

Appendix A

OVERVIEW

Community Health Improvement Partners

Community Health Improvement Partners (CHIP) is a collaboration of San Diego health care systems, hospitals, community clinics, insurers, physicians, universities and community benefit organizations who are dedicated to a common vision. CHIP is organized under the auspices of the Healthcare Association of San Diego and Imperial Counties.

VISION

*Improved health for San Diego County's communities
through collaboration and assessment*

The collaborative effort has its roots in a group called The San Diego SB 697 Coalition which formed to meet the needs assessment requirement of Senate Bill 697. **Charting the Course: A San Diego County Health Needs Assessment** was created, and the 1998 Needs Assessment, **Charting the Course II** is projected for completion in February 1999. The premise for hospitals and health systems to work collaboratively on the needs assessment is that a more efficient document will be created and cost savings realized by doing only one needs assessment for all of San Diego. Although the not-for-profit private hospitals have still had to create individual benefit plans and provide benefits to their communities independently, the collaborative effort gained enough momentum in its initial effort to continue beyond SB 697 and actually address the needs identified in the needs assessment. After jointly identifying health needs, the group created a mission to continue into the next steps.

MISSION

The Community Health Improvement Partners seek to increase awareness of and responsiveness to community health needs and expand coordination among health improvement projects throughout the San Diego region.

Catalyst for Coalition

In October, 1994, California governor Pete Wilson signed into law senate bill 697 (SB 697) which created a new mandate for not-for-profit, private hospitals. As not-for-profit institutions, these hospitals are required by the Internal Revenue Service (IRS) to provide a community benefit to warrant their tax exempt status. The IRS regulations, however, remain silent on the definition of "community benefit" or any guidelines describing how a hospital should demonstrate this benefit to its community. SB 697 is

California's attempt to more explicitly define "community benefit" and requires the facilities to complete a series of steps, including:

- reaffirm the hospital's mission statement to include reference to serving its community (one time requirement);
- conduct a health needs assessment of its community (every three years);
- prepare a yearly community benefit plan and report (annually);
- submit the benefit plan to the Office of Statewide Health Planning and Development (annually).

Role: Ongoing Assessment

CHIP completed, **Charting the Course** in February of 1996. CHIP's 1998 Needs Assessment, **Charting the Course II**, will be published in February of 1999. CHIP remains committed to an on-going and interactive process to assess needs, track available resources, and support new programs in areas of need. Only by continuing to monitor the community health status and health needs is it possible to determine if programs are having a positive impact. CHIP operates on an outcome-based, population based model where a careful balance must be struck between directing enough resources towards monitoring health status/outcomes and maintaining a focus on the actual provision of care. CHIP recognizes that no one gets any healthier through data analysis and therefore seeks to continue its high level of volunteer effort and low-cost projects. However, it is clear that without coordinated information, health improvement efforts will be a shot in the dark at best.

CHIP Initiatives

To achieve its lofty mission, several self-managing work teams were formed around the community's health care needs. Each work team consists of professionals from various community health care organizations. Many of the work teams have now become self supported programs in our community. The following is a list of current CHIP initiatives and their primary objectives.

Steering Committee

The Steering Committee serves as a "management team" of CHIP and provides oversight and guidance for the self managing work teams. Its composition includes appointees of the Executive Partners' organizations. The Steering Committee is currently chaired by Bud Beck, M.D.

Access to Care Work Team

“Access to Care” is a collaborative effort designed to improve access to care in San Diego. The work team has engaged in a dialogue to identify the elements needed to develop community-wide support to achieve a solution to expand health care coverage to the uninsured and underinsured, using existing government funding more efficiently and effectively in partnership with private efforts. In February of 1998, the Access to Care Work Team published, *Safe Harbor: Increasing Access to Health Care in San Diego*, which analyzes the problem of the lack of health insurance and a weak public indigent care system in San Diego. The Access to Care Work Team is currently chaired by Larry Johnson.

Needs Assessment Work Team

The Needs Assessment Work Team was formed due to SB 697, which requires hospitals to perform a community health needs assessment and to prepare a community benefit plan. Through the guidance of the Needs Assessment Team, in February of 1996, CHIP published *Charting the Course, A San Diego County Health Needs Assessment* and in October of 1996, *Setting Sail: San Diego's Coordinated Community Benefit Plan*. The 1998 Community Health Needs Assessment, *Charting the Course II*, will be published in February of 1999. The Needs Assessment Team also provides technical assistance to other self managed work teams in developing plans for outcomes measures. The Needs Assessment Work Team is currently chaired by Dr. Nancy Bowen.

Immunize San Diego

In October of 1997 and 1998, CHIP has coordinated a county-wide immunization education and Flu Shot Campaign. The goal is to immunize every San Diego citizen who might be at risk for serious complications if they were to get the flu and to immunize everyone who is in contact with individuals at risk. In 1998, CHIP had over 321 affordable or no cost sites throughout the county plus numerous physicians offices distributing “flu” vaccinations. In 1999, the Immunize San Diego Team plans to expand the campaign to include childhood immunizations. The Immunize San Diego Work Team is currently chaired by Dr. Bud Beck.

Mental Health Work Team

The Mental Health Work Team is exploring ideas and solutions to improve the access to mental health care in San Diego. Mental Health is one of the top health problems in San Diego, and the team strives to increase San Diego's awareness to this problem, as well as taking measures to enhance mental health services in our present managed care model. In 1999, the work team plans to create and distribute an informational handbook on how to find the correct resource in San Diego County to meet individual emotional, behavioral, and mental health

problems. The Mental Health Work Team is currently chaired by Dr. Ruth Covell.

Access to Care for New Americans

The New Americans Program has been implemented and now guided by the New Americans Advisory Committee. New Americans works to increase health education and access to health care for New Americans, specifically legal immigrants and refugees within African sub-communities. The program utilizes the Community Health Advocate Program model, which is training of concerned community members. The New Americans Advisory Committee is currently chaired by Pete Mabrey.

Youth to Youth Hotline

The Youth to Youth Hotline is an implemented program, which provides a safe, reliable, anonymous, confidential and non-judgmental peer assistance to teens in crisis or facing difficult situations. This includes, but is not limited to, sexual abuse, depression, relationship problems, and unsafe programs. The Hotline is in operation from 2:00 p.m. to 10 p.m., seven days a week. The Hotline is housed at Harmonium Inc. and has been funded by Kaiser Permanente and other organizations in kind donations.

Project Dulce

Project Dulce is now a self-sustaining program, developed by CHIP and the Whittier Institute in response to the devastating personal health and health system impacts of uncontrolled diabetes among San Diego's uninsured and underserved populations. This program proactively manages diabetes with the goal of improving the quality of life among low-income persons with diabetes. On October 29, 1998, Project Dulce celebrated the graduation ceremony for its first graduating class.

Community Health Advisor Employment Program

CHIP has developed a business plan and feasibility analysis to promote employment for people living in economically depressed areas, to be trained as Community Health Advisors (CHAs). Initially, this project will create an estimated 100 new CHA positions. The project is a highly collaborative effort among San Diego healthcare providers and is optimistic for implementation in 1999.

Goals

- Engage partners in an ongoing community health priority-setting process and dialogue
- Facilitate coordination and collaboration among Partners to implement needed health improvement projects
- Increase awareness of existing resources
- Track, assess and report on outcomes of key health indicators.

Shared values

CHIP is dedicated to the following values:

- Remain a voluntary collaboration with open membership to any person or organization willing to join in and support CHIP's vision, mission and objectives.
- Focus on population-based health improvement through creative and community-based methods.
- Work towards programs that can be sustained by the communities they serve.
- Ask and listen to the people in the communities who are affected by our efforts.
- Remain open-minded and receptive to new ideas, new voices and new methods of improving health.