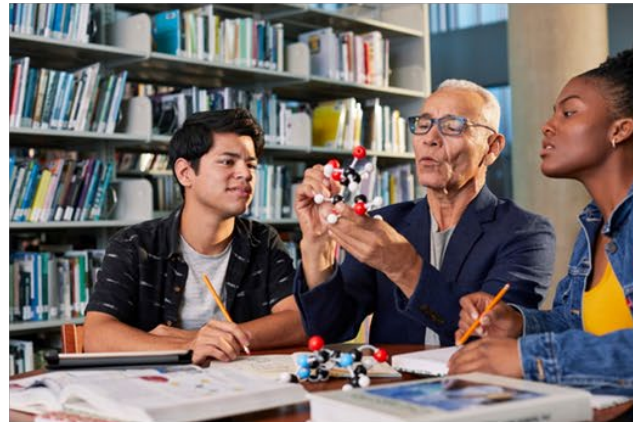


2023 Implementation Strategy



Kaiser Permanente San Marcos Medical Center

License number: 550008664

Approved by Kaiser Foundation Hospitals Board of Director's Community Health Committee

December 5, 2023



Kaiser Permanente San Marcos Medical Center

2023 IMPLEMENTATION STRATEGY

Kaiser Permanente opened San Marcos Medical Center on August 9, 2023. The San Marcos Medical Center produced a CHNA and IS report outside of the typical timeline used in Kaiser Permanente’s 2022 needs assessment process to ensure compliance with California state reporting laws.

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General information

Contact Person	Jane Finley, Senior Vice President and Area Manager
Date of written plan	November 1, 2023
Date written plan was adopted by authorized governing body	December 5, 2023
Date written plan was required to be adopted	May 15, 2024
Authorized governing body that adopted the written plan	Kaiser Foundation Health Plan, Inc., Kaiser Foundation Hospitals, Board of Directors, Community Health Committee
Was the written plan adopted by the authorized governing body on or before the 15 th day of the fifth month after the end of the taxable year the CHNA was completed?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Date facility's prior written plan was adopted by organization's governing body*	March 18, 2020
Name and EIN of hospital organization operating hospital facility	Kaiser Foundation Hospitals, 94-1105628
Address of hospital organization	One Kaiser Plaza, Oakland, CA 94612

* Kaiser Permanente opened San Marcos Medical Center on August 9, 2023. Strategies described in the Kaiser Permanente 2019 San Diego and Zion medical centers Implementation Strategy (IS) report (the prior written plan) included activities to address significant health needs prioritized in the 2019 CHNA report, which covered the San Marcos service area.

Kaiser Permanente San Marcos Medical Center 2023 Implementation Strategy

Summary

Kaiser Permanente is an integrated health care delivery system comprised of Kaiser Foundation Hospitals, Kaiser Foundation Health Plan, and physicians in the Permanente Medical Groups. For 75 years, Kaiser Permanente has been committed to shaping the future of health and health care — and helping our members, patients, and communities experience more healthy years. We are recognized as one of America's leading health care providers and nonprofit health plans.

Every three years Kaiser Permanente San Marcos Medical Center conducts a community health needs assessment (CHNA) and identifies significant health needs. To address those needs, Kaiser Permanente San Marcos Medical Center has developed an implementation strategy (IS) for the priority needs it will address, considering both Kaiser Permanente's and the community's assets and resources. The CHNA-IS process is driven by a commitment to improve health equity and is intended to be transparent, rigorous, and collaborative.

For the 2023-2025 IS, Kaiser Permanente San Marcos Medical Center has identified the following significant health needs to be addressed in the IS, in priority order:

1. Access to care
2. Income & employment
3. Housing
4. Food insecurity
5. Education
6. Mental & behavioral health

Kaiser Permanente San Marcos Medical Center's CHNA report and three-year IS are publicly available at <https://www.kp.org/chna>.

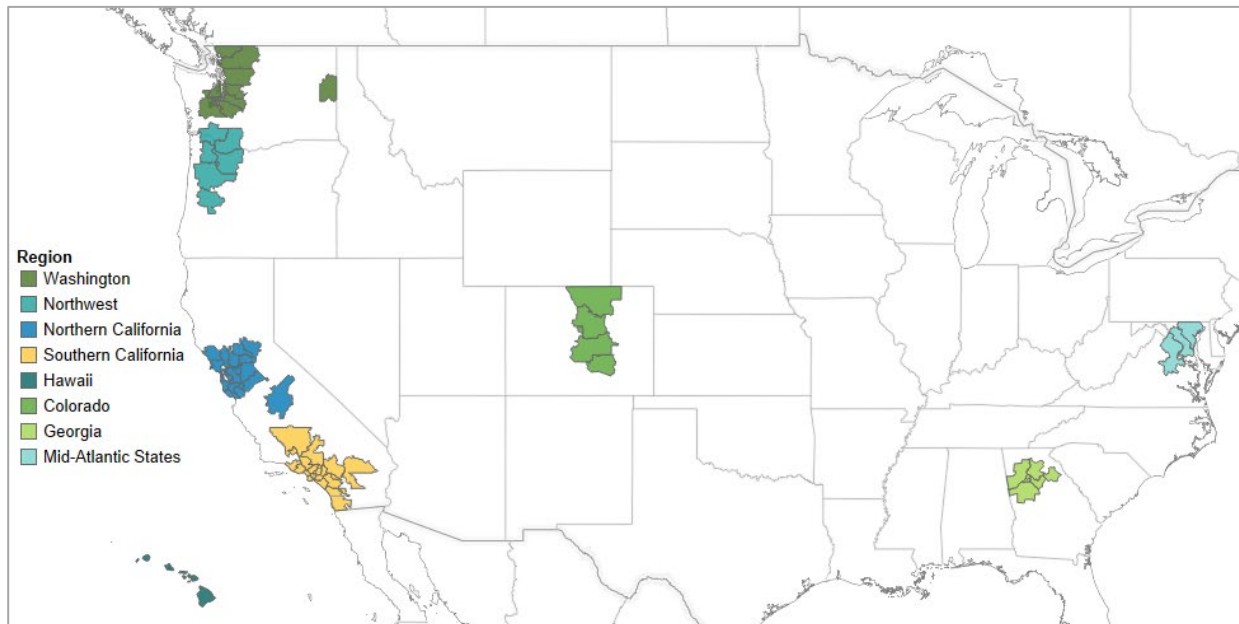
Introduction/background

About Kaiser Permanente

Kaiser Permanente is an integrated health care delivery system comprised of Kaiser Foundation Hospitals, Kaiser Foundation Health Plan, and physicians in the Permanente Medical Groups. For 75 years, Kaiser Permanente has been committed to shaping the future of health and health care — and helping our members, patients, and communities experience more healthy years. We are recognized as one of America’s leading health care providers and nonprofit health plans.

Kaiser Permanente is committed to helping shape the future of health care. Founded in 1945, Kaiser Permanente has a mission to provide high-quality, affordable health care services and to improve the health of our members and the communities we serve. We currently serve 12.5 million members in 8 states and the District of Columbia. Care for members and patients is focused on their total health and guided by their personal Permanente Medical Group physicians, specialists, and team of caregivers. Our expert and caring medical teams are empowered and supported by industry-leading technology advances and tools for health promotion, disease prevention, state-of-the-art care delivery, and world-class chronic disease management. Kaiser Permanente is dedicated to care innovations, clinical research, health education, and the support of community health.

Kaiser Permanente regions and CHNA service areas



About Kaiser Permanente Community Health

At Kaiser Permanente, we recognize that where we live and how we live has a big impact on our health and well-being. Our work is driven by our mission: to provide high-quality, affordable health care services and to improve the health of our members and our communities. It's also driven by our heritage of prevention and health promotion, and by our conviction that good health is a fundamental right.

As the nation's largest nonprofit, integrated health system, Kaiser Permanente is uniquely positioned to improve the health and wellbeing of the communities we serve. We believe that being healthy isn't just a result of high-quality medical care. Through our resources, reach, and partnerships, we are addressing unmet social needs and community factors that impact health. Kaiser Permanente is accelerating efforts to broaden the scope of our care and services to address all factors that affect people's health. Having a safe place to live, enough money in the bank, access to healthy meals, and meaningful social connections is essential to total health. Now is a time when our commitment to health and values compels us to do all we can to create more healthy years for everyone. We also share our financial resources, research, nurses and physicians, and our clinical practices and knowledge through a variety of grantmaking and investment efforts.

As we reflect on how 2020 changed the world, we must recognize that communities everywhere are coping with unprecedented challenges magnified by the COVID-19 pandemic and a renewed struggle for racial equity and social justice.

Through our continued focus on expanding our community health approach we laid the foundation for an acceleration of work to meet the challenges posed by the public health crises we now face. We dedicated ourselves to improving the social health of our 12.5 million members and the millions of people who live in the communities we serve.

Learn more about Kaiser Permanente Community Health at <https://about.kaiserpermanente.org/community-health>.

Kaiser Permanente's approach to community health needs assessment

The Affordable Care Act (ACA) was enacted in March 2010 to make health insurance available to more people, expand the Medicaid program, and support innovative medical care delivery to lower health care costs. The ACA also requires that nonprofit hospitals conduct a community health needs assessment (CHNA) every three years and develop an implementation strategy (IS) in response to prioritized needs.

Kaiser Permanente's CHNA process is driven by a commitment to improve health equity. Our assessments place a heavy emphasis on how the social determinants of health — including structural racism, poverty, and lack of access to health-related resources such as affordable housing, healthy food, and transportation — are affecting the health of communities. By analyzing community-level data and consulting individuals with deep and broad knowledge of health disparities, the Community Health team in each KP service area has identified and prioritized needs unique to the community served. Each service area has developed an IS for the priority needs it will address, considering both Kaiser Permanente's and the community's assets and resources.

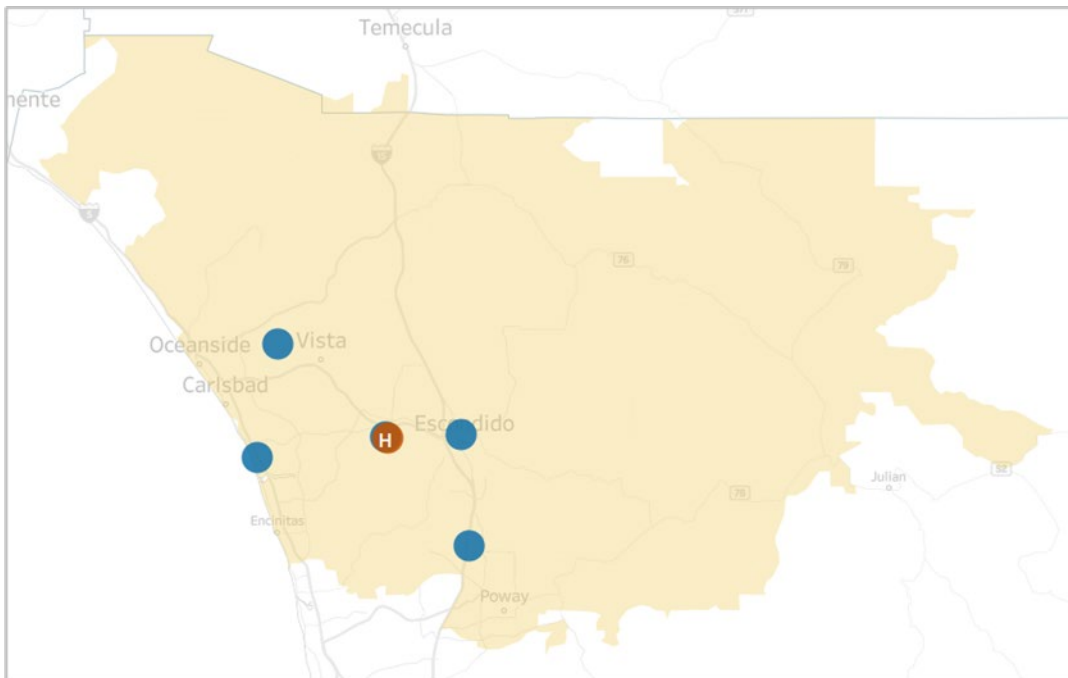
The Kaiser Permanente San Marcos Medical Center's 2022 CHNA report and three-year IS are available publicly at <https://www.kp.org/chna>. In addition, the IS will be filed with the Internal Revenue Service using Form 990, Schedule H.

Community served

Kaiser Permanente defines the community served by a hospital as those individuals residing within its hospital service area. The Kaiser Permanente San Marcos Medical Center hospital service area includes residents in a defined geographic area in north San Diego County surrounding the hospital and does not exclude low-income or underserved populations.

San Marcos service area

H Kaiser Permanente hospital **●** Kaiser Permanente medical offices



San Marcos service area demographic profile

Total population:	1,074,541
American Indian/Alaska Native	0.5%
Asian	8.5%
Black	2.4%
Hispanic	32.8%
Multiracial	3.4%
Native Hawaiian/other Pacific Islander	0.4%
Other race/ethnicity	0.2%
White	51.8%
Under age 18	23.1%
Age 65 and over	15.0%

Community health needs

Significant health needs identified in the Kaiser Permanente San Marcos Medical Center 2022 CHNA report

Each Kaiser Permanente service area analyzed and interpreted the primary and secondary data to determine what constitutes a health need in the community. Once all the community health needs were identified they were prioritized, resulting in a list of significant community health needs in the San Marcos service area, listed below.

1. Access to care
2. Income & employment
3. Housing
4. Food insecurity
5. Mental & behavioral health
6. Education

Kaiser Permanente's implementation strategy process

Identifying the highest priority needs with an equity lens informs our community investments and helps us develop strategies aimed at making long-term, sustainable change, allowing us to deepen the strong relationships we have with other organizations that are working to improve community health.

To identify the significant health needs that Kaiser Permanente San Marcos Medical Center will address in the 2022 three-year Implementation Strategy, Kaiser Permanente San Marcos Medical Center Community Health considered a set of criteria that includes:

- Severity and magnitude of need: How health measures compare to national or state benchmarks, the relative number of people affected, impact of COVID-19 on the need
- Community priority: The community prioritizes the issue over other issues
- Clear disparities or inequities: Differences in health factors or outcomes by geography, race/ethnicity, economic status, age, gender, or other factors
- Leveraging Kaiser Permanente assets: Kaiser Permanente can make a meaningful contribution to addressing the need

Health needs Kaiser Permanente San Marcos Medical Center plans to address

The health needs in the San Marcos service area that will be addressed during 2023-2025 are:

1. Access to care: In the San Marcos service area, a smaller percent of the population is enrolled in Medicaid or public insurance compared to the state and there is a slightly higher percentage of uninsured children than the state average. There are also geographical and racial disparities in access to care. There are several communities in the San Marcos service area where over half the population is people of color and uninsurance rates are comparatively high. Community representatives share that many residents may delay or avoid accessing care because high costs or for fear of having to disclose their immigration status. Given the proximity of San Diego County to Mexico, individuals often seek more affordable care across the border.

2. Income & employment: In the San Marcos service area, the unemployment rate in 2020 was 14 percent, which was higher than the national average. There are also racial disparities in unemployment. Black residents of San Diego County report the lowest percentage of employment at 53 percent compared to white, and Latino/a communities at 63 percent. The median income in the San Marcos service area is \$87,367, which is higher than the state average, yet Black and American Indian residents in the county earn \$22,000 less than their white peers. Interviewed community representatives also emphasized the impact of the COVID-19 pandemic. Many people lost their main sources of income through company shutdowns or layoffs. Previous layoffs have now lent themselves to staffing shortages as businesses begin to reopen.

3. Housing: Access to affordable housing is a widespread issue across San Diego County. The average monthly cost of rent in San Diego County is \$1,822, higher than the average cost of rent in the state (\$1,689). The housing cost burden is also significantly greater for Latino/a and Black residents with nearly 60 percent of both populations experiencing high rent cost burden. Furthermore, interviewed community representatives shared that housing is becoming an even larger issue as there is a visible increase in the number of people experiencing homelessness in north San Diego County. Community representatives also expressed that the COVID-19 pandemic has exacerbated housing concerns. Individuals have less income to pay rent, there is an increase in the number of individuals experiencing homelessness. Young adults in particular struggle with accessing housing as many do not have a sufficient credit history, credit score, or rental history needed to obtain housing. Community representatives shared the importance of coordination among community-based organizations to support individuals who are housing insecure.

4. Food insecurity: Many people do not have enough resources to meet their basic needs, including enough food to eat to lead an active and healthy life. In San Diego County, around 10 percent of residents experience food insecurity. According to a San Diego Community Information Exchange survey, one in three clients is concerned about not having enough to eat in the future, which is a 23 percent increase from 2020. Furthermore, communities of color are disproportionately food insecure. The onset of the COVID-19 pandemic exacerbated food insecurity for many communities despite an increase in food donations. Interviewed community leaders shared that donated food boxes are often a one-size-fits-all package that can lack utensils to support food preparation, which is a gap as nearly a quarter of low-income kitchens lack basic cooking equipment. Interviewed community leaders shared that the process for residents to obtain food donations is cumbersome as there are long lines and limited guidance on where to find support.

5. Mental & behavioral health: Mental health affects all areas of life, including a person's physical well-being, ability to work and perform well in school, and to participate fully in family and community activities. Across mental and behavioral health indicators such as number of poor mental health days, deaths of despair, and number of mental health providers, San Diego County generally performs better than state and national averages. However, there are continuous barriers to accessing mental and behavioral health services. Interviewed community representatives reported that the mental and behavioral health workforce has dwindled significantly during the COVID-19 pandemic due to staff burnout. Furthermore, communities of color have limited options to find culturally competent mental health services that have experience addressing history of discrimination and understand the historical trauma that communities of color experience. The onset of COVID-19 has been impactful in residents' mental and behavioral health, especially for youth.

6. Education: Overall, the San Marcos service area has a greater percentage of people who have attended some college compared to state and national averages. Similarly, there are comparatively more children enrolled in preschool in the San Marcos service area. However, there are gaps in education that are largely related to the demographics of the residents. For example, there is limited racial and ethnic diversity among educational staff in San Diego schools. Furthermore, communities in San Diego County with a higher percentage of communities of color also have higher dropout rates compared to communities with more white residents. Additionally, COVID-19 has introduced a new challenge with schools shifting classes to online platforms. Students reported competing priorities such as doing homework and caring for siblings that contributed to turning in late assignments and increased stress.

Kaiser Permanente's approach to implementation strategies

As the nation's largest nonprofit integrated health care organization, Kaiser Permanente is mission-driven to improve health and well-being in the communities we serve. The COVID-19 pandemic has underscored deep-seated inequities in health care for communities of color and amplified the social and economic disparities that contribute to poor health outcomes.

We will continue to work to improve the conditions for health and equity by addressing the root causes of health, such as economic opportunity, affordable housing, health and wellness in schools, and a healthy environment. We carry out work in our focus areas through a lens that includes deepening our commitment to equity and inclusion.

Kaiser Permanente strategic focus areas include:

Increasing health access

- **Charity care:** Transforming Charitable Health Coverage and Medical Financial Assistance approaches to continue supporting coverage and care needs for our communities and patients
- **Medicaid:** Growing our Medicaid participation in a financially sustainable way through innovative operating models that support whole person care and coverage
- **Safety Net Partnerships:** Ensuring that communities have access to a strong safety net that can equitably meet patients' needs and improve health outcomes

Social health needs

- **Thrive Local:** Establishing bi-directional electronic community networks that enable health care providers, safety net clinics, social service agencies, government programs, and other participants to make, receive, and track patient and client referrals
- **Food for Life:** Transforming the economic, social, and policy environments to improve health and food security for the communities we serve
- **Intergenerational healing and trauma:** Acknowledging and addressing trauma across the life course, including trauma related to exposure to racism

Improving community conditions

- **Economic opportunity:** Increasing income, improving financial security, and reducing economic inequities through our business operations and community partnerships
- **Housing for Health:** Transforming housing and homelessness systems to improve housing stability for the communities we serve
- **Thriving Schools:** Fostering healthier school environments for students, staff, and teachers
- **CityHealth:** Advancing local policies that improve conditions for health
- **Environmental stewardship:** Reducing and eliminating environmental contributors to disease and illness

Kaiser Permanente San Marcos Medical Center implementation strategies

Kaiser Permanente San Marcos Medical Center Community Health has identified the strategic focus, strategies, and expected impact for each priority health need, described in the table below. While we recognize that IS strategies can address multiple health needs, each strategy in the table is associated with the needs where we expect to see the greatest impact.

To implement the strategies identified, Kaiser Permanente San Marcos Medical Center will draw on a broad array of organizational resources, such as grantmaking and leveraged assets, as well as internal Kaiser Permanente programs. Kaiser Permanente San Marcos Medical Center Community Health also recognizes the importance of joint planning and collaboration with community stakeholders and leaders and welcomes opportunities to build on the strong partnerships we currently have in place.

Priority health need	Expected impact	Focus	Strategy
1. Access to care	Increased access to care for low-income at-risk populations	Medicaid & Charity Care	Charitable Health Coverage: Provide access to comprehensive health care and to coverage for low-income individuals and families who do not have access to public or private health coverage
			Medicaid: Provide high-quality medical care services to Medicaid participants who would otherwise struggle to access care
			Medical Financial Assistance: Provide temporary financial assistance to low-income individuals who receive care at KP facilities and can't afford medical expenses and/or cost sharing
			Support organizations that build capacity, provide information about coverage options, assist with eligibility screening, application and enrollment, and advocate for increasing coverage options for low-income individuals
	Improved quality of care for patients of safety net organizations	Safety Net Partnerships	Provide core support to safety net organizations, allowing these organizations to implement initiatives appropriate for the needs of their population (e.g., expansion of specialty care, providing more virtual care for nonsurgical specialties)
	Dismantled discriminatory practices and policies that contribute to health disparities, racial trauma, income inequality and educational achievement gaps	Equity: CBO Leadership and Capacity Building	Support grassroots and advocacy organizations and initiatives
		Equity: Community Power Building	Support to Black, Indigenous, People of Color (BIPOC)-led organizations, with an emphasis on Black-led
All people have access to safe, affordable, and stable housing and homelessness becomes a rare, brief occurrence	Housing for Health: Transform Care	Support improved access and quality of medical care for persons experiencing homelessness	

Priority health need	Expected impact	Focus	Strategy
2. Income & employment	All people have access to a robust network of community organizations to meet their social health needs	Thrive Local: CBO Capacity Development	Support community based organization capacity building, including but not limited to, staffing, training, leadership development, and policy advocacy
		Economic Opportunity: Diverse Small Business	Support organizations that provide culturally and linguistically relevant training and technical assistance to small businesses and entrepreneurs of color
	Reduced structural barriers and improved opportunities for inclusive economic mobility	Economic Opportunity: Individual Financial Health	Improve individual financial health by supporting housing, workforce development, or other organizations that embed or enhance financial coaching services
		Economic Opportunity: Quality Jobs & Careers	Enhance career pathways by partnering with workforce development organizations to develop and implement job training and placement programs, including pre-apprenticeship programs
3. Housing	All people have access to safe, affordable, and stable housing and homelessness becomes a rare, brief occurrence	Housing for Health: Increase Affordable Housing Supply	Provide resources for preserving or enhancing the supply of affordable housing
		Housing for Health: Prevent Homelessness	Support evidence-based housing stabilization assistance
			Support expansion of housing-related legal support for at-risk tenants
		Housing for Health: Strengthen Homeless Systems of Care	Support system-level approaches to reducing homelessness (e.g., achieving quality data)
Housing for Health: Transform Care	Support improved coordination among Continuum of Care programs, social service organizations, and housing providers		

Priority health need	Expected impact	Focus	Strategy
4. Food insecurity	All people have consistent access to affordable healthy food	Food for Life: Meal/Nutrition Distribution	Support organizations that distribute food such as medical tailored meals, prepared food, produce, or other food and meals to school children, families, and those in underserved communities
		Food for Life: Increasing Purchasing Power	Support organizations that increase enrollment in programs that extend food dollars such as in the Supplemental Nutrition Assistance Program (SNAP), Special Supplemental Nutrition Program for Women, Infants and Children (WIC), and federal school meal programs
		Food for Life: Policy and Research	Support local and state policy, research, and advocacy organizations leading efforts that have a direct impact on community food security strategies
5. Education	Reduced structural barriers and improved opportunities for inclusive economic mobility	Economic Opportunity: College & Career Readiness	Support programs that improve high school attendance, achievement, and/or graduation for students of color in low-income areas
			Support the Kaiser Permanente Health Equity Scholars program

Priority health need	Expected impact	Focus	Strategy
6. Mental & behavioral health	Safe, healthy, and supportive learning environments for all students, staff, and teachers	Thriving Schools: Intensive support: Partner with select schools and districts	Provide funding to schools and districts to fill gaps identified in a Healthier Generation assessment or to implement the Healthier Generation Thriving Schools Integrated Approach
		Thriving Schools: Movement building: Strengthen the field	Support organizations advancing policies or research in focus areas: physical, mental and social health; equity and access
	A systemwide approach to preventing and mitigating the negative impacts of trauma	Intergenerational Trauma and Healing	Support Black, Indigenous, People of Color (BIPOC)-led organizations that advance best practices for preventing and/or mitigating the impacts of ACEs, toxic stress, and trauma for communities disproportionately experiencing inequities
	Culturally responsive mental health work force to meet the needs of the community	Economic Opportunity: Quality Jobs & Careers	Enhance career pathways by partnering with workforce development organizations to develop and implement job training and placement programs, including pre-apprenticeship programs
	Vibrant, equitable cities in which everyone lives longer, healthier lives	CityHealth: Policy advancement	Support policy coalitions or other organizations that advance policies that are part of the CityHealth menu: Safer alcohol sales
Support policy coalitions or other organizations that advance policies that are part of the CityHealth menu: Smoke-free indoor air, flavored tobacco restrictions			

Kaiser Permanente San Marcos Medical Center will monitor and evaluate the strategies listed above to track implementation and document the impact of those strategies in addressing significant health needs. Tracking metrics for each prioritized health need include the number of grants made, the number of dollars spent, the number of community-based organizations supported, and the number of people reached/served.

In addition to the strategies developed as part of the CHNA/IS process, many health needs are addressed by Kaiser Permanente business practices that contribute to community well-being, including environmentally responsible purchasing, waste reduction, and purchase of clean energy for facilities. We procure supplies and services from a diverse set of providers and partner with workforce development programs to support a pipeline for diverse suppliers, and we build the capacity of local small businesses through training on business fundamentals. We also conduct high-quality health research and disseminate findings intended to increase awareness of the changing health needs of diverse communities, address health disparities, and improve effective health care delivery and health outcomes.

Health needs Kaiser Permanente San Marcos Medical Center does not plan to address

Kaiser Permanente San Marcos Medical Center is addressing all of the significant needs identified in the 2023 CHNA.