiliate's Contribution or Program Expense</b>	\$50,000
<b>Results</b>	Since 2009, the number of homeless people chronically abusing a substance decreased by about 28%. The number of sheltered people with a chronic substance abuse issue decreased by about 20% while unsheltered people with a chronic substance abuse issue decreased by about 38%. In 2011, the Navigator program placed 117 people in permanent housing solutions, in addition to connecting them to necessary health services, substance abuse treatment and countless other resources needed to help get people off the street and back on their feet. All SIP participants are linked to community-based health and mental services. Since the implementation of the program, the number of publicly intoxicated individuals referred to the Sacramento Police Department has decreased by 90%. Police referrals from business owners have gone from more than 1,100 in 2004 to less than 150 in 2010. In the 12 months before enrollment in SIP, the cost of jail, in-patient

	detox, emergency department visits and hospitalization averaged \$68,760 per person. After just six months in the program, the average cost of services per person was reduced to 18,700.
<b>Amendment to Community Benefit Plan</b>	N/A

## Preparing Our Community for Healthy Futures

<b>Link to Community Needs Assessment</b>	<b>Free Mammogram Screening Program</b> throughout the Sutter Health Sacramento Sierra Region.
<b>Program Description</b>	Sutter's Diagnostic Imaging centers across the region are giving free digital screening mammograms to uninsured women in honor of National Breast Cancer Awareness Month. Comprehensive, fully integrated imaging services are part of the Sutter Health all-inclusive approach to patient care.
<b>Goals and Objectives</b>	The goal of this outreach effort was to not only provide free screenings to underinsured women in our communities, but was also an opportunity to provide women with information on health and insurance resources.
<b>Strategy</b>	Free mammograms were offered in various locations, at various times, throughout the SHSSR region, to ensure as many women as possible were able to take advantage of this effort. In addition, a packet of follow up resources was created in the event that a participant had an abnormal screening. Sutter Diagnostic staff was also given resources to provide to women who needed diagnostic follow up and/or treatment.
<b>Baseline Information</b>	Of the eight events we held in Roseville, Auburn, Elk Grove, Amador, Fairfield, Vallejo, Sacramento and Davis, all of them filled to capacity within a short period of time. This tells us that a great need exists in the community for events of this nature and as a result, we hope to expand this event to accommodate more women next year.
<b>Affiliate's Contribution or Program Expense</b>	\$17,499
<b>Results</b>	Throughout the month of October, Sutter Diagnostic Imaging centers across the region provided uninsured/underinsured women the opportunity to receive free digital mammograms. As a result of these collaborative events, we were able to screen 358 uninsured women.
<b>Amendment to Community Benefit Plan</b>	N/A

## Preparing Our Community for Healthy Futures

<b>Link to Community Needs Assessment</b>	<b>Sutter Center for Health Professions (SCHP)</b> helps people of all ages enter a career in health care is an important part of what we do.
<b>Program Description</b>	The Sutter Center for Health Professions is a partnership between the Sutter Health Sacramento Sierra Region and the Los Rios Community College District that helps address the nursing shortage. Since August 2003, SCHP has been providing opportunities for a portion of students to complete nursing pre-requisite classes, or be accepted into the nursing program if the appropriate coursework has been successfully completed and other admission criteria is met.
<b>Goals and Objectives</b>	The SCHP reaches and recruits from at-risk communities and provides steady career opportunities to those who might not otherwise have access to health care career education.
<b>Strategy</b>	The Sutter Center for Health Professions (SCHP) is an 18-month accelerated nursing program that allows these new nurses to put their skills to use and immediately begin work as registered nurses in the greater Sacramento area community.
<b>Baseline Information</b>	Through strategic programming, the Sutter Health Sacramento Sierra Region offers opportunities for people to explore in health care related careers, which is critically important as we work to grow capacity and fill the workforce gaps in the healthcare industry.
<b>Affiliate's Contribution or Program Expense</b>	\$1,637,580
<b>Results</b>	The Sutter Center for Health Professions has graduated a total of 447 RNs to support hospitals in Northern California since the first graduating class in 2005. SCHP admits 55 to 110 students annually.
<b>Amendment to Community Benefit Plan</b>	N/A

## II. 2012 Community Benefit Values

Sutter Health affiliates and many other health care systems around the country voluntarily subscribe to a common definition of community benefit developed by the Catholic Health Association. Community benefits are programs or activities that provide treatment and/or promote health and healing as a response to community needs.

The community benefit value for Sutter Medical Center, Sacramento is calculated in two categories: **Benefits for the Poor and Underserved** and **Benefits for the Broader Community**. Below are definitions for each community benefit activity:

### **Benefits to the Poor and Underserved**

- **Traditional Charity Care** – Free or discounted health care services provided to the uninsured and underinsured populations.
- **Unreimbursed Cost to Medi-Cal** – The “shortfall” created when the facility receives payment below the costs of treating public beneficiaries.

### **Benefits for the Broader Community**

- **Non-Billed Services** – Activities with no individual patient bill, therefore no deduction from revenue is shown in the traditional statement of revenues and expenses.
- **Cash Donations and In-Kind Donations** – Dollars and other items such as staff time and supplies donated by a facility to a community-based program or agency.
- **Education & Research** – All community, patient, and medical education such as community lectures, nursing student rotations and physician/clinician training.

# Community Benefit Summary 2012

## Sutter Health Sacramento Sierra Region

<b>Benefits for the Poor and Underserved</b>	<b>Community Benefit</b>
<b>Traditional Charity Care</b>	\$50,485,406
<b>Unreimbursed Costs of Public Programs</b>	
<b>Medi-Cal</b>	\$69,945,614
<b>Other Public Programs</b>	\$31,448,683
<b>Other Benefits for the Poor and Underserved</b>	\$7,960,468
<b>Total Quantifiable Benefits for the Poor and Underserved</b>	<b>\$159,840,171</b>

<b>Benefits for the Broader Community</b>	<b>Community Benefit</b>
<b>Non-Billed Services</b>	\$56,573
<b>Education &amp; Research</b>	\$5,019,777
<b>Cash and In-Kind Donations</b>	\$1,041,882
<b>Other Community Benefits</b>	\$295,110
<b>Total Quantifiable Benefits for the Broader Community</b>	<b>\$6,413,342</b>

*The financial information above reflects the community benefit values for Sutter Health Sacramento Sierra Region. This includes the total benefits for the poor and underserved and broader community for the following hospitals:*

- *Sutter Amador Hospital*
- *Sutter Auburn Faith Hospital*
- *Sutter Davis Hospital*
- *Sutter Medical Center, Sacramento*
- *Sutter Roseville Medical Center*
- *Sutter Solano Medical Center*

*For further detail regarding the community benefit values for Sutter Medical Center, Sacramento specifically, please contact Kelly Brenk at (916) 541-0519 or [brenkkm@sutterhealth.org](mailto:brenkkm@sutterhealth.org).*

### **III. 2012 List of Community Partners**

At times, Sutter Medical Center, Sacramento community benefit efforts may involve investing in partnerships that fundamentally improve community health. In doing so, we acknowledge that our role goes beyond providing care or a service to supporting those organizations that have shown measurable impact in meeting an identified community need.

We are proud to support the following community organizations as we work collaboratively to help create healthier communities.

Center for Fathers and Families

City of Sacramento Council

City of Sacramento

Cottage Housing, Inc.

Cover the Kids

Downtown Sacramento Partnership

Francis House

Full Circle Treatment Center

Grace Point Community Clinic

River City Food Bank

Sacramento Area Congregations Together (ACT)

Sacramento Ending Chronic Homelessness Initiative

Sacramento Self Help Housing Inc.

Sacramento Physicians Initiative to Reach-out, Innovate and Teach (SPIRIT)

Society for the Blind

St. John's Shelter for Women and Children

WellSpace Health

The Salvation Army

Terra Nova Counseling

WEAVE, Inc.