# TABLE OF CONTENTS

<table>
<thead>
<tr>
<th>Section</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>Executive Summary</td>
<td>3</td>
</tr>
<tr>
<td>Mission Statement</td>
<td>4</td>
</tr>
<tr>
<td><strong>Hospital Leadership</strong></td>
<td></td>
</tr>
<tr>
<td>Reporting &amp; Communications</td>
<td>5</td>
</tr>
<tr>
<td>Governing Board</td>
<td>5</td>
</tr>
<tr>
<td>Community Benefits Committee</td>
<td>6</td>
</tr>
<tr>
<td>Summary of Community Needs Assessment</td>
<td>7</td>
</tr>
<tr>
<td>Community Benefit Planning Process</td>
<td>8</td>
</tr>
<tr>
<td><strong>2012 Community Benefits</strong></td>
<td></td>
</tr>
<tr>
<td>Measurable Objectives</td>
<td>9</td>
</tr>
<tr>
<td>Other Community Benefits</td>
<td>10</td>
</tr>
<tr>
<td>Budget</td>
<td>12</td>
</tr>
<tr>
<td>Hospital Services</td>
<td>13</td>
</tr>
<tr>
<td>Community Benefit Coordination Policy</td>
<td>14</td>
</tr>
<tr>
<td>Community Benefit Report Form</td>
<td>15</td>
</tr>
<tr>
<td>Community Benefit Summary</td>
<td>17</td>
</tr>
</tbody>
</table>
EXECUTIVE SUMMARY

The 2012 Community Benefit Report is submitted in accordance with the requirements of California Senate Bill 697. The report, prepared by Courtney Rasmussen, details Feather River Hospital's continued efforts to improve the quality of life for citizens in Butte County.

Since 1950, the hospital has dedicated a significant amount of its employee time and services to the community. With expanded health education programs and a growing number of services, Feather River Hospital is poised to continue to improve the total wellness of its community for many years to come.

The following report illustrates this commitment and the achievements of our employees during 2012.
MISSION STATEMENT

To share God's love by providing physical, mental and spiritual healing.
HOSPITAL LEADERSHIP

Reporting & Communications

Maureen M. Wisener, Assistant Vice-President, Marketing & Communications, heads the hospital marketing team, which coordinates marketing, community outreach, volunteer services, and community benefit planning and reporting. Maureen is available at: (530) 876-7208.

Governing Board

The Governing Board of Feather River Hospital ensures the hospital’s community service role is in concert with the hospital’s mission statement, and the hospital strategic plan. Members include:

Douglas Anderson, MD – Chief of Staff

Kurt Bower, MD

Arthur Brinckerhoff, MD

Robert Carli, Healthcare Administrator

Becky Damazo, Nurse and Professor at the School of Nursing / CSU, Chico

Kevin Erich, President & CEO / Feather River Hospital

Allin Karls, Local Business Owner

Carrie Lambert, Community Resident

Gary Manwill, Local Business Owner

Sam Mazj, MD, FCAP

Anthony J. Nasr, PhD, MD

John D. Rasmussen, Northern California Conference of Seventh-day Adventists

Kim Stewart, Local Community Member

Erwin Williams, Local Attorney

Bill Wing, Executive Vice President / Adventist Health

Craig Woodhouse, Local Community Member
Community Benefits Committee

Maureen M. Wisener, Assistant Vice President, Marketing & Communications

Courtney Rasmussen, Graphic Design Specialist

Lis Roberts, Foundation Assistant

Rebecca Williams, Volunteer Services Manager

Brad Brown, Director of Chaplain Services
Assessing a community’s health needs is a task that looks beyond the need for acute medical intervention to the whole range of factors that make a person or a community healthy, including social, environmental and economic factors.

Feather River Hospital’s primary service area encompasses the Paradise Ridge area of Butte County, where an estimated 45,000 people live. A significantly higher percentage of seniors live on Paradise Ridge than in another parts of the county or state, and a lower percentage of ethnic minorities reside here.

Health Status Profiles of California Counties and a community needs assessment process suggests that the major health topics of concern for Butte County are maternal and infant health, chronic diseases (cancer, diabetes and heart disease), and obesity. Additional issues facing the community include behavioral health concerns (such as depression) and difficulty finding a physician. As far as risk factors are concerned, somewhat higher smoking rates are evident in the region, and adolescent alcohol and drug abuse continues to be a concern.

An issue in the community that was presented internally in the organization is the struggle for many of the seniors and other members of the community to keep track of appropriate information on medications. This includes not only knowing what medications they are currently taking but have taken in the past, and also what medical conditions care providers may need to know about. With a high number of seniors in the community, access to medical information in emergencies is also a noted challenge.

Community residents were asked what services they felt were important, but not available in the community. Responses were minimal, indicating that most of the community felt comfortable with the level and breadth of services provided in the community. These responses primarily focused on accessibility to primary care physicians and affordable health insurance.
COMMUNITY BENEFIT PLANNING PROCESS

Feather River Hospital’s planning process for community benefits is generated from the hospital’s strategic plan and is developed through outreach strategies implemented through the Marketing and Communications department and facilitated through committee participation. This group is organized with hospital department leaders and volunteers.

The process, as guided by Feather River Hospital’s mission, vision, and goals, helps direct the types of initiatives that the hospital undertakes. Plans include annual benefit projects like a free flu clinic, low cost health lectures by local physicians, quarterly health alert screenings and health and safety expo.
2012 COMMUNITY BENEFITS

Measurable Objectives

Objective #1: Provide increased awareness and education for medication and disease information for use in emergencies.

Strategies for meeting the objective:
- Implement Pharmacy Brown Bag Program education sessions
- Distribute “Vial of Life” through Lifeline, Meals on Wheels, and booth at community events.
- Utilize Parish Nursing Program to introduce “Vial of Life” and Medication education

Evaluation:
- Held a Brown Bag Session/Lecture in September for the Community offering medication information
- Coordinated with the Town of Paradise to create continuity between similar projects from other agencies of the town rather than add to existing efforts. Effectively adopted the “In Case of Emergency” packets supported by a combination of grants as well as city, county and Feather River Hospital funding. Packets not only include “Vial of Life” information but emergency and disaster preparedness resources
- Distributed 150 packets at FRH Health and Safety Expo and 200 at community volunteer events focused at the elderly population
- Set up a system to support and maintain distribution that will increase results for 2013
- Parish Nursing Program was decided not a good avenue for distribution at the time and this option is being postponed

Objective #2: Assist Butte County Health Department with distribution of Flu Vaccinations

Strategies for meeting the objective:
- Coordinate communication and logistics with Butte County to manage flu shot clinics in Paradise for the elderly and those with chronic disease, or for caregivers of these same individuals

Evaluation:
- Successfully distributed over 1,000 free flu-shots shots at our annual Drive-Thru Flu Clinic, our Health and Safety Expo and other small clinics
- Held a clinic midweek in the afternoon to help increase turnout to clinic due to more road traffic driving by the event
Other Community Benefits

Lifeline Personal Emergency System

The Lifeline system is supported and managed through the Feather River Hospital Volunteer Services. Lifeline permits independent living for stroke or heart attack patients, the elderly or those with disabilities. Area residents on the Lifeline program need only touch a button to communicate instantly with trained Lifeline central staff. In the event of an emergency, subscribers simply push the “help” button (worn as a necklace or on a wristband) and help is sent promptly to the home.

Monthly cost for individual subscription to Lifeline is quite affordable, since volunteers operate the program. The Volunteers maintain over 300 local Lifeline units.

Meals on Wheels

Meals on Wheels is available to any person who does not have access to adequate nutrition, due to either a personal health problem or caring for another person; meal programs are provided at low cost.

All meals are prepared in the Nutritional Services Department at Feather River Hospital and then delivered to homes by volunteers. In 2012 the Meals on Wheels program delivered 23,200 meals to homebound residents.

Community Health and Safety Expo

Feather River Hospital sponsors a Health & Safety Expo each year. In 2012 the Expo provided 48 informational booths from various hospital departments as well as from community health and service organizations. It was held in conjunction with the Paradise Adventist Academy fall festival, reaching more families as a result. Approximately 800 community members attended the event. Free flu shots were administered at this event (see Obj. #2).

More Community Benefits

2012 Flu Clinics – 1,000 free flu vaccines administered to community members
Hospital Volunteers – Contributed 67,000 hours of service in 2012
Paradise Hospice – Bereavement counseling and support groups
Health Alert Screenings
Maternal Child Health Program (Healthy Mothers)
Diabetes Education Program
Blood Pressure Clinic
Pregnancy Hotline
Faith Community Nursing (Parish Nursing Program)
Gift of Giving - Thanksgiving Food Baskets for more than 260 families
Physician Referral Line
Other Community Benefits (Continued)

Dinner with the Doctor Lecture Series
Medical Nutrition Therapy Program
Respiratory mask distribution during wildfire season
Salvation Army Angel Tree Participant
Smoking Cessation Program
Cancer Center Support groups, including survivor celebrations and a “Kid's Camp”
Budget

Feather River Hospital does not directly allocate funds to community benefits planning or reporting. The time and expense of such reporting is allocated to the Marketing and Communications Department. This task is estimated to take one full time dedicated resource approximately 40-60 hours a year for the planning process and another 40 hours for data collection, analysis and reporting. In addition, time is periodically involved in committee meetings.
HOSPITAL SERVICES

Total Beds
- 12 ICU
- 12 DCU
- 15 Perinatal
- 61 General acute beds

Services Offered
- Ambulatory Infusion Center
- Anticoagulation Clinic
- Cancer Center
- Cardiac Catheterization
- Cardiac Rehabilitation
- Clinical Laboratory
- Critical Care
- Diabetes Education
- Emergency Department
- Faith Community Nursing (Parish Nursing Program)
- Feather River Health Center (Rural Health Clinic)
- Home Health
- Home Oxygen Service/Home Medical Service
- Lifeline Emergency Response System
- Lifestyle Medicine
- Lymphedema Clinic
- Maternity Services (Birth Day Place)
- Meals on Wheels
- Medical Imaging
- Midwifery Services
- OB/Gyn and Women’s Health
- Inpatient/Outpatient Pharmacies
- Paradise Hospice and Hospice House
- Pulmonary Services
- Rehabilitation Services (Physical Therapy/Speech Therapy/Occupational Therapy)
- Same Day Services
- Sleep Medicine
- Tobacco Cessation
POLICY: COMMUNITY BENEFIT COORDINATION

POLICY SUMMARY/INTENT:

The following community benefit coordination plan was approved by the Adventist Health Corporate President's Council on November 1, 1996, to clarify community benefit management roles, to standardize planning and reporting procedures, and to assure the effective coordination of community benefit planning and reporting in Adventist Health hospitals.

POLICY: COMPLIANCE – KEY ELEMENTS

1. The Adventist Health OSHPD Community Benefit Planning & Reporting Guidelines will be the standard for community needs assessment and community benefit plans in all Adventist Health hospitals.

2. Adventist Health hospitals in California will comply with OSHPD requirements in their community benefit planning and reporting. Other Adventist Health hospitals will provide the same data by engaging in the process identified in the Adventist Health OSHPD Community Benefit Planning & Reporting Guidelines.

3. The Adventist Health Government Relations Department will monitor hospital progress on community needs assessment, community benefit plan development, and community benefit reporting. Helpful information (such as schedule deadlines) will be communicated to the hospitals' community benefit managers, with copies of such materials sent to hospital CFOs to ensure effective communication. In addition, specific communications will occur with individual hospitals as required.

4. The Adventist Health Budget & Reimbursement Department will monitor community benefit data gathering and reporting in Adventist Health hospitals.

5. California Adventist Health hospitals' finalized community benefit reports will be consolidated and sent to OSHPD by the Government Relations Department.

6. The corporate office will be a resource to provide needed help to the hospitals in meeting both the corporate and California OSHPD requirements relating to community benefit planning and reporting.

AUTHOR: Administration
APPROVED: AH Board, SLT
EFFECTIVE DATE: 6-12-95
DISTRIBUTION: AHEC, CFOs, PCEs, Hospital VPs, Corporate AVPs and Directors
REVISION: 3-27-01, 2-21-08
REVIEWED: 9-6-01; 7-8-03
Return to Debbie Christian- Accounting Office (Ext 8126)

Hospital _________________________________________ Date _______________________

Service/Program _________________________________ Target Population ______________________________

The service is provided primarily for  ☐ The Poor  ☐ Special Needs Group  ☐ Broader Community

Coordinating Department ______________________________________________________

Contact Person ______________________________________ Phone/Ext __________________________

Brief Description of Service/Program ________________________________________________

Caseload ________ Persons Served or _________ Encounters

<table>
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<tr>
<th>Names of Hospital Staff Involved</th>
<th>Hospital Paid Hours</th>
<th>Unpaid Hours</th>
<th>Total Hours</th>
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Total Hours

1. Total value of donated hours (multiply total hours above by $41.76) _____________

2. Other direct costs
   Supplies _____________
   Travel Expense _____________
   Other _____________
   Hospital Facilities Used ________ hours @ $ ________/hour _____________

3. Value of other in-kind goods and services donated from hospital resources
   Goods and services donated by the facility (describe): ____________________________

4. Goods and services donated by others (describe): ____________________________

5. Indirect costs (hospital average allocation ________%) _____________

Total Value of All Costs (add items in 1-5) _______________

6. Funding Sources
   Fundraising/Foundations _____________
   Governmental Support _____________

Total Funding Sources (add items in 6) _______________

Net Quantifiable Community Benefit
(subtract “Total Funding Sources” from “Total Value of All Costs”) ________________________

PLEASE USE OTHER SIDE TO REPORT NON-QUANTIFIABLE COMMUNITY BENEFITS AND HUMAN INTEREST STORIES
NON-QUANTIFIABLE COMMUNITY BENEFIT AND HUMAN INTEREST STORIES

Please fill in the date and complete the lines above the table on other side of worksheet

Who: ______________________________________________________________________________
___________________________________________________________________________________
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What: ______________________________________________________________________________
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When: ______________________________________________________________________________
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Where: ______________________________________________________________________________
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How: ________________________________________________________________________________
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Additional information may be obtained by contacting: _________________________________
___________________________________________________________________________________
___________________________________________________________________________________
Phone: __________________ Fax: _______________ Email: _____________________________

PLEASE USE OTHER SIDE TO REPORT QUANTIFIABLE COMMUNITY BENEFITS
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<tr>
<th>CASELOAD</th>
<th>TOTAL COMMUNITY BENEFIT COSTS</th>
<th>DIRECT CB BENEFIT COSTS</th>
<th>UNSPONSORED COMMUNITY BENEFIT COSTS</th>
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<tr>
<td></td>
<td>NUMBER OF PROGRAMS</td>
<td>PERSONS SERVED</td>
<td>UNITS OF SERVICE</td>
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<tr>
<td><strong>BENEFITS FOR THE POOR</strong></td>
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<tr>
<td>Traditional charity care</td>
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<tr>
<td>Public programs - Medicaid</td>
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<td>Other means-tested government programs (Indigent care)</td>
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<td>590</td>
<td>590 Encounters</td>
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<tr>
<td>***Non-billed and subsidized health services (3)</td>
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<tr>
<td>Cash and in-kind contributions for community benefit (5)</td>
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<td>Community building activities (6)</td>
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<td><strong>TOTAL BENEFITS FOR THE POOR</strong></td>
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<td><strong>BENEFITS FOR THE BROADER COMMUNITY</strong></td>
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<td>Medicare</td>
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<td>Community health improvement services (1)</td>
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<tr>
<td>Health professions education (2)</td>
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<tr>
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<td>Community building activities (6)</td>
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<td><strong>TOTAL BENEFITS FOR THE BROADER COMMUNITY</strong></td>
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**TOTAL COMMUNITY BENEFIT** | | | | 108,169,017 | 62.68% | 76,091,082 | 29,077,938 | 16.85% |

*Persons living in poverty per hospital’s charity eligibility guidelines
**Community at large - available to anyone
***AKA low or negative margin services