



2011-2012
Community Benefit Plan

NorthBay Medical Center – Fairfield
NorthBay VacaValley Hospital – Vacaville

NORTHBAY HEALTHCARE MISSION

NorthBay Healthcare began over 50 years ago as the dream of community leaders committed to public service. These leaders initiated a fund drive that built Intercommunity Memorial Hospital, Solano County's first 24-hour health care facility. That hospital grew to become NorthBay Medical Center, and NorthBay VacaValley Hospital followed in 1987 after a successful \$1.2 million community fund raising project.

To solidify the spirit of public service that became the foundation of NorthBay Healthcare, the original hospital's founding fathers drafted a mission statement that the organization serves as a community resource to ensure that the acute care needs of local residents were met. Of course, health care has changed dramatically in the last 50 years, and the shift to managed care and other market pressures demand that health care organizations provide more to their community than acute care services alone. NorthBay Healthcare strives to offer our community a continuum of services, from education and prevention to advanced hospital based specialty care.

The NorthBay Healthcare board of directors adopted a mission statement in the fall of 2002 (and reconfirmed it in 2010) that is simple, yet ambitious and essential to the well-being of the community we serve.

NorthBay Healthcare Mission: *Compassionate Care, Advanced Medicine, Close to Home*

As a part of our mission, NorthBay Healthcare developed and began implementing a community benefits plan in 1988. The organization's response to the Senate Bill 697 reporting requirement is a part of NorthBay Healthcare's long history of community benefit initiatives.

THE COMMUNITY BENEFITS PLAN PROCESS

Our Methods for Meeting Our Goals

NorthBay Healthcare is committed to improving the health of the Solano County community. To augment our independent efforts, NorthBay Healthcare also pursues its mission through participation in the Solano Coalition for Better Health. Our board of directors understands that medical care is not the only factor that influences community health. Adequate housing and nutrition, education, employment and a feeling of hope and well being also impact community wellness. By working with the Coalition, NorthBay Healthcare is able to reach beyond the walls of our facilities and positively affect a number of community health needs, in addition to medical care.

Through the Coalition, NorthBay Healthcare works collaboratively with a network of other community organizations. We are able to offer an array of healthcare services -- our area of expertise -- and benefit from the expertise of others in addressing broader social issues. As a founding member of the Coalition, NorthBay Healthcare and our board of directors play an integral role in the governance, funding and implementation of Coalition community health improvement projects. Because of this involvement, many of NorthBay Healthcare's community benefits goals and objectives are planned and completed through the Coalition.

HISTORY OF THE SOLANO COALITION FOR BETTER HEALTH

From Crisis Came Innovation and Success

The crisis that launched the Solano Coalition for Better Health occurred in 1988. A much-needed primary care clinic in a low-income Vallejo neighborhood was in danger of closing. A small group of local physicians, government officials and hospital administrators – including NorthBay Healthcare administrative staff -- met to stave off the closure. This meeting proved to be a success, and their efforts to preserve an under-funded community clinic grew to become the Solano Coalition for Better Health. With the Coalition, the local health, government and social services communities created a vehicle that enabled them to begin addressing the complex economic, social and historical events that are transforming communities and health care delivery systems around the nation, including our own.

As the Coalition matured into a 501-C-3 corporation, it became the meeting ground for people interested in improving the health status of Solano County residents. The Coalition's membership then grew to include representatives from city and county governments, each of Solano County's private health care systems, the Medical Society, Kaiser Permanente, community leaders, non-profit agencies, business leaders and community advocates. With this broad-based membership, the Coalition developed a vision of community health that extended to social services, health promotion, public protection, employment and education.

In July 2004, NorthBay Healthcare and its partners, Sutter Solano and Kaiser, were awarded the American Hospital System's NOVA award for exceptional community service and partnerships in recognition of the organizations accomplishments through their participation in the Coalition for Better Health.

SOLANO COALITION FOR BETTER HEALTH

MISSION

Since its inception in 1988, and reaffirmed in 2005, the Coalition's mission has been and remains "to promote the health and quality of life of communities, neighborhoods, and people of Solano County by providing leadership, focusing resources, and developing partnerships." The Coalition's vision is to become "a nationally recognized model of public and private partnerships creating systems change in the provision of care and services to promote and maintain the health and safety of the people and their communities." The Eight Core Values of the Coalition are collaboration, diversity, innovation, outcomes-driven, awareness, initiative, individual responsibility and commitment.

NEEDS ASSESSMENT

In the spirit of collaboration and to ensure local health resources are coordinated and used most effectively, NorthBay conducts its Needs Assessment and resource evaluation with the broad coalition of county health organizations that are part of the Solano Coalition for Better Health (the Coalition). The Coalition includes:

- NorthBay Healthcare
- Sutter Health
- Kaiser Permanente
- The Partnership HealthPlan of California (the local Medi-Cal managed care plan)
- The Solano County Department of Health and Social Services
- The Community Clinic Alliance
- Solano County Superintendent of Schools
- The Solano County Medical Society
- Solano Regional Medical Group
- Touro University
- Representatives from Solano County's cities, employers, elected representatives and social services and religious organizations.

NorthBay Healthcare has played a leadership role in the Coalition from the group's inception, with NorthBay's commitment established by our board of directors.

Solano County's three hospitals have collaborated among themselves and with others to conduct a joint community health assessment since 1995. Rather than conducting a broad based assessment where the data change little from study to study, the hospital partners, the Coalition and Solano County have chosen instead to study a particular aspect of community health in depth in each of their triennial health assessments. The 2007 assessment focuses on the healthcare safety net in Solano County and a follow-up study in 2010 examining the resources available in the county to care for those with chronic and persistent mental illness.

The purpose of the assessment was to understand the characteristics of the uninsured and underinsured and how this population has changed over time and then to examine the strengths and vulnerabilities of the public and private healthcare providers in Solano that care for the uninsured and underinsured. While the findings highlight a number of areas where there has been great improvement, three significant areas remain that deserve further attention:

- Improving access to and use of prenatal care in the first trimester
- Reducing use of the community EDs for routine care
- Planning for growth in safety net services to meet expected future growth in demand
- Addressing the complex needs of the low income population with mental health and or substance abuse issues

Throughout 2011-2012, the Coalition will use the findings and trends from the health assessment and design strategies to strengthen Solano's safety net.

HEALTH ASSESSMENT

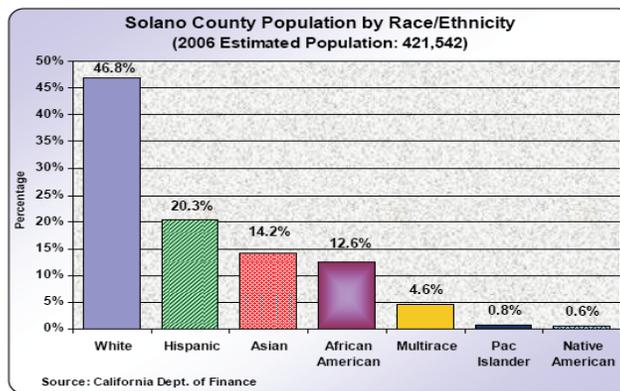
Changing Demographics

Solano County Population 1990, 2000 and 2005

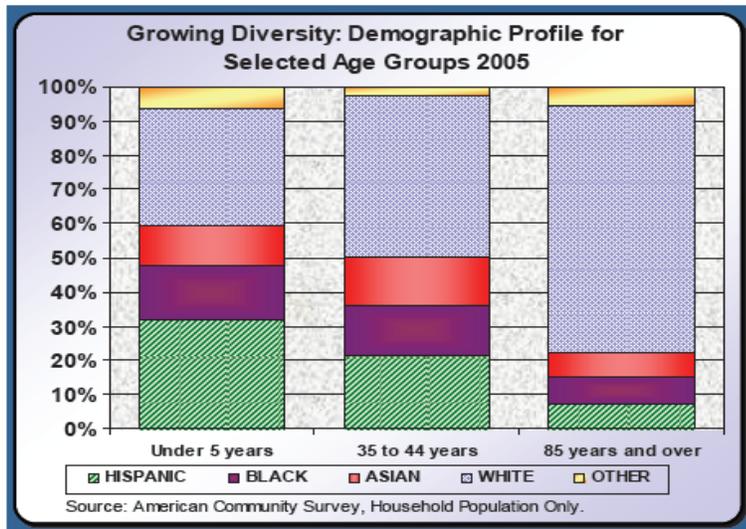
	1990	2000	2005	% change 1990 -- 2005
TOTAL	339,471	391,650	421,657	24.2%
BENICIA	24,437	26,800	27,323	11.8%
DIXON	10,417	16,000	17,179	64.9%
FAIRFIELD	78,650	95,700	105,026	33.5%
RIO VISTA	3,316	4,550	6,837	106.2%
SUISUN CITY	22,704	26,050	27,716	22.1%
VACAVILLE	71,476	87,300	96,735	35.3%
VALLEJO	109,199	116,000	121,221	11.0%
unincorporated	19,272	19,250	19,620	1.8%

source :DOF;
includes CMF

NorthBay Healthcare provides care to all of Solano County, a region that has grown dramatically in the last two decades and is expected to grow another 4.7% between 2005 and 2010.

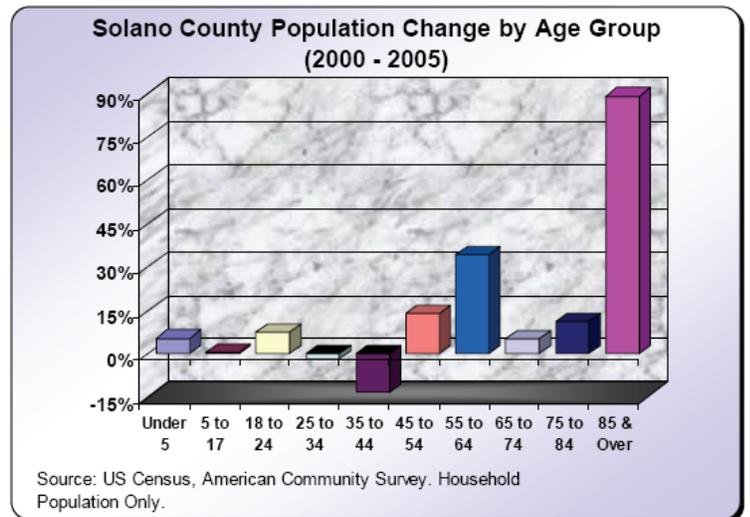


“Minorities” are now a majority of the population in Solano County, one of the most ethnically diverse communities in California.

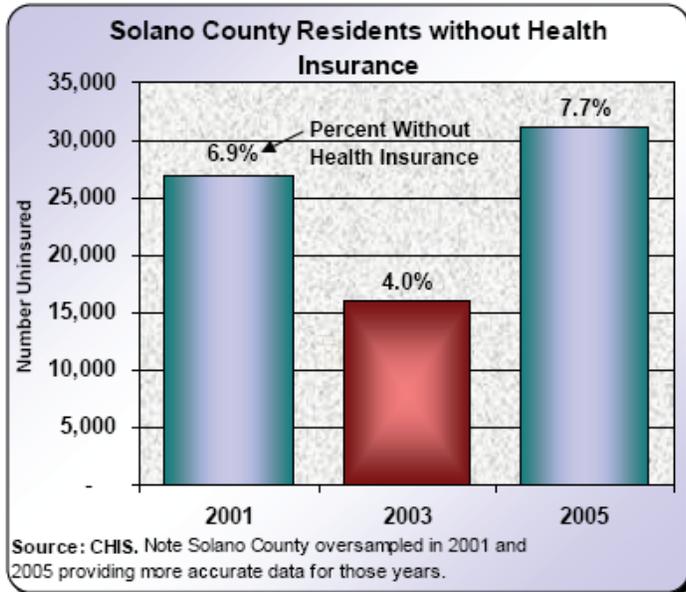


Ethnic diversity is the greatest among the younger population groups in Solano County which means that the County will grow even more diverse in the future.

The elderly is the fastest growing segment of the population while the younger age groups are growing very slowly. This is a stark contrast with the past two decades in the County when growth was concentrated in the younger ages.



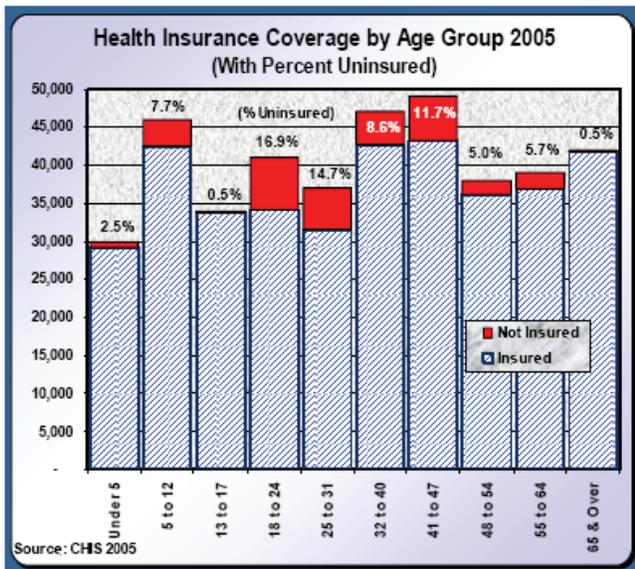
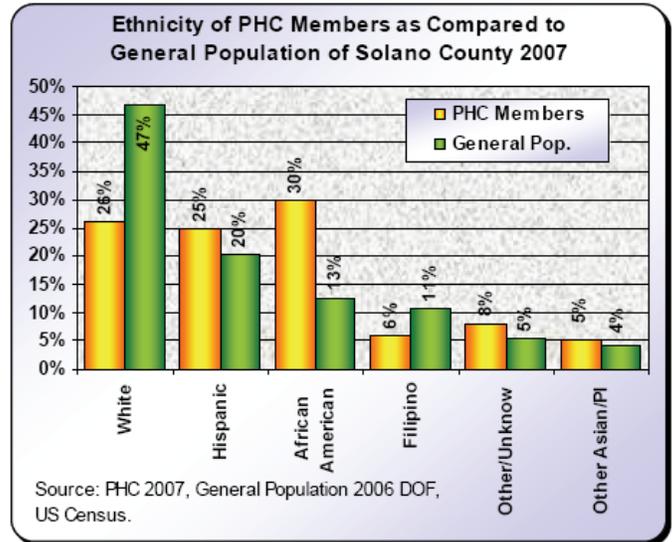
Health Insurance



Although Solano has one of the highest rates of insured residents in the State at 92%, the proportion of the population without health insurance increased by 15% between 2001 and 2005.

Young adults are the most likely to be uninsured followed by those in their 30's and 40's. Hispanics are uninsured at twice the rate of the County as a whole.

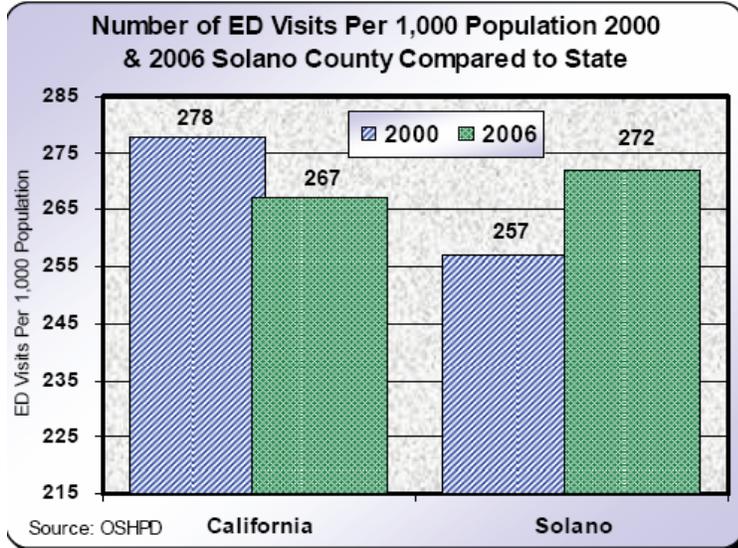
Solano's Medi-Cal population enrolled in the Partnership HealthPlan (PHC) grew 27% since 2000 to 52,700. Almost half of PHC members are children. African Americans represent almost one third of the PHC membership and 13% of the County's population.



The Safety Net

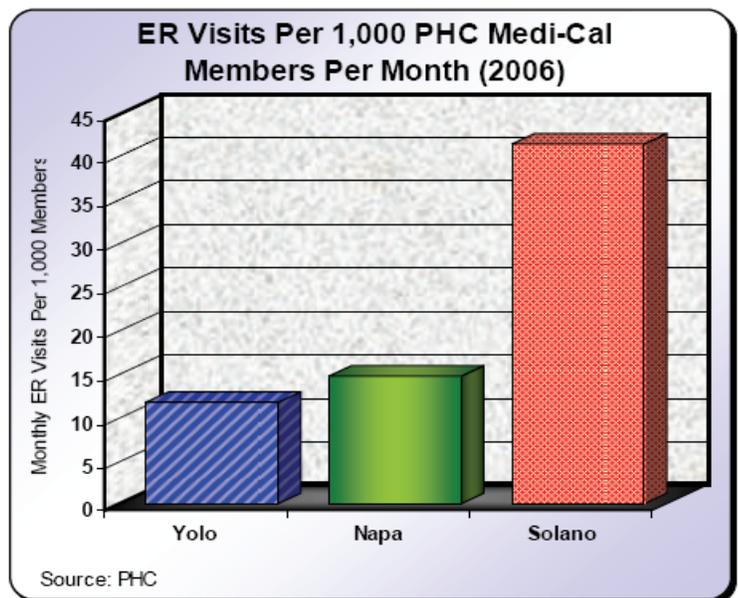
Solano's healthcare safety net is comprised of public and private health care organizations that provide inpatient and outpatient health services to Solano County residents who are uninsured or underinsured, or that serve a significant proportion of residents who are enrolled in Medi-Cal or CMSP (County Medical Services Program).

Emergency Departments



Solano is bucking a statewide trend with a 6% growth in the Emergency Department visits per 1,000 residents. In contrast, the visit rate fell by almost 4% statewide. Between 2000 and 2006 Solano hospital EDs saw a 13% increase in visits reflecting population growth and a rising use rate.

Further evidence of Solano's atypical ED use pattern can be found by examining the use of the ED by PHC members. Members from Solano County were 2.5 to 3.5 times more likely to use the ED than members in Napa or Yolo counties.

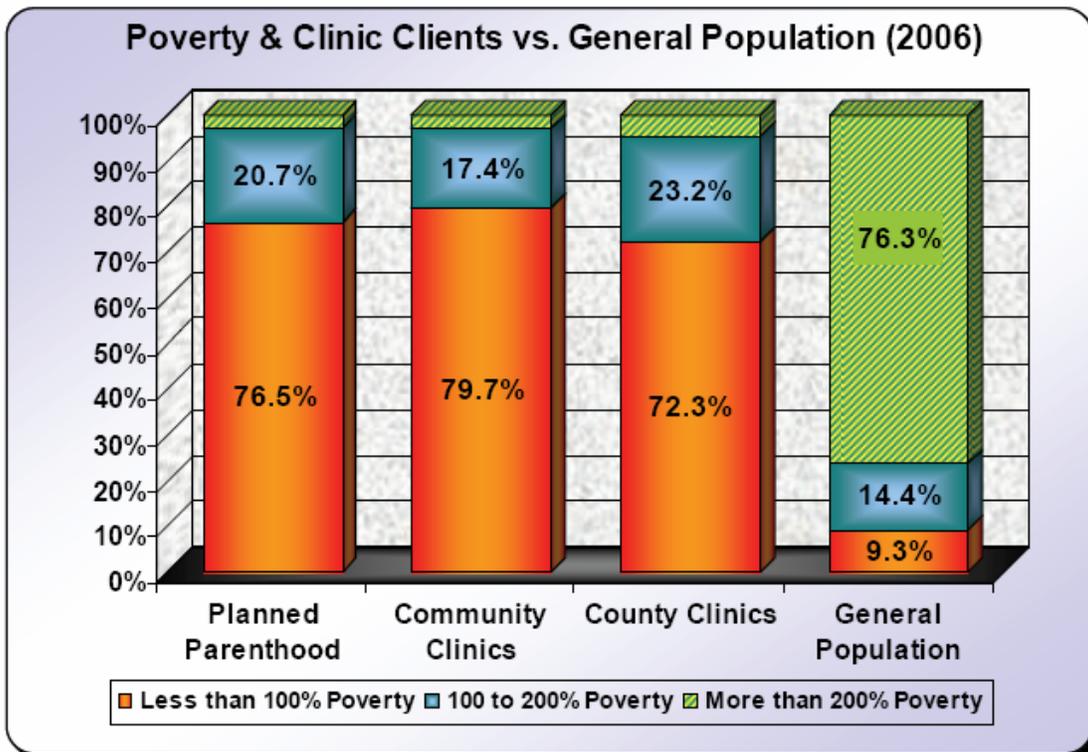


Primary Care Clinics

Solano County is fortunate to have three federally qualified primary care health centers operating clinics in five cities in the County. With qualification from the federal government, the clinics receive significant payment augmentation for treating Medi-Cal (including PHC) and uninsured patients. These additional payments allow the clinics the financial stability they need to serve as a reliable source of primary care for low income patients. Two of the clinics (La Clinica and Community Medical Centers) are non-profits and began offering services or have greatly expanded services within the past several years. The clinics (excluding Planned Parenthood) have experienced 22% growth in visits between 2000 and 2006.

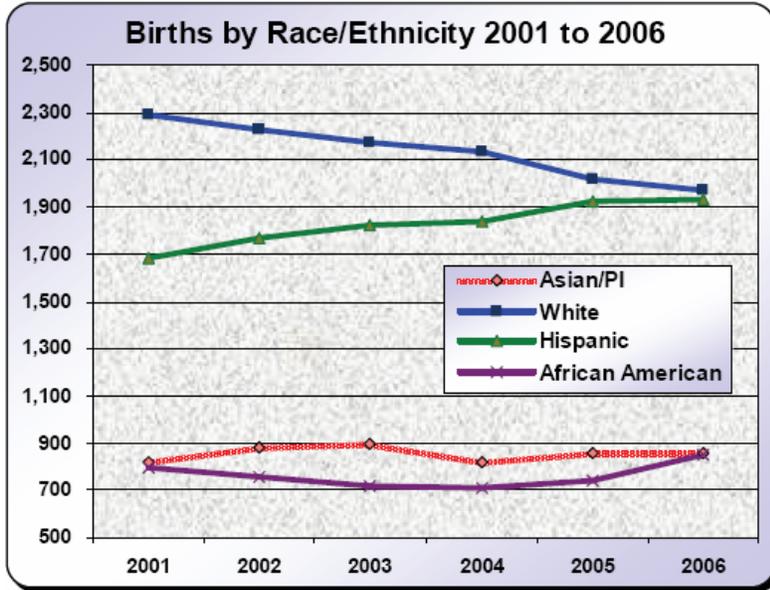
Clinic Name	Locations	Annual Visits 2006
La Clinica	Vallejo	17,500
Community Medical Center	Vacaville, Dixon	18,300
Solano County	Fairfield, Vallejo	31,280
Planned Parenthood*	Fairfield, Vallejo, Vacaville	25,000

* limited services, not federally qualified



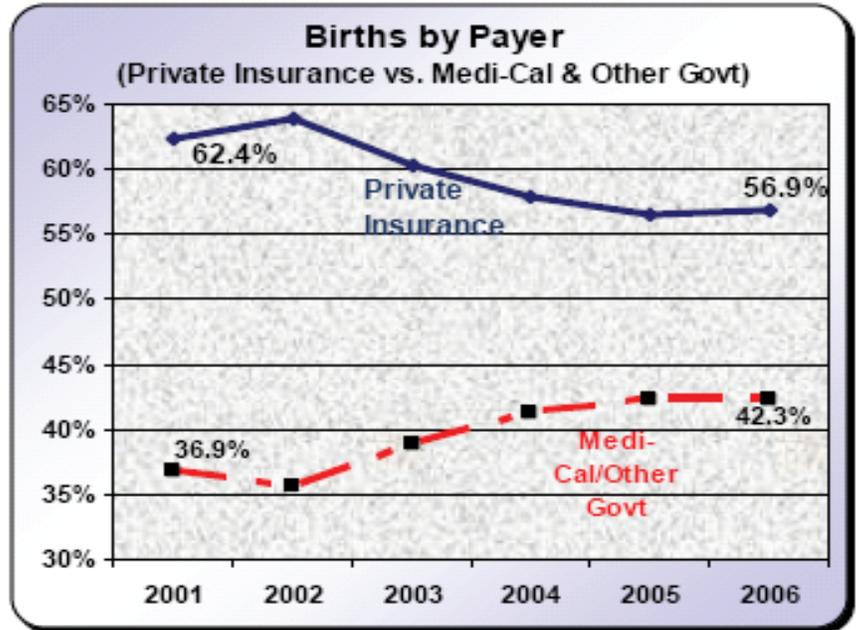
The safety net clinics serve the low income population with more than 90% of clients earning within 200% of the poverty threshold. More than one-third of the users are children and almost 70% of visits are made by females. Hispanics represent 38% followed by white, non-Hispanic 32% and African American 17%.

Prenatal Care

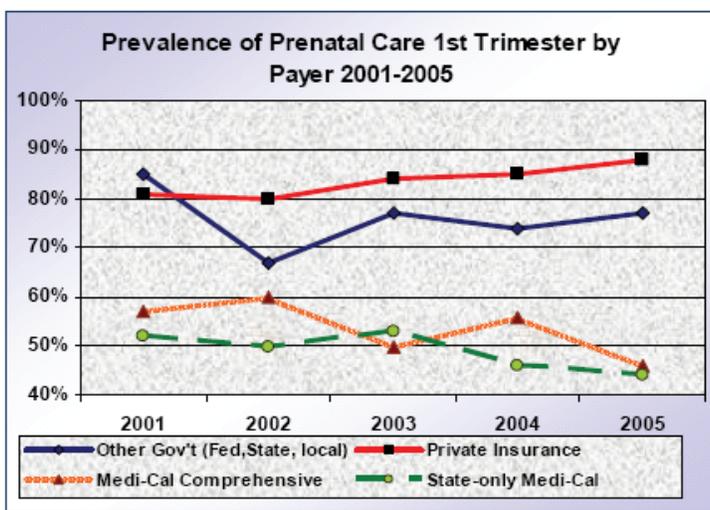
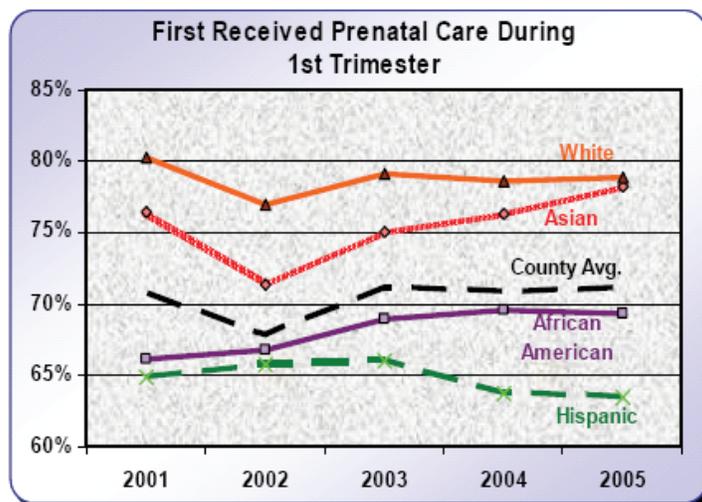


Although the number of births in Solano County has been flat since 2002, (a declining birth rate when population growth is considered) the proportion of births to Hispanics has been growing steadily.

The proportion of births covered by private insurance has fallen almost 9% to 57% between 2001 and 2006 while those covered by Medi-Cal has grown.



Solano County has moved only a bit closer to achieving the national Healthy People 2010 target of 90% for early entry into prenatal care. Just over 70% of pregnant women in Solano County initiated care within the first 14 weeks of pregnancy in 2005, 20% below the national target.



Those with private health insurance had much higher rates (88%) of entry into early prenatal care than women with Medi-Cal and PHC where less than 50% had prenatal care in their first trimester.

Key Findings and Broad Trends

- Ethnic minorities are more likely to be uninsured, and living below the poverty level. They rely on the primary care clinics and the emergency department for primary care. Growth in minority populations combined with declining health coverage rates will increase demand for services delivered through the safety net.
- Growth in the birth rate within the Hispanic population is expected to continue. Hispanics are the least likely to have health coverage and seek prenatal care early in their pregnancies. To move Solano County towards the Healthy People 2000 target for first trimester prenatal care, strategies must target the Latino population.
- A decline in the proportion of births to women with private insurance coverage has driven private practice OB-Gyns out of the market reducing access to care for all pregnant women, especially during the first trimester.
- The high and rising use of the Emergency Department in Solano County for routine care is not understood and calls for further analysis and research.
- A conservative and rough estimate of the number of low income, uninsured and Medi-Cal residents with serious and persistent mental health conditions ranges between 4,500 and 6,500. A small proportion of these individuals are very difficult to serve and require extensive resources which are often inadequate to meet their complex needs.

NORTHBAY HEALTHCARE
Community Benefits
Summary of Major Accomplishments in 2011
And 2012 Goals

Solano Kids Insurance Program (SKIP)

SKIP is a program to identify and enroll uninsured children and their parents in a health coverage program. Outreach is targeted to schools, businesses, churches and neighborhoods with the goal of achieving children's health coverage rates above the statewide average for public programs. Target enrollment for 2011 was 2,500 adults and children.

Accomplishments 2011:

- In 2011, SKIP enrolled 2,554 new uninsured children and adults into health coverage. In addition, 1,332 residents received assistance completing the annual recertification paperwork required to retain their coverage.
- All 52 elementary schools in Solano County were screened for insurance status of their students.
- SKIP maintained a minimum of 14 enrollment sites in Solano County.

Goals for 2012:

- Enroll 2,500 adults and children into public health plans or programs where they are eligible.
- 1200 families will receive assistance in retaining their health coverage in 2012.
- All 51 of Solano's elementary schools will have 100% of their students enrolled with health coverage.
- SKIP will retain 15 enrollment sites throughout the county.

Solano Healthy Kids

Also known as the Children's Health Initiative, Solano Healthy Kids is a county-wide initiative to raise funds to insure 100% of Solano's children.

Accomplishments 2011:

Goal: The Coalition's goal in 2011 was to pay premiums for 500 children.

Accomplishments:

- Five hundred children were enrolled as of July 2011.
- The Coalition raised \$190,000 at its fifth "Kids Classic" golf tournament fundraiser at the Chardonnay Golf Club on October. All of the proceeds were used to purchase coverage for uninsured kids.

Goals for 2012:

- 100 children and adults will be enrolled into the Cal Fresh program.
- Coalition staff will attend 25 community events to promote awareness of the Cal Fresh program.
- The Coalition will host fall fund raiser for the Solano Kids Insurance Fund.

Transitional Care Collaborative

The goal is to provide a safe environment for homeless, or near homeless patients who are ready for discharge from acute care hospitals in Solano and connect these patients with primary care, long term housing and other resources to support their recovery.

Beginning in July 2011, when funds from the Health Access project terminate, NorthBay Healthcare along with the County, Sutter and Kaiser contributed funds to sustain this program.

The project contracted with the Community Action Council of Benicia to provide case management and respite housing in Fairfield and Vallejo. The project is expected to save the hospitals hundreds of inpatient days by providing a safe place to discharge patients who are medically ready to leave the hospital but have no place to recover.

Goals for 2012:

- The Coalition will continue to serve as the coordinator, staff support and administrative liaison between the hospitals and the case management and respite housing providers.
- Develop and implement a program performance monitoring system with quarterly reporting on utilization and quality.
- Identify additional funding opportunities to support expansion of the scope of the current program, with a special focus on mental health services.

Additional Coalition Goals for 2012

- Align the Coalition's future with activities that support the local implementation of the health reform legislation, PPACA (e.g. determine number of potential new insured clients, assess the potential increase in demand and determine if capacity is adequate particularly within the safety net provider group; evaluate potential role for the Coalition as the local Exchange Navigator).
- Maintain an active fund development program with a target of \$190,000 in 2012.

ABC Prenatal Program

NorthBay Healthcare conducts a program to ensure quality prenatal care is available for vulnerable and underserved women in the NorthBay community.

Accomplishments 2011:

Goal 1: Complete baseline data to reflect breastfeeding rates at postpartum visit.

Accomplishment: A random sampling of 50 charts per quarter for all of 2011 was created with data points to reflect whether a patient was exclusively breastfeeding (yes), not breastfeeding (no), or combination of formula and breast milk (both) at their 6 week postpartum visit.

Goal 2: Increase patient awareness of the benefits of breastfeeding for English- and Spanish-speaking patients. By end of 2011, see an increase breastfeeding rates for all patients.

Accomplishments: A process improvement plan was implemented in which:

- Patients are given the Great Start Book at their 2nd Trimester Reassessment appointment. This English/Spanish booklet depicts all aspects of breastfeeding.
- Patients are given the opportunity to drop in to the Breastfeeding Support Group every Tuesday from 12:30-2P. Flyers in English & Spanish are given in ABC and in Mother Baby post delivery.
- Free Breastfeeding Guides from Health & Human Services are available in our Waiting Room.
- New posters promoting breastfeeding were added to each Exam Room.
- The ABC Prenatal Program Director and Health Educator completed the Lactation Education Course through UC San Diego and became certified educators.

ABC's 2011 breastfeeding rate for exclusive and both was 65%.

Our 2010 rates were 63.5%, which shows an improvement of 1½%.

Goal 3: Initiate a Smoking Cessation Group facilitated by the Medical Social Worker and Health Educator.

Accomplishments: Curriculum, visual teaching aids, and flyers for the Smoking Cessation Groups were created. Six support groups were scheduled with fewer patients attending than enrolled and fewer enrolled than we had hoped.

Future Activity: In 2012, we will be taking a closer look at an evidence-based and promising program which would include marijuana users. According to our overall data for 2011, ABC has approximately 120 patients per year who continue to smoke after they find out they are pregnant. We have approximately 45 patients per year who smoke marijuana after they find out they are pregnant. These numbers warrant a second look into how we can help these women decrease or discontinue this unhealthy practice.

Goal 4: Increase postpartum visits by 5%.

Our process improvement activities in 2011 included:

- As a periodic agenda item at staff meetings, the positive aspects of offering birth control as part of the postpartum visit would increase our Family PACT and Family Planning Services line of business and increase our revenue.
- Our data and target were reviewed and discussed at staff meetings.
- Front Office Staff initiated spreadsheets for their Nurse Practitioners when a patient delivered. Their responsibilities included tracking and contacting the patient if she had not made a 6 week postpartum appointment 2 weeks after delivery.
- Staff agreed to make reminder calls to all postpartum patients a day or two ahead of their appointment.

Accomplishments: In 2011 postpartum visits increased by 6% over 2010.

Goals for 2012:

- Using Hypnotherapy as a smoking-cessation intervention, initiate funding documents to support this “promising program” for tobacco and marijuana users to quit during and after pregnancy. Other treatment options in Solano County have not proved to be effective. We would like to enhance our services and offer this new intervention to all pregnant patients.

- In collaboration with Women & Children Services, Prenatal Educators, Nurse Practitioners, and Perinatal Care Specialists to assess & standardize the prenatal breastfeeding education given to our patients. The overall goal is to increase our patient's knowledge about the benefits of breastfeeding, the mechanics of how it is accomplished, and for them to feel confident about their decision whether this is the right choice for them. Once they have delivered, the nurses can continue lactation education to support their informed decision.
- In collaboration with Women & Children Services, Patient Financial Services, the Center for Women's Health, the Chief Informatics Officer, and other pertinent NorthBay Healthcare Departments, to develop an outpatient lactation support clinic for postpartum patients. By doing so, NorthBay Healthcare will be fulfilling one of the requirements to achieve the Baby Friendly designation.

Hospice

NorthBay's Medicare certified hospice and bereavement services serve residents of Solano County. Services are offered to anyone in need regardless, of insurance coverage or their ability to pay for care. Patients are cared for in the home, hospital, nursing home or board and care facility. The multidisciplinary staff includes specially trained nurses, home health aides, rehabilitation therapists, social workers, chaplains and volunteers.

Accomplishments 2011:

Goal 1: Develop a strong support and resource system for teachers, students and their families in local schools, providing support in under-served areas of the county, including Dixon and Rio Vista.

Accomplishments: We expanded bereavement services in 2011. In October we added a second adult support group, offering groups Tuesday and Thursday nights. We added a co-facilitator and a volunteer to assist with the adult groups. A pilot support group for those who lost a loved one by suicide also was initiated. It started in October, meeting twice a month. However the group was not announced to all community members due to meeting space. Also offered was an eight-week faith based support group. The expansion to our services has been successful. We've been able to grow our program to match the community's needs.

Our support groups were well attended 2011: 751 adults attended adult services, which also includes the Rio Vista group., while 253 children (including middle school and young adults) attended our children services, and 336 attended bereavement workshops/memorial service and 24 adults attended the pilot suicide group.

Goals 2: Recruit and train new hospice and bereavement volunteers.

Accomplishments: In 2011, we trained six hospice volunteers to specialize in bereavement. One hospice volunteer was recruited and in 2012 will begin training with Paws for Healing. Sixteen volunteers donated 1,685 hours during the year.

Goal 3: Maintain the Dream of a Life program.

Accomplishments: All hospice patients were given an opportunity to realize a final dream through Dreams of a Lifetime Program. We were able to grant 11 out of 17 dream requests in 2011. The Dream Team volunteered 65 hours in 2011.

Goals for 2012:

- Successfully complete all audits in 2012, including the accreditation visit by The Joint Commission on hospital accreditation.
- Increase the number of admissions in 2012.
- Increase the length of time we have with each hospice patient.
- Provide all patients an opportunity to realize a final dream through the Dream of a Lifetime program, while promoting the program and adding two members of the NorthBay Healthcare Foundation Board of Directors to the Dream Team.
- Open the first Bereavement Center in Solano County. Services at the center will be free of charge to anyone seeking grief support and education. Move all support groups offered by NorthBay's Hospice and Bereavement to the new center.
- Create a library where community members can borrow books on grief and bereavement to further understand the process of death and dying. Open the center by summer 2012.
- Offer Death by Suicide Support groups to the community starting June 2012.
- Recruit and train five new hospice and bereavement volunteers by September 2012.

Health at Home

NorthBay offers high-quality, Medicare-certified health care in the comfort of home to help patients recover more quickly and completely. The broad range of NorthBay Health at Home services gives patients and families confidence and knowledge to manage their medical concerns and can often prevent hospitalization. Customized programs for each patient's needs promote a smooth recovery after hospital discharge and encourage long-term health.

Accomplishments 2010:

Goal 1: To increase admissions and continue to maintain a high-quality service with ever-expanding Tele-Health monitoring capabilities.

Accomplishments: While admissions were slower in 2011, 618 compared to 751 in 2010, the nursing and physical therapy remained the largest discipline utilized. Medicare and Medi-Cal were consistently the top insurance reimbursement categories. Tele-Health continues to monitor patients from their homes. Quality scores compared favorably to other Home Health organizations.

Home Health successfully completed numerous audits and surveys, including the August 2011 state survey and the accreditation of The Joint Commission in October 2011.

Goals for 2012:

- Increase admissions in 2012 compared to 2011.
- Upgrade Tele-Health monitoring capabilities.

Adopt a School

NorthBay Healthcare and its employees adopted two low-income elementary schools: Fairview Elementary in Fairfield and Padan Elementary School in Vacaville. The goal of the relationship is to promote healthy relationships with low-income schools in the neighborhoods of NorthBay Medical Center and VacaValley Hospital and to expose students to the broader community.

Accomplishments 2011:

Goal 1: Conduct another survey of teacher needs in both adopted school campuses and fulfill as many requests as possible for educational materials and school supplies.

Accomplishments: Participation by the faculty of the two schools was nearly 100% for the holiday season in 2011. Surveys from teachers were distributed to the sponsoring employees or departments.

Goal 2: Organize parties and gifts for teachers and students.

Accomplishments: At the two campuses, 60 classrooms were adopted. Supplies and classroom materials donated by the staff of NorthBay had a total value of more than \$8,000, with donations ranging from binder paper to computer printers to books, pencils, pens and Kleenex.

Goals 3: Increase the number of departments that participate in the Adopt-a-School program.

Accomplishments: In 2011, there were 46 departments or employee groups that adopted a classroom, an increase of three over the prior year. In addition, the corporate office of NorthBay added a \$3,000 donation to the program, a gift to support the Padan Elementary School's sixth-grade science camp, ensuring all students could participate.

Goals for 2012:

- Conduct another survey of teacher needs in both adopted school campuses, but add to the list a survey of the campus administration to determine if there are campus-wide needs that could be fulfilled. Satisfy as many requests for educational materials and school supplies as possible.
- Organize healthy-snack holiday parties and gifts for teachers and students.
- Increase the number of NorthBay departments that adopt classrooms at Eugene Padan Elementary School and Fairview Elementary School.

Alzheimer's and Dementia Services

NorthBay Healthcare operates the Adult Day Center which offers clients with Alzheimer's Disease and related dementias the opportunity to socialize and participate in stimulating activities, giving caregivers the opportunity to work, resume regular activities or rest. The center is a social model program run by specially trained staff and volunteers and is funded by NorthBay Healthcare with support from the Area on Aging and nominal fees from clients. The Day Center is open Monday through Friday from 7a.m. to 7p.m.

Goals for 2011:

Goal 1: Secure funding to continue operations of the Adult Day Center and Resource Center in Vacaville at the current service level.

Accomplishments: Grant was approved for 2011-12 fiscal year for the NorthBay Adult Day Center from the State of California Area Agency on Aging Napa/Solano County for \$36,042. Received an additional \$4,000 for operations from the Area Agency on Aging. Donation from Oretta Cortland for \$20,000 was obtained, as well as miscellaneous funding from ongoing memorial fund donations.

Goal 2: Increase community education by offering educational opportunities via the support group three times within the year as well as three Saturday workshops, all free to the community.

Accomplishments: In February a community workshop offered an educational workshop on "Maintaining Your Brain" with 25 attendees.

In March, a support group workshop on "Legal Issues Impacting the Aging" was offered with 31 attendees.

In June a community workshop was offered on "Compassionate Communication, Dealing with persons with dementia" with 36 attendees.

In November we offered a community workshop, "The latest Research of treatment and medications for Alzheimer's and related dementias," with 25 attendees.

Goals for 2012:

- Submit a completed application for continued funding to Area Agency on Aging serving Solano County by May 31, 2012, to secure grant monies of \$36,042.
- Increase community awareness by involvement in community resource fairs and on going community education.
- Offer a satisfaction survey to present caregivers receiving services from the Alzheimer's department to better understand the needs and ensure quality of the program and its services.

Palliative Care

NorthBay Bridges palliative care program, through effective symptom management, assists patients facing a life-limiting, chronic or progressive illness. The goal of the supportive care service is to help the patient realize the best possible quality of life. The supportive care team reaches the emotional, social, cultural and spiritual needs of seriously ill patients and their families. Guided by a philosophy of care within an organized and structured system, treatment is determined and delivered in the context of the patient's unique life goals. This supportive care service can be delivered concurrently with life-prolonging treatment or as the main focus of care. NorthBay's program is a hospital based consultation program where services are provided by a team including a physician board certified in palliative medicine, a Nurse Practitioner board certified in hospice and palliative care and board certified in pain management, a licensed clinical social worker and a chaplain.

Goals for 2011:

Goal 1: Continue to provide system and community education about Physician Orders for Life Sustaining Treatment (POLST) and advance care planning.

Accomplishments: NorthBay Bridges provided community education on Advance Care Planning for community agencies. We provided education to the Lions Club and Bethany Lutheran Church the second half of 2011. We will be continuing the in-services in 2012 for the Fairfield and Vacaville Senior Centers as well as the Fairfield “Mall Walkers.”

Goal 2: Increase the number of referrals to the program in 2011 to 200 consults.

Accomplishments: In 2011 we exceeded our target of 200 consults and achieved 231 by Dec. 31, 2011. In addition, our Bereavement Program for surviving family and friends of patients who have died while on the palliative care service has been successful. We completed our first full 13-month cycle sending mailings to more than 60 families in 2011.

Goal 3: Expand data collection to assess what referrals we are receiving and where we might be able to increase our referral base.

Accomplishments: We continue to be part of the National Palliative Care Registry which the community can access online. It serves as a national palliative care data base. Data collection is a requirement for participation and we have had a premium listing for the last three years. We continue to network with providers to increase awareness of the program. Plans were set to create a regular column in the NorthBay newsletter and a blog to debut in 2012 on NorthBay.org, the system’s public website. Meanwhile, our Nurse Practitioner began to regularly attend ICU rounds, increasing our ICU referrals.

Goals for 2012:

- Continue to grow the education programs, internally and externally, include end-of-life care planning.
- Create a blog on *NorthBay.org* to further the education programs.
- Increase the number of consults in 2012 to 360.
- Continue membership and participation with National Palliative Care Registry and Coalition to Advance Palliative Care (CAPC) to assure data collection is in alignment with standards of practice nationally.
- Continue to provide follow up bereavement contact for families of our former patients.

Community Partnerships & Involvement

NorthBay Healthcare seeks to create partnerships with local civic groups, public agencies and private community aid programs to increase assistance to those in need, to nurture healthy lifestyle activities and to support others building a stronger community fabric in northern Solano County.

Accomplishments 2011:

Goal 1: Support the healthy living activities of the Matt Garcia Youth Center in Fairfield through the presenting sponsorship of the 2011 Run for Good, recruiting at least 400 NorthBay employees and friends to participate in the 5K run/walk in downtown Fairfield in April 2011.

Accomplishments: The Run for Good 2012 raised \$30,000 for the Matt Garcia Youth Center as 404 NorthBay employees and their families participated in the event.

Goal 2: Underwrite the Leadership Program in both the Vacaville and Fairfield-Suisun chambers of commerce, supporting the goal of training future community leaders and conducting a Health Day program to educate participants on the state of health care in northern Solano County.

Accomplishments: Twenty-seven Leadership candidates attended Health Care Day 2011, while total enrollment for the two programs was an all-time high 30 students. NorthBay again was the sole underwriting sponsor of the two programs.

Goal 3: Support the Tribute to Seniors program as a major sponsor, conducting health seminars for older citizens and supplying health education speaker for the annual event in Vacaville.

Update: In 2011, the sponsors of the event decided to cancel the annual program.

Goal 4: In partnership with Spirit of Women and Solano County Public Health provide free immunizations during “Day of Dance,” a health education program set for February 2011 in the Westfield Shoppingtown in Fairfield.

Accomplishments: The venue for the annual event changed with activities shifted to a host of different locations to increase participation. Turnout increased significantly over prior year.

Goal 5: Continue to partner with the City of Fairfield and its new Allan Witt Aquatics Center, providing first-aid station funding and creating physical therapy programs that utilize the public facility.

Accomplishments: The \$3,500 annual donation to the city protected the aquatic center and its healthy activities from closing in the face of government budget crises and funding cutbacks.

Goal 6: Conduct the annual four-day Nurse Camp to expose high school students to the health care profession by showing them the daily operation of our hospital campuses.

Accomplishments: Once again, the camp for high school students with an interest in health care careers attracted more than 50 participants. Applications far exceeded the number of openings available.

Goal 7: Sponsor the annual Authors Luncheon of the Solano Library Foundation, a fundraiser that underwrites Reach Out & Read, a program that provides books for children and young parents who visit our primary care clinics. Volunteer readers give books to families and role-model reading habits that have been proven to improve a youngster’s chances to remain healthy and to succeed in reading.

Accomplishments: The event, sponsored by NorthBay Healthcare, raised more than \$90,000 for the program that gets children involved in reading at their very first well-baby visit in our Center for Primary Care.

Goal 8: Fund and support the Doug Butt Run, an after-school physical education program that was eliminated by the Fairfield-Suisun Unified School District. The goal for 2011 is to have 2,000 children participate in a Saturday healthy activities program that features a fun run/walk and other fitness activities in Allan Witt Park in Fairfield.

Accomplishment: While the turnout for the event fell short of the goal, there were more than 500 students participating in 2011, a 100% increase over the prior year.

Goal 9: In February, attract more than 300 women to the annual Heart to Heart Luncheon in Green Valley, presenting lectures and information about heart health, diet and other women's health issues. The event will be free of charge.

Accomplishment: Once again, this educational program attracted a sold-out audience.

Goal 10: In August, sponsor and participate in the Vacaville Cultural Diversity Fair in Andrews Park, disseminating health information, conducting screenings and engaging in healthy activities directed at a diverse ethnic audience. In May, NorthBay will sponsor a fundraising luncheon to support this event.

Update: Due to a lack of volunteer support, the committee that presented this event in Vacaville canceled it in 2011. It was scheduled to return in 2012.

Goal 11: In June, collaborating with the American Cancer Society, present the annual Cancer Survivors Day in Fairfield, attracting 150 survivors and their families.

Accomplishments: The 2011 Survivors Day program was a sell-out event in Fairfield, attracting more than 150 survivors, family and friends. NorthBay presented the main speaker and provided all the volunteer man and woman power needed.

Goals for 2012:

- Support the healthy living activities of the Matt Garcia Youth Center in Fairfield through the presenting sponsorship of the 2012 Run for Good, increasing the number of NorthBay employees and friends who participate, while helping expand the event to include a half marathon through Fairfield, Suisun City and Travis Air Force Base.
- In partnership with Spirit of Women, conduct "A Day for Women" and include various health education programs, raising funds for medical services to those who cannot afford them.
- Continue to partner with the City of Fairfield and its new Allan Witt Aquatics Center, providing first-aid station funding and creating physical therapy programs that utilize the public facility.
- Conduct the annual four-day Nurse Camp to expose high school students to the health care profession by showing them the daily operation of our hospital campuses.
- Sponsor the annual Authors Luncheon of the Solano Library Foundation, a fundraiser that underwrites Reach Out & Read, a program that provides books for children and young parents who visit our primary care clinics. Volunteer readers give books to families and role-model reading habits that have been proven to improve a youngster's chances to remain healthy and to succeed in reading.
- Fund and support the Doug Butt Run, an after-school physical education program that was eliminated by the Fairfield-Suisun Unified School District.
- In February, attract more than 300 women to the annual Heart to Heart Luncheon in Green Valley, a free event, presenting lectures and information about heart health, diet and other women's health issues.
- In June, collaborating with the American Cancer Society, present the annual Cancer Survivors Day in Fairfield, attracting 150 survivors and their families.

Free and Reduced-Cost Health Care

NorthBay Healthcare provides charity care and other financial assistance to those in the community who cannot afford services, or whose health insurance does not cover all services rendered.

Value of Tax Exemption and Contribution to Community Benefits

	2010	2011
Economic value of Tax Exempt Status Activities	\$ 11,749,738	\$1,961,629
Cost of services to vulnerable populations	229,243,459	239,092,316
Collections on services to vulnerable populations	151,512,833	153,463,596
Total Economic Contribution to Community Benefit	\$ 77,730,626	\$85,628,720
Value of 2010 volunteer hours	\$ 530,122	\$696,906

Notes:

1. Volunteer hours valued at rate per *IndependentSector.org*.
2. Savings from the tax-exempt status include not having to pay income tax, FUTA and welfare exemptions on property tax. Note that net income as reported was used for estimating tax liability, though a more accurate number would be obtained by completing an entire tax return. Some other accounting methodologies might be used to minimize annual tax liability (i.e. accelerated depreciation method) if it were an actual, true expense.
3. Costs versus collections are for "vulnerable populations" only.
"Vulnerable populations" = Medicare (fee for service, managed care and capitated patients), Medi-Cal (fee for service, managed care and capitated patients), and those with no insurance.
4. Collections were computed as the actual payments received or projected. This represents expected reimbursement and does not include capitation payments.
5. Cost information is derived from the internal costing system (PPM) for determining the cost of patient care for 12/31/2011 discharges.

APPENDIX A

Page 1 of 2

 NORTHBAY™ HEALTHCARE	Page No. 1 of 2	Number: 118
ADMINISTRATIVE MANUAL	Effective Date: February 1996	
System [X]	Required Review: Every three years	
Hospitals []	Reviewed:	
	Revised: 1/99, 1/01, 1/04, 2/07, 3/11	
Policy [x] Procedure []	Responsible Position: Director, Continuum of Care Services	
Title: H.E.R.O. FUND	Approval Requirements:	

I. PURPOSE:

To provide for our patients' non-clinical needs and to assist with the broader health and wellness of our community.

II. POLICY:

- A. The H.E.R.O. (Helping Employees Reach Out) Fund was developed by employees to enable employees to donate funds through payroll deduction or one time gift. NorthBay Healthcare matches each gift an employee makes to the Fund.
- B. The H.E.R.O. Fund is used to provide for NorthBay Healthcare patients' non-clinical needs. These needs, for example, could be: medications, clothing, food, gasoline, or shelter. These needs may also involve quality of life issues so that the Fund could be used to provide relief/comfort for our patients. These funds are issued only on a case by case basis and are not intended for chronic use. Any patients receiving assistance from the H.E.R.O. Fund will receive only a voucher. No money will be given directly to anyone and no change will be given if the amount listed on the voucher is not used entirely.
- C. As NorthBay Healthcare is a community based organization with a mission of "Compassionate Care, Advanced Medicine, Close to Home", the H.E.R.O. Committee will consider community service organizations applying for funds. This must be done through written proposal that delineates how the funds will be utilized. Any written proposal for funds will be reviewed as to whether the request is an appropriate use of funds as outlined in the guidelines above. The H.E.R.O. Committee will have sole responsibility for determining whether to approve/deny written requests for funding. Any proposal that is approved by the Committee will be processed for funding to be distributed during the fourth quarter of the fiscal year.

III. PROCEDURE:

- A. To obtain assistance from the H.E.R.O. Fund:
 - 1. An assessment of actual need must be done.
 - 2. Persons who are authorized to assess need and provide vouchers are Social Services and Administrative Coordinators.
 - 3. A voucher must be completed.
 - 4. A voucher can only be used for the vendors who are listed in the H.E.R.O. Fund binder or with vendors who, on a one-time basis, have agreed to accept the voucher.
 - 5. For needs greater than \$250.00, the person issuing the voucher must obtain the approval of three H.E.R.O. committee members.
 - 6. The bottom of the white and the bottom of the yellow copies are given to the recipient to be given, in turn, to the vendor by the recipient. The NorthBay Healthcare employee giving the voucher keeps the top part of the white copy and forwards a complete page (pink copy) to the Executive Assistant in Human Resources.

7. Monitoring and Tracking mechanisms and referrals to Social Services are obtained from the information included on the voucher.

APPROVED BY:

Deborah Sugiyama
President, NorthBay Healthcare Group

APPENDIX B

**2011 Financial Report
The H.E.R.O. Fund
Supported by contributions from NorthBay Healthcare Employees
and by matching funds from NorthBay Healthcare System**

Funds available January 1, 2011	77,800.46
Contributions (including matching fund from system)	18,538.00
SUBTOTAL	96,338.46
TOTAL EXPENDITURES	(42,274.99)
TOTAL Funds - December 31, 2011	54,063.47

APPENDIX C

 NORTHBAY™ HEALTHCARE	Page No. 1 of 4	Number: 1003
	ADMINISTRATIVE MANUAL	
System <input checked="" type="checkbox"/>	Effective Date: May 1999	
Hospitals <input type="checkbox"/>	Required Review: Every 3 years	
	Reviewed: 5/02	
	Revised: 1/05*, 4/07	
Policy <input checked="" type="checkbox"/> Procedure <input type="checkbox"/>	Responsible Position: Director, Patient Business Services	
Title: FINANCIAL ASSISTANCE PROGRAM POLICY	Approval Requirements:	

- I. **POLICY STATEMENT:** NorthBay Healthcare system is committed to providing financial assistance to patients who have no health insurance to pay for medically necessary care or have insurance with a high medical cost or out-of-pocket expense. NorthBay's mission statement, "Compassionate Care, Advanced Medicine, Close to Home" will serve as the foundation for all financial assistance determinations pursuant to this policy. Financial assistance determinations will be made within the broader scope of assisting patients and their families to obtain adequate and affordable insurance that provides an ongoing access to community health care services.

- II. **PURPOSE:** The purpose of this policy is to define the eligibility criteria for financial assistance and provide administrative guidelines for the communication and implementation of this charity care policy.

- III. **ELIGIBLE SERVICES:**

 Financial assistance will be concentrated in areas of highest patient financial liability. The financial assistance described in this policy will be extended to eligible patients receiving the following NorthBay Healthcare system services:

1. Inpatient Acute Care
2. Observation Care
3. Emergency Services
4. Ambulatory Surgery (if deemed medically necessary)
5. Medical and Radiation Oncology
6. Wound Care
7. Clinic Services

APPENDIX C

IV. ELIGIBILITY FOR FINANCIAL ASSISTANCE:

- A. Eligibility determinations will be made based on family income, which shall be calculated based on the gross income of the patient and each member of the patient's family unit. For purposes of this policy, a patient's family unit shall include a) the patient's legal spouse, b) the patient's registered domestic partner, c) each parent having legal custody of the patient, d) the patient's legal guardians, and e) persons claimed as dependents on the above person's Federal Tax Return. All patients requesting financial assistance will be required to:
1. inform the hospital of any health coverage or other coverage
 2. complete an application for State and/or Federal assistance, if requested; failure to compile could result in Financial Assistance Application being denied, and
 3. complete and sign the Financial Assistance Application Form
 4. provide written verification of identification, residency, income, and assets; self-declaration is acceptable either for those patients who do not have any written verification because they are homeless or because of their immigration status
 5. pay a co-payment if applicable
- B. Deceased patients with no estate may be granted financial assistance without meeting the above requirements, as well as patients on State or Federal assistance who receive services that are not covered by their assistance program (i.e. Restricted Medi-Cal or State CMSP)
- C. Patients who have access to contracted health insurance coverage will not be eligible for financial assistance unless they can demonstrate a financial need due to having high medical cost or out-of-pocket expense. Examples of health insurance coverage include:
1. HMO, PPO and Commercial health insurance
 2. employment or COBRA policies
 3. spousal insurance coverage
 4. third party liability insurance
- D. Financial assistance under the NorthBay Healthcare Charity Care policy is not intended as a substitute for and shall not be applied to offset share of cost obligations, deductibles or coinsurance under any other private or government healthcare insurance program.

APPENDIX C

V. FINANCIAL ASSISTANCE GUIDELINES:

- A. All patients applying for financial assistance must make a \$50 co-payment for each separate visit. The co-payment will be offset against any additional financial obligation for services rendered incident to the visit that is subsequently determined under this policy. The co-payment will be requested at time of registration.
- B. Financial assistance will be provided to patients on a sliding scale basis, using the current published Federal Poverty Levels (FPL) as guidelines. Financial Assistance will be granted using the following criteria:
 - 1. If family income is less than 100% FPL: Charity Care with no cost to patient
 - 2. If family income is 101% to 200% FPL: Discount Plan with \$50 co-payment only
 - 3. If family income is 201% to 350% FPL: Discount Plan at 100% of the Medicare Fee Schedule with \$50 co-payment
 - 4. If family income is 351% FPL or above: Refer to Prompt Pay Discount Policy
- C. Monetary assets, excluding retirement or deferred compensation plans and include only 50% of monetary assets over \$10,000, may be used to assist in to determine patient's financial eligibility.
- D. Extended payment terms shall be offered of NorthBay Healthcare system. Extended payment terms are available only for obligations above and beyond the co-payment. In these cases, interest-free terms may be granted up to twelve months.
- E. Healthcare services should not represent a catastrophic burden to uninsured patients and families. NorthBay Healthcare will limit annual family obligations determined using the above financial assistance guidelines to no greater than 30% of eligible annual family income for the calendar year in which services were provided.
- F. On rare occasions, there may be circumstances where patients who would not otherwise qualify for financial assistance may be unable to pay for care provided. In these special situations, financial assistance may be granted up to designated approval levels:
 - 1. Up to \$50,000 –Director, Patient Financial Services
 - 2. Above \$50,000 – Chief Financial Officer

VI. **PATIENT NOTIFICATION AND APPEAL RIGHTS:**

- A. Patients will be provided with information regarding the Charity Care and Discount Policy at the point of access. If a patient feels that they may be eligible under the policy, then they shall be referred to financial counseling for further assistance. A final determination will be made within 30 days of an application being completed and all requested documentation being submitted. Once a decision is made for the approval or denial of financial assistance, a letter will be sent to the patient as notification of the decision made. Documentation of financial assistance determinations will be kept on file in the Patient Business Services Department. Patient statements will reflect the financial assistance determination as "Compassionate Care Discount."
- B. Incomplete applications will be held for 150 days from filing or first billing, whichever comes first, before the account is referred for collection.
- C. Patients who disagree with the financial assistance determination have the right to appeal the decision. Appeals must be made in writing to the Director, Patient Business Services, NorthBay Healthcare system. A review committee consisting of Finance staff, non-Financial staff and NorthBay Administrative representatives will review appeals monthly.

VII. **RELATIONSHIP TO COLLECTION PRACTICES:** NorthBay Healthcare's collection policies outline the types of collection efforts that contracted collection agencies may/may not take to collect on past-due accounts. It is recognized that as part of the financial assistance process, patients may from time to time break their promise to pay made on the financial assistance application. In these instances, patients with past-due financial assistance obligations may be referred to collection in the same manner as any other patient with an unpaid past-due account might. However, in no instance will any patient receiving financial assistance under this policy be subject to abusive telephone collection practices, liens being placed on their primary residence, wage garnishments, or involuntary court hold orders.

VIII. **PUBLIC NOTICE OF FINANCIAL ASSISTANCE:** NorthBay Healthcare will post notices regarding the availability of financial assistance in all patient registration areas, in patient handbooks, at its Patient Business Services Department, and on its website. Notices shall be posted in English and Spanish. In addition, NorthBay shall publish annually a statement of charity care assistance given in local papers and in its community benefits plan. Patients with questions about NorthBay's financial assistance program may call 707-429-6860.

APPROVED BY:

 Arthur E. DeNio
 Vice President/Chief Financial Officer