



2021 Community Benefit Plan and Report Our Promise to the Community

In fiscal year 2020, Scripps Health provided

\$432 million

in community benefit services



From organizing food drives to support Scripps employees in need to treating patients in our hospitals and providing COVID-19 vaccination clinics throughout San Diego, Scripps has mobilized in many ways to care for the community during the pandemic.

We Succeed Because We Are Stronger Together

One thing that has remained constant throughout the ever-changing pandemic environment is Scripps commitment to the health and safety of our community. While COVID-19 dominated health care headlines this year, our experts were profoundly aware that other health concerns persisted. More than ever before, Scripps physicians, nurses and staff joined together to reimagine care in unimaginable circumstances and were relentless in their pursuit to safely care for our community. In this report, you'll read about some of the innovative ways that Scripps dedicated health care heroes united to show our community that even during some of the most difficult times, we are stronger together.

LETTER FROM THE CEO

The Scripps story began with a strong commitment to the San Diego community.

-A commitment that continues today-



Our founders, Ellen Browning Scripps and Mother Mary Michael Cummings, were both women ahead of their time. Their commitment to provide for the health care needs of a growing community resulted in the Scripps Health of today.

Miss Ellen, as she was known, preferred the term “investment” over “donation”, and her contributions were carefully considered as much for their future promise as for their immediate impact. Decades earlier, Mother Mary Michael’s patient logs illustrated her fundamental mission to make quality health care available to all who needed it.

Today, more than 16,000 employees, physicians and volunteers continue to build on our rich history and keep the spirit of community service alive. The pages that follow provide a comprehensive account of how we achieve that: our community benefit programs and services, and our plans for continued action in the future.

In Fiscal Year 2020 Scripps community benefit contributions totaled \$431,882,133 This includes \$394,126,261 in uncompensated care, \$27,934,884 in professional education and health research, \$5,933,512 in community health services and \$3,680,538 in subsidized health, and \$206,937 in community building activities.

This past year has been unlike any other I’ve seen in over 20 years at Scripps. With the onset of the COVID-19 pandemic in March 2020, our incredible team of physicians, nurses and staff mobilized to save thousands of lives and care for countless others throughout San Diego. And our community stood beside them, providing critical supplies, equipment and other resources.

As we look ahead, we know that we will face new challenges. At Scripps we are continually changing to better meet our patients’ needs, improve access in our community, reduce our costs, and simply bring more value to the patients we serve. When Ellen Browning Scripps and Mother Mary Michael Cummings brought quality health care to San Diego 100 years ago, they could never have imagined the care we provide today or the more than 700,000 lives we touch each year. As a private, tax-exempt health care system, Scripps will continue our legacy of making a vital and measurable difference in our community.

A handwritten signature in black ink, appearing to read "Chris Van Gorder". The signature is fluid and cursive, written over a white background.

Chris Van Gorder, FACHE
President and CEO

MISSION, VISION, AND VALUES

MISSION

Scripps strives to provide superior health services in a caring environment and to make a positive, measurable difference in the health of individuals in the communities we serve.

We devote our resources to delivering quality, safe, cost-effective, socially responsible health care services. We advance clinical research, community health education, education of physicians and health care professionals and sponsor graduate medical education.

We collaborate with others to deliver the continuum of care that improves the health of our community.

VISION

Scripps Health will continue to be the leading health care delivery system in the greater San Diego community, as evidenced by the highest clinical quality, patient safety, and patient, physician and employee satisfaction. This will be achieved through unending focus on patient-centered and compassionate care, cost-effective operations, research, advanced technology and innovation.

VALUES

We provide the highest quality of service

Scripps is committed to putting the patient first, and quality is our passion. In the new world of health care, we want to anticipate the cause of illness and encourage healthy behavior for all that rely on us for service. We teach and encourage patients to participate in their care and to make well-informed decisions. We will be their advocates when they are most vulnerable. We measure our success by our patients' satisfaction, their return to health and well-being, and our compassionate care for dying patients, their families and friends.

We demonstrate complete respect for the rights of every individual

Scripps honors the dignity of all persons. We show this by our actions toward one another and those we serve. We embrace the diversity that allows us to draw on the talents of one another. We respect and honor the cultural, ethnic and religious beliefs and practices of our patients in a manner consistent with the highest standard of care. All this is done in a compassionate setting. Our goal is to create a healing environment in partnership with all caregivers committed to serving our patients.

We care for our patients every day in a responsible and efficient manner

Scripps serves as a major community health care resource for San Diego County and, as such, we are accountable for the human, financial and ecological resources entrusted to our care as we promote healing and wholeness. We begin from a base of excellence and collaborate with co-workers, physicians, patients, and other providers to find new and creative ways to improve the delivery of health care services. All members of our community will have access to timely, affordable and appropriate care.

ABOUT SCRIPPS HEALTH

Founded in 1924 by philanthropist Ellen Browning Scripps, Scripps Health is a \$3.5 billion not-for-profit integrated health system based in San Diego, California. Scripps treats more than 700,000 patients annually through the dedication of more than 3,000 affiliated physicians and more than 16,000 employees among its five acute-care hospital campuses and an ambulatory care network of physician offices and 32 outpatient clinics (including 16 Scripps Health Express locations). Scripps also offers payer products and population health services through Scripps Accountable Care Organization, Scripps Health Plan and customized narrow network plans in collaboration with third-party payers

Scripps Health is a leading provider of medical care, improving community health and advancing medicine in San Diego County. The system operates four acute-care hospitals on five campuses and numerous ambulatory clinics geographically located across the entire county, from Chula Vista to Oceanside. The system is recognized for our expertise in women's health, cancer care, cardiovascular disease prevention and treatment, and neurocognitive care including dementia and therapy-induced cognitive sequela. Scripps is also at the forefront of clinical research, and digital health care. With three highly respected graduate medical education programs, Scripps is a longstanding member of the Association of American Medical Colleges. Our hospitals are consistently ranked by U.S. News & World Report among the nation's best and Scripps is regularly recognized by Fortune magazine, Working Mother magazine, and the Advisory Board as one of the best places in the nation to work. Importantly, Scripps culture is one of caring; the spirit and culture established by two pioneering founders, Mother Mary Michael Cummings and Ellen Browning Scripps still define who we are today. More information can be found at www.scripps.org.

SCRIPPS FACILITIES/DIVISIONS

Scripps Memorial Hospital Encinitas
Scripps Green Hospital
Scripps Memorial Hospital La Jolla
Scripps Clinic
Scripps Mercy Hospital
*San Diego & Chula Vista Campuses

Scripps Clinical Research Services
Scripps Coastal Medical Center
Scripps Whittier Diabetes Institute

SERVICE OFFERINGS

Scripps is an integrated health care delivery system consisting of four acute-care hospitals on five campuses, 32 outpatient centers and clinics (including 16 Scripps Health Express locations), home health care, palliative care, clinical research, and ancillary services for the San Diego region and beyond. Scripps primary care lines include:

CARDIOVASCULAR CARE

- Scripps treated more than 304,000 heart patients in Fiscal Year 2020 – more than any other provider in San Diego. With volume comes high quality, as evidenced by the program being consistently ranked as the best in San Diego for cardiology and heart surgery by U.S. News & World Report. Scripps has been ranked among the top heart programs in San Diego, and in the country, for 16 years, including the most recent 2020-2021 rankings.
- In 2015, Scripps opened the \$456 million Prebys Cardiovascular Institute, which brought together expertise from across the system. The institute is the largest heart hospital on the West Coast with 167 inpatient beds and serves as the center of excellence for research and education.
- For more than 30 years, Kaiser Permanente has chosen Scripps Health to be its partner in cardiac care. Scripps is the exclusive provider of heart surgery to Kaiser Permanente members throughout the San Diego County.
- Scripps Health hospital campuses – Scripps Mercy San Diego, Scripps Mercy Chula Vista, Scripps Memorial Hospital La Jolla, Scripps Memorial Hospital Encinitas and Scripps Green Hospital earned the 2020 Get with The Guidelines Stroke Gold Plus Quality Achievement Award. The award is part of the American Heart Association/American Stroke Association's Get with The Guidelines Stroke Program.

DIABETES CARE AND PREVENTION

Nationally recognized as a leader in endocrinology and diabetes care, Scripps Health provides expertise in treating diabetes, thyroid disease and other endocrine disorders personalized to patients unique needs. Scripps offers a comprehensive range of diabetes services and programs, including medical treatment, education and resources to help patients care for themselves and their family members with diabetes, and programs to help people at risk of diabetes prevent the disease.

Scripps Whittier Diabetes Institute is Southern California's leading diabetes center of excellence, committed to providing the best evidence-based diabetes screening, education and patient care in San Diego, including outpatient education, inpatient glucose management, clinical research, professional education, and community-based programs.

CANCER CARE

- In 2016, Scripps Health and MD Anderson Cancer Center announced a partnership agreement to create a comprehensive and clinically integrated cancer center in San Diego, to be known as Scripps MD Anderson Cancer Center.
- Scripps MD Anderson Cancer Center is part of MD Anderson Cancer Network, a global collaborative network of hospitals and health care systems dedicated to MD Anderson's mission to eliminate cancer.
- MD Anderson's patient-centered approach combines the expertise of the country's top oncologists and highly skilled cancer specialists with groundbreaking clinical trials and some of the most advanced treatments and technology available
- MD Anderson has been named one of the nation's top two hospitals for cancer care every year since the U.S. News & World Report's "Best Hospitals" survey began in 1990.
- Scripps MD Anderson Cancer Center is committed to fighting cancer through a collaborative, team approach that puts the patient at the center of care. Oncology nurse navigators give personalized assistance to help guide patients through their treatment journey.
- In October 2018, Scripps officially launched its new integrated cancer program, Scripps MD Anderson Cancer Center. There are over 180 physicians in the program (medical oncologists, radiation oncologists, surgeons, pathologists, radiologists, pulmonologists, palliative care physicians and others).
- Since the Scripps MD Anderson Cancer Center program inception, hundreds of people facing a new cancer diagnosis have been treated by care teams where patients have been able to see a medical oncologist, radiation oncologist, and surgeon during the same visit and receive a coordinated treatment plan for best outcomes.
- Scripps launched an Inflammatory Breast Cancer Clinic in April 2019, first in California.

- In August 2019, Scripps broke ground on a state-of-the-art cancer center on the Scripps Mercy Hospital campus that will offer a range of cancer treatment and support services. The center will open in 2021.

ORTHOPEDICS

- Nationally ranked for the eight-consecutive year, Scripps adult orthopedics was ranked No. 1 in San Diego, and No. 10 nationally by U.S. News & World Report in its annual 2020-21 “Best Hospitals” rankings. Scripps hospitals are recognized for excellence in orthopedic surgery, joint replacement, sports medicine and treatment of complex conditions. Treatment options include the latest FDA approved technologies, devices and procedures at multiple locations throughout San Diego County.
- Scripps Health orthopedic care is committed to helping the greater San Diego community stay healthy and active. In addition to providing advanced diagnostic services, surgical and non-surgical treatments and rehabilitation care, Scripps physicians are also well-known leaders in the field of orthopedic surgery—locally and nationally.
- Dedicated to improving patient care and quality of life, Shiley Center for Orthopedic Research and Education (SCORE) at Scripps Clinic investigates the safety and efficacy of new technologies and therapies designed for the treatment of musculoskeletal diseases and disorders.
- Scripps provides musculoskeletal trauma care at Scripps Mercy Hospital, San Diego, a Level I trauma center, and Scripps La Jolla, a Level II trauma center.

NEUROSCIENCES

- Scripps has been recognized in Neurology & Neurosurgery by U.S. News & World Report as No 2 in San Diego and No. 41 nationally in its annual 2020-21 “Best Hospitals” rankings. From stroke care, Alzheimer’s and Parkinson's disease to traumatic brain injuries, Scripps neurological specialists use the most advanced technology and treatment methods.
- Scripps is San Diego’s leader in stroke prevention, life-saving stroke treatment and stroke rehabilitation. All five Scripps Health hospital campuses have earned the Stroke Gold Plus Quality Achievement Award by the American Heart Association/American Stroke Association for delivering high-quality, life-saving stroke care. The awards, which are part of the AHA/ASA’s Get With The Guidelines stroke program, recognize hospitals across the United States that consistently comply with patient management quality measures.

- The Joint Commission has certified all four Scripps hospital campuses with emergency rooms as Primary Stroke Centers. The certification recognizes organizations that make exceptional efforts to foster better outcomes for stroke care. It signifies that our hospitals have all the critical elements in place to achieve long-term success in improving outcomes after stroke.
- Our physicians lead research activities designed to find better treatments for conditions like Parkinson's, MS, and Alzheimer's.

WOMEN'S AND NEWBORN SERVICES

- Scripps delivers almost 9,000 babies annually and provides care to thousands of women needing routine and advanced obstetrical care.
- Scripps offers a full spectrum of gynecology services throughout San Diego. Scripps was ranked No.1 in San Diego, and No. 31 nationally by U.S. News & World Report in its annual 2020–2021 “Best Hospitals” rankings.
- The women and newborn services care line creates a forum to foster development of integrated women's clinical care operated at multiple Scripps Health sites, bridging together the inpatient and ambulatory continuum of care. Scripps Health prioritizes system efforts related to OB, gynecology and NICU development.
- Scripps perinatology program, also known as Maternal Fetal Medicine Specialists, offers comprehensive care for patients delivering at Scripps throughout their pregnancy episode.

BEHAVIORAL HEALTH

- The Scripps behavioral health care line offers a variety of services to adults with emotional and behavioral disorders. Our goal is to assist patients in regaining control of their lives and reconnecting with their families and community. The Scripps behavioral health services program provides inpatient treatment and access to outpatient mental health services. The psychiatric liaison services and substance use nurses are provided at all five acute care Scripps hospital campuses and associated urgent care facilities. A supportive employment program is also offered to those seeking volunteer or employment opportunities.

PRIMARY CARE

- Scripps Health offers a countywide network of primary care physicians with expertise in family medicine, internal medicine and pediatrics to care for individuals at every stage of their lives.

- Full range of services includes prevention, wellness and early detection services for diagnosis and treatment of injuries, illnesses and management of chronic medical conditions.

EMERGENCY AND TRAUMA MEDICINE

- Scripps operates four emergency departments and three urgent care centers and is home to two of the region's five adult trauma centers: a Level I trauma center at Scripps Mercy Hospital, San Diego and Level II Trauma center at Scripps Memorial Hospital La Jolla.
- Scripps La Jolla, Scripps Encinitas and Scripps Mercy San Diego hospitals have all opened new, larger Emergency Departments (EDs) within the past five years to better serve our community.
- All four Scripps emergency rooms are certified as Primary Stroke Centers by The Joint Commission and are certified by the American Heart Association as STEMI (ST) Elevation Myocardial Infarction (a severe heart attack caused by clotting of one or more arteries) receiving centers.
- Scripps Emergency Departments serve as major training sites for interns, residents, nurse practitioners, and physician assistants from multiple training programs around the region, including Naval Medical Center San Diego. These intensive, hands-on clinical rotations help train future providers not only for our local community but also for our troops overseas.
- Scripps EDs treats tens of thousands of disadvantaged and underserved patients each year, often for free or at steeply discounted rates through Medi-Cal and similar programs. Scripps EDs are part of the safety net for patients who often have nowhere else to turn for timely primary care or specialty care that is not available in the local community clinics.
- Scripps doctors have led the way for emergency care in San Diego County by leading the annual county-wide Emergency Care Summit, creating safe prescribing guidelines for controlled substances, promoting guidelines for the use of CT scan in pediatric head injuries, creating a system to reduce ambulance bypass hours, and educating providers about the appropriate use of anti-psychotic medications for psychiatric emergencies.

GOVERNANCE

As a tax-exempt health care system, Scripps takes pride in its service to the community. The Scripps system is governed by a 14-member, volunteer Board of Trustees. This single point of authority for organizational policy ensures a unified approach to serving patients across the region.

ORGANIZATIONAL FOUNDATION

Scripps provides a comprehensive range of inpatient and ambulatory services through our system of hospitals and clinics. In addition, Scripps participates in dozens of partnerships with government and not-for-profit agencies across our region to improve our community's health. And our partnerships don't stop at our local borders. Our participation at the state, national and international levels includes work with government and private disaster preparedness and relief agencies, the State Commission on Emergency Medical Services, national health advocacy organization, as well as international partnerships for physician education and training, and direct patient care. In all that we do, we are committed to quality patient outcomes, service excellence, operating efficiency, caring for those who need us today and planning for those who may need us in the future.

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2021**

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Investing in Our Community

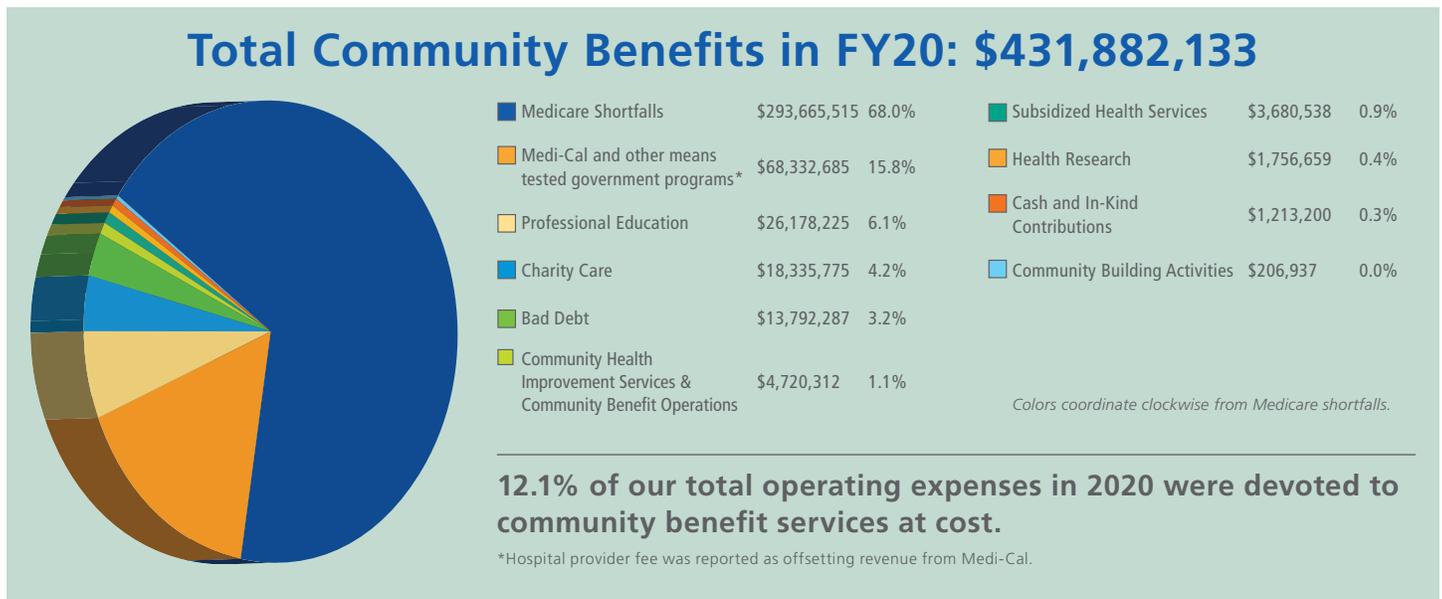
Scripps touches countless lives in San Diego. We are proud of our multifaceted community efforts, which expand access to vitally needed health care services and improve the quality of life for people throughout the region. This report shares many of the ways we serve our community.

In fiscal year 2020, Scripps Health devoted more than \$432 million to community benefit programs, including over \$18 million in charity care. We offer many free and low-cost services, including community clinics, support groups, screenings for key health indicators, youth programs, special education for pregnant women and patient advocacy services.

Keeping patients at the center of everything we do, Scripps collaborates with other health systems, community groups, government agencies, businesses and grassroots organizations to serve the greatest needs and prioritize our investments in the health of our community. For more information, visit [Scripps.org/CommunityBenefit](https://www.scripps.org/CommunityBenefit).

Scripps Facts

- More than 3,000 affiliated physicians and 16,000 employees treat and support more than 700,000 patients each year.
- Scripps cares for people throughout San Diego with four acute care hospitals on five campuses, 32 outpatient locations, and 16 Scripps *HealthExpress* sites.
- Three highly respected graduate medical education programs and two pharmacy resident programs train the next generation of caregivers.
- Operating revenue: \$3.558 billion
- Operating expenses: \$3.442 billion
- Total inpatient discharges: 66,328
- Total outpatient visits: 2,519,092
- Emergency visits: 199,388



Financial Assistance

Scripps financial assistance policy reflects our commitment to help low income and uninsured patients with discounted hospital charges, charity care, and flexible billing and debt collection practices. These programs are consistent with state and federal legislation, and are available to everyone in need, regardless of their race, ethnicity, gender, religion or national origin.

Deepening Our Understanding of COVID-19 with Education and Research

From comprehensive patient education and prevention to participation in innovative research, Scripps is committed to keeping the community up to date on the battle against COVID-19.

Virtual Town Halls Educate and Inform

More than 300 community members registered for a series of three virtual town halls on COVID-19 updates in August, and more continue to view the recordings online. Hosted by Scripps Hub Academic Research Core in partnership with the Scripps Hub Community Advisory Team and the San Diego County COVID-19 Equity Task Force, the events featured local experts covering topics such as local vaccine trials, treatment updates, contact tracing and mental health care resources. These events reached attendees from across the county, including the most vulnerable communities, and provided an opportunity for live questions and answers. Offered in English, Spanish and Tagalog, the town halls were moderated by the San Diego Union-Tribune's biotech reporter.

Spreading the Prevention Message in South Bay

Scripps Well Being Center partnered with Chula Vista Community Collaborative to train promotoras to disseminate information on preventing the spread of COVID-19 in South Bay communities. The virtual training session was recorded live and available for later viewing. Participants shared information with friends and relatives and through their social media platforms; in total, the training reached more than 1,000 individuals.

Following the training, Scripps Family Practice Residency Program offered five virtual Meet the Doc sessions to the community. Nearly 200 participants joined the virtual sessions to learn about COVID-19-related topics from Scripps residents.



Michael Preziosi, MD, Scripps infectious disease physician, presented during a three-part COVID-19 town hall, made possible by the SHARC Community Advisory Team and members of the San Diego COVID-19 Equity Task Force.

NIH CEAL Teams Promote Education and Inclusion

The NIH launched the Community Engagement Alliance Against COVID-19 Disparities in several states to address communities that have been disproportionately impacted by the virus. The alliance also worked to combat misinformation and myths about COVID-19, treatments and vaccines. As part of the CEAL award to California, the Scripps Hub Academic Research Core team partnered with the San Diego County COVID-19 Equity Task Force to provide outreach events both virtually and at a safely redesigned community health and resource fair. During these events, experts offered resources and assessed COVID-19 knowledge and feelings about research participation.

Text Education for Hispanics with Diabetes Near the Border

Scripps Whittier Diabetes Institute received a grant from the National Institutes of Health to improve the health of Hispanics with diabetes in the US/ Mexico-border region — a group at higher risk of experiencing poor COVID-19 outcomes. The Dulce Digital-COVID Aware Discharge (DD-CA) program, which uses texting to improve communications and provide follow-up care recommendations for recently discharged patients with diabetes, aims to improve glucose control and reduce readmission rates and COVID-19 transmission after patients leave the hospital. DD-CA combines culturally and linguistically relevant diabetes and COVID-19 educational messaging with glucose management support in a low-cost, easily adoptable platform to address specific barriers in underrepresented Hispanic and Latino communities.

Convalescent Plasma Therapy Studies

During the early period of the pandemic, small studies suggested that patients with COVID-19 could benefit from convalescent plasma — blood plasma with protective antibodies obtained from patients who have recovered from the virus. The Mayo Clinic is conducting a nationwide convalescent plasma therapy study in which plasma donated by recovered patients was transfused into high-risk or severely ill patients with COVID-19. Another multicenter national study, PassItOn (Passive Immunity Trial for Our Nation), is a randomized study that tests convalescent plasma in hospitalized patients with COVID-19; one group receives the plasma, while a control group receives fluids with vitamins. Scripps Health is participating in both studies. To learn more about these studies, visit www.uscovidplasma.org and passitonstudy.org.



The supplemental Dulce Digital-COVID Aware program helps to address barriers in diverse underserved Hispanic and Latino communities to improve glucose control and lower transmission of COVID-19 following hospital discharge.

Transportation Service Improves Health Care Access

The total cost of missed health care appointments in the United States every year is an astronomical \$150 billion. For millions of patients across the country, arranging transportation to a medical appointment presents a challenge. To help address this transportation barrier, in 2019, Scripps entered a partnership with Facilitating Access to Coordinated Transportation (FACT) Inc., a local non-profit organization. FACT provides transportation for San Diego residents in need by coordinating on-demand rides for patients. This collaborative service has quickly proven to be a reliable, convenient, and cost-effective solution to one of the most difficult and expensive challenges in accessing medical care: transportation.

In 2019, Scripps and FACT conducted a pilot project, funded partly by a County of San Diego Community Enhancement grant, to offer medical transportation options through a single point of contact. The pilot provided rides for patients, including those who needed specialized vehicles or personal assistance to complete their trip. Scripps staff contacted FACT via telephone number; FACT staff then selected the appropriate vehicle, equipment and personnel to dispatch the ride. Along with providing riders with a more reliable and convenient transportation option, the pilot resulted in time and cost savings.

Because of the pilot's success, Scripps and FACT have a new agreement that extends the service to multiple Scripps hospitals. FACT has expanded to help patients get to and from appointments and takes discharged patients home or to other facilities seven days a week, anywhere within San Diego and beyond.



After a successful pilot program, Scripps and the FACT program have an agreement to provide patients in need with medical transportation to and from Scripps hospitals.

“Our partnership with Scripps Health has created a template for dismantling one of the most challenging barriers to better health care — the lack of suitable transportation,” says Arun Prem, FACT executive director. “Our successful collaboration demonstrates that mobility is an integral part of wellbeing and needs to be incorporated into the continuum of health care services for optimum outcomes.”

FACT vehicles can accommodate riders using a walker, cane, wheelchair or scooter, as well as transport gurneys. Depending on riders' needs, drivers are available to assist patients with getting to and from the vehicle and their facility or residence safely.

As of November 2020, the partnership had provided more than 400 rides, and the program is expanding in 2021.

FACT at a Glance:

- Total trips completed through November 30, 2020: 462
- Total trips to Imperial County: 32
- Longest trip: 150 miles one way to Bombay Beach
- Other counties transported to: Ventura, San Bernardino and Orange

Expanding Graduate Medical Education Programs, Expanding Care

Scripps offers a comprehensive range of graduate medical education (GME) programs at Scripps Green Hospital; Scripps Mercy Hospital, San Diego; and Scripps Mercy Hospital, Chula Vista. Well-known for excellence, our GME programs provide a hands-on curriculum focused on patient-centered care. Hospital-based training includes rotations in internal medicine, family medicine, podiatry, pharmacy and palliative care. Throughout their education, students provide much-needed care to underserved populations locally and internationally. In fiscal year 2020, Scripps GME enrolled 160 residents and 46 fellows.

New Internal Medicine Residency Program at San Ysidro Health Center

In July, six residents joined the new Teaching Health Centers Internal Medicine Residency in affiliation with San Ysidro Health Centers. The program offers broad-based medical education in a diverse community. San Ysidro Health Center has 27 free-standing clinic sites in Medically Underserved Areas (MUAs) that include immigrants and refugees, people who are poor, uninsured and elderly, and those living with HIV/AIDS. Residents will stay in the community and provide continuity of care. Residents also have public health research opportunities in the clinic setting as well as community, hospital or clinic quality improvement projects of their own.

Graduate Medical Education Takes Proactive Approach to COVID-19

The COVID-19 pandemic required significant changes to GME resident education and patient care. Residents continued to care for patients both



Teaching Health Centers Internal Medicine Residency trainees will stay in the community and provide ongoing continuity of care for underserved patients.

in-person and via telehealth, and supported the care of hospitalized patients with COVID-19, including in the ICU and labor and delivery. Virtual educational and training conferences, including presentations and town hall-style workshops, addressed coronavirus infection in adults, children and pregnant women, as well as health disparities in relation to the virus. San Diego Border Area Health Education Center, located within Scripps Well Being Center, partnered with the Scripps Family Medicine Residency Program to train residents on public health and community issues, personal protective equipment guidelines, testing options and more. The AHEC team also developed a webinar series shared across California to educate health professions students on COVID-19 long-haulers, mental health and vaccines.

Scripps Family Medicine Residency Program continued to provide community-based education for high school students and binational partners using a virtual forum for topics, such as nutrition, reproductive health, substance use and mental health issues. Positive lessons have been learned about adaptation, resilience and finding innovative ways to remain patient-centered during this pandemic.

rPrIDE Spotlights Diversity

To augment traditional medical training, resident leaders developed the “rPrIDE” (Residency: Promoting Inclusion, Diversity and Equity) curriculum to focus on health equity and racism in medicine. The workshop series explores historic and current disparities through expert presentations and personal reflection, and complements the established Spanish medical curriculum to improve cultural and linguistic competence.

Raising Stroke Awareness and Prevention in the Community

Widespread concerns about contracting COVID-19 caused many people to stay away from hospitals and doctors' offices — even if that meant foregoing potentially lifesaving stroke care. In the early months of the pandemic, as stroke hospitals across the nation reported a decline in admissions, Scripps Stroke Program spearheaded real-time data collection in collaboration with 18 stroke centers in San Diego County. When they found a 30% decline in stroke admissions compared to 2019, Scripps Stroke Program dedicated time and resources to create and disseminate a campaign urging county residents to seek emergency treatment when experiencing symptoms of a stroke, while reassuring them that it was safe to come in for care.

Scripps Stroke Program led a collaborative group, including San Diego County EMS, San Diego regional American Heart Association/American Stroke Association, and the San Diego County Stroke Consortium, in creating a united marketing message: "We are here for you. Every minute matters."

The social media campaign ran on Facebook, Twitter, Instagram and LinkedIn, with a total of 26,727 views. The community collaborative also was submitted for consideration at the 2021 International Stroke Conference.

Stroke Team Holds Community Events

The Scripps Stroke Team coordinated several stroke awareness and educational events in 2020 at schools, businesses and senior centers. The team shared information about the physiology of stroke, risk factors, prevention, BE-FAST (recognition of stroke and accessing 911), and conducted stroke risk and blood pressure screenings.

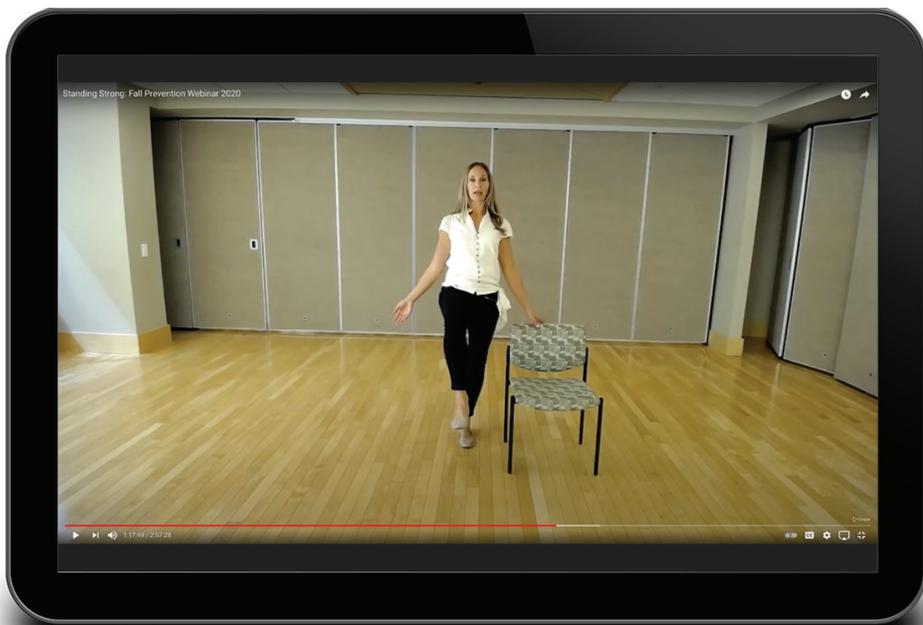
In February, the team partnered with the American Heart Association for an AT&T Stroke Screening at the AT&T San Diego campus. Team members provided 70 stroke risk and blood pressure screenings



(Top) In February 2020, the Scripps stroke team educated and screened employees at the AT&T stroke screening event. (Above) Scripps stroke team members performed blood pressure screenings for AT&T employees.

to employees, many of whom have stressful jobs in call centers, along with BE-FAST education and tips to maintain healthy blood pressure.

Events such as these can significantly impact stroke education and risk among participants. The team plans to hold additional events in 2021.



During a comprehensive fall prevention webinar, a Scripps exercise physiologist offered five exercises for participants to practice daily to improve balance.

Helping Keep Seniors on Their Feet

According to the National Council on Aging, falls are the leading cause of fatal and nonfatal injuries for older Americans. One in four Americans aged 65+ experience a fall each year; every 11 seconds, an older adult is treated in an emergency department for a fall.

Understandably, many older adults have concerns about falling and restrict their activities. Scripps educates older adults countywide on preventing falls through exercise and taking proactive safety measures in the home. “A Matter of Balance” is an eight-week program on practical strategies to manage falls, improve safety awareness and utilize available resources to promote independence and overall safety. Scripps physical therapists and physical therapy student volunteers provide fall risk assessments and lead balance classes to help enhance stability, posture and coordination. While COVID-19 restricted access to the program for much of 2020, Scripps was chosen as a pilot site to test a virtual version of the program that will roll out in 2021.

Scripps also held free interactive events on fall prevention in September 2019 and January 2020; participants learned about improving balance, flexibility and strength, and received balance and fall risk screening assessments from Scripps physical therapy specialists.

Virtual Fall Prevention Events

To kick off National Falls Prevention Awareness Week, September 21–25, Scripps hosted a two-hour fall prevention education webinar. “Standing Strong” featured a panel of Scripps experts who provided safety tips, exercises and education, as well as a question and answer session.

Scripps also partnered with the County of San Diego Health and Human Services Agency and the San Diego Fall Prevention Task Force to moderate 20 Zoom sessions during National Falls Prevention Awareness Week. The free sessions were open to the public and featured titles including:

- Fall Prevention 101.
- Keeping Your Daily Balance.
- Medication Management in Older Adults.
- Kitchen Safety in a COVID-19 World.
- Fall Prevention Screening and Getting Up Safely After a Fall.

As part of the National Falls Prevention Awareness Week Scripps Shiley Sports and Fitness Center staff also provided online exercise classes to help attendees improve balance.

Donation Drives Help Brighten the Holidays

The holidays inspire many with the spirit of giving, and in a year like no other, generosity was in full force at Scripps throughout the holiday season. One in six people in San Diego County face the threat of hunger every day, and COVID-19 exacerbated food insecurity (currently experiencing or at-risk of experiencing hunger) in San Diego. This year, Scripps employees donated a total of 3,164 pounds of food to the Jacobs & Cushman San Diego Food Bank, which provides emergency food to 370,000 children and families, active-duty military, and fixed income seniors living in poverty; and 510 pounds of food to Feeding San Diego, which collects and distributes donations to local food pantries or others in need.

Scripps employees also donated clothing, household necessities and more, including:

- An estimated total of 100 pairs of shoes and socks to the Alpha Project.
- Hygiene and snack packs to StandUp For Kids.
- Toys to the Polinsky Children's Center.
- Gifts for foster children to PROMISES2KIDS.

Improving the Health of Our Community

At Scripps, we put our patients at the center of all that we do. We have joined with our partners throughout the San Diego community with the goal to ensure that everyone has access to lifesaving care. Whether it's a physician visit, a class or a prevention program, Scripps is committed to enhancing access to the care and improving our community's health.



Scripps employees donated shoes and socks through Alpha Project.

In addition, Scripps employees "adopted" several families in San Diego who are experiencing a tough year. One family, a single mother and her child, are living in a shelter and hiding from her abusive spouse. Another has three children, including a 5-year-old recently diagnosed with cancer.

Employees also continued their annual tradition of creating goodie bags for children who come in through the emergency department. Donated items include pencils, stickers, notebooks, craft items and more; staff made more than 200 bags this year.



For more information about the programs and services offered by Scripps Health, visit [Scripps.org/CommunityBenefit](https://www.scripps.org/CommunityBenefit) or contact the Scripps Health Office of Community Benefit Services at **858-678-7095**.

2021 COMMUNITY BENEFIT PLAN AND REPORT

TABLE OF CONTENTS

Section 1	FULLFILLING THE SCRIPPS MISSION	1
Section 2	COMMUNITY HEALTH NEEDS ASSESSMENT (CHNA)	6
Section 3	UNCOMPENSATED HEALTHCARE	29
Section 4	COMMUNITY HEALTH SERVICES	39
Section 5	PROFESSIONAL EDUCATION & HEALTH RESEARCH	134
Section 6	SCRIPPS MEMORIAL HOSPITAL LA JOLLA	151
Section 7	SCRIPPS MEMORIAL HOSPITAL ENCINITAS	161
Section 8	SCRIPPS MERCY HOSPITAL	169
Section 9	SCRIPPS GREEN HOSPITAL	198
Section 10	SCRIPPS WHITTIER DIABETES INSTITUTE	206
Section 11	SCRIPPS MEDICAL FOUNDATION	215
Section 12	SCRIPPS SYSTEM WIDE PROGRAMS	221
Section 13	APPENDICES	247

Section 1

Fulfilling the Scripps Mission

FULFILLING THE SCRIPPS MISSION

This report was developed in response to Senate Bill 697. Passed in 1994, the bill requires California's, not-for-profit hospitals to annually describe and document the full range of community benefits they provide. Scripps has taken this legislative requirement a step further.

This report incorporates not only documentation of community benefits, but also a more detailed explanation of the specific community benefit activities provided by our five acute-care hospital campuses, wellness centers and ambulatory care clinics.

The report details programs and services that provide community benefits above and beyond standard practices of care. Scripps divides community benefit services into three main categories, community health improvement services, professional education and health research and uncompensated health care. Uncompensated care includes charity care, bad debt, and Medi-Cal and Medicare shortfalls.

- Community Health Improvement Services
- Professional Education and Health Research
- Uncompensated Care

The report covers the period of Fiscal Year 2020 (October 1, 2019 through September 30, 2020). During this fiscal year, Scripps devoted \$431,882,133 to community benefit programs and services in the three areas listed above (see Figures 1.1 and 1.2). Our programs emphasize community-based prevention efforts and use innovative approaches to reach residents at greatest risk for health problems. Due to rounding, numbers presented throughout this report may not add up precisely to the totals indicated and percentages may not precisely reflect figures for the same reason.

The documentation and activities described in this report are commitments we make to improve the health of both our patients and the diverse San Diego communities. As a longstanding member of these communities, and as a not-for-profit community resource, our goal and responsibility are to assist all who come to us for care, and to reach out especially to those who find themselves vulnerable and without support. This responsibility is an intrinsic part of our mission. Through our continued actions and community partnerships, we strive to raise the quality of life in the whole community. Definitions of terms used in this report can be found in Appendix A.

Community benefit is defined as programs or activities that provide treatment of promote health and healing in response to an identified community need. Community benefit programs must meet at least one of the following criteria:

- Respond to a public health need
- Responds to needs of special populations
- Involves education or research that improves overall community health
- Relieves or reduces the burden of government or other community efforts

SCHEDULE H (FORM 990)

Hospitals with tax-exempt status are required to provide information specific to their organization on Schedule H, Form 990 (the annual information return filed by tax-exempt organizations.) Schedule H is used by tax-exempt hospitals to report community benefits and it became mandatory beginning with tax year 2009.¹

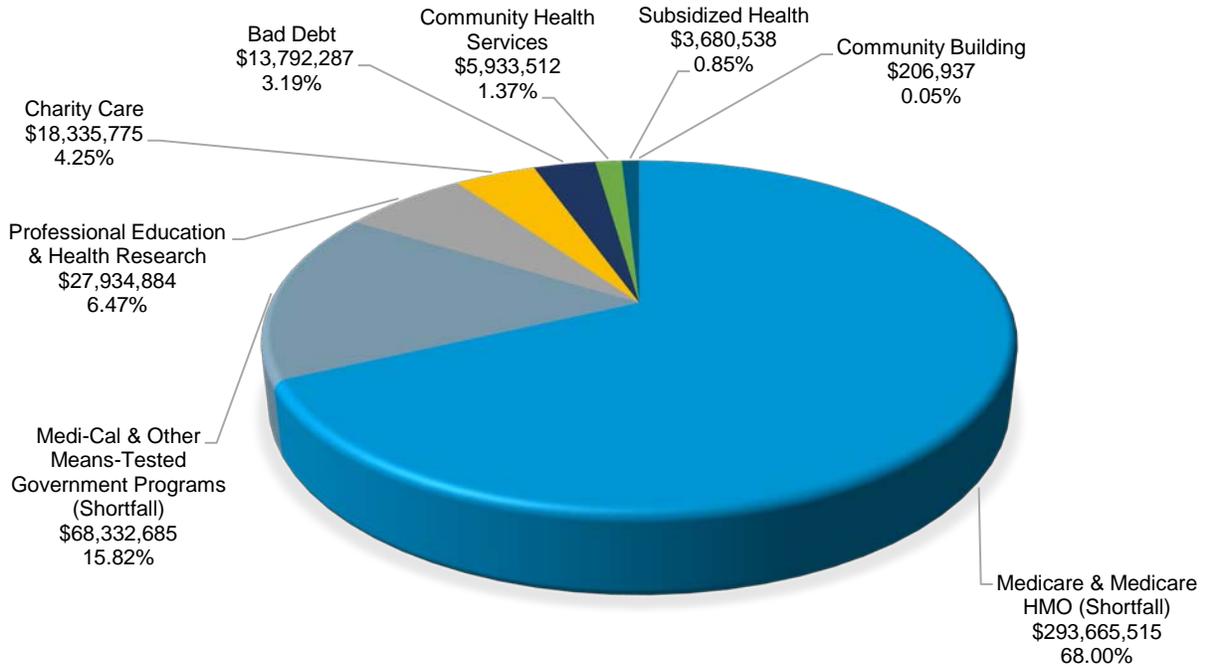
Scripps has aligned the 2021 Community Benefit Plan and Report to the Federal Schedule H categories. According to the IRS, community building activities, bad debt and Medicare shortfalls are reported, but not included in the community benefit totals. (See page 42 for a breakdown of the Scripps Schedule H Uncompensated Care Summary for Fiscal Year 2020.)

¹ Congressional Research Services, Nov. 19, 2009. www.crsdocuments.org

FIGURE 1.1

Fiscal Year 2020

SCRIPPS TOTAL COMMUNITY BENEFIT SERVICES, \$431,882,133



Community Benefits Services (Provider Fee Impact)	Bad Debt	Charity Care	Medi-Cal (Shortfall)	Medicare & Medicare HMO (Shortfall)	Community Health Services	Prof Ed & Health Research	Subsidized Health Services	Community Building Activities	Total
Before Provider Fee	\$13,792,287	\$18,335,775	\$123,411,944	\$293,665,515	\$5,933,512	\$27,934,884	\$3,680,538	\$206,937	\$486,961,391
Provider Fee	-	-	(\$55,079,259)	-	-	-	-	-	(\$55,079,259)
Net After Provider Fee	\$13,792,287	\$18,335,775	\$68,332,685	\$293,665,515	\$5,933,512	\$27,934,884	\$3,680,538	\$206,937	\$431,882,133

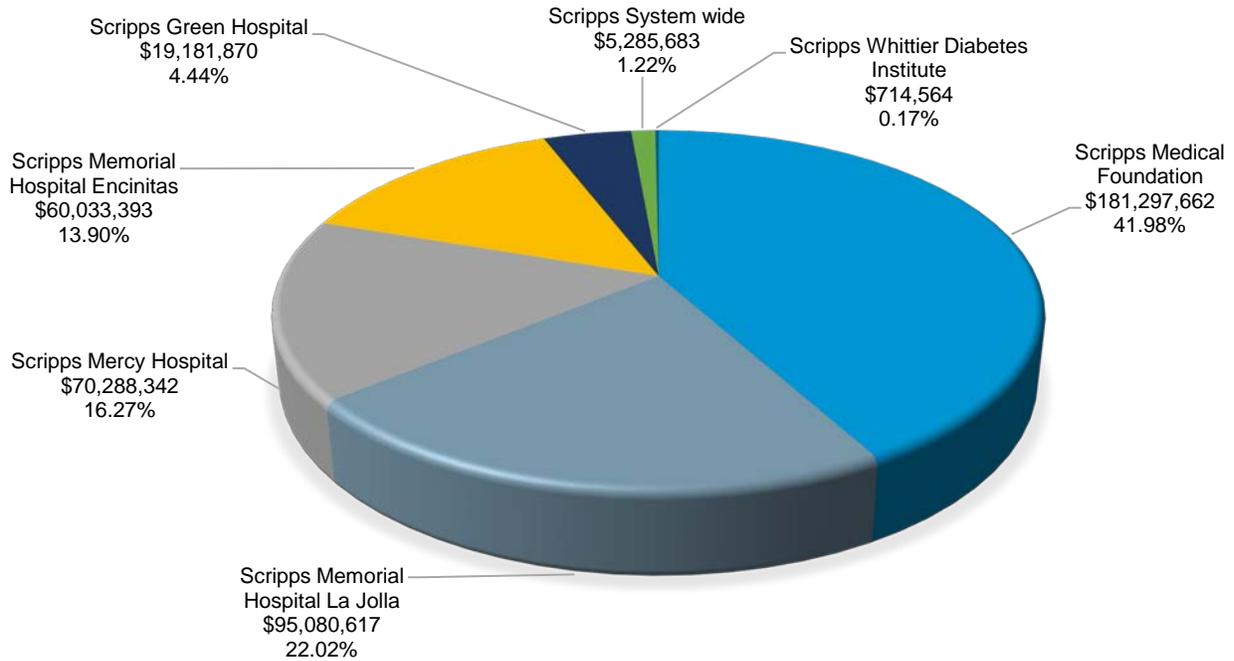
COMMUNITY BENEFIT SERVICES

Community benefit services include those programs offered to the community that go above and beyond what is provided as a normal part of patient care. Scripps divides community benefit services into three categories, including uncompensated health care, community health services and professional education and health research. Uncompensated care includes charity care, bad debt, and Medi-Cal and Medicare shortfalls.

FIGURE 1.2

Fiscal Year 2020

SCRIPPS TOTAL COMMUNITY BENEFIT SERVICES BY OPERATING UNIT, \$431,882,133



Community Benefits Services (Provider Fee Impact)	Scripps Memorial Hospital La Jolla	Scripps Green Hospital	Scripps Memorial Hospital Encinitas	Scripps Mercy Hospital	Scripps Whittier Diabetes Institute	Scripps Medical Foundation	Scripps System wide	Total
Before Provider Fee	\$88,651,021	\$19,324,739	\$56,387,894	\$135,299,829	\$714,564	\$181,297,662	\$5,285,683	\$486,961,391
Provider Fee	\$6,429,596	(\$142,868)	\$3,645,500	(\$65,011,487)	-	-	-	(\$55,079,259)
Net After Provider Fee	\$95,080,617	\$19,181,870	\$60,033,393	\$70,288,342	\$714,564	\$181,297,662	\$5,285,683	\$431,882,133

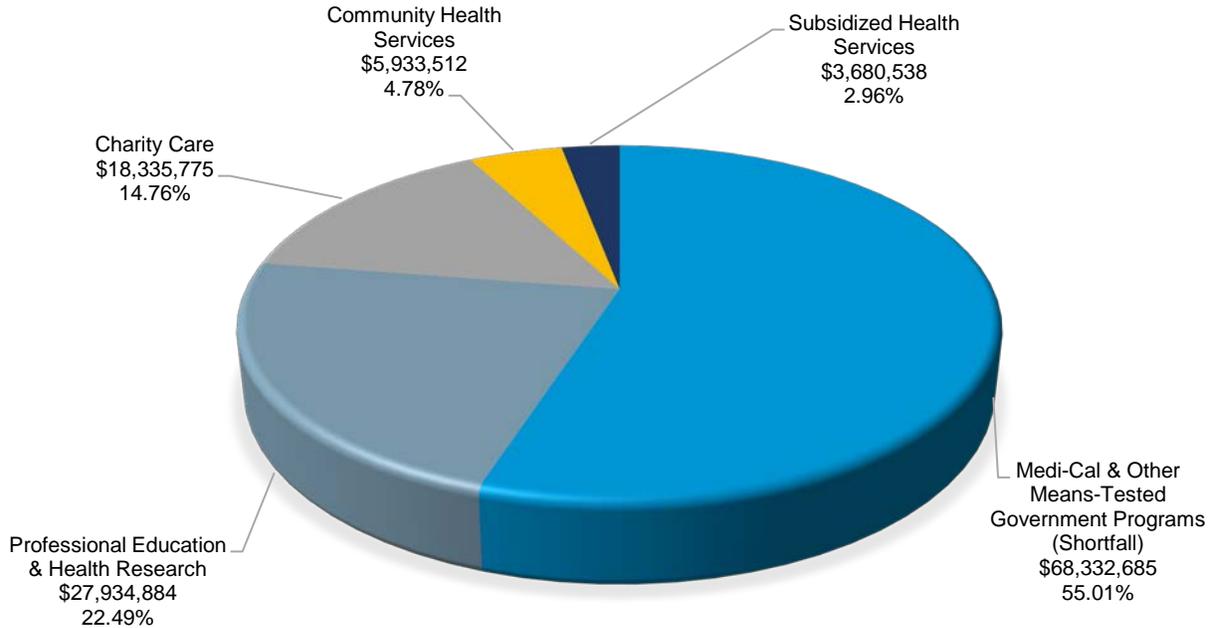
COMMUNITY BENEFIT SERVICES

Community benefit services include those programs offered to the community that go above and beyond what is provided as a normal part of patient care. Scripps divides community benefit services into three categories, including uncompensated health care, community health services and professional education and health research. Uncompensated care includes charity care, bad debt, and Medi-Cal and Medicare shortfalls.

FIGURE 1.3

Fiscal Year 2020

SCRIPPS SCHEDULE H COMMUNITY SERVICES BY CATEGORY,
\$124,217,393



Community Benefits Services (Provider Fee Impact)	Charity Care	Medi-Cal (Shortfall)	Community Health Services	Prof Ed & Health Research	Subsidized Health Services	Total
Before Provider Fee	\$18,335,775	\$123,411,944	\$5,933,512	\$27,934,884	\$3,680,538	\$179,296,652
Provider Fee	-	(\$55,079,259)	-	-	-	(\$55,079,259)
Net After Provider Fee	\$18,335,775	\$68,332,685	\$5,933,512	\$27,934,884	\$3,680,538	\$124,217,393

COMMUNITY BENEFIT SERVICES

Community building activities, bad debt and Medicare shortfall do not count as a community benefit under the Schedule H 990 but are still reportable outside the community benefit table.

Section 2

**Scripps Health Community
Served and
Scripps Community Health
Needs Assessment (CHNA)**

DEMOGRAPHIC PROFILE OF SAN DIEGO COUNTY

Current population demographics and changes in demographic composition over time play a defining role in the types of health and social services needed by communities. Population size change in race, ethnicity, and age distribution are all important factors in understanding communities and their health needs. Further breakdowns in San Diego County demographics are displayed in Table 2.1.

San Diego is the second most populous county in California and fifth most populous in the United States. San Diego has:

- Close to 3.3 million residents
- Majority minority population
- Busiest land border crossing in the world – 1 of every 13 people who enter the US come through San Ysidro.
- 70 miles of coastline
- 16 naval and military installations
- 18 federally qualified recognized Indian reservations
- A total of 4,526 square miles, larger than Rhode Island and Delaware combined

Population: Over three million people (3,337,685) live in the 4,526 square mile area of San Diego County (SDC) according to the U.S. Census Bureau American Community Survey 2009-13, 5-year estimates. The population density for this area, estimated at 746 persons per square mile, is greater than the national average population density of approximately 88 persons per square mile. In 2017, the most populous municipality in San Diego was city of San Diego, with a population of 1,390,966. City of San Diego comprised 42.4% of the county's population. Approximately 96.7% of the population lives in an urban area compared to just 3.3% living in rural areas.

Population Change: According to the U.S. Census Bureau Decennial Census, between 2000 and 2010 the population in San Diego County (SDC) grew by 281,480 persons, a change of 10.0%. This is similarly to the percentage population change seen during the same time-period in California (10.0%) and the United States (9.7%). A significant shift in total population over time impacts the demand for health care providers and the utilization of community resources.

Race/Ethnicity: In the U.S. Census Bureau American Community Survey 2009-2013, data for race and ethnicity are collected separately. Of those who identified as non-Hispanic (67.7%) in SDC, the majority identified their race as white (70.9%), followed by Asian (16.1%), black (7.1%), Multiple Races (4.5%), Native Hawaiian/Pacific Islander

(0.6%), and American Indian/Alaskan Native (0.5%). Of those who identified as Hispanic or Latino (32.4%) in SDC, the majority also identified their race as white (72.4%), followed by other (19.9%), Multiple Races (5.1%), American Indian/Alaskan Native (1.1%), black (0.8%), Asian (0.6%), and Native Hawaiian/Pacific Islander (0.1%).

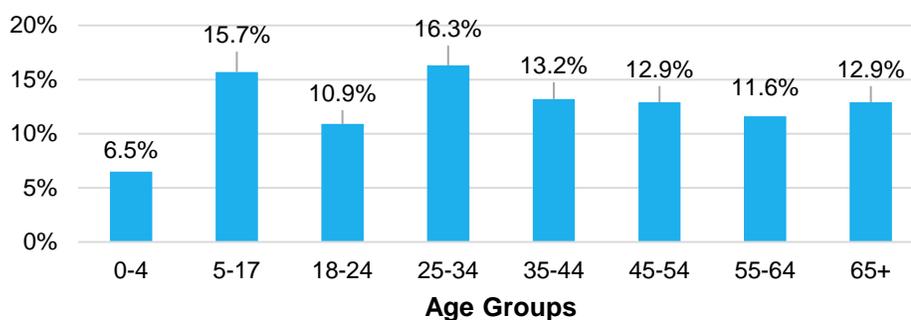
Age: The median age for San Diego County is 35.4 years. The distribution of the population by age shows that 22.2% of the population is under the age of 18, 64.9% is between the ages of 18 and 64, and 12.9% is 65 years old or greater (Figure 2.2).

TABLE 2.1. SAN DIEGO COUNTY DEMOGRAPHICS, 2013-2017

Population	#	Race/Ethnicity	%
Total Population	3,283,665	Asian	11.5%
Socioeconomic	%	Black	4.7%
Living in Poverty (<100% federal poverty level)	13.3%	Hispanic/Latino	33.4%
Children in Poverty	17.1%	Native American/Alaska Native	0.4%
Unemployment	3.2%	Pacific Islander/Native Hawaiian	0.4%
Adults with No High School Diploma	13.3%	Some Other Race	0.2%
		Multiple Races	3.3%
		White	46.2%

Source: U.S. Census Bureau. American Community Survey, 2013-2017 5-Year Estimate.

FIGURE 2.2. PERCENTAGE OF SAN DIEGO POPULATION BY AGE GROUP, 2013 - 2017



Source: U.S. Census Bureau. American Community Survey, 2013-2017 5-Year Estimate.

Additional information on socioeconomic factors, access to care, health behaviors, and the physical environment can be found in the Scripps 2019 CHNA report at [Scripps Health 2019 Community Health Needs Assessment Report](#).

SAN DIEGO'S UNINSURED

Low-income, uninsured, and undereducated individuals have been found to be most at risk for poor health status and health outcomes. Data from the American Community Survey (ACS) show how these indicators impact the San Diego community. Evaluating these risk factors is important for identifying communities with the most significant health needs and health disparities.

The lack of health insurance is a significant barrier to accessing needed health care and to maintaining financial security. Between 2010 and 2013 uninsured rate was relatively stable in the United States, California and in San Diego County. In the past, gaps in the public insurance system and lack of access to affordable private coverage left millions without health insurance and the number of uninsured Americans grew over time, particularly during the economic downturns. By 2013, the year before the major coverage provisions of the Affordable Care Act (ACA) went into effect, more than 44 million nonelderly individuals lacked coverage.²

Under the Patient Protection and Affordable Care Act (ACA), millions of Californians have gained health coverage. These gains have come either through the expansion of Medicaid (called Medi-Cal in California) to low income adults earning up to 138% of the federal poverty guideline (FPG), or through Covered California, the state's ACA health insurance marketplace, where people earning up to 400% FPL can purchase subsidized insurance coverage. The major coverage expansions of the ACA were implemented starting in 2014 and between 2013 and 2018, the uninsured rate for Californians under age 65 was nearly halved, dropping from 15.5% to 8.1%³ (This percentage includes children).

The economic downturn caused by the coronavirus pandemic has renewed attention on health insurance coverage as millions have lost their jobs and potentially their health coverage. The Affordable Care Act (ACA) sought to address the gaps in our health care system that leave millions of people without health insurance by extending Medicaid coverage to many low-income individuals and providing subsidies for Marketplace coverage for individuals below 400% of poverty.⁴

KEY FINDINGS

Following the ACA, the number of uninsured nonelderly Americans declined by 20 million, dropping to an historic low in 2016. However, beginning in 2017, the number of

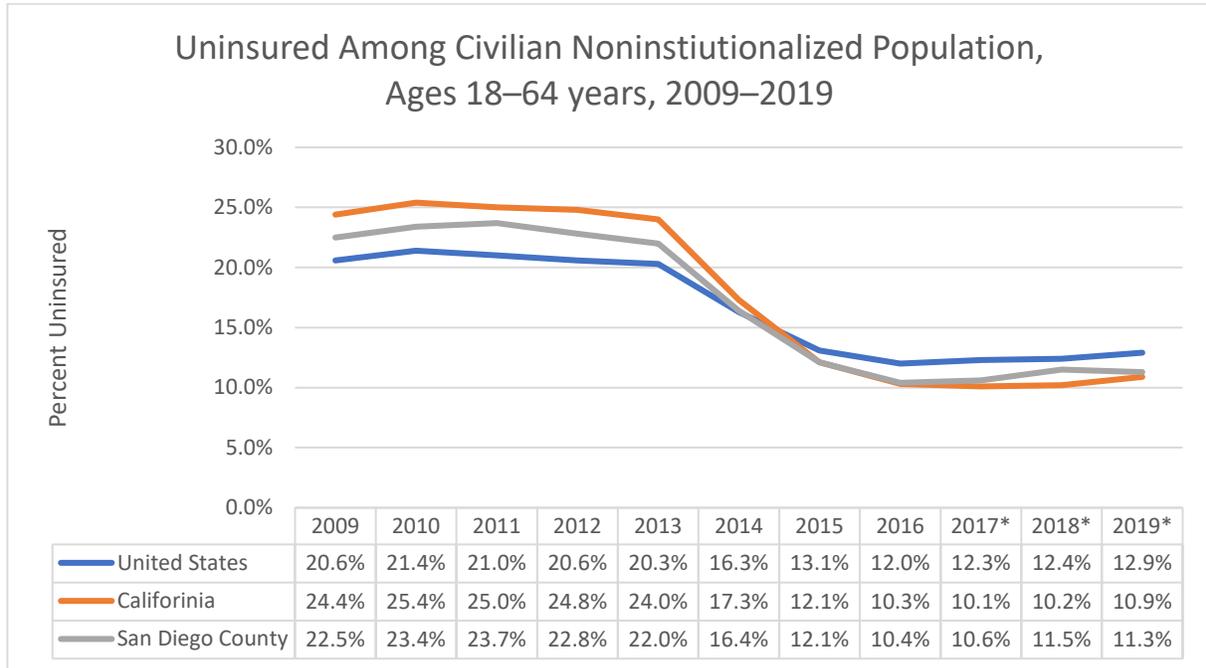
² Kaiser Family Foundation, Analysis of 2013 National Health Information

³ California Health Care Foundation, "ACA Reduces Racial/Ethnic Disparities in Health Coverage". October 2018

⁴ Kaiser Family Foundation, Analysis of 2020 Key Facts about the Uninsured Population

uninsured nonelderly Americans increased for three straight years, growing by 2.2 million from 26.7 million in 2016 to 28.9 million in 2019, and the uninsured rate increased from 10.3% in 2016 to 10.9% in 2019 for California and from 10.4% in 2016 to 11.3% in San Diego County. ⁵

FIGURE 2.3. PERCENT UNINSURED: UNITED STATES, CALIFORNIA & SAN DIEGO COUNTY, 2009 – 2019



*2017–2019 data show uninsured percentage for 19–64 year olds.
 Source: U.S. Census Bureau. American Community Survey, 2019, 1-Year Estimates.

⁵ Ibid., 11

SCRIPPS HEALTH COMMUNITY SERVED

Hospitals and health care systems define the community served as those individuals residing within its service area. A hospital or health care system service area includes all residents in a defined geographic area surrounding the hospital. Scripps serves the entire San Diego County region with services concentrated in North Coastal, North Central, Central and Southern region of San Diego. Scripps provides significant and growing volumes of emergency, outpatient, and primary care. In Fiscal Year 2020, Scripps provided 2,519,092 outpatient visits. Community outreach efforts are focused in those areas with proximity to a Scripps facility. Scripps hosts, sponsors, and participates in many community-building events throughout the year. Figure 2.4 is a map of Scripps Health service areas.

TABLE 2.2. SCRIPPS HEALTH LOCATIONS

Scripps Health			
Hospital/Health Care System*	Location		
Scripps Memorial Hospital La Jolla	9888 Genesee Ave.	La Jolla	92037
Scripps Mercy Hospital	4077 5th Ave.	San Diego	92103
Scripps Green Hospital	10666 N. Torrey Pines Road	La Jolla	92037
Scripps Memorial Hospital Encinitas	354 Santa Fe Drive	Encinitas	92024
Scripps Mercy Hospital Chula Vista	435 H St.	Chula Vista	91910

*Locations represent the major hospital or health care/system locations and do not represent all types of hospital or health care locations.

FIGURE 2.4 - SCRIPPS HEALTH SERVICE AREA



2019 COMMUNITY HEALTH NEEDS ASSESSMENT (CHNA)

Scripps Health has a long history of responding to the health needs of the communities it serves, extending beyond traditional hospital care to address the health care needs of the region's most vulnerable populations. Community Health Needs Assessment (CHNA) originated from California statewide legislation in the early 1990s. SB 697 took effect in 1995, which required private not-for-profit hospitals to submit detailed information to the Office of Statewide Health Planning and Development (OSHPD) on their community benefit contributions. Annual hospital community benefit reports are summarized by OSHPD in a Report to the Legislature, which provides valuable information for government officials to assess the care and services provided to their constituents.

The SB 697 requirement was supplemented in 2010 by requirements in the Patient Protection and Affordable Care Act or ACA that not-for-profit hospitals conduct community health needs assessments with community stake holders to determine significant health needs of the community they serve and implementation strategies to help meet those needs. Additional information on the ACA requirements for not-for-profit hospitals can be found at <http://www.irs.gov>, keyword: "Charitable Organizations." For more detailed information on the CHNA regulatory requirements and Implementation Strategy see Appendix E.

As part of the federal reporting requirement for private, not-for-profit (tax exempt) hospitals, Scripps conducts a consolidated Community Health Needs Assessment (CHNA) and corresponding joint Implementations strategy for its licensed hospital facilities every three years. This comprehensive account of health needs in the community is designed for hospitals to plan their community benefit programs together with other local health care institutions, community-based organizations and consumer groups.

The 2019 Scripps Health Community Health Needs Assessment (CHNA) is designed to provide a deeper understanding of barriers to health improvement in San Diego County. The report will help us understand our community's health needs and inform community benefit planning and the implementation strategy for Scripps Health. In addition, the assessment allows interested parties and members of the community a mechanism to access the full spectrum of information relative to the development of the Scripps Health 2019 Community Health Needs Assessment Report.

Scripps strives to improve community health through collaboration. Working with other health systems, community groups, government agencies, businesses and grassroots movements, Scripps is better able to build upon existing assets to achieve broad community health goals. The complete report is available online at [Scripps Health 2019 Community Health Needs Assessment Report](#).

CHNA EXECUTIVE SUMMARY

This executive summary provides a high-level summary of the 2019 CHNA methodology and findings. The full CHNA report contains in-depth information and explanations of the data that participating hospitals and healthcare systems will use to evaluate the health needs of their patients and determine, adapt, or create programs at their facilities.

Grounded in a longstanding commitment to address community health needs in San Diego, seven hospitals and health care systems, including Scripps Health came together under the auspices of the Hospital Association of San Diego and Imperial Counties (HASD&IC) to conduct a triennial Community Health Needs Assessment (CHNA) that identifies and prioritizes the most critical health-related needs of San Diego County residents. The complete HASD&IC 2019 CHNA is available for public viewing and download at <https://hasdic.org/2019-chna/>. Participating hospitals use the findings to guide their community programs and meet IRS regulatory requirements. Per legislation hospitals conduct a health needs assessment in the community once every three years.

The 2019 Scripps Health Community Health Needs Assessment (CHNA) is designed to provide a deeper understanding of barriers to health improvement in San Diego County and build on the results of the 2016 CHNA. It includes three types of community engagement efforts: focus groups with residents, community-based organizations, service providers, and health care leaders; key informant interviews with health care experts; and an online survey for residents and stakeholders. In addition, the CHNA includes extensive quantitative analysis of national and state-wide data sets, San Diego County emergency department and inpatient hospital discharge data, county mortality and morbidity data, and data related to social determinants of health. These two different approaches allowed the CHNA Committee to view community health needs from multiple perspectives.

Participating hospitals use this information to inform and guide hospital programs and strategies. The report includes an analysis of health outcomes and associated social determinants of health which create health inequities—"the unfair and avoidable

differences in health status” seen within and between countries⁶ and communities with the understanding that the burden of illness, premature death, and disability disproportionately affects racial and minority population groups and other underserved populations⁷. Understanding regional and population-specific differences is an important step to understanding and ultimately strategizing ways to make collective impact. These new insights allow participating hospitals to identify effective strategies to address the most prevalent and challenging health needs in the community.

2019 CHNA OBJECTIVES

The objectives of the 2019 CHNA were:

- Identify and prioritize the most critical health-related needs in San Diego County based on feedback from community residents in high need neighborhoods who face inequities.
- Provide a deeper understanding of barriers to health improvement in San Diego County, as well as inform and guide local hospitals in the development of their programs and strategies that address identified community health needs.
- Build on and strengthen community partnerships established through the previous CHNA process.

OVERVIEW AND BACKGROUND

HASD&IC contracted with the Institute for Public Health (IPH) at San Diego State University (SDSU) to provide assistance with the collaborative health needs assessment that was officially called the HASD&IC 2019 Community Health Needs Assessment (2019 CHNA). The 2019 CHNA was implemented and managed by a standing CHNA Committee comprised of representatives from seven hospitals and health systems:

- Kaiser Foundation Hospital – San Diego
- Palomar Health
- Rady Children's Hospital – San Diego
- Scripps Health
- Sharp HealthCare
- Tri-City Medical Center

⁶ World Health Organization. Social determinants of health. http://www.who.int/social_determinants/sdh_definition/en/. Accessed March 2016

⁷ U.S. Department of Health and Human Services, HHS action plan to reduce racial and ethnic health disparities. A Nation Free of Disparities in Health and Health Care. (Washington, D.C.: U.S. Department of Health and Human Services, Office of Minority Health, 2011). http://minorityhealth.hhs.gov/npa/files/plans/hhs/hhs_plan_complete.pdf

- UC San Diego Health

The 2019 CHNA involved a mixed methods approach using the most current quantitative data available and more extensive qualitative outreach. Throughout the process, the IPH met bi-weekly with the HASD&IC CHNA committee to analyze, refine, and interpret results as they were being collected. The results of the 2019 CHNA are used to inform and adapt hospital programs and strategies to better meeting the health needs of San Diego County residents.

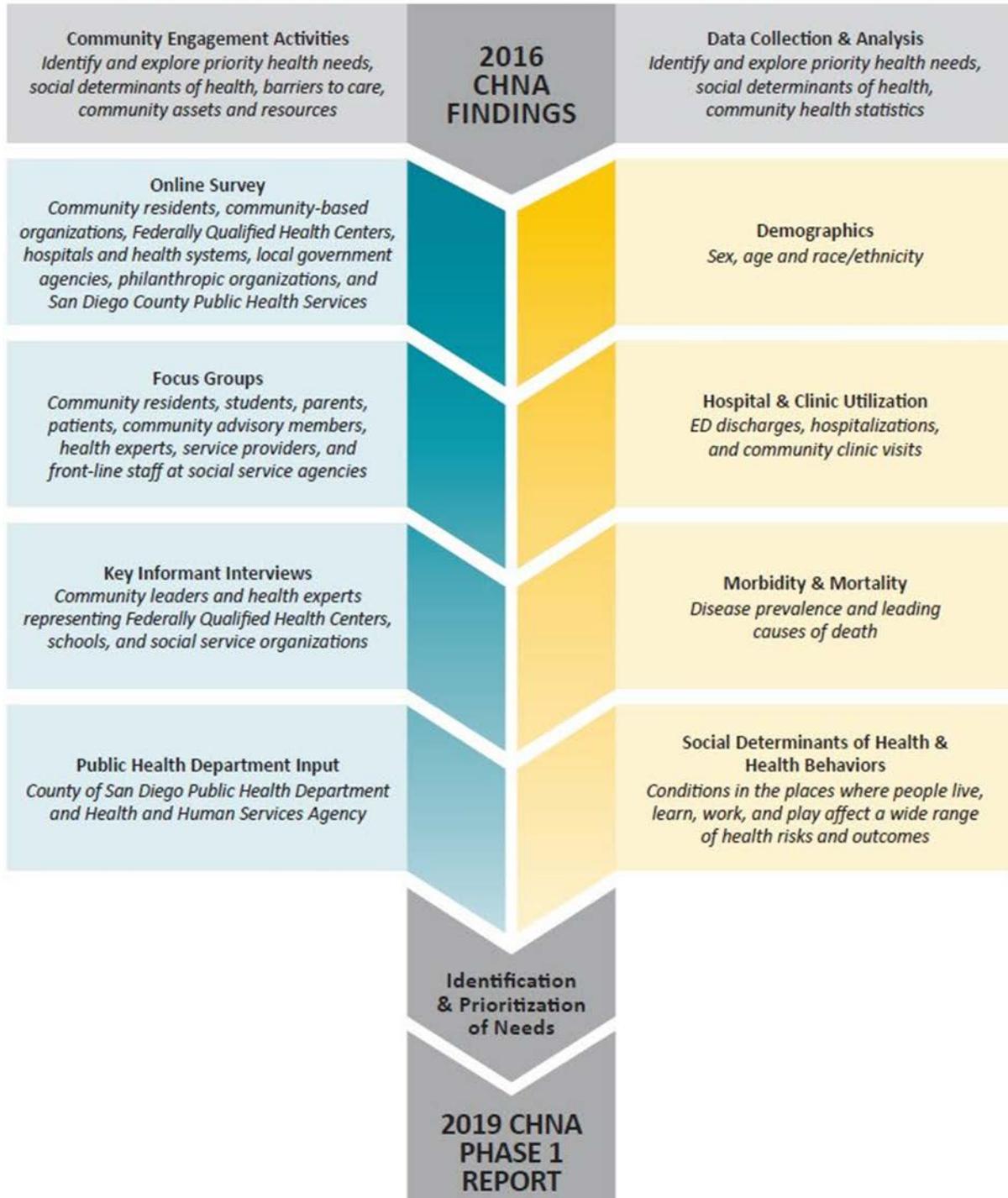
COMMUNITY PRIORITY PROCESS (CHNA METHODOLOGY)

For the 2019 CHNA quantitative analyses of publicly available data provided an overview of critical health issues across San Diego County, while qualitative analyses of feedback from the community provided an appreciation for the experiences and needs of San Diegans. The CHNA Committee reviewed these analyses and applied a pre-determined set of criteria to them to prioritize the top health needs in San Diego County. This process is represented in Figure 2.5.

For a complete description of the HASD&IC 2019 process and findings, see full report available at <https://www.hasdic.org/2019-chna>.

FIGURE 2.5. 2019 COMMUNITY HEALTH NEEDS ASSESSMENT PROCESS MAP

2019 COMMUNITY HEALTH NEEDS ASSESSMENT (CHNA) PROCESS MAP



QUANTITATIVE

Quantitative data were drawn from several public sources. Data from Dignity Health/Truven Health **Community Needs Index (CNI)** and the Public Health Alliance of Southern California's **Healthy Places Index (HPI)** were used to identify geographic communities in San Diego County that were more likely to be experiencing health inequities, which guided the selection of communities for the engagement and the development of engagement questions.

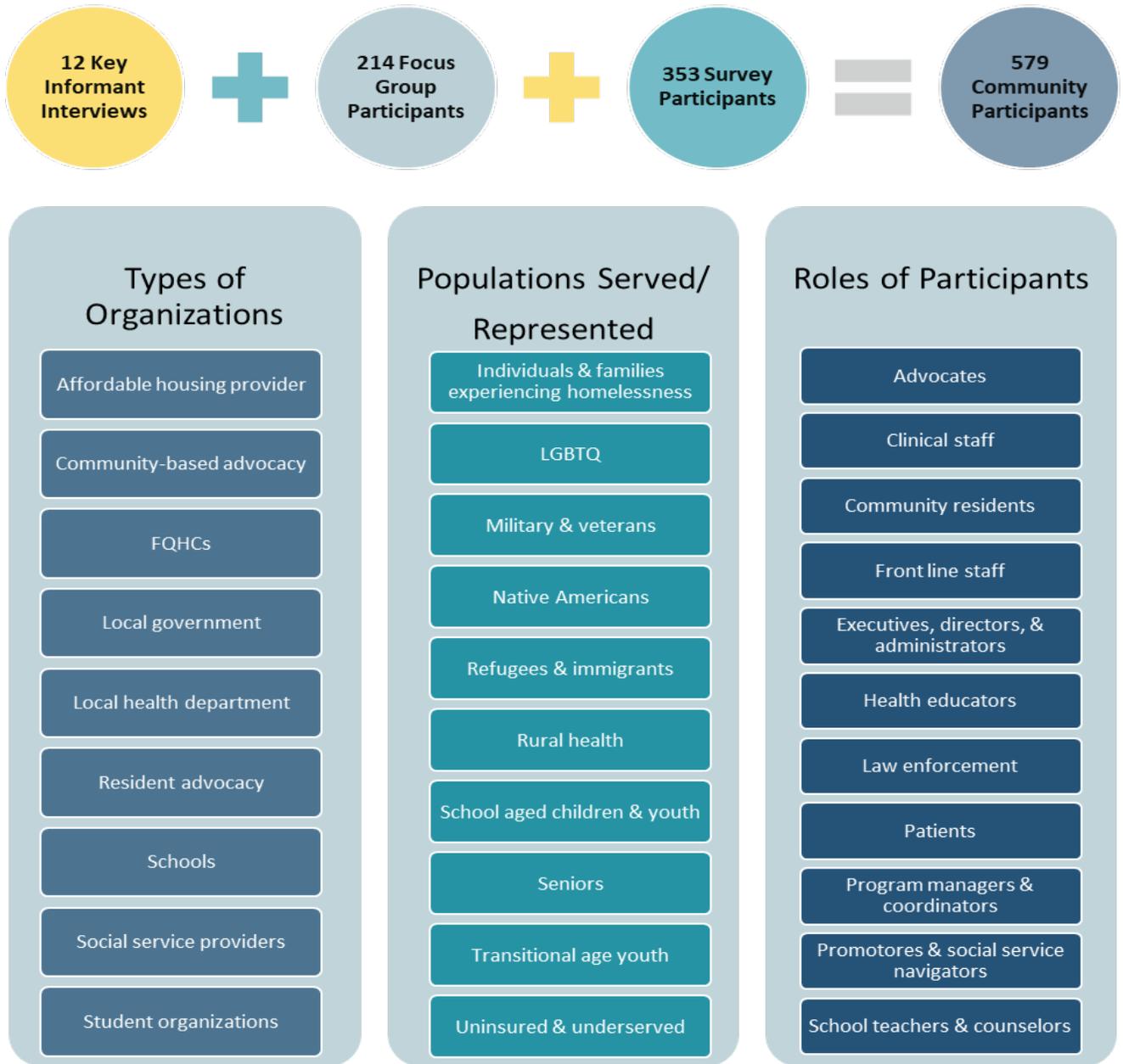
Hospital discharge data exported from **SpeedTrack's California Universal Patient Information Discovery, or CUPID application** were used to identify current and three-year trends in primary diagnosis discharge categories and were stratified by age and race. This allowed for the identification of health disparities and the conditions having the greatest impact on hospitals and health systems in San Diego County.

Data from **national and state-wide data sets** were analyzed including San Diego County mortality and morbidity data, and data related to social determinants of health. In addition, Kaiser Permanente consolidated data from several national and state-wide data sets related to a variety of health conditions and social determinants of health in San Diego County and conducted a comprehensive statistical analysis to identify which social determinants of health were most predictive of negative health outcomes. Kaiser Permanente then created a, web-based data platform (chna.org/kp) to post these analyses for use in the CHNA. These analyses guided the design of the online survey, interview, and focus group questions.

QUALITATIVE - COMMUNITY ENGAGEMENT

Community engagement activities included focus groups, key informant interviews, and an online survey which targeted stakeholders from every region of San Diego County, all age groups, and numerous racial and ethnic groups. Collaboration with the County of San Diego Health & Human Services Agency, Public Health Services was vital to this process. A total of 579 individuals participated in the 2019 Community Health Needs Assessment: 138 community residents and 441 leaders and experts. Please see Figure 2.6 below for details on the types of participants engaged.

FIGURE 2.6. 2019 CHNA COMMUNITY ENGAGEMENT PARTICIPANTS



2019 CHNA PRIORITIZATION OF THE TOP HEALTH NEEDS

The CHNA Committee collectively reviewed the quantitative and qualitative data and findings. Several criteria were applied to the data to determine which health conditions were of the highest priority in San Diego County. These criteria included: the severity of the need, the magnitude/scale of the need; disparities or inequities and change over time. Those health conditions and social determinants of health (SDOH) that met the largest number of criteria were then selected as top priority community health needs.

2019 FINDINGS: TOP 10 COMMUNITY HEALTH NEEDS

The CHNA Committee identified the following as the highest priority community health needs in San Diego County (in alphabetical order by SDOH or health condition).

FIGURE 2.7. 2019 TOP 10 COMMUNITY HEALTH NEEDS

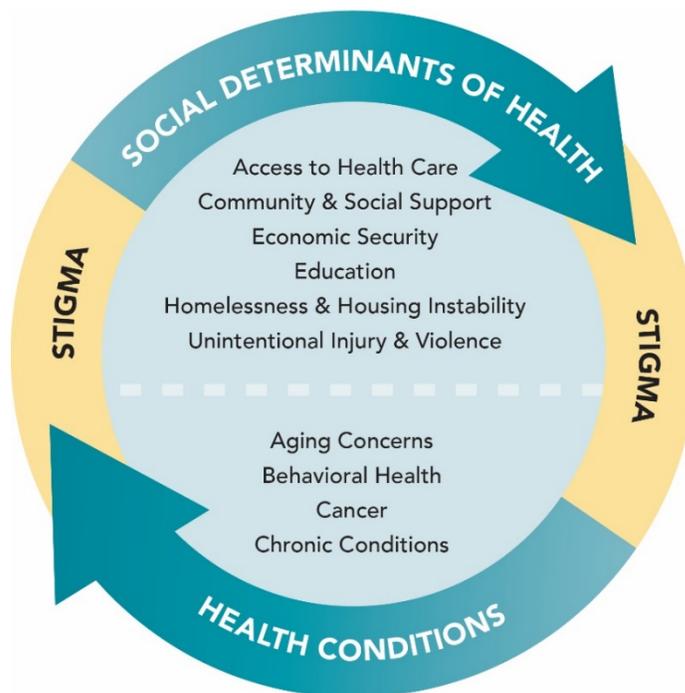


Figure 2.7 illustrates the interactive nature of SDOH and health conditions—each impacting the other. In addition, an underlying theme of stigma and the barriers it creates arose across community engagement. For instance, stigma impacts the way in which people access needed services that address SDOH, which consequentially impacts their ability to maintain and manage health conditions. Due to the complexity of this underlying theme, the CHNA Committee plans to explore and understand ways in which hospitals and health systems could better address stigma in patient care during Phase 2 of the CHNA process.

Access to health care. Overcoming barriers to health care, such as lack of health insurance and insurance issues, economic insecurity, transportation, the shortage of culturally competent care, fears about immigration status, and the shortage of health care providers emerged as a high priority community need. In addition, specific services were identified as challenging to obtain, including behavioral health care, dental care, primary care, and specialty care.

Aging concerns. Conditions that predominantly affect people who are 65 and older such as Alzheimer's disease, Parkinson's, dementia, falls, and limited mobility were identified as a high priority health need. Community engagement participants most often described aging concerns in relation to the social determinants of health, including transportation, access to fresh food, social isolation and inadequate family support, and economic insecurity.

Behavioral health. Greater access to behavioral health care was cited as a priority health need. Three types of behavioral health care were identified as challenging to access: urgent care services for crisis situations; inpatient psychiatric beds and substance abuse facilities; and transitional programs and services for post-acute care. In addition, several barriers to behavioral health care were named as priorities to address, including a lack of availability of needed services and appointments, insurance issues, logistical issues, such as transportation and time off work, and the inability to pay co-pays and deductibles.

Cancer. Health needs related to cancer were described in relation to the effects on well-being beyond physical health. These include financial, practical, and emotional impacts on individuals and families; these effects are exacerbated by barriers to cancer care.

Chronic conditions. Three chronic conditions were identified as priorities: cardiovascular disease, diabetes, and obesity. Key factors that individuals struggle with to prevent chronic diseases include access to fresh, health foods and safe places to exercise and play. In addition, economic issues, transportation to medical care, fears about immigration status, and a lack of knowledge about chronic conditions were named as particular challenges related to the management of chronic conditions.

Community and social support. A high priority for the well-being of San Diego residents is ensuring that individuals have adequate resources and substantial support within their neighborhood. Valuable neighborhood resources include federally qualified health centers (FQHCs) and those that are culturally and linguistically competent.

Without adequate support from others, community engagement and community spirit are affected.

Economic security. Economic security was named as vitally important to the well-being of San Diego residents and was described as impacting every aspect of residents' daily life. The health of those who are economically insecure is negatively affected by food insecurity, chronic stress and anxiety, and the lack of time and money to take care of health needs. In San Diego County, 13.3% of residents have incomes below the federal poverty level and 15% experience food insecurity. Those who are economically insecure are at greater risk of poor mental health days, as well as, asthma, obesity, diabetes, stroke, cancer, smoking, pedestrian injury and visits to the emergency department for heart attacks. Factors identified as contributing to economic insecurity include housing and childcare costs as well as low wages.

Education. Receiving a high school diploma, having the opportunity to pursue higher or vocational education, being health literate, and having opportunities for non-academic continuing education were identified as important priorities for the health and well-being of San Diego residents. Family stress and a lack of school and community resources were identified as factors underlying low levels of educational attainment.

Homelessness and housing instability. Homelessness and housing instability were named as important factors affecting the health of San Diego County residents. They were described as having serious health impacts, such as increasing exposure to infectious disease, creating substantial challenges in the management of chronic diseases and wound care, and increasing stress and anxiety. Poor housing conditions were also cited as impactful of physical and mental health; crowded housing leads to the spread of illness, and environmental hazards can exacerbate conditions like asthma.

Unintentional injury and violence. Exposure to violence and neighborhood safety were cited as priority health needs for San Diegans. Neighborhood safety was discussed as influencing residents' ability to maintain good health, while exposure to violence was described as traumatic and impactful on mental health.

COMMUNITY RESOURCES

The 2019 CHNA identified many health resources in San Diego County, including those provided by community-based organizations, government departments and agencies, hospital and clinic partners, and other community members and organizations engaged in addressing many of the health needs identified by this assessment. In addition, 2-1-1 San Diego is an important community resource and information hub that facilitates access to services. Through its 24/7 phone service and online database, 2-1-1 San Diego helps connect individuals with community, health, and disaster services.

In addition to community input on health conditions and social determinants of health, a wealth of ideas emerged from community engagement participants about how hospitals and health systems could support, expand, or create additional resources and partner with organizations to better meet San Diego's community health needs. Please see Figure 2.8 for the types of resources that were identified by community engagement participants.

NEXT STEPS

The 2019 CHNA is utilized by Scripps Health and participating hospitals and health systems to evaluate opportunities for next steps to address the top identified health and social needs in their respective patient communities. In addition, the CHNA report is made available to the broader community and is intended to be a useful resource to both residents and health care providers to further communitywide health access and health improvement efforts.

Scripps is currently working with the Hospital Association of San Diego and Imperial Counties (HASD&IC) and the Community Health Needs Assessment Committee to build a strategic framework to plan and implement the 2022 Community Health Needs Assessment (CHNA). The CHNA Committee is re-envisioning how best to work collaboratively in a virtual environment and continuing to look at health and social needs from a health equity lens. The 2022 CHNA is expected to be finalized in the fall of 2022.

FIGURE 2.8. RESOURCES & OPPORTUNITIES TO ADDRESS PRIORITY HEALTH NEEDS

RESOURCES & OPPORTUNITIES TO ADDRESS PRIORITY HEALTH NEEDS

Community engagement participants identified three means by which the identified health needs could be better addressed:

1. The implementation of overarching *strategies* to address the health needs,
2. The development or expansion of *resources* to meet the needs,
3. The creation of *systemic, policy, and environmental changes* to better support health outcomes.

All of these approaches, participants emphasized, would require *collaboration* between political, health care system, and community leaders, health care professionals, community organizations, and residents.



HOSPITAL ASSOCIATION OF SAN DIEGO AND IMPERIAL COUNTIES; 2019 COMMUNITY HEALTH NEEDS ASSESSMENT PHASE TWO



BACKGROUND & INTRODUCTION

In July 2019, the Hospital Association of San Diego and Imperial Counties (HASD&IC) completed the triennial collaborate community health needs assessment (CHNA) to identify and prioritize the health needs of San Diego County residents, particularly those who experience health inequities. The CHNA is managed by a standing CHNA Committee comprised of representatives from hospitals, and health systems and health districts. HASD&IC contracted with the Institute of Public Health (IPH) at San Diego State University (SDSU) to conduct the needs assessment.

The CHNA Committee worked with IPH to distribute a follow-up survey to gather feedback on the 2019 CHNA findings through a Phase 2 Survey. The survey sought to further explore frequently recurring themes that emerged during community discussions in the 2019 CHNA, including: access to care, stigma, immigration, and public charge.

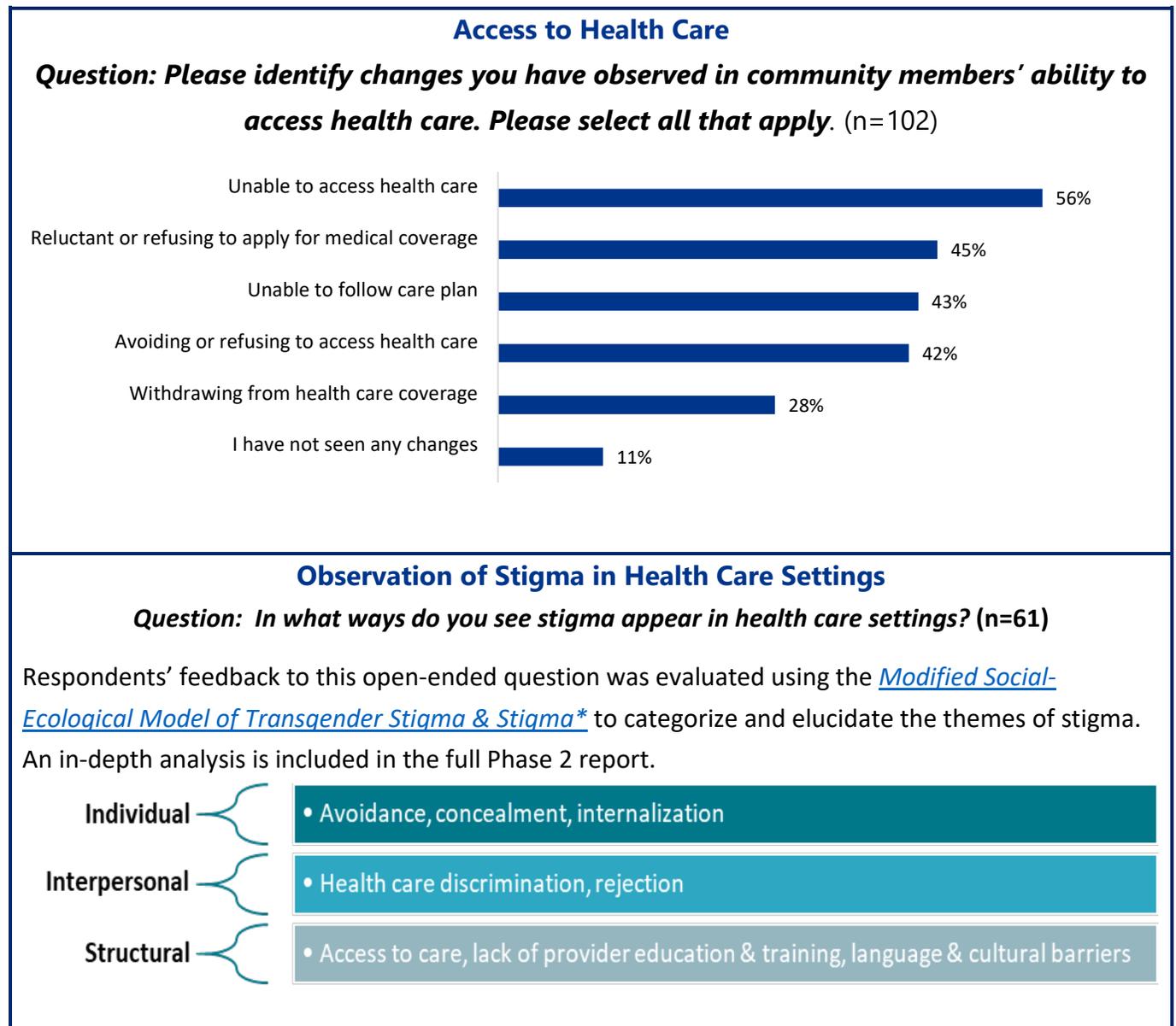
Note: The Phase 2 Survey was developed and disseminated prior to the COVID-19 pandemic taking hold in the San Diego region. The CHNA Committee recognizes that communities facing inequities are dealing with unprecedented challenges and the devastating increase in needs is not captured in these findings.

SURVEY PARTICIPANTS & RESULTS



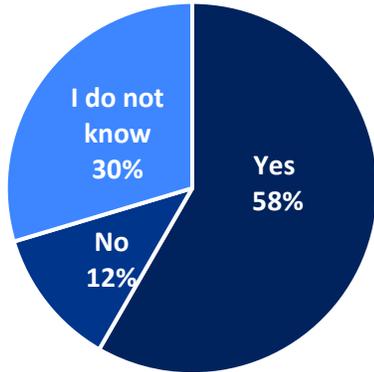
Nearly 92% of respondents (114 out of 124 respondents) agreed or strongly agreed that the health needs identified in the 2019 CHNA represent the top health needs of communities facing inequities within San Diego County. Most survey respondents were from community-based organizations (39.5%), followed by hospitals/health systems (16.1%) and community residents (11.3%). A total of 105 survey participants responded to the question about where they live or work. Overall, 37.4% of survey respondents served all regions of San Diego County and 26.8% lived in or work at North Inland.

SUMMARY OF PARTICIPANT RESPONSES TO KEY QUESTIONS



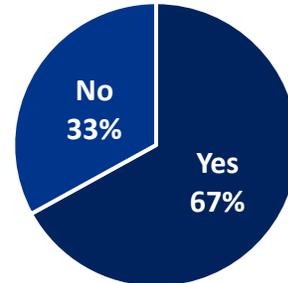
**Immigration & Access to Health Care
Observation**

Question: Are individuals in your community having difficulty accessing health care due to their immigration status? (n=108)



Hospital Patient Financial Service Requirements

Question: San Diego hospitals offer financial assistance programs and can help answer questions if you or your patients/clients are struggling to pay or understand a hospital bill. Did you know San Diego hospitals offer these services? (n=106)



CONCLUSION

For additional details, including community suggestions and recommendations to address identified needs, please see the full report on the HASD&IC website, <https://hasdic.org/2019-chna/>.

SCRIPPS HEALTH IMPLEMENTATION PLAN

With the 2019 CHNA complete and health priority areas identified, Scripps Health has developed a corresponding Implementation Strategy – a multifaceted, multi-stakeholder, plan that addresses the community health needs identified in the CHNA. The Implementation Plan translates the research and analysis presented in the Assessment into actual, measurable strategies and objectives that can be carried out to improve community health outcomes.

Scripps Health anticipates the implementation strategies may evolve due to the fast pace at which community and health care industry change. Therefore, a flexible approach is best suited for the development of its response to the Scripps Health Community Health Needs Assessment (CHNA). On an annual basis Scripps Health evaluates the implementation strategy and its resources and interventions; and makes adjustments as needed to achieve its stated goals and outcome measures as well as to adapt to changes and resources available. Scripps describes any challenges encountered to achieve the outcomes and makes modifications as needed.

In addition, Scripps Health Implementation Plan is filed with the Internal Revenue Service using Form 990 Schedule H on an annual basis. Scripps Health is focusing on the strategies and initiatives, their measures of implementation and the metrics used to evaluate their effectiveness.

Scripps will monitor and evaluate the strategies listed in the Implementation Plan for the purpose of tracking the implementation of those strategies as well as to document the anticipated impact. Plans to monitor will be tailored to each strategy and will include the collection and documentation of tracking measures. The complete [FY20–FY22 Implementation Plan Report](#) is available online at Scripps.org.

Section 3

Uncompensated Care

UNCOMPENSATED HEALTH CARE

Scripps contributes significant resources to provide low and no-cost health care for our patients in need. During Fiscal Year 2020, Scripps contributed \$394,126,261 in uncompensated health care, including \$18,335,775 in charity care, \$361,998,200 in Medi-Cal and Medicare shortfall, and \$13,792,287 in bad debt.

The health care safety net in San Diego County is highly dependent upon hospitals and community health clinics to care for uninsured and medically underserved communities. Finding more effective ways to coordinate and enhance the safety net is a critical policy challenge. While public subsidies help finance services for San Diego County’s underinsured populations, these subsidies do not cover the full cost of care. Combined with Medi-Cal and Medicare funding shortfalls, Scripps and other local hospitals absorb the cost of caring for uninsured/underinsured patients in their operating budgets. This places a significant financial burden on hospitals and physicians.

Scripps Mercy Hospital (including San Diego and Chula Vista campuses) provides 56 percent of the charity care within the Scripps system (refer to figure 3.3). Scripps Mercy's service area has a more economically disadvantaged population compared to the county as a whole, with the lowest numbers of insured adults in the county and a much higher percentage of ethnic minorities, primarily Hispanic and Asian.

Scripps Mercy Hospital San Diego and Scripps Mercy Hospital Chula Vista campuses are designated by the government as Disproportionate Share Hospitals, in reflection of the diversity of the population they serve. Both hospital campuses play important health care service roles in the Central/Southern San Diego County service area (ranging from Interstate 8 to the United States-Mexico border). More than half of Scripps Mercy San Diego and Chula Vista patients are government insured Medicare and Medi-Cal.

SCRIPPS UNCOMPENSATED HEALTH CARE	
Bad Debt	\$13,792,287
Charity Care	\$18,335,775
Medi-Cal & Medicare Shortfall	\$361,998,200
Uncompensated Health Care Total	\$394,126,261

FINANCIAL ASSISTANCE

ASSISTING LOW-INCOME, UNINSURED PATIENTS

The Scripps financial assistance policy is consistent with the language of both State (AB774) California Hospital Fair Pricing legislation and the Internal revenue Code (IRC) 501(r) Regulations. These practices reflect our commitment to assisting low-income and uninsured patients with discounted hospital charges, charity care and flexible billing and debt collection practices. These programs are available to everyone in need, regardless of their race, ethnicity, gender, religion or national origin.

Scripps makes every effort to identify patients who may benefit from financial assistance as soon as possible and provide counseling and language interpretation. Additionally, Scripps does not apply wage garnishment or liens on primary residences as a way of collecting unpaid hospital bills.

Eligibility for financial assistance is based on family income and expenses. For low-income, uninsured patients who earn less than twice the federal poverty level (FPL), Scripps forgives the entire bill. For those patients who earn between two and four times the FPL, a portion of the bill is forgiven. Patients who qualify for financial assistance are not charged more than Scripps discounted financial assistance amount. For 2021, the Department of Health and Human Services defined a family of four at 200 percent federal poverty level as \$53,000.

PUBLIC RESOURCE SPECIALIST TEAM

The Public Resource Specialists (PRS) are experienced staff with strong knowledge of county programs. PRS screen all uninsured and underinsured patients who have received services at any of the five Scripps hospital facilities. They offer support to patients and provide guidance on available funding options for county, state, and federal programs. The PRS team is responsible for submitting and monitoring all applications and following up with appeals. In addition, they serve as a technical resource to case management, social work, and other hospital staff when patient funding impacts discharge planning and level of care transfers. The PRS team serves hospital patients by offering immediate temporary coverage through the Presumptive Eligibility programs (PE), COVID-19 Uninsured Group and submitting Insurance Affordability Applications to the county for processing of ongoing benefits. Other services offered are assistance with initiating applications with DMV, VA, EDD, Social Security and Medi-Cal for Cal-Fresh enrollment. In Fiscal Year 2020, the PRS team successfully submitted and pursued 4,076 applications with a 77% approval rating.

Estimated Economic Value of Community Benefits Provided by Scripps Health in Fiscal Year 2020

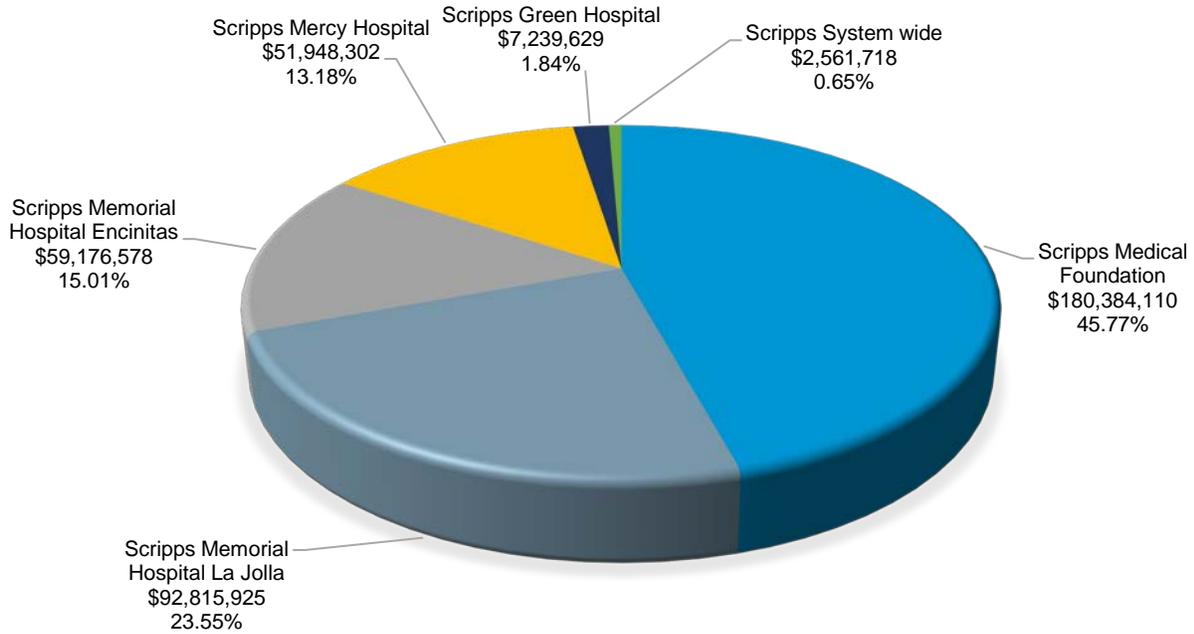
CA Senate Bill (SB) 697 Categories	Community Benefit Programs & Services	Net Benefit
Medical Care Services		
	Charity Care	\$ 18,335,775
	Medi-Cal & Other Government Means Tested Programs (Shortfall) *	\$ 68,332,685
	Medicare & Medicare HMO (Shortfall) **	\$ 293,665,515
	Bad Debt	\$ 13,792,287
	Total Costs of Uncompensated Care	\$ 394,126,261
Benefits for Vulnerable Population		
Definition: Any population that is exposed to medical or financial risk, by virtue of being uninsured, underinsured, or eligible for Medi-Cal, Medicare, California Children's Service Program, or county indigent programs.		
	A – Community Health Improvement Services	\$ 1,073,359
	C – Subsidized Health Services	\$ 3,680,538
	E – Cash and In-Kind Contributions	\$ 1,140,204
	Total Benefits for Vulnerable Populations	\$ 5,894,101
Benefits for the Broader Community		
Definition: Services that improve overall community health and can include in-kind donations and sponsorships.		
	A – Community Health Improvement Services	\$ 3,203,919
	E – Cash and In-Kind Contributions	\$ 72,996
	F – Community Building Activities	\$ 206,937
	G – Community Benefit Operations	\$ 443,033
	Total Benefits for Broader Community	\$ 3,926,885
Professional Education & Health Research		
	B – Professional Education	\$ 26,178,225
	D – Health Research	\$ 1,756,884
	Total Professional Education & Research	\$ 27,934,884
	Total Community Benefit and Economic Value	\$ 431,882,133

Financial Support: Calculations for bad debt and charity care are estimated by extracting the gross write-offs of bad debt and charity care charges and applying the hospital ratio of costs to charges (RCC) to estimate the cost of care. Calculations for Medi-Cal & other means-tested government programs and Medicare shortfall are derived using the payer-based cost allocation method. Bad debt and Medicare shortfall do not count as community benefits under the Schedule H 990 but are still reportable outside the community benefit table.

* Hospital Provider Fee was reported as offsetting revenue from Medi-Cal. The pledge/grant (separate from the quality assurance fee) is reported in Cash and In-kind Contributions for other vulnerable populations.

** Unpaid cost of Medicare is calculated using Scripps cost accounting system. In IRS Form 990, Schedule H, the Medicare cost report is used.

FIGURE 3.1
FISCAL YEAR 2020
SCRIPPS TOTAL UNCOMPENSATED CARE BY OPERATING
UNIT \$394,126,261⁸



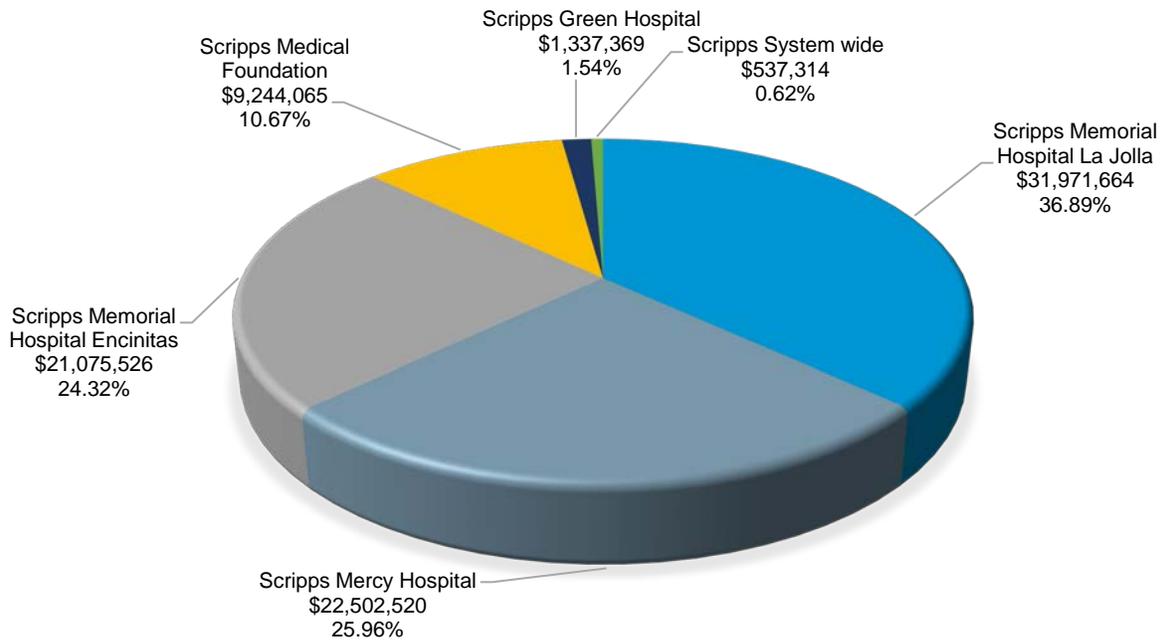
Community Benefits Services (Provider Fee Impact)	Scripps Memorial Hospital La Jolla	Scripps Green Hospital	Scripps Memorial Hospital Encinitas	Scripps Mercy Hospital (San Diego & Chula Vista)	Scripps Medical Foundation	Scripps System wide	Total
Before Provider Fee	\$86,386,329	\$7,382,497	\$55,531,078	\$116,959,789	\$180,384,110	\$2,561,718	\$449,205,520
Provider Fee	\$6,429,596	(\$142,868)	\$3,645,500	(\$65,011,487)	-	-	(\$55,079,259)
Net After Provider Fee	\$92,815,925	\$7,239,629	\$59,176,578	\$51,948,302	\$180,384,110	\$2,561,718	\$394,126,261

UNCOMPENSATED HEALTH CARE

Uncompensated health care includes the sum of expenses associated with charity care, Medi-Cal and other means-tested government programs, Medicare shortfalls and bad debt. A detailed account of Scripps Fiscal Year 2020 uncompensated care expenditures is contained in the following graphs.

⁸ Calculation for Medi-Cal and other means-tested government programs and Medicare shortfall are derived using the payer-based cost allocation method. Calculations for bad debt and charity care are estimated by extracting the gross write-offs of bad debt and charity care charges and applying the hospital ratios of cost to charges (RCC) to estimate net cost of care.

FIGURE 3.2
FISCAL YEAR 2020
SCRIPPS SCHEDULE H UNCOMPENSATED CARE BY
OPERATING UNIT, \$86,668,459⁹



Community Benefits Services (Provider Fee Impact)	Scripps Memorial Hospital La Jolla	Scripps Green Hospital	Scripps Memorial Hospital Encinitas	Scripps Mercy Hospital (San Diego & Chula Vista)	Scripps Medical Foundation	Scripps System wide	Total
Before Provider Fee	\$25,542,068	\$1,480,237	\$17,430,026	\$87,514,007	\$9,244,065	\$537,314	\$141,747,718
Provider Fee	\$6,429,596	(\$142,868)	\$3,645,500	(\$65,011,487)	-	-	(\$55,079,259)
Net After Provider Fee	\$31,971,664	\$1,337,369	\$21,075,526	\$22,502,520	\$9,244,065	\$537,314	\$86,668,459

UNCOMPENSATED HEALTH CARE (SCHEDULE H)

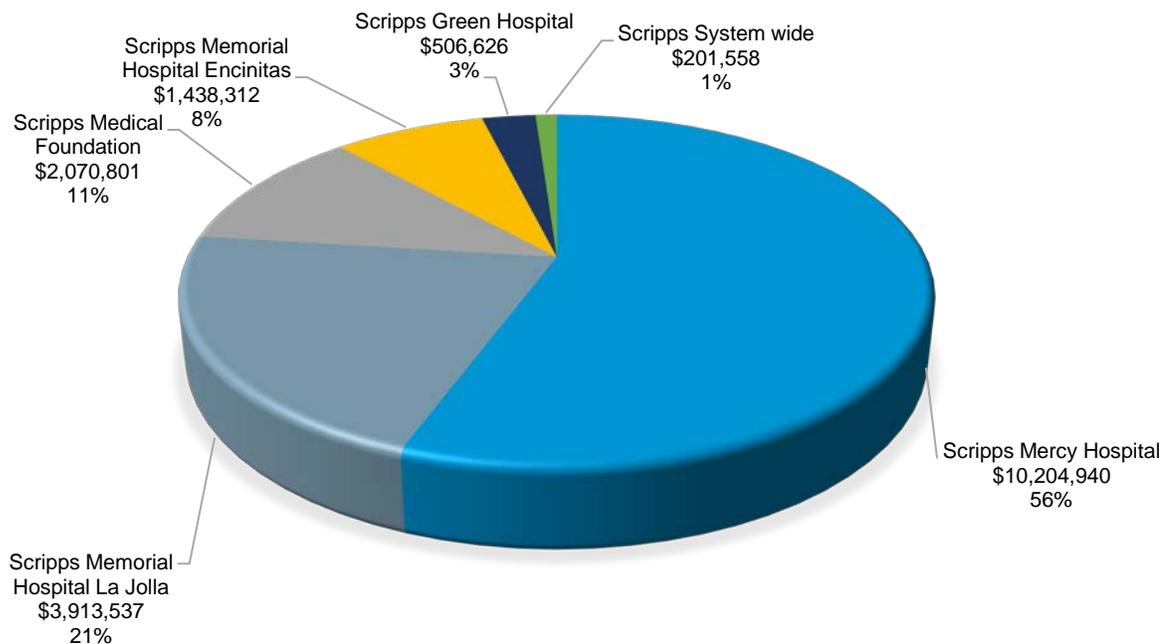
Uncompensated health care includes the sum of expenses associated with charity care, Medi-Cal and other means-tested government programs.

⁹ Calculations for Medi-Cal and other means-tested government programs are derived using the payer-based cost allocation method. Calculations for charity care are estimated by extracting the gross write-offs of charity care charges and applying the hospital ration of cost to charges (RCC) to estimate the cost of care. Community building activities, bad debt and Medicare shortfall do not count as community benefits under the Schedule H 990 but are still reportable outside the community benefit table.

Figure 3.3

Fiscal Year 2020

SCRIPPS CHARITY CARE BY OPERATING UNIT, \$18,335,775¹⁰



CHARITY CARE

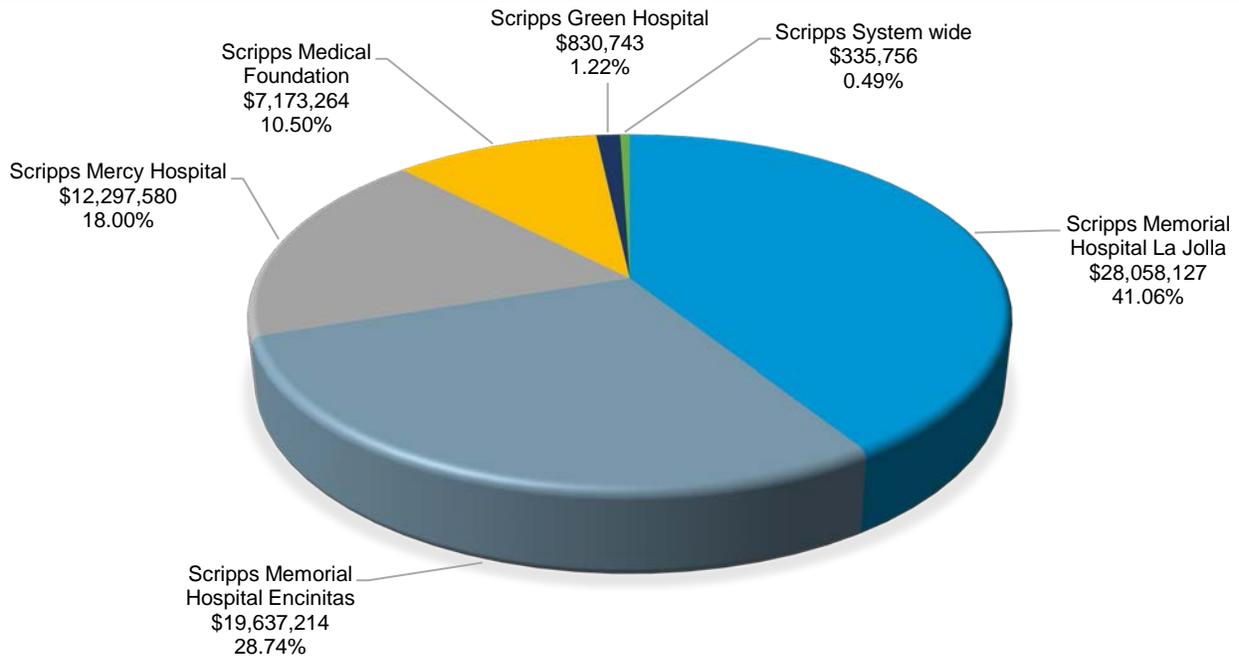
Part of Scripps legacy is its commitment to providing services for vulnerable populations. Scripps provides charity care for patients with little or no sources at all its hospitals. Traditional charity care is included in the Internal Revenue Service (IRS) Form 990 Schedule H Part I Line 7a.

¹⁰ Calculation for charity care are estimated by extracting the gross write-offs of charity care charges and applying the hospital ratio of cost of charges (RCC) to estimate the cost of providing charity care.

FIGURE 3.4

Fiscal Year 2020

SCRIPPS MEDI-CAL & OTHER MEANS-TESTED GOVERNMENT PROGRAMS BY OPERATING UNIT, \$68,332,685



Community Benefits Services (Provider Fee Impact)	Scripps Memorial Hospital La Jolla	Scripps Green Hospital	Scripps Memorial Hospital Encinitas	Scripps Mercy Hospital	Scripps Whittier Diabetes Institute	Scripps Medical Foundation	Scripps System wide	Total
Before Provider Fee	\$21,628,531	\$973,611	\$15,991,715	\$77,309,067	-	\$7,173,264	\$335,756	\$123,411,944
Provider Fee	\$6,429,596	(\$142,868)	\$3,645,500	(\$65,011,487)	-	-	-	(\$55,079,259)
Net After Provider Fee	\$28,058,127	\$830,743	\$19,637,214	\$12,297,580	-	\$7,173,264	\$335,756	\$68,332,685

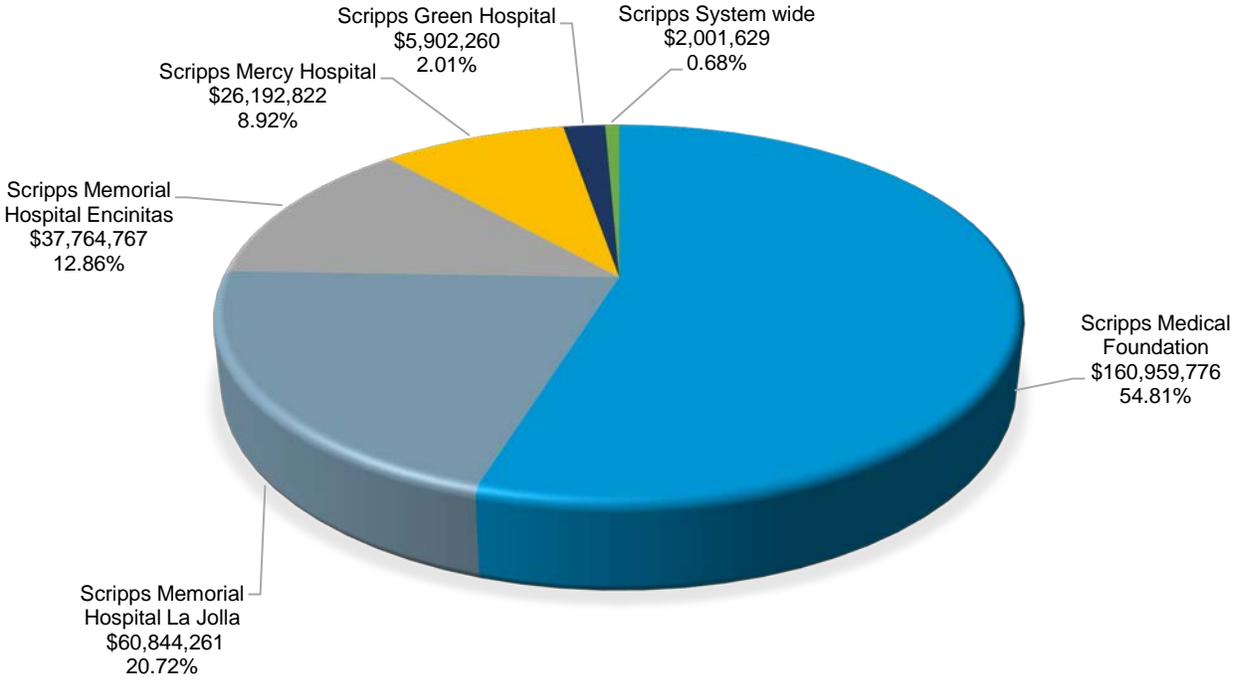
MEDI-CAL (SHORTFALL)

In addition to providing charity care services, Scripps accepts patients for whom it is reimbursed under various county, state and federal indigent care programs (Medi-Cal and Medi-Cal HMO) at amounts that, in some cases, do not cover the full cost of care. These costs are included in the IRS Form 990 Schedule H Part I Line 7b. In the state of California, the Medicaid program is called Medi-Cal.

FIGURE 3.5

Fiscal Year 2020

SCRIPPS MEDICARE & MEDICARE HMO (SHORTFALL) BY OPERATING UNIT, \$293,665,515¹¹



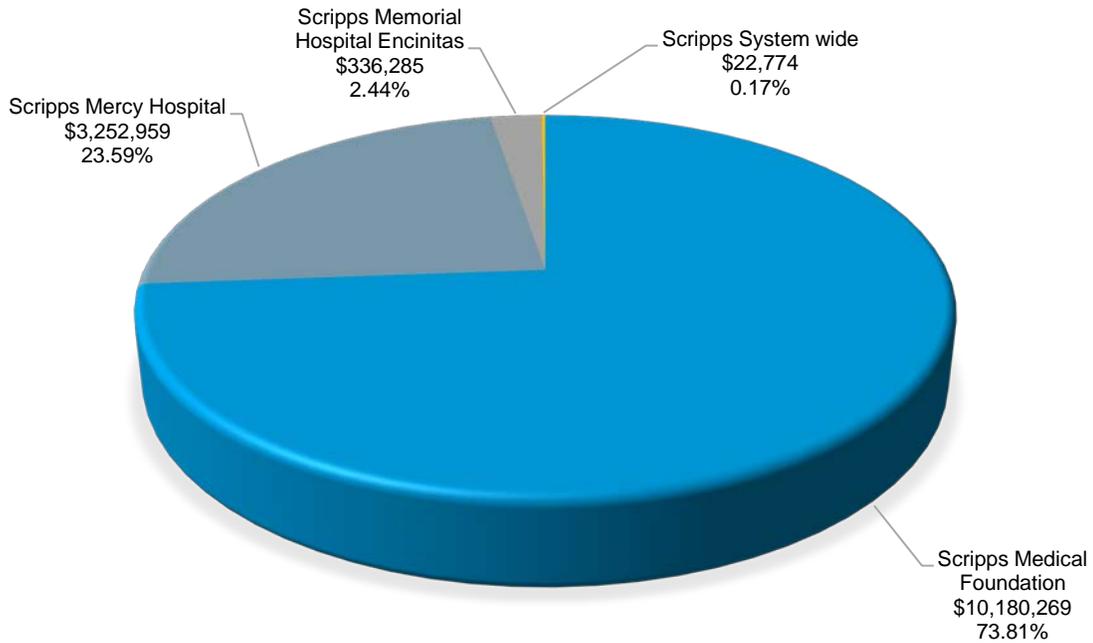
MEDICARE AND MEDICARE HMO (SHORTFALL)

In addition to providing charity care services, Scripps accepts patients for whom it is reimbursed under various county, state and federal programs (Medicare, Medicare PPO, Medicare HMO and Medicare SHPS) at amounts that, in some cases, do not cover the full cost of care. These costs are included in the IRS Form 990 Schedule H Part III Section B.

¹¹ Calculations for Medicare are derived using the payer-based cost allocation methodology. In Schedule H, the Medicare cost report is used.

FIGURE 3.6
Fiscal Year 2020

SCRIPPS BAD DEBT BY OPERATING UNIT, \$13,792,287¹²



BAD DEBT

Scripps also provides benefits to the broader community, including services for individuals who do not qualify for charity care, but need special services and support. Each year, Scripps provides care for which no compensation is received to people who do not meet the criteria for charity care, are not covered by a third-party payor or have a co-payment obligation that is not met. These costs are included in the IRS Form 990 Schedule H Part III Section A.

¹² Cost of bad debt is estimated by applying the hospital ratio of cost-to-charges (RCC) to the gross write-offs of bad debt to arrive at the estimated cost of providing care.

Section 4

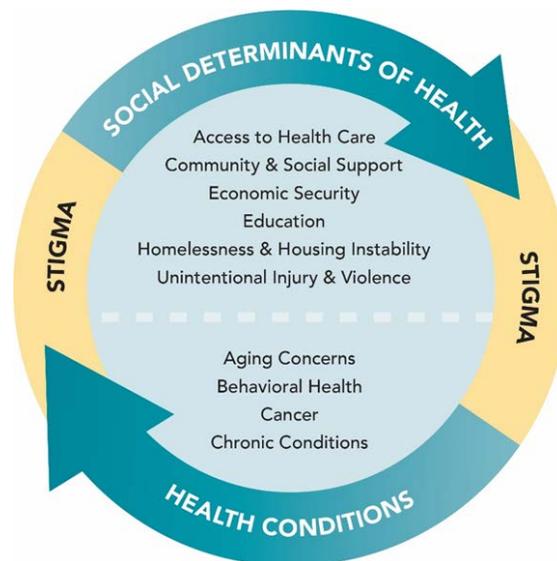
Community Health Services

COMMUNITY HEALTH SERVICES

Community Health Services include prevention and wellness programs, screenings, health education, support groups and health fairs, supported by operational funds, grants, in-kind-donations and philanthropy. Through a prioritization process described in Section 2, Community Health Needs Assessment (CHNA), the following health conditions and social determinants of health (SDOH) were identified as the most critical health and social needs within San Diego County (listed below in alphabetical order):

- Access to Health Care
- Aging Concerns
- Behavioral Health
- Cancer
- Chronic Conditions
- Community and Social Support
- Economic Security
- Education
- Homelessness and Housing Instability
- Unintentional Injury and Violence

FIGURE 4.1. 2019 CHNA TOP HEALTH NEEDS



The figure above illustrates the interactive nature of the SDOH and health conditions — each impacting the other. In addition, an underlying theme of stigma and the barriers it creates arose across community engagement. For instance, stigma impacts the way in which people access needed services that address SDOH (CalFresh, Medi-Cal, other economic support), which consequentially impacts their ability to maintain and manage health conditions.

Stigma was also discussed in relation to specific health conditions, including behavioral health, cancer, diabetes, obesity and others.

The programs included in this section raise public awareness and understanding of the community health needs documented in Scripps 2019 Community Needs Assessment Report (Refer to Section 2, Community Health Needs Assessment (CHNA)).¹³

Included in this section are other health conditions and needs that Scripps addresses via community benefit programs and initiatives. Scripps defines Community Health Services according to the Schedule H 990 IRS categories. The categories are broken down into five main areas: (see the Scripps Community Health Services Summary list for more details, page 128). These costs are included in the IRS Form 990 Schedule H Part I Lines 7 e, g and i.

- Community health improvement services
- Community benefit operations
- Cash and in-kind contributions
- Subsidized health services
- Community building activities

During Fiscal Year 2020 (October 2019 to September 2020), Scripps invested \$5,933,512 in community health services (does not include subsidized health). This figure reflects the costs associated with providing these programs, salaries, materials, and supplies minus revenue.

Scripps Health strives to improve community health through collaboration with a wide range of partners and like-minded organizations. Working with other health systems, community groups, government agencies, businesses and grassroots movements, Scripps is better able to build upon efforts to achieve broad community health goals and partner with a wide variety of organizations on community health improvement programs. See Appendix F for a list of our community partners.

The rest of this chapter highlights Scripps activities, programs and services conducted by Scripps during Fiscal Year 2020. Refer to Figures 4.2 and 4.3 for a graphic representation of the Fiscal Year 2020 Scripps System Community Health Services program distribution.

¹³ Demographic and community need information data presented throughout the body of this document are based upon the findings of the Hospital Association of San Diego and Imperial Counties 2019 Community Health Needs Assessment and the most recent San Diego County community health statistics (unless otherwise indicated). Retrieved from the World Wide Web <http://www.hasdic.org/chna.htm>

The leading causes of death are mortality statistics useful for showing the relative burden of cause-specific mortality. Chronic diseases are now among the leading causes of death and disability worldwide. Cancer and diseases of the heart were the top two leading causes of death in San Diego County in 2018.¹ See Table 4.1 for a summary of leading causes of death in San Diego County. For additional demographic and health data, please refer to the [Scripps Community Health Needs Assessment](#).

TABLE 4.1. TOP 10 LEADING CAUSES OF DEATH IN SAN DIEGO COUNTY, 2018

Cause of Death	Number of Deaths	Percent of Total Deaths
Malignant Neoplasms (Overall Cancer)	4,998	23.1%
Diseases of the Heart	4,655	21.6%
Alzheimer's Disease	1,461	6.8%
Stroke (Cerebrovascular Diseases)	1,446	6.7%
Accidents (Unintentional Injuries)	1,250	5.8%
Chronic Lower Respiratory Diseases	1,007	4.7%
Diabetes Mellitus	775	3.6%
Essential Hypertension and Hypertensive Renal Disease	453	2.1%
Influenza and Pneumonia	451	2.1%
International Self Harm (suicide)	435	2.0%
All Other Causes	4,669	21.5%
Total Deaths	21,600	100%

Source: County of San Diego Health and Human Services Agency (HHSA), Public Health Services, Community Health Statistics Unit, 2018

ACCESS TO CARE

Access to high quality, comprehensive care is vital for preserving good health, preventing and managing disease, decreasing disability, averting premature death, and achieving health equity for all. To access care, people need health insurance coverage and a consistent source of care that provides evidence-based, culturally competent preventive and emergency medical services in a timely manner. A lack of health insurance coverage represents a major barrier to health care services. In San Diego County, 12% of people are uninsured. Certain groups, including those who identify as

¹⁴ County of San Diego Health and Human Services Agency (HHSA), Public Health Services, Community Health Statistics Unit, 2018

County, 12% of people are uninsured. Certain groups, including those who identify as “Other,” Native American/Alaska Natives, Hispanics, Pacific Islanders, and Blacks, have higher rates of being uninsured than others.¹⁵

Access to care includes two components; the specific services that individuals are unable to obtain and the barriers and SDOH that prevents individuals from obtaining these services.

1. Types of care that are difficult to access

- Behavioral Health Care
- Dental Care
- Primary Care
- Specialty Care

2. Barriers to accessing care & associated SDOH

- Culturally competent care
- Economic security
- Fear related to immigration status
- Lack of health insurance & insurance issues
- Shortage of health care providers
- Transportation

A lack of health insurance is a predictor of many health conditions, including more poor mental health days, more visits to the ED for heart attacks, a higher prevalence of asthma, and obesity, more low birth weight babies, and higher prevalence of smoking. Reduced access to basic health care services increases illness, injury and mortality and is a major burden on hospitals and health providers, who must provide uncompensated care for the uninsured. Access to health care emerged as a high priority health need in both the secondary data analyses and community engagement events in the 2019 Scripps Community Health Needs Assessment. Through the community engagement conducted we heard from the community that even when insurance is secured, lack of transportation (especially for seniors) and lack of culturally and linguistically competent care are main barriers. In an effort to provide for people in need, Scripps sponsored a number of programs and activities in Fiscal Year 2020.

[SCRIPPS RECUPERATIVE CARE PROGRAMS \(RCU\)](#)

The Scripps/City of Refuge Recuperative Care Shelter (RCS) Project provides a safe discharge for chronically homeless patients with ongoing medical needs. All patients are unfunded or underfunded. Most have substance abuse and/or mental health issues.

¹⁵ U.S. Census Bureau. American Community Survey, 2013–2017, 1-Year Estimates. Includes civilian non-institutionalized population ages 18–64. Note: year 2017 includes ages 19–64 years.

Lack of funding, mental illness, as well as alcohol and/or substance abuse, makes post-acute placement of these homeless patients difficult.

The Case Management and Social Work departments assist with a needed supply of medication, appointments, Durable Medical Equipment (DME), setting up Home Health Services if needed, and connects patients to psych as part of the hospital discharge plan to City of Refuge. City of Refuge further supports clients in meeting these goals using community resources to meet individual social service needs. Scripps pays the City of Refuge a daily rate for housing and services they provide to the patients. The City of Refuge provides a safe, secure environment, with 24 hour supervision, medication oversight, meals, clothing, case management, assistance with Medi-Cal, with transition to Managed Medi-Cal and disability applications, referrals to rehab and other programs, and help finding permanent or transitional housing using county resources. DME and other needed services are provided by Scripps when funding is not available. All patients are connected to a medical home, and primary care in the community. Patients with psych disorders are established with a psychiatrist in the community if they are willing. Patient transportation needs are coordinated by City of Refuge, but may include insurance funded transport services, and occasionally Scripps Shuttle, or use of taxi voucher.

The City of Refuge began taking patients routinely in October of 2019. This year 44 patients so far have met the need for RCS admission. As a group, the RCS patients had a cumulative of 626 hospital days of stay, an average of 12.6 hospital days of stay, before going to RCS October 2019 to date. The RCS has taken medically complex patients, including those with: IV antibiotics, wound vacs, skin grafts, fractures, abscesses, osteomyelitis, amputation, dog bites, DKA, GI bleeds, pancreatitis, ESRD on dialysis, end stage liver disease, diabetes, mild encephalopathy, ostomies, MVA, pedestrian versus auto, pleural effusion, CVA, cancer (lymphoma, pancreatic cancer), HIV/Aids, sepsis, respiratory failure, pneumonia, CHF. Patients were assault victims with gunshot and stab wounds, facial trauma, and surgical post op patients and many are diabetic. Psych problems are common and occasionally the main issue for RCS clients. Over 85% of this group were either positive for alcohol, drugs or drug screen or had a drug history addressed by the physician in the H & P. More specifically, 30% of RCS clients had used opiates, heroin, or meth.

The following are outcome metrics tracked by Scripps for the City of Refuge program.

- For FY20 total cost savings for Scripps was \$795,491.
- Of Recuperative Care Shelter patients, 27% had standard Medi-Cal insurance, 9% HPE (Health Presumptive Eligibility) Medi-Cal, 41% Medi-Cal HMO's and of the managed care plans, Molina Medi-Cal was the highest utilizer.
- Approximately 30% of patients sought to secure income from government programs, social security, and CA short term disability; six total clients applied or received income benefits. Four have applied and received Medi-Cal HMO's while at the RCS with the assistance of their case management department.
- The program assisted Scripps MD Anderson Cancer Center patients.
 - RCS assisted two patients in maintaining their health and transitioned them into independent living homes for additional care.
 - Eight percent of patients were connected to a primary care provider or had established care at one of the community clinics.
 - Ten percent of the patients admitted to RCS were established with ongoing Oncology care and treatment.
 - Ten percent did not complete the PCP appointment, yet several patients were introduced to FHC mental health services.
- Following their stay at City of Refuge: 50% did not return to the streets, 5% went back to the hospital as they needed further treatment.

GRADUATE MEDICAL EDUCATION STAFF SUPPORT, ST. LEO'S CLINIC

The Graduate Medical Education (GME) program at Scripps Green Hospital and Scripps Clinic focuses on physician training and clinical research, 47 residents and 46 fellows. GME residents and many attending physicians maintain an evening clinic at St. Leo's Mission Community Clinic in North County (this initiative was put on hold in March due to the Pandemic). Two residents volunteer every Wednesday to provide medical care to uninsured patients with a variety of conditions, including diabetes, high blood pressure and high cholesterol. They also identify many acute conditions, including viral infections, skin infections, eye problems and musculoskeletal issues, and educate patients about their health. Patients may get flu vaccinations and some basic lab tests. If needed, St. Leo's patients are referred to providers who provide care at a reduced cost.

MIGRANT SHELTER CLINIC

In response to the urgent need for physician volunteers to help screen migrants seeking asylum in the US, multiple GME residents volunteered for a refugee health assessment

program at a South Bay shelter. Medical interpreters on site helped residents communicate with migrants and facilitate the screenings. Scripps residents screened approximately 150+ patients from January–March of 2020.

[FIJI SOLOMON ISLANDS MEDICAL MISSION](#)

The medical mission consists of Scripps Health general medical specialists and residents setting up clinics on rural islands for the purpose of providing much needed medical care, medical supplies and surgical screening for an underserved population that have no access to basic medical care. The International Medical Missions provide an exceptional clinical education experience to our senior Internal Medicine residents at Scripps Clinic and Scripps Green Hospital. The 2020 mission brought our residents to the Solomon Islands in the South Pacific, where the ratio of doctors to population is 1:20,000. The Loloma Foundation provides medical care to these islanders in association with Scripps Health. Residents experienced the challenges of providing care in Third World conditions, without technology, and using only their excellent academic and practical training to diagnose and treat patients. Islanders with serious medical conditions are referred to the nearest hospital, which is several hours away by boat and car. Total of patients served in the January 2020 mission was 700.

[MERCY OUTREACH SURGICAL TEAM PROVIDES LIFE-CHANGING CARE TO CHILDREN IN MEXICO](#)

For three decades, the Mercy Outreach Surgical Team (M.O.S.T) has been crossing borders and changing lives. Working in Mexico, the Mercy Outreach Surgical Team provides reconstructive surgeries for children suffering from birth defects or accidents. In special circumstances, surgeries are also provided for adults. During Fiscal Year 2020, the M.O.S.T team served in one outreach mission trip as the second one was cancelled due to the Pandemic. The team volunteered over 776 hours to provide reconstructive surgeries for more than 262 people and 40 pairs of eyeglasses were distributed.

[SCRIPPS -SPONSORED AMERICAN RED CROSS BLOOD DRIVES](#)

Scripps Health partnered with the American Red Cross in Fiscal Year 2020 to host 13 blood drives; 331 Scripps employees donated blood throughout the year. Scripps Health collected 353 pints of blood (for every pint donated 3 lives are saved), which saved approximately 1,062 lives. Scripps promoted the blood drives through our system wide communication channels and our Wellness All Around You Campaign.

SCRIPPS HEALTH COMMUNITY BENEFIT (CB) FUND

In Fiscal Year 2020, Scripps Health continued to deepen its commitment to philanthropy with its Community Benefit Fund. Over the course of the year, it awarded \$141,000 in community grants to programs in San Diego (four grants ranging from \$10,000 to \$120,000). The funded projects address some of San Diego County's high priority health needs, seeking to improve access to vital health care services for at risk populations, including the homeless, economically disadvantaged, mentally ill and others. Since the Community Benefit Fund began, Scripps has awarded \$4.1 million. Programs funded during Fiscal Year 2020 included:

CONSUMER CENTER FOR HEALTH EDUCATION AND ADVOCACY (CCHEA)

Funding provides low income, uninsured and behavioral health patients help obtaining health care benefits, SSI and related services, while reducing uncompensated care expenses at Mercy. This Medical Legal Partnership places Consumer Center staff onsite at Scripps Mercy Hospital within the Behavioral Health Unit and provides accessible legal assistance, in addition to receiving direct referrals from other Scripps facilities. The project provides advocacy services for time intensive government benefit cases and the Consumer Center stresses the importance of accessing community-based services for routine health care instead of using the ED's and hospital departments as well as the importance of establishing medical homes.

CATHOLIC CHARITIES

Funding provides short term emergency shelter for medically fragile homeless patients upon discharge from Scripps Mercy Hospital, San Diego and Chula Vista. Case Management and shelter are provided for homeless patients discharged from Scripps Mercy Hospital. While these patients no longer require hospital care, they do need a short-term recuperative environment. Patients who demonstrate a willingness to change receive one week in a hotel, along with food and bus fare to pursue a case plan. The focus of the case management is to stabilize the client by helping them connect to more permanent sources of income, housing and other self-reliance measures. The partnership seeks to reduce emergency room recidivism in this population and improve their quality of life.

2-1-1 COMMUNITY INFORMATION EXCHANGE

2-1-1 San Diego serves all of San Diego County, including the population served by Scripps, as the region's trusted primary connection to more than 6,000 community, health and disaster services in more than 200 languages, 24 hours a day.

In addition, 2-1-1 San Diego operates a 2-1-1 information hotline (Call Center) in the San Diego and Imperial County. Call Center services are designed to help members of the public (“Clients”) to connect with community resources to assist Clients obtain medical care, mental health services, housing, food, clothing, government benefits, among other things. 2-1-1 San Diego has expanded its referral services to include direct referral to Clients to community resources and access to the Community Information Exchange (CIE) Database. The CIE is an ecosystem comprised of multidisciplinary network partners that use a shared language, a resource database, and an integrated technology platform to deliver enhanced community care planning. Care planning tools enable partners to integrate data from multiple sources and make bi-directional referrals to create a shared longitudinal record. By focusing on these core components, a CIE enables communities to shift away from a reactive approach to providing care toward proactive, holistic, person-centered care.

The CIE database serves as a directory of participating professionals, agencies and businesses providing services that relate to the social determinants of health. The database also serves as a source of information about the Client’s social determinants of health and current needs and is used to help the Client access community resources suitable to address those needs.

2-1-1 San Diego has partnered with Scripps since 2011 to provide care coordination services to clients in need of health navigation support. In Fiscal Year 2020 funding was awarded to 2-1-1 San Diego to pilot the CIE at the Scripps Mercy Hospital location. This project specifically served Scripps Mercy Hospital patients, focusing on homeless and housing insecure individuals and to assist in hospital discharge planning.

[COMMUNITY INFORMATION EXCHANGE CIE 2020 SUMMIT](#)

Scripps also sponsored the Community Information Exchange (CIE) Summit. The 2020 Summit was held virtually due to the impact of COVID-19. Core to the theme of the CIE Summit, this year’s virtual event:

- Hosted open discussions on impact of inequity and how to lead with inclusion.
- Explored community-based approaches for building a CIE.
- Incorporated thoughtful strategies for activating community voice.
- Emphasized representation of diverse perspectives of inform CIE design, implementation and data collection.

CANCER/ONCOLOGY

Cancer is a term used to describe a group of diseases that cause the uncontrolled growth, invasion, and spread (metastasis) of abnormal cells. Cancer is caused by external factors such as environmental conditions, radiation, infectious organisms, poor diet and lack of exercise, and tobacco use, as well as internal factors such as genetic mutations, and hormones. Cancer is the second leading cause of death in the United States. Cancer causes one out of every four deaths in the United States.

According to the American Cancer Society, cancer survival is more likely to be successful if the cancer is diagnosed at an early stage. Such diagnosis is an indication of screening and early detection. Regular screening that allow for the early detection and removal of precancerous growths are known to reduce mortality for cancers of the cervix, colon and rectum. Five-year relative survival rates for common cancers, such as breast, prostate, colon and rectum, cervix, and melanoma of the skin, are 93 percent to 100 percent if they are discovered before having spread beyond the organ where the cancer began. In 2021 there will be an estimated 187,140 new cancer cases and 61,860 cancer deaths, an incidence rate of 404.6 average annual rate per 100,000 and a death rate of 140.3 average annual rate per 100,000 in California.

The United States has one of the highest rates of COVID-19 infection in the world, and as of mid-November 2020, 240,000 Americans had died from the disease. COVID-19 deaths account for two-thirds of the excess deaths in the US from March through July 2020. Increased deaths from other causes are partly due to misclassification of deaths from COVID-19, but also because of disruptions in care. Additional excess mortality from other illnesses will likely be protracted. For example, cancer deaths dipped during the early months of the pandemic but will likely rebound in higher numbers than expected in the months and years to come because of delays in diagnosis and treatment. The impact of COVID-19 on cancer diagnoses and outcomes at the population level will be unknown for several years because of the time necessary for data collection, compilation, quality control, and dissemination.

A summary of the magnitude and prevalence of cancer is described below:

- The HASD&IC 2019 CHNA continued to identify Cancer disease as one of the top priority health conditions among San Diego County hospitals.
- In 2018, cancer was the leading cause of death in San Diego County, responsible for 23.1 percent of all underlying causes of death.¹⁶

¹⁶County of San Diego HHSA, Public Health Services, Community Epidemiology Branch.

- In 2018, there were 4,988 deaths due to cancer (all sites), and an age adjusted death rate of 132.18 deaths per 100,000 population.¹⁷
- According to findings from the ACS 2021 Cancer Facts & Figures report, screening offers the ability for secondary prevention by detecting cancer early. It is estimated that nearly 1.9 million new cases of cancer will be diagnosed in 2021. Prostate cancer is the most common cancer among males (26%), followed by lung (12%) and colorectal (8%) cancers. Among females, breast (30%), lung (13%), and colorectal (8%) cancers are the most common.¹⁸
- According to findings from the ACS 2021 Cancer Facts & Figures report, cancer incidence rates are higher in males than in females for each racial/ethnic population, although rates are very similar in Asian/Pacific Islanders. The highest incidence rates are in blacks among males and in whites among females. Asian/Pacific Islanders have the lowest rates in both sexes.
- A recent study by the ACS found that 42 percent of newly diagnosed cancer cases in the U.S. are potentially avoidable. Many of the known causes of the cancer and other non-communicable diseases are attributable to behavioral factors including tobacco use and excess body weight due to poor dietary habits and lack of physical activity (ACS, 2018).
- The American Society of Clinical Oncology (ASCO) emphasizes the importance of patient navigators as part of a multidisciplinary oncology team with the goal of reducing mortality among underserved patients. A patient navigator may assist with various tasks, including psychosocial support; assistance with treatment decisions; assistance with insurance issues; arrangement of transportation; coordination of additional services (i.e., fertility preservation); and tracking of interventions and outcomes. The navigator works with the patient across the care continuum, ensuring coordination and efficiency of care, and removal of barriers to care (ASCO, 2016).
- According to the NIH, clinical trials, a part of clinical research, are at the heart of all medical advances. Clinical trials look at new ways to prevent, detect or treat disease by determining the safety and efficacy of a new test or treatment. Greater clinical trial enrollment benefits medical research and increases the

¹⁷ The County of San Diego HHSA's Community Health Statistics Unit Collects annual data on leading causes of death using methodology established by the National Center for Health Statistics (NCHS). Data is based on "underlying cause of death" information from all death certificates in SDC in 2018.

¹⁸ American Cancer Society Cancer. "Cancer Facts & Figures for African Americans", 2019–2021. <https://www.cancer.org/content/dam/cancer-org/research/cancer-facts-and-statistics/cancer-facts-and-figures-for-african-americans/cancer-facts-and-figures-for-africans-americans-2019-2021.pdf>.

health of future generations as well as improves disease outcomes, quality of life and health of trial participants.

Scripps Health currently cares for one-third of cancer patients in San Diego. Scripps has developed a series of prevention and wellness programs to educate people about the importance of early detection and treatment for some of the most common forms of cancer. Scripps Health is committed to providing care to all those in need. We serve an ethnically and economically diverse population including caring for traditionally marginalized and underserved with respect to health care. At Scripps, cancer care is more than just medical treatment, and a wide array of resources are provided such as counseling, support groups, complementary therapies, and educational workshops. Here are a few examples of Scripps cancer programs during Fiscal Year 2020:

[SCRIPPS MD ANDERSON CANCER CENTER DIRECTORY OF COMMUNITY RESOURCES](#)

Scripps collaborates with the community and develops a cancer directory of a comprehensive list of resources available for cancer survivors, their families, and the community.

[SCRIPPS MD ANDERSON CANCER CENTER – REGISTERED NURSE NAVIGATOR PROGRAM](#)

Scripps provides a registered nurse, dedicated to assisting cancer patients and their families with navigating through the journey from diagnosis, treatment and survivorship from cancer. The focus is on education and outreach, as well as, support services in this population.

[SCRIPPS MD ANDERSON CANCER CENTER – OUTPATIENT SOCIAL WORKER & LIAISON PROGRAM](#)

Scripps provides specially trained oncology social workers who understand the complexities of living with cancer and are dedicated to assisting cancer patients, along with providing education to health professionals and caregivers. The social workers help to access the most appropriate community and medical resources and provide short term counseling as well as assist with transportation, lodging and financial concerns.

[SCRIPPS MD ANDERSON CANCER CENTER – OUTPATIENT HEREDITY AND CANCER GENETIC COUNSELING PROGRAM](#)

Scripps MD Anderson Cancer Center genetic counseling team helps individuals and their families understand their cancer risks so that individualized cancer screening and risk reduction plans can be designed. In addition to providing information and guidance

about genetic testing, genetic counselors interpret test results, advise families about their options and provide education and support.

SCRIPPS MD ANDERSON CANCER CENTER SUPPORT GROUPS

The best cancer care includes more than medical treatment. Scripps MD Anderson Cancer Care Center offers support for people living with cancers, including breast, gynecologic and head and neck, as well as services to help with emotional, psychological, financial and lifestyle as aspects of cancer. Although due to COVID-19 meetings were suspended for most of the year as there was restricted access to the hospital patients had the ability to join online support groups offered by MD Anderson Cancer Center as part of our partnership. The sessions were facilitated by MD Anderson social work counselors and provided an opportunity for patients, family members and friends to meet others in similar circumstances, develop new relationships and find out how others cope during this time of increased distress.

SCRIPPS MD ANDERSON CANCER CENTER SURVIVORSHIP PROGRAM

Scripps MD Anderson patients and their families can take part in free survivorship programs through San Diego YMCA and LIVESTRONG Foundation. Focusing on physical activity and well-being, the program helps adult cancer survivors achieve their holistic health goals.

SCRIPPS MD ANDERSON CANCER CENTER SURVIVORS DAY

Survivors Day is a time to recognize the nation's 15.5 million cancer survivors, to focus attention on issues of survivorship, and to acknowledge medical professionals dedicated to cancer treatment, research and support services. National Cancer Survivors Day events are held in hundreds of communities nationwide throughout the month of June. Scripps holds a celebratory event at various Scripps hospitals each year to provide an opportunity for those that have battled cancer to come together and enjoy the company of friends, family and the camaraderie of fellow cancer survivors.

Cancer survivors and other guests share inspirational stories learn about advances in cancer treatment and research and enjoy the opportunity to connect with caregivers and fellow survivors. Each year the cancer survivor events helps celebrate life, inspire those recently diagnosed, offer support to family and loved ones and recognize all who provided support along the way. They also provide a forum for discussing the physical, financial and social issues that many cancer survivors face following completion of treatment. Events were held online this year to ensure safety and reduce the spread of COVID-19. In partnership with MD Anderson Cancer Center the following were some of the topics presented; building your own vision board at home, history of labyrinths,

music and mindfulness exercise, Anticancer Living: Transform Your Life and Health with the Mix of Six, yoga breathing exercises and chair yoga.

SCRIPPS MERCY HOSPITAL CHULA VISTA WELL BEING CENTER CANCER SUPPORT SERVICES:

HEALTHY WOMEN, HEALTHY LIFESTYLES: BREAST HEALTH OUTREACH AND EDUCATION PROGRAM

A Promotora led health and wellness program that aims to improve the lives of women in San Diego's South Bay with breast cancer education, prevention and treatment support. Promotoras teach breast health to women who have limited or no access to health care. Promotoras teach women in their native language with sensitivity to a woman's ethnic and cultural norms. The program model includes a Promotora, Cancer Survivor and a Nurse Navigator. The Promotora has knowledge of breast cancer, offers education and emotional support. She also provides referrals in culturally appropriate and language sensitive way. A breast cancer survivor and volunteer strengthen the benefits of breast cancer education and prevention by talking to someone who has been there and can provide insight and suggestions and is living proof that the disease is not fatal. Working together, the Promotora and Volunteer present a very strong front for breast cancer awareness and full support system for those already diagnosed. Moreover, the fact they are bi-lingual Latinas, lend an air of automatic trust among the Hispanic community as they can connect with the residents on a cultural level. Due to COVID-19 many of these outreach and education programs ceased mid-March 2020 due to large group and gathering restrictions; some services were able to transition to a virtual platform.

MUJERES EN ACCIÓN/WOMEN IN ACTION BREAST HEALTH OUTREACH AND EDUCATION

The Mujeres en Acción/Women in Action Breast Health Outreach and Education Program increases breast cancer coordination, breast health education, clinical breast examinations, and screening mammography services for Latino and Filipino/Asian and other diverse women ages 40 years and older. The breast cancer support group is for women going through breast cancer treatment. It allows for confidential peer support and staff provide support, education, and resources to these women. Resources are available at the center to provide to patients such as wigs prosthesis, bras, hats, medical record organizer binder, and gas cards. The Well Being Center offers this support group to provide emotional aid, new coping skills, and encouragement. Group members can share their personal experiences, hopes, fears, and strengths in a relaxed setting.

SCRIPPS MERCY HOSPITAL CHULA VISTA: BREAST HEALTH SERVICES

A total of 150 women were referred to clinical breast health services in the community and Scripps Mercy Hospital Chula Vista radiology services. More than 1,900 services were provided including telephone reminders, outreach and education about preventing breast cancer, case management/care coordination, providing local resources, encouragement for patients to repeat exam, sending correspondence to patients and providers, social/emotional support, home and hospital visits, mailing educational material on nutrition, treatment options and commonly asked questions and supplies (wigs, bras, prosthesis and medical record organizer binder). Due to COVID-19 breast health screenings were postponed/cancelled mid-March 2020.

SCRIPPS MERCY HOSPITAL CHULA VISTA BREAST CANCER SUPPORT GROUP

Together Promotoras and cancer survivors hold a bi-monthly support group that helps individuals cope with living with cancer. Group support including navigating the cancer system and educational presentations by local providers are offered. A total of 190 women participated in the breast cancer support group. Due to the COVID-19 this support group transitioned to conference calls and virtual offerings and therefore less women participated in the support group.

SCRIPPS POLSTER BREAST CARE CENTER (SPBCC)

Scripps Polster Breast Care Center (SPBCC) sponsors the Young Women's Support Group which provide a venue for women under the age of 40 to come together, discuss issues relating to diagnoses and receive support. The groups are offered to women in the San Diego community. Topics related to breast health are also offered to the community. Due to COVID-19 meetings were not held for most of the year as there was restricted access to the hospital.

AMERICAN CANCER SOCIETY (ACS) MAKING STRIDES AGAINST BREAST CANCER

Scripps Health participated and sponsored the Making Strides Against Breast Cancer walk in the amount of \$8,000 to raise money for breast cancer research. In addition, the Scripps Health team fundraised \$5,000. The walk raises critical funds to save lives from breast cancer and ensure no one faces breast cancer alone. A series of educational events are coordinated with the American Cancer Society awareness months. The events focus on various types of cancer, including breast, lung, cervical, colorectal, skin, ovarian/gynecological and prostate. A registered nurse clinician answers questions and provides educational materials.

[AMERICAN CANCER SOCIETY CANCER ACTION NETWORK \(ACS CAN\)](#)

Scripps Health participated and sponsored in a research breakfast on Precision Medicine, Genomics and Clinical Trials in October 2019. These topics reflect cutting-edge science that has been at the forefront of breakthroughs in treatment and would not be possible without research and dedicated scientists and clinicians. The event brought together more than 100 leaders from the business, education, government and research communities to advance the work of ACS CAN. ACS CAN is a nonprofit, nonpartisan advocacy affiliate of the American Cancer Society.

[LUNG CANCER RESEARCH FOUNDATION FREE TO BREATHE JAZZ BY THE BAY 5K](#)

Scripps participated in the Lung Cancer Research Foundation Free to Breathe Jazz fundraising walk in November 2019. The Lung Cancer Research Foundation builds awareness and funds vital research programs dedicated to improving lung cancer outcomes.

CARDIOVASCULAR DISEASE

'Diseases of the heart' were the second leading cause of death in San Diego County in 2018. In addition, 'cerebrovascular diseases' were the fourth leading cause of death, and essential hypertension and hypertensive renal disease' was the tenth.

Coronary Heart Disease is the most common form of heart disease. High blood pressure, high cholesterol, and smoking are all risk factors that could lead to CVD and stroke. About half of Americans (49%) have at least one of these three risk factors.

RISK FACTORS FOR CARDIOVASCULAR DISEASE:

Behaviors: Tobacco use, obesity, poor diet that is high in saturated fats, and excessive alcohol use.

Conditions: High cholesterol levels, high blood pressure and diabetes.

Heredity: Genetic factors likely play a role in heart disease and can increase risk.

A summary of the magnitude and prevalence of cardiovascular disease is described below:

- The Scripps 2019 CHNA continued to identify cardiovascular disease (including cerebrovascular disease/stroke) as a priority health issue affecting members of the communities served by Scripps.
- According to data presented in the Scripps 2019 CHNA, high blood pressure, high cholesterol and smoking are all risk factors that could lead to cardiovascular disease and stroke. About half of all Americans (47 percent) have at least one of these three risk factors. Additional risk factors include alcohol use, obesity, physical inactivity, poor diet, diabetes and genetic factors.
- In 2018, cerebrovascular diseases including stroke were the fourth leading cause of death for San Diego County overall.

The World Health Organization defines cardiovascular disease (CVD) as a group of disorders of the heart and blood vessels that include:

- Coronary heart disease
- Cerebrovascular disease
- Peripheral arterial disease
- Rheumatic heart disease
- Congenital heart disease
- Deep vein thrombosis
- Pulmonary embolism

Coronary Heart Disease is the most common form of heart disease and the leading cause of death in the U.S. high blood pressure, high cholesterol, and smoking are all risk factors that could lead to CVD and stroke.

- In 2018, there were 1,446 deaths due to stroke in San Diego County.¹⁹ The age-adjusted death rate due to stroke was 37.3 per 100,000 population, which was higher than the HP2020 target of 34.8 deaths per 100,000.
- In 2008, there were 4,655 deaths due to diseases of the heart in San Diego County. The age-adjusted death rate due to diseases of the heart was 120.51 per 100,000 population.²⁰
- In 2017, there were 6,078 hospitalizations for stroke in San Diego County, with an age-adjusted rate of 166.9 per 100,000 population, a 7.4% decline from 2016.
- In 2017, there were 2,603 stroke-related ED visits in San Diego County. The age adjusted rate of ED visits was 71.4 per 100,000.
- Heart disease is the leading cause of death for people of most racial/ethnic groups in the United States, including African Americans, Hispanics and Whites.
- The National Institute of Neurological Disorders and Stroke (NINDS) reports that 25 percent of people who recover from their first stroke will have another stroke within five years (NINDS, 2016).
- According to 2018 CHIS data, an estimated 26.3% of SDC adults were obese, 11.0% were current smokers, 9.8% reported that they were not physically active. The CDC estimates that up to 80 percent of strokes are preventable through the recognition of early signs/symptoms and the elimination of stroke risk factors.
- According to the CDC, healthy lifestyle choices can help prevent stroke. Behaviors that can mitigate the risk of stroke include choosing a healthy diet full of fruits and vegetables, maintaining a healthy weight, engaging in at least 2.5 hours of moderate-intensity aerobic physical activity each week, refraining from or quitting smoking, and limiting alcohol intake (CDC, 2018).

Not only is Scripps a nationally recognized heart care leader, consistently ranked by U.S. News & World Report as one of America's Best Hospitals for cardiology and heart surgery, but we treat more heart patients than any other health care provider in San

¹⁹ County of San Diego HHSA's Community Health Statistics Unit collects annual data on leading causes of death using methodology established by the National Center for Health Statistics (NCHS). Data is based on "underlying cause of death" information from all death certificates filed in SDC in 2017. Causes are ranked according to the number of deaths assigned to all ranked causes, which are a subset of ICD-10's "List of 113 Selected Causes of Death and Enterocolitis due to Clostridium difficile." (Peña, M., County of San Diego HHSA Public Health Services, Community Health Statistics Unit, 2018; Heron, M., "Deaths: Leading Causes for 2016". National Vital Statistics Reports; vol. 67 no. 6. Hyattsville, Maryland: National Center for Health Statistics. 2018.)

²⁰ Ibid.,58

Diego. We have state-of-the-art technology and highly trained heart care specialists, providing an innovative and expansive scope of services and high-quality outcomes. Along with the tremendous care Scripps provides within our hospitals and outpatient clinics, Scripps also supports our surrounding communities with resources, outreach programs and partnerships to ensure the heartbeat of our community continues.

During Fiscal Year 2020, Scripps engaged in the following heart health, stroke, and cardiovascular disease prevention and treatment activities.

CPR CLASSES FOR PATIENTS AND FAMILIES OF THE CARDIAC TREATMENT CENTER

CPR classes are offered four times a year to Cardiac Treatment Center patients and their families. The program improves community health by increasing knowledge of cardiopulmonary resuscitation practices. Due to COVID-19 these classes were not held most of the year due to restricted access to the hospital.

CARDIAC TREATMENT CENTER GROUP EXERCISE PROGRAMS

Cardiac Treatment Center Group Exercise Programs are designed for cardiovascular health improvement. Classes include training in Balance, Slow Flow Yoga, Tai Chi, Fit Ball, Chair Yoga and Meditation, Mindfulness, Acupressure and Breath Work for Stress, Meditation and ARM Exercise. The Cardiac Treatment Center also provides exercise programs that include nutritional education through the Pulmonary Class, Dietary One-On-One Counseling, Nutrition Class, Breathing for Better Health During COVID-19 and the Cardiac Life Project. The Better Breathers provide additional education in cardiovascular health. Due to COVID-19 these classes were not held most of the year due to restricted access to the hospital.

CARDIAC TREATMENT CENTER'S LIFE PROJECT

The Cardiac Treatment Center's Life Project is a support group for people with heart disease and their family members. The goal is to provide education and resources on coping with heart disease in a friendly and supportive environment. Due to COVID-19 these classes were not held most of the year due to restricted access to the hospital.

PULMONARY CARDIAC CLASS

This educational class provided by the Scripps Cardiac Treatment Center is a comprehensive six-week education program for pulmonary patients to help them to manage their disease. They will learn lifestyle management for a healthy life, nutrition and exercise are part of the series. This class was offered virtually starting in March 2020 due to COVID-19.

STUDENT PRECEPTORSHIPS AT CARDIAC TREATMENT CENTER

Scripps provides preceptorships for student RNs, exercise physiologists and cardiac sonographers. The Scripps Cardiac Treatment Center nurses' mentor the students through education and modeling. The students learn the roles and responsibilities required of the positions. Due to COVID-19 the preceptorships were not held most of the year due to restricted access to the hospital.

COUNTY OF SAN DIEGO LOVE YOUR HEART BLOOD PRESSURE SCREENINGS

Scripps partnered with the County of San Diego "Love your Heart" blood pressure screenings and served over 75 individuals. This is an annual event with a simple mission—help prevent heart disease and stroke to reduce the percentage of deaths in San Diego county due to chronic disease. Organizations from across the U.S. and Mexico join to provide free blood pressure screenings to the public on Valentine's Day. The Love Your Heart annual campaign was launched on Valentine's Day 2012 to address the negative impacts of heart disease in the region. Partnering organizations and businesses provide volunteers to check blood pressures, collect data, and help promote the availability of blood pressure sites in a variety of locations and settings to ensure broad accessibility. The inaugural year, 1,000 blood pressure readings were taken at the event. In 2020, through the help of hundreds of volunteers, there were more than 56,000 blood pressure readings completed across 542 sites in the United States and Mexico. Of these, more than 5,441 hypertensive cases were identified and referred to urgent or emergency care, as appropriate.

LEFT VENTRICULAR ASSIST DEVICE (LVAD) SUPPORT GROUP

Scripps offers a support group for patients with a Left Ventricular Assist Device. This group provides education and support to those patients and their caregivers/partners. Topics include safety and proper mechanics required for the device. Due to COVID-19 these support groups were not held most of the year due to restricted access to the hospital.

JOE NIEKRO FOUNDATION

Scripps Health provides meeting space for the Joe Niekro Foundation support groups of patients, families and friends who have been affected with brain aneurysms or hemorrhagic stroke. The program is opened to the public. Due to COVID-19 the support groups were not held most of the year due to restricted access to the hospital.

EDUCATING WOMEN ABOUT HEART HEALTH

Scripps Women's Heart Center is devoted to caring for women and educating patients about heart disease prevention. Heart disease is the leading cause of death for women in the United States, killing more than 299,578 women in 2017 – or about 1 in every 5 female deaths according to the Center for Disease Control and Prevention. Our female cardiologists focus on empowering their patients and the community to take care of their hearts through education, healthy lifestyles and expert medical care when needed.

THE ERIC PAREDES SAVE A LIFE FOUNDATION

Each year, 7,000 teens lose their lives due to sudden cardiac arrest (SCA). SCA is not a heart attack, it is caused by an abnormality in the heart's electrical system that can easily be detected with a simple Electrocardiogram (EKG). Unfortunately, heart screenings are not part of a regular, well-child exam or pre-participation sports physical. The first symptom of SCA could be death. San Diego alone loses three to five teens from SCA annually.

Scripps efforts began when a registered nurse at Scripps created the foundation after her 15-year-old son, Eric passed away from sudden cardiac arrest in 2009. Turning tragedy into an opportunity, the Paredes' established the organization to prevent sudden cardiac arrest in school-age children and adolescents. As a sponsor for the Eric Paredes Save A Life Foundation, Scripps has held more than 20,000 free cardiac screenings to local teens, including the homeless, uninsured and underinsured. In Fiscal Year 2020, Scripps made an \$8,500 contribution to help pay for screenings. In Fiscal Year 2020, Scripps supported screening events at area high schools and screened 1,951 teens, identifying 27 with abnormalities and 16 who were at risk.

The overall goal was to host 6 screenings per year and to average 800 youth per screening event, however, the national health pandemic caused the postponing of the April, June and August screenings.

The following were additional metrics tracked:

- Teens Uninured: 27%
- Teens Without a Pediatrician/Family Doc: 452
- Teens Who Use Community Clinic: 446
- Average percent of Moderate to Extremely Low Household Income: 69%
- Ethnicity: 53% represent diverse ethnicities
- Parents unaware of SCA in youth: 57%
- Parents unaware of warning signs/risk factors 66%

- Number of youths screened who participate in sports: 69%
- Scripps Volunteers: 40
- Scripps Volunteer Hours: 200

THE ERIC PAREDES SAVE A LIFE FOUNDATION – PRESCRIPTION FOR PREVENTION

In partnership with SDSU's Institute for Public Health and UC Irvine, The Eric Paredes Save A Life Foundation produced the first CME/CNE on incorporating Sudden Cardiac Arrest prevention into primary care practices. Studies show cardiac consideration is an often-overlooked area of assessment. The training module reviews SCA warning signs, risk factors and recommended diagnostic testing protocol. The CME development was directed and narrated by Dr. John Rogers, Scripps Cardiologist and EP Save A Life Medical Director, and Scripps Health was instrumental in facilitating engagement in both a front-end needs assessment and in participation in the training module through direct communication with PCPs. Funding supported development and promotion of the training module on a local, state and national level, in particular with the San Diego chapter of the American Academy of Pediatrics. Given early data suggests COVID-19 can lead to heart damage and professional medical associations have released recommendations for cardiac assessment of student athletes who've been exposed before returning to play, this training supports a critical skill set for PCPs. The Scripps participation in live CME events/early Needs Assessment of total participants was 45%.

SWEETWATER UNION HIGH SCHOOL DISTRICT – SPORTS SCREENINGS

Every year, three to five student athletes in San Diego County die suddenly and unexpectedly from Sudden Cardiac Arrest/Death (SCA/D). SCA is an abnormality in the heart's electrical system that can happen without symptoms or warning signs. However, this life-threatening condition can be detected with a cardiac screening exam.

Scripps Mercy Hospital Chula Vista Family Medicine Residency, Southwest Sports Wellness Foundation, and the Sweetwater Union High School District partner to prevent sudden cardiac arrest and death among high school students by increasing awareness of the importance of healthy lifestyles and cardiovascular screenings among active students. Family Medicine residents offer yearly cardiac screening and sports physicals before students participate in organized sports and implement an injury clinic during football season to evaluate and treat possible concussions and other injuries. Due to COVID-19 the screening events were implemented on a much smaller scale and a total of 150 screenings were provided to student athletes this year.

SU CORAZON, SU VIDA / YOUR HEART, YOUR LIFE COMMUNITY INTERVENTION TO IMPROVE EDUCATION AND AWARENESS OF HEART DISEASE

The Your Heart, Your Life (Su Corazon, Su Vida) Program is designed to help prevent heart disease through education and provide support and outreach to those already living with heart disease and other related chronic diseases such as diabetes and high blood pressure. Topics covered in the classes include heart disease risk factors, signs of a heart attack and stroke, lifestyle changes, diabetes, cholesterol and nutrition education. Height, weight, and blood pressures are recorded in the first and last class to measure a difference and impact of the lifestyle changes implemented from participating in the sessions.

A total of 50 community members have participated in this educational series for those affected by hypertension, angina, cardiac heart failure or any other heart health concerns. Assessment survey showed weight (pre:157 lbs. and post:153 lbs.) and blood pressure (pre:145/74 and post:138/70) an overall improvement rate after participating in the Your Heart, Your Life series. Overall, participants have made a positive impact from the course based on the health assessments. Classes were cancelled mid-year due to COVID -19.

STROKE CARE PROGRAMS

On average, a stroke occurs every 40 seconds in the United States. More than 1,000 stroke deaths occurred in San Diego County in 2018, and about 15 people are hospitalized due to stroke every day. Scripps sponsors a wide variety of stroke related education and awareness programs. These include support groups and education for stroke and brain injury survivors and their loved one. Information and resources are provided, along with skills to help reinforce inner strengths and learn self-care strategies. Support groups offer the ability to develop encouraging peer relationships along with the goal of returning to and continuing a life of meaning and purpose. Due to COVID-19 these support groups were not held most of the year due to restricted access to the hospital

SAN DIEGO COUNTY STROKE CONSORTIUM

Scripps Stroke Program participates in the SD County Stroke Consortium, a county-wide stroke group, consisting of SD County Stroke receiving center Stroke Program Coordinators, Stroke Champions and Stroke Leadership. Additionally, the meeting is attended by Stroke Program Medical Directors and SD County leadership. The Stroke Consortium serves as a point of contact for continuity of stroke care in San Diego County.

In the early months of COVID-19 pandemic, a decline in stroke hospital admissions were reported across the nation. Scripps Stroke Program spearheaded a real-time data collection in collaboration with 18 stroke receiving centers in San Diego County. When the group calculated a decrease in stroke code activations by 30% as compared to 2019, Scripps Stroke Program dedicated time and resources to lead the efforts to create and disseminate a unified community message urging San Diego County residents to seek emergency treatment when suffering symptoms of a stroke. Scripps Stroke Program led a collaborative group including San Diego County EMS, San Diego regional American Heart Association/American Stroke Association, and the San Diego County Stroke Consortium in creating a united marketing campaign. The slogan “We are here for you. Every minute matters” accompanied by a graphic message was utilized to highlight the importance of seeking emergency treatment when experiencing stroke-like symptoms. The social media campaign was posted on Facebook, Twitter, Instagram and LinkedIn, with a total of 26,727 views. The community collaborative was also submitted for consideration at the 2021 International Stroke Conference.

[COLLABORATIVE SAN DIEGO COUNTY STROKE CENTER COMMUNITY MESSAGING CAMPAIGN](#)

The San Diego County Stroke Consortium (of which all Scripps Health Stroke Programs participate) performed a collaborative SD County Stroke Center Community Messaging campaign in May/June during the pandemic. The general point of the Consortium project was to reassure/remind community members the importance of accessing 911 for stroke symptoms, to present for timely care, despite the ongoing pandemic.

[SCRIPPS HEALTH STROKE PROGRAM COMMUNITY EVENTS](#)

[Ocean Knoll Elementary PTA Group](#)

The Scripps Health Stroke Team participated in an Educational Event at Ocean Knoll Elementary School in Encinitas, CA on January 23, 2020. Stroke Team members provided community outreach via an educational lecture to school parents, PTA members and teachers about BE-FAST (how to recognize symptoms of stroke and calling 911 for someone exhibiting stroke symptoms). The event was held at Ocean Knoll Elementary School in Encinitas and 25 community members were served. The event was open to PTA members and staff of Ocean Knoll Elementary school.

[AT&T Stroke Screening Event with American Heart Association](#)

The Scripps Health Stroke Team coordinated and participated in a Stroke Screening Event in collaboration with the American Heart Association Team in San Diego on February 7, 2020. Stroke Team members provided community outreach via Stroke Risk Screening and Education, Stroke Risk assessments; blood pressure screening, and BE-FAST education (recognition of stroke and calling 911). The event was held on the AT&T San Diego campus and 70 community members were served. The event was open to AT&T employees.

[Rancho Santa Fe Senior Center](#)

Participation at the Rancho Santa Fe Senior Center where 20 community members were served. Stroke Team members provided community outreach via an educational lecture to members of the senior center and community members regarding physiology of stroke, stroke risk factors, stroke prevention, recognition of stroke and accessing 911. The event was open for all to attend, but primarily served residents of Rancho Santa Fe, CA.

[Mesa College](#)

The Scripps Health Stroke Team participated in an Educational Event at Mesa College on March 7, 2020. Stroke Team members provided community outreach via an Educational lecture to college students and teachers about BE-FAST (how to recognize symptoms of stroke and calling 911 for someone exhibiting stroke symptoms). The event was held at Mesa College in San Diego CA and 30 community members were served. The event was open to Mesa college students and staff.

[STROKE AND BRAIN INJURY SUPPORT GROUP AT SCRIPPS MERCY HOSPITAL CHULA VISTA WELL BEING CENTER](#)

The stroke support group is for stroke and brain injury survivors, caregivers, and loved ones. The group's goal is to educate and empower survivors. Attendees receive information and resources, reinforce inner strengths, learn self-care strategies, and develop encouraging peer relationships. A total of 92 people participated in the support group. Due to COVID-19 the group has transitioned to conference call group which has impacted the overall number of participants for the year.

[BRAINMASTERS: STROKE AND BRAIN INJURY SURVIVORS SUPPORT GROUP](#)

In 2017, Scripps Memorial Hospital Encinitas launched a program to address the communication challenges of stroke and brain injury survivors. BrainMasters is an improvisational speaking group for adults coping with acquired brain injury. This fun,

supportive and interactive group helps brain injury patients improve communication skills, think more quickly on their feet, and build self-confidence in a friendly, encouraging environment. Offered as a community benefit through Scripps Memorial Hospital Encinitas, BrainMasters is free and open to the community. In Fiscal Year 2020, 52 people were served.

DIABETES

Diabetes is an important health need because of its prevalence, its impact on morbidity and mortality, and its preventability. An analysis of mortality data for San Diego County found that in 2018 ‘Diabetes mellitus’ was the seventh leading cause of death.

A summary of the magnitude and prevalence of diabetes is described below:

- The Scripps 2019 CHNA continued to identify diabetes as a priority health issue affecting members of the communities served by Scripps.
- The Centers for Disease Control and Prevention (CDC) identify diabetes as the seventh leading cause of death in the U.S., as well as the leading cause of kidney failure, non-traumatic lower limb amputations and new cases of blindness among adults.
- The number of adults diagnosed with diabetes in the U.S. has more than tripled in the last 20 years (CDC, 2017).
- In 2018, there were 755 deaths due to diabetes in San Diego County overall.²¹ The age-adjusted death rate due to diabetes was 20.5 per 100,000 population.
- In 2017, there were 4,292 hospitalizations due to diabetes in San Diego County. The age-adjusted rate of hospitalization was 122.9 per 100,000 population in 2017, which was slightly lower than the age-adjusted rate in 2016 (120.9 per 100,000 population).
- In 2017, there were 5,717 diabetes-related ED discharges in San Diego County, a 10.6% increase from 2016 (5,168 ED discharges). The age-adjusted rate of diabetes related ED discharges were 165.0 per 100,000 population in 2017,

Type 2 diabetes, once known as adult onset or noninsulin-dependent diabetes, is a chronic condition that affects the way the body metabolizes sugar (glucose), which is the body's main source of fuel. With Type 2 diabetes, the body either resists the effects of insulin a hormone that regulates the movement of sugar into the cells or doesn't produce enough insulin to maintain a normal glucose level. If left untreated, Type 2 diabetes can be life threatening.

²¹ County of San Diego HHSA's Community Health Statistics Unit collects annual data on leading causes of death using methodology established by the National Center for Health Statistics (NCHS). Data is based on "underlying cause of death" information from all death certificates filed in SDC in 2016. Causes are ranked according to the number of deaths assigned to all ranked causes, which are a subset of ICD-10's "List of 113 Selected Causes of Death and Enterocolitis due to Clostridium difficile." (Peña, M., County of San Diego HHSA Public Health Services, Community Health Statistics Unit, 2018; Heron, M., "Deaths: Leading causes for 2016". National Vital Statistics Reports; vol. 67 no. 6. Hyattsville, Maryland: National Center for Health Statistics. 2018.)

which was higher than the age-adjusted rate in 2016 (151.9 per 100,000 population).

- According to 2018 CHIS data, 9.8 percent of adults living in San Diego County indicated that they had ever been diagnosed with diabetes, which was lower than the state of California (9.9 percent). Diabetes rates among seniors were particularly high, with 20.5 percent of San Diego County adults over 65 reporting that they had ever been diagnosed with diabetes.
- According to 2018 CHIS data, 9.8 percent of San Diego County residents had been told by their doctor that they have pre or borderline diabetes.
- According to the CDC's 2017 National Diabetes Statistics Report, 87.5 percent of adults diagnosed with diabetes were overweight or obese. To prevent or delay the onset of diabetes, the CDC recommends lifestyle changes such as losing weight, eating healthier, and getting regular physical activity. The CDC estimates that 30.3 million people in the U.S. have diabetes. Of those individuals, 1 in 4 is not aware they have the disease (CDC National Diabetes Statistics Report, 2017).

The percentage of adults aged 20 and older who have ever been diagnosed with diabetes was 9.4% in 2017 in San Diego County and has been steadily rising since 2005 according to the National Center for Chronic Disease Prevention and Health Promotion. Type 2 diabetes is an important target for intervention because hospitalizations due to diabetes related complications are potentially preventable with proper management and a healthy lifestyle.

There are three major types of diabetes: Type 1, Type 2 and gestational. All three types share similar characteristics, the body loses the ability to either make or use insulin. Without enough insulin, glucose stays in the blood, creating dangerous blood sugar levels. Over time, this accumulation damages kidneys, heart, nerves, eyes and other organs.

Type 2 diabetes, once known as adult onset or noninsulin dependent diabetes, is a chronic condition that affects the way your body metabolizes sugar (glucose), which is your body's main source of fuel. With Type 2 diabetes, your body either resists the effects of insulin, a hormone that regulates the movement of sugar into your cells or doesn't produce enough insulin to maintain a normal glucose level. If left untreated, Type 2 diabetes can be life threatening. Clinical symptoms can include frequent urination, excessive thirst, extreme hunger, sudden vision changes, unexplained weight loss, extreme fatigue, sores that are slow to heal, and increased number of infections.

Type 2 diabetes has reached epidemic proportions, and people of Hispanic origin have dramatically higher rates of the disease and the complications that go along with its poor management, including cardiovascular disease, eye disease and limb amputation. In fact, it is estimated that one out of every two Hispanic children born in 2000 will develop diabetes in adulthood. This is especially true in the South Bay communities in San Diego. Specifically, the city of Chula Vista is home to 26,000 Latinos with diagnosed diabetes and tens of thousands more who are undiagnosed, have pre-diabetes and are at high risk of developing diabetes.

Some facts about Type 2 diabetes:

- Diabetes is a major cause of heart disease and stroke and is the 7th leading cause of death in the United States and California.
- More than 1 out of 3 adults have prediabetes and 15 to 30% of those with prediabetes will develop Type 2 diabetes within 5 years.
- Nine out of 10 people with prediabetes don't know they have it.

Some risk factors for developing diabetes include:

- Being overweight or obese
- Having a parent, brother or sister with diabetes.
- Smoking
- Having blood pressure measuring 140/90 or higher.
- Being physically inactive, exercising fewer than three times a week.
- A history of gestational diabetes
- If you are 65 years of age or older

According to the CDC, nearly 10 percent of the overall population is now living with diabetes, and another 45 percent has pre-diabetes, a precursor to Type 2 diabetes. The complications related to diabetes are serious and can be reduced with preventive practices. Diabetes is a serious community health problem, leading to school and work absenteeism, elevated hospitalization rates, frequent emergency room visits, permanent physical disabilities and sometimes death.

Scripps is making every effort to help patients and our communities with prediabetes reverse course and lead healthier lives. During Fiscal Year 2020, Scripps sponsored the following diabetes management programs and initiatives:

[WOLTMAN FAMILY DIABETES CARE AND PREVENTION CENTER IN CHULA VISTA](#)

The Woltman Family Diabetes Care and Prevention Center in Chula Vista serves one of San Diego's communities hit hardest by the diabetes epidemic. Nearly 40 percent of patients admitted to Scripps Memorial Hospital Chula Vista, and nearly 32 percent of patients in the heart catheterization lab, have diabetes. County statistics tell us that the rates of death, hospitalizations and emergency room visits are twice as high in Chula Vista compared to all of San Diego County. The Center has added critical classroom space to meet the high demand for services and offers a full range of wellness, prevention, diabetes education, and nutrition services and endocrinology specialty visits in English and Spanish.

[PROJECT DULCE](#)

Project Dulce is a comprehensive, culturally sensitive diabetes management program for underserved and uninsured people in San Diego County. The program is team based and incorporates the chronic care model.

Project Dulce has been active in communities across San Diego for the past 25 years, providing diabetes care and self-management education. Nurse led teams strive for measurable improvements in their patients' health, nurse educators lead multidisciplinary teams that provide clinical management; and peer educators from each cultural group, known as Promotoras, provide public and patient education for their communities. This innovative program combines state of the art clinical diabetes management with proven educational and behavioral interventions.

One of the primary components of the program is recruiting peer educators from the community to work directly with patients. These educators reflect the diverse population affected by diabetes and help teach others about changing eating habits, adopting exercise routines and nurturing their wellbeing to manage this chronic disease.

In Fiscal Year 2020, Project Dulce provided 2,884 diabetes care, retinal screenings and education visits for low income and underserved individuals throughout San Diego.

RETINAL SCREENING PROGRAM

It is estimated that every 24 hours, 55 people will lose their vision because of diabetic-related eye disease (diabetic retinopathy) even though 95 percent of diabetic blindness could be prevented with early diagnosis and treatment. For more than a decade, Scripps has been screening people in underserved communities for diabetic retinopathy using a mobile camera. Our free or low-cost eye exams diagnose individuals at high risk for retinal damage and help patients get treatment and referrals to specialists.

In Fiscal Year 2020, 917 people were screened, and 6.4 percent had some degree of diabetes-related eye disease. This program referred 38 people who had advanced disease, 2.4 percent of all screened or nearly 36.9 percent of positives, to specialists for further care. Due to COVID-19 the screenings were not conducted for most of the year due to COVID-19.

MEDICAL ASSISTANT HEALTH COACHING (MAC) FOR DIABETES IN DIVERSE PRIMARY CARE SETTINGS

Diabetes affects nearly 30 million individuals in the U.S., and if current trends continue, 1 of 3 adults will have diabetes by 2050. Diabetes Self-Management Education and Support (DSME) is a cornerstone of effective care that improves clinical control and health outcomes; however, DSME participation is low, particularly among underserved populations, and ongoing support is often needed to maintain DSME gains.

In 2015, the National Institute of Diabetes and Digestive and Kidney Diseases (NIH/NIDDK) granted Scripps Whittier Diabetes Institute \$2.1 million to fund the MAC Trial, which is studying an innovative team care approach that trains medical assistants (MAs) to provide health coaching in the primary care setting to patients with poorly controlled Type 2 diabetes, help them problem solve, and improve their diabetes-related health outcomes. The goals include improving diabetes self-management and clinical outcomes, such as blood glucose levels, cholesterol and blood pressure. The study is being conducted in two diverse settings: a Scripps Health primary care practice, and a community health center, Neighborhood Healthcare. The interventions for this study were completed in Fiscal Year 2019 and the data is now being analyzed for publication.

DIABETES PREVENTION PROGRAM

The UCLA Center for Health Policy and Research recently published data that revealed nearly half of California adults have prediabetes or diabetes. While the Scripps Whittier Diabetes Institute has been providing the best care for people with diabetes for decades, the Institute continued with the Scripps Diabetes Prevention Program (DPP), which is a year-long intervention where people with prediabetes meet weekly for 16

weeks, then monthly thereafter. The DPP is an intensive lifestyle behavior change intervention program that has been proven to prevent diabetes in large-scale national studies. Scripps program is part of the National Diabetes Prevention Program, led by the Centers for Disease Control and Prevention. The program is considered a Medicare benefit for prediabetic patients, and a doctor's referral is not required.

The Diabetes Prevention Program (DPP) has been thoroughly evaluated in NIH sponsored randomized controlled trials and has been found to decrease the number of new cases of diabetes among those with prediabetes by 58%. Among people over age 60, there was a 71% reduction in new cases.

After a brief pause at the start of the pandemic, Scripps launched a virtual version of its Diabetes Prevention Program in which small cohorts meet online once a week for the first four months, then twice a month. The structured program is research based, effective and provides the support needed to make healthy habits that will last for life. Sessions focus on topics such as diet and exercise, managing stress and overcoming barriers. Each participant is also paired with a lifestyle coach who helps them set and meet their goals. In Fiscal Year 2020, 1,550 patients attended 46 Scripps DPP orientation sessions. Much of the effort is focused in the South Bay for the Latino population, which is at higher risk of acquiring diabetes than their white counterparts.

DIGITAL DIABETES-ME: AN ADAPTIVE MHEALTH INTERVENTION FOR UNDERSERVED HISPANICS WITH DIABETES

Diabetes is a fast-growing epidemic. In the US, nearly 11% of adults were living with diagnosed diabetes in 2017,²² which represented an annual economic burden of \$327.2 billion, with an average annual cost of \$13,240 per case.²³ Hispanics face a higher risk of developing the disease—13.9 percent compared with 7.6 percent for non-Hispanic whites.

The NIH's National Institute of Diabetes and Digestive and Kidney Diseases awarded \$2.9 million, the largest NIH award to Scripps Whittier Diabetes Institute to date, to study an innovative approach to helping Hispanics with diabetes better manage their disease.

Dulce Digital-Me provided patients with tools to help them manage their diabetes day to day and improve their health, including text messaging, wireless blood glucose and medication monitoring, diet and exercise assessments, and personalized feedback and

²² International Diabetes Federation (IDF). IDF Diabetes Atlas. 2017: <http://www.diabetesatlas.org>

²³ Dall TM, Yang W, Gillespie K, et al. "The Economic Burden of Elevated Blood Glucose Levels in 2017: Diagnosed and Undiagnosed Diabetes, Gestational Diabetes Mellitus, and Prediabetes". Diabetes care. 2019.

goal setting. This study was conducted in collaboration with Neighborhood Healthcare, San Diego State University and the University of California San Diego.

The participants received health-related text messages every day for six months and they saw improvements in their blood sugar levels that equaled those resulting from some glucose-lowering medications. The Dulce Digital-Me clinical trial represents the first randomized controlled study to look at the use of text messages to help underserved Hispanics better self-manage their diabetes through glycemic control. The results were published by Diabetes Care in an online pre-print version of the study, which is scheduled to be published in a future issue of the journal.

HEALTHY LIVING

In 2015, Scripps began Healthy Living classes which are open to anyone interested in learning about the benefits of good nutrition, physical activity, and avoiding tobacco. These behaviors can help to prevent the four chronic diseases (lung disease, cancer, Type 2 diabetes and, cardiovascular disease) that contribute to 50 percent of all the deaths in the US. The three-class series is held at locations throughout the community. Thirty-six people attended Healthy Living classes that were provided throughout the County, again with special attention to the Latino community of the South Bay. Classes were cancelled mid-year due to COVID-19.

SCRIPPS WHITTIER DIABETES DISTRESS STUDY

The National Institute of Diabetes and Digestive and Kidney Diseases awarded a five-year, \$3.3 million grant in 2020 to Scripps Whittier Diabetes Institute to study the integration of mental health services in the care of patients with type 1 diabetes to better address the emotional distress than often accompanies the chronic disease.

Researchers at Scripps Whittier will use the federal funding to launch a large-scale, randomized, controlled clinical trial that will evaluate whether the integration of diabetes distress care with routine medical care results in better management of diabetes and better health-related quality of life. The study is a collaborative effort that capitalizes on the complimentary expertise of a clinical psychologist/endocrinologist partnership.

SCRIPPS WHITTIER DIABETES INSTITUTE PROFESSIONAL EDUCATION AND TRAINING

Scripps Whittier Diabetes Institute professional education teams provide state of the art education and training for people who wish to increase their diabetes management knowledge and skills. With the rise in diabetes related devices, there is a great need to equip clinicians with the latest information and clinical skills. The Whittier's professional education program is led by a team of experts, including endocrinologists, nurses, dietitians, psychologists and other diabetes specialist.

These individuals train practicing professionals to deliver the best possible care for their diabetes patients. Courses are tailored to the needs of allied health professionals seeking to understand new and complex clinical treatment options for Type 1, Type 2 and gestational diabetes. Professional education was provided for 97 people on insulin management, incretin therapy, and diabetes diet and diabetes basics. Participants came from local health institutions and throughout the United States to learn from the Whittier Institute's most experienced diabetes experts. Over the last fiscal year, the Whittier Institute's professional education department provided four CME programs for physicians, nurses, pharmacists, dietitians, midlevel providers and social workers and made numerous academic and research presentations at professional association meetings.

HEALTH RELATED BEHAVIORS

Health related behavior is one of the most important elements in people's health and well-being. Its importance has grown as sanitation has improved and medicine has advanced. Diseases that were once incurable can now be prevented or successfully treated. Health related behaviors, such as immunization, smoking cessation, improved nutrition, increased physical activity, oral health and injury prevention, have become important components of long-term life.

The risk factors for many chronic diseases are well known. In particular, an unhealthy diet, physical inactivity and substance use have been cited by the World Health Organization (<http://www.who.int/chp>) as important health behaviors that contribute to illnesses such as cardiovascular disease, cancer, chronic respiratory disease, diabetes, and others including mental disorders and oral diseases.

- The HASD&IC and Scripps 2019 CHNA identified ten top health and social needs in San Diego County. These ten social determinants are: access to care, community and social support, economic security, education, homelessness and housing instability, unintentional injury and violence, aging concerns, behavioral health, cancer and chronic conditions.
- Key informant interviews conducted as part of the HASD&IC 2019 CHNA suggested several health improvement strategies to address the health issues identified for San Diego County. These strategies include behavioral health prevention and stigma reduction; education on disease management and food insecurity; integrating physical and mental health care; better coordination of care; greater cultural competence and diversity; and engagement of patient navigators and case managers in the community.
- *Fruit/Vegetable Consumption*: According to data from California Health Interview Survey, 48.3% of children age 2 and older reported consuming less than five servings of fruits and vegetables a day compared to 47.7% in California, overall. Adults age 18 and over reported even less fruit and vegetable consumption. Approximately 70.5% of adults reported eating the recommended amount each day. Unhealthy eating habits are a significant contributing factor to future health issues including obesity and diabetes.
- *Physical Inactivity*: According to the CDC's National Center for Chronic Disease Prevention and Health Promotion, 14.9% of adults age 20 and older self-reported that they perform no leisure time physical activity. Higher rates of limited leisure time activity were reported at the state and national level (16.6% and 22.6% respectively). For youth results of the FITNESSGRAM physical fitness test show

that 29.35% of children in grades 5,7 and 9 ranked within the “High Risk” or “Needs Improvement” zones for aerobic capacity. The percentage of children that are not in the healthy fitness zone varies among ethnic groups with the lowest being non-Hispanic Asians at 20.6% and the highest being Hispanic or Latinos at 42.1%. Although this is smaller than the state average of 36.9%, it is still cause for concern and may lead to significant health issues, such as obesity, diabetes, and poor cardiovascular health.

- *Alcohol Consumption:* The percentage of adults age 18 and older who self-report heavy alcohol consumption (defined as more than two drinks per day on average for men and one drink per day on average for women) is 17.2% in San Diego County according to the Behavioral Risk Factor Surveillance System (BRFSS). Behaviors such as excessive alcohol consumption are detrimental to future health and may illustrate or preclude significant health issues, such as cirrhosis, cancer, and untreated mental and behavioral health needs.
- *Tobacco Usage:* The BFRSS also reports that 12.1% of adults age 18 and older self-reported currently smoking cigarettes some days or everyday compare to 18.1% in the United States, adjusted for age. Tobacco use is linked to leading causes of death including cancer and cardiovascular disease.
- The HHSA’s Live Well San Diego (LWSD) 3–4–50 initiative identified three behaviors (poor diet, physical inactivity and tobacco use) that contribute to four chronic conditions (cancer, heart disease/stroke, Type 2 diabetes and pulmonary diseases), which result in more than 50 percent of deaths worldwide. In 2015, 54 percent of all deaths in SDC were attributed to 3–4–50 conditions.

Understanding that personal behaviors play a significant role in an individual’s overall health status, Scripps has developed a series of prevention and wellness programs that help people take charge of their own, and their families,’ health. During Fiscal Year 2020, Scripps sponsored several health behavior modification efforts:

COMMUNITY BASED HEALTH IMPROVEMENT ACTIVITIES

Community members participated in a variety of classes, prevention lectures and support groups. Approximately 1,469 attended these programs held at the Chula Vista Well Being Center. This year’s numbers were impacted due to the COVID-19 Pandemic. In person support groups, classes, activities were ceased mid-March 2020. The majority of in-person activities have not been able to reconvene due to the large group restrictions and/or being a vulnerable population due to age and/or health condition. A few groups have been able to transition to a conference call or virtual platform to continue meeting.

PATIENT COMMUNITY SERVICES

Services are offered by Well Being Center (WBC) staff directly to patients and their family to decrease the risks of readmission, keeping patients on a healthy pathway and to increase patient continuity. Support services are referral based and generated through Scripps electronic health system, EPIC. Services and assistance are provided for 30 days post discharge and up to one year to patients with the following conditions: Acute Myocardial Infarction (AMI), Chronic Obstructive Pulmonary Disease (COPD), Chronic Heart Failure (CHF), Pneumonia, Coronary Artery Bypass Grafting (CABG), Total Knee or Hip Replacement, and COVID-19. WBC staff and Scripps Mercy Hospital Chula Vista social workers collaborate to also provide ongoing follow-up and services to identified social work patients. These patients require more support and resources (housing/homelessness, senior issues, drug/alcohol and mental health, cancer) as discharged patients do not continue to be followed by hospital social workers. This collaboration allows for high-risk patients to receive more assistance.

The goal of patients participating in this service post-discharge is to reduce hospital and emergency department 30-day and 90-day readmissions. Community patient post-discharge services include: home visits, phone calls, providing community and social service resources, and application assistance (medical insurance, SDI, housing, SNAP, Mama's Kitchen), and a referral to a local community clinic or the Scripps Advanced Care Clinic. These services are currently only available at Scripps Mercy Hospital Chula Vista. A total of 907 patient referrals have been received and all patients are followed up to one year.

- 907 patient referrals were received (30 Day and Social Work)
- 686 patients were contacted/reached (this includes 30-day follow up and Social Work referral patients)
- 154 patients – unable to reach, deceased, declined follow-up services, language barrier
- 66 patients were readmitted (source: caregiver, EPIC)

In addition, staff work with Mama's Kitchen to provide free, Medi-Cal covered medically tailored meals and medical nutrition therapy for discharged CHF patients as part of the patient community services program. The Mama's Kitchen free meal program lasts twelve weeks, with meals being delivered to the home. Staff contact patients post-discharge or at bedside, based on the generated report in EPIC. If patients qualify and are interested, a referral form is completed, signed by a Scripps clinician, and then securely emailed to Mama's Kitchen. Lastly, another vital component of the patient

community services program are those patients that are part of the CHF Emergency Department Pilot Program. This is done in collaboration with the Scripps Mercy Hospital Chula Vista Emergency Department to follow up with CHF patients who were in the emergency room but did not get admitted. This is because CHF patients are statistically more likely to readmit, therefore Well Being Center staff and Emergency Department staff take measures to reduce that likelihood. The program ensures that these patients are follow up with their provider, take medications as prescribed, and assess the need for additional resources or other services.

COMMUNITY HEALTH IMPROVEMENT PARTNERS (CHIP) AND RESIDENT LEADERSHIP ACADEMY MODEL

Scripps is a partner with CHIP and collaboratively works on a resident leadership model that has empowered 700+ citizens across the County (and beyond) to affect change in a wide range of community health areas such as public safety, access to healthy foods, and increased opportunities for physical activity.

HEALTH EDUCATION AND SUPPORT GROUPS

Scripps education and support groups are provided to San Diego County residents for a wide variety of health concerns. Topics include, fall prevention, stroke awareness, bladder and pelvic floor wellness, postpartum issues, and gynecological cancer. Due to COVID-19 all education and support groups were not held most of the year due to restricted access to the hospital.

OPIOID STEWARDSHIP PROGRAM (OSP) AND BRIDGE PROGRAM

According to the CDC, anyone who takes prescription opioids can become addicted to them, and one in four on long-term opioid therapy struggles with addiction. In San Diego, the rate of discharge from emergency departments for chronic substance use increased by 559% from 2014 to 2016, and the rates of ED discharges for acute substance use rose as well. Heavy alcohol consumption is also a problem in San Diego, with nearly 20% of all adults ages 18 and older self-reporting excessive alcohol use.

Cal Hospital Compare (CHC), a nonprofit organization that provides Californians with hospital performance ratings, named all four of Scripps Health's hospitals to its 2020 Opioid Care Honor Roll. Scripps is the only health care organization in San Diego County to be recognized on the inaugural statewide list. The 2020 Opioid Care Honor Roll recognizes 53 California hospitals for their progress and performance in promoting safe and effective opioid use, providing treatment for patients with opioid use disorder and providing access to naloxone to prevent opioid overdoses. According to state data, over 2,400 Californians died of an opioid-related overdose in 2018. CHC recognized

Scripps for taking a variety of approaches to address overuse of opioids among its patients. For patients being discharged from an emergency department visit or hospital stay, Scripps has created educational videos that it makes available for viewing and has also set opioid prescription quantity limits at discharge. In addition, some Scripps hospital emergency departments have implemented medication-assisted therapy, in which specially licensed ER physicians can administer medications as a bridge for patients with opioid use disorder until they can receive further care.

The Opioid Stewardship Program (OSP) at Scripps is combatting this national epidemic by working with physicians to decrease the number of opioids prescribed to patients and educating patients on pain management. The program has established prescribing standards for opioids, resulting in a reduction in the number of opioid pills per prescription at Scripps hospitals and outpatient centers. In addition, Scripps also has opened three drug take-back kiosks at its on-site pharmacies, offering patients year-round access to dispose of unused, unneeded or outdated medications.

[California Bridge Program](#)

Scripps has received state grants at each of its Scripps hospitals from the California Bridge Program and the Center at Sierra Health Foundation to remove barriers to identifying and treating patients with opioid use disorder and provide Medication-Assisted Treatment (MAT). Combined with other recent grants for Scripps Opioid Stewardship Program, Scripps has been awarded almost \$1 million to help prevent and treat opioid addiction. Scripps actively promotes MAT access for patients in the form of buprenorphine. The Bridge Program aims to help hospitals and health centers expand patient access to treatment for opioid use disorder, including on-the-spot medical treatment and coordinated outpatient care, while MAT aims to reduce the stigma of opioid addiction and increase provider support for medication assistance in treating addiction. All together, these state programs have awarded Scripps \$935,000. As part of the grant, Scripps now has Bridge counselors at to help patients with opioid addiction. Bridge counselors are certified through the California Consortium of Addiction Programs and Professionals (CAPP) or the California Association for Drug/Alcohol Educators. They meet patients in the emergency department and other inpatient areas of both Scripps Mercy campuses to provide rapid evidence-based medication-assisted treatment. They also connect patients directly to continued treatment in the community. The California Bridge grant also enabled Scripps to hire Substance Use Disorder Service nurses (SUDS) to facilitate treatment and entry into a community-based MAT program. Scripps deploys specialized nurses certified in addiction to see patients at their bedside and work closely with the patient's entire health care team in facilitating a

safe detox treatment while hospitalized. They identify patients who are at risk or are currently experiencing withdrawal from alcohol and other addictive substances. SUDS nurses evaluate patients who meet certain criteria and work directly with the nurse and physician to ensure the patient is adequately medicated to control symptoms of withdrawal. SUDS nurses at Scripps function in a proactive and reactive role at all Scripps hospitals and collaborate with community resources, including Family Health Centers of San Diego to provide MAT, McAlister Institute for detox beds and the Betty Ford Center for outpatient care.

[SPONDYLITIS ASSOCIATION](#)

Scripps Health provides meeting space to the Spondylitis Association of America (SAA). This is a non-profit organization founded in 1983 to address the needs of people affected by spondylarthritis. Since that time, SAA has been at the forefront of the fight to promote medical research, educate both the medical community and general public and advocate on behalf of the people they serve. Due to COVID-19 meetings were not held most of the year due to restricted access to the hospital.

[2020 LIVE WELL SAN DIEGO VIRTUAL 5K AND FITNESS CHALLENGE](#)

Scripps Health joined Live Well San Diego as a recognized partner on December 13, 2016. Live Well San Diego is a vision for a region that is Building Better Health, Living Safely and Thriving. It aligns the efforts of individuals, organizations and government to help all 3.3 million San Diego County residents live well. This year's event brought thousands of San Diegans "together" to celebrate the 10th Anniversary of the Live Well San Diego vision. The event had 69 teams work together to complete nearly 10,000,000 steps.

AGING CONCERNS

Across the United States and locally in San Diego County, the growth in the number and proportion of aging adults over the age of 65 has hit new and unprecedented levels in our history. According to the Centers for Disease Control and Prevention (CDC), two main factors – longer life spans and aging boomers – will “combine to double the population of Americans aged 65 or older during the next 25 years to about 72 million. By 2030, older adults will account for roughly 20% of the U.S. population.”

In 2019, there were 504,267 residents ages 65 and older in San Diego County representing 15.1% of the population. Between 2019 and 2024, it is anticipated that San Diego County senior population will grow by 22.4%.²⁴

Aging concerns are defined as those conditions that predominantly affect senior people who are 65 and older such as Alzheimer’s disease, Parkinson’s, dementia, falls and limited mobility. According to the National Council on Aging (www.ncoa.org), falls are the leading cause of fatal and nonfatal injuries for older Americans. Thirty percent of US adults age 65 and older have fallen at least once in the past year, including 4.2% who feel three or more times. Per the 2019 CHNA, conditions that disproportionately affect older adults were identified as a high priority health need through both community engagement events and the secondary analyses. Community engagement participants most often described aging concerns in relation to the SDOH that affect seniors such as:

- Access to fresh food
- Economic insecurity (especially food insecurity and housing unaffordability)
- Social isolation and inadequate family support (lack of companionship, anxiety, depression, hopelessness. Inadequate family support or support at home to recover, maintain one’s health, or manage their medications including ordering refills, picking up prescriptions, and taking the right dose of medications at the right time, can be challenging for older adults who do not have adequate support).
- Transportation (lack of accessible or reliable transportation options to and from appointments, to go grocery shopping, or just socialize with others)

In addition, Alzheimer’s disease was the third leading cause of death and Parkinson’s disease was the 12th leading cause of death among San Diego County residents in 2018. Dementia is a clinical syndrome of decline in memory and other thinking abilities.

²⁴ SpeedTrack Inc.; U.S. Census Bureau

It is caused by various diseases and conditions that result in damage to brain cells and lead to distinct symptom patterns and distinguishing brain abnormalities. Alzheimer's disease (AD) is a progressive brain disorder that gradually destroys a person's memory and ability to learn, reason, make judgements, communicate and carry out daily activities such as bathing and eating. An estimated 84,405 adults age 55 and older are living with some form of dementia and this number is projected to increase to more than 115,000 by 2030. Alzheimer's disease is the most expensive disease in the nation, with associated costs higher than those of both cancer and heart disease.

Researchers estimate that between informal caregiving, out-of-pocket costs, and Medicaid and Medicare expenditures, the lifetime cost for a person living with dementia is over \$320,000.²⁵

In San Diego, thousands of residents 65+ years and older visit an emergency department (ED) for fall-related injuries. The following are the hospital discharge and death rates for falls, age 65+, 2016 (rates per 100,000 population).

- Death – 60
- ED Discharge – 4,695
- Inpatient Discharge – 1,859

San Diego is now the ninth most expensive city in the U.S. (2019). [The Elder Index](#), developed by UCLA's Center for Health Policy Research, reports 41% of San Diego's seniors do not have enough income to pay for basic housing, food, healthcare, and transportation. Meanwhile, government housing programs are experiencing extreme waiting lists and intake tools fail to prioritize the elderly. These factors, combined with San Diego's housing crisis, are intensifying senior homelessness, as evidenced by San Diego's most recent [Point in Time Count](#).

In 2020, 27% of San Diego's unsheltered residents were 55 years and older, equating to more than 2,000 seniors living on the streets. Within this group of older adults:

- 88% of seniors became homeless in San Diego
- 43% are experiencing homelessness for the first time
- 54% are sleeping on the street or sidewalk
- 50% are managing a chronic condition

²⁵ The Alzheimer's Project San Diego Unites for a Cure and Care. County of San Diego HHSA, April 2019. SDHealthStatistics.com

A summary of the magnitude and prevalence of aging conditions are described below:

- The 2019 HASD&IC and Scripps CHNA identified aging concerns as one of the top health conditions among San Diego County hospitals.
- The 2019 HASD&IC and Scripps CHNA identified physical and non-physical barriers to care. Seniors accessing health care can be particularly difficult. When seniors can no longer drive, finding reliable, affordable transportation can be challenging. Seniors most often have limited income and area constantly shifting their financial priorities between paying for housing, food, or costs associated with seeking health care. High cost of medications, co-pays and deductibles were cited as creating financial barriers to accessing health care. Physical barriers to care, such as limited mobility, hearing or vision issues may also create challenges for seniors needing additional assistance. For those who do not speak English as a first language, language can also be a barrier to accessing care. After discharge from a hospital stay, seniors may have inadequate support at home to recover well and follow-up care is hard for seniors to locate and secure. These needs identified by the community overall spoke to the overwhelming need to increase awareness of community and social support programs and services for this particularly vulnerable group.
- In 2018, Alzheimer's disease was the 6th leading cause of death in the United States and 3rd leading cause of death in San Diego County.
- In 2008, there were 1,461 deaths due to Alzheimer's disease in San Diego County overall. The age-adjusted death rate due to Alzheimer's disease was 37.42 per 100,000 population
- In 2018, the top 10 leading causes of death among adults ages 65 and older in San Diego County were (in rank order): overall cancer, Alzheimer's disease, and other dementias (ADOD), coronary heart disease (CHD), stroke, chronic obstructive pulmonary disease (COPD), chronic lower respiratory diseases, overall hypertensive diseases, diabetes, unintentional injuries, Parkinson's disease and falls.
- In 2018, hospitalization rates among seniors were higher than the general population due to coronary heart disease, stroke, chronic obstructive pulmonary disease, nonfatal unintentional injuries (including falls), overall cancer and arthritis.
- The top three causes of ED utilization among San Diego County residents ages 65 and older in 2017 were unintentional injuries, falls and COPD/chronic lower respiratory diseases.

- According to the CDC, 2.8 million older adults, or more than one in four, are treated in the ED for falls every year. One in five falls causes a serious injury, such as broken bones or a head injury, and with each fall, the chance of falling again doubles. These injuries may result in serious mobility issues and difficulty with everyday tasks or living independently. The direct medical costs for fall injuries are estimated at \$31 billion annually (CDC, 2018).
- In 2017, 69.4% of the influenza hospitalizations and 75 of the 90 influenza deaths in SDC occurred among residents ages 65 and older. The age-adjusted rate of influenza death among this group was 16.2 per 100,000 population.
- Research shows that caregiving can have serious physical and mental health consequences. According to findings from the Stress in America survey described in a report titled “Valuing the Invaluable”, caregivers to older relatives report poorer health and higher stress levels than the general population. Fifty-five percent of surveyed caregivers reported feeling overwhelmed by the amount of care their family member needs (AARP Public Policy Institute, updated July 2015).
- According to AARP, more than 40 million people in the U.S. act as unpaid caregivers to people ages 65 and older. More than 10 million of these caregivers are Millennials with separate full or part-time jobs, and one in three employed Millennial caregivers earns less than \$30,000 per year (AARP, 2018).

During Fiscal Year 2020, Scripps engaged in the following programs and services to meet the needs of the aging population.

SCRIPPS ADVANCED CARE CLINIC

The program provides intensive, proactive, medical and social services to adults living with multiple chronic diseases. Understanding that diseases can impact all aspects of a person’s life, the program treats not just medical issues, but also the psychosocial, economic and spiritual aspects of care. The Advanced Care Clinic interdisciplinary, patient centered team helps optimize patient health through an evidence-based extensivist clinic model that assist with care coordination and patient advocacy across health care and home settings. To date 149 patients have been served, 45% reduction in hospitalizations, 72% reduction in 30-day readmissions and 49% reduction in ED visit rate. In addition, the program coordinates non-clinical issues. Table 4.2 displays various types of psychosocial services referrals.

TABLE 4.2 PSYCHOSOCIAL SERVICES FOR TIME PERIOD (AUGUST 2019–NOVEMBER 2020)

Services	Number of patients
Food Assistance	33 patients referred
Shelter	15 patients (7 patients in progress)
Outpatient Psychiatry/Psych Resources	10 patients
Caregiver Assistance	34 patients
Substance Use Rehab	1 patient
PACE	3 patients
Job Assistance	1 patient
Assistance with Volunteer Opportunities	2 patients
Welfare Check/APS Report/Ombudsman	16 patients
Assistance with Funeral Planning	1 patient
Connection with SDPD/PERT	1 patient
Public Guardian	1 patient
Assistance with Insurance/Funding/Bills	9 patients
Transportations Services	37 patients

THE ALZHEIMER’S PROJECT – SAN DIEGO UNITES FOR A CURE AND CARE

The Alzheimer’s Project is a countywide initiative aimed at accelerating the search for a cure and helping the estimated 60,000 San Diegans with the disease, along with their caregivers. Participants began meeting in early 2016 to craft a regional roadmap to address the disease, focusing on cure, care, clinical, and public awareness and education initiatives. The Board of Supervisors approved the roadmap in December 2014 and later voted in support of an implementation timetable. Dr. Michael Lobatz from Scripps Health is a leading participant of this initiative as a co-chairperson of the Clinical Round Table and is a member of the Steering Committee.

STANDING STRONG FOR FALL PREVENTION

According to the Centers for Disease Control and Prevention (CDC), more than one third of adults 65 and older fall each year in the United States and 20 to 30% of people who fall suffer moderate to severe injuries. Scripps held a free interactive event on fall prevention September 2019 and January 2020. Participants learned about improving balance and flexibility and strength. It also included balance and fall risk screening assessment by Scripps physical therapy department occupational therapy specialist.

VIRTUAL STANDING STRONG FALL PREVENTION WEBINAR

As part of National Fall Prevention Awareness week in September 2020, Scripps partnered with the County of San Diego Health and Human Services and the San Diego Fall Prevention Task Force on free, virtual events to learn more about what individuals can do to prevent falls. Falls are the leading cause of injury related emergency

department visits for older adults. Scripps hosted a two-hour webinar with a panel of Scripps experts to provide safety tips, education, and exercises. The Scripps event served as the official kick-off event for Fall Prevention Awareness week with 20 presentations delivered virtually. <http://www.sandiegofallprevention.org/>

The following were some of the topics provided:

- Fall Prevention 101
- Keeping Your Daily Balance
- Understanding and Preventing Falls from the perspective of first responders
- Kitchen Safety in a COVID-19 World
- Fall Prevention Screening and Getting Up Safely After a Fall

FALL PREVENTION AND HOME SAFETY WORKSHOPS

Many older adults experience concerns about falling and restrict their activities. Scripps Social Workers and nurses lecture on ways to reduce fall risk, improve safety awareness and utilize available resources to promote independence and overall safety. Balance classes are designed to help building balance, posture and coordination through strengthening and balance exercises. This important aspect to healthy living for seniors provides education on preventing falls through exercise and being proactive through safety measures in the home. Scripps Physical Therapy department and Physical Therapy school volunteers provide fall risk assessments. Seniors may attend from all over the San Diego county region. Due to COVID-19 meetings were not held most of the year due to restricted access to the hospital.

A MATTER OF BALANCE: MANAGING CONCERNS ABOUT FALLS

Scripps educates older adults on preventing falls through exercise and being proactive through safety measures in the home. An 8-week program and lecture series provide practical strategies to manage falls, improve safety awareness and utilize available resources to promote independence and overall safety. Scripps was chosen as a pilot site to test a new virtual edition of the A Matter of Balance program with results being used to launch the new virtual evidence-based version in January 2021. Due to COVID-19 meetings were not held most of the year due to restricted access to the hospital.

SENIOR HEALTH AND WELL-BEING PROGRAMS

Each month a variety of senior programs are held in partnership with local senior centers, churches, and senior housing. The following programs are conducted as part of Scripps Mercy Hospital Chula Vista San Diego Border Area Health Education Center and Scripps Family Medicine Residency Program. These senior health chats are

designed to provide health education to the older adult community. A total of 104 seniors have participated in these monthly sessions. These presentations include a variety of health and age-related topics that include: Heart Health, Understanding Osteoporosis, Parkinson's, Cold vs. Flu and a variety of prevention and healthy lifestyle topics. These presentations are facilitated by various health care professions and residents. Topics are all chosen by the seniors themselves to meet their local needs. Also, the health chats provide an interchange between the community members and our medical residents and other health care professionals to foster healthy lifestyles and health prevention. The program is conducted in collaboration with Norman Park Center, Congregational Towers Senior Living and St. Charles Nutrition Center. Family Medicine Residents rotate through these programs to learn more about geriatric medicine, health and wellness and overall public health and community training. No classes were held after March due to COVID-19.

PARKINSON'S LSVT (LEE SILVERMAN TRAINING) BIG EXERCISE:

Scripps provides a maintenance class for those who have completed the LSVT BIG Exercise protocol. This class is taught by a physical therapist and is designed for Parkinson's patients to improve strength and mobility for a healthier life. Due to COVID-19 meetings were not held most of the year due to restricted access to the hospital.

OBESITY, WEIGHT STATUS, NUTRITION, ACTIVITY & FITNESS

Obesity is an important health need due to its high prevalence in the U.S. and San Diego. Although it is not a leading cause of death, it is a significant contributor to the development of other chronic conditions.

A summary of the magnitude and prevalence of Obesity, Weight Status, Nutrition and Activity & Fitness is described below:

- The Scripps 2019 CHNA continued to identify obesity as a priority health issue affecting members of the communities served by Scripps.
- According to 2017 CHIS data, the self-reported obesity rate for adults ages 18 and older in San Diego County was 22.5 percent.
- According to a new report released in 2019 by the San Diego Childhood Obesity Initiative, 34%, or nearly 1 out of every 3 children in San Diego County's schools were overweight or obese. These rates vary by grade, with 5th graders having the highest rates of overweight and obese children (36%) compared to 7th graders (34%) and 9th graders (33%). In examining trends across longer periods of time, overweight and obesity prevalence among children in San Diego County appears to be leveling off and even declining slightly. For example, a 2005 UCLA study estimated 36% of children in San Diego County were overweight or obese, with that number decreasing to 35% in 2010. Based on these data, childhood overweight and obesity prevalence in 2018 has decreased by two percentage points since 2005. This small decrease from 36% to 34%, however, would represent approximately 8,600 fewer students across public school districts who were overweight and obese in 2017–2018. More information can be found at, www.sdcoi.org.

Obesity is a medical condition in which excess body fat has accumulated to the extent that it may have an adverse effect on health. Overweight and obesity ranges are determined using weight and height to calculate a number known as "body mass index" (BMI).

For adults:

- BMI between 25 and 29.9 is considered overweight.
- BMI of 30 or higher is considered obese.

For children and adolescents (ages 2-19):

- BMI at or above the 85th percentile and lower than the 95th percentile for children of the same age and sex is considered overweight
- BMI at or above the 95th percentile for children of the same age and sex is considered obese.

- In 2017, between 25 and 30 percent of adults in California self-reported being obese. Obesity levels decreased as education levels increased, indicating a need for health education as a tool for reducing obesity rates (CDC, 2017).
- Obesity has been linked to environmental factors, such as accessibility and affordability of fresh foods, park availability, social cohesion and neighborhood safety (UCLA Center for Health Policy Research, 2015).
- According to data from the 2016 National Study of Children’s Health, nearly one-third of children in California are obese. California has one of the highest childhood obesity rates in Western states (The State of Obesity, 2018).
- According to the CDC, some of the leading causes of preventable death include obesity-related conditions, such as heart disease, stroke, Type 2 diabetes and certain types of cancer.
- Obesity is largely categorized as a secondary diagnosis in hospital discharge data. When examining inpatient hospital discharge data with obesity as a secondary diagnosis, it was found that the most common primary diagnosis of those patients was nonspecific chest pain in ages 25–64, abnormal pain for those ages 15–24, and those over 65 years their primary diagnosis was osteoarthritis, septicemia followed by congestive heart failure.
- Research has shown that as weight increases to reach the levels of “overweight” and “obesity” the risks for the following conditions also increases:
 - Coronary heart disease
 - Type 2 diabetes
 - Cancers (endometrial, breast and colon)
 - Hypertension (high blood pressure)
 - Stroke
 - Liver and gallbladder disease
 - Sleep apnea and respiratory problems
 - Osteoarthritis

Obesity is addressed through general nutrition and exercise education and resources provided at Scripps as well as programs that address a healthy lifestyle as part of care for heart disease, cancer, diabetes and other health issues influenced by healthy weight and exercise. During Fiscal Year 2020, Scripps engaged in the following obesity prevention and treatment activities:

SAN DIEGO CHILDHOOD OBESITY INITIATIVE

The San Diego County Childhood Obesity Initiative (COI) was established in 2006 and is a private public partnership with the mission of reducing and preventing childhood obesity through policy, systems, and environment change. Core funding for The Initiative is provided by the County of San Diego, First 5 Commission of San Diego County, The California Endowment, and Kaiser-Permanente. Scripps is a strong partner with CHIP and the outcomes of the initiative have shown an overall reduction in childhood overweight and obesity, from 36% in 2005 to 34% in 2015 (many areas have seen increases).

A State of Childhood Obesity Supplemental report released by the San Diego County Childhood Obesity Initiative released in 2019, www.sdcoi.org, finds that despite the potential improvements in San Diego County, disparities among children who are overweight or obese persist, particularly among diverse racial, ethnic, and economic groups. For example, in 2018, 43% of Hispanic students were overweight or obese. Compared to White students with an overweight and obesity prevalence of 24%, Hispanic students were nearly twice as likely to be overweight or obese. These findings are relevant as nearly half or 48% of all students tested in San Diego County identified as Hispanic or Latino, compared to 29% of students identifying as White for the 2017–2018 school year. Students who identified as American Indian or Alaskan Native, or Native Hawaiian or Pacific Islander, had overweight and obesity rates of 44% and 49%, respectively. For students identifying as Black or African American, the story was similar with 37% being overweight or obese. Only students identifying as Asian have rates lower than White children—22% compared to 24%.

During the 2017–2018 school year, more than half, or 53% of San Diego County students in both public and charter schools, were identified as socioeconomically disadvantaged. Socioeconomically disadvantaged is defined as students who are: migrants, in foster care or homeless at any time during the academic year, eligible or had direct certification for the Free or Reduced-Priced Meal (FRPM) program or are in a family where both parents did not receive a high school diploma. Among these students, 42% were overweight or obese. Compared to their non-economically disadvantaged peers, socioeconomically disadvantaged students were almost twice as likely to be overweight or obese (42% vs 24%). Overweight and obesity prevalence among these students has held steady at 42% since 2014; however, alarming disparities continue to grow across racial and ethnic groups. American Indian or Alaskan Native students, for example, had a 10% increase in overweight and obesity prevalence between 2014 and

2018, and Native Hawaiian or Pacific Islander students had an even greater increase — 12%—during this period.

DIABETES PREVENTION PROGRAM (DPP)

A large clinical trial concluded that people with prediabetes could reduce their likelihood of developing diabetes by 58–70 percent if they lost just 5–7 percent of their body weight. The Diabetes Prevention Program is a scientifically validated lifestyle intervention-based model. The Centers for Disease Control (CDC) and the National Institutes of Health (NIH) promote widespread adoption of the DPP due to its demonstrated effectiveness. Scripps is recognized by the Centers for Disease Control as a national DPP provider and rolled out the program to patients and community members in 2016.

Scripps aims to decrease the incidence of Type 2 diabetes by managing a major diabetes risk factor, obesity in the underserved, ethnically diverse populations by testing the effectiveness of lifestyle curriculum. The program uses trained lifestyle coaches and a standardized curriculum; participants meet in groups with a coach for 16 weekly sessions and six to eight bimonthly follow-up sessions.

Participants must have prediabetes and be overweight to enroll. No physician referral is required, although many physicians do refer their patients to this valuable resource. Orientation sessions are held in Spanish and English throughout the county.

HEALTHY LIVING PROGRAM

Diabetes, heart disease, cancer and respiratory disease are the four most prevalent serious chronic diseases in California. These diseases cause 50 percent of all deaths in San Diego and throughout the U.S., and many people have more than one of these conditions.

Because lifestyle can play a major role in preventing these chronic illnesses, Scripps introduced Healthy Living, a free, interactive education program to help the San Diego community learn about and adopt practical ways to improve three behaviors: smoking, poor diet and physical inactivity that contribute to these four diseases.

Participants learn how to make healthy food choices using low costs options, make physical activity part of their daily life and learn how to stay motivated and maintain healthy habits. Scripps implements a series of three free sessions that encourage participants to identify and adopt practical ways to improve their health habits. Sessions are offered throughout San Diego County in English and Spanish, with special emphasis on the Latino and underserved communities. Sessions include health

screenings, healthy cooking tips, and mindful eating practice sessions. Participants also receive a prediabetes screening; those who score high are then referred to the Scripps Diabetes Prevention Program. Classes were cancelled in quarter 3 and 4 due to COVID-19.

PROMISE NEIGHBORHOOD INITIATIVE

Scripps also addresses childhood obesity at the high school level in San Diego's South Bay communities through its partnership with the Promise Neighborhood initiative, which implements activities related to the national 5210 campaign. The message is to promote a healthy lifestyle (**5** Servings of Fruits and Vegetables, **2** Hour Screen Time Limit, **1** Hour of Physical Activity and **0** Sugary Drinks) per day. This four-session series is designed to increase knowledge and behaviors regarding a healthy lifestyle. The series includes hands-on activities and demonstrations. The foundation of this project began in 2013 with a partnership with the Promise Neighborhood Initiative and Castle Park Elementary School to increase education and awareness about healthy lifestyles and to help the students pass their yearly physical education requirements.

Scripps has continued to enhance and develop the series. During FY20 there was a total of 275 participants from Mar Vista, Chula Vista and Southwest High Schools and students from Health Careers Occupational Program (HCOP) Camp Scripps. As a result of activities, lesson plans and advocacy for healthy living, the amount of physical activity and consumption of fruits and vegetables by the youth has increased. Student responses via the 5210-assessment survey showed pre-test knowledge was 62.5% and post-test knowledge improvement rate of 88.5% after participating in the 5210 sessions. Due to COVID-19 some of these were held virtually.

LA MAESTRA FAMILY CLINIC, INC

La Maestra Family Clinic, Inc. joined the City Heights Wellness Center (CHWC) collaborative partnership with Scripps Mercy Hospital and Rady Children's Hospital as the lease holder of the Wellness Center starting September 1, 2016.

Since its inception in 2002, the City Heights Wellness Center has been a dynamic, community-based program developed by Scripps Mercy Hospital and Rady Children's Hospital, working with residents to improve their lifestyle behaviors and self-sufficiency skills. Multiple not-for-profit and governmental organizations, philanthropic foundations and grassroots groups have joined the effort conducting health promotion and educational activities for community residents.

A unique aspect of the City Heights Wellness Center is the Teaching Kitchen that is known throughout the community as a place where residents and providers come together to cook, discover and communicate in a safe and trusted environment.

La Maestra Family Clinic brings a new perspective to the partnership as a community health center and primary care provider serving the culturally diverse populations within the City Heights community. La Maestra is committed to maintaining the collaborative nature of the partnership and continues to work with current CHWC agencies as well as look for opportunities to expand health promotion services.

The Scripps Mercy Supplemental Nutrition Program for Women, Infants and Children (WIC), collocated in the Wellness Center, continues to provide WIC services as one of the programs within the City Heights Wellness Center.

FOOD ADDICTS ANONYMOUS

Scripps Health provides Food Addicts Anonymous meeting space to meet. Food Addicts Anonymous is an international fellowship of men and women who have experienced difficulties in life because of the way they eat. Due to COVID-19 meetings were not held most of the year due to restricted access to the hospital.

TAKE OFF POUNDS SENSIBLY (TOPS) MEETING

Scripps Health provides meeting space to Take Off Pounds Sensibly (TOPS). TOPS (Take Off Pounds Sensibly) is the short name for TOPS Club, Inc., the original non-profit, non-commercial network of weight-loss support groups and wellness education organization. Due to COVID-19 meetings were not held most of the year due to restricted access to the hospital. A total of 248 people participated in TOPS prior to the pandemic.

OVEREATERS ANONYMOUS – SPANISH

Scripps Health provides meeting space for Overeaters Anonymous. This is a support group that provides dietary education for individuals who desire to lose weight. The groups are held in Spanish and 50 people attended. The group stopped meeting in January 2020 due to low attendance over the past year. A new group started meeting in San Ysidro which is closer to where the attendees reside.

GREATER LA JOLLA MEALS ON WHEELS

Greater La Jolla Meals on Wheels is a non-profit senior service organization. It provides nutritious meals to seniors, the homebound and the disabled residing in the communities of La Jolla and University City. Scripps La Jolla provides office space to the La Jolla chapter of Meals on Wheels. This allows Meals on Wheels to conduct

business and interact with volunteers from a central, established location. Due to COVID-19 meetings were not held most of the year due to restricted access to the hospital.

FOOD HANDLERS TRAINING COURSE

Scripps Health provides the use of a classroom to Full Spectrum Nutrition Services to provide a three-hour course in Spanish which provides certification for food handlers and meets requirements of the San Diego County Food Handlers Ordinance. Due to COVID-19 the courses were not held after March due to restricted access to the hospital. A total of 40 people was able to receive certification prior to the pandemic.

MATERNAL CHILD HEALTH & HIGH-RISK PREGNANCY

Mothers, infants and children make up a large segment of the U.S. population and their well-being is a health predictor for the next generation. There is tremendous focus on maternal illness and death, and infant health and survival, including infant mortality rates, perinatal and other infant deaths. According to a New York Times article, “Huge Racial Disparities Found in Deaths Linked to Pregnancy”, May 2019, African American, Native American and Alaska Native women are about three times more likely to die from causes related to pregnancy, compared to white women in the United States.

Maternal and infant health issues include:

- Alcohol, tobacco and illegal substances during pregnancy, which are major risk factors for low birth weight and other poor outcomes.
- Very low birth weight associated with preterm birth, spontaneous abortion, low pre-pregnancy weight and smoking.
- Infant death rates are highest among infants born to young teenagers and mothers 44 years and older.

Being pregnant, or trying to become pregnant, is only a small portion of a woman’s life. Unintended pregnancy, either mistimed or unwanted at the time of conception, accounts for an estimated 49 percent of pregnancies in the U.S. These pregnancies are associated with increased morbidity, as well as behaviors linked to adverse health. Women who can plan the number and timing of their children experience improved health, fewer unplanned pregnancies and births, and lower abortion rates.

HIGH RISK PREGNANCY

High Risk Pregnancy can be the result of a medical condition present before pregnancy or a medical condition that develops during pregnancy for either mom or baby and causes the pregnancy to become high risk. A high-risk pregnancy can pose problems before, during or after delivery and might require special monitoring throughout the pregnancy.

Risk factors:

- Advanced maternal age: increased risk for mother’s 35 years and older.
- Lifestyle choices: smoking, alcohol consumption, use of illegal drugs.
- Medical history: prior high-risk pregnancies or deliveries, fetal genetic conditions, family history of genetic conditions.
- Underlying conditions: diabetes, high blood pressure and epilepsy.
- Multiple pregnancy.
- Obesity during pregnancy.

A summary of the magnitude and prevalence of Maternal and Child Health & High-Risk Pregnancies are described below:

- In 2017, there were 40,889 live births in San Diego County (SDC) overall. Source: County of San Diego, Health and Human Services Agency (HHS), Public Health Services, Maternal, Child, and Family Health. The 2017 infant mortality rate was 2.3 infant deaths per 1,000 live births in the north inland region, 3.0 in the north coastal region, 3.3 in the east region, 3.6 in SDC overall, 4.0 in the central region, 4.3 in the north central region, and 4.7 in the south region.
- In 2017, 149 infants in SDC died before their first birthday. Infant mortality was more common among male infants (84 deaths) than female infants (64 deaths). African American/black infants had the highest mortality rate (6.9 infant deaths per 1,000 live births) when compared to infants of all other races and ethnicities. Hispanic infants had the second highest mortality rate of 4.7 deaths per 1,000 live births.¹⁰⁰ In addition, 3,423 preterm births occurred in SDC during 2017. 100,101 Compared to all other races and ethnicities, Hispanic mothers had the highest total number of births (16,593), of which 8.0% were preterm. Although black mothers had fewer total births (1,741), they experienced the highest rate of preterm births among all racial or ethnic groups (11.3%). Similarly, although women ages 25 to 39 had the highest total number of births among all age groups, mothers ages 40 and older were more likely to give birth preterm (15.2% preterm births among mothers ages 40 and older compared to 8.2% among mothers ages 25 to 39).²⁶
- In 2017, all SDC regions met the HP2020 national targets for prenatal care, preterm births, low birth weight (LBW) infants, very low birth weight (VLBW) infants and infant mortality.²⁷ See Table 4.3 for a summary of maternal and infant health indicators in San Diego County in 2017 and Table 4.4 for a summary of maternal and infant health indicators by region.

²⁶ County of San Diego Health and Human Services Agency, Public Health Services, Community Health Statistics Unit (2019), Maternal, Child, and Family Health Services Statistics, 2011-2017.

²⁷ The U.S. Department of Health and Human Services' HP2020 initiative represents the nation's prevention agenda for the second decade of the 21st century. HP2020 has four overarching goals: to attain high quality, longer lives free of preventable disease, disability, injury, and premature death, to achieve health equity, eliminate disparities, and improve the health of all groups, to create social and physical environments that promote good health for all, and to promote quality of life, healthy development, and healthy behaviors across all life stages.

TABLE 4.3. MATERNAL AND INFANT HEALTH INDICATORS IN SAN DIEGO COUNTY, 2017

Maternal and Infant Health Indicator	Rate	HP2020 Target
Early Prenatal Care ²⁸	85.6%	77.9%
Preterm Births ²⁹	8.4%	9.4%
VLBW Infants ³⁰	1.0%	1.4%
LBW Infants ³¹	6.5%	7.8%
Infant Mortality ³²	3.6%	6.0%

Source: County of San Diego Health and Human Services Agency (HHSA), Public Health Services, Community Health Statistics Unit (2019), Maternal, Child, and Family Health Services (MCFHS) Statistics 2011-2017.

TABLE 4.4. MATERNAL AND INFANT HEALTH INDICATORS BY REGION IN SAN DIEGO COUNTY, 2017

Indicator	Central	East	North Central	North Coastal	North Inland	South
Prenatal Care	81.2%	82.5%	89.9%	86.9%	87.2%	85.6%
Preterm Births	8.6%	8.6%	8.7%	7.4%	7.9%	9.0%
VLBW Infants	1.3%	1.1%	1.1%	0.8%	0.9%	1.1%
LBW Infants	6.9%	6.1%	6.8%	5.9%	6.4%	6.8%
Infant Mortality	4.0%	3.3%	4.3%	3.0%	2.3%	4.7%

Source: County of San Diego HHSA, Public Health Services, MCFHS Statistics

²⁸ Early prenatal care is defined as care beginning during the first trimester of pregnancy. This does not account for frequency of care.

²⁹ Preterm birth refers to births prior to 37 completed weeks of gestation.

³⁰ Very low birth weight refers to birth weight less than 1,500 grams (approximately 3 pounds, 5 ounces).

³¹ Low birth weight refers to birth weight less than 2,500 grams (approximately 5 pounds, 8 ounces).

³² Infant mortality refers to the number of deaths of infants under one year of age per 1,000 live births.

Scripps Health continued to enhance prenatal education for low income women in San Diego County in Fiscal Year 2020. The following are some examples:

COMMUNITY BENEFIT SERVICES

- Offered more than 1,200 maternal child health classes throughout San Diego County to enhance parenting skills. Low income women in San Diego who were eligible attended classes at no charge or on a sliding fee schedule.
- Maintained existing prenatal education services in all regions of the county, ensuring that programs continued to demonstrate a satisfaction rating above 90 percent.
- Provided and supported weekly breastfeeding support groups at six locations throughout San Diego County, including three with bilingual services.
- Offered maternal child health classes throughout the community, such as Getting Ready for the Baby and Grand Parenting Today.
- Offered the Dogs and Babies programs quarterly, with more than 40 attendees.
- Offered classes in pelvic floor and postpartum changes for new mothers throughout the community.

FIRST 5 PARENTING EDUCATION

Parenting classes are offered at Scripps Mercy Hospital Chula Vista Well-Being Center for parents with infants, toddlers and preschoolers. A wide variety of topics are covered including issues related to health, learning/development, family/safety, advocacy as well as parenting tips. Developmental assessments are conducted by Rady Children's Hospital. More than 300 services were received for first time mothers including: home visits, referrals received, data entry, follow up phone calls, parenting classes and other support services. Due to COVID -19 these classes were offered virtually and via conference call. A total of 188 unduplicated parents participated in parenting education workshop series and 120 sessions were provided. This partnership with First Five and South Bay Community Services ended June 2020.

FIRST FIVE HOME VISITS

In collaboration with the medical residents, newborn home visits are provided to first-time moms who have delivered at Scripps Mercy Hospital Chula Vista. The visit includes a comprehensive assessment covering social, health, and environmental issues. Further follow up is provided to assess critical health behaviors identified. Follow up and support services are provided for six months. Home visits ceased as of March 2020 due to COVID-19.

BREAST FEEDING SUPPORT GROUP

An experienced breastfeeding instructor leads the breastfeeding support group at the Well Being Center with mothers who would like breastfeeding support. They interact with other mothers and are led by the instructor. Babies are weighed at the beginning and end of group to assess how much milk they are getting. Due to COVID-19 this group continued to meet by conference call since March 2020.

CENTERING PREGNANCY, SCRIPPS FAMILY MEDICINE RESIDENCY

Raising healthy families and caring for the next generation of San Diegans before they're born help create a healthier community for years to come. The Scripps Family Medicine Program at Scripps Mercy Hospital Chula Vista is providing access, education and clinical services to nearly 75 pregnant women in south San Diego County. The goal of the program, "Improving Perinatal Care for Underserved Latina Women - Healthy Women, Healthy Babies", is to provide access to perinatal care for underserved Latina women to improve birth outcomes. The program applies the principles of the Center Health Care Institute and focuses on changing the way patients experience their care through assessment, education and group support. Centering Pregnancy is the institute's model devoted specifically to improving maternal and child health and has been shown to result in increased prenatal visits, greater levels of breastfeeding and stronger relationships between mothers and their healthcare providers before, during and after pregnancy. Women who gave birth reported an enhanced prenatal experience, gained less weight throughout their pregnancy and showed improved healthcare knowledge. Services include home visits, referrals, data entry, follow up phone calls, and other support services. Home visiting is offered together with Family Medicine Residency and parenting education. Since COVID-19, this program has been offered via telemedicine.

MATERNAL CHILD HEALTH NURSING STUDENTS

Scripps Perinatal Education program supports local nursing students with the opportunity to observe prenatal educational classes. This critical aspect of the nursing education allows the hours and information to meet their clinical rotation requirements in maternal child health. Due to COVID-19 the clinical rotations were not held most of the year due to restricted access to the hospital.

SCRIPPS MERCY'S SUPPLEMENTAL NUTRITION PROGRAM FOR WOMEN, INFANTS AND CHILDREN (WIC)

The Special Supplement Nutrition Program for Women, Infants and Children (WIC) was established as a permanent program in 1974 to safeguard the health of low-income women, infants and children up to age 5 who are at nutritional risk. Scripps Mercy Hospital is one of five regional organizations that administer the state funded WIC program. The program serves six locations conveniently situated near community clinics and/or hospitals in the central San Diego area. WIC targets low income pregnant and postpartum women, infants and children (ages 0 to 5 years). Scripps Mercy WIC serves approximately 6,500 women and children annually, 44 percent in the City Heights community.

In City Heights clients are 91 percent Hispanic and include pregnant and postpartum women (24%), infants (20%) and children (56%). In Fiscal Year 2020, the program provided nutrition services, counseling and food vouchers for 65,655 women and children in South and Central San Diego.

The Scripps Mercy WIC program plays a key role in maternity care by reaching low income women to promote prenatal care, good nutrition and breastfeeding during pregnancy and offer lactation support (one on one and group), as well as breast pumps, pads, and other supplies during the postpartum period.

MIRACLE BABIES

Scripps Health partnered with Miracle Babies on their virtual 5K Walk/Run. The mission of Miracle Babies is to unify families with their sick newborns through financial assistance and supportive services to reduce pregnancy complications through prevention, education and research.

MIRACLE BABIES DIAPER DISTRIBUTION

The Miracle Babies program hosted several diaper distributions at Campus Point. Miracle Babies was started by Dr. Sean Daneshmand, Scripps Clinic medical director of maternal and fetal medicine, to provide financial and supportive services to parents with hospitalized newborns receiving treatment in neonatal intensive care units (NICU). The distribution served more than 700 families.

UNINTENTIONAL INJURY AND VIOLENCE

According to Healthy People 2020, “unintentional injuries and violence-related injuries can be caused by a number of events, such as motor vehicle crashes and physical assault can occur virtually anywhere.” Unintentional injury and violence were identified as a priority health need in the community engagement process of the 2019 CHNA. Exposure to violence and neighborhood safety were cited as priority health needs for San Diegans. Neighborhood safety was discussed as influencing residents’ ability to maintain good health, while exposure to violence was described as traumatic and impactful on mental health.

In 2018, accidents (unintentional injuries) were the fifth leading cause of death for San Diego County overall. The deaths associated with unintentional injuries are significant; yet represent only a small part of a much larger public health problem. Hospitalization data is a better measure of the injury problem than the death data alone. Unintentional injuries, motor vehicle accidents, falls, pedestrian related, firearms, fire/burns, drowning, explosion, poisoning (including drugs and alcohol, gas, cleaners and caustic substances) choking/suffocation, cut/pierce, exposure to electric current/radiation/fire/smoke, natural disasters and injuries at work, are one of the leading causes of death for San Diego County residents of all ages, regardless of gender, race or region.

Most events resulting in injury, disability or death are predictable and preventable. There are many risk factors for unintentional injury and violence, including individual behaviors and choices, such as alcohol use or risk taking; the physical environment both at home and in the community; access to health services and systems created for injury related care; the social environment, including individual social experiences.

A summary of the magnitude and prevalence of unintentional injury and violence is described below:

Drugs, alcohol, vehicles, falls, guns and suicide continue to be leading causes of deaths investigated by the San Diego County Medical Examiner’s Office. Under law, the County Medical Examiner’s Office investigates all “unnatural” deaths that occur by accident, homicide, or suicide due to traumas or overdose, or undiagnosed or sudden unexpected natural causes. In 2018, there were 1,250 deaths due to accidents/unintentional injuries in San Diego County overall. The age-adjusted death rate due to diabetes was 35.20 per 100,000 population.

San Diego County's Medical Examiner's Office release both mid-year statistics comparing the first six months of 2020 to 2019 in its 2019 annual report. Looking at mid-year figures, the department investigated 1,751 deaths through June this year compared to 1,674 in the same months last year, a 5% increase. The Medical Examiner's Office investigates deaths that occur by accident, homicide, or suicide due to trauma or overdose, or undiagnosed or sudden, unexpected natural causes. In cases where a person dies a natural death and is under a physician's care, that physician will certify the death and the person does not then go to the Medical Examiner for further investigation.

- Despite it being a pandemic year, it should be noted that relatively few COVID-19 deaths are represented in the mid-year statistics. Deaths resulting from contagious diseases that pose a risk to the public such as COVID-19 are reportable to the medical examiner but are considered natural deaths and are therefore not always investigated further by the department if the person was already under the care of a physician. The deaths due to COVID-19 that the medical examiner sees are generally cases where the person had not sought any treatment for their illness, or the death was unexpected. Through June the department tested 104 decedents who had potential symptoms, signs, or risk factors for COVID-19 and seven came back positive for the virus, a 6.7 positivity rate.
- In the mid-year snapshot, accidental deaths make up the largest cause of cases, with 857 of 1,751 deaths from January through June. This is an increase of 2% compared to 838 in the first six months of 2019. The category covers any kind of death from accidental injury or intoxication, including injuries from falls or car crashes, accidental drug overdoses, injuries from fires or environmental exposure such as hypothermia or hyperthermia, drowning, and other unintentional injuries.
- Within the accidental death category, unintentional overdose deaths due to illicit drugs, prescription medication and alcohol toxicity increased by 21% from 320 deaths in the first half of 2019 to 387 the first six months of this year. Of those accidental overdoses, fentanyl-caused deaths increased by 126% comparing those same six months where there were 69 deaths in 2019 and 156 cases for the first six months of this year. Most often, overdose deaths from fentanyl are traced to counterfeit pills that resemble oxycodone or alprazolam, [2020 San Diego County Prescription Drug Abuse Task Force](#).

- There was also a decrease of 5% in number of suicides, 198 this year compared to 209 in the same six months last year. Firearms were the leading method of death in 76 of the 198 deaths by suicide this year.
- Homicides increased by 14% for the first half of the year, 59 compared to last year's 52. In this category, firearms were again the leading method of deaths, 32 of the 59 deaths.
- For all of 2019, accidental deaths overall comprised 50% of all department investigations. Within that category, unintentional overdoses from drugs—both prescription or illegal—and alcohol were, at 39%, the leading cause of death. Accidental falls followed at 33% and then traffic-related fatalities at 19% were next as outlined in the department's annual 2019 year-end report.
- Deaths from falls increased by 12% with 545 cases in 2019 compared to 488 in 2018. Blunt head trauma and hip/femur fracture were the leading cause of death in falls. Traffic-related deaths decreased by 5% from 2018 which had 316 deaths while 2019 saw 301 deaths.

The HASD&IC 2019 CHNA continued to identify unintentional injury and violence as one of the top priority health conditions among San Diego County hospitals. Scripps Health continued to address unintentional injury and violence.

The following are some examples:

[CAR SEAT PROGRAM](#)

Scripps Memorial Hospital La Jolla Emergency Department provides car seats to patients who have been in an automobile accident and their child's car seat has been rendered unsafe to use. The service provides the ease of mind for the patient in their ability to transport their child home safely. Due to COVID-19 this program was put on hold due to restricted access to the hospital.

[SAN DIEGO BRAIN INJURY FOUNDATION](#)

Scripps Health provides meeting space to the San Diego Brain Injury Foundation. The organization provides quality of life improvements for brain injury survivors and support to family members. Due to COVID-19 meetings were not held most of the year due to restricted access to the hospital.

[BRAINMASTERS](#)

BrainMasters is a supportive communication group for adults coping with an acquired brain injury. It is offered as a community benefit through the Rehabilitation Center at Scripps Memorial Hospital Encinitas. The main goal of BrainMasters is to help brain

injury survivors to build confidence by practicing thinking on their feet. This helps to alleviate challenges with communication and social isolation that so many brain injury survivors experience. Due to COVID-19 meetings were not held most of the year due to restricted access to the hospital.

EVERY 15 MINUTES

Alcohol can be attributed to more than 100,000 deaths in the U.S. annually, including 41% of all traffic fatalities. Every 15 Minutes program is a two-day immersion experience for teens on the realistic consequences of drinking and driving, which involves the schools, law enforcement, courts, emergency service providers, and the mortuary. The “injured” students are taken to Scripps Mercy Trauma Center. This program is sponsored jointly by local high schools, county police and sheriff’s departments, ambulance services, and emergency departments. Due to COVID-19 classes were not held most of the year due to restricted access to the hospital.

BEACH AREA COMMUNITY COURT PROGRAM

The program is an educational program for first time offenders for quality of life crimes. This is a collaboration with the San Diego Police Department, Parks and Recreation, District Attorney’s Office and Discover Pacific Beach. Education is provided to the participants regarding these quality of life crimes and their effects on the community, the effects of smoking and alcohol consumption and the rules and regulations for the beach community. Due to COVID-19 meetings were not held most of the year due to restricted access to the hospital.

SAN DIEGO COUNTY LIFEGUARD EDUCATION CONFERENCE

In Fiscal Year 2020 Scripps Memorial Hospital La Jolla Trauma department hosted a virtual San Diego County Lifeguard Education Conference. Scripps partnered with California State Parks to host and moderate the virtual webinar. More than 100 individuals signed in for the webinar. Information was shared on several topics critical for lifeguards, including downing resuscitation: *snorkeler drowning and shallow water blackout*, human factors in lifeguarding: *reducing distractions and improving surveillance*, marine mammal update: *sharks and sting rays* and skin cancer prevention. The virtual lifeguard education conference has now been viewed over 1,000 times. The trauma department plans to continue this partnership with the county lifeguards to provide education and help them further identify opportunities for community outreach and injury prevention.

SAN DIEGO HUMAN TRAFFICKING TASK FORCE AND PROJECT LIFE

Scripps has partnered with the San Diego Human Trafficking Task Force and Project Life to offer “soft rooms” at all Scripps hospital facilities except Scripps Green Hospital. These soft rooms will be available to Project Life on a moment’s notice to serve as a safe, confidential environment for law enforcement to interview victims of human trafficking and for service providers to connect with the victims with emergency shelter and community resources. The San Diego Human Trafficking Task Force receives 3,000 to 8,000 human trafficking victims every year in San Diego County. Approximately 80 percent are born in the United States.

SAVING LIVES THROUGH STOP THE BLEED CAMPAIGN

Whether from a bullet wound or other traumatic injury, severe blood loss can kill in just five minutes. However, one-fifth of trauma deaths, the leading cause of death for Americans under age 46, could be prevented by staunching the bleeding. Scripps doctors are getting behind the national Stop the Bleed campaign. Supported by the American College of Surgeons, the Department of Homeland Security and numerous police departments. It aims to teach bystanders how to properly place pressure on a wound or apply a tourniquet in an emergency. Scripps providers participate in this program by teaching nonmedical audiences to control life-threatening bleeding until professional medical help arrives. The 90-minute course includes a presentation and practice on applying direct pressure, wound packing and using a tourniquet. Due to COVID-19 meetings were not held most of the year due to restricted access to the hospital.

TRAUMA AWARENESS CONFERENCE

Scripps participates annually with local agencies giving attendees the opportunity to learn more about Trauma Services. Education was provided on injury prevention and the latest trauma research. Participants had the opportunity to meet San Diego’s first responders, explore equipment, and learn about careers from San Diego Fire, SWAT, SDPD canine unit, Cal Fire, ambulance, and rescue helicopters. Interactive booths educate families on important issues like the dangers of distracted/impaired driving, drowning prevention, fall prevention, and helmet safety. Due to COVID-19 this event was cancelled due to restricted access to the hospital.

DISASTER PREPAREDNESS EXPO

Scripps Mercy hospital holds an annual disaster preparedness expo. The event includes a sidewalk CPR, Stop the Bleed which included learning basic techniques of bleeding control, learning the signs and symptoms of stroke and meeting the members of the

trauma team at Scripps Mercy hospital. Due to COVID-19 this event was cancelled due to restricted access to the hospital.

BEHAVIORAL HEALTH

Behavioral health encompasses many different areas including mental health and substance abuse. Because of the broadness of this health issue, it is often difficult to capture the need for behavioral health services with a single measure. Mental health can be defined as “a state of complete physical, mental and social well-being, and not merely the absence of disease”. Mental illness is defined as “collectively all diagnosable mental disorders” or “health conditions that are characterized by alterations in thinking, mood, or behavior (or some combination thereof) associated with distress and/or impaired functioning”. Behavioral health is an important health need because it impacts an individual’s overall health status and is a comorbidity often associated with multiple chronic conditions, such as diabetes, obesity and asthma.

Mental Health can be defined as “a state of complete physical, mental and social well-being, and not merely the absence of disease”.

Mental illness is defined as “collectively all diagnosable mental disorders” or “health conditions that are characterized by alterations in thinking, mood, or behavior (or some combination thereof) associated with distress and/or impaired functioning”.

A summary of the magnitude and prevalence of behavioral health is described below:

- The Scripps 2019 CHNA continued to identify behavioral health as a priority health issue affecting members of the communities served by Scripps.
- The HASD&IC 2019 CHNA identified behavioral health a top priority health issue both in the secondary data analyses and in the community engagement events.
- HASD&IC 2019 CHNA conducted a community engagement analysis and across all types of community engagement focus groups, key informant interviews, and the online survey. Behavioral health issues were identified as both prevalent and debilitating in the community. In the online survey, behavioral health was ranked as the health condition having the greatest impact on the health and well-being of San Diego County residents and as the second most impactful condition when health conditions and social determinants of health were combined (only access to care ranked higher). In addition, 63% of survey respondents indicated that they believe behavioral health is worsening in San Diego County. Respondents were also asked to rank specific behavioral health conditions having the greatest impact in San Diego.

The top seven conditions identified were as follows:

1. Alcohol Use Disorder
2. Mood Disorders
3. Substance Use Disorder
4. Anxiety
5. Opioid Use
6. Suicide and Suicide Thoughts/Ideation
7. Self-Harm or Self-Injury

- An analysis of mortality data in San Diego County found that in 2018, intentional self-harm (suicide) was the tenth leading cause of death. In 2018, the age-adjusted suicide rate in San Diego was 12.63 per 100,000. Rates were highest among whites (19.6), followed by blacks (4.06), Asian Pacific Islanders (7.39) and Hispanics (7.56).
- An analysis of 2018 mortality data for San Diego County revealed Alzheimer's disease and suicide as the third and tenth leading causes of death for San Diego County, respectively.
- The community engagement events conducted in the 2019 CHNA, identified that while San Diego has innovative programs to address mental health, residents face challenges in accessing timely, consistent mental health care. Care was described as especially difficult to obtain when the mental health issue was not considered an emergency.
- Mental health issues affect nearly 1 in 5 people, and when left untreated, are a leading cause of disability, are associated with chronic disease, and may lead to premature mortality. In San Diego County, 12.4 people per every 100,000 die from suicide annually, and approximately 10% of all adults seriously consider committing suicide.³³
- In 2017 there were 5,882 ED visits related to mood disorders in San Diego County, an 18.2% increase from 2013. This age-adjusted rate of ED visits for mood disorders was 177.4 per 100,000 population.³⁴
- According to 2017 data from the Office of Statewide Health Planning and Development (OSHPD), anxiety disorders were the top primary diagnosis for behavioral health-related ED discharges among those ages five to 44 and ages 65 and older. For those ages 45 to 64, the top ED discharge for behavioral health was alcohol-related disorders, followed by anxiety and mood disorders.

³³ California Office of Statewide Health Planning and Development, OSHPD Patient Discharge Data: SpeedTrack©

³⁴ Ibid., 108

- According to 2017 CHIS data, 11.8 percent of adults in SDC have ever seriously thought about committing suicide, a 40.5 percent increase since 2013 (8.4 percent).
- In 2017, there were 998 hospitalizations due to overdose/poisoning in SDC. The age-adjusted rate of hospitalizations due to overdose/poisoning was 28.4 per 100,000 population.
- In 2017, the age-adjusted rate of overdose/poisoning-related ED visits in SDC was 172.1 per 100,000 population. Age-adjusted rates for overdose/poisoning-related ED visits were higher among males, individuals of other race and individuals ages 15 to 24 years in comparison among group.
- Heavy alcohol consumption is also problem in San Diego County. Nearly 20% of adults ages 18 and older self-report excessive alcohol use. Participants in the community engagement process discussed the link between mental health and substance misuse, arguing that the failure to provide preventive and acute mental health services often leads to self-medicating with drugs and alcohol. They also an insufficient supply of substance use disorder outpatient and in-patient drug treatment programs as a critical need in San Diego County.

SUICIDE AND SUICIDE ATTEMPTS

Suicide is a major complication of depression and a leading cause of non-natural death for all ages in San Diego County, second only to motor vehicle accidents. According to a San Diego County Suicide Prevention Council's 2020 report the number and rate of people who died by suicide in San Diego County dropped last year. In 2019, there were 429 deaths by suicide, 36 fewer than the 465 reported in 2018. The annual report provides a comprehensive look at suicide in the region and brings together data from multiple sources for the years 2015 through 2019.

Among the report's findings:

1. Compared with 2018, the County suicide rate in 2019 decreased 7.9% from 13.9 to 12.8 per 100,000 population, the lowest rate since 2011.
2. In contrast, the rate of regional Emergency Department discharges due to non-fatal self-harm increased 1.7% between 2017 and 2018 (most recent data available).
3. Crisis calls to the local Access and Crisis hotline in 2019 increased 15.5% to an unprecedented 55% of all call volume.

In 2010, the County of San Diego Health and Human Services Agency (HHS) launched a suicide prevention planning process, which was formed by the National Strategy for Suicide Prevention and the California Strategic Plan on Suicide Prevention. Scripps is a member of the Community Health Improvement Partners (CHIP), which collaborates with the county on this initiative. For more information on the status of suicide and suicide prevention in San Diego County: 2020 Report Card.

<https://www.sdchip.org/initiatives/suicide-prevention-council/reports-resources/>

The Report Card brings together the most recent data available from multiple sources (for the years 2015 through 2019) to present a profile of suicides for all ages in San Diego County. Information from the County Medical Examiner, the Access & Crisis Line, hospital emergency departments, student self-reports, suicide prevention awareness campaigns and suicide prevention training programs are presented to provide a more complete understanding of the status of suicide and efforts to prevent them in San Diego County.

TABLE 4.5 SUICIDE AND SUICIDE PREVENTION IN SAN DIEGO COUNTY: 2020 REPORT CARD

Indicator	2015	2016	2017	2018	2019
Total Suicide Deaths					
a. Number	427	431	458	465	429
b. Rate per 100,000 people	13.2	13.1	13.8	13.9	12.8
*Emergency Department (ED) Discharges: Self-Inflicted Injury/Poisoning					
a. Number	3,248	3,098	3,091	N/A	N/A
b. Rate per 100,000 people	99.5	94.2	-		
Crisis Calls: Access and Crisis Line Percent of ALL Calls that are Crisis Calls	25.8	25.7	31.4	47.6	55.05

Source: San Diego County Prevention Council, Annual Report to the Community, 2020

The behavioral health programs at Scripps also supports community programs to reduce the stigma of mental illness and help affected individuals live and work in the community.

BEHAVIORAL HEALTH INPATIENT PROGRAMS

Individuals suffering from acute psychiatric disorders are sometimes unable to live independently or may even pose a danger to themselves or others. In such cases, hospitalization may be the most appropriate alternative. The Behavioral Health Inpatient Program at Scripps Mercy Hospital helps patients and their loved ones work through short-term crises, manage mental illness and resume their daily lives.

Behavioral Health Challenges

- Like many behavioral health programs across the country, funding is difficult, as payment rates have not kept pace with the cost to provide care.
- In Fiscal Year 2020, the Scripps Mercy Behavioral Health Program experienced a \$3.4 million loss in total operations, with 2.2 million of this loss being captured in Medi-Cal/CMS and Charity Care.
- In Fiscal Year 2020, 1.2 percent of patients in the inpatient unit were uninsured.

BEHAVIORAL HEALTH OUTPATIENT PROGRAMS

Scripps Behavioral Health entered into an agreement in May 2016 to transition the intensive behavioral health outpatient program to the Family Health Centers of San Diego (FHCS) and expand outpatient behavioral health offerings to the population served.

SCRIPPS MERCY AND FAMILY HEALTH CENTERS BEHAVIORAL HEALTH PARTNERSHIP

Scripps Mercy has established an initiative with Family Health Centers of San Diego (FHCS) to create a more robust behavioral health care system for Medi-Cal patients that receive care at Scripps Mercy Hospital. The goal is to strengthen the continuum of integrated primary and mental health services for patients discharged from various hospital settings (medical and behavioral health inpatient and emergency care) through a variety of timely patient engagement strategies including the expansion of community-based behavioral health services adjacent to the hospital. It is important to involve patients in appropriate outpatient care before their behavioral health issues become acute, preventing returns to the Emergency Department.

MENTAL HEALTH OUTREACH SERVICES, A-VISIONS VOCATIONAL TRAINING PROGRAM

Behavioral Health Services at Scripps Mercy Hospital, in partnership with the San Diego chapter of Mental Health of America established the A-Visions Vocational Training Program (social rehabilitation and prevocational services for people living with mental illness) to help decrease the stigma of mental illness and offer volunteer and employment opportunities to persons with mental illness. This supportive employment program provides vocational training for people receiving mental health treatment, potentially leading to greater independence. This year, Behavioral Health Services continued participating in the A-Visions program.

Since its inception, 626 inquiries have come in, 165 of these resulted in qualified candidates with 101 volunteers and 54 employees thus far. Currently, there are a total of 24 active candidates: 23 employees and one volunteer who participate in this

supportive employment program. The average length of employment for the 54 employees is 5.4 years, with a range of 2 months to 14.7 years. The current paid employees have been employed between 1.3 years to 13.4 years, with the average length of employment being 7 years. A-Visions participants have been employed on a casual/per diem basis by Scripps Environmental Services, Food Services and clerical support for Health and Information Services, Emergency Services, Nursing Research, Human Resources, Access, Behavioral Health, Credentialing, Labor and Delivery, Laboratory, Medical Staffing, Performance Improvement, Spiritual Care and Palliative Care Services. Paid A-Visions candidates typically limit their work to eight hours per week, which allows them to maintain eligibility for the disability benefits, medications and ongoing behavioral healthcare that supports their work.

INCREASING AWARENESS OF MENTAL HEALTH ISSUES

In FY20, Scripps Behavioral Health Services improved awareness of mental health issues by providing information and supportive services for more than 300 people at community events.

COMMUNITY HEALTH IMPROVEMENT PARTNERS (CHIP) AND THE SUICIDE PREVENTION COUNCIL

The San Diego County Suicide Prevention Council (SPC) is a collaborative community-wide effort focused on realizing a vision of zero suicides in San Diego County. Its goal is to prevent suicide and its devastating consequences in San Diego County. Since 2010, with support from the County of San Diego Behavioral Health Services, CHIP provides direct oversight and guidance toward the implementation of the Suicide Prevention Action Plan. The core strategies of the Suicide Prevention Council are:

- Enhancing collaborations to promote a suicide-free community
- Conducting needs assessments to identify gaps in suicide prevention services and supports
- Disseminating vital information on the signs of suicide and effective help-seeking
- Providing resources to those affected by suicide and suicidal behavior
- Advancing policies and practices that contribute to the prevention of suicide

PSYCHIATRIC LIAISON TEAM (PLT)

The Psychiatric Liaison Team is a mobile psychiatric assessment team. Clinicians provide mental health evaluation and triage services to accurately assess patients and provide them with the best and safest community resources to promote ongoing care. The team aims to help people adhere to treatment plans, reduce hospital readmission rates, relieve symptoms and ultimately ensure the long-term stabilization of the patient's

mental health. Scripps will continue to provide a dedicated Psychiatric Liaison Team at all Scripps Hospitals Emergency Departments and urgent care settings (Rancho Bernardo and Torrey Pines).

MI PUENTE: “MY BRIDGE” TO BETTER CARDIOMETABOLIC HEALTH AND WELL-BEING

Scripps Whittier Diabetes Institute received a \$2.4 million study grant from the NIH’s National Institute of Nursing Research in 2015 to evaluate Mi Puente, a program at Scripps Mercy Chula Vista hospital that uses a “nurse + volunteer” team approach to help hospitalized Hispanic patients with multiple chronic diseases, reduce their hospitalizations and improve their day-to-day health and quality of life.

Individuals of low socioeconomic status (SES) and ethnic minority status, including Hispanics the largest U.S. ethnic minority group are disproportionately burdened by chronic cardiovascular and metabolic conditions (“cardiometabolic” e.g. obesity, diabetes, hypertension, heart disease). High levels of unmet behavioral health in this population contribute to striking disparities in disease prevalence and outcomes.

A behavioral health nurse provides in-hospital coaching to patients, who are then followed post discharge by a volunteer community peer mentor to assist them in overcoming barriers that may interfere with achieving and maintaining good health.

Mi Puente aims to improve continuity of care and address the (physical and behavioral) health needs of the at-risk Hispanic population. This program holds promise for impactful expansion to other conditions and underserved populations. Classes were cancelled in March due to COVID-19.

BEHAVIORAL HEALTH INTEGRATION PROGRAM (BHIP) IN DIABETES

Many people find that the day-to-day tasks associated with having diabetes testing one’s blood sugar, planning meals, getting enough physical activity and remembering to take medications can be stressful. A common condition known as “diabetes distress” can be the result of feeling like it’s all too much. Scripps Diabetes Care and Prevention has a Diabetes Behavioral Specialist on staff to help people manage their diabetes without being overwhelmed or unduly distressed. The Behavioral Health Integration Program (BHIP) in Diabetes is an integrated, interdisciplinary approach to managing the emotional and behavioral needs that often leads to burnout of individuals with Type 1 and Type 2 diabetes. The co-location of medical and behavioral health services in the same facility allow for a convenient, warm hand-off from physician to behavioral health specialist. It also affords opportunities for physicians, diabetes educators and others to receive consultation on behavioral health concerns, and in turn, more comprehensively address the multi-faceted needs of their patients with diabetes.

SCRIPPS WHITTIER DIABETES DISTRESS STUDY

The National Institute of Diabetes and Digestive and Kidney Diseases awarded a five-year, \$3.3 million grant in 2020 to Scripps Whittier Diabetes Institute to study the integration of mental health services in the care of patients with Type 1 diabetes to better address the emotional distress than often accompanies the chronic disease. Researchers at Scripps Whittier will use the federal funding to launch a large-scale, randomized, controlled clinical trial that will evaluate whether the integration of diabetes distress care with routine medical care results in better management of diabetes and better health-related quality of life. The study is a collaborative effort that capitalizes on the complimentary expertise of a clinical psychologist/endocrinologist partnership.

MENTAL HEALTH SUPPORT SERVICES AT LOCAL SCHOOL-BASED CLINICS

Scripps Family Medicine Residency and Scripps Mercy Hospital Chula Vista Well-Being Center have partnered to offer clinical training opportunities for Master Social Work students in training from San Diego State University at Southwest and Palomar High Schools. These students work with local providers that address the mental health needs of vulnerable adolescents. A variety of mental health issues are present for local high school students. Many of these issues include depression, anxiety and suicide related concerns. The program works to improve overall mental health care for local students through a school-based clinic. Approximately 150 hours were spent in the school-based clinics offering services for adolescents to an average of 12 students per week. Due to COVID-19 the schools were closed for several weeks and then transitioned to a virtual setting.

PATIENT COMMUNITY SERVICES: BEHAVIORAL HEALTH

Patients are referred from Scripps Mercy Hospital Chula Vista, for assistance with a wide variety of behavioral health needs including addiction, loss, anxiety and other mental health issues. The Well-Being Center offers weekly counseling and/or refer patients to local mental health counseling services. These services were offered remotely as of March 2020 due to COVID-19.

ALCOHOLIC ANONYMOUS

Scripps Health provides meeting space for members of Alcoholic Anonymous. A fellowship of men and women who share their experience, strength and support of each other. Due to COVID-19 meetings were not held most of the year due to restricted access to the hospital.

GRIEF RECOVERY AFTER A SUBSTANCE PASSING (GRASP)

Scripps Health provides meeting space for members of GRASP. GRASP was founded to help provide sources of help, compassion and most of all, understanding, for families or individuals who have had a loved one die because of substance use or addiction. Due to COVID-19 meetings were not held most of the year due to restricted access to the hospital.

NATIONAL ALLIANCE OF MENTAL ILLNESS (NAMI) SIBLINGS SUPPORT

Scripps Health provides meeting space for members of NAMI Sibling Support. This is a confidential support group for siblings of person with mental illness and adult children of parents with mental illness. Due to COVID-19 the meetings were not held in the later part of the fiscal year due to restricted access to the hospital.

SURVIVORS OF SUICIDE LOSS – SAN DIEGO CHAPTER

Scripps Health provides meeting space for members of the Survivors of Suicide Loss – San Diego Chapter. The organization reaches out to and supports people who have lost a loved one to suicide. The goal is to give survivors a place where they can be comfortable expressing themselves, a place to find support, comfort, resources and hope in a judgment-free environment. These meetings were cancelled mid-year due to COVID-19 and restricted access to the hospital.

SCRIPPS DRUG AND ALCOHOL RESOURCES

There are more than 25 million illicit drug users in the US. There are an estimated 136.9 million current drinkers of alcoholic beverages and of those, approximately 23 percent binge drank in the last 30 days and 6.3 percent are considered heavy drinkers. It is estimated there are 8.7 million under-age drinkers. Substance use, particularly opioid misuse, is a health crisis that has reached epidemic proportions both nationally and locally. In San Diego, the rate of discharge from emergency departments for chronic substance use increased by 559% from 2014–2016; rates for those 65 years and older increased the most by 714%. The rate of discharge for opioid misuse for this age group was even more startling—it rose by 1.734% over this two-year period. Rates of discharge from emergency departments for acute substance use also rose. Rates increased for people of all racial and ethnic backgrounds; however, the most substantial increases (177%) was for blacks. Heavy alcohol consumption is also a problem in San Diego. Nearly 20% of all adults ages 18 and older self-report excessive alcohol use.

SCRIPPS SUBSTANCE USE DISORDER SERVICE (SUDS) NURSES

Aware of the impact drugs and alcohol can have on our community, Scripps has developed innovative ways to treating this destructive disease. Scripps has deployed specialized nurses certified in addiction; they see patients at their bedside and work closely with the patient's entire health care team to help facilitate a safe detox while hospitalized.

The Substance Use Disorder Service (SUDS) nurses act in a proactive and reactive role in all Scripps hospitals, helping to identify patients who are at risk, or are currently experiencing withdrawal from addictive substances. This mobile group of specially trained drug and alcohol resource nurses provide education, interventions and discharge placement assistance to patients in the Scripps hospitals. The resource nurses work directly with the nursing staff at each of the hospitals in search of patients who may be at risk for alcohol/drug withdrawal and assist with implementing a standardized protocol withdrawal process.

Scripps has changed the way we deliver drug and alcohol treatment by collaborating with others to deliver a continuum of care that improves the health of our community. When patients need additional care, Scripps has linked itself to two separate treatment programs designed to meet the community needs.

BETTY FORD CENTER

In 2016, Scripps partnered with the Betty Ford Center, which expanded its drug and alcohol treatment programming into San Diego. This treatment center brings world-renowned alcohol and drug rehab to more people through weekday and weeknight outpatient services.

FAMILY HEALTH CENTERS OF SAN DIEGO

Family Health Centers of San Diego provides an array of services, including outpatient drug and alcohol treatment along with medication-assisted treatment and harm reduction programs. Their services also include individual counseling and one-on-one support, educational sessions, HIV testing, Hepatitis B & C testing and treatment.

OPIOID STEWARDSHIP PROGRAM (OSP)

Cal Hospital Compare (CHC), a nonprofit organization that provides Californians with hospital performance ratings, has named all four of Scripps Health's hospitals to its 2020 Opioid Care Honor Roll. Scripps is the only health care organization in San Diego County to be recognized on the inaugural statewide list. The 2020 Opioid Care Honor Roll recognized 53 California hospitals for their progress and performance in promoting

safe and effective opioid use, providing treatment for patients with opioid use disorder and providing access to naloxone to prevent opioid overdoses. According to state data, over 2,400 Californians died of an opioid-related overdose in 2018. CHC recognized Scripps for taking a variety of approaches to address overuse of opioids among its patients. For patients being discharged from an emergency department visit or hospital stay, Scripps has created educational videos that it makes available for viewing and has also set opioid prescription quantity limits at discharge. In addition, some Scripps hospital emergency departments have implemented medication-assisted therapy, in which specially licensed ER physicians can administer medications as a bridge for patients with opioid use disorder until they can receive further care.

The Opioid Stewardship Program has spearheaded multiple projects at Scripps to educate patients and providers about the risks of opioids and the benefits of alternative multi-modal pain management options to reduce opioid use. The program has established prescribing standards for opioids, resulting in a reduction in the number of opioid pills per prescription at Scripps hospitals and outpatient centers. Scripps has drug take-back kiosks at its on-site pharmacies, offering patients year-round access to dispose of unused, unneeded or outdated medications. Additionally, Scripps provides a range of non-pharmaceutical pain management therapies, including music and pet therapy, ice and heat treatment, spiritual care and more.

SOCIAL DETERMINANTS OF HEALTH

Per Section 2, Community Health Needs Assessment (CHNA), in addition to the health needs that were identified in the CHNA, social determinants of health (SDOH) were also identified in all the community engagement activities. In response to the 2019 CHNA findings, Scripps Health creates an implementation plan that highlights the programs, services and resources provided by the hospitals to address the identified health and social determinants of health needs in its community. To learn more about these programs at <https://www.scripps.org/about-us/scripps-in-the-community/addressing-community-needs>.

Approximately 80 percent of modifiable risks for diseases are attributable to non-medical (upstream) determinants of health, such as health behaviors, socioeconomic status, and environmental conditions. To prevent chronic conditions and promote health, greater emphasis should be placed on population health, which has been defined to focus on outcomes as well as on the broader factors that influence health at a population level, including medical care systems, the social environment, and the physical environment.³⁵

The CHNA identified **economic security** as a priority SDOH need in the secondary data analyses and in the community engagement process. Economic security refers to the ability to meet essential financial needs sustainably, including those for food, shelter, clothing, hygiene, health care, and education.³⁶ Economic insecurity is associated with:³⁷

- Poor mental health days
- Visits to the ED for heart attacks
- Asthma
- Obesity
- Diabetes
- Stroke
- Cancer
- Smoking
- Pedestrian Injury

³⁵ UCLA Center for Health Policy Research. "Emerging Models of Diabetes and Hypertension Prevention in Los Angeles", Ying Ying, Meng, Susan H. Babey, Natalie Bradford and Tony Kuo. November 2017.

³⁶ "What is Economic Security?" The International Committee of the Red Cross. 18 June 2015.

³⁷ Kaiser Permanente of Southern California Community Health Department, Secondary Data Analysis: Data Source 2018.

Economic insecurity may also lead to food insecurity, which is linked to:³⁸

- Fair or poor health, anemia, and asthma in children
- Mental health problems, diabetes, hypertension, hyperlipidemia, and oral health problems in adults
- Fair or poor health, depression, and limitations in activities of daily living in seniors

Economic security is also linked to wages.

1. Educational attainment is directly related to economic insecurity by way of low wages and/or limited access to employment
2. In San Diego, adults who had less than a high school diploma was highest in South (21.9%) and Central (19.9%) regions.

FOOD INSECURITY

Food Insecurity is the inability to afford enough food for an active, healthy life. The HASD&IC 2019 CHNA identified food insecurity and access to healthy food as a social determinant impacting San Diego's priority health needs.

According to the research from the San Diego Hunger Coalition, almost half a million San Diegans, 1 in 7 residents, or 15 percent of the San Diego County population are considered food insecure, an economic and social condition characterized by limited or uncertain access to adequate food. Half of adults experiencing food insecurity are living with a disability. (San Diego Hunger Coalition, 2019). To put the total number of food insecure San Diegans into perspective, it is roughly equivalent to the entire populations of Chula Vista, Oceanside, Imperial Beach, Coronado, and Solana Beach combined. Rates in Imperial County are even higher, with 17% of the general population suffering food insecurity. Even more alarming is that the rate of food insecurity among children in Imperial County is the highest in California at over 33%.

In San Diego County:

- 14% of people experience food insecurity, 1 in 7 people
- 22% of children are in food insecure households, more than 1 in 5 children
- 9% of seniors experience food insecurity, 1 in 11 seniors.

³⁸ Gundersen C, Ziliak JP (2015) "Food Insecurity and Health Outcomes". Health Affairs. 2015. 34(11): 1830–1839

In addition, studies demonstrate that hunger significantly impacts health. Lack of access to healthy food, often due to availability and cost, are stressors that contribute to diabetes, heart disease, obesity, and other behavioral health issues in a myriad of ways:

- Food insecure adults with diabetes have higher average blood sugars.
- Food insecure adults are more likely to be obese.
- Food insecurity is significantly more prevalent in adults with mood disorders.
- Food insecurity is associated with increased risk of suicidal thoughts and substance use in adolescents.
- Food insecure seniors have a significantly higher likelihood of heart disease, depression and limited activities of daily living.
- Food insecure adults delay buying food in order to purchase medications.

CAL-FRESH PROGRAM

The CalFresh Program, federally known as the Supplemental Nutrition Assistance Program (SNAP), issues monthly electronic benefits that can be used to buy food at participating markets and stores. In San Diego County, an estimated additional 185,000 people are “food secure” but rely on CalFresh and/or WIC to supplement their food budget. This represents 96,000 adults and 89,000 children who are at risk of food insecurity should they lose CalFresh or WIC benefits. The total population in San Diego County that is either food insecure or food secure with CalFresh or WIC assistance is 671,000 or 1 in 5 people.

Federal Reduced-Price Meals program (FRPM)

According to a report released in 2019 by the San Diego County Childhood Obesity Initiative, www.sdcoi.org, the effect of poverty and food insecurity on students’ overweight and obesity rates can perhaps most profoundly be observed when looking at districts with high concentrations of students enrolled in the Federal Reduced-Price Meals program (FRPM). All students can participate in school nutrition programs; however, students with family incomes under 130% of the Federal Poverty Level are eligible for free meals, and those with incomes between 130% and 185% of the poverty level are eligible for low-cost (or “reduced price”) meals. Students enrolled in this program not only come from lower income households but are also likely to be food insecure. Fifty percent, or half of all students in San Diego County are enrolled in the Federal Reduced-Price Meals Program. (California Department of Education. 2018–2019 Student Poverty FRPM Data)

The programs highlighted below are ways that Scripps Health is addressing food insecurity, screenings and eligibility benefits.

SCRIPPS HEALTH CALFRESH SCREENINGS

As health care delivery systems moves towards a population health paradigm that incentivizes keeping patient’s healthy, hospitals and clinics are recognizing the significance of addressing social determinants of health, such as Food Insecurity (FI). Hospitals have been more proactive in intervening at some level of care to aid the individuals suffering from FI and their ability to gain control over their health.

Accordingly, food assistance provided by the Supplemental Nutrition Assistance Program (SNAP)—known as CalFresh in California, significantly reduces the rate and severity of poverty throughout the state (California Budget & Policy Center, 2018). While SNAP and Women’s, Infants, Children (WIC) have been successful in assisting low-income children and their families with additional funding for purchasing healthy foods, there is evidence that suggests screening for FI in healthcare settings is the best indicator for patients to access food-related assistance.

As mentioned in section three of the report, the Public Resource Specialist (PRS) Team screen all uninsured patients who have received services at any of the five Scripps hospital facilities. Scripps Health began screening for CalFresh in June 2017 through the support of the PRS team. The team has been successful in having the important conversation about food insecurity with patients and screened a total of 1,274 individuals in FY20. Refer to Table 4.6 for a breakdown of Scripps CalFresh screenings.

TABLE 4.6. SCRIPPS CALFRESH SCREENINGS. FISCAL YEAR 2020

SCRIPPS CAL- FRESH SCREENING		
STATUS	COUNT	% OF TOTAL
Active	298	7%
Approved	87	2%
Declined	2,518	58%
Denied	16	0.4%
Not Eligible	909	21%
Referred/ No County Response	489	11%
Total Screenings	4,317	
Note: PRS screening triggered by income below 200% of FPL – Based on conversation with patient, PRS determines appropriate assistance and disposes using status’s below		
Status	Definition	
Active	Current recipient of CalFresh	
Approved	Confirmed by County of Patient	
Declined	Declined assistance/No application submitted	
Denied	Confirmed by County or Patient	
Not eligible	Not eligible (Not a CA resident, does not have satisfactory immigration status, felon etc.)	
Referred	Application submitted to County and/or pending outcome (external or HOS)	
Pending	PRS assigned to be screened (No application has been initiated)	

LA MAESTRA FAMILY CLINIC, INC

Scripps Mercy Hospital has established a partnership at the City Heights Wellness Center (CHWC) with La Maestra Family Clinic and Rady Children's Hospital to address some of the attributing factors to poor health status for residents. With La Maestra serving as the lead agency, Scripps Mercy and Rady Children's hospitals are contributing resources to support operational costs of the Center in order to provide capacity for needed community linkages.

Eligibility Workers from La Maestra Family Clinic are available to counsel people and assist filling out applications for Food Stamp Assistance. CHWC not only provides the needed space for the activity, but also actively participates by developing outreach flyers, scheduling community residents, and overall coordination for the class. Applications and assistance for CalFresh to supplement food budget and allow families/individuals to buy nutritious food.

SCRIPPS MERCY WIC PROGRAM

La Maestra Family Clinic/City Heights Wellness Center is home to the Scripps Mercy Hospital-WIC Program that provides nutrition education and counseling, breastfeeding education and support and food vouchers to pregnant and parenting women, and children 0–5 years of age.

FOOD FINDERS – RESCUING FOOD, REDUCING HUNGER

Scripps Corporate Food Service partnered with Food Finders, a multi-regional food bank and food rescue program that connects businesses to charitable institutions in need of donations. Food Finders connected Scripps with Interfaith Community Services in Escondido, which distributes food to people in need. All leftover food from Scripps Corporate facilities is packaged, picked up each day and transferred to the Scripps 4S Ranch Food and Nutrition Services freezer for storage. The cost is minimal, as Scripps uses the same amount of labor to package the food as it would to dispose of it, and unsold "grab and go" items are already packaged. Interfaith Community Services picks up the frozen food twice per week and transports it to one of their facilities to help feed the community. Between food donated by Scripps and others, Interfaith distributes an average of 126,000 hot meals and packed lunches and 23,000 emergency meals, feeding approximately 17,000 people every year.

COOKING FOR HEALTH

Scripps Center for Integrative Medicine and Bastyr University's Master of Science in Nutrition for Wellness Program collaborate on offering free classes that teach individuals how to make vegetarian and vegan meals that are delicious and easy to

prepare. Participants learn how to cook healthy meals and are educated on why ingredients are chosen and the health benefits. These cooking classes focus on disease prevention, reducing obesity and improving chronic health issues. Due to COVID-19 classes were not held most of the year due to restricted access to the hospital.

SCRIPPS EMPLOYEE FOOD SHARING PROGRAM

In late April 2020 employees from across the system began reaching out about food resources for colleagues at Scripps. As a result of these mutual concerns the Scripps Employee Food Sharing Program was established, and food distribution events were held on May 23, 2020, June 27, 2020 and July 18, 2020. The Scripps Employee Food Sharing Program successfully distributed food to 270 colleagues who found themselves in need of assistance during this COVID-19 crisis and 149 volunteers participated in the distributions.³⁹ Each of these staff members received milk, eggs, bread, fruit, vegetables, a box of non-perishable food and a freshly prepared meal from Colors Café. Many of the recipients shared words of thanks and gratitude to their Scripps family. One even noted how they were appreciative to work for “such an awesome organization that is there for me when times are tough”. Many departments worked collaboratively to make this initiative a success such as human resources, food and nutrition services, and security and facilities to name a few. The Scripps Leadership Academy alumni also volunteered to help package and distribute the food. Much appreciation to the employees, physicians and vendors who donated to the program as their generosity helped to make a difference for many during a difficult time.

FEEDING SAN DIEGO

Scripps made a sponsorship to Feeding San Diego to assist with Pandemic community needs of food insecurity. Feeding San Diego is on a mission to connect every person facing hunger with nutritious meals by maximizing food rescue. Throughout the COVID-19 pandemic, Feeding San Diego is ensuring that hundreds of children, families, seniors, college students, military families, veterans, and people facing homelessness can access enough nutritious food to endure this devastating crisis. Feeding San Diego is providing more than 665,000 meals every week during this pandemic.

JACOBS & CUSHMAN SAN DIEGO FOOD BANK

Scripps made a sponsorship to the Jacobs & Cushman San Diego Food Bank to assist with pandemic community needs of food insecurity. The Jacobs & Cushman San Diego Food Bank and its North County Food Bank chapter comprise the largest hunger-relief

³⁹ The expenses associated with the food distribution program were not included as a community benefit expense as the food distribution events were not open to the community and were solely for Scripps employees.

organization in San Diego County. Before the pandemic it served on average 350,000 (about 11% of the population) people per month by providing nutritious food to individuals and families in need in communities throughout San Diego County. Since mid-March, when the county declared a state of emergency, the Food Bank is now feeding an estimated 600,000 per month due to soaring unemployment and COVID-19's devastating impact on our local economy.

[NORTH COUNTY LIFELINE](#)

Scripps made a sponsorship to the North County Lifeline to assist with pandemic community needs. North County Lifeline's mission is to build self-reliance among youths, adults, and families through high-quality, community-based services. North County Lifeline expands housing to victims of human trafficking, expands counseling and behavioral health programs for adults in the criminal justice system and provides support for foster youth and homeless youth and young adults. To meet the growing needs, Lifeline implemented video-based telehealth in March 2020 to continue providing clinical services, as well as in-person support.

[FATHER JOE'S VILLAGE](#)

Scripps made a sponsorship to Father Joe's Village to assist with pandemic community needs such as food insecurity and those experiencing homelessness and poverty. Father Joe's was established in 1950 to serve San Diegans experiencing homelessness and poverty, Father Joe's Villages has grown to include a comprehensive campus and scattered site programs that house over 2,000 people nightly. At least 7,600 people are experiencing homelessness every night in San Diego. People who are homeless are at greater risk of serious illness, mental health issues, substance abuse and violence.

[ALPHA PROJECT](#)

Scripps made a sponsorship to the Alpha Project to assist with pandemic community needs such as food insecurity and those experiencing homelessness and poverty. Alpha Project's mission is to empower individuals, families, and communities by providing work, recovery, housing and support services to people who are motivated to change their lives and achieve self-sufficiency. Founded in 1986 as a simple project offering work opportunities for homeless men, today Alpha Project operates numerous programs serving over 4,000 people daily. The agency has created over 600 units of affordable rental housing projects and has sponsored home ownership programs.

[FULL ACCESS AND COORDINATED TRANSPORTATION \(FACT\) INC.](#)

In 2019, Scripps entered a partnership with a local nonprofit— Facilitating Access to Coordinated Transportation (FACT) Inc., for on-demand rides for patients. Scripps staff

relies on FACT to arrange for patients get to appointments and for discharged patients to return home or get to other facilities. This collaborative service has quickly proved to be a reliable, convenient and cost-effective solution to one of the difficult and expensive challenges in accessing medical care transportation.

In 2019 Scripps and FACT conducted a pilot project which streamlined a variety of medical transportation options through a single point of contact at FACT. The pilot provided rides for patients including those who needed specialized vehicles or personal assistance to complete the trip. Scripps staff used a single telephone number to contact staff at FACT, who then handled the selection of the appropriate vehicle, equipment and personnel, and dispatched the ride. The pilot resulted in savings in processing time, cost of transportation and it provided the rider with a more reliable and convenient transportation service. The pilot project was partly funded by a Community Enhancement grant awarded to FACT by the County of San Diego.

Scripps realized a benefit using FACT transport as a cost savings rather than using taxi vouchers, as well as trips that could take Scripps staff a great deal of time to find a vendor to do as other vendors may not be able to do trips to the border or Imperial County as readily. FACT is a clearinghouse of sorts with multiple vendors and therefore saves the staff time in finding the appropriate transport at the right time.

Due to the success of the pilot, Scripps and FACT entered into a new agreement in 2020 that will phase this service to all Scripps hospitals and enable staff to schedule rides via FACT's call center. Transportation is available 7 days a week for Scripps discharged patients to any location within San Diego and beyond. Most rides begin and end at the curbside, however door through door rides, wheelchair accessible rides and gurney rides are available on demand.

In Fiscal Year 2020, FACT provided over 400 rides for Scripps patients throughout San Diego and as far away as Imperial County.

The following are the different transportation modalities that FACT-SD provides:

- Ambulatory – the rider can walk alone to and from the vehicle
- Curb-to-Curb – the rider will be picked up and dropped off at the curb of the facility/residence
- Door-to-Door – the rider requires the driver to walk them from the door of the facility/residence to the vehicle and from the vehicle to the door of the facility/residence

- Door-through-Door – the rider requires the driver to come inside the facility and transport them to the vehicle, the driver will drop them off at the door of the facility or residence
- Accessible vehicles and Mobility Devices – Walker, Cane, Folding Wheelchair, Scooter, and vehicles equipped with Ramp or Lift
- Gurney Transportation

SCRIPPS EMPLOYEE SPONSORED HOLIDAY DRIVES

The holidays inspire many with the spirit of giving, and in a year like no other, generosity was in full force at Scripps throughout the holiday season. One in six people in San Diego County face the threat of hunger every day, and COVID-19 exacerbated food insecurity (currently experiencing or at-risk of experiencing hunger) in San Diego. This year, Scripps Health employees donated a total of 3,164 pounds of food to the Jacobs & Cushman San Diego Food Bank, which provides emergency food to 370,000 children and families, active-duty military, and fixed income seniors living in poverty, and 510 pounds of food for Feeding San Diego, which collects and distributes donations to local pantries or others in need.

Scripps teams also donated clothing, household necessities and more, including:

- Alpha Project - an estimated total of 100 pairs of shoes and socks
- StandUp for Kids - hygiene and snack packs
- Polinsky Children's Center – toys
- PROMISES2KIDS – gifts for foster children

In addition, Scripps employees “adopted” several families in San Diego who were experiencing a tough year. One family, a single mother and her child, were living in a shelter and hiding from her abusive spouse. Another has three children, including a five-year-old recently diagnosed with cancer. Employees also continued their annual tradition of creating goodie bags for children who come in through the emergency department. Donated items included pencils, stickers, notebooks, craft items and more; staff made more than 200 bags this year.

FOSTERING VOLUNTEERISM

Scripps believes that health improvement begins when people take an active role in making a positive impact on their community. For this reason, Scripps supports volunteer programs for Scripps employees and affiliated physicians who want to make an even larger impact on their community. Scripps matches the talents and interests of employees and physicians with community needs, such as mentoring partnerships with local schools and providing free medical and surgical care for patients in need.

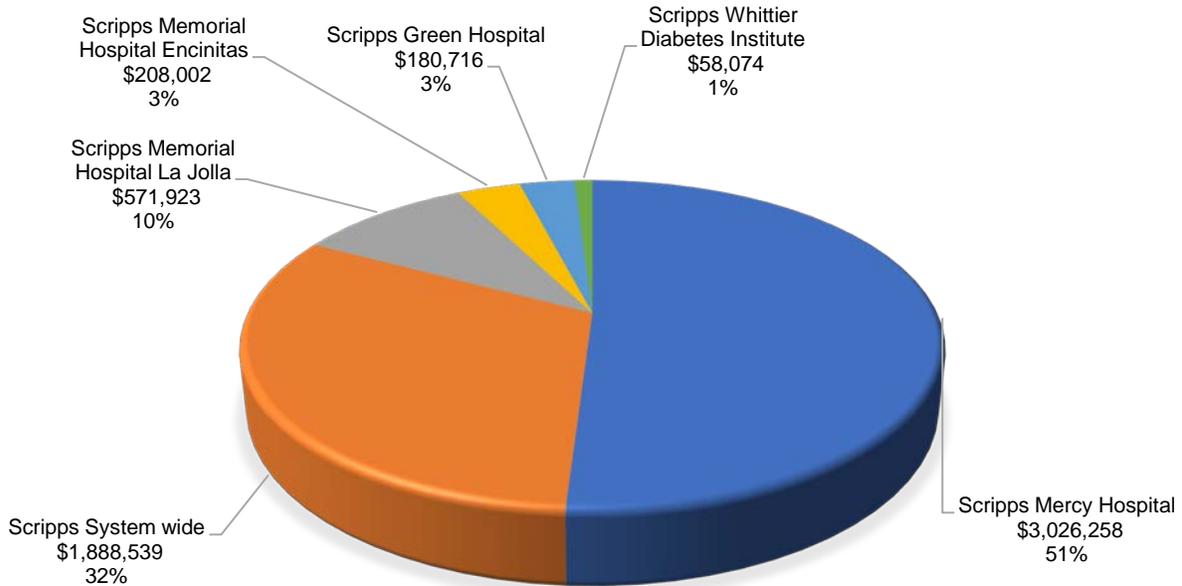
In addition to the financial community benefit contributions made during Fiscal Year 2020, Scripps employees and affiliated physicians donated a significant portion of their personal time volunteering to support Scripps sponsored community benefit programs. With close to 9,554 hours, the estimated dollar value of this volunteer labor is \$504,558*, which is not included in the Scripps Fiscal Year 2020 community benefit programs and services totals.

*(*Calculation based upon an average hourly wage for the Scripps Health system plus benefits.)*

Figure 4.2

FISCAL YEAR 2020

SCRIPPS COMMUNITY HEALTH SERVICES BY OPERATING UNIT, \$5,933,512 (DOES NOT INCLUDE SUBSIDIZED CARE)



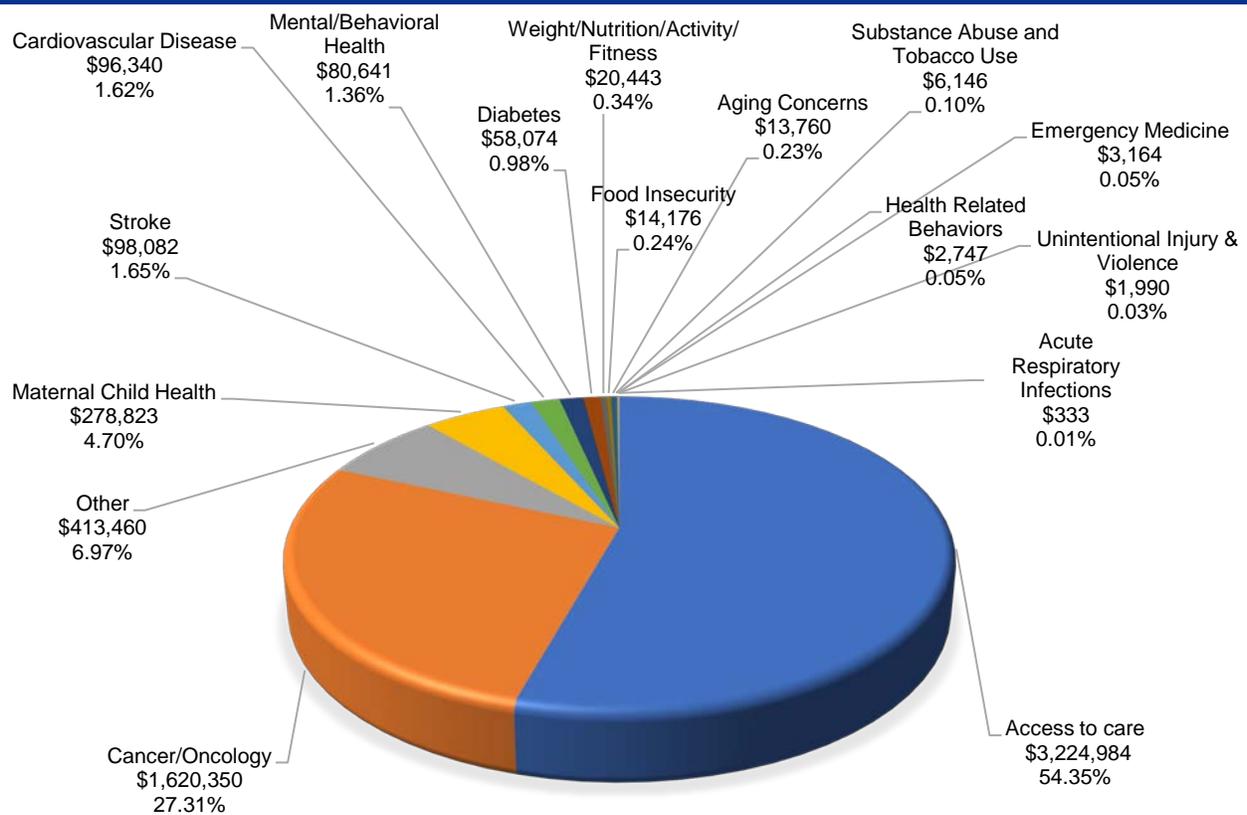
COMMUNITY HEALTH SERVICES

These services include prevention and wellness programs, screenings, health education, support groups, health fairs and other programs supported by operational funds, grants and in-kind donations. Calculations are based on cost less “direct offsetting revenue”, which includes any revenue generated by the activity or program, such as payment or reimbursement for services provided to program patients. According to the Schedule H 990 IRS guidelines, “direct offsetting revenue” also includes restricted grants or contributions that the organization uses to provide a community benefit.

FIGURE 4.3

FISCAL YEAR 2020

SCRIPPS COMMUNITY HEALTH SERVICES BY HEALTH ISSUE
\$5,933,512 (DOES NOT INCLUDE SUBSIDIZED CARE)



COMMUNITY HEALTH SERVICES

These services include prevention and wellness programs, screenings, health education, support groups, health fairs and other programs supported by operational funds, grants and in-kind donations. Calculations are based on cost less “direct offsetting revenue”, which includes any revenue generated by the activity or program, such as payment or reimbursement for services provided to program patients. According to the Schedule H 990 IRS guidelines, “direct offsetting revenue” also includes restricted grants or contributions that the organization uses to provide a community benefit.

SCRIPPS COMMUNITY HEALTH SERVICES IMPROVEMENT & COMMUNITY BENEFIT OPERATION

Programs	Persons Served	Staff Hours	Volunteer Hours	Financial Support*
A Matter of Balance: Managing Concerns About Falls	288	34	0	\$1,599
American Cancer Society-Making Strides Against Breast Cancer - Event	27	0	0	\$0
Baby & You - Prenatal Yoga	9	6	0	\$378
Beach Area Community Court Program	282	16	0	\$1,296
Bereavement Support Group	53	10	12	\$555
Better Breathers Support Group	36	6	0	\$333
Blood Drive - American Red Cross	272	0	0	\$0
Blood Drive - American Red Cross	69	0	0	\$0
Brainmasters - Stroke & Brain Injury Survivors Communication Skill	52	0	0	\$722
Breast Cancer Education & Support Group	125	23	2	\$1,277
Breast Health Outreach & Education	1,947	991	0	\$11,942
Breastfeeding Support Group	1,335	2,178	0	\$39,322
Cardiac Dietary Counseling - Community Education Program	557	142	0	\$8,384
Cardiac Tai Chi - Fitness Program	503	0	0	\$0
Cardiac Treatment Center Group Exercise Programs	2,975	999	0	\$66,884
Cardiac Treatment Center Life Project	103	15	0	\$889
Centering Pregnancy, Healthy Moms, Healthy Babies	400	0	0	\$0
CFLI - Adult, Infant, and Child CPR for Family and Friends	92	68	0	\$459
CHIP - Community Health Improvement Partners - Suicide Prevent Council	0	60	0	\$4,861
Chula Vista Community Collaborative	120	275	0	\$7,398
Collaborative San Diego County Stroke Center Community Messaging Campaign	26,727	10	0	\$630
Community Health Education Lecture Series	122	6	5	\$378

* **"Financial Support"** reflects the cost (labor, supplies, overhead, etc.) associated with the program/service less direct revenue. This figure does not include a calculation for physician and staff volunteer hours. In some instances, an entire community benefit program cost center has been divided between several initiatives.

Programs	Persons Served	Staff Hours	Volunteer Hours	Financial Support*
Cooking for Health - Recipes for Healthy Living	117	0	0	\$0
County of San Diego - Love Your Heart Blood Pressure Screenings	73	4	0	\$252
COVID19 Federal Communications Commission Telehealth Grant	0	410	0	\$29,572
CPR Classes for Patients and Families of the Cardiac Treatment Center	4	3	0	\$419
Dogs and Babies -Child Safety and Prevention Education Program	49	104	0	\$3,993
Eric Paredes Save a Life Foundation - Screenings	1,951	116	93	\$7,302
Fall Prevention & Home Safety Workshop	2,456	96	0	\$5,750
Family Practice Residency & School to Health Careers Program	749	0	0	\$0
Fiji Solomon Islands Medical Mission	700	0	160	\$0
First Five Home Visits	34	78	0	\$2,096
First Five Parenting Education	293	673	0	\$18,062
Fitball: Core Conditioning Class - Adult/Senior Fitness Class	241	46	0	\$2,554
Getting Ready for Baby - Child Safety and Prevention Class	540	1,145	54	\$50,682
Grandparenting Today - Child Safety and Prevention Class	104	18	0	\$999
Gynecological Cancer Support Group	182	1,706	0	\$95,424
Healing Arts Class for People with Neurological Challenges	91	38	0	\$2,082
Healing Touch Educational Programs	29	61	0	\$2,258
In Lieu of Funds	0	0	0	\$1,457,097
Meditation Class – Wellness Program – Cardiac Treatment Center	448	88	0	\$7,345
Mental Health Association of San Diego - Meeting of the Minds	0	0	0	\$250
Mental Health Awareness Month	0	20	0	\$1,307
Mental Health Outreach Services, A-Visions Vocational Training Program	84	485	0	\$22,559
Mercy Outreach Surgical Team (MOST)	302	856	776	\$25,612
Miracle Babies 5K Walk/Run	7	0	0	\$0
National Alliance of Mental Illness (NAMI) - Walking Event	0	3	0	\$439
Oceanside Street Fair	74	0	0	\$0
Organ Transplant Support Groups	2,604	0	0	\$0
Parkinson's Boot Camp 101	150	17	7	\$957
* "Financial Support" reflects the cost (labor, supplies, overhead, etc.) associated with the program/service less direct revenue. This figure does not include a calculation for physician and staff volunteer hours. In some instances, an entire community benefit program cost center has been divided between several initiatives.				

Programs	Persons Served	Staff Hours	Volunteer Hours	Financial Support*
Parkinson's LSVT (Lee Silverman Training) Big Exercise	23	4	0	\$372
Parkinson's Maintenance Class for Voice	42	8	0	\$504
Patient Support to Prevent Readmissions	714	0	0	\$0
Pelvic Floor Wellness: Prenatal and Postnatal	26	55	0	\$2,920
Promise Neighborhood (Reducing Childhood Obesity in South Bay)	259	595	0	\$15,966
Psychiatric Liaison Team (PLT)	1,503	0	0	\$0
Pulmonary Cardiac Class	362	54	0	\$2,998
Residency Led Health and Well-Being Programs	282	0	0	\$0
San Diego County Methamphetamine Strike Force (MSF)	0	20	0	\$1,620
San Diego County Policy Panel on Youth Access to Alcohol	0	40	0	\$3,241
San Diego County Prescription Drug Abuse Task Force	0	8	0	\$648
San Diego County Stroke Consortium	0	69	0	\$4,243
San Diego Regional Task Force on the Homeless	0	44	0	\$3,565
Saving Lives through Stop the Bleed Campaign	143	0	0	\$0
Scripps Aphasia Communication Group	40	11	0	\$693
Scripps Cal Fresh Screening Program	4,317	0	0	\$862
Scripps Green Hospital Medical Library	0	0	0	\$175,011
Scripps Health System Community Benefit Planning and Outreach	0	0	0	\$413,461
Scripps MD Anderson Cancer Center - Lymphedema Education	23	5	0	\$1,115
Scripps MD Anderson Cancer Center - Head and Neck Support Group	30	7	0	\$441
Scripps MD Anderson Cancer Center - Oncology Nurse Navigator	3,359	15,296	0	\$1,157,528
Scripps MD Anderson Cancer Center - Outpatient Social Worker and Liaison	3,003	5,760	0	\$341,381
Scripps MD Anderson Cancer Support Groups	220	0	0	\$0
Scripps Memorial Hospital La Jolla Medical Library	0	315	0	\$15,782
Scripps Mercy & Family Health Centers Behavioral Health Partnership	0	96	0	\$7,252
Scripps Mercy Hospital Medical Library	0	2,651	0	\$230,229
Scripps Mercy Supplemental Nutrition Program for WIC	65,655	29,303	0	\$158,371
Scripps Recuperative Care Program (RCS)	44	642	0	\$115,117
Scripps Spinal Cord Injury Support and Education Group	49	13	0	\$694
Scripps Substance Use Disorder Service (SUDS) Nurse	107	0	0	\$0

* "Financial Support" reflects the cost (labor, supplies, overhead, etc.) associated with the program/service less direct revenue. This figure does not include a calculation for physician and staff volunteer hours. In some instances, an entire community benefit program cost center has been divided between several initiatives.

Programs	Persons Served	Staff Hours	Volunteer Hours	Financial Support*
Senior Health & Well-Being Programs	104	239	0	\$6,411
Sibling Preparation Class - Child Safety and Prevention Class	16	34	0	\$1,998
South County Action Network (SoCAN) Meeting	300	689	0	\$18,494
St. Leo's Mission Medical Clinic	124	0	120	\$0
Stroke - Parkinson's Exercise Group	42	0	0	\$2,143
Stroke and Brain Injury Support and Education Group	225	1,713	0	\$89,074
Stroke Risk Program Community Education	145	17	0	\$1,071
Su Vida, Su Corazon. Your Life, Your Heart	50	0	0	\$0
Sweetwater Union High School District Pre-Participation Sports Screen	150	0	0	\$0
Trauma Education Programs	699	54	17	\$3,164
Ventricular Assist Device (LVAD) Support Group	85	4	0	\$252
Behavioral Health Intervention Program in Diabetes (BHIP)	177	160	0	\$1,480
Diabetes Education Outreach Events	37	34	0	\$409
Diabetes Prevention Program	1,550	1,403	0	\$19,536
Dulce Digital-Me	71	64	0	\$594
Healthy Living Classes	36	33	0	\$476
Mi Puente Program	409	370	0	\$3,420
Project Dulce Care Management	2,884	2,611	0	\$24,491
Scripps Diabetes Retinal Screening Program	917	830	0	\$7,668
Young Women's Breast Cancer Support Group	22	21	0	\$1,292
Scripps Community Health Services Improvement & Community Benefit Operation Totals FY 20	146,729	76,552	1,246	\$4,720,312

* "Financial Support" reflects the cost (labor, supplies, overhead, etc.) associated with the program/service less direct revenue. This figure does not include a calculation for physician and staff volunteer hours. In some instances, an entire community benefit program cost center has been divided between several initiatives.

SUBSIDIZED HEALTH SERVICES

Program	Persons Served	Staff Hours	Volunteer Hours	Financial Support*
Mercy Inpatient Behavioral Health	0	0	0	\$977,388
Scripps Mercy Behavioral Health A-Visions Service Program	0	0	0	\$96,712
Scripps Resident Clinic at Hillcrest Family Health Center	0	0	0	\$2,606,438
Scripps Subsidized Health Services Totals FY 20	0	0	0	\$3,680,538

* "Financial Support" reflects the cost (labor, supplies, overhead, etc.) associated with the program/service less direct revenue. This figure does not include a calculation for physician and staff volunteer hours. In some instances, an entire community benefit program cost center has been divided between several initiatives.

CASH AND IN-KIND DONATIONS

Programs	Persons Served	Staff Hours	Volunteer Hours	Financial Support*
2-1-1 San Diego - Community Benefit Fund	0	0	0	\$12,000
2-1-1 San Diego Annual Event	0	0	0	\$5,000
Alcoholics Anonymous	1,024	0	0	\$636
Alpha Project	0	0	0	\$3,000
American Cancer Society - Cancer Action Network	0	0	0	\$1,000
American Cancer Society-Making Strides Against Breast Cancer-Sponsorship	0	0	0	\$8,950
Association of Clinical Research Professionals	60	0	0	\$40
California Health Foundation and Trust (CHFT) Fee	0	0	0	\$333,000
Consumer Center for Health Education and Advocacy (CCHEA)	0	0	0	\$120,000
Eric Paredes Save a Life Foundation - Grant	0	0	0	\$8,500
Family Health Centers of San Diego - Spirit of the Barrio	0	0	0	\$7,500
Family Health Centers of San Diego (FHCS) - GRANT	0	0	0	\$300,000
Family Health Centers of San Diego (FHCS) -In-Kind-Donation	0	0	0	\$890
Family Health Centers of San Diego (FHCS) Internal Medicine Outpatient Teaching Clinic Partnership	0	0	0	\$309,000
Father Joe' Villages - Village Health Center	0	0	0	\$5,000
Feeding San Diego	0	0	0	\$5,000
Food Addicts Anonymous	276	0	0	\$383
Food Finders and Interfaith Community Services	0	0	0	\$2,047
Food Handlers Training Course	39	0	0	\$263
GRASP - Grief Recovery After a Substance Passing	22	206	0	\$11,342
Greater La Jolla Meals on Wheels	5,099	0	0	\$832
Jacobs & Cushman San Diego Food Bank	256	8	0	\$435
Jacobs & Cushman San Diego Food Bank (Sponsor)	0	0	0	\$5,000
Joe Niekro Foundation	100	0	0	\$199
La Maestra Community Health Centers	0	0	0	\$40,000
National Alliance of Mental Illness (NAMI) Siblings Support	46	431	0	\$23,716
North County Lifeline	0	0	0	\$3,000
Organ Transplant Support Groups	2,474	0	0	\$0
Overeaters Anonymous - Spanish	50	0	0	\$960
San Diego Echo Society	105	0	0	\$595
San Ysidro Health Center	0	0	0	\$3,000
Scripps Holiday Food Drive	1,787	0	0	\$0
South Bay Community Service - Toy Drive	62	0	0	\$0
Spondylitis Association	105	0	0	\$318
Survivors of Suicide Loss - San Diego Chapter	0	0	0	\$521
Survivors of Suicide Loss - Save A Life Community Walk	0	3	0	\$493
Take Off Pounds Sensibly (TOPS) Meeting	248	0	0	\$580
Scripps Health Cash & In-Kind Donation Totals FY 20	11,753	648	0	\$1,213,200

* "Financial Support" reflects the cost (labor, supplies, overhead, etc.) associated with the program/service less direct revenue. This figure does not include a calculation for physician and staff volunteer hours. In some instances, an entire community benefit program cost center has been divided between several initiatives.

COMMUNITY BUILDING ACTIVITIES

Programs	Persons Served	Staff Hours	Volunteer Hours	Financial Support*
Enlisted Leadership Foundation - The Foundry**	0	0	0	\$35,000
Executive Leadership - Community Building**	0	200	0	\$26,738
Health Care Public and Government Advocacy**	0	0	0	\$4,051
Healthy Development Services Provider Meeting**	225	517	0	\$13,870
Hospital Incident Command System National Advisory Committee**	0	8	0	\$504
North San Diego Business Chamber Health Committee Meeting**	0	45	0	\$3,646
Parent Education, Support and Empowerment (PESE) Work Group Meet**	60	138	0	\$3,699
San Diego County Healthcare Disaster Coalition**	0	12	0	\$756
San Diego Healthcare Coalition Advisory Committee**	0	24	0	\$1,512
San Diego Organization of Healthcare Leaders (SOHL)**	0	0	0	\$2,000
San Diego Public Library Foundation**	0	0	0	\$2,500
San Diego Regional Full-Scale Exercise**	0	6	0	\$434
San Diego Sherriff's Search & Rescue Academy - Emergency Response Module**	21	0	39	\$1,102
Scripps High School Exploration Internship Program**	96	0	0	\$0
The San Diego LGBT Community Center	0	0	0	\$10,000
University City (UC) High School Exploration Program	16	0	0	\$0
Whittier - Diabetes and You (San Diego Unified STEAM Leadership Series) **	300	6	0	\$0
Young Leaders in Healthcare Program**	481	24	0	\$2,120
Youth Educational Programs**	1,606	3,687	0	\$99,005
Scripps Health Community Building Activities FY 20	2,805	4,666	39	\$206,937

* "Financial Support" reflects the cost (labor, supplies, overhead, etc.) associated with the program/service less direct revenue. This figure does not include a calculation for physician and staff volunteer hours. In some instances, an entire community benefit program cost center has been divided between several initiatives.

**Community building activities, bad debt and Medicare shortfall do not count as community benefits under the Schedule H 990 but are still reportable outside the community benefit table.

Section 5

Professional Education and Health Research

PROFESSIONAL EDUCATION & HEALTH RESEARCH

Quality health care is highly dependent upon health education systems and medical research programs. Without the ability to train and inspire a new generation of health care providers, or to offer continuing education to existing health care professionals, the quality of health care will be greatly diminished. Medical research also plays an important role in improving the community's overall health by developing new and innovative treatments.

Each year, Scripps allocates resources to advance health care services through clinical research, medical education and health professional education. During Fiscal Year 2020 (October 2019 to September 2020), Scripps invested \$27,934,884⁴⁰ in professional training programs and clinical research to enhance service delivery and treatment practices in San Diego County. This section highlights some of our professional education and health research activities.

Table 5.1 and Figure 5.1 in this section have a more detailed overview of Fiscal Year 2020 Scripps Professional Education and Health Research distribution. These costs are included in the IRS Form 990 Schedule H Part I-line 7f and 7h. Refer to Scripps Professional Education and Health Research Summary for an individual breakdown of each activity, page 149).

⁴⁰ Reflects clinical research as well as professional education for non-Scripps employees, including graduate medical education, nursing resource development and other care professional education. Research primarily take place at Scripps Clinical Research Services, Scripps Whittier Diabetes Institute, Scripps Genomic Medicine and Scripps Translational Science Institute.

HEALTH PROFESSIONS TRAINING

SCRIPPS HEALTH GRADUATE MEDICAL EDUCATION

A key component of Scripps *Mission* is to advance the education of physicians and health care professionals and sponsor graduate medical education. By investing in these areas, we help secure quality care for our community. Scripps has been training future physicians longer than any other institution in San Diego. For more than 70 years physicians in Scripps graduate medical education programs have helped care for underserved populations throughout the region. Scripps has a comprehensive range of graduate medical education programs at Scripps Mercy Hospital, Scripps Family Practice Residency Program and Scripps Green Hospital. Scripps graduate medical education programs are well-known for excellence, provide a hands-on curriculum that focuses on patient-centered care and offer residencies in a variety of practices, including internal medicine, family medicine, podiatry, pharmacy and palliative care.

In Fiscal Year 2020, Scripps enrolled a total of 160 residents and 46 fellows throughout the Scripps health system. More details on these programs are included in section eight and nine of the community benefit report. In addition, Scripps has a pharmacy residency program which train residents with Doctor of Pharmacy degrees.

UCSD/SCRIPPS HEALTH HOSPICE AND PALLIATIVE MEDICINE FELLOWSHIP PROGRAM

The UCSD/Scripps Health Hospice and Palliative Medicine Fellowship Program is a one-year program designed for physicians who wish to become sub-specialists and have a long-term career in hospice and palliative medicine. This is a unique partnership in which UCSD and Scripps Health share responsibility for the fellows, with trainees spending equal time in both institutions with all the benefits of both institutions. The fellowship prepares trainees to work in a variety of roles, including leadership positions in the field. Graduates have successfully become hospice medical directors and palliative medicine consultants in outpatient and inpatient settings across the United States. Fellows who complete the UCSD/Scripps Health program are well equipped to practice in diverse settings, including acute palliative care units, inpatient consultation, outpatient consultation, patients' homes, and long-term care facilities.

SCRIPPS CONFERENCE SERVICES AND CONTINUING MEDICAL EDUCATION (CME)

Scripps Conference Services and Continuing Medical Education (CME) is committed to improving the quality of health care and advancing the practice of medicine by providing evidence-based, up-to-date and clinically relevant continuing medical education courses. CME is required for medical credentialing and made available to practitioners on a community-wide basis. Scripps Health is accredited by the Accreditation Council

for Continuing Medical Education (ACCME) to provide AMA PRA Category 1 Credit(s) for physicians. Credits for other health professionals are also available. In Fiscal Year 2020 Scripps Continuing Medical Education Department provided a variety of courses and conferences which included the following:

[SCRIPPS CANCER CARE SYMPOSIUM](#)

The Scripps MD Anderson Cancer Center's Cancer Care Symposium two-day conference was designed for nurses, nurse practitioners, physician assistants, clinical nurse specialists, and other health care professionals dedicated to the field of hematology/oncology who practice in settings across the continuum of care.

[MELANOMA 2020](#)

As the incidence of melanoma continues to rise rapidly in the United States and around the world, the need to educate clinicians from various specialties on the disease also increases. During the course nationally recognized experts presented information on prevention, risk assessment, early detection, genetic factors, and current and future treatment choices for melanoma patients. Issues concerning surgical management, adjuvant therapy, advanced disease therapy, and personalizing the course of treatment for individual patients was discussed.

[CLINICAL HEMATOLOGY & ONCOLOGY 2020](#)

The Clinical Hematology and Oncology Conference presented by Scripps MD Anderson Cancer Center was designed for hematologists, oncologists, surgeons, radiation oncologists, internists, and others desiring an update in these specialty areas.

[CARDIOMYOPATHY & CARDIO-ONCOLOGY SYMPOSIUM 2020](#)

The Scripps Cardiomyopathy and Cardio-Oncology Symposium was designed to provide a comprehensive, case-based curriculum that addressed important clinical topics relevant to cardiomyopathy and cardiovascular health of cancer survivors. Cardio-oncology is a growing field that has great importance as newly developed cancer treatments improve cancer survival rates but can be associated with cardiovascular toxicities. Cardiac amyloidosis, a burgeoning disease with exciting new treatments was discussed.

[2019 SAN DIEGO DAY OF TRAUMA](#)

The 2019 San Diego Day of Trauma reviewed the importance of building an effective team to provide the best possible care for patients with life threatening injuries. Nationally renowned speakers presented state of the art interventions for emergencies commonly encountered in the field. Conference speakers included specialists in the fields of pre-hospital care, trauma surgery, and critical care. Lectures, real-life case

presentations, and interactive sessions engaged attendees and promoted improved patient outcomes.

CARDIOGENIC SHOCK AND RESUSCITATION SYMPOSIUM

The Scripps Cardiogenic Shock and Resuscitation Symposium comprehensive course was designed for those who care for patients with cardiogenic shock including cardiologists (interventional and advanced heart failure specialists), cardiothoracic surgeons, critical care and emergency department physicians, and advanced practice clinicians.

PULMONARY HYPERTENSION (PH)

This conference covered all forms of pulmonary hypertension. Expert faculty discussed the epidemiology of PH, how PH is diagnosed, and the poor outcomes associated with PH when left untreated.

ANNUAL NATURAL SUPPLEMENTS CONFERENCE

It is important for health care providers to receive timely, evidence-based information to address the risks and benefits of supplements with their patients. In this dynamic partnership with patients, providers also need information about regulatory issues, drug-nutrient interactions, dosing and product potency. To address these needs, faculty presented clinically relevant information on natural supplements in evidence-based practice, with an emphasis on disease states.

PRIMARY CARE SUMMER CONFERENCE (VIRTUAL)

Scripps Health's Primary Care Summer Conference was designed by primary care physicians for primary care physicians and their care team and presented content from their unique perspective.

STUDENT EXPERIENCES WITHIN SCRIPPS

Scripps commitment to ongoing learning and health care excellence extends beyond our organization. Our student programs help promote health care careers to a new generation, shape the future workforce and develop future leaders in our community.

Interacting with health care professionals in the field expands education outside the classroom. Scripps employees play an important role as preceptors by investing their time to create a valuable experience for the community. In Fiscal Year 2020, Scripps hosted 1,057 students within our system and provided 141,401 development hours spanning nursing and allied health settings. Table 5.1 provides a breakdown of Scripps health student placements by Scripps locations.

TABLE 5.1 SCRIPPS HEALTH STUDENT PLACEMENTS FOR FISCAL YEAR 2020

Scripps Health Location	NURSING			ANCILLARY			TOTAL		
	# of Students	Group Hours	Precepted Hours	# of Students	Group Hours	Precepted Hours	# of Students	Group Hours	Precepted Hours
Scripps Medical Foundation (Clinic & SCMC)	13	0	1217	124	0	23916	137	0	25,133
Scripps Memorial Hospital Encinitas	113	5023	2885	30	216	8347	143	5,239	11,232
Scripps Green Hospital	49	3366	1232	40	0	10753	89	3,366	11,985
Scripps Memorial Hospital La Jolla	146	4427	5549	85	1706	16257	231	6,133	21,806
Scripps Mercy Hospital, Chula Vista	66	6672	1229	37	288	10511	103	6,960	11,740
Scripps Mercy Hospital, San Diego	241	14804	2279	106	7952	12117	347	22,756	14,396
Scripps Home Health/Hospice	0	0	0	0	0	0	0	0	0
Scripps Health Administrative Services	0	0	0	6	0	576	6	0	576
Scripps Integrative Medicine	0	0	0	1	0	80	1	0	80
Total	628	34,292	14,391	429	10,162	82,557	1,057	44,454	96,947

COLLEGE AND UNIVERSITY AFFILIATIONS

Scripps collaborates with local high schools, colleges and universities to help students explore health care roles and gain firsthand experience as they work with Scripps professionals. Scripps is affiliated with more than 110 schools and programs, including clinical and nonclinical partnerships. Local schools include, but are not limited to, Point Loma Nazarene University (PLNU), University of California San Diego (UCSD), California State University San Marcos (CSUSM), San Diego State University (SDSU), University of San Diego (USD), Mesa College, San Diego City College, Grossmont College, Palomar College and Mira Costa College.

Scripps considers new partnerships, based on community and workforce needs, and maintains an affiliation agreement committee to review all requests and provide a systemwide approach to securing new students placements. This interdisciplinary committee represents education and department leadership across the Scripps system ensuring a proactive approach to building a career pipeline for top talent.

To ensure students from health care professions programs have access to appropriate educational experiences at Scripps and foster a smooth, efficient process for student placement requests receipt and management, Scripps is a member of the San Diego Nursing and Allied Health Service Education Consortium and American Databank's Complio online compliance tracking system.

RESEARCH STUDENTS

Scripps supports graduate research for masters and doctoral student at universities with affiliation agreements. Non-physician students who conduct research at Scripps represent a variety of health care disciplines, including public health, physical therapy, pharmacy and nursing. In Fiscal Year 2020, Scripps Research included students from USD, Western Governors University, SDSU, PLNU, Loma Linda University and postdoctoral pharmacy residency programs, including the PGY1 Pharmacy Residency Program.

SAN DIEGO ORGANIZATION OF HEALTHCARE LEADERS (SOHL)

Scripps sponsored the San Diego Organization of Healthcare Leaders (SOHL). This annual support makes it possible to offer many quality, cost-effective education, professional development and networking opportunities to healthcare leaders and aspiring leaders in San Diego and Imperial Counties.

DIABETES AND YOU (SAN DIEGO UNIFIED SCIENCE, TECHNOLOGY, ENGINEERING, ARTS AND MATH (STEAM))

The Scripps Whittier Diabetes Institute (SWDI) joined the "Diabetes & You" event hosted by The Salk Institute for Biological Studies and the San Diego Unified Science, Technology, Engineering, Arts, and Math (STEAM) Leadership Series on December 10. Over 300 high school juniors from six local schools attended this event, which was also livestreamed to increase reach. SWDI was invited to be part of the keynote speakers along with the Salk Institute, Diabetes Research Connection, and Chris Dudley (former NBA player and first one to play with Type 1 diabetes). Topics discussed included the prevalence of diabetes and prediabetes, disparities among different racial and ethnic groups, the importance of diabetes prevention, and discussed recent scientific research findings.

HIGH SCHOOL PROGRAMS

Scripps is dedicated to promoting health care as a rewarding career, collaborating with several high schools to offer student's opportunities to explore a role in health care and gain firsthand experience working with Scripps Health care professionals. Below is a summary of the high school programs Scripps made available to the community.

SCRIPPS HIGH SCHOOL EXPLORATION INTERNSHIP PROGRAM—HEALTH AND SCIENCE PIPELINE INITIATIVE (HASPI)

This program reaches out to San Diego high school students interested in exploring a career in health care. During their five-week rotation, the students visit Scripps Mercy Chula Vista, Scripps Mercy San Diego, Scripps Memorial Hospital La Jolla, Encinitas, and Green Hospital. The students view surgeries and shadow healthcare professionals in the emergency department, ICU, pharmacy, urgent care, internal medicine, pharmacy, ambulatory services, rehab therapy, patient logistics, lab and trauma. This internship program was cancelled for Fiscal Year 2020, due to COVID-19.

UNIVERSITY CITY HIGH SCHOOL COLLABORATION

University City High School and Scripps partnered to provide a real-life context to the school's Health Care Essentials course. For Fiscal Year 2020, 16 students were selected to rotate through five different Scripps locations, during the spring semester, to increase their awareness of health care careers. UC High students were exposed to different departments, exploring career options and learning valuable life lesson about health and healing. This internship program was suspended after March, due to COVID-19.

YOUNG LEADERS IN HEALTH CARE

An outreach program at Scripps Hospital Encinitas, Young Leaders in Health Care targets local high schools' students interested in exploring health care careers. Students in grades 9–12 participate in the program, which provides a forum for high school students to learn about the health care system and its career opportunities.

The mission of the Young Leaders in Health Care is:

- To provide a forum for high school's students to learn about the health care system and its breadth of career opportunities.
- Mentor students in the act of leadership giving them tools to use in their daily life challenges.
- Provide a service project to satisfy high school requirements and make a positive impact on the community.

- Provide a venue for a student-run competition where each school presents a topic in line with the year's goal.

This combined experience includes weekly meetings at local schools facilitated by teachers and advisors, as well as monthly meetings at Scripps Hospital Encinitas. The program mentors' students on leadership and provides tools for daily challenges. Each year the students work toward a final presentation based on their community service projects related to health care and wellness. The 2020 class touched a variety of topics from mental illness to the opioid crisis. More than 100 students, community members and health care specialists attended the Young Leader in Health Care final meeting, culminating with student presentations on types of cancer and treatments. Students that participate in the program are eligible to apply to the High School Explorer summer internship program. Meetings were suspended after March, due to COVID-19.

YOUTH EDUCATIONAL PROGRAM ACTIVITIES

Scripps is dedicated to building the future pipeline of health professionals. Scripps implements a wide variety of youth in health career activities. Through several internships and other educational programs, Scripps collaborates with high schools to offer students opportunities to explore a role in health care and gain first-hand experience working with Scripps health care professionals. Nurses and other clinical and non-clinical employees play important roles in these educational experiences, as the students are interacting with them daily through the programs. A total of 2,505 youth participated in these programs and more than 75% of youth are on a track for a health career. Due to COVID-19, all youth activities (mentoring, classroom presentations, hospital tours, surgery viewings) were cancelled due to school closures. Scripps discontinued all youth programs on and off site. During this time staff prepared and recorded videos on a variety of topics requested by the Sweetwater School District to be used for virtual and distance learning.

CAMP SCRIPPS SUMMER ENRICHMENT PROGRAM

Designed to introduce youth to health careers, this program developed a six-week virtual camp experience program (June 8, 2020 – July 17, 2020) to educate youth participants on the duties performed by health care professionals in various medical fields as well as other public health and social service topics. Participants participated in live virtual calls with Scripps Family Medicine residents and other staff

MENTORING PROGRAM

Designed to help high school students set a course for a successful career in health care, participants are paired virtually with various health and social service

professionals for hourly sessions twice a week for five weeks in a hospital setting. Students are exposed to a variety of duties and roles and various departments. Students learn first-hand from their mentors about the particulars of that department and position including the path they need to take to achieve a specific career goal in the healthcare field. Students also receive presentations on various health careers and job readiness. Family Medicine residents are mentors for this program and meet with the students weekly. Students will shadow residents during rounds and throughout the experience.

HEALTH PROFESSIONALS IN THE CLASSROOM

Health care professionals, such as medical residents, dietitians, nurses and doctors, enlighten students on health care careers and health related topics. These are interactive virtual sessions on nursing 101, doc 101, health and nutrition, stroke prevention, breast health, teen pregnancy, substance use, STDs, health professions 101 and mental health issues that impact high school students. Students receive health career tools/brochures that include information on education requirements, scholarships and way to pay for college.

SURGERY VIEWING

Interested students have an opportunity to observe elective surgeries such as total knee and hip replacements. Students can interact and ask on the spot questions of surgeons. This program has been placed on hold due to COVID-19.

SCHOOL BASED CLINICS

Three health clinics at Palomar, Southwest High School and Hoover High School are established for medical residents to gain additional skills in adolescent medicine and for youth to gain the knowledge, attitudes, and skills necessary to pursue health careers. Designed by students, Family Medicine residents and faculty based on youth needs assessment surveys, residents and students interact twice per week at the clinic providing adolescent medicine. Due to COVID-19, this program was put on pause in mid-March.

HEALTH PROFESSIONS EDUCATION, RESIDENT AND STUDENT TRAINING

Scripps Mercy Chula Vista Well Being Center works closely with Scripps Family Medicine Residency Program to provide and expand community medicine opportunities for residents to deliver services, to place medical students in community health activities and to coordinate community experiences for visiting/rotating residents and medical students. The Well Being Center also coordinates and provides opportunities for

individuals to participate in Health Career Talks, Health Training community activities and Balint support groups. A total of 843 health professionals have been trained.

The COVID-19 pandemic brought significant changes to resident education and patient care in the Scripps Family Medicine Residency Program at Scripps Mercy Chula Vista. The program quickly adapted to meet the needs of South Bay with high rates of COVID-19 infection. All educational and training conferences shifted to virtual modalities. Some of the resident education included presentations and town hall style workshops that address pathophysiology of coronavirus infection in adults, children and pregnant women, appropriate PPE use, testing algorithms, and health disparities in relation to COVID-19 infections. The residents have continued to meet the needs of patients at the clinic both in-person and via telehealth. Family Medicine residents have played a supporting role in the care of hospitalized patients with COVID-19, including in the ICU and Labor and Delivery.

[INTERNS AND AREA HEALTH EDUCATION SCHOLARS PROGRAM \(AHEC\)](#)

Scripps Mercy Hospital Chula Vista Well Being Center serves as an internship placement site for both undergraduate and graduate students. This education training program is designed to raise the numbers, types, diversity and retention of primary health and social service care professionals working in underserved areas. A total of nine students completed their internship. Fields of study include undergrad social work, undergrad public health, master's in social work and master's in public health from San Diego State University; four interns also completed the Area Health Education Center Scholar Program which is a combination of clinic and didactic online training.

[HEALTH RESEARCH](#)

[TRAUMA RESEARCH GRADUATE STUDENT INTERNSHIP](#)

The Trauma Research Graduate Student Internship is designed to provide students in the UCSD Clinical Research Enhancement through Supplemental Training (CREST Program) with experience in managing clinical research while also providing them with opportunities to apply their knowledge in medical statistics and epidemiology to the patient population. Students learn to construct study samples, clean data, analyze data, and write manuscripts for submission to medical journals. The rotation is conducted at Scripps Mercy Hospital San Diego.

[COVID-19 RESEARCH](#)

The following are COVID-19 research efforts that generated generalizable knowledge and were made available to the public. From education and prevention to research news, Scripps is committed to keeping the community up to date on the battle against

COVID-19. Projects are being led by Scripps Health or co-led by Scripps Clinical and Translational Science Award (CTSA) supported investigators.

SCRIPPS HUB ACADEMIC RESEARCH CORE (SHARC)

The Scripps Hub Academic Research Core (SHARC) team is a partnership between the Scripps Research Translational Institute and Scripps Health (housed in the Scripps Whittier Diabetes Institute). The Scripps Hub is one of 60 sites around the country that are supported by the NIH's Clinical and Translational Science Award (CTSA), with a focus on improving the process of translating research from bench-side to practice. Within this hub, the SHARC team aims to support translational research at Scripps Health and the Scripps Research Translational Institute in the following ways:

- Research navigation – Provide assistance through the grant process (from pre- to post-award) and with research implementation, especially for junior or new investigators
- Statistical support – Provide statistical support for designing the study, from sample size and power calculations through data analysis and presentation
- Community engagement – Encourage bidirectional communication between communities and researchers to foster participation in research, sharing and discussion of research questions and findings, and improve community health

VIRTUAL COMMUNITY TOWN HALLS ON COVID-19 RESEARCH

The Scripps Hub Academic Research Core (SHARC) is supported by the Clinical and Translational Science Award (CTSA) Program, which is funded by the National Institutes of Health. The CTSA seeks to speed up the development of new resources and treatments to help improve the health of individuals and the general public. The SHARC team is available to provide knowledge, skills, and resources in community and collaboration, statistics, and how to navigate a research grant. The team is a collaboration between the Scripps Research Translational Institute and Scripps Health.

In August, 2020, Scripps Hub Academic Research Core, Scripps Research and the San Diego County COVID-19 Health Equity Task Force collaborated on a 3-part series of virtual community town halls to discuss topics such as the disproportionate impact of COVID-19 on diverse communities, the importance of being represented in COVID-19 research (such as the local vaccine trials and plasma study, how contact tracing works, and what county resources are available to stay safe and healthy during this time. Over 300 community members registered for the series. Each town hall (provided in English,

Spanish, and Tagalog) had time for Q&A moderated by the San Diego Union Tribune’s biotech reporter.

[SCRIPPS WHITTIER INSTITUTE FOR DIABETES – DULCE DIGITAL-COVID AWARE \(DD-CA\) DISCHARGE TEXTING PLATFORM FOR US/MEXICO BORDER HISPANICS WITH DIABETES + COVID-19](#)

The Scripps Whittier Institute for Diabetes received grant approval by the National Institutes for Health (NIH) for the “Dulce Digital-COVID Aware Discharge (DD-CA)” – a texting platform for US/Mexico border Hispanics with diabetes and COVID-19. “The primary goal of DD-CA is to use a texting platform to improve communications to guide recently discharged patients with diabetes. The Dulce Digital-COVID Aware Discharge (DD-CA) program aims to improve glucose control and reduce readmission rates and COVID-19 transmission after patients leave the hospital. DD-CA combines culturally and linguistically relevant diabetes and COVID-19 educational messaging with glucose management support in a low-cost, easily adoptable platform to address specific barriers in underrepresented Hispanic and Latino communities.

[NATIONAL INSTITUTE OF HEALTH \(NIH\) COMMUNITY ENGAGEMENT ALLIANCE \(CEAL\)](#)

The National Institutes of Health (NIH) launched the Community Engagement Alliance (CEAL) Against COVID-19 Disparities to provide COVID-19 outreach and engagement to racial/ethnic minority communities that have been disproportionately impacted by the pandemic and are underrepresented in clinical trials. CEAL’s mission is to provide trustworthy information through active community engagement and outreach to the people hardest-hit by the COVID-19 pandemic, including African Americans, Hispanic/Latinos and American Indians/Alaska Natives, with the goal of building long-lasting partnerships as well as improving diversity and inclusion in research response to COVID-19.

CEAL awards were made to eleven different statewide teams, including California. Scripps Health, represented by the Scripps Hub Academic Research Core (SHARC) team, has partnered with the San Diego County COVID-19 Equity Task Force to reach San Diego communities as part of the California CEAL Team award. The SHARC team has previously partnered with the task force to deliver virtual community town halls on COVID-19 and will continue to provide outreach through virtual events and safely redesigned health and resource fairs to assess COVID-19 knowledge and perceptions about clinical trials. Supporting this NIH-wide effort are the National Institute of Minority Health and Health Disparities (NIMHD) and the National Heart, Lung, and Blood Institute (NHLBI).

CONVALESCENT PLASMA THERAPY STUDY

During the early period of the pandemic, small studies suggested that COVID-19 patients could benefit from convalescent plasma, which is blood plasma obtained from patients who have recovered from the virus and has protective antibodies. The Mayo Clinic is conducting a nationwide convalescent plasma therapy study in which plasma donated by recovered patients is transfused into high-risk or severely ill COVID-19 patients. Another multicenter national study, PassItOn (Passive Immunity Trial for Our Nation), is a randomized study that tests convalescent plasma in hospitalized COVID-19 patients; one group receives the plasma, while a control group receives fluids with vitamins. Scripps Health is participating in both studies. To learn more about these studies, visit <https://www.uscovidplasma.org> and <https://passitonstudy.org>.

COVID RELATED WEBINARS AND MEET THE DOC SESSIONS IN SOUTH BAY

Scripps Mercy Hospital Chula Vista Well Being Center partners with Chula Vista Community Collaborative (CVCC) to train *Promotoras* on COVID-19. The objective is to train *Promotoras* to disseminate information on preventing the spread COVID-19 South Bay communities.

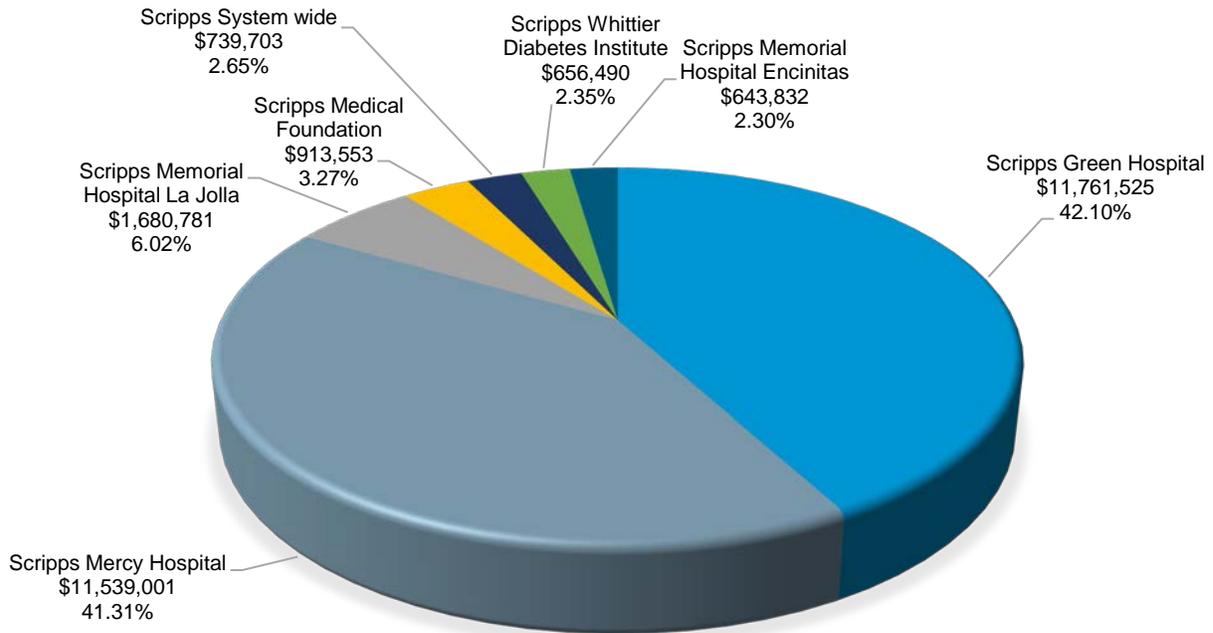
The virtual interactive training sessions were recorded live and available for later viewing. Participants interested in helping spread the COVID-19 information were able to receive a stipend from the grant. Participants shared information with friends and relatives and through their social media platforms; in total, the training reached more than 1,000 individuals.

Following the training, Scripps Family Practice Residency program offered five virtual Meet the Doc sessions to the community. Presentation titles included COVID-19 and Disparities, COVID-19: How the Virus Spreads, COVID-19: The Effect in Children, and COVID-19: Masks and Symptoms. Nearly 200 individuals joined the sessions virtually to learn about COVID-19-related topics from Scripps medical residents.

Figure 5.1

Fiscal Year 2020

SCRIPPS PROFESSIONAL EDUCATION & HEALTH RESEARCH BY OPERATING UNIT, \$27,934,884



PROFESSIONAL EDUCATION AND HEALTH RESEARCH

This graph reflects clinical research, as well as professional education for non-Scripps employees, including graduate medical education, nursing resource development and other health care professional education. Research takes place primarily at Scripps Clinical Research Services, Scripps Whittier Diabetes Institute, Scripps Genomic Medicine and Scripps Translational Science Institute. Calculations are based on cost less “direct offsetting revenue”, which includes any revenue generated by the activity or program, such as payment or reimbursement for services provided to program patients. According to the Schedule H 990 IRS guidelines, “direct offsetting revenue” also includes restricted grants or contributions that organization uses to provide a community benefit.

SCRIPPS PROFESSIONAL EDUCATION & HEALTH RESEARCH SUMMARY LIST

SCRIPPS PROFESSIONAL HEALTH EDUCATION

Programs	Persons Served	Staff Hours	Volunteer Hours	Financial Support*
Advanced Cardiac Life Support (ACLS) Renewal Course	8	47	0	\$1,347
Basic Life Support for Healthcare Provider Online Skills Check	16	32	0	\$792
Basic Life Support for Healthcare Provider - Initial	2	10	0	\$397
Basic Life Support for Healthcare Provider - Renewal	1	5	0	\$199
Continuing Medical Education Programs	1,838	0	0	\$0
Health Professions Training	1,400	1,956	8,269	\$52,523
Maternal Child Health (MCH) Nursing Students Rotation	39	1,112	0	\$15,416
Navy Research Fellow Research Program - Program Administration & Research	0	282	0	\$21,917
Neonatal Resuscitation Program (NRP)	4	24	0	\$896
Nursing Student Education Rotations	2	56,195	0	\$4,487,305
Pharmacy Residency	0	31,931	0	\$2,096,071
Physical Therapist and Physical Therapy Assistant Student Program	3	204	0	\$13,151
Student Preceptorships at Cardiac Treatment Center	3	164	0	\$10,335
Trauma Research Graduate Student Internship Program	0	156	0	\$12,640
Scripps Health Professional Education Totals FY 20	3,316	92,118	8,269	\$6,712,991

* "Financial Support" reflects the cost (labor, supplies, overhead, etc.) associated with the program/service less direct revenue. This figure does not include a calculation for physician and staff volunteer hours. In some instances, an entire community benefit program cost center has been divided between several initiatives.

SCRIPPS GRADUATE MEDICAL EDUCATION

Programs	Persons Served	Staff Hours	Volunteer Hours	Financial Support*
Scripps Family Medicine Residency Program	0	70,438	0	\$2,806,678
Scripps Green Hospital GME Program	0	198,454	0	\$11,349,538
Scripps Mercy Hospital GME Program	0	172,489	0	\$5,309,019
Scripps Graduate Medical Education Totals FY 20	0	441,382	0	\$19,465,235

* "Financial Support" reflects the cost (labor, supplies, overhead, etc.) associated with the program/service less direct revenue. This figure does not include a calculation for physician and staff volunteer hours. In some instances, an entire community benefit program cost center has been divided between several initiatives.

SCRIPPS HEALTH RESEARCH

Programs	Persons Served	Staff Hours	Volunteer Hours	Financial Support*
Clinical Research Services	0	62,813	0	\$682,103
Community Town Hall on COVID Research	710	617	0	\$0
Convalescent Plasma Therapy Study	100	0	0	\$0
COVID Related Webinars & Meet the Doctor Sessions	100	0	0	\$0
IRB 11-5716 Impact of a More Conservative Approach to CT Scanning in the Trauma Patient	0	2	0	\$162
IRB 11-5782 The Value of Ultrasound Imaging Surveillance for Venous Thromboembolic Disease in Trauma Patients	0	22	0	\$1,783
IRB 11-5786 Proposal to Initiate & Maintain a Multicenter Registry for the Purpose of Determining the Comparative Effectiveness of Risk Assessment, Prophylaxis, Surveillance, and Treatment of Venous Thromboembolism in Trauma Patients	0	4	0	\$324
IRB 12-6045 AAST Vascular Trauma Registry - PROOVIT	0	16	0	\$951
IRB 13-6219 Path to the Operating Room (OR): Need for CT Scan of the Torso in Trauma Patients Who Require Laparotomy for Blunt or Penetrating Trauma	0	2	0	\$162
IRB 15-6652 Geriatric Trauma Care & Outcomes Registry Study	0	40	0	\$3,241
IRB 15-6721 Epidemiology, Injury Control, Treatments, Outcomes, Value of Care, and Performance Improvement	0	2,032	0	\$119,536
IRB 16-6744 Outcomes & Trends in Traumatic Injury & Surgical Critical Care (OSHPD)	0	1,950	0	\$128,663
IRB 16-6752 Characterizing Mortality Following Severe Trauma Injury @ San Francisco General Hospital	0	2	0	\$162
IRB 18-7126 The Pathogenesis of Post Traumatic PE: A Prospective Multicenter Investigation by the CLOTT Study Group: Part 1	0	1,075	0	\$53,453
IRB 18-7165 Current Diagnosis & Management of Pancreatic Injuries - Western Trauma Association Multi-Center Trial	0	109	0	\$5,277
IRB 18-7188 Blunt Bowel & Mesenteric Injury: A WTA Multicenter Prospective Observational Study	0	68	0	\$3,301
IRB 19-7412 Surgical Device Reporting and the FDS: MAUDE vs ASR	0	201	0	\$15,906
IRB 19-7421 Hospital Readmissions: Use of the Nationwide Readmissions Database	0	226	0	\$18,311
IRB 7249 Penetrating Thoracic Trauma Management: Epidemiology & Outcomes from a Nationwide Perspective	0	932	0	\$64,402

Programs	Persons Served	Staff Hours	Volunteer Hours	Financial Support*
IRB: Vulnerability of CA Trauma Centers	0	30	0	\$2,431
Professional Education and Health Services: Scripps Whittier Diabetes Institute Federal Grants	0	27,638	0	\$656,490
Scripps Health Research Totals FY 20	910	97,779	0	\$1,756,659
Scripps Professional Education, Graduate Medical Education and Health Research Totals FY 20	4,226	631,279	8,269	\$27,934,884

* "Financial Support" reflects the cost (labor, supplies, overhead, etc.) associated with the program/service less direct revenue. This figure does not include a calculation for physician and staff volunteer hours. In some instances, an entire community benefit program cost center has been divided between several initiatives.

Section 6

**Scripps Memorial Hospital
La Jolla**

SCRIPPS MEMORIAL HOSPITAL LA JOLLA

ABOUT SCRIPPS MEMORIAL HOSPITAL LA JOLLA



Located in North Central San Diego County, Scripps Memorial Hospital La Jolla provides health care services for 16.7 percent of the inpatient population living in the hospital's 50 percent service area. Today, the hospital has 432 licensed beds and 2,867 employees.

Scripps La Jolla provides a wide range of clinical and surgical services, including intensive care, interventional cardiology and radiology, radiation oncology, cardiothoracic and orthopedic services, neurology, ophthalmology, and mental health and psychological services, as well as skilled nursing. As one of six designated trauma centers, and one of 19 emergency departments, in San Diego County, Scripps La Jolla is a critical part of the county's emergency service network.

Within the hospital's service area, Scripps La Jolla cares for 18.9 percent of Medicare patients, 5.9 percent of Medi-Cal patients, 18.6 percent of commercially insured patients and 12.9 percent of patients with other payment sources, including self-pay and charity care.

In addition to acute care services, a wide range of specialty services and programs are located on the hospital's campus, including the Cardiac Treatment Center, Imaging Center, and Scripps Polster Breast Care Center.

DISTINGUISHING PROGRAMS AND SERVICES

- Prebys Cardiovascular Institute
- Emergency Department
- Gamma Knife Center of San Diego
- Neonatal Intensive Care Nursery (operated by Rady Children's Hospital)
- Scripps Polster Breast Care Center
- Scripps Center for Women's Health
- Scripps Mericos Eye Institute
- Scripps MD Anderson Cancer Center (programs/services referenced in Section 12)
- Trauma Center
- Primary Stroke Center designated by The Joint Commission

SCRIPPS MEMORIAL HOSPITAL LA JOLLA 2021 COMMUNITY BENEFIT PLAN; FISCAL YEAR 2021

The Scripps Memorial Hospital La Jolla 2021 Community Benefit Plan describes the overall Scripps community benefit goal and the hospital's objectives and strategies to support community health during Fiscal Year 2021 (October 2020 to September 2021).

THE SCRIPPS 2021 COMMUNITY BENEFIT GOAL

Make a measurable impact on the health status of the community through improved access to care, health improvement programs, and professional education and health research.

SCRIPPS LA JOLLA FISCAL YEAR 2021 COMMUNITY BENEFIT OBJECTIVES

COMMUNITY HEALTH SERVICES

CANCER OUTREACH, EDUCATION AND SUPPORT

The Polster Breast Cancer Center will offer a series of breast health education, support and treatment programs including:

- Continuing to provide education and support services in collaboration with the Rehabilitation Department for those who are experiencing or are at risk for lymphedema.
- Continuing to provide education and support for breast health by participating in community events and health fairs.
- Continue to provide education and support for breast health by supporting Young Women's Breast Cancer Support Group bimonthly meetings for women under forty.

GENERAL HEALTH EDUCATION AND WELLNESS INITIATIVES

- Continue to sponsor community based support groups for breastfeeding, cardiac, cancer, lymphedema, gynecological, aphasia, grand parenting classes, Parkinson's voice class, Parkinson's exercise class, pelvic floor wellness, fall prevention, home safety, healing touch workshops and diabetes at Scripps La Jolla and community sites.
- Coordinate four blood drives at the Scripps La Jolla campus on behalf of the American Red Cross.
- Work with other nonprofit community organizations, such as American Heart Association and Rady Children's Hospital to promote healthy behaviors.

- Support Scripps nursing in services and community-based medical outreach activities and physical therapy internships.
- Support nursing school programs by offering observations of maternal child health programs for student nurses.

HEART HEALTH AND CARDIOVASCULAR DISEASE

Enhance cardiac health education and prevention efforts in North Central San Diego County by:

- Offer education targeting women to increase public awareness about the advances in women's health care.
- Offer cardiac education programs for the community, focusing on current heart treatment options.
- Offer a continuous twelve-week pulmonary education program.
- Provide monthly programs for heart patients, including lectures on various topics and to provide a supportive atmosphere for participants to work on stress management techniques dealing with chronic illness through The Cardiac Treatment Center Life Project.
- Offer programs complementary to living with chronic illness, including heart and lung disease that will promote well-being.

MATERNAL CHILD HEALTH EDUCATION

- Continue to provide prenatal, postpartum and parenting education programs for low-income women throughout San Diego County.
- Offer 1,200 maternal child health classes throughout San Diego County to enhance parenting skills. Low-income women in the County of San Diego can attend classes at no charge or on a sliding fee schedule. Military discount is provided.
- Maintain the existing prenatal education services in the county, ensuring that programs demonstrate a satisfaction rating higher than 90 percent.
- Continue to offer six breastfeeding support groups throughout the county on a weekly basis (includes two with bilingual services).
- Offer six maternal child health education classes for grand parenting in San Diego County.
- Offer quarterly dogs and babies safety education program for expectant parents and families.
- Offer pelvic floor postpartum education for new mothers.
- Offer pelvic floor parental education for expectant women.

UNINTENTIONAL INJURY AND VIOLENCE

- Provide at least two safety education programs for older adults through Trauma Services focusing on balance improvement and fall prevention.
- Provide at least two educational programs emphasizing controlling bleeding. This is a national campaign to cultivate grassroots efforts that encourage bystanders to become trained, equipped, and empowered to help in a bleeding emergency before professional help arrives.
- Provide at least four Beach Area Community Educational classes. This collaboration with the SDPD, Parks and Recreation; District Attorney's Office and Discover Pacific Beach is an educational program for first time offenders for quality of life crimes. Education is provided to the participants regarding these quality of life crimes and their effects on the community, the effects of smoking and alcohol consumption and the rules and regulations for the beach community.

PROFESSIONAL EDUCATION AND HEALTH RESEARCH

- Continue to function as a premier site for nursing clinical rotations for all nursing programs in San Diego County; expand student exposure to outpatient and nontraditional patient care areas.
- Provide preceptor experiences to nursing students in several nursing practice roles: educator, clinical specialist, manager staff nurse.
- Continue to offer a robust student nurse externship program.
- Provide clinical education experiences for allied health students such as OT, PT, RCP, radiographers, surgical technicians and clinical social workers.

UNCOMPENSATED CARE

During Fiscal Year 2021, Scripps La Jolla will continue to provide health care services for vulnerable patients who are unable to pay.

- Maintain, communicate and effectively administer the Scripps financial assistance policy in a manner that meets patients' needs.
- Assure that care is available through the emergency department and trauma center, regardless of a person's ability to pay.
- Provide maternal child health programs for expectant families at a reduced rate via a sliding fee or no charge if enrolled in Medi-Cal.

SCRIPPS MEMORIAL HOSPITAL LA JOLLA 2021 COMMUNITY BENEFIT REPORT; FISCAL YEAR 2020

The Scripps La Jolla Community Benefit Report is an account of the hospital's dedication and commitment to improving the community's health, detailing programs that have provided benefit over and above standard health care practices in Fiscal Year 2020 (October 2019 to September 2020).

FOSTERING VOLUNTEERISM

In addition to the financial community benefit contributions made during Fiscal Year 2020, Scripps La Jolla employees and affiliated physicians donated a significant portion of their personal time volunteering to support Scripps sponsored community benefit programs. With close to 83 volunteer hours, it is estimated that the dollar value associated with this volunteer labor is \$4,383.⁴¹

MAKING A FINANCIAL COMMITMENT

During Fiscal Year 2020, Scripps La Jolla devoted **\$95,080,617** to community benefit programs, including uncompensated health care, community health services, professional education and health research.

The programs offered by Scripps La Jolla emphasize community-based prevention efforts and use innovative approaches to reach residents at greater risk for health problems.

COMMUNITY BENEFIT SERVICES HIGHLIGHTS

Community Benefit Financial Commitment

\$95,080,617

Community Benefit Services

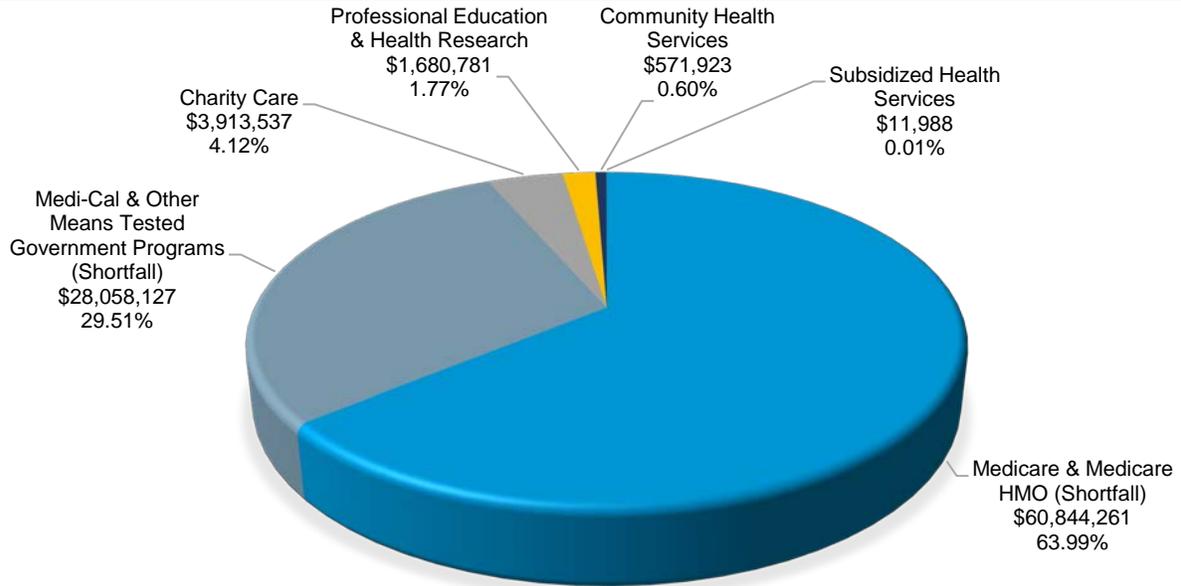
Charity Care	\$3,913,537
Community Health Services	\$571,923
Medi-Cal & Other Means Tested Shortfall	\$28,058,127
Medicare & Medicare HMO Shortfall	\$60,844,261
Professional Education & Research	\$1,680,781
Subsidized Health Services	\$11,988
Refer to Figure 6.1 presented on the following page for a graphic representation of Fiscal Year 2020	

⁴¹ Calculations based upon an average hourly wage for the Scripps Health system plus benefits.

Figure 6.1

Fiscal Year 2020

SCRIPPS MEMORIAL HOSPITAL LA JOLLA COMMUNITY
BENEFIT SERVICES DISTRIBUTION \$95,080,617



Community Benefits Services (Provider Fee Impact)	Charity Care	Medi-Cal (Shortfall)	Medicare & Medicare HMO (Shortfall)	Community Health Services	Prof Ed & Health Research	Subsidized Health Services	Total
Before Provider Fee	\$3,913,537	\$21,628,531	\$60,844,261	\$571,923	\$1,680,781	11,988	\$88,651,021
Provider Fee	-	\$6,429,596	-	-	-	-	\$6,429,596
Net After Provider Fee	\$3,913,537	\$28,058,127	\$60,844,261	\$571,923	\$1,680,781	11,988	\$95,080,617

COMMUNITY BENEFIT SERVICES

Community benefit services include those programs offered to the community that go above and beyond what is provided as a normal part of patient care. Scripps divides community benefit services into three categories, including uncompensated health care, community health services and professional education and health research. Uncompensated care includes charity care, bad debt, and Medi-Cal and Medicare shortfalls.

SCRIPPS LA JOLLA COMMUNITY HEALTH SERVICES, FISCAL YEAR 2020

COMMUNITY HEALTH SERVICES HIGHLIGHTS

Community health services include prevention and wellness programs such as screenings, health education, support groups and health fairs which are supported by operational funds, grants, in-kind donations and philanthropy. These programs are designed to raise public awareness and understanding of, and access to, identified community health needs (refer to Section 2, Community Health Needs Assessment).

During Fiscal Year 2020 (October 2019 to September 2020) Scripps La Jolla invested \$571,923 in community health services. This figure reflects the costs associated with providing community health improvement activities, including salaries, materials and supplies, minus billable revenue. This section highlights some of Scripps La Jolla Fiscal Year 2020 community health services achievements.

PROFESSIONAL EDUCATION AND HEALTH RESEARCH HIGHLIGHTS

Quality health care is highly dependent upon health education systems and medical research programs. Without the ability to train and inspire a new generation of health care providers, or offer continuing education to existing health care professionals, the quality of health care would be greatly diminished. Each year, Scripps La Jolla advances health care services through professional education programs. To enhance service delivery and treatment practices for San Diego county, Scripps La Jolla invested \$1,680,781⁴² in professional training and research programs during Fiscal Year 2020 (October 2019 to September 2020). This section highlights some of Scripps La Jolla professional education activities.

Scripps La Jolla is a rotation site for nursing students in virtually all clinical areas of the hospital. Support training and clinical rotations were provided in radiation oncology, the cardiac treatment center, the intensive care unit, labor and delivery, Scripps Polster Breast Care Center, the emergency department, operating room, the rehabilitation department, maternal child health and other areas. Scripps La Jolla supported clinical instruction and practice affiliations for non-nursing students. In addition, Scripps La Jolla provided clinical and non-clinical experiences in rehab services, respiratory care, radiology, cardiovascular lab, social services, food and nutrition services, executive health, maternal child health education, lactation services and cardiac treatment center.

⁴² Reflects clinical research as well a professional education for non-Scripps employees, nursing resource development and other health care professional education. Research primarily take place at Scripps Clinical Research Services, Scripps Whittier Diabetes Institute, Scripps Genomic Medicine and Scripps Translational Science Institute. Calculations based on total program expenses.

PHARMACY RESIDENCY PROGRAM

Scripps La Jolla offers four 12-month ASHP accredited postgraduate year one (PGY-1) pharmacy residency positions. The residency program focuses on pharmacotherapy, teaching, and research in a decentralized clinically pharmacy practice setting. Both core and elective experiences are offered in a variety of clinical specialties and services. The pharmacy department is open 24/7 and includes a central pharmacy, two OR satellite pharmacies and many decentralized clinical service areas. Our clinical pharmacists provide a broad range of clinical services, carry out pharmacist driven medication protocols, and practice under prescriptive authority granted by the Pharmacy and Therapeutics Committee. Scripps La Jolla is affiliated with multiple schools of pharmacy and annually trains 20–25 PharmD candidates. Graduates of this program are prepared to practice in tertiary academic or community hospital settings and adjunct faculty positions, as well as pursue further training such as postgraduate year two (PGY-2) residency or fellowship.

SCRIPPS MEMORIAL HOSPITAL LA JOLLA COMMUNITY BENEFIT SERVICES SUMMARY LIST

Programs	Persons Served	Staff Hours	Volunteer Hours	Financial Support*
A Matter of Balance: Managing Concerns About Falls	288	34	0	\$1,599
Beach Area Community Court Program	282	16	0	\$1,296
Better Breathers Support Group	36	6	0	\$333
Blood Drive - American Red Cross	31	0	0	\$0
Breastfeeding Support Group	1,335	2,178	0	\$39,322
Cardiac Dietary Counseling - Community Education Program	557	142	0	\$8,384
Cardiac Tai Chi - Fitness Program	503	0	0	\$0
Cardiac Treatment Center Group Exercise Programs	2,975	999	0	\$66,884
Cardiac Treatment Center Life Project	103	15	0	\$889
Charity Care	0	0	0	\$3,913,537
Collaborative San Diego County Stroke Center Community Messaging Campaign	26,727	10	0	\$630
Community Health Education Lecture Series	122	6	5	\$378
County of San Diego - Love Your Heart Blood Pressure Screenings	73	4	0	\$252
CPR Classes for Patients and Families of the Cardiac Treatment Center	4	3	0	\$419
Dogs and Babies -Child Safety and Prevention Education Program	49	104	0	\$3,993
Fall Prevention & Home Safety Workshop	2,456	96	0	\$5,750
Fitball: Core Conditioning Class - Adult/Senior Fitness Class	241	46	0	\$2,554
Getting Ready for Baby - Child Safety and Prevention Class	540	1,145	54	\$50,682
Grandparenting Today - Child Safety and Prevention Class	104	18	0	\$999
GRASP - Grief Recovery After a Substance Passing	22	206	0	\$11,342
Greater La Jolla Meals on Wheels	5,099	0	0	\$832
Gynecological Cancer Support Group	182	1,706	0	\$95,424
Healing Touch Educational Programs	29	61	0	\$2,258
In Lieu of Funds	0	0	0	\$215,706
Maternal Child Health (MCH) Nursing Students Rotation	39	1,112	0	\$15,416
Medi-Cal and Other Means Tested Government Programs***	0	0	0	\$28,058,127
Medicare and Medicare HMO**	0	0	0	\$60,844,261
Meditation Class - Wellness Program - Cardiac Treatment Center	448	88	0	\$7,345
<p>* "Financial Support" reflects the cost (labor, supplies, overhead, etc.) associated with the program/service less direct revenue. This figure does not include a calculation for physician and staff volunteer hours. In some instances, an entire community benefit program cost center has been divided between several initiatives.</p> <p>**Community building activities, bad debt and Medicare shortfall do not count as community benefits under the Schedule H 990 but are still reportable outside the community benefit table.</p> <p>*** Hospital provider fee was reported as offsetting revenue from Medi-Cal.</p>				

Programs	Persons Served	Staff Hours	Volunteer Hours	Financial Support*
National Alliance of Mental Illness (NAMI) Siblings Support	46	431	0	\$23,716
Nursing Student Education Rotations	0	9,554	0	\$769,759
Nursing Student Rotation Education	2	10	0	\$630
Parkinson's Boot Camp 101	150	17	7	\$957
Parkinson's LSVT (Lee Silverman Training) Big Exercise	23	4	0	\$372
Parkinson's Maintenance Class for Voice	42	8	0	\$504
Pelvic Floor Wellness: Prenatal and Postnatal	26	55	0	\$2,920
Pharmacy Residency	0	13,536	0	\$871,489
Physical Therapist and Physical Therapy Assistant Student Program	3	204	0	\$13,151
Pulmonary Cardiac Class	362	54	0	\$2,998
Scripps Aphasia Communication Group	40	11	0	\$693
Scripps Memorial Hospital La Jolla Medical Library	0	315	0	\$15,782
Sibling Preparation Class - Child Safety and Prevention Class	16	34	0	\$1,998
Student Preceptorships at Cardiac Treatment Center	3	164	0	\$10,335
Subsidized Health Services	0	0	0	\$11,988
Trauma Education Programs	699	54	17	\$3,164
Ventricular Assist Device (LVAD) Support Group	85	4	0	\$252
Young Women's Breast Cancer Support Group	22	21	0	\$1,292
Scripps Memorial Hospital La Jolla Totals FY 20	43,764	32,470	83	\$95,080,617
<p>* "Financial Support" reflects the cost (labor, supplies, overhead, etc.) associated with the program/service less direct revenue. This figure does not include a calculation for physician and staff volunteer hours. In some instances, an entire community benefit program cost center has been divided between several initiatives.</p> <p>**Community building activities, bad debt and Medicare shortfall do not count as community benefits under the Schedule H 990 but are still reportable outside the community benefit table.</p> <p>*** Hospital provider fee was reported as offsetting revenue from Medi-Cal.</p>				

Section 7

Scripps Memorial Hospital
Encinitas

SCRIPPS MEMORIAL HOSPITAL ENCINITAS

ABOUT SCRIPPS MEMORIAL HOSPITAL ENCINITAS



Located along the coast of San Diego's North County, Scripps Memorial Hospital Encinitas provides health care services of the inpatient population living in the hospital's 26.4 percent service area within the hospital's North County West service area. Today the hospital has 193 licensed beds and 1,657 employees.

Scripps Encinitas provides a wide range of acute clinical care services including, but not limited to, 24-hour emergency services, intensive care, cancer/oncology, nuclear medicine, radiology, orthopedics, neurology, urology and acute care rehabilitations services. Within its service area, Scripps Encinitas cares for 33.1 percent of Medicare patients, 15.8 percent of Medi-Cal patients, 23.4 percent of commercially insured patients, and 26.7 percent of patients with other payment sources, including self-pay and charity care.

DISTINGUISHING PROGRAMS AND SERVICES

- 24-hour emergency services
- Neurological care services
- Primary stroke center designated by The Joint Commission
- Spine and Joint replacement programs
- Palliative care program

LEICHTAG FAMILY BIRTH PAVILION

- Neonatal intensive care nursery (operated by Rady Children's Hospital)
- Perinatal support program
- San Diego County's first World Health Organization designated "baby-friendly" hospital

WOMEN'S IMAGING SERVICES

- Digital mammography
- Bone density test (Densitometry or DEXA Scan)
- Ultrasound
- Magnetic Resonance Imaging (MRI)
- Breast Specific Gamma Imaging (BSGI)

SCRIPPS MEMORIAL HOSPITAL ENCINITAS 2021 COMMUNITY BENEFIT PLAN; FISCAL YEAR 2021

The Scripps Memorial Encinitas 2021 Community Benefit Plan describes the overall Scripps community benefit goal and the hospital's objectives and strategies to support community health during Fiscal Year 2021 (October 2020 to September 2021).

THE SCRIPPS 2021 COMMUNITY BENEFIT GOAL

Make a measurable impact on the health status of the community through improved access to care, health improvement programs, and professional education and health research.

SCRIPPS ENCINITAS FISCAL YEAR 2021 COMMUNITY BENEFIT OBJECTIVES

COMMUNITY HEALTH SERVICES

- Continue to coordinate quarterly blood drives on behalf of American Red Cross at Scripps Encinitas.
- Continue to offer bereavement support group, which is facilitated by a licensed professional, which meets twice a month and is free and open to the community.
- Continue to offer breast cancer support group, which is facilitated by a licensed professional, meets twice a month and is free and open to the community.
- Continue to offer stroke and brain injury support group, which is facilitated by a licensed professional, meets twice a month and is free and open to the community.
- Continue to support the Young Leaders in Health Care program, which involves local area high school students such as (San Dieguito Academy, La Costa Canyon, High Tech High San Marcos, Carlsbad High School, Torrey Pines, Canyon Crest Academy, Vista High and Pacific Ridge). The program gathers monthly from October through May at the hospital to discuss the health care system, explore career opportunities, meet medical professionals and develop service projects to implement in their school communities. The program mentors' students on leadership and provides tools for daily challenges. Each year the students work toward a final presentation based on their community service projects related to health care and wellness.

PROFESSIONAL EDUCATION AND HEALTH RESEARCH

- Support California State San Marcos and Palomar College nursing school programs by providing a supportive educational environment for their clinical nursing rotations.
- Provide clinical education experiences for health students studying physical, occupational and speech therapy.
- Continue to host students from the Exploratory Work Experience Education program.

UNCOMPENSATED HEALTH CARE

During Fiscal Year 2021, Scripps Encinitas will continue to provide health care services for vulnerable patients who are unable to pay for services.

- Maintain, communicate and effectively administer Scripps financial assistance policy in a manner that meets patients' needs.
- Assure that care is available through the emergency department, regardless of a person's ability to pay.

SCRIPPS MEMORIAL HOSPITAL ENCINITAS 2021 COMMUNITY BENEFIT REPORT; FISCAL YEAR 2020

The Scripps Memorial Hospital Encinitas Community Benefit Report is an account of the hospital's dedication and commitment to improving the community's health, detailing programs that have provided benefit over and above standard health care practices in Fiscal Year 2020 (October 2019 to September 2020).

FOSTERING VOLUNTEERISM

In addition to the financial community benefit contributions made during Fiscal Year 2020, Scripps Encinitas employees and affiliated physicians donated a significant portion of their personal time volunteering to support Scripps sponsored community benefit programs. With close to 14 volunteer hours, it is estimated that the dollar value associated with this volunteer labor is \$739.⁴³

MAKING A FINANCIAL COMMITMENT During Fiscal Year 2020, Scripps Encinitas devoted **\$60,033,393** to community benefit programs, including uncompensated health care, community health services, professional education and health research. The programs offered by Scripps Encinitas emphasize community-based prevention efforts and use innovative approaches to reach residents at greater risk for health problems.

COMMUNITY BENEFIT SERVICES HIGHLIGHTS

Community Benefit Financial Commitment

\$60,033,393

Community Benefit Services

Bad Debt	\$336,285
Charity Care	\$1,438,312
Community Building Activities	\$2,120
Community Health Services	\$208,002
Medi-Cal & Other Means Tested Shortfall	\$19,637,214
Medicare & Medicare HMO Shortfall	\$37,764,767
Professional Education & Research	\$643,832
Subsidized Health Services	\$2,862

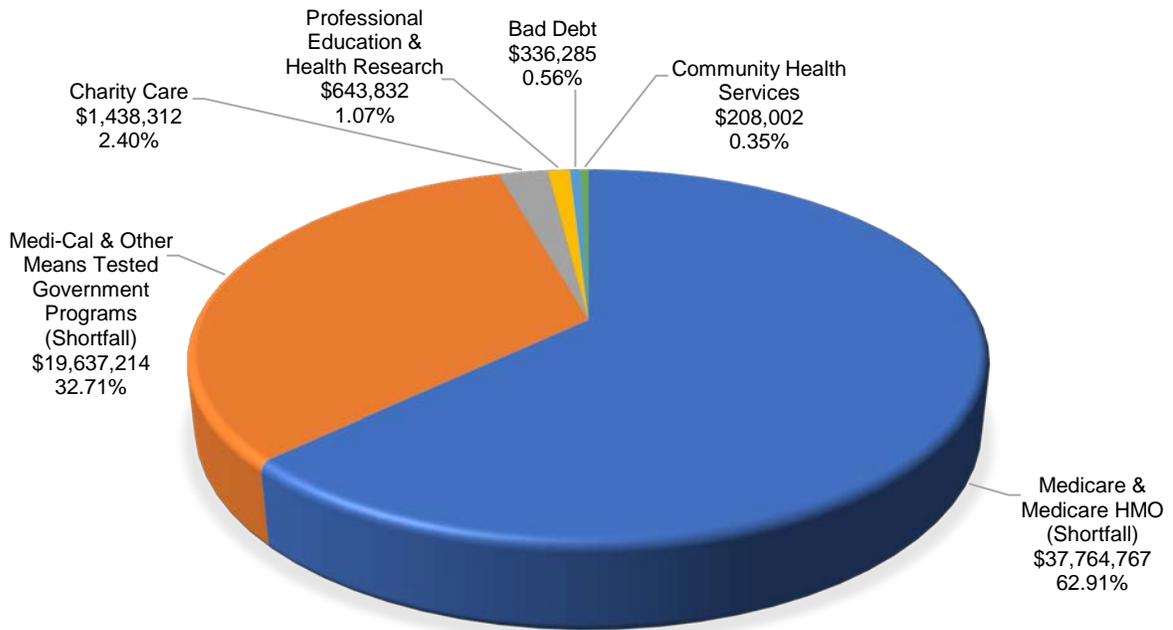
Refer to Figure 7.1 presented on the following page for a graphic representation of Fiscal Year 2020

⁴³ Calculations based upon an average hourly wage for the Scripps Health system plus benefits.

FIGURE 7.1

FISCAL YEAR 2020

SCRIPPS MEMORIAL HOSPITAL ENCINITAS COMMUNITY
BENEFIT SERVICES DISTRIBUTION, \$60,033,393



Community Benefits Services (Provider Fee Impact)	Bad Debt	Charity Care	Medi-Cal (Shortfall)	Medicare & Medicare HMO (Shortfall)	Community Health Services	Prof Ed & Health Research	Subsidized Health Services	Community Building Activities	Total
Before Provider Fee	\$336,285	\$1,438,312	\$15,991,715	\$37,764,767	\$208,002	\$643,832	\$2,862	\$2,120	\$56,387,894
Provider Fee	-	-	\$3,645,500	-	-	-	-	-	\$3,645,500
Net After Provider Fee	\$336,285	\$1,438,312	\$19,637,214	\$37,764,767	\$208,002	\$643,832	\$2,862	\$2,120	\$60,033,393

COMMUNITY BENEFIT SERVICES:

Community benefit services include those programs offered to the community that go above and beyond what is provided as a normal part of patient care. Scripps divides community benefit services into three categories, including uncompensated health care, community health services and professional education and health research. Uncompensated care includes charity care, bad debt, and Medi-Cal and Medicare shortfalls.

SCRIPPS ENCINITAS COMMUNITY HEALTH SERVICES, FISCAL YEAR 2020

COMMUNITY HEALTH SERVICES HIGHLIGHTS

Community health services include prevention and wellness programs such as screenings, health education, support groups and health fairs which are supported by operational funds, grants, in-kind donations and philanthropy. These programs are designed to raise public awareness and understanding of, and access to, identified community health needs (refer to Section 2, Community Health Needs Assessment).

During Fiscal Year 2020 (October 2019 to September 2020) Scripps Encinitas invested \$208,002 in community health services. This figure reflects the costs associated with providing community health improvement activities, including salaries, materials and supplies, minus billable revenue. This section highlights some of Scripps Encinitas Fiscal Year 2020 community health services achievements.

- The BrainMasters Stroke and Brain Injury Survivors Support Group is for survivors, caregivers and loved ones. Participants receive information and resources, reinforce inner strengths, learn self-care strategies, develop encouraging peer relationships and continue a life of meaning and purpose.
- The breast cancer support group recognizes the special needs of women who have suffered from breast cancer. Group members share experiences, information, hopes, fears and strengths in a relaxed setting.

PROFESSIONAL EDUCATION AND HEALTH RESEARCH HIGHLIGHTS

Quality health care is highly dependent upon health education systems and medical research programs. Without the ability to train and inspire a new generation of health care providers, or offer continuing education to existing health care professionals, the quality of health care would be greatly diminished. Medical research also plays an important role in improving the community's overall health by developing new and innovative treatments.

Each year, Scripps Encinitas allocates resources to advance health care services through professional education health programs and research. To enhance service delivery and treatment practices for San Diego County, Scripps Encinitas invested \$643,832⁴⁴ in professional training and health research programs during Fiscal Year

⁴⁴ Reflects clinical research as well a professional education for non-Scripps employees, nursing resource development and other health care professional education. Research primarily take place at Scripps Clinical Research Services, Scripps Whittier Diabetes Institute, Scripps Genomic Medicine and Scripps Translational Science Institute. Calculations based on total program expenses.

2020 (October 2019 to September 2020). This section highlights some of Scripps Encinitas professional education activities.

Young Leaders in Health Care is a forum for high school students to learn about the health care system and its career opportunities. High school students in grades 9 through 12 have the unique opportunity to discuss medicine and medical issues directly with medical professionals, to become involved in health-related community service programs and to learn about internship opportunities. The program mentors' students on leadership, providing tools to meet daily life challenges, and assigns a service project to satisfy school requirements and make a positive impact on the community. In past years, students created public service announcements about teen safety and wellness, eating disorders, prescription drug abuse, cyberbullying and dating violence.

SCRIPPS MEMORIAL HOSPITAL ENCINITAS COMMUNITY BENEFIT SERVICES SUMMARY LIST

Program	Persons Served	Staff Hours	Volunteer Hours	Financial Support*
Bad Debt**	0	0	0	\$336,285
Bereavement Support Group	53	10	12	\$555
Blood Drive - American Red Cross	106	0	0	\$0
BrainMasters - Stroke & Brain Injury Survivors Communication Skill	52	0	0	\$722
Breast Cancer Education & Support Group	125	23	2	\$1,277
Charity Care	0	0	0	\$1,438,312
Healing Arts Class for People with Neurological Challenges	91	38	0	\$2,082
In Lieu of Funds	0	0	0	\$201,826
Medi-Cal and Other Means Tested Government Programs (Shortfall)***	0	0	0	\$19,637,214
Medicare and Medicare HMO (Shortfall)**	0	0	0	\$37,764,767
Nursing Student Education Rotations	0	8,014	0	\$643,832
Scripps Spinal Cord Injury Support and Education Group	49	13	0	\$694
Stroke and Brain Injury Support and Education Group	133	14	0	\$847
Subsidized Health Services	0	0	0	\$2,862
Young Leaders in Healthcare Program**	481	24	0	\$2,120
Scripps Memorial Hospital Encinitas Totals FY 20	1,090	8,135	14	\$60,033,393

* "Financial Support" reflects the cost (labor, supplies, overhead, etc.) associated with the program/service less direct revenue. This figure does not include a calculation for physician and staff volunteer hours. In some instances, an entire community benefit program cost center has been divided between several initiatives.

**Community building activities, bad debt and Medicare shortfall do not count as community benefits under the Schedule H 990 but are still reportable outside the community benefit table.

*** Hospital provider fee was reported as offsetting revenue from Medi-Cal.

Section 8

Scripps Mercy Hospital

SCRIPPS MERCY HOSPITAL

Located in the central service area and near the United States Mexico border Scripps Mercy Hospital provides health care services for 23.6 percent of the inpatient population living within the hospital's service areas. Today, the hospital has 655 licensed beds and more than 4,222 employees. Scripps Mercy Hospital is San Diego's longest established and only Catholic hospital. The two hospital campuses (San Diego Campus and Chula Vista Campus) share a license, and report all utilization and financial data as a single entity to the Office of Statewide Health Planning and Development (OSHPD).

Scripps Mercy is designated as a disproportionate share hospital, providing care to many patients who either lack health insurance or are covered through a government subsidy program. Within the Scripps Mercy service area, Scripps Mercy cares for 28.9 percent of Medicare patients, 25.8 percent of Medi-Cal patients, 11.9 percent of commercially insured patients, and 21.5 percent of patients have another payment source, including self-pay, CMS or charity care.

SAN DIEGO CAMPUS



Founded in 1890, Scripps Mercy Hospital San Diego has a long tradition of caring for the underserved. Located in Central San Diego County, Scripps Mercy San Diego has 482 licensed beds and 3,035 employees. As a major teaching hospital, Scripps Mercy San Diego, provides a primary site for the clinical education of more than 140 residents per year. Scripps Mercy San Diego provides a wide range of acute medical care services including, but not limited to, intensive care, cancer care, cardiac treatment, endoscopy, neurology, nuclear medicine, orthopedics, radiology, rehabilitation, respiratory care and urology services, plus a variety of support services for low-income patients. As one of six trauma centers and one of 19 emergency departments in San Diego County, Scripps Mercy San Diego makes up a critical part of the county's emergency service network.

CHULA VISTA CAMPUS



Located approximately four miles from the United States-Mexico border in South San Diego County, Scripps Mercy Hospital Chula Vista has 173 licensed-care beds and 1,187 employees. It became a Scripps Mercy Hospital campus in October 2004 and together with the Scripps Mercy Hospital

in Hillcrest, cares for San Diego's Metro and South Bay communities.

Scripps Mercy Chula Vista, provides a wide range of acute clinical care services including, but not limited to, obstetrics and gynecology, rehabilitation (physical, occupational and speech therapies), cancer care services, inpatient and outpatient radiology, neurology and a full range of surgical services (orthopedic, thoracic/vascular, urology and general surgery).

DISTINGUISHED PROGRAMS – SCRIPPS MERCY HOSPITAL SAN DIEGO CAMPUS

- Bariatric Surgery Program
- Behavioral Health Services
- Robotics Program
- Heart Care Center
- Community Benefit Programs
 - La Maestra Wellness Center
Women, Infants and Children
Program (WIC)
- Graduate Medical Education
- Primary Stroke Center
designated by The Joint
Commission
- Lithotripsy
- Scripps Resident Clinic at the
Hillcrest Family Health Center
- Robotic Surgery Program
- Maternal Child Health
- Neonatal Intensive Care Nursery
- Orthopedic Center
- Spiritual Care Services
- The O'Toole Breast Center
- Level 1 Trauma Care

DISTINGUISHED PROGRAMS – SCRIPPS MERCY HOSPITAL, CHULA VISTA CAMPUS

- Breast Health Outreach and
Education Services
- Neonatal Intensive Care Nursery
- San Diego Border Area Health
Education Center (AHEC)
- Cultural Competency and
Language Services
- Youth Health Careers
Development Programs
- Primary Stroke Center
designated by The Joint
Commission
- Health Education Programs
- Scripps Family Practice
Residency Program
- Scripps Outpatient Imaging
Center
- Scripps Rehabilitation Services
- Scripps Mercy Hospital, Chula
Vista Well Being Center

SUBSIDIZED HEALTH SERVICES

Subsidized health services are clinical programs that are provided despite a financial loss so significant that negative margins remain after removing the effects of charity care, bad debt and Medi-Cal shortfalls. Nevertheless, the service is provided because it meets an identified community need, which if no longer offered would either be unavailable in the area or fall to government or another not-for-profit organization.

Subsidized services do not include ancillary services that support lines, such as lab and radiology (if these services are provided to low-income persons, they are reported as charity care/financial assistance).

The total expense for subsidized health services for Scripps Mercy Fiscal Year 2020 was \$3,680,538 See Figure 8.1 for Scripps Subsidized Health Distribution. This includes Scripps Inpatient Behavioral Health and Scripps Resident Clinic at Family Health Centers. Scripps offers inpatient adult behavioral health services at the Scripps Mercy Hospital, San Diego campus. The Scripps Mercy Behavioral Health Program also actively supports community programs to reduce the stigma of mental illness and help affected individuals live and work in the community.

340 B DRUG PRICING PROGRAM AND IN-LIEU OF FUNDS

Scripps Mercy Hospital San Diego and Chula Vista participate in the 340B Drug Pricing Program administered by the Health Resources and Services Administration. Designated as a disproportionate share hospital (DSH), Scripps Mercy is eligible to purchase outpatient drugs at a reduced price, allowing it to stretch scarce federal resources as far as possible, reaching more eligible patients, and providing more comprehensive services. Scripps Mercy provides care to a large number of patients who either lack health insurance or are covered through a government subsidy program. One-way Scripps Mercy provides care to some of our most needy patients is through in-lieu of funds. In-lieu of funds are used for unfunded or underfunded patients and their post-discharge needs. Funds are used for board and care, skilled nursing facilities, long-term acute care and home health. In addition, funds are also used for medications, equipment and transportation services. The total subsidized expense for in-lieu of funds for Mercy Hospital San Diego and Chula Vista during Fiscal Year 2020 was \$1,036,031.

SCRIPPS RESIDENT CLINIC AT THE HILLCREST FAMILY HEALTH CENTER

In January 2019, the Scripps Mercy Hospital moved its Internal Medicine ambulatory teaching clinics from Scripps Mercy Hospital Mercy Clinic to Hillcrest Family Health Center. This is a facility within the network of Family Health Centers of San Diego (FHCSO); a Scripps Resident Clinic was incorporated into the operation of the FHCSO Hillcrest Family Health Center. This move expands the existing affiliation between Scripps Mercy Hospital and Family Health Centers of San Diego to include the GME outpatient clinical rotation for Internal Medicine.

The GME affiliation with FHCSO is a significant opportunity for our patients to have access to much more comprehensive interdisciplinary care with multiple additional modalities available, including Behavioral Health, Dental, Social Work and Care Coordination, to name a few. It is also an opportunity for our Residents to learn more about functioning in an interdisciplinary setting and collaborating with other healthcare providers. The affiliation with FHCSO has improved the patient's transition of care from the Hospital's inpatient setting to outpatient / follow-up care with the support of FHCSO Care Coordination processes.

Once the new, comprehensive cancer center is built on the Mercy Hospital Campus, there will be expand learning opportunities for our Residents, and future careers in Hematology/Oncology.

The agreement to co-locate the GME program with Family Health Centers of San Diego (FHCSO) is an expansion of an ongoing, successful relationship with this federally qualified health center. Scripps and FHCSO already work together in a number of areas that benefit the medically underserved, including a pediatric residency training program, a collaborative prenatal care and delivery program, a coordinated behavioral health program, and emergency room referrals for patients without medical homes. This program has given its patients access to increased services, including case management, onsite psychiatric services, dental care, onsite phlebotomy, adjacent HIV/AIDS/Hepatitis C treatment, physical therapy, acupuncture, sports medicine and other services. From a GME perspective, this is an opportunity for our residents to practice within a broader interdisciplinary setting and regularly collaborate with other community health care providers. Subspecialty teaching is provided to the Family Medicine Residents by Scripps Mercy subspecialty faculty.

In addition, since 2013, Scripps Mercy Medical Education has supported the Teaching Health Centers Family Medicine Residency at Family Health Centers, with all inpatient teaching except for Pediatrics occurring at Scripps Mercy Hospital San Diego.

BEHAVIORAL HEALTH INPATIENT PROGRAMS

Individuals suffering from acute psychiatric disorders are sometimes unable to live independently or may even pose a danger to themselves or others. In such cases, hospitalization may be the most appropriate alternative. Scripps Mercy Hospital's Behavioral Health Inpatient Program helps patients and their loved ones work through short-term crises, manage mental illness and resume their daily lives.

Behavioral Health Challenges

- Like many behavioral health programs across the country, funding is difficult, as payment rates have not kept pace with the cost to provide care.
- In Fiscal Year 2020, the Scripps Mercy Behavioral Health Program experienced a \$3.4 million loss in total operations with \$2.2 million of this loss being captured in Medi-Cal/CMS and charity care.
- In Fiscal Year 2020, 1.2 percent of patients in the inpatient unit were uninsured.

BEHAVIORAL HEALTH COLLABORATION

Scripps will be partnering with Acadia-Healthcare Company, Inc. to develop a new inpatient behavioral health facility in Chula Vista. The facility will provide treatment for three times as many patients as existing behavioral health unit at Scripps Mercy San Diego. Acadia provides behavioral health services through a network of 586 health care facilities with approximately 18,000 beds in 40 states, the United Kingdom and Puerto Rico. This new center which is planned to open in 2023 will serve as a regional resource to meet the needs of patients across San Diego County and will be operated through a joint venture between Scripps and Acadia. Scripps continues to offer behavioral health support at all hospital emergency departments and urgent care centers on an ongoing basis.

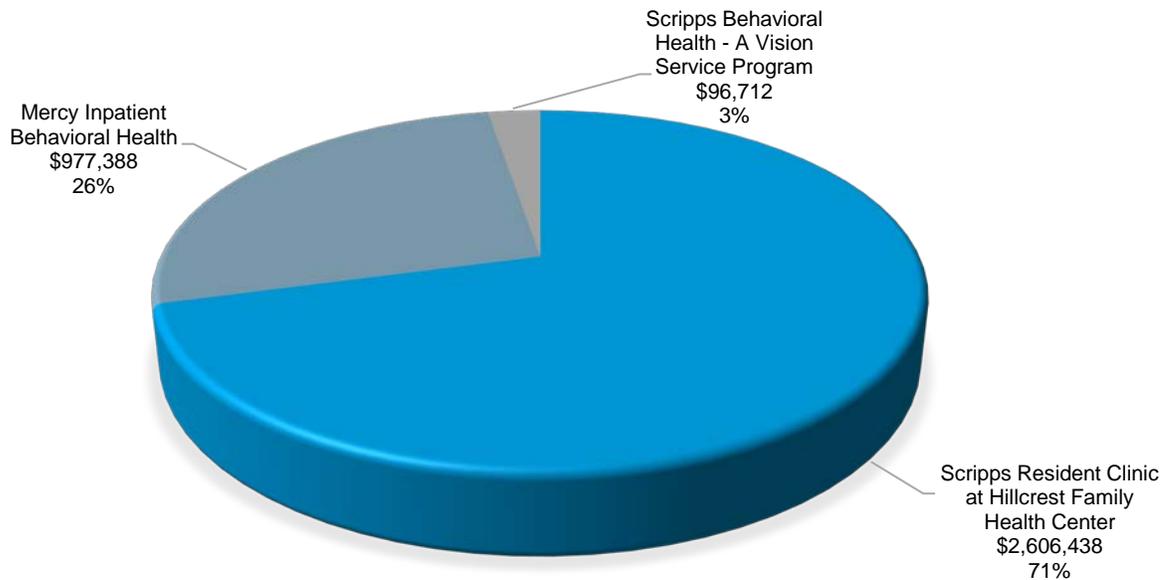
BEHAVIORAL HEALTH OUTPATIENT SERVICES

Scripps Behavioral Health entered into an agreement in May 2016 to transition the intensive behavioral health outpatient program to the Family Health Centers of San Diego and expand outpatient behavioral health offerings to the population served.

FIGURE 8.1

Fiscal Year 2020

SCRIPPS SUBSIDIZED HEALTH DISTRIBUTION BY CATEGORY \$3,680,538



SUBSIDIZED HEALTH SERVICES

Subsidized health services are clinical programs that are provided despite a financial loss so significant that negative margins remain after removing the effect of charity care, bad debt, and Medi-Cal shortfalls. This includes Scripps inpatient behavioral health services, and Scripps Resident Clinic at Hillcrest Family Health Center.

SCRIPPS MERCY HOSPITAL SAN DIEGO CAMPUS 2021 COMMUNITY BENEFIT PLAN; FISCAL YEAR 2021

The Scripps Mercy Hospital San Diego 2021 Community Benefit Plan provides a description of the overall Scripps community benefit goal and the hospital's and clinic's objectives and strategies to support community health improvement during Fiscal Year 2021 (October 2020 to September 2021).

THE SCRIPPS 2021 COMMUNITY BENEFIT GOAL

Make a measurable impact on the health status of the community through improved access to care, health improvement programs and professional education and health research.

[Scripps Mercy Hospital, San Diego Fiscal Year 2021 Objectives](#)

COMMUNITY HEALTH SERVICES

MERCY OUTREACH SURGICAL TEAM (M.O.S.T)

Mercy Outreach Surgical Team will continue to provide free reconstructive surgeries for more than 400 children (under 18 years of age) in Mexico with physical deformities caused by birth defects or accidents.

LA MAESTRA FAMILY CLINIC, INC.

La Maestra Family Clinic joined the City Heights Wellness Center collaborative partnership with Scripps Mercy Hospital and Rady Children's Hospital as the lease holder of the Wellness Center starting September 1, 2016.

Since its inception in 2002, the City Heights Wellness Center has been a dynamic, community-based program developed by Scripps Mercy Hospital and Rady Children's Hospital, working with residents to improve their lifestyle behaviors and self-sufficiency skills. Multiple not-for-profit and governmental organizations, philanthropic foundations and grassroots groups have joined the effort conducting health promotion and educational activities for community residents. A unique aspect of the City Heights Wellness Center is the Teaching Kitchen that is known throughout the community as a place where residents and providers come together to cook, discover and communicate in a safe and trusted environment.

La Maestra Family Clinic continues to bring new perspectives to the partnership as a community health center and primary care provider serving the culturally diverse populations within the City Heights community. La Maestra is committed to maintaining the collaborative nature of the partnership and will continue to work with current CHWC agencies as well as look for opportunities to expand health promotion services.

SCRIPPS MERCY'S SUPPLEMENTAL NUTRITION PROGRAM FOR WOMEN, INFANTS AND CHILDREN (WIC)

Scripps Mercy will continue to offer WIC services through its largest distribution location based at the La Maestra Family Clinic/City Heights Wellness Center. The Scripps Mercy WIC Program, a federally funded nutrition program targeting pregnant and parenting women and their children (ages 0 to 5), is one of five WIC programs operating in San Diego County. WIC services provide nutrition education, counseling services and food vouchers for nearly 6,500 low income women, infants and children monthly. In Fiscal Year 2020, the WIC program served 65,655 clients. Lactation education and support services are offered to improve breastfeeding among postpartum and parenting women. The Scripps Mercy Supplemental Nutrition Program for Women, Infants and Children (WIC) has distribution sites La Maestra Family Clinic/City Heights Wellness Center, as well as Linda Vista Health Center and other storefront facilities in Central and South San Diego County.

MENTAL HEALTH ISSUES

Scripps Mercy will continue to improve awareness of mental health by providing information and support services at community events.

MENTAL HEALTH OUTREACH SERVICES, A-VISIONS VOCATIONAL TRAINING PROGRAM

Behavioral Health Services at Scripps Mercy Hospital, in partnerships with the Mental Health of America San Diego Chapter established the A-Visions Vocational Training Program (social rehabilitation and prevocational services for people living with mental illness) to help decrease the stigma of mental illness. The program will continue to provide vocational training for people receiving mental health treatment, potentially leading to greater independence.

COMMUNITY EDUCATION AND HEALTH FAIRS

Continue to educate the community on mental illness to reduce stigma and expand resources for the mentally ill. Provide at least three events per year.

INJURY PREVENTION ACTIVITIES

- Provide injury prevention and awareness programs throughout San Diego County. Examples of programs are providing car seats to patients who have been in automobile accidents and their child's car seat has been rendered unsafe to use. Another program is the "Every 15 Minutes program" a two-day immersion experience for teens on the realistic consequences of drinking and driving, which involves the schools, law enforcement, courts, emergency service providers, and the mortuary.

PROFESSIONAL EDUCATION AND HEALTH RESEARCH

Scripps Mercy Hospital, San Diego will continue to serve as a medical education training site for University of California, San Diego Master's Program students, and San Diego Naval Hospital clinicians.

- Provide comprehensive graduate medical education training for 42 internal medicine residents, 18 transitional year residents and three chief residents.
- Provide comprehensive graduate medical education training for nine podiatry residents.
- Provide a portion of graduate medical education training for up to eight Palliative Care Fellows under a combined Scripps-UCSD Palliative Care Fellowship.
- Provide a portion of undergraduate medical education training for approximately 75 third and fourth-year medical students at the University of California, San Diego.
- Provide a comprehensive graduate medical education program in trauma and surgical critical care for 90 San Diego Naval Hospital surgery and emergency medicine physicians, 12 Kaiser Emergency medicine residents, and two Rady Children's Hospital Fellows.
- Provide a year-long trauma research fellowship for one San Diego Naval Hospital surgery resident.
- Provide a comprehensive training program in trauma and critical care for 20 military physicians assistants-in-training.
- Provide a portion of graduate medical education for 18 Family Medicine Residents from Family Health Centers San Diego
- Provide a portion of graduate medical education for six third-year Kaiser Emergency Medicine Residents.

UNCOMPENSATED HEALTH CARE

During Fiscal Year 2021, Scripps Mercy Hospital, San Diego will continue to provide health care for vulnerable patients who are unable to pay for services.

- Maintain, communicate and effectively administer the Scripps financial assistance policy in a manner that meets patient's needs.
- Assure that care is available through the emergency department and trauma center, regardless of a person's ability to pay.

SCRIPPS MERCY HOSPITAL SAN DIEGO CAMPUS 2021 COMMUNITY BENEFIT REPORT; FISCAL YEAR 2020

The Scripps Mercy Hospital Community Benefit Report is an account of the hospital's dedication and commitment to improving the health of the community, detailing the programs that have provided benefit over and above standard health care practices in Fiscal Year 2020 (October 2019 to September 2020).

FOSTERING VOLUNTEERISM

In addition to the financial community benefit contributions made during Fiscal Year 2020, Scripps Mercy Hospital employees and affiliated physicians donated a significant portion of their personal time volunteering to support Scripps-sponsored community benefit programs and services. With close to 9,045 hours of volunteer time, it is estimated that the dollar value associated with this volunteer labor is \$477,677.⁴⁵

MAKING A FINANCIAL COMMITMENT

During Fiscal Year 2020, Scripps Mercy Hospital (San Diego Campus, Chula Vista Campus) devoted **\$70,288,342**⁴⁶ to community benefit programs, including uncompensated health care, community health services, professional education and health research. The programs offered by Scripps emphasize community-based prevention efforts and use innovative approaches to reach residents at greatest risk for health problems.

COMMUNITY BENEFIT SERVICES HIGHLIGHTS

Community Benefit Financial Commitment

\$70,288,342

Community Benefit Services

Bad Debt	\$3,252,959
Charity Care	\$10,204,940
Community Building Activities	\$116,574
Community Health Services	\$3,026,258
Medi-Cal & Other Means Tested Shortfall	\$12,297,580
Medicare & Medicare HMO Shortfall	\$26,192,822
Professional Education & Research	\$11,539,001
Subsidized Health Services	\$3,658,208

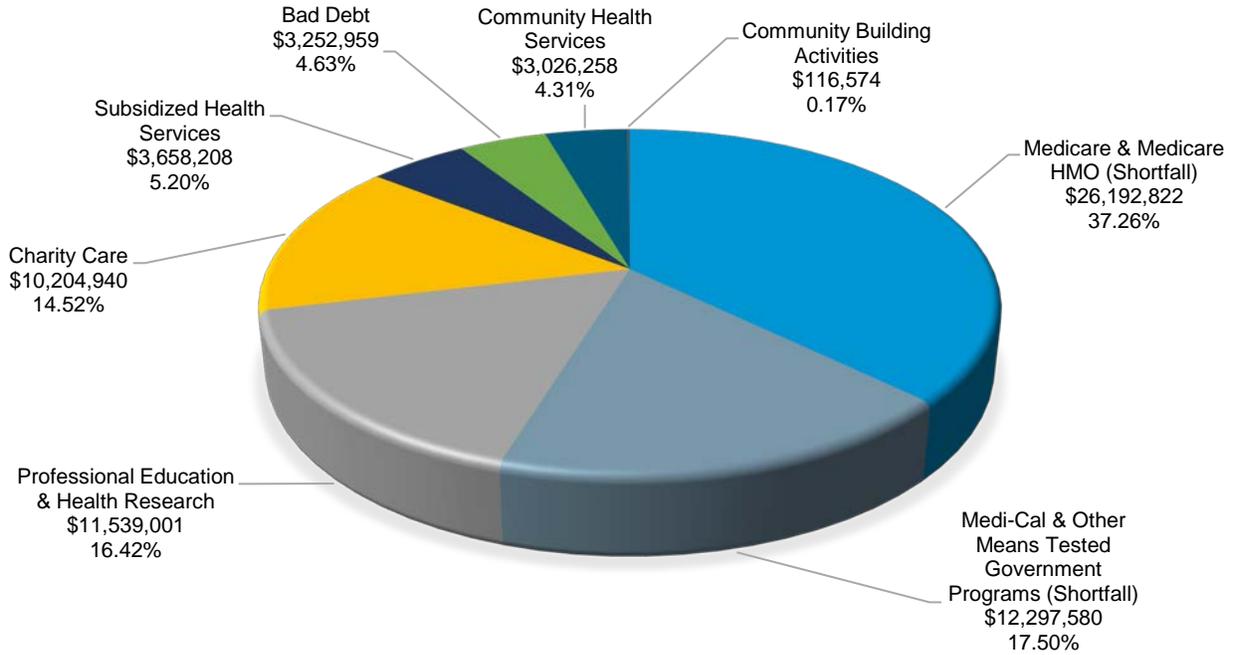
Refer to Figure 8.2 presented on the following page for a graphic representation of Fiscal Year 2020.

⁴⁵ Calculations based upon an average hourly wage for the Scripps Health system plus benefits.

⁴⁶ This number includes Scripps Mercy Hospital (San Diego Campus, Chula Vista Campus)

FIGURE 8.2
Fiscal Year 2020

SCRIPPS MERCY HOSPITAL⁴⁷ COMMUNITY BENEFIT
DISTRIBUTION, \$70,288,342



Community Benefits Services (Provider Fee Impact)	Bad Debt	Charity Care	Medi-Cal (Shortfall)	Medicare & Medicare HMO (Shortfall)	Community Health Services	Prof Ed & Health Research	Subsidized Health Services	Community Building Activities	Total
Before Provider Fee	\$3,252,959	\$10,204,940	\$77,309,067	\$26,192,822	\$3,026,258	\$11,539,001	\$3,658,208	\$116,574	\$135,299,829
Provider Fee	-	-	(\$65,011,487)	-	-	-	-	-	(\$65,011,487)
Net After Provider Fee	\$3,252,959	\$10,204,940	\$12,297,580	\$26,192,822	\$3,026,258	\$11,539,001	\$3,658,208	\$116,574	\$70,288,342

COMMUNITY BENEFIT SERVICES

Community benefit services include those programs offered to the community that go above and beyond what is provided as a normal part of patient care. Scripps divides community benefit services into three categories, including uncompensated health care, community health services and professional education and health research. Uncompensated care includes charity care, bad debt, and Medi-Cal and Medicare shortfalls.

⁴⁷ Includes San Diego and Chula Vista campus

SCRIPPS MERCY HOSPITAL FISCAL YEAR 2020

COMMUNITY HEALTH SERVICES HIGHLIGHTS

Community health services include prevention and wellness programs, such as screenings, health education, support groups and health fairs, which are supported by operational funds, grants, in-kind donations and philanthropy. These programs are designed to raise public awareness, understanding of and access to identified community health needs (refer to Section 2, Community Health Needs Assessment).

During Fiscal Year 2020 (October 2019 to September 2020), Scripps Mercy Hospital (San Diego Campus and Chula Vista Campus) invested \$3,026,258 in community health services. This figure reflects the cost associated with providing community health improvement activities, including salaries, materials, and supplies, minus billable revenue.

The section below highlights some of Scripps Mercy Hospital San Diego Fiscal Year 2020 community health achievements. More detailed examples of community health programs are identified in section four titled community health services.

SCRIPPS BEHAVIORAL HEALTH A-VISIONS VOCATIONAL TRAINING PROGRAM

The innovative A-Visions Vocational Training Program at the San Diego campus helps prepare mental health patients for volunteer and employment opportunities by exposing them to a variety of work activities and training. Since its inception, 626 inquiries have come in, 165 of these resulted in qualified candidates with 101 volunteers and 54 employees thus far. Currently, there are a total of 24 active candidates: 23 employees and one volunteer who participate in this supportive employment program.

A-Visions participants have been employed on a per-diem basis by Scripps in Environmental Services, Food Services and clerical support for Health and Information Services, Emergency Services, Nursing Research, Human Resources, Access, Behavioral Health, Credentialing, Labor and Delivery, Laboratory, Medical Staffing, Performance Improvement, Spiritual Care and Palliative Care Services. Paid A-Visions candidates typically limit their work to eight hours per week, which allows them to maintain eligibility for their disability benefits, medications and ongoing behavioral healthcare that supports their work.

PROFESSIONAL EDUCATION AND HEALTH RESEARCH HIGHLIGHTS

Quality health care is highly dependent upon health education systems and medical research programs. Without the ability to train and inspire a new generation of health care providers, or to offer continuing education to existing health care professionals, the

quality of health care would be greatly diminished. Medical research also plays an important role in improving the community's overall health by developing new and innovative treatments.

Each year, Scripps Mercy Hospital (San Diego Campus and Chula Vista Campus) allocate resources to advance health care services through clinical research and medical education. To enhance service delivery and treatment practices for San Diego County, Scripps Mercy Hospital invested \$11,539,001⁴⁸ in professional training programs and health research during Fiscal Year 2020 (October 2019 to September 2020).

The section below highlights the activities for Scripps Mercy Hospital San Diego Campus.

GRADUATE MEDICAL EDUCATION (GME) PROGRAM

Scripps Mercy Hospital is a major teaching hospital with the longest existing medical education program in San Diego County. The program has been recognized nationally for its impressive results and innovative curriculum.

Founded in 1949, Scripps Mercy Hospital, San Diego and its Graduate Medical Education program has served as training ground for more than 1,000 physicians, many of whom have assumed leadership positions in the community. There are currently 41 internal medicine residents and three chief residents enrolled in the program, as well as 18 transitional year residents, 42 family medicine residents and nine podiatry residents at both the San Diego and Chula Vista sites. There are 18 Kaiser Emergency Medicine residents who do some of their training at Scripps Mercy Hospital.

In 2006, the Internal Medicine Program at Scripps Mercy Hospital became one of 17 programs nationwide to be invited to participate in a multiyear educational innovation project, linking measurable improvements in resident education to measurable improvements in patient care.

The educational innovation project program continues to produce high quality research resulting in peer-reviewed publications in the areas of cardiovascular limited ultrasound examination; teaching cost-effective medicine to residents; employing ACGME milestones to evaluate resident readiness for indirect supervision in the ambulatory environment; and team training to enhance family communication in the intensive care unit, among many other projects.

⁴⁸ Reflects clinical research as well a professional education for non-Scripps employees, nursing resource development and other health care professional education. Calculations based on total program expenses.

In 2008, Scripps Mercy Hospital became the sponsor for the Accreditation Council on Graduate Medical Education-Accredited Palliative Care Fellowship provided by San Diego Hospice and the Institute for Palliative Care. The program provides a palliative care service for inpatients and outpatients at Scripps Mercy Hospital. In 2015, the sponsorship of the program transitioned to UCSD.

In 2014, Scripps Mercy Hospital began a partnership with Family Health Centers of San Diego to provide inpatient and subspecialty teaching to 18 family medicine residents who were part of the new Teaching Health Centers Residency programs.

In 2016, Scripps Mercy Hospital began a partnership with Kaiser Emergency Medicine to provide critical care inpatient teaching in the ICU to 6 PGY-3 Residents, who are partnering with our own Mercy Internal Medicine and Transitional Year Residents in the Intensive Care Unit.

In January, 2019, Scripps Mercy Hospital moved its ambulatory teaching clinics from the Mercy Clinic to the new Scripps Resident Clinic at Family Health Centers, Hillcrest, extending further its partnership with Family Health Centers. This program has given its patients access to increased services, including case management, onsite psychiatric services, dental care, onsite phlebotomy, adjacent HIV/AIDS/Hepatitis C treatment, physical therapy, acupuncture, sports medicine and other services.

Since 1986, Scripps Mercy Hospital Trauma Services has provided graduate medical education in trauma and critical care for the Naval Medical Center (NMCSD) General Surgery Residency Program. In 1999, the Accreditation Council for Graduate Medical Education Residency Review Committee for Surgery officially integrated Scripps Mercy with the NMCSD General Surgery Residency Program. In 2011, the Trauma Service initiated a year-long trauma research fellowship for a select number of San Diego Naval Hospital surgery residents. Today, the trauma service also provides training opportunities for residents in other programs, including: NMCSD oral maxillofacial surgery, otolaryngology, emergency medicine, transitional year residencies, Scripps Mercy Hospital transitional year residency, and Children's Specialists of San Diego Pediatric Emergency Medicine Fellowship. All these residents play a key role in managing and maintaining the continuity of care for patients in Central San Diego.

OTHER PROFESSIONAL EDUCATION TRAINING PROGRAMS

In Fiscal Year 2020, Scripps Mercy Hospital served as a training site for San Diego Naval Hospital, Family Health Centers of San Diego, Kaiser and UCSD clinicians by:

- Providing rotations in the internal medicine inpatient service for UCSD psychiatry residents and medical students, as well as psychiatry residents and medical students.
- Providing a comprehensive graduate medical education program in trauma and surgical critical care for 94 San Diego Naval Hospital surgery and emergency medicine physicians, 13 Kaiser Emergency medicine residents, and 3 Rady Children’s Hospital Fellows.
- Providing a comprehensive trauma research fellowship for 3 San Diego Naval Hospital surgery residents
- Providing a comprehensive training program in trauma and critical care for 25 physicians assistants-in-training, including students and fellows.

PHARMACY RESIDENCY PROGRAM

The largest private teaching hospital in San Diego, Scripps Mercy Hospital offers four 12-month postgraduate year one (PGY-1) pharmacy residency positions and two graduate year two (PGY-2) specialty residency positions. Both PGY2 programs underwent accreditation June 2018 and are fully accredited. The PGY1 program has been fully accredited by the American Society of Health-System Pharmacists (ASHP) since 2002. The PGY2 oncology residency is new as of July 27,2020 and is in candidate status. Both programs are part of Graduate Medical Education and pharmacy residents are considered “house staff”. These postgraduate programs are designed to develop skilled clinicians that can deliver pharmaceutical care in a variety of health care settings.

The Scripps Mercy Hospital Pharmacy Residency Program offers residents a challenging academic experience in a progressive environment that prepares residents for leadership roles in the pharmacy profession. Clinical and distributive services are provided by full-time, unit-based pharmacists — many of whom have advanced clinical training. Scripps Mercy’s pharmacists enjoy sharing their breadth of knowledge by precepting both pharmacy residents and students. The pharmacy practice residency program at Scripps Mercy Hospital focuses on pharmacotherapy, project management skills and teaching in a decentralized pharmacy setting. The pharmacy department is open 24/7 and includes a central pharmacy along with eleven inpatient clinical pharmacist practice settings. Clinical pharmacists provide a broad range of clinical

services, carry out pharmacist driven medication protocols, practice under prescriptive authority granted by Pharmacy and Therapeutics Committee, and teach pharmacy students, medical and pharmacy residents. Scripps Mercy is affiliated with six pharmacy schools and annually trains 20 to 30 Pharm D candidates and 55 medical interns and residents. Each year the residents present 4 to 7 national and international presentations as part of their residency program.

SCRIPPS MERCY HOSPITAL CHULA VISTA CAMPUS 2021 COMMUNITY BENEFIT PLAN; FISCAL YEAR 2021

The Scripps Mercy Hospital, Chula Vista 2021 Community Benefit Plan describes the overall Scripps community benefit goal and the hospital's objectives and strategies to support community health improvement during Fiscal Year 2021 (October 2020 to September 2021).

THE SCRIPPS 2021 COMMUNITY BENEFIT GOAL

Make a measurable impact on the health status of the community through improved access to care, health improvement programs and professional education and health research.

SCRIPPS MERCY HOSPITAL, CHULA VISTA FISCAL YEAR OBJECTIVES

COMMUNITY HEALTH SERVICES

The Scripps Mercy Chula Vista's Well-Being Center (WBC) is strategically located in the heart of Chula Vista and offers patients with access to support groups and health education programs including regular physician question-and-answer sessions. The goal of the Center is to increase health care access, provide preventative health education, offer youth introduction into health careers education, job training and placement in South Bay. Programs fall under different target populations including youth, seniors, maternal and child health, and chronic disease. The WBC provides these programs to better the community's health, knowledge, and overall well-being. Each month approximately 200 community members will participate in classes, prevention lectures and support groups held at the Center. Total programs and services combined will reach over 10,000 participants.

In addition, decreasing readmissions and supporting quality of life post discharge services are offered directly to patients and their family post discharge to decrease the risks of readmission and to increase patient continuity. Support services are referral based and provide assistance with the following: housing/homelessness senior issues, chronic disease issues, drug/alcohol and mental health, cancer and more. This service is currently at Chula Vista and San Diego campuses. More than 1,500 people will participate in these programs.

COMMUNITY-BASED HEALTH IMPROVEMENT ACTIVITIES

Community members will participate in classes, prevention lectures and support groups. Approximately 2,500 participants will take advantage of these programs.

HEART HEALTH MANAGEMENT CLASS

Community members will participate in a three-week educational series for those affected by hypertension, angina, cardiac heart failure or any other heart health concerns. Topics covered will include the risk of heart disease, signs of heart attack, diabetes, cholesterol, physical activity, healthy eating and much more. Participants will learn to play a vital role in improving their health. The overall goal of Your Heart, Your Life is to decrease the readmission rates for heart failure patients, which reduces medical costs for the patient and improves their quality of life. More than 75 people will participate annually.

YOUTH ACTIVITIES

The goal is to implement a wide variety of School-to-Health Career activities including: Camp Scripps which introduces young students to health careers; this three-week camp educates them on the duties performed by professionals in various medical fields. Camp activities include a tour of the hospital, hands on activities involving health care and speakers on health-related issues. Other activities include Health Professionals in the classroom presentations, Health Professions Overview 101/Interactive hospital tour, Mentoring Program, Health Professionals in the Classroom Presentations, 5210 Wellness Message series and surgery viewings. All these activities are designed to pique the interest of students to pursue a career in healthcare. A total of 2,000 students will participate in these programs.

SENIOR HEALTH AND WELL-BEING PROGRAMS

The goal is to increase health care, information and preventative services for seniors/older adults in the South Bay. Each month a variety of senior programs will be held at local senior centers, churches and senior housing. A total of 100 seniors will participate in a variety of activities including senior health chats.

MATERNAL AND CHILD HEALTH PROGRAMS

The goal is to improve the health of pregnant women, mothers and their babies in San Diego County. The program aims to enhance the capacity of the local maternal and child health service systems to improve birth outcomes. Services include home visits, referrals, data entry, follow-up phone calls, and other support services. Home visiting will be offered together with Family Medicine residency and parenting education.

BREAST HEALTH SERVICES

The goal is to increase education, outreach and access to early detection and screenings for breast health services. A total of 75 women will be referred to clinical

breast health services in the community and Scripps Mercy Hospital, Chula Vista radiology services. A total of 1,500 services will be provided, including telephone reminders, outreach and education and case management/care coordination.

PROFESSIONAL EDUCATION AND HEALTH RESEARCH

HEALTH CAREERS PROMOTION AND CONTINUING EDUCATION, SAN DIEGO BORDER AREA HEALTH EDUCATION CENTER (SAN DIEGO BORDER AHEC)

The primary mission of the San Diego Border AHEC program is to build and support a diverse, culturally competent primary health care workforce in San Diego's medically underserved communities. The program will continue in 2020–2021 to improve health care access, education, job training and placement for youth and adults in southern San Diego County. A primary focus is implementing School to Health career activities, including mentoring, camps, job shadowing, health education classes, health chats, support groups, health fairs and others.

HEALTH PROFESSIONS OVERVIEW 101

In 2021, students from local schools will continue to tour the hospital and spend time in clinical departments to learn about a variety of health care professions. Students interact with the staff and ask questions. The tours are two hours and maximum of 12 students per tour.

HEALTH PROFESSIONALS IN THE CLASSROOM

Health care professionals, such as medical residents, dietitians, nurses and doctors, enlighten students on health care careers and health related topics. These are interactive sessions on Nursing 101, Doc 101, Health and Nutrition including the 5210 Wellness series, Stroke Prevention, Breast Health, Teen Pregnancy, Substance Abuse, STD's, Mental Health Issues that Impact Youth and Health Professions 101. In 2021, students will continue to participate in the program and receive health career tools/brochures that include information on education requirements, scholarships and way to pay for college. These presentations will continue to be offered virtually until current COVID-19 restrictions are lifted.

HEALTH PROFESSIONS EDUCATION, RESIDENT AND STUDENT TRAINING

The goal is to raise the numbers, types, diversity and retention of primary health and social service care professionals working in underserved areas.

- Expand community medicine opportunities for family practice residents to provide services and reach at least 300 individuals.

- Continue to work closely with Scripps Family Practice Residency Program to place medical students in community health activities.
- A total of 700 individuals will participate in Health Career Talks, Health Training, community activities, internship programs, residency and community-based rotations and Balint support groups.
- Two articles will be published in peer-reviewed journals.
- Coordinate community experience for visiting/rotating doctors from the PACCT (Pediatricians and Community Collaborating Together) Program as well as visiting and rotating residents and medical students from other programs. Provide community experience for 12 residents and medical students.

ADVISORY BOARD PARTICIPATION AND COALITION BUILDING MEETINGS

More than 700 individuals will participate in local advisory and coalition meetings.

THE CHULA VISTA COMMUNITY COLLABORATIVE

The Chula Vista Community Collaborative (CVCC) meets monthly and draws together the local community to develop strategies to protect resident health and safety, develop economic resources, promote local leadership, enhance the environment and contribute to the celebration of and respect for cultural diversity. The CVCC has more than 150 member organizations. The CVCC is an umbrella for a variety of programs and committees, including the Family Resource Center, and acts as a platform to launch new initiatives to improve quality of life.

SOUTH COUNTY ACTION NETWORK (SOCAN)

This program will continue in 2021. This Action Network consists of individuals and service providers working together to advocate and improve services for older adults and adults with disabilities in the South County region. Currently there are 300 members/participants.

UNCOMPENSATED HEALTH CARE

During Fiscal Year 2021, Scripps Mercy Hospital, Chula Vista will continue to provide health care for vulnerable patients who are unable to pay for services.

- Maintain, communicate, and effectively administer Scripps financial assistance policy in a manner that meets patients' needs.
- Assure that care is available through the emergency department, regardless of a person's ability to pay.

SCRIPPS MERCY HOSPITAL CHULA VISTA CAMPUS 2021 COMMUNITY BENEFIT REPORT; FISCAL YEAR 2020

COMMUNITY HEALTH SERVICES HIGHLIGHTS

Community health activities include prevention and wellness programs, such as screenings, health education, support groups and health fairs, which are supported by operational funds, grants, in-kind donations, and philanthropy. These programs are designed to raise public awareness, understanding of and access to identified community health needs (refer to Section 2, Community Health Needs Assessment).

This section highlights some of Scripps Mercy Hospital, Chula Vista Fiscal Year 2020 (October 1, 2019 to September 30, 2020) community health services achievements. More detailed examples of community health programs are identified in section four titled community health services.

COMMUNITY HEALTH SERVICES

The Scripps Mercy Chula Vista's Well-Being Center's goal is to increase health care access, provide preventative health education, offer youth introduction into health careers education, job training and placement in South Bay. Each month approximately 200 community members participate in classes, prevention lectures and support groups held at the Center. Total programs and services combined reached over 9,000 participants. Total funding of over one million dollars was received from federal and local foundation sources were received this year for Scripps Mercy Hospital Chula Vista Community Benefits and the Family Medicine Residency Program.

In addition, decreasing readmissions is an important goal of the Center. Services are offered directly to patients and their family post discharge to decrease the risks of readmission and to increase patient continuity. Support services are referral based and provide assistance with the following: housing/homelessness senior issues, chronic disease issues, drug/alcohol and mental health, cancer, coordination of follow up services and more. This service is available at the Chula Vista and San Diego campuses. During Fiscal Year 2020, a total of 907 referrals have been received and most of the patients have remained out of the hospital for more than 30 days and are being supported through the Center's staff, programs and activities.

PROFESSIONAL EDUCATION AND HEALTH RESEARCH HIGHLIGHTS

Quality health care is highly dependent upon health education systems and medical research programs. Without the ability to train and inspire a new generation of health

care providers, or to offer continuing education to existing health care professionals, the quality of health care would be greatly diminished.

Each year, Scripps Mercy Hospital, Chula Vista allocates resources to advance health care services through professional health education programs. This section highlights some of Scripps Mercy Hospital, Chula Vista professional education and health research activities in Fiscal Year 2020.

SCRIPPS FAMILY MEDICINE RESIDENCY PROGRAM (2019–2020)

The Scripps Mercy Hospital Family Medicine Residency Program provides a community-based training program dedicated to training culturally competent family physicians, with a commitment to providing healthcare for the underserved border community. There is a focus on promoting, increasing, and improving cultural competency, awareness, and sensitivity among healthcare providers. It provides both residents and staff with opportunities to become more inter-culturally competent through training at San Ysidro Health’s federally qualified health center and with Scripps Mercy Hospital Chula Vista Well Being Center. Most inpatient training takes place at Scripps Mercy Hospital Chula Vista. The Family Medicine residency program collaborates with the Community Benefits Department at Scripps Mercy Hospital, Chula Vista and the San Diego Border AHEC to support a diverse, culturally sensitive primary health care workforce in San Diego’s medically underserved communities.

Both Family Medicine and specialty rotations take place in community-based settings and include integration of public health principles. The program has graduated 18 resident classes for a total of 124 family physicians. Of the current 24 residents, 63% are members of underrepresented minority groups. Of the graduates, 53% are from ethnically diverse backgrounds, reflecting the cultural and ethnic mix of the region.

More than 65 percent of the graduates are specifically serving low-income populations by practicing in a community health center or National Health Service Corp (NHSC) site. All of those working in the community provide primary care and offer a medical home for patients who might otherwise receive no care or seek care through hospital emergency departments.

Resident leadership led to the development of the longitudinal “rPRIDE” curriculum (Residency: Promoting Inclusion, Diversity and Equity) to augment traditional medical training, resident leaders developed the curriculum to focus on health equity and racism in medicine. In a series of workshops, issues of implicit bias, institutionalized racism, social justice, immigration, and care for marginalized communities are explored with expert presentations and personal reflection. Having this curriculum in place has helped

the residents address historical and current topics of disparity, including the migrant crisis in the border community and the impact of the COVID pandemic on underserved communities. The “rPrIDE” curriculum complements the established medical Spanish curriculum to improve cultural and linguistic competence among residents. This longitudinal program incorporates teaching medical Spanish, cultural issues, and health disparities in a clinically relevant context.

Community Benefits and Family Medicine Residency programs have delivered extensive value with superior outcomes. Community services combined reached 43,000 residency clinic visits. There were more than 30,000 clinical visits provided by Scripps Family Medicine Residency.

Community-based activities include childhood obesity prevention, home-based falls assessment in the elderly, maternal and child health outcomes studies and required Community Oriented Primary Care (COPC) Projects for residents. The residency program runs three school-based clinics at Hoover, Southwest and Palomar High Schools that address the health needs of vulnerable adolescents. More than 2,000 youth have been provided clinical services in these clinics. Training in adolescent medicine also includes sports medicine physicals, football game medical coverage and post-game injury clinics. Due to COVID-19, these school-based clinics have not been operating. A new telehealth program has been established for behavioral health services together with Southwest High School and San Ysidro Health.

Residents are also mentors for the School to Health Career Mentoring Program which is designed to help local high school students set a course for a successful career in health care. Students meet with the residents each week and shadow them during rounds and throughout the experience. The Residents provide interactive classroom presentations on a variety of public health concerns, medically focused topics as well as hands-on clinical skills workshops mentoring at the local high schools to more than 2,000 students.

Chula Vista Medical Plaza, a satellite clinic of the FQHC, San Ysidro Health, is the family medical center for the residency program. In Fiscal Year 2020, there were more than 13,000 clinical visits at this location and an additional 3,100 clinical visits at the other community clinics including Operation Samahan, Imperial Beach Clinic and SYH’s Maternal and Child Health Center. Patient demographics reflect the San Diego Border region; 79 percent of patients are Latino, 86 percent live at or below 200 percent of the Federal Poverty Level, and 27 percent are uninsured and are offered a sliding fee program.

The Scripps Mercy Chula Vista site also provides clinical training experiences for 17 San Diego Naval Medical Center Emergency Medicine residents. In addition, two UCSD Psychiatry residents and two UCSD Family Medicine/Psychiatry residents rotate on the Family Medicine inpatient service. In 2020 a new, Teaching Health Centers Internal Medicine Residency was started in affiliation with San Ysidro Health Centers. A class of six Residents started in July 2020 and offers broad-based medical education training in a community setting with diverse patient populations while having the opportunity to be exposed to the teaching format of Scripps Mercy Hospital, Chula Vista. The program has two main goals. First is providing graduate education in the specialty of Internal Medicine to complement the current Scripps Family Practice Residency Program. Second is the training of future Internists to serve the ongoing medical needs and challenges faced in providing accessible quality health care to all populations.

SCRIPPS MERCY HOSPITAL SAN DIEGO CAMPUS COMMUNITY BENEFIT SERVICES SUMMARY LIST

Programs	Persons Served	Staff Hours	Volunteer Hours	Financial Support *
Baby & You - Prenatal Yoga	9	6	0	\$378
Blood Drive - American Red Cross	72	0	0	\$0
California Health Foundation and Trust (CHFT) Fee	0	0	0	\$223,110
CHIP - Community Health Improvement Partners - Suicide Prevent Council	0	60	0	\$4,861
Consumer Center for Health Education and Advocacy (CCHEA)	0	0	0	\$120,000
Family Health Centers of San Diego (FHCS) - GRANT	0	0	0	\$300,000
Family Health Centers of San Diego (FHCS) -In-Kind-Donation	0	0	0	\$890
Family Health Centers of San Diego (FHCS) Internal Medicine Outpatient Teaching Clinic Partnership	0	0	0	\$309,000
Health Professions Training	548	0	0	\$0
In Lieu of Funds	0	0	0	\$890,264
IRB 11-5716 Impact of a More Conservative Approach to CT Scanning in the Trauma Patient	0	2	0	\$162
IRB 11-5782 The Value of Ultrasound Imaging Surveillance for Venous Thromboembolic Disease in Trauma Patients	0	22	0	\$1,783
IRB 11-5786 Proposal to Initiate & Maintain a Multicenter Registry for the Purpose of Determining the Comparative Effectiveness of Risk Assessment, Prophylaxis, Surveillance, and Treatment of Venous Thromboembolism in Trauma Patients	0	4	0	\$324
IRB 12-6045 AAST Vascular Trauma Registry - PROOVIT	0	16	0	\$951
IRB 13-6219 Path to the Operating Room (OR): Need for CT Scan of the Torso in Trauma Patients Who Require Laparotomy for Blunt or Penetrating Trauma	0	2	0	\$162
IRB 15-6652 Geriatric Trauma Care & Outcomes Registry Study	0	40	0	\$3,241
IRB 15-6721 Epidemiology, Injury Control, Treatments, Outcomes, Value of Care, and Performance Improvement	0	2,032	0	\$119,536
IRB 16-6744 Outcomes & Trends in Traumatic Injury & Surgical Critical Care (OSHDP)	0	1,950	0	\$128,663
IRB 16-6752 Characterizing Mortality Following Severe Trauma Injury @ San Francisco General Hospital	0	2	0	\$162
IRB 18-7126 The Pathogenesis of Post Traumatic PE: A Prospective Multicenter Investigation by the CLOTT Study Group: Part 1	0	1,075	0	\$53,453
IRB 18-7165 Current Diagnosis & Management of Pancreatic Injuries - Western Trauma Association Multi-Center Trial	0	109	0	\$5,277
IRB 18-7188 Blunt Bowel & Mesenteric Injury: A WTA Multicenter Prospective Observational Study	0	68	0	\$3,301
IRB 19-7412 Surgical Device Reporting and the FDS: MAUDE vs ASR	0	201	0	\$15,906
IRB 19-7421 Hospital Readmissions: Use of the Nationwide Readmissions Database	0	226	0	\$18,311
IRB 7249 Penetrating Thoracic Trauma Management: Epidemiology & Outcomes from a Nationwide Perspective	0	932	0	\$64,402
IRB: Vulnerability of CA Trauma Centers	0	30	0	\$2,431
La Maestra Community Health Centers	0	0	0	\$40,000

Programs	Persons Served	Staff Hours	Volunteer Hours	Financial Support *
Mental Health Association of San Diego - Meeting of the Minds	0	0	0	\$250
Mental Health Awareness Month	0	20	0	\$1,307
Mercy Inpatient Behavioral Health	0	0	0	\$977,388
Mercy Outreach Surgical Team (MOST)	302	856	776	\$25,612
National Alliance of Mental Illness (NAMI) - Walking Event	0	3	0	\$439
Navy Research Fellow Research Program - Program Administration & Research	0	282	0	\$21,917
Nursing Student Education Rotations	0	14,777	0	\$1,197,102
Pharmacy Residency	0	18,395	0	\$1,224,582
Psychiatric Liaison Team (PLT)	1,503	0	0	\$0
San Diego County Methamphetamine Strike Force (MSF)	0	20	0	\$1,620
San Diego County Policy Panel on Youth Access to Alcohol	0	40	0	\$3,241
San Diego County Prescription Drug Abuse Task Force	0	8	0	\$648
San Diego County Stroke Consortium	0	69	0	\$4,243
San Diego Regional Task Force on the Homeless	0	44	0	\$3,565
Scripps Behavioral Health -A-Visions Service Program	0	0	0	\$96,942
Scripps Resident Clinic at Hillcrest Family Health Center	0	0	0	\$2,606,438
Scripps Health System Community Benefit Planning and Outreach	0	0	0	\$134,086
Scripps Mercy & Family Health Centers Behavioral Health Partnership	0	96	0	\$7,252
Scripps Mercy Hospital Medical Library	0	2,651	0	\$230,229
Scripps Mercy Hospital's GME Program	0	172,489	0	\$5,309,019
Scripps Mercy Supplemental Nutrition Program for WIC	65,655	29,303	0	\$158,371
Scripps Recuperative Care Program (RCS)	44	642	0	\$115,117
Scripps Substance Use Disorder Service (SUDS) Nurse	107	0	0	\$0
Survivors of Suicide Loss - San Diego Chapter	0	0	0	\$521
Survivors of Suicide Loss - Save A Life Community Walk	0	3	0	\$493
Trauma Research Graduate Student Internship Program	0	156	0	\$12,640
Scripps Mercy Hospital San Diego Campus Totals FY 20	68,324	247,114	776	\$14,439,593

* "Financial Support" reflects the cost (labor, supplies, overhead, etc.) associated with the program/service less direct revenue. This figure does not include a calculation for physician and staff volunteer hours. In some instances, an entire community benefit program cost center has been divided between several initiatives.

**Community building activities, bad debt and Medicare shortfall do not count as community benefits under the Schedule H 990 but are still reportable outside the community benefit table.

SCRIPPS MERCY HOSPITAL CHULA VISTA CAMPUS COMMUNITY BENEFIT SERVICES SUMMARY LIST

Programs	Persons Served	Staff Hours	Volunteer Hours	Financial Support *
Blood Drive - American Red Cross	17	0	0	\$0
Breast Health Outreach & Education	1,947	991	0	\$11,942
Centering Pregnancy, Healthy Moms, Healthy Babies	400	0	0	\$0
California Health Foundation and Trust (CHFT) Fee	0	0	0	\$109,890
Chula Vista Community Collaborative	120	275	0	\$7,398
COVID Related Webinars & Meet the Doctor Sessions	100	0	0	\$0
Family Practice Residency & School to Health Careers Program	749	0	0	\$0
First Five Home Visits	34	78	0	\$2,096
First Five Parenting Education	293	673	0	\$18,062
Food Handlers Training Course	39	0	0	\$263
Health Professions Training	852	1,956	8,269	\$52,523
Healthy Development Services Provider Meeting**	225	517	0	\$13,870
In Lieu of Funds	0	0	0	\$145,767
Nursing Student Education Rotations	0	6,086	0	\$496,474
Overeaters Anonymous - Spanish	50	0	0	\$960
Parent Education, Support and Empowerment (PESE) Work Group Meet**	60	138	0	\$3,699
Patient Support to Prevent Readmissions	714	0	0	\$0
Promise Neighborhood (Reducing Childhood Obesity in South Bay)	259	595	0	\$15,966
Residency Led Health and Well-Being Programs	282	0	0	\$0
Scripps Family Medicine Residency Program	0	70,438	0	\$2,806,678
Senior Health & Well-Being Programs	104	239	0	\$6,411
South Bay Community Service - Toy Drive	62	0	0	\$0
South County Action Network (SoCAN) Meeting	300	689	0	\$18,494
Stroke - Parkinson's Exercise Group	42	0	0	\$2,143
Stroke and Brain Injury Support and Education Group	92	1,699	0	\$88,227
Su Vida, Su Corazon. Your Life, Your Heart	50	0	0	\$0
Sweetwater Union High School District Pre-Participation Sports Screen	150	0	0	\$0
Take Off Pounds Sensibly (TOPS) Meeting	248	0	0	\$580
Youth Educational Programs**	1,606	3,687	0	\$99,005
Scripps Mercy Hospital Chula Vista Campus Totals FY 20	8,795	88,059	8,269	\$3,900,447

* "Financial Support" reflects the cost (labor, supplies, overhead, etc.) associated with the program/service less direct revenue. This figure does not include a calculation for physician and staff volunteer hours. In some instances, an entire community benefit program cost center has been divided between several initiatives.

**Community building activities, bad debt and Medicare shortfall do not count as community benefits under the Schedule H 990 but are still reportable outside the community benefit table.

SCRIPPS MERCY HOSPITAL UNCOMPENSATED CARE (SAN DIEGO & CHULA VISTA COMBINED)

Programs	Persons Served	Staff Hours	Volunteer Hours	Financial Support*
Bad Debt	0	0	0	\$3,252,959
Charity Care	0	0	0	\$10,204,940
Medi-Cal and Other Means-Tested Programs (Shortfall) ***	0	0	0	\$12,297,580
Medicare and Medicare HMO (Shortfall) **	0	0	0	\$26,192,822
Scripps Mercy Hospital Uncompensated Care Totals FY 20	0	0	0	\$51,948,302
Scripps Mercy Community Benefits Totals FY 20	77,119	335,173	9,045	\$70,288,342
<p>* "Financial Support" reflects the cost (labor, supplies, overhead, etc.) associated with the program/service less direct revenue. This figure does not include a calculation for physician and staff volunteer hours. In some instances, an entire community benefit program cost center has been divided between several initiatives.</p> <p>**Community building activities, bad debt and Medicare shortfall do not count as community benefits under the Schedule H 990 but are still reportable outside the community benefit table.</p>				

Section 9

Scripps Green Hospital

SCRIPPS GREEN HOSPITAL

ABOUT SCRIPPS GREEN HOSPITAL



Located on Torrey Pines Mesa in La Jolla, Scripps Green Hospital has 173 licensed beds, 1,293 employees and cares for 4.5 percent of the inpatient population living in the hospital's service area. Within the service area, Scripps Green cares for 7.3 percent of Medicare patients, 0.2 percent of Medi-Cal patients, 3.9 percent of commercially insured patients, and 1.9 percent of patients with other payment sources including self-pay and charity care.

Scripps Green offers a wide range of clinical and surgical services, including intensive care, cancer/oncology, cardiothoracic and orthopedic surgeries. Specialty services include interventional, cardiology, orthopedics, blood and bone marrow transplantation, solid organ transplantation and clinical research. Additionally, Scripps Center for Integrative Medicine was established in 1999. Scripps Green is a teaching facility, offering graduate medical education.

DISTINGUISHED PROGRAMS AND SERVICES

- Bone Marrow Transplant Program
- Heart, Lung and Vascular Center
- Organ Transplantation, Caregiver Support Group, Living Donor and Liver Disease Center
- Scripps Radiation Therapy Center
- Big Horn Dermatology and Mohs Surgery Center
- Scripps Shiley Center for Integrative Medicine
- Donald P. and Darlene V. Shiley Musculoskeletal Center
- Emily Fenton Hunte Breast Care Center
- Primary Stroke Center designated by The Joint Commission
- Scripps Center for Organ Transplantation

SCRIPPS GREEN HOSPITAL 2021 COMMUNITY BENEFIT PLAN; FISCAL YEAR 2021

The Scripps Green Hospital 2021 Community Benefit Plan provides a description of the overall Scripps community benefit goal and the hospital's objectives and strategies to support community health during Fiscal Year 2021 (October 2020 to September 2021).

THE SCRIPPS GREEN HOSPITAL 2021 COMMUNITY BENEFIT GOAL

Make a measurable impact on the health status of the community through improved access to care, health improvement programs, and professional education and health research.

SCRIPPS GREEN HOSPITAL FISCAL YEAR 2021 COMMUNITY BENEFIT OBJECTIVES

COMMUNITY HEALTH SERVICES

- Continue to partner with St. Leo's Mission Community Clinic. Staffed by internal medicine residents and Scripps Clinic staff physicians. This clinic serves lower income and indigent people in North County San Diego. The clinic is operated one evening and Saturday morning each week, typically treating up to 25 patients at each session.
- Continue to conduct blood drives on behalf of the American Red Cross.
- Continue to provide physical, emotional and spiritual support for cancer patients during their treatment.
- Continue to offer free risk assessment consultations and education for women who are at high risk for the BRCA gene mutation.
- Provide support services and community resources for healthcare workers, families, caregivers and cancer patients.
- Provide psychosocial services and guidance on transportation, housing, homecare, financial benefits, emotional concerns and other issues.
- Continue to work with community resources to enhance patient cancer navigator role and patient navigator education and resources.
- Continue to provide education and support for patients going through transplants, end stage liver disease and renal disease. Additional services for caregivers and those thinking about becoming an organ donor.

PROFESSIONAL EDUCATION AND HEALTH RESEARCH

Maintain and improve the graduate medical education program at Scripps Green and Scripps Clinic. The Scripps Clinic and Scripps Green Department of Graduate Medical Education serves more than five thousand San Diegans each year, both inpatient and outpatient. All residents demonstrate a strong commitment to community service by maintaining weekly clinics at St. Leo's Mission Community Clinic.

UNCOMPENSATED HEALTH CARE

During Fiscal Year 2021, Scripps Green will continue to provide health care services for vulnerable patients who are unable to pay for services.

- Maintain, communicate and effectively administer Scripps financial assistance policy in a manner that meets patients' needs.

SCRIPPS GREEN HOSPITAL 2021 COMMUNITY BENEFIT REPORT; FISCAL YEAR 2020

The Scripps Green Hospital Community Benefit Report is an account of the hospital's dedication and commitment to improving the community's health, detailing programs that have provided benefit over and above standard health care practices in Fiscal Year 2020 (October 2019 to September 2020).

FOSTERING VOLUNTEERISM

In addition to the financial community benefit contributions made during Fiscal Year 2020, Scripps Green employees and affiliated physicians donated a significant portion of their personal time volunteering to support Scripps sponsored community benefit programs and services. In Fiscal Year 2020, Scripps Green had 280 volunteer hours, it is estimated that the dollar value associated with this volunteer labor is \$14,787.⁴⁹

MAKING A FINANCIAL COMMITMENT

During Fiscal Year 2020, Scripps Green devoted **\$19,181,870** to community benefit programs, including uncompensated health care, community health services, professional education and health research. The programs offered by Scripps Green emphasize community-based prevention efforts and use innovative approaches to reach residents at greater risk for health problems.

COMMUNITY BENEFIT SERVICES HIGHLIGHTS

Community Benefit Financial Commitment

\$19,181,870

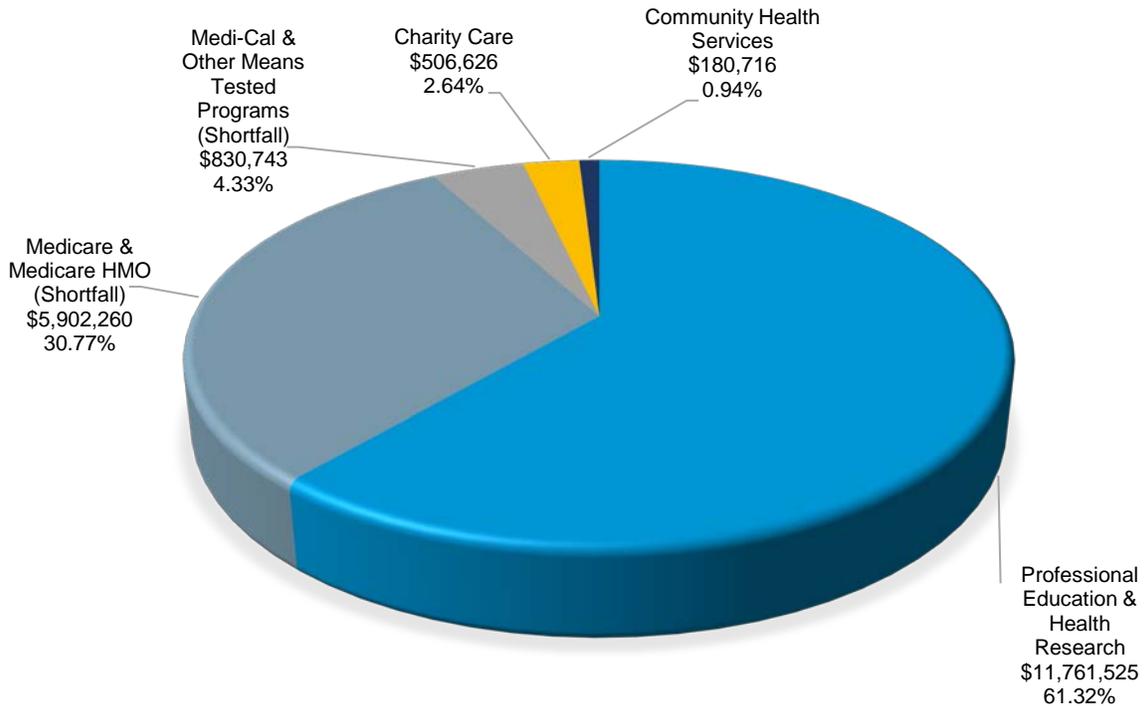
Community Benefit Services	
Charity Care	\$506,626
Community Health Services	\$180,716
Medi-Cal & Other Means Tested Shortfall	\$830,743
Medicare & Medicare HMO Shortfall	\$5,902,260
Professional Education & Research	\$11,761,525
Refer to Figure 9.1 presented on the following page for a graphic representation of Fiscal Year 2020	

⁴⁹ Calculations based upon an average hourly wage for the Scripps Health system plus benefits.

FIGURE 9.1

Fiscal Year 2020

SCRIPPS GREEN HOSPITAL COMMUNITY BENEFIT SERVICES DISTRIBUTION, \$19,181,870



Community Benefits Services (Provider Fee Impact)	Charity Care	Medi-Cal (Shortfall)	Medicare & Medicare HMO (Shortfall)	Community Health Services	Prof Ed & Health Research	Total
Before Provider Fee	\$506,626	\$973,611	\$5,902,260	\$180,716	\$11,761,525	\$19,324,739
Provider Fee	-	\$142,868	-	-	-	\$640,760
Net After Provider Fee	\$506,626	\$830,743	\$5,902,260	\$180,716	\$11,761,525	\$19,181,870

COMMUNITY BENEFIT SERVICES:

Community benefit services include those programs offered to the community that go above and beyond what is provided as a normal part of patient care. Scripps divides community benefit services into three categories, including uncompensated health care, community health services and professional education and health research. Uncompensated care includes charity care, bad debt, and Medi-Cal and Medicare shortfalls

SCRIPPS GREEN HOSPITAL COMMUNITY SERVICES, FISCAL YEAR 2020

COMMUNITY HEALTH SERVICES HIGHLIGHTS

Community health services include prevention and wellness programs such as screenings, health education, support groups and health fairs which are supported by operational funds, grants, in-kind donations and philanthropy. These programs are designed to raise public awareness and understanding of, and access to, identified community health needs (refer to Section 2, Community Health Needs Assessment).

During Fiscal Year 2020 (October 2019 to September 2020) Scripps Green invested \$180,716 in community health services. This figure reflects the costs associated with providing community health improvement activities, including salaries, materials and supplies, minus billable revenue. This section highlights some of Scripps Green's Fiscal Year 2020 community health services achievements.

PROFESSIONAL EDUCATION AND HEALTH RESEARCH HIGHLIGHTS

Quality health care is highly dependent upon health education systems and medical research programs. Without the ability to train and inspire a new generation of health care providers, or offer continuing education to existing health care professionals, the quality of health care would be greatly diminished. Medical research also plays an important role in improving the community's overall health by developing new and innovative treatments options.

Each year, Scripps Green allocates resources to advance health care services through professional education programs. To enhance service delivery and treatment practices for San Diego County; Scripps Green invested \$11,761,525⁵⁰ in professional training and health research programs during Fiscal Year 2020 (October 2019 to September 2020). This section highlights some of Scripps Green professional education activities.

⁵⁰ Reflects clinical research as well a professional education for non-Scripps employees, nursing resource development and other health care professional education. Research primarily take place at Scripps Clinical Research Services, Scripps Whittier Diabetes Institute, Scripps Genomic Medicine and Scripps Translational Science Institute. Calculations based on total program expenses.

INTERNAL MEDICINE RESIDENCY PROGRAM AND ST. LEO'S MISSION COMMUNITY CLINIC

With 47 residents and 46 fellows, the Scripps Clinic/Scripps Green Hospital Department of Graduate Medical Education serves about five thousand San Diegans each year. All residents and many attending physicians in the program demonstrate a strong commitment to community service by maintaining an evening clinic at St. Leo's Mission Community Clinic. Scripps residents and many attending physicians maintain an evening clinic at St. Leo's Mission Community Clinic in North County. Two residents volunteer every Wednesday to provide medical care to uninsured patients with a variety of conditions, including diabetes, high blood pressure and high cholesterol. They also identify many acute conditions, including viral infections, skin infections, eye problems and musculoskeletal issues, and educate patients about their health. Patients may get flu vaccinations and some basic lab tests. If needed, St. Leo's patients are referred to providers who offer care at a reduced cost. During Fiscal Year 2020, St. Leo's clinic suspended its evening clinic due to COVID-19.

MIGRANT SHELTER CLINIC

In response to the urgent need for physician volunteers to help screen migrants seeking asylum in the US, multiple GME residents volunteered for a refugee health assessment program at a South Bay shelter. Scripps residents screened approximately 150+ patients from January through March.

FIJI SOLOMON ISLANDS MEDICAL MISSION

The medical mission consists of Scripps Health general medical specialists and residents setting up clinics on rural islands for the purpose of providing much needed medical care, medical supplies and surgical screening for an underserved population that have no access to basic medical care. The International Medical Missions provide an exceptional clinical education experience to our senior Internal Medicine residents at Scripps Clinic and Scripps Green Hospital. The 2020 mission brought our residents to the Solomon Islands in the South Pacific, where the ratio of doctors to population is 1:20,000. The Loloma Foundation provides medical care to these islanders in association with Scripps Health. Residents experienced the challenges of providing care in third world conditions, without technology, and using only their excellent academic and practical training to diagnose and treat patients. Islanders with serious medical conditions are referred to the nearest hospital, which is several hours away by boat and car. Total of patients served in the January 2020 mission was 700.

SCRIPPS GREEN HOSPITAL COMMUNITY BENEFIT SERVICES SUMMARY LIST

Program	Persons Served	Staff Hours	Volunteer Hours	Financial Support*
Alcoholics Anonymous	1,024	0	0	\$636
Association of Clinical Research Professionals	60	0	0	\$40
Bad Debt**	0	0	0	\$0
Blood Drive - American Red Cross	46	0	0	\$0
Charity Care	0	0	0	\$506,626
Fiji Solomon Islands Medical Mission	700	0	160	\$0
Food Addicts Anonymous	276	0	0	\$383
In Lieu of Funds	0	0	0	\$3,534
Joe Niekro Foundation	100	0	0	\$199
Medi-Cal and Other Means Tested Government Programs***	0	0	0	\$830,743
Medicare and Medicare HMO**	0	0	0	\$5,902,260
Nursing Student Education Rotations	0	5,153	0	\$411,988
Organ Transplant Support Groups	130	0	0	\$0
San Diego Echo Society	105	0	0	\$595
Scripps Green Hospital Department of GME	0	198,454	0	\$11,349,538
Scripps Green Hospital Medical Library	0	0	0	\$175,011
Spondylitis Association	105	0	0	\$318
St. Leo's Mission Medical Clinic	124	0	120	\$0
Scripps Green Hospital Totals FY 20	2,670	203,606	280	\$19,181,870

* **"Financial Support"** reflects the cost (labor, supplies, overhead, etc.) associated with the program/service less direct revenue. This figure does not include a calculation for physician and staff volunteer hours. In some instances, an entire community benefit program cost center has been divided between several initiatives.

**Community building activities, bad debt and Medicare shortfall do not count as community benefits under the Schedule H 990 but are still reportable outside the community benefit table.

*** Hospital provider fee was reported as offsetting revenue from Medi-Cal.

Section 10

Scripps Whittier Diabetes
Institute

SCRIPPS WHITTIER DIABETES INSTITUTE

ABOUT SCRIPPS WHITTIER DIABETES INSTITUTE

Scripps Whittier Diabetes Institute is caring for and educating people with diabetes through diabetes management and support programs. The mission is to improve quality of life for people with diabetes through innovative education programs, clinical care, research and collaborations that pursue prevention and a cure. The Institute manages the Scripps Diabetes Clinical Care Line and provides diabetes care and education in the hospitals, ambulatory care clinics, and in the community.

Founded in 1982 Scripps Whittier stands alone as the region's leading comprehensive diabetes organization. The mandate at Scripps Whittier has always been to achieve excellence in diabetes care, research and education. The Institute accomplishes its mission by being a resource and partner with Scripps Health and collaborating with other institutions, their researchers and physician's, including the University of California San Diego, San Diego State University, Scripps Research Translational Institute, Community Housing Works, Chula Vista Elementary School District, and San Diego Community Clinics.

SCRIPPS WHITTIER DIABETES INSTITUTE DISTINGUISHING PROGRAMS

- Recognized as a comprehensive international center of excellence in diabetes care and prevention, professional education, community benefit programs, and clinical, health services and behavioral research.
- Operates diabetes self-management education programs accredited by the American Diabetes Association. Nurses and dieticians certified in diabetes education, along with community-based diabetes health educators, provide thousands of people with diabetes and nutrition education and support each year.
- Provides education and care management to women with gestational diabetes and is recognized as a Sweet Success provider by the State of California.
- Credited with the first successful replication of insulin producing human islet cells outside the human body. Dr. Alberto Hayek's achievement is a milestone on the pathway to a cure.
- Internationally recognized as one of the most effective approaches to diabetes management in low-income and diverse populations, Project Dulce has provided diabetes care and self-management education at community health centers, and other community-based locations for over 20 years. Nurse-led-teams focus on achieving measurable improvements in the health of their patients, while peer

educators help patients overcome cultural, economic or behavioral barriers to successfully managing their disease. Program results have been published in medical literature and have been recognized as innovative solutions to the diabetes epidemic. Project Dulce has expanded its reach throughout California, Baja California, and nationally through its training and replication of programs.

- Provides retinal screenings for low-income people in order to detect vascular eye problems to prevent serious complications and blindness.
- Conducts community-based research programs, building on a long history of partnerships with San Diego County Health and Human Services Agency, federally qualified health centers and community clinics, Scripps Research Translational Institute (SRTI) and San Diego State University, to prevent and treat diabetes in San Diego's multi-ethnic communities.
- Serves as the community engagement arm for the Clinical Translational Science Award (CTSA) funded by the National Institute of Health. In collaboration with the Scripps Research Translational Institute, the scientific and community worlds are merged to develop community driven research agendas in diabetes, wireless medicine and genomics.
- Established the Scripps San Diego Diabetes Genebank, a biobank designed to analyze the genetic predisposition of developing Type 2 diabetes and associated metabolic abnormalities in a Mexican American cohort. There have been tremendous advances in genomics medicine with minimal focus on minority groups, such as Latinos, who develop Type 2 diabetes at much higher rates than other groups.
- With a commitment to growth and innovation, Scripps Whittier is building on Project Dulce's proven success, Project Dulce 2.0 reached 125 participants to test the effectiveness of using health technology via text messages tailored to support patients with managing Type 2 diabetes with prompts ranging from healthy eating habits, physical activity reminders and behavior change management.
- Scripps Whittier is operating three NIH community-based research trials focused on closing the health disparities gap. One program trains medical assistants to provide health coaching in a primary care setting. The second, Mi Puente/The Bridge, uses a nurse/volunteer team to help patients with behavioral health and chronic disease get the services they need after hospital discharge to prevent readmissions and improve health and quality of life. The third builds on Project Dulce's successful texting program, Dulce-Digital Me, by testing the effectiveness of real time digital feedback to people with diabetes.

- Train health professionals locally and across the nation to provide the highest quality and most up-to-date diabetes care. Courses are designed for health care providers seeking to understand the new and complex clinical treatment options for Type 1, Type 2, gestational diabetes and prevention. Scripps Whittier's professional education program is led by a team of experts that include endocrinologists, nurses, dieticians, psychologists and community health workers.
- Leads the diabetes care line at Scripps and deploys diabetes educators and advance practice nurses in Scripps inpatient and ambulatory environments to support quality diabetes care and patient education.
- The National Institute of Diabetes and Digestive and Kidney Diseases awarded a five-year, \$3.3 million grant in 2020 to Scripps Whittier Diabetes Institute to study the integration of mental health services in the care of patients with Type 1 diabetes to better address the emotional distress than often accompanies the chronic disease. Researchers at Scripps Whittier will use the federal funding to launch a large-scale, randomized, controlled clinical trial that will evaluate whether the integration of diabetes distress care with routine medical care results in better management of diabetes and better health-related quality of life. The innovative, RN/CDCES + Psychologist model called ACTIVATE will specifically be designed to provide wrap-around support for patients struggling with glycemic control (HbA1c>8%) and emotional distress related to their Diabetes Distress". The study is a collaborative effort that capitalizes on the complimentary expertise of a clinical psychologist/endocrinologist partnership.

SCRIPPS WHITTIER DIABETES INSTITUTE 2021 COMMUNITY BENEFIT PLAN; FISCAL YEAR 2021

Scripps Whittier Diabetes Institute 2021 Community Benefit Plan provides a description of the overall Scripps community benefit goal of Scripps Whittier Diabetes Institute's objectives and strategies to support community health during Fiscal Year 2021 (October 2020 to September 2021).

THE SCRIPPS 2021 COMMUNITY BENEFIT GOAL

Make a measurable impact on the health status of the community through improved access to care, health improvement programs, and professional education and health research.

SCRIPPS WHITTIER DIABETES INSTITUTE FISCAL YEAR 2021 OBJECTIVES

SCRIPPS WHITTIER DIABETES PROGRAM

Scripps Whittier diabetes self-management training and education program has integrated the diabetes education services of two large primary and multi-specialty groups; Scripps Clinic and Scripps Coastal Medical Group. This consolidation has expanded individual and group education and diabetes support through enhanced efficiencies.

GESTATIONAL DIABETES MANAGEMENT AND EDUCATION PROGRAM

Scripps Whittier Diabetes Program will continue to collaborate with Scripps Clinic OB-GYNs and endocrinologists to provide comprehensive care and education to women with gestational diabetes.

PROJECT DULCE

Scripps Whittier will continue to offer a comprehensive, culturally sensitive diabetes self-management program for underserved and uninsured populations.

During Fiscal Year 2021, Project Dulce will:

- Continue to provide diabetes self-management education in community clinics and free diabetes education and support groups throughout San Diego County.
- Collaborate and train ethnic specific organizations to provide health education and resources in their communities.
- Continue to train community health workers and health providers in underserved communities in California to implement the Project Dulce model in their communities.

- Collaborate with Scripps Mercy Hospital San Diego to reach patients with diabetes who need a medical home, reducing preventable hospital readmissions.

COMMUNITY ENGAGEMENT

- Identify and develop partnerships with community health providers, researchers and community stakeholders to promote bi-directional dialogues that foster equitable research agendas, discovery, application and dissemination of science that improves health and reduces disparities.

COMMUNITY EDUCATION

- Participate in community health fairs and screenings in Fiscal Year 2021 to expand public awareness about diabetes risk factors, prevention, and health maintenance for those with diabetes.
- Community events are planned in collaboration with the American Diabetes Association, Dia de La Mujer (Day of the Woman), Take Control of Your Diabetes (TCOYD) conference and Scripps Wellness Day.

DIABETES PREVENTION

- Scripps Whittier will provide the evidence-based Diabetes Prevention Program, a year-long intensive lifestyle intervention demonstrated program to reduce the incidence of diabetes among those at risk (with prediabetes), and with a focus on the highest risk population's in San Diego's South Bay.

PROFESSIONAL EDUCATION

- Scripps Whittier's education department will provide ongoing classes and programs tailored to the health care professional in communities throughout the United States and globally.

SCRIPPS WHITTIER DIABETES INSTITUTE 2021 COMMUNITY BENEFIT REPORT; FISCAL YEAR 2020

The Scripps Whittier Diabetes Institute 2021 Community Benefit Report is an account of Scripps Whittier's dedication and commitment to improving the community's health, detailing programs that have provided benefit over and above standard health care practices in Fiscal Year 2020 (October 2019 to September 2020).

MAKING A FINANCIAL COMMITMENT

During Fiscal Year 2020, Scripps Whittier Diabetes Institute devoted \$714,563 to community benefit programs, including uncompensated health care, community health services, professional education and health research. The programs offered by Scripps Whittier emphasize community based prevention efforts and use innovative approaches to reach residents at greater risk for health problems.

The diabetes epidemic permeates every facet of our community. The percentage of individuals entering hospitals with diabetes is rising, the number of children developing diabetes is growing, and larger numbers of people are experiencing complications from diabetes, such as renal failure and heart disease, at an earlier age. Developing unique and innovative clinical programs and community-based research is urgently needed to combat this epidemic. The diabetes and obesity epidemic have a disproportionate impact on low-income ethnic groups, yet there is little research demonstrating clinically and cost-effective care and treatment models for these populations. Diabetes leads to school and work absenteeism, elevated hospitalization rates, frequent emergency room visits, permanent physical disabilities and sometimes death.

Diabetes is an important health issue because of its prevalence, its impact on morbidity and mortality, and its preventability. Diabetes is a major cause of heart disease and stroke and an analysis of mortality data for San Diego County found that in 2016 'Diabetes mellitus' was the seventh leading cause of death.

The percentage of adults aged 20 and older who have ever been diagnosed with diabetes was 9.4% in 2017. In San Diego County diabetes has been steadily rising since 2005 according to the National Center for Chronic Disease Prevention and Health Promotion. Type 2 diabetes is an important target for intervention because hospitalizations due to diabetes related complications are potentially preventable with proper management and a healthy lifestyle

More than 1 out of 3 adults have prediabetes and 15–30% of those with prediabetes will develop Type 2 diabetes within 5 years. This is especially true in the South Bay

communities in San Diego. Specifically, the city of Chula Vista is home to 26,000 Latinos with diagnosed diabetes and thousands more who are undiagnosed, have prediabetes and are at high risk of developing diabetes.

PROJECT DULCE MODEL, 25 YEARS OF EXPERIENCE

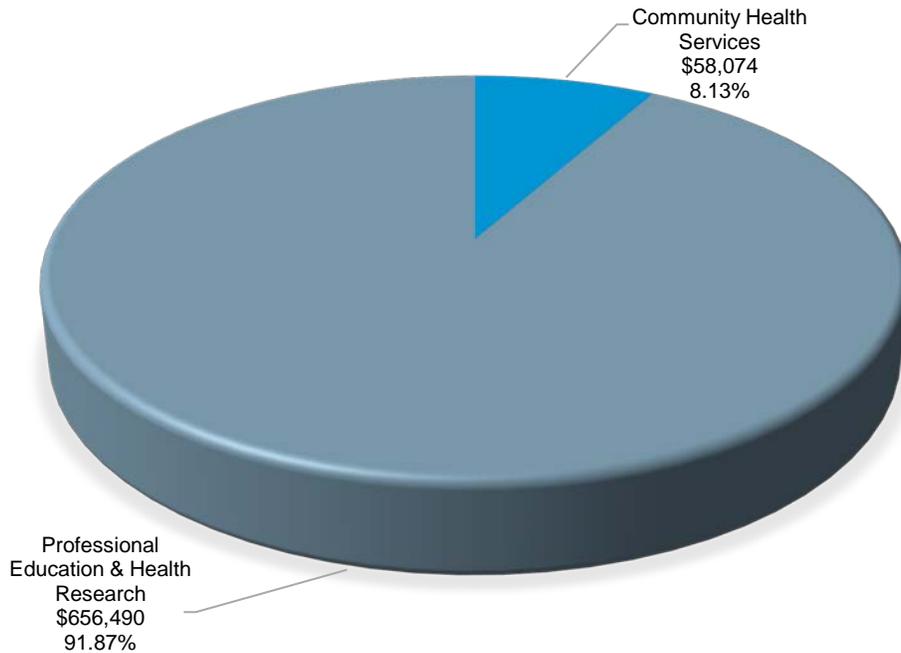
The key elements of Project Dulce are multidisciplinary clinical teams and peer educators (Promotores) who work together to improve health and empower patients. This model has improved clinical outcomes for glucose, blood pressure and LDL cholesterol. It has improved behavior outcomes and patient satisfaction and lowered costs to the health system through fewer ER visits and hospitalizations. Over 35,000 individuals have been treated in San Diego alone.⁵¹

⁵¹ Phillis-Tsimikas A, et al. Community Created Programs: Clinical Diabetes, Fall 2012; 30; 4; 156-163. Phillis-Tsimikas A. et al. Diabetes Care 2004;27: 110-115

FIGURE 10.1

Fiscal Year 2020

SCRIPPS WHITTIER DIABETES INSTITUTE COMMUNITY
BENEFIT SERVICES DISTRIBUTION, \$714,564



COMMUNITY BENEFIT SERVICES

Community benefit services include those programs offered to the community that go above and beyond what is provided as a normal part of patient care. Scripps divides community benefit services into three categories, including uncompensated health care, community health services and professional education and health research. Uncompensated care includes charity care, bad debt, and Medi-Cal and Medicare shortfalls.

SCRIPPS WHITTIER DIABETES INSTITUTE COMMUNITY BENEFIT SERVICES SUMMARY LIST

Program	Persons Served	Staff Hours	Volunteer Hours	Financial Support*
Professional Education and Health Services: Scripps Whittier Diabetes Institute Federal Grants	0	27,638	0	\$656,490
Behavioral Health Intervention Program in Diabetes (BHIP)	177	160	0	\$1,480
Diabetes Education Outreach Events	37	34	0	\$409
Diabetes Prevention Program	1,550	1,403	0	\$19,536
Dulce Digital-Me	71	64	0	\$594
Healthy Living Classes	36	33	0	\$476
Mi Puente Program	409	370	0	\$3,420
Project Dulce Care Management	2,884	2,611	0	\$24,491
Scripps Diabetes Retinal Screening Program	917	830	0	\$7,668
Scripps Whittier Diabetes Institute Totals FY 20	6,081	33,144	0	\$714,564
<p>* "Financial Support" reflects the cost (labor, supplies, overhead, etc.) associated with the program/service less direct revenue. This figure does not include a calculation for physician and staff volunteer hours. In some instances, an entire community benefit program cost center has been divided between several initiatives.</p> <p>**Community building activities, bad debt and Medicare shortfall do not count as community benefits under the Schedule H 990 but are still reportable outside the community benefit table.</p> <p>*** Hospital provider fee was reported as offsetting revenue from Medi-Cal.</p>				

Section 11

Scripps Medical Foundation

SCRIPPS MEDICAL FOUNDATION

ABOUT SCRIPPS MEDICAL FOUNDATION

Scripps Medical Foundation provides health programs and services throughout San Diego County through care delivered principally by Scripps Clinic Medical Group (Scripps Clinic) and Scripps Coastal Medical Group (Scripps Coastal Medical Center).

SCRIPPS CLINIC

Founded in 1924, Scripps Clinic provides multispecialty outpatient care for patients at multiple locations throughout San Diego County, including Del Mar, Encinitas, Rancho Bernardo, San Diego, Rancho San Diego, Santee and La Jolla. Scripps Clinic and its physicians are world renowned for research-driven care and medical specialty expertise. Scripps Clinic's main facility is located on Torrey Pines Mesa, adjacent to Scripps Green Hospital. Scripps Clinic physicians are board certified in more than 60 fields of medicine and surgery. In addition to primary care, Scripps Clinic offers the following services: Brain and Stroke Research and Treatment Center, Musculoskeletal Center, Scripps Center for Integrative Medicine, Scripps Clinic Center for Weight Management and Bariatric services. In January 2017, Scripps Health launched the Scripps Women's Heart Center, offering expert cardiology care for women by women. The center, is led by four female cardiologists, located at the John R. Anderson V Medical Pavilion outpatient clinic on the Scripps Memorial Hospital La Jolla campus.

SCRIPPS COASTAL MEDICAL CENTER

Scripps Coastal Medical Center specializes in family medicine, internal medicine, obstetrics and gynecology and pediatrics. Scripps Coastal Medical Center primary care providers and their teams provide annual physicals, preventive health screenings, wellness information, lab tests, urgent care, express care and radiology services. When specialty care is needed, patients have access to an extensive network of medical experts throughout the region.

Scripps Coastal Medical Center offers locations from Oceanside to Eastlake. Scripps opened walk-in clinics for minor conditions and ailments at most Scripps Coastal Medical Center sites to improve access for patients to acute care.

SCRIPPS MEDICAL FOUNDATION 2021 COMMUNITY BENEFIT PLAN; FISCAL YEAR 2021

The Scripps Medical Foundation 2021 Community Benefit Plan describes the overall Scripps community benefit goal and the hospital's and clinic's objectives/strategies to support community health improvement during Fiscal Year 2021 (October 2020 to September 2021).

THE SCRIPPS 2021 COMMUNITY BENEFIT GOAL

Make a measurable impact on the health status of the community through improved access to care, health improvement programs, professional education and health research.

SCRIPPS MEDICAL FOUNDATION FISCAL YEAR 2021 COMMUNITY BENEFIT OBJECTIVES

COMMUNITY HEALTH SERVICES

- Scripps Clinic will continue to provide hip and knee orthopedic surgery education for the general public.

UNCOMPENSATED HEALTH CARE

During Fiscal Year 2021, Scripps Medical Foundation will continue to provide health care services for vulnerable patients who are unable to pay for services.

- Maintain, communicate and effectively administer Scripps financial assistance policy in a manner that meets patients' needs.

SCRIPPS MEDICAL FOUNDATION 2021 COMMUNITY BENEFIT REPORT; FISCAL YEAR 2020

This section is an account of Scripps dedication and commitment to improving the health of the community, detailing the Scripps Medical Foundation programs that have provided benefit over and above standard health care practices in Fiscal Year 2020 (October 2019 to September 2020).

MAKING A FINANCIAL COMMITMENT

During Fiscal Year 2020, Scripps Medical Foundation devoted **\$181,297,662** to community benefit programs, including uncompensated health care, community health services, professional education and health research. The programs offered by Scripps emphasizes community-based prevention efforts and use innovative approaches to reach residents at greater risk for health problems.

COMMUNITY BENEFIT SERVICES HIGHLIGHTS

Community Benefit Financial Commitment

\$181,297,662

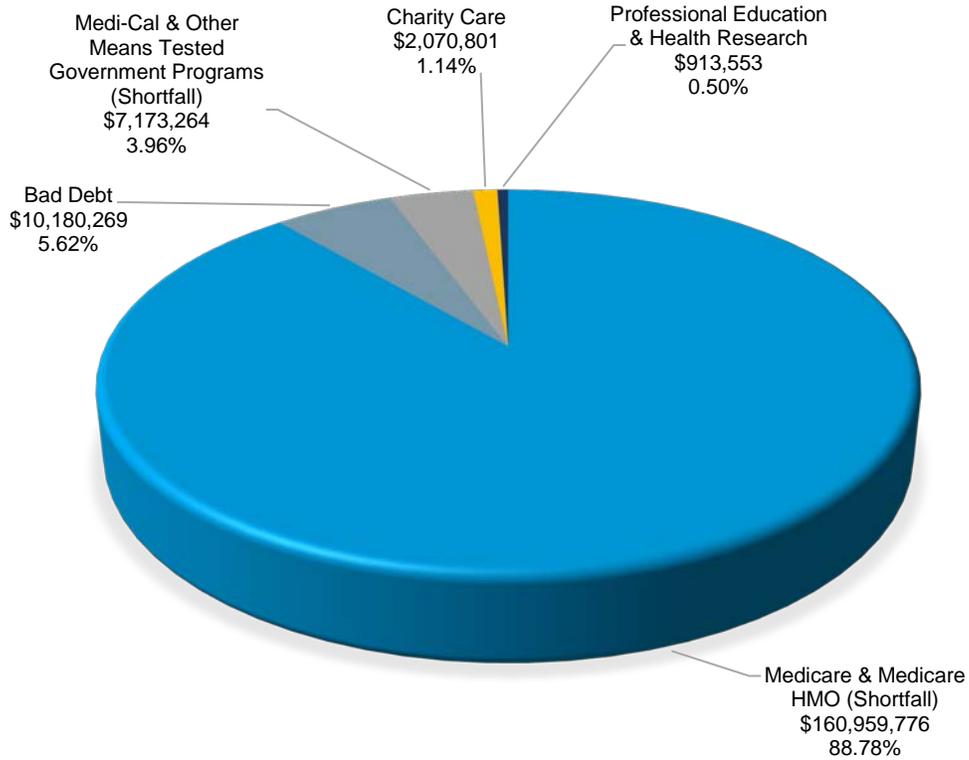
Community Benefit Services

Bad Debt	\$10,180,269
Charity Care	\$2,070,801
Medi-Cal & Other Mean Tested Shortfall	\$7,173,264
Medicare Shortfall & Medicare HMO	\$160,959,776
Professional Education & Research	\$913,553
Refer to Figure 11.1 presented on the following page for a graphic representation of fiscal year 2020.	

FIGURE 11.1

Fiscal Year 2020

SCRIPPS MEDICAL FOUNDATION COMMUNITY BENEFIT SERVICES DISTRIBUTION, \$181,297,662



COMMUNITY BENEFIT SERVICES

Community benefit services include those programs offered to the community that go above and beyond what is provided as a normal part of patient care. Scripps divides community benefit services into three categories, including uncompensated health care, community health services and professional education and health research. Uncompensated care includes charity care, bad debt, and Medi-Cal and Medicare shortfalls.

SCRIPPS MEDICAL FOUNDATION FISCAL YEAR 2020 COMMUNITY HEALTH SERVICES

COMMUNITY HEALTH SERVICES HIGHLIGHT

Community health services include prevention and wellness programs such as screenings, health education, support groups and health fairs which are supported by operational funds, grants, in-kind donations and philanthropy. These programs are designed to raise public awareness and understanding of, and access to, identified community health needs (refer to Section 2, Community Health Needs Assessment).

SCRIPPS MEDICAL FOUNDATION COMMUNITY BENEFIT SERVICES SUMMARY LIST

Program	Persons Served	Staff Hours	Volunteer Hours	Financial Support*
Bad Debt**	0	0	0	\$10,180,269
Charity Care	0	0	0	\$2,070,801
Medi-Cal and Other Means Tested Government Programs***	0	0	0	\$7,173,264
Medicare and Medicare HMO**	0	0	0	\$160,959,776
Nursing Student Education Rotations	0	11,896	0	\$913,553
Scripps Medical Foundation Totals FY 20	0	11,896	0	\$181,297,662

* **"Financial Support"** reflects the cost (labor, supplies, overhead, etc.) associated with the program/service less direct revenue. This figure does not include a calculation for physician and staff volunteer hours. In some instances, an entire community benefit program cost center has been divided between several initiatives.

**Community building activities, bad debt and Medicare shortfall do not count as community benefits under the Schedule H 990 but are still reportable outside the community benefit table.

*** Hospital provider fee was reported as offsetting revenue from Medi-Cal.

Section 12

Scripps System wide Programs

SCRIPPS SYSTEM WIDE PROGRAMS

ABOUT SCRIPPS SYSTEM WIDE PROGRAMS

Scripps supports number of programs that meet the health care needs of patients and community members throughout San Diego County. These include programs operated by Seaport Scripps Home Health, Scripps MD Anderson Cancer Center, the Scripps Clinical Research Center and Scripps System wide Community Benefit Services.

SCRIPPS MD ANDERSON CANCER CENTER

In 2016, Scripps Health and The University of Texas MD Anderson Cancer Center announced a partnership agreement to create a comprehensive and clinically integrated cancer center in San Diego, to be known as Scripps MD Anderson Cancer Center. This new center combined Scripps leading knowledge with MD Anderson's world-renowned expertise, best practices and guidelines to serve patients in San Diego and Southern California. Scripps MD Anderson is committed to fighting cancer through a collaborative, team approach that puts the patient at the center of care. Scripps and MD Anderson are both nationally recognized leaders in cancer therapy and are combining their strength to bring some of the most advanced cancer care available to San Diego. Scripps MD Anderson physicians and staff work collaboratively toward cancer prevention, early detection, coordinated treatment and community support services, and are actively involved in leading-edge clinical, translational and basic research. Additional resources include specialized breast care centers, infusion clinics, nurse navigators, rehabilitation services, support groups and Scripps Center for Integrative Medicine.

SCRIPPS MD ANDERSON CANCER CENTER SUPPORT GROUP PROGRAMS

Through generous community support, Scripps MD Anderson Cancer Center can provide a wide range of support services and patient assistance programs. Throughout the system, oncology social workers or oncology nurse navigators provide counseling services and guidance regarding transportation, housing, homecare, financial, benefits, emotional concerns and other issues. Free professionally facilitated support groups sponsored by the cancer center meet regularly at various locations to help patients and loved ones find support, guidance and encouragement. Free educational workshops are held at various sites.

SCRIPPS MD ANDERSON CANCER REGISTRY

Since 1975, the Scripps Cancer Registry has been collecting cancer data on Scripps patients for research, epidemiological studies, education and patient treatment. Analysis of this data gives Scripps physicians the ability to measure the quality and effectiveness

of the care cancer patients receive within the Scripps system. Data also aids in determining which Cancer Center programs should be developed or further expanded.

SCRIPPS CLINICAL RESEARCH SERVICES (CRS)

Research and clinical discovery have been part of Scripps Health's mission since its founding in 1924. In partnership with the Scripps Clinical Medical Group (SCMG) via the Research Innovation Committee (RIC), Clinical Research Services consolidates and expands access to clinical research trials for SCMG physicians and patients across the Scripps system.

The mission of the RIC is to provide comprehensive oversight, allocation of resources for research. CRS is a unit established to provide expert support for SCMG physicians, so that they may provide patients with access to new and emerging treatment opportunities when appropriate. In addition, there are several specialties with nationally accredited continuing and graduate medical education programs supported through the RIC and CRS.

In 2018, the Research Innovation Committee was created to support clinical research throughout the Scripps Clinic practices and locations. Currently there are more than 25+ Scripps Clinic medical specialties under one operations team. As a result, we are able accelerate the access to new technologies for patients by consolidating the various components of clinical investigation into a seamless, streamlined regulatory, operational, and administrative process. Scripps continues building in its strong foundation for clinical and translational research through small pilot studies to large multicenter trials placed at various locations across the system, engaging both inpatient and outpatient settings. As ambulatory-based research increases across the system, RIC, Scripps Clinic and CRS support more than 92 principal investigators and about 450 active clinical research protocols crossing interdisciplinary disease categories.

SCRIPPS CLINICAL RESEARCH TRIALS

- Arthritis
- Cancer
- MD Anderson Partner Trials
- Cardiology
- Cardiac Stem Cell
- Chronic Lung Disease
- Cosmetic Procedures
- Dermatology
- Diabetes
- Eye Infections
- Eye–Cataracts
- Eye–Macular Degeneration
- Genomic Directed
- Growth Hormone Deficiency
- Hepatitis C
- High Cholesterol
- Integrative Medicine

- Joint Replacement (hip, shoulder, knee, cartilage stem cell)
- Liver Disease
- Migraine Headaches
- Neuro Imaging
- Nephrology
- Obesity/Weight Loss
- Organ Transplant
- Osteoporosis
- Orthopedics
- Stroke
- Sleep

SCRIPPS WHITTIER DIABETES INSTITUTE AND SCRIPPS RESEARCH TRANSLATIONAL INSTITUTE (SRTI) PARTNERSHIP

The Scripps Research Translational Institute (SRTI) partners with Scripps Health to combine strong patient care and clinical research capabilities with the exceptional biomedical science expertise of Scripps Research to leverage the power of genomic medicine and digital medicine technologies, for the advancement of individualized medicine. SRTI is dedicated to accelerating the “translation” of basic laboratory discoveries into clinical trials and ultimately approved treatments. Under the direction of Scripps Research, SRTI is supported in part by the National Institutes of Health Clinical and Translational Science Award (CTSA). A five-year, \$20 million grant to support translational clinical research, infrastructure and training first awarded in 2008 was renewed in 2013 and renewed again in 2018 for its 3rd five-year NIH grant through 2023 for \$31.5 million.

The Community Engagement Program for this award is led by Scripps Whittier Diabetes Institute which has provided the San Diego community with the most advanced diabetes care, education, research and support for more than 30 years at Scripps Health. In the last two years with grant support, the community engagement core has evolved and grown into the Scripps Hub Academic Research Core (SHARC), to broaden its research support beyond diabetes and cardiometabolic disease to include nearly all disease states (e.g. cancer, orthopedics, transplant, allergy/immunology, dermatology and many more) across the Scripps health system. The team now includes a research navigator, biostatistician, and community engagement program manager that provide consultations and guidance in expanding the research platform within Scripps and the San Diego community. The SHARC team enhances the involvement of community and clinicians in all areas of translational and transformational research. Scripps supports community-engaged research that aim to bring researchers and community partners together to share their knowledge, skills and resources with a common goal of improving community health. Over the last two decades, health research and practice has increasingly employed community-engaged research methods, defined as “the process of working collaboratively with and through groups of people affiliated by

geographic proximity, special interests, or similar situations to address issues affecting the well-being of those people.”

The Scripps Whittier Diabetes Institute (SWDI), in partnership with the San Diego State University South Bay Latino Research Center have several recent examples of innovative community-engaged research projects. These include three, five-year awards from the National Institutes of Health worth nearly \$9M to develop culturally tailored interventions to improve outcomes for diverse, predominantly underserved individuals living with chronic cardiometabolic conditions. The first award trains medical assistants to provide health coaching to patients with Type 2 diabetes as part of routine primary care in two diverse health systems i.e., Scripps Health and Neighborhood Healthcare, a federally qualified health system that provides care to a low income, predominantly Hispanic, patient population. The second study uses mobile health (mHealth) technology to deliver a personalized, diabetes self-management education and support program to Hispanic patients with poorly controlled Type 2 diabetes. The final award evaluates Mi Puente, or “My Bridge,” which is a Behavioral Health Nurse + Community Mentor approach to prevent hospital readmissions and improve quality of life among Hispanics with multiple chronic conditions and behavioral health concern(s) admitted to a safety-net hospital near the US-Mexico border.

SCRIPPS COMMUNITY BENEFIT SERVICES

Scripps System wide Community Benefit Services provides oversight, support, guidance and coordination of Scripps community health and outreach programs, helping ensure that they are in accordance with the Scripps mission, values and strategic objectives. This program also supports the Strategic Planning Committee, a committee of the Scripps Board of Trustees, in assessing and planning to meet community need. Additionally, this program is responsible for developing the triennial health needs assessment and, through the Community Benefit Fund, supports community programs that address San Diego County’s high-priority health needs.

SCRIPPS SYSTEM WIDE 2021 COMMUNITY BENEFIT PLAN; FISCAL YEAR 2021

The Scripps System wide 2021 Community Benefit Plan provides a description of the overall Scripps community benefit goal and the system wide objectives and strategies to support community health improvement during Fiscal Year 2021 (October 2020 to September 2021).

THE SCRIPPS 2021 COMMUNITY BENEFIT GOAL

Make a measurable impact on the health status of the community through improved access to care, health improvement programs and professional education and research.

SCRIPPS SYSTEM WIDE PROGRAM FISCAL YEAR 2021 COMMUNITY BENEFIT OBJECTIVES

COMMUNITY HEALTH SERVICES

COMMUNITY BENEFIT FUND

Provide a minimum of \$100,000 in grant funding to support community programs that address San Diego County's high priority health needs.

SCRIPPS MD ANDERSON CANCER CARE

The following are the Fiscal Year 2021 objectives for Scripps MD Anderson Cancer Care.

- Continue to offer genetic counseling and cancer risk assessment for individuals at high risk for hereditary and familial cancer syndromes, including education and assessment of family history and genetic testing based on the evaluation.
- Provide education outreach to physicians on the genetic risks associated with breast, ovarian and hereditary cancers.
- Continue to offer outpatient oncology social workers which provide psychological support services and community resources for individuals diagnosed with cancer, their family members, caregivers and health care workers in conjunction with other health care providers. Outpatient social worker provides counselling services and resource information to address emotional and social distress, including needs and risk assessments, transportation resources, financial and assistance programs and benefits, housing issues, and the challenges before, during, and after diagnosis and treatment.
- In conjunction with rehabilitation services and cardiac treatment center continue to support education and exercise classes, focusing on healing and recovery.

- Scripps MD Anderson Cancer Center Registered Dieticians will provide education and nutritional counseling for cancer patients undergoing cancer treatment and recovery.
- Continue to work with the community to develop the patient oncology navigator role. The oncology nurse navigator provides clinical education and distributes resource information to both patients and their families.
- Continue to foster relationships and participate with professional organizations and community outreach organizations at both the local and national level.
- Plan and develop community-based informational and celebratory events specific to patient populations and community needs.
- Provide community support and education through monthly lymphedema, head and neck cancer support and gynecological support groups.

SCHOOL PARTNERSHIPS

- Continue to align Scripps Talent Development Services programs with the organization's workforce development strategy.
- Partner with identified high schools in San Diego County to offer internships in support of student success in future healthcare occupations.
- Host an annual school and service partnership breakfast to discuss community workforce and education needs.
- Strategically build academic partnerships by working with the San Diego Nursing & Allied Health Services-Education Consortium to include local schools with programs that support Scripps talent pipeline.
- Continue to expand visibility of our academic partners by providing information to employees during workforce development month.
- Continue to oversee new requests for affiliation agreements with a focus on establishing agreements that support Scripps talent pipeline.

EMERGENCY AND DISASTER PREPAREDNESS: COMMUNITY OUTREACH AND EDUCATION

Scripps Health's goal is to enhance our organizations emergency preparedness program in order to benefit the community. We aim to establish activities to maximize our overall medical surge capacity and help to enhance the community's emergency preparedness and response. Having the ability to provide emergency services to those injured in a local disaster while continuing to care for hospitalized patients, is a critical community need. Scripps, together with other first responder agencies (public and private), will engage in a variety of training, outreach, and planning initiatives (if offered) during Fiscal Year 2021, including:

- Participate in the San Diego County Medical and Health Full Scale Exercise
- Participate in the California Statewide Medical & Health Full Scale Exercise
- Participate in the San Diego County Coalition Surge Test No Notice Exercise
- Continue active participation with San Diego County in planning and preparing for emergencies with the San Diego County Healthcare Disaster Coalition. The intent of this group is to increase the preparedness, responsive capabilities and surge capacities of hospitals and other healthcare facilities.
- Continue active participation with the San Diego County Healthcare Coalition Advisory Committee

AMERICAN HEART ASSOCIATION – HEART WALK

Scripps Health Community Benefit Department plans to coordinate walker participation and fundraising efforts in support of the American Heart Association's Annual Heart Walk and allocate operational funds to support the American Heart Association's efforts to fight heart disease and stroke.

SUBSTANCE USE PREVENTION AND TREATMENT PROGRAMS

Continue to provide substance abuse prevention and treatment programs. Increase the ability to provide treatment to those who are unfunded or underfunded. Through a contract with the McAlister Institute, Scripps will provide safe detox up to five patients per week. In collaboration with Scripps Drug and Alcohol Resource Nurses to help maintain them into community-based programs.

PROFESSIONAL EDUCATION AND HEALTH RESEARCH

Scripps High School Exploration Program and the Health and Science Pipeline Initiative (HASPI) will continue to provide education internships for students offering five week-long paid internships, in which students rotate through clinical departments to learn about health care.

- In alignment with predicative analytics for Scripps hiring and staffing needs, continue to provide Specialty Training Programs in ICU, MCH, OR, ED and SPD.
- Continue to provide Scripps Health New Grad RN Residency Programs. Explore expansion of this program to the clinic setting.
- Explore expanding Young Leaders in Healthcare to employee dependents and school partnerships. There are currently 15 partnership high schools.

UNCOMPENSATED HEALTH CARE

During Fiscal Year 2021, Seaport Scripps Home Health Care will continue to provide health care services for vulnerable patients who are unable to pay for services.

- Maintain, communicate, and effectively administer Scripps financial assistance policy in a manner that meets patients' needs.

SCRIPPS SYSTEM WIDE 2021 COMMUNITY BENEFIT REPORT; FISCAL YEAR 2020

This section is an account of Scripps dedication and commitment to improving the health of the community, detailing the Scripps System wide programs that have provided benefit over and above standard health care practices in Fiscal Year 2020 (October 2019 to September 2020).

FOSTERING VOLUNTEERISM

In addition to the financial community benefit contributions made during Fiscal Year 2020, Scripps System wide employees donated a significant portion of their personal time volunteering to support Scripps sponsored community benefit programs and services. With 132 volunteer hours, it is estimated that the dollar value associated with this volunteer labor is \$6,971.⁵²

MAKING A FINANCIAL COMMITMENT

During Fiscal Year 2020, **\$5,285,683** was devoted by Scripps System wide programs to community benefit programs, including uncompensated health care, community health services, professional education and health research. The programs offered by Scripps emphasize community-based prevention efforts and use innovative approaches to reach residents at greater risk for health problems.

COMMUNITY BENEFIT SERVICES HIGHLIGHTS

Community Benefit Financial Commitment

\$5,285,683

Community Benefit Services

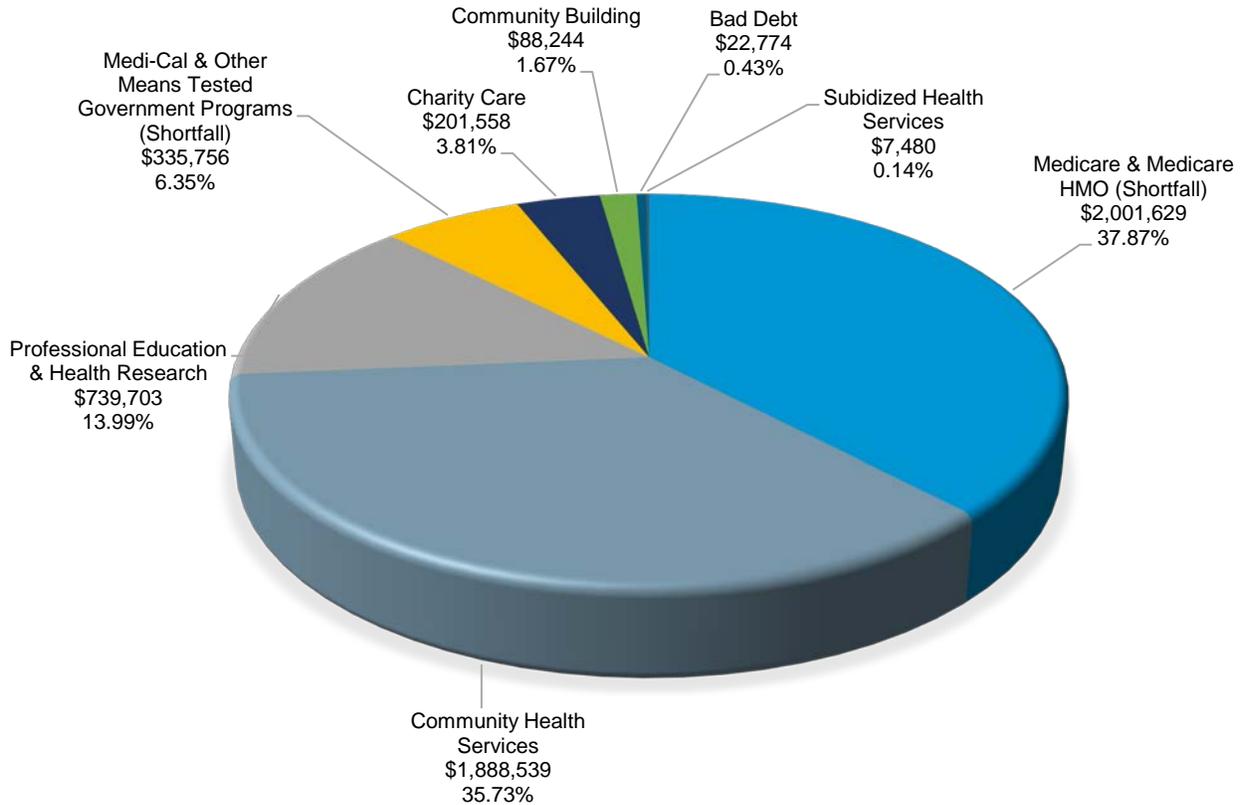
Bad Debt	\$22,774
Charity Care	\$201,558
Community Building Activities	\$88,244
Community Health Services	\$1,888,539
Medi-Cal & Other Mean Tested Shortfall	\$335,756
Medicare & Medicare HMO Shortfall	\$2,001,629
Professional Education & Research	\$739,703
Subsidized Health Services	\$7,480
Refer to Figure 12.1 presented on the following page for a graphic representation of Fiscal Year 2020.	

⁵² Calculations based upon an average hourly wage for the Scripps Health system plus benefits.

FIGURE 12.1

Fiscal Year 2020

SCRIPPS SYSTEM WIDE COMMUNITY BENEFIT SERVICES DISTRIBUTION, \$5,285,683



COMMUNITY BENEFIT SERVICES

Community benefit services include those programs offered to the community that go above and beyond what is provided as a normal part of patient care. Scripps divides community benefit services into three categories, including uncompensated health care, community health services and professional education and health research. Uncompensated care includes charity care, bad debt, and Medi-Cal and Medicare shortfalls.

SCRIPPS SYSTEM WIDE COMMUNITY HEALTH SERVICES, FISCAL YEAR 2020

COMMUNITY HEALTH SERVICES HIGHLIGHTS

Community health services include prevention and wellness programs such as screenings, health education, support groups and health fairs which are supported by operational funds, grants, in-kind donations and philanthropy. These programs are designed to raise public awareness and understanding of, and access to, identified community health needs (refer to Section 2, Community Health Needs Assessment).

During Fiscal Year 2020 (October 2019 to September 2020) \$1,888,539 was invested by Scripps System wide programs in community-based health improvement activities. This figure reflects the costs associated with providing community health improvement activities, including salaries, materials and supplies, minus billable revenue. This section highlights some of Scripps System wide Fiscal Year 2020 community health services achievements.

SCRIPPS HEALTH COMMUNITY BENEFIT (CB) FUND

In Fiscal Year 2020, Scripps Health continued to deepen its commitment to philanthropy with the Community Benefit Fund. Over the course of the year, it awarded community grants to programs throughout San Diego. Scripps awarded grants ranging from \$5,000 to \$120,000 each. The projects that received funding address some of San Diego's County's high-priority health needs. The goal is to improve access to vital health care services for a variety of at-risk populations, including the homeless, economically disadvantaged, mentally ill and others. Since the Community Benefit Fund began, Scripps has awarded \$4.1 million dollars. Programs funded during Fiscal Year 2020 include:

2-1-1 COMMUNITY INFORMATION EXCHANGE

2-1-1 San Diego serves all of San Diego County, including the population served by Scripps, as the region's trusted primary connection to more than 6,000 community, health and disaster services in more than 200 languages, 24 hours a day.

In addition, 2-1-1 San Diego operates a 2-1-1 information hotline (Call Center) in the San Diego and Imperial County. Call Center services are designed to help members of the general public ("Clients") to connect with community resources to assist Clients obtain medical care, mental health services, housing, food, clothing, government benefits, among other things. 2-1-1 San Diego has expanded its referral services to include direct referral of Clients to community resources and access to the Community

Information Exchange (CIE) Database. The CIE is an ecosystem comprised of multidisciplinary network partners that use a shared language, a resource database, and an integrated technology platform to deliver enhanced community care planning. Care planning tools enable partners to integrate data from multiple sources and make bi-directional referrals to create a shared longitudinal record. By focusing on these core components, a CIE enables communities to shift away from a reactive approach to providing care toward proactive, holistic, person-centered care.

The CIE database serves as a directory of participating professionals, agencies and businesses providing services that relate to the social determinants of health. The database also serves as a source of information about the client's social determinants of health and current needs and is used to help the client access community resources suitable to address those needs.

2-1-1 San Diego has partnered with Scripps since 2011 to provide care coordination services to clients in need of health navigation support. In Fiscal Year 2020 funding was awarded to 211 San Diego to pilot the CIE at the Scripps Mercy hospital location. This project specifically served Scripps Mercy Hospital patients, focusing on homeless and housing insecure individuals and to assist in hospital discharge planning.

COMMUNITY INFORMATION EXCHANGE 2020 SUMMIT

Scripps sponsored the Community Information Exchange (CIE) Summit. The 2020 Summit was held virtually due to the unprecedented impact of COVID-19. Core to the theme of the CIE Summit; this year's virtual event:

- Hosted open discussions on impact of inequity and how to lead with inclusion.
- Explored community-based approaches for building a CIE.
- Incorporated thoughtful strategies for activating community voice.
- Emphasized representation of diverse perspectives to inform CIE design, implementation, and data collection.

CATHOLIC CHARITIES

The partnership continued to provide short-term emergency shelter for medically fragile, homeless patients being discharged from Scripps Mercy Hospital San Diego and Chula Vista campuses. Case management and shelter are provided for previously homeless patients discharged from Scripps Mercy Hospital who no longer require hospital care but still need a short-term, supportive environment. Patients demonstrating a readiness for change are assisted with one week in a hotel along with food and bus fare to pursue a case plan.

The focus of the case management is to stabilize the client by helping them connect to more permanent income sources, housing, and ongoing support for self-reliance. The goal of this partnership is to reduce the incidence of ER recidivism and improve quality of life for the patients.

[CONSUMER CENTER FOR HEALTH EDUCATION AND ADVOCACY \(CCHEA\)](#)

Funding provides low income, uninsured Mercy Clinic and behavioral health patients help obtaining health care benefits, SSI and related services, while reducing uncompensated care expenses at Mercy. This Medical Legal Partnership places Consumer Center staff onsite at Scripps Mercy Hospital within the Behavioral Health Unit and provides accessible legal assistance, in addition to receiving direct referrals from other Scripps facilities. The project provides advocacy services for time intensive government benefit cases and the Consumer Center stresses the importance of accessing community-based services for routine health care instead of using the ED's and hospital departments as well as the importance of establishing medical homes.

[ERIC PAREDES SAVE A LIFE FOUNDATION](#)

Each year, 7,000 teens lose their lives due to sudden cardiac arrest (SCA). SCA is not a heart attack, it is caused by an abnormality in the heart's electrical system that can easily be detected with a simple Electrocardiogram (EKG). Unfortunately, heart screenings are not part of a regular, well-child exam or pre-participation sports physical. The first symptom of SCA could be death. San Diego alone loses three to five teens from SCA annually. Scripps funding assists with screening for youth athletes countywide.

CANCER/ONCOLOGY

In 2018 cancer was the leading cause of death in San Diego County, responsible for 23.1 percent of deaths. There were 4,988 deaths due to cancer (all sites) and an age-adjusted death rate of 132.18 deaths per 100,000 population.⁵³

In response to this serious health concern, Scripps has developed a series of prevention and wellness programs to educate people on the importance of early detection and treatment for some of the most common forms of cancer. During Fiscal Year 2020, Scripps engaged in the following cancer programs and activities.

AMERICAN CANCER SOCIETY (ACS) MAKING STRIDES AGAINST BREAST CANCER

Scripps Health participated and sponsored the Making Strides Against Breast Cancer walk in the amount of \$8,950 to raise money for breast cancer research. The walk raises critical funds to save lives from breast cancer and ensure no one faces breast cancer alone. A series of educational events are coordinated with the American Cancer Society awareness months. The events focus on various types of cancer, including breast, lung, cervical, colorectal, skin, ovarian/gynecological and prostate. A registered nurse clinician answers questions and provides educational materials.

SCRIPPS POLSTER BREAST CARE CENTER (SPBCC)

Scripps Polster Breast Care Center sponsors the Young Women's Breast Cancer Support Group which provide a venue for women under the age of 40 to come together, discuss issues relating to diagnosis and receive support. The groups are offered to women in the San Diego community. Topics related to breast health are also offered to the community.

SCRIPPS MD ANDERSON CANCER CENTER – NURSE NAVIGATOR PROGRAM

Scripps provides a registered nurse, dedicated to assisting cancer patients and their families with navigating through the journey from diagnosis, treatment and survivorship from cancer. The focus is on education and outreach, as well as, support services in this population.

SCRIPPS MD ANDERSON CANCER CENTER – OUTPATIENT SOCIAL WORKER AND LIAISON

This program provides genetic testing and counseling to cancer patients, along with providing education to health professionals and caregivers.

⁵³ County of San Diego HHSA, Public Health Services, Community Epidemiology Branch

SCRIPPS MD ANDERSON CANCER CENTER SUPPORT GROUPS

The best cancer care includes more than medical treatment. Scripps MD Anderson Cancer Care offers support for people living with cancers, including breast, gynecologic and head and neck, as well as services to help with emotional, psychological, financial and lifestyle as aspects of cancer. Although due to COVID-19 meetings were suspended temporarily for most of the year as there was restricted access to the hospital patients had the ability to join online support groups offered by MD Anderson Cancer Center as part of our partnership. The sessions were facilitated by MD Anderson social work counselors and provided an opportunity for patients, family members and friends to meet others in similar circumstances, develop new relationships and find out how others cope during this time of increased distress.

SCRIPPS MD ANDERSON CANCER CENTER SURVIVORSHIP PROGRAM

Scripps MD Anderson patients and their families can take part in free survivorship programs through San Diego YMCA and Livestrong Foundation. Focusing on physical activity and well-being, the program helps adult cancer survivors achieve their holistic health goals.

SCRIPPS MD ANDERSON CANCER SURVIVORS DAY

Survivors Day is a time to recognize the nation's 15.5 million cancer survivors, to focus attention on issues of survivorship, and to acknowledge medical professionals dedicated to cancer treatment, research and support services. National Cancer Survivors Day events are held in hundreds of communities nationwide throughout the month of June. Scripps holds a celebratory event at various Scripps hospitals each year to provide an opportunity for those that have battled cancer to come together and enjoy the company of friends, family and the camaraderie of fellow cancer survivors.

Cancer survivors and other guests share inspirational stories learn about advances in cancer treatment and research and enjoy the opportunity to connect with caregivers and fellow survivors. Each year the cancer survivor event helps celebrate life, inspire those recently diagnosed, offer support to family and loved ones and recognize all who provided support along the way. They also provide a forum for discussing the physical, financial and social issues that many cancer survivors face following completion of treatment. Events were held online this year to ensure safety and reduce the spread of COVID-19. In partnership with MD Anderson Cancer Center the following were some of the topics presented; building your own vision board at home, history of labyrinths, music and mindfulness exercise, Anticancer Living: Transform Your Life and Health with the Mix of Six yoga breathing exercises and chair yoga.

CARDIOVASCULAR DISEASE

'Diseases of the heart' were the second leading cause of death in San Diego County in 2018. In addition, 'Cerebrovascular Diseases' were the fourth leading cause of death and 'Essential (primary) hypertension and hypertensive' was the tenth. Heart disease claims more than 950,000 American's⁵⁴ lives every year. Stroke is a leading cause of serious, long-term disability.

During Fiscal Year 2020, Scripps engaged in the following heart health and cardiovascular disease prevention and treatment activities.

THE ERIC PAREDES SAVE A LIFE FOUNDATION

Each year, 7,000 teens lose their lives due to sudden cardiac arrest (SCA). SCA is not a heart attack, it is caused by an abnormality in the heart's electrical system that can easily be detected with a simple electrocardiogram (EKG). Unfortunately, heart screenings are not part of a regular, well-child exam or pre-participation sports physical. The first symptom of SCA could be death. San Diego alone loses three to five teens from SCA annually.

Scripps efforts began when a registered nurse at Scripps created the foundation after her 15-year-old son, Eric passed away from sudden cardiac arrest in 2009. Turning tragedy into an opportunity, the Paredes' established the organization to prevent sudden cardiac arrest in school-age children and adolescents. As a sponsor for the Eric Paredes Save A Life Foundation, Scripps has held more than 20,000 free cardiac screenings to local teens, including the homeless, uninsured and underinsured. In Fiscal Year 2020, Scripps made an \$8,500 contribution to help pay for screenings. In the fiscal year, Scripps supported screening events at area high schools and screened 1,951 teens, identifying 27 with abnormalities and 16 who were at risk.

The overall goal was to host 6 screenings per year and to average 800 youth per screening event, however, the national health pandemic caused the postponement of the April, June and August screenings.

The following were additional metrics tracked:

- Teens Uninured: 27%
- Teens Without a Pediatrician/Family Doc: 452
- Teens Who Use Community Clinic: 446

⁵⁴ San Diego Hospital Association and Imperial Counties 2016 Community Health Needs Assessment and the most recent San Diego County community health statistics (unless otherwise indicated). Retrieved from the World Wide Web. <http://www.hasdic.org/chna.htm>

- Average percent of Moderate to Extremely Low Household Income: 69%
- Ethnicity: 53% represent diverse ethnicities
- Parents unaware of SCA in youth: 57%
- Parents unaware of warning signs/risk factors 66%
- Number of youths screened who participate in sports: 69%
- Scripps Volunteers: 40
- Scripps Volunteer Hours: 200

THE ERIC PAREDES SAVE A LIFE FOUNDATION – PRESCRIPTION FOR PREVENTION

In partnership with SDSU's Institute for Public Health and UC Irvine, The Eric Paredes Save A Life Foundation produced the first Continuing Medical Education/Continuing Nursing Education (CME/CNE) on incorporating Sudden Cardiac Arrest prevention into primary care practices. Studies show cardiac consideration is an often-overlooked area of assessment. The training module reviews SCA warning signs, risk factors and recommended diagnostic testing protocol. The CME development was directed and narrated by Dr. John Rogers, Scripps Cardiologist and EP Save A Life Medical Director, and Scripps Health was instrumental in facilitating engagement in both a front-end needs assessment and in participation in the training module through direct communication with PCPs. Funding supported development and promotion of the training module on a local, state and national level, with the San Diego chapter of the American Academy of Pediatrics. Given early data suggests COVID-19 can lead to heart damage and professional medical associations have released recommendations for cardiac assessment of student athletes who've been exposed before returning to play, this training supports a critical skill set for PCPs. The Scripps participation in live CME events/early needs assessment of total participants was 45%.

EMERGENCY AND DISASTER PREPAREDNESS

SCRIPPS MOBILIZATION TO FIGHT THE COVID-19 PANDEMIC

Across the Scripps Health system, doctors, nurses, caregivers and support staff rallied and worked together, some on the front lines and some behind the scenes, united in caring for our community during the fast-moving and rapidly changing COVID-19 national health crisis.

As cases of the new coronavirus first appeared in the country, Scripps clinical and administrative leaders mobilized with both short- and long-term strategies to deal with the spread of COVID-19. In February 2020, Scripps began to build up supplies and equipment, and implement protocols for delivering care to infected patients. In early March, Scripps prepared for a surge of COVID-19 patients by cancelling non-essential surgeries, activating the 24-hour corporate command center, and launching enhanced protective precautions for staff above and beyond Centers for Disease Control (CDC) guidelines. Also, at that time, an important collaboration was launched among the hospitals and health systems across the region, to monitor cases, discuss clinical care, assess resources, equipment and supplies, and work together for our community.

[Command Centers](#)

Scripps responded by setting up a corporate command center, and satellite commands at all its hospitals, to coordinate its response. The corporate command center was set up in two rooms to support social distancing and safety protocols included experts on infection control, logistics, communication, and other key areas.

[COVID-19 Nurse Line](#)

Scripps made hundreds of adjustments, large and small, to manage its response to the coronavirus pandemic. To support patients with symptoms, Scripps established the first COVID-19 Nurse Line in San Diego County with a staff of around 60. The dedicated help line was staffed to answer questions and screen concerned callers to reduce the influx of potential COVID-19 patients at Scripps locations. The first day phones were operational, the team fielded 2,000 calls. Callers identified as having significant symptoms were connected with health care providers via phone or video for further evaluation, and some are directed to outdoor testing cabanas.

[Testing and Surge Tents as Testing Cabanas](#)

Testing for the presence of the COVID-19 virus is important in understanding and controlling the spread of the virus. Scripps was an early provider of COVID-19 testing in

our region. A Scripps testing “turning point” was its launch of the fastest available molecular point of care test for detecting COVID-19 for patients and those admitted to all five Scripps hospitals.

Scripps set up surge tents outside hospital emergency departments and clinic urgent care centers for intake of patients with COVID-19 symptoms. This provided a safe health care environment for potential coronavirus patients, while offering distancing from patients receiving other types of health care.

Testing cabanas were also set up to add capacity. This process was linked to the nurse call line so that patients could access Scripps via virtual visits and, if needed, then make an appointment, drive to a cabana, and staff with proper equipment would go to their car and take a sample.

[Community Support](#)

When the first cases of COVID-19 appeared in the region, Scripps took initiative to bolster its supplies and equipment in anticipation of the disease spreading, but still needed help. Once Scripps put out a call for community donations, individuals and local businesses were quick to provide. From personal protective equipment and N95 masks to cleaning materials, medical devices, individual meals and cash contributions. The following are estimated donations collected as of May 2020.

- Community Donations to Scripps COVID-19 Response Fund - \$3,413,300
- N95 Masks and Other Protective Masks – 116,103
- Gloves, Gowns, Shoe Covers and Surgical Caps – 166,268
- Cleaning Materials– 5,536
- Eye Protection – 17,637
- Cloth Face Coverings & Scrub Caps– 3,288
- Medical Devices – 78
- Snacks and Drinks – 200,000+
- Meals – 33,153

[Scripps Employee Food Sharing Program](#)

In late April 2020 employees from across the system began reaching out about food resources for colleagues at Scripps. As a result of these mutual concerns the Scripps Employee Food Sharing Program was established, and food distribution events were held on May 23, 2020, June 27, 2020 and July 18, 2020. The Scripps Employee Food Sharing Program successfully distributed food to 270 colleagues who found themselves in need of assistance during this COVID-19 crisis and 149 volunteers participated in the

distributions.⁵⁵ Each of these staff members received milk, eggs, bread, fruit, vegetables, a box of non-perishable food and a freshly prepared meal from Colors Café. Many of the recipients shared words of thanks and gratitude to their Scripps family. One even noted how they were appreciative to work for “such an awesome organization that is there for me when times are tough.” Many departments worked collaboratively to make this initiative a success such as human resources, food and nutrition services, and security and facilities to name a few. The Scripps Leadership Academy alumni also volunteered to help package and distribute the food. Much appreciation to the employees, physicians and vendors who donated to the program as their generosity helped to make a difference for many during a difficult time.

Collaboration

Scripps continues to work collaboratively along with other health systems and government agencies to expand COVID-19 testing as part of our ability to contain and significantly reduce COVID-19 in our region.

COMMUNITY OUTREACH AND EDUCATION

Having the ability to provide emergency services for those injured in a local disaster, while continuing to care for hospitalized patients, is a critical community need. Our employees’ connection to our *Mission* is apparent every day—including during times of crisis. Following the terrorist attacks of September 11, 2001, Scripps developed a system wide disaster preparedness program. As part of this effort, Scripps created the volunteer Scripps Medical Response Team (SMRT).

SCRIPPS MEDICAL RESPONSE TEAM (SMRT)

Scripps maintains active readiness for the Scripps Medical Response Team (SMRT). The SMRT is available to deploy when the State of California Emergency Medical System Authority (EMSA) activates the California Medical Assistance Team (Cal-Mat), and requests team augmentation to respond to an active event like a wildfire or earthquake where medical assistance is needed in the affected area(s). Due to COVID-19, Scripps was not able to participate this year.

SMRT includes clinical staff and others from across the organization ready to mobilize during times of crisis to provide care where it’s needed. Currently, the team has 76 active members, plus hundreds of other employees who have joined a reserve list to volunteer their services. The team has responded to numerous local, national and

⁵⁵ The expenses associated with the food distribution program were not included as a community benefit expense as the food distribution events were not open to the community and were solely for Scripps employees.

international emergencies. This genuine response in times of need sends a powerful message about the organization's dedication to be helping our community— and beyond.

SAN DIEGO COUNTY NATIONAL COMMUNITY SUPPORT AND OUTREACH EDUCATION

Having the ability to provide emergency services to those injured in a local disaster while continuing to care for hospitalized patients is a critical community need. Scripps Health maximizes awareness and encourages participation in disaster preparedness activities to affect change at the community level. Scripps contributes to the health and safety of the San Diego community through essential emergency and disaster planning activities and services. Scripps participates in San Diego County and State of California Advisory groups to plan, implement and evaluate key disaster preparedness response plans and exercises. In addition, Scripps is an advisor to San Diego County for federal and state grant development and planning. In Fiscal Year 2020, Scripps participated in the following:

- Scripps Health participated in San Diego County Healthcare Disaster Coalition and State of California advisory groups to plan, implement and evaluate key disaster preparedness response plans and exercises.
- Scripps participates in a standardized, on-scene federal emergency management training for hospital leaders titled National Incident Management System/Incident Command System/Hospital Incident Command System (HICS) as well as a training focused specifically on HICS, an incident management system that can be used by hospitals to manage threats, planned events or emergencies. Scripps Health is an active member in the Hospital Incident Command System (HICS) National Advisory Committee, and currently working on the review/revision of HICS.
- Scripps Health participated in the San Diego Regional Full-Scale Exercise on November 6, 2019. The San Diego Regional Full-Scale Exercise was a one-day exercise designed to increase the proficiency of the San Diego Operational Area to respond to mass casualty complex attacks that require a coordinated multi-agency and multi-disciplinary response.
- Scripps Health participates in the San Diego Healthcare Coalition Advisory Committee. This is a funding workgroup which provides leadership and funding through grants and cooperative agreements to states, territories, and eligible municipalities to improve surge capacity and enhance community and hospital preparedness for public health emergencies.

SCRIPPS DRUG TAKE BACK KIOSKS

Scripps has become the first health care provider in the region to offer year-round access to safe, free disposal of unused and outdated prescription medications. Three drug take-back kiosks are available adjacent to on-site ambulatory pharmacies at Scripps Mercy San Diego, Scripps Green and Scripps Encinitas. These drug take-back kiosks are part of the Scripps Opioid Stewardship Program, which aims to reduce the use of opioids and to help prevent patients from becoming dependent on these useful but potent pain reducing medications.

PROFESSIONAL EDUCATION AND HEALTH RESEARCH HIGHLIGHTS

Quality health care is highly dependent upon health education systems and medical research programs. Without the ability to train and inspire a new generation of health care providers, or offer continuing education to existing health care professionals, the quality of health care would be greatly diminished. Medical research also plays an important role in improving the community's overall health by developing new and innovative treatments.

Each year, resources are allocated by Scripps System wide programs and services to advance health care services through professional health education programs and research. To enhance service delivery and treatment practices for San Diego County; \$739,703⁵⁶ was invested by Scripps System wide programs and services in professional training and health research programs during Fiscal Year 2020 (October 2019 to September 2020). This section highlights some of Scripps System wide professional education and research activities.

SCRIPPS HIGH SCHOOL EXPLORATION INTERNSHIP PROGRAM, HEALTH & SCIENCE PIPELINE INITIATIVE (HASPI)

Launched by Scripps Health, the program reaches out to young people to pique their interest on health care occupations in dire need of recruits. From the emergency room to surgery, the students rotate through numerous departments, exploring career options and learning life lessons about health and healing along the way. Due to COVID-19, the High School Exploration internship program was cancelled, and the Young Leaders in Healthcare meetings were suspended after March.

UNIVERSITY CITY HIGH SCHOOL COLLABORATION

University City High School and Scripps partnered to provide a real-life context to the school's Health Care Essentials course. For Fiscal Year 2020, 16 students were selected to rotate through five different Scripps locations, during the spring semester, to increase their awareness of health care careers. UC High students were exposed to different departments, exploring career options and learning valuable life lesson about health and healing. This internship program was suspended after March, due to COVID-19.

⁵⁶ Reflects clinical research as well as professional education for non-Scripps employees, nursing resource development and other health care professional education. Calculations based on total program expenses. Clinical research includes the subsidy, which is the operating income/loss of Scripps research entities. Scripps research entities: Scripps Clinical Research Services, Scripps Whittier Institute, Scripps Genomic Medicine and the Scripps Translational Science Institute.

SCRIPPS SYSTEM WIDE COMMUNITY BENEFIT SERVICES SUMMARY LIST

Programs	Persons Served	Staff Hours	Volunteer Hours	Financial Support*
2-1-1 San Diego - Community Benefit Fund	0	0	0	\$12,000
2-1-1 San Diego Annual Event	0	0	0	\$5,000
Alpha Project	0	0	0	\$3,000
American Cancer Society - Cancer Action Network	0	0	0	\$1,000
American Cancer Society-Making Strides Against Breast Cancer - Event	27	0	0	\$0
American Cancer Society-Making Strides Against Breast Cancer-Sponsorship	0	0	0	\$8,950
Bad Debt**	0	0	0	\$22,774
Blood Drive - American Red Cross	69	0	0	\$0
Adult, Infant, and Child CPR for Family and Friends	92	68	0	\$459
Advanced Cardiac Life Support (ACLS) Renewal Course	8	47	0	\$1,347
Basic Life Supp for Healthcare Provider Online Skills Check	16	32	0	\$792
Basic Life Support for Healthcare Provider - Initial	2	10	0	\$397
Basic Life Support for Healthcare Provider - Renewal	1	5	0	\$199
Neonatal Resuscitation Program (NRP)	4	24	0	\$896
Charity Care	0	0	0	\$201,558
Clinical Research Services	0	62,813	0	\$682,103
Community Town Hall on COVID Research	710	617	0	\$0
Continuing Medical Education Programs	1,838	0	0	\$0
Convalescent Plasma Therapy Study	100	0	0	\$0
Cooking for Health - Recipes for Healthy Living	117	0	0	\$0
COVID19 Federal Communications Commission Telehealth Grant	0	410	0	\$29,572
Diabetes and You (San Diego Unified STEAM Leadership Series) **	300	6	0	\$0
Enlisted Leadership Foundation - The Foundry**	0	0	0	\$35,000
Eric Paredes Save a Life Foundation - Grant	0	0	0	\$8,500
Eric Paredes Save a Life Foundation - Screenings	1,951	116	93	\$7,302
Executive Leadership - Community Building**	0	200	0	\$26,738
Family Health Centers of San Diego - Spirit of the Barrio	0	0	0	\$7,500
Father Joe' Villages - Village Health Center	0	0	0	\$5,000
Feeding San Diego	0	0	0	\$5,000

* **"Financial Support"** reflects the cost (labor, supplies, overhead, etc.) associated with the program/service less direct revenue. This figure does not include a calculation for physician and staff volunteer hours. In some instances, an entire community benefit program cost center has been divided between several initiatives.

**Community building activities, bad debt and Medicare shortfall do not count as community benefits under the Schedule H 990 but are still reportable outside the community benefit table.

*** Hospital provider fee was reported as offsetting revenue from Medi-Cal.

Programs	Persons Served	Staff Hours	Volunteer Hours	Financial Support*
Food Finders and Interfaith Community Services	0	0	0	\$2,047
Health Care Public and Government Advocacy**	0	0	0	\$4,051
Hospital Incident Command System National Advisory Committee**	0	8	0	\$504
Jacobs & Cushman San Diego Food Bank	256	8	0	\$435
Jacobs & Cushman San Diego Food Bank (Sponsor)	0	0	0	\$5,000
Medi-Cal and Other Means Tested Government Programs (Shortfall)***	0	0	0	\$335,756
Medicare and Medicare HMO (Shortfall)**	0	0	0	\$2,001,629
Miracle Babies 5K Walk/Run	7	0	0	\$0
North County Lifeline	0	0	0	\$3,000
North San Diego Business Chamber Health Committee Meeting**	0	45	0	\$3,646
Nursing Student Education Rotations	0	707	0	\$53,968
Oceanside Street Fair	74	0	0	\$0
Organ Transplant Support Groups	2,474	0	0	\$0
San Diego County Healthcare Disaster Coalition**	0	12	0	\$756
San Diego Healthcare Coalition Advisory Committee**	0	24	0	\$1,512
San Diego Organization of Healthcare Leaders (SOHL)**	0	0	0	\$2,000
San Diego Public Library Foundation**	0	0	0	\$2,500
San Diego Regional Full-Scale Exercise**	0	6	0	\$434
San Diego Sherriff's Search & Rescue Academy - Emergency Response Module**	21	0	39	\$1,102
San Ysidro Health Center	0	0	0	\$3,000
Saving Lives through Stop the Bleed Campaign	143	0	0	\$0
Scripps Cal Fresh Screening Program	4,317	0	0	\$862
Scripps Health System Community Benefit Planning and Outreach	0	0	0	\$279,375
Scripps High School Exploration Internship Program**	96	0	0	\$0
Scripps Holiday Food Drive	1,787	0	0	\$0
Scripps MD Anderson Cancer Center - Lymphedema Education	23	5	0	\$1,115
Scripps MD Anderson Cancer Center - Head and Neck Support Group	30	7	0	\$441
Scripps MD Anderson Cancer Center - Heredity & Cancer Gene Counseling Program	1,830	1,830	0	\$0
Scripps MD Anderson Cancer Center - Oncology Nurse Navigator	3,359	15,296	0	\$1,157,528
Scripps MD Anderson Cancer Center - Outpatient Social Worker and Liaison	3,003	5,760	0	\$341,381

* **"Financial Support"** reflects the cost (labor, supplies, overhead, etc.) associated with the program/service less direct revenue. This figure does not include a calculation for physician and staff volunteer hours. In some instances, an entire community benefit program cost center has been divided between several initiatives.

**Community building activities, bad debt and Medicare shortfall do not count as community benefits under the Schedule H 990 but are still reportable outside the community benefit table.

*** Hospital provider fee was reported as offsetting revenue from Medi-Cal.

Programs	Persons Served	Staff Hours	Volunteer Hours	Financial Support*
Scripps MD Anderson Cancer Support Groups	220	0	0	\$0
Stroke Risk Program Community Education	145	17	0	\$1,071
Subsidized Health Services	0	0	0	\$7,480
The San Diego LGBT Community Center**	0	0	0	\$10,000
University City (UC) High School Exploration Program**	16	0	0	\$0
Scripps System wide Totals FY 20	23,036	88,072	132	\$5,285,683

* "**Financial Support**" reflects the cost (labor, supplies, overhead, etc.) associated with the program/service less direct revenue. This figure does not include a calculation for physician and staff volunteer hours. In some instances, an entire community benefit program cost center has been divided between several initiatives.

**Community building activities, bad debt and Medicare shortfall do not count as community benefits under the Schedule H 990 but are still reportable outside the community benefit table.

*** Hospital provider fee was reported as offsetting revenue from Medi-Cal.

Section 13

Appendices

APPENDIX A

DEFINITION OF TERMS

Bad Debt – Unpaid costs for care that is provided to persons who do not meet the criteria for charity care, are not covered by a third-party payer or have a co-payment obligation that is not met.

Cash and In-Kind Contributions – contributions made by the organization to health care organizations and other community groups for one or more of the community benefit activities.

Charity Care – free or discounted health services provided to persons who meet the organization’s criteria for financial assistance and are unable to pay for all or a portion of the services. Charity care shall be recorded at cost. Charity care does not include: bad debt or uncollectible charges that the organization recorded as revenue but wrote off due to a patient’s failure to pay.

Community Benefit Operations – activities associated with conducting community health needs assessments, community benefit program administration, and the organization’s activities associated with fundraising or grant-writing for community benefit programs. Activities or programs cannot be reported if they are provided primarily for marketing purposes or if they are more beneficial to the organization than to the community.

Community Building Activities – can include, but are not limited to, the following:

- a. Physical improvements and housing, which can include the provision or rehabilitation of housing for vulnerable populations.
- b. Economic development, which can include assisting small business development in neighborhoods with vulnerable populations and creating new employment opportunities in areas with high rates of joblessness.
- c. Community support, which can include child care and mentoring programs for vulnerable populations or neighborhoods, neighborhood support groups, violence prevention programs, and disaster readiness and public health emergency activities.
- d. Environmental improvements, which can include activities to address environmental hazards that affect community health, such as alleviation of water

- or air pollution, safe removal or treatment of garbage or other waste products, and other activities to protect the community from environmental hazards.
- e. Leadership development and training for community members, which can include training in conflict resolution; civic, cultural, or language skills; and medical interpreter skills for community residents.
 - f. Coalition building which can include participation in community coalitions and other collaborative efforts with the community to address health and safety issues.
 - g. Community health improvement advocacy, which can include efforts to support policies and programs to safeguard or improve public health, access to health care services, housing, the environment, and transportation.
 - h. Workforce development, which can include recruitment of physicians and other health professionals to medical shortage areas or other areas designated as underserved, and collaboration with educational institutions to train and recruit health professionals needed in the community.
 - i. Other community building activities that protect or improve the community's health or safety that are not described in the categories listed in lines a. through h. above.

Community Health Improvement Services – activities or programs, subsidized by the hospital, carried out or supported for the express purpose of improving community health.

Community Health Needs Assessment Report (CHNA) – the written report adopted for the hospital facility by an authorized body of the hospital facility.

Community Health Needs – those requisites for improvement or maintenance of health status in the community.

Cost Accounting – Cost accounting systems generally provide the most accurate portrayal of the true cost of community benefit activities. Measurement of the costs associated with specific activities and programs to provide information meaningful to management. For example, cost accounting is used to determine the amount of an organization's total expense that reasonably can be attributed to community benefit, to assign indirect (overhead) expense to the direct cost of a program, and to estimate the cost associated with serving a subset of patients, such as Medicaid recipients.

Direct Costs – “Direct costs” means salaries and benefits, supplies, and other expenses directly related to the actual conduct of each activity or program.

Direct Offsetting Revenue – Revenue from the activity during the year that offsets the total community benefit expense of that activity. Includes any revenue generated by the activity or program, such as reimbursement for services provided to program patients. Direct offsetting revenue also includes restricted grants or contributions that the organization uses to provide a community benefit, such as a restricted grant to provide financial assistance or fund research. Direct offsetting revenue does not include unrestricted grants or contributions that the organization uses to provide a community need.

Health Research – can include, but is not limited to, clinical research, community health research, and generalizable studies on health care delivery.

Hospital Provider Fees – States have some form of Medicaid provider tax (or fees and assessments) in place. Through these arrangements, providers pay funds to states that then are appropriated to Medicaid agencies and serve as a source of matching funds that yields federal Medicaid revenue. These fees are included in community benefit accounting as Medicaid cost, and any revenues they yield also included in Medicaid “direct offsetting revenue”.

Implementation Strategy – the written document that describes the hospital facility’s strategy to meet the community health needs identified through the hospital facility’s Community Health Needs Assessment (CHNA).

In-Kind Contributions – Donations made (or received) using resources that are not legal tender (e.g., cash, checks, credit cards). Donations of supplies (e.g., pharmaceuticals), equipment, or staff time that benefits another organization are examples of in-kind contributions. In community benefit accounting, in-kind contributions are valued fairly. For example, the hospital donates a two-year old computer to a community clinic. The community benefit expense would be \$1,000 if the computer was purchased for \$3,000 and after two years of use it has depreciated to a value on the books of the hospital of \$1,000.

In-Lieu of Funds – Funds used for unfunded or under-funded patients and their post-discharge needs. Funds are used for board and care, skilled nursing facilities, long-term acute care, and home health. In addition funds are also used for medications, equipment, and transportation services.

Net Community Benefit Expense – Total community benefit expense minus direct offsetting revenue.

Other Means-Tested Government Programs – Government-sponsored health programs where eligibility for benefits or coverage is determined by income or assets. Examples include: the State Children’s Health Insurance Program (SCHIP), or the California Children’s Services (CCS) Program.

Payer – Insurance companies, health care service plans, Medicare, Medi-Cal and other private or public entities that pay hospitals for health care provided to their sponsored patients.

Professional Education and Health Research – includes clinical research as well as professional education of non-Scripps employees including graduate medical education (GME), nursing resource development, and other health care professional training. Costs for medical residents and interns may be included as health professions educations costs. Calculations based on total program expense.

Restricted Contributions (Grants) – Donations, gifts, bequests and other transfers of money or property made by a donor or grantor that has stipulated a temporary or permanent use for the resources provided. Donors or grantors provide restricted contributions with the intent of supporting a particular activity or program. Restrictions generally are stated in writing by the donor or grantor when they make a gift or grant.

Subsidized Health Services – Patient care services the organization provides despite a financial loss, (even) after removing the effects of charity care and Medi-Cal shortfalls (and bad debt). Clinical programs provided at a loss because they are needed by the community. The service meets an identified community need if it is reasonable to conclude that if the organization no longer offered the service, the service would be unavailable in the community, the community’s capacity to provide the service would be below the community’s need, or the service would become the responsibility of government or another tax-exempt organization. Example of such services are: inpatient psychiatric units, satellite clinics serving low-income communities and burn units.

Total Community Benefit Expense – Total gross expense of the activity incurred during the year.

Uncompensated Health Care – Includes charity, under-reimbursed care and bad debt. Shortfalls are derived using the payer based cost allocation methodology. Bad

debt and charity care are estimated by extracting the gross write offs of bad debt and charity care charges and applying the hospital RCC to estimate net uncompensated cost.

Under-Reimbursed Care – Care that is reimbursed below cost by County Medical Services, Medi-Cal and Medi-Cal HMO, Medicare, Medicare PPO, Medicare HMO and SHPS Medicare.

Unrestricted Contributions (Grants) – Donations, gifts, bequests and other transfers of money or property that are free from any external restrictions and are available for general use.

Volunteer Hours – includes the labor hours contributed by Scripps employees and affiliated physicians in support of Scripps-sponsored activities for which no compensation is received. The dollar value is not included in Scripps' "community benefit contribution."

APPENDIX B

SCRIPPS UNCOMPENSATED CARE METHODOLOGY FISCAL YEAR 2020

Scripps continues to contribute resources to provide low and no-cost health care services to populations in need. During fiscal year 2020, Scripps contributed \$394,126,261 to uncompensated health care, \$18,335,775 in charity care, \$361,998,200 in Medi-Cal and Medicare shortfall, and \$13,792,287 in bad debt.

Schedule H Methodology — Schedule H requires the uncompensated care to be divided into four categories: Charity care, under-reimbursed Medi-Cal and Other Means-Tested Government Programs, Bad Debt, and under-reimbursed Medicare. Bad debt and Medicare shortfalls are reportable under the Schedule H guidelines but do not count towards the community benefit totals. Thus, the categories are reported in a specific order/hierarchy. Charity Care and under-reimbursed Medi-Cal and Other Means-Tested Government Programs are counted first.

Charity Care Methodology — Uncompensated cost is estimated by applying ratio-cost-to-charge (RCC) percentages for the hospital to the gross charity adjustments. The following costs are excluded: Community health services, professional education and research, and expenses excluded in the Medicare cost report. Traditional Charity Care is included in the Internal Revenue Service (IRS) Form 990 Schedule H Part I Line 7a.

Medi-Cal Shortfall — The shortfall is derived by computing operating margin at the patient level and summarizing the patients with Medicare, Medicare PPO, Medicare HMO, Medicare Capitated program at the hospitals, Medi-Cal, Medi-Cal HMO, and CMS primary insurance carriers. Operating margin is defined as net revenue less all variable, fixed, and overhead costs. Profitability is estimated as follows: Net revenue is equivalent to payments plus an estimation of the account balance for all open accounts, plus revenue from uncompensated care pools including Medi-Cal DSH. Cost is derived using the relative value allocation methodology per the McKesson HPM system. The following costs are excluded: Charity adjustments at cost for Medi-Cal patients, community health services, professional education and research, and expenses excluded in the Medicare cost report. These costs are included in the IRS Form 990 schedule H Part I Line 7b. In the State of California, the Medicaid program is called Medi-Cal.

Medicare and Medicare HMO Hospitals — Shortfall is derived by computing operating margin at the patient level and summarizing the patients with Medicare and Medicare Senior primary insurance carriers. Operating margin is defined as net revenue less all variable, fixed, and overhead costs. Profitability is estimated as follows: net revenue is equivalent to payments plus an estimation of the capitation account balance for all open accounts, plus other revenue including. Cost is derived using the relative value allocation methodology per the McKesson HPM cost accounting system. These costs are included in the IRS Form 990 Schedule H Part III Section B.

Bad Debt Methodology — Uncompensated cost is estimated by applying ratio- cost-to-charge (RCC) percentages for the hospital to the gross bad debt adjustments less recoveries. The following costs are excluded: Bad debt adjustments at cost for Medi-Cal and CMS patients, community health services, professional education and research, and expenses excluded in the Medicare cost report. These costs are included in the IRS Form 990 Schedule H Part III Section A.

Shortfall Methodology Clinics — Shortfall is derived by computing operating margin at the patient level and summarizing the patients with Medicare and Medicare Senior primary insurance carriers. Operating margin is defined as net revenue less all variable, fixed, and overhead costs. Profitability is estimated as follows: net revenue is equivalent to payments plus an estimation of the capitation account balance for all open accounts, plus other revenue including. Cost is derived using the relative value allocation methodology per the McKesson HPM cost accounting system. These costs are included in the IRS Form 990 Schedule H Part III Section B.

Provider Relief Fund — On March 11, 2020, the World Health Organization designated COVID-19 as a global pandemic. Patient volumes and the related revenue for most services were significantly impacted beginning in mid-March 2020 as various policies were implemented by federal, state and local governments in response to the COVID-19 pandemic, including stay-at-home orders, business closures, social distancing and suspension of elective and nonemergent procedures. Scripps received funding from the CARES Act Provider Relief Fund. These distributions from the Provider Relief Fund are not subject to repayment, provided Scripps is able to attest to and comply with the terms and conditions of the funding, including demonstrating that the distributions received have been used for healthcare-related expenses or lost revenue attributable to COVID 19. The provider relief payments were accounted as a restricted grant and were used to direct offset revenue related to costs.

Hospital Provider Fee Program

The State of California enacted legislation for a provider fee program to fund certain Medi-Cal coverage expansions. The provider fee program charges hospitals a quality assurance fee that is used to obtain federal matching funds for Medi-Cal with the proceeds redistributed as supplemental payments to California hospitals that treat Medi-Cal patients. In February 2020, CMS approved the July 1, 2019 through December 31, 2021 provider fee program. The provider fee programs that had activity in 2019 and 2020 were the 30-month provider fee program covering the period from January 1, 2017, through June 30, 2019, and 30-month provider fee program covering the period from July 1, 2019, through December 31, 2021. The Organization's policy is to recognize program revenues and expenses on the accrual basis once the Federal waiver has been approved. Accordingly, all related supplemental payments have been recognized as revenue and related quality assurance fees have been recognized as expense as of September 30, 2020 and 2019. Federal and state payments received from these programs are included as provider fee revenue in total patient service revenue, and fees paid or payable to the state and California Health Foundation and Trust (CHFT) are included in provider fee expense in operating expenses.

Provider fee program revenue recorded for the years ended September 30 is summarized below (in thousands):

	<u>2020</u>	<u>2019</u>
Provider fee revenue	\$ 184,672	\$ 93,107
Provider fee expense	(129,259)	(72,250)
CHFT fee	(333)	(1,120)
Net operating income from provider fee	<u>\$ 55,080</u>	<u>\$ 19,737</u>

APPENDIX C



APPENDIX D

SAN DIEGO COUNTY HHSA GEOGRAPHIC SERVICES REGIONS⁵⁷



Source: County of San Diego:

https://www.sandiegocounty.gov/content/dam/sdc/live_well_san_diego/indicators/Map_and_Regional_Data.pdf

Central	North Coastal	East	North Inland	North Central	South
<ul style="list-style-type: none"> • Central San Diego • Mid-City • Southeast San Diego 	<ul style="list-style-type: none"> • Carlsbad • Del Mar • Oceanside • Pendleton • San Dieguito • Vista 	<ul style="list-style-type: none"> • Alpine • El Cajon • Harbison Crest • Jamul • La Mesa • Laguna/Pine Valley • Lakeside • Lemon Grove • Mountain Empire • Santee • Spring Valley 	<ul style="list-style-type: none"> • Borrego Springs • Escondido • Fallbrook • North San Diego • Palomar/Julian • Pauma • Poway • Ramona • San Marcos • Valley Center 	<ul style="list-style-type: none"> • Coastal • Elliott Navajo • Kearny Mesa • Mira Mesa • Miramar • Peninsula • University 	<ul style="list-style-type: none"> • Chula Vista • Coronado • National City • South Bay • Sweetwater

⁵⁷ These regions have been designated by the County of San Diego Health and Human Services Agency (HHSa) for the purpose of service delivery. The regions include different sub-regional area (SRA) groupings that the regions designated by the San Diego Association of Governments (SANDAG)

APPENDIX E

REGULATORY REQUIREMENTS

SB 697 and Scripps History with Past Assessments

Scripps Health has a long history of responding to the health needs of the communities it serves, extending beyond traditional hospital care to address the health care needs of the region's most vulnerable populations. In 1994, California legislators passed Senate Bill 697 (SB 697), which requires all private not-for-profit hospitals in the state to conduct a CHNA every three years. Since 1994, these programs have been created based on an assessment of needs identified through hospital data, community input, and major trends. Previous collaborations among not-for-profit hospitals, healthcare systems, and other community partners have resulted in numerous well regarded Community Health Needs Assessments (CHNA) reports. Information is gathered through the CHNA for the purposes of reporting community benefit, developing strategic plans, creating annual reports, providing input on legislative decisions, and informing the general community of health issues and trends.

Federal Requirements

In 2010, Congress added several new requirements for hospital organizations to maintain federal income tax exempt status under Section 501 (r) of the Internal Revenue Code (the "Code") as part of the Affordable Care Act. One of the requirements set forth in Section 501 (r) of the Code is for each hospital organization to conduct a Community Health Needs Assessment (CHNA) at least once every three tax years. The requirement to conduct a CHNA applies to Scripps Health, which is a health system that operates four hospital facilities. In addition, Scripps Health must adopt a triennial Implementation Plan which is a separate written document to address certain community health needs identified in the CHNA. Additional information on the ACA requirements for nonprofit hospitals can be found at www.irs.gov, keyword: "Charitable Organizations".

Required Components of the Community Health Needs Assessment

Per IRS requirements, (Treas. Reg. § 1.501 (r)-3(b) (6) (i)) the following are components the CHNA must include:

- A description of the community served by the health system and how it was determined
- A description of the processes and methods used to conduct the assessment
- A description of how the hospital organization took into account input from persons who represent the broad interests of the community served by the hospital facility
- Prioritized description of all of the community health needs identified through the CHNA, as well as a description of the process and criteria used in prioritizing such health needs.
- A description of the existing health care facilities and other resources with the community available to meet the community health needs identified in the CHNA.
- An evaluation of the impact of any actions that were taken since the hospital finished conducting its immediately preceding CHNA to address the significant health needs identified in the prior CHNA.
- Make the CHNA widely available to the public via the hospital's website.

Required Components of the Implementation Strategy

Provisions in the Affordable Care Act permit a hospital facility that adopts a joint CHNA report to also adopt a joint implementation strategy which, with respect to each significant health need identified through the joint CHNA, either describes how one or more collaborating facilities plan to address the health need or identifies the health need as one collaborating facilities do not intend to address. The joint implementation strategy adopted for the hospital facility must: (Treas. Reg. § 1.501 (r)-3(c) (4).

- Meet community health needs identified in the CHNA. Describe any needs identified in the CHNA that are not being addressed and the reasons for not addressing them
- Be clearly identified as applying to the hospital facility
- Clearly identify the hospital facility's particular roles and responsibilities in taking the actions described in the implementation strategy, and the programs and resources the hospital facility plans to commit to such actions
- Include a summary or other tool that helps the reader easily locate those portions of the joint implementation strategy that relates to the hospital facility.

APPENDIX F

SCRIPPS HEALTHCARE PARTICIPATION IN COMMUNITY ORGANIZATIONS

The list below highlights Scripps community partners and coalitions in Fiscal Year 2020. Community organizations are listed alphabetically.

2-1-1 San Diego
Aging & Independence Services - Fall Prevention Task Force
Alcoholic Anonymous
Alliant International University San Diego
Alpha Project
Alzheimer's San Diego
American Cancer Society
American College of Healthcare Executives (ACHE)
American College of Surgeons
American Diabetes Association
American Heart Association
American Lung Association
American Red Cross of San Diego
American Society of Echocardiography
Association of Clinical Research Professionals
BAME Community Development Corporation
Be There San Diego
Beach Area Community Court Program
Bethel University/Bethel Seminary San Diego
Braille Institute of America
Brandman University
Brightwood (Kaplan) College, Vista Campus
Brookdale Senior Apartments
California Association of Hospital & Health Systems
California College San Diego
California Department of Public Health
California Emergency Medical Services Authority - CAL MAT
California Hospital Association
California Southern University
California State University San Marcos (CSUSM)
Canyon Crest Academy
Canyon Villas
Carlsbad High School
Casa Familiar San Ysidro
Castle Park Elementary School
Castle Park High School

Castle Park Middle School
Catholic Charities, Diocese of San Diego
Catholic Charities, Rachel's Women's Center (Homeless Clothing)
Central Region HHS Public Health
Chelsea's Light Foundation
Chicano Federation San Diego County
Children's Care Connection (C3)
CHIP - Childhood Obesity Initiative
CHIP Resident Leadership Academy
Chula Vista Community Collaborative
Chula Vista Community Collaborative (CVCC)
Chula Vista Library
Chula Vista Medical Plaza
Chula Vista Middle School
Chula Vista Promise Neighborhood
Chula Vista Rotary Club
City of Chula Vista
City of Coronado Fire Department
City of San Diego Fire-Rescue
Claremont Library
Community Health Improvement Exchange (CIE)
Community Health Improvement Partners (CHIP)
Community Health Improvement Partners (CHIP) Behavioral Health Work Team
Community Housing Works Inc.
Consumer Center for Health Education & Advocacy (CCHEA)
Coronado Fire Department
County of San Diego Emergency Medical Services
Diabetes Prevention Program (DPP)
e3Civic High School
Eastlake High School
EMSTA College
Enlisted Leadership Foundation - The Foundry
Episcopal Community Services
Eric Paredes Save a Life Foundation
Every 15 Minutes Organization
FACT San Diego
Family Health Centers of San Diego
Father Joes' Villages Shelter and Health Center
Feeding San Diego
Fiji Alliance School of Medicine
First Five San Diego
Food Finders
Francis Parker School
Full Spectrum Nutrition Services (FSM Cert)

Golden Age Apartments
Goodwill Industries of San Diego County
Grand Canyon University
Granger Junior High School
GRASP - Grief Recovery After Substance Passing
Greater La Jolla Meals on Wheels
Grossmont College
Grossmont Health Occupations Center
Grossmont-Cuyamaca College District Auxiliary
HASD&IC Community Health Needs Assessment Advisory Group
Health and Human Services County of San Diego
Health and Science Pipeline Initiative
Health Resources and Services Administration - HRSA
Health Science Middle - High School Inc.
Health Services Advisory Group (HSAG)
High Tech High
High Tech San Marcos
Hoover High School
Hospital Association of San Diego & Imperial Counties (HASDIC)
Imperial Beach Fire Department
Interfaith Community Services
Jackie Robinson Family YMCA
Jacob & Cushman San Diego Food Bank
Jewish Family Services
Joe Niekro Foundation
Juvenile Diabetes Research Foundation
Kaiser Permanente
La Costa Canyon High School
La Maestra Family Clinic, Inc.
Legal Aid Society of San Diego - LEAD
Leukemia & Lymphoma Society
Live Well San Diego
Mana De San Diego
Mar Vista High School
March of Dimes
McAlister Institute
Mental Health Association of San Diego County
Mira Costa College District of San Diego County
Mira Mesa Women's Club
Miramar Fire Department
Mission Hills High School
Mission Vista High School
National Alliance on Mental Illness (NAMI)
National Institute of Health (NIH)

National University
Naval Medical Center San Diego (NMCSD)
Navy Medicine & Training Command (NMETC)
Neighborhood Healthcare - Federally Qualified Health Center
Norman Park Senior Center
North County Lifeline Inc.
Ocean View Hills Middle School
Oceanside High School
Olive Green Apartments
Operation Samahan Health Clinic
Orchard Senior Living
Overeaters Anonymous - Spanish
Pacific Ridge High School
Palomar College Community College District
Palomar High School
Pancreatic Cancer Action Network
Para las Familia's
Pima Medical Institute - Chula Vista & San Marcos
Point Loma Nazarene University (PLNU)
Promise Neighborhoods
Psychiatric Emergency Response Team (PERT) San Diego
Rady Children's Hospital San Diego
Rancho Bernardo High School
Redwood Villa Seniors Apartments
Regional Task Force on the Homeless- Continuum of Care Housing Collaborative
San Diego Academy
San Diego Association of Governments (SANDAG)
San Diego Blood Bank
San Diego Border Area Health Center (AHEC)
San Diego Breastfeeding Coalition
San Diego City College
San Diego Community College District
San Diego County Alcohol Policy Panel
San Diego County Emergency Medical Services
San Diego County Health and Human Services Agency
San Diego County Medical Society
San Diego County Office of Education
San Diego County Prescription Drug Abuse Task Force
San Diego County Sheriff's Department
San Diego County Sheriff's Foundation
San Diego County Stroke Consortium
San Diego County Stroke System
San Diego County Suicide Prevention Council (Facilitated by CHIP)
San Diego County Taxpayers Association

San Diego Covered California Collaborative
San Diego Echo Society
San Diego Family Care
San Diego Fall Prevention Task Force
San Diego Health Connect - Referrals Work Group
San Diego Healthy Weight Collaborative
San Diego High School
San Diego Human Trafficking Task Force
San Diego Hunger Coalition
San Diego LGBT Community Center
San Diego Mesa College
San Diego Methamphetamine Strike Force
San Diego Miramar College
San Diego Nursing & Allied Health Service - Education Consortium
San Diego Police Foundation
San Diego Psychiatric Society
San Diego Public Library
San Diego Regional Chamber of Commerce
San Diego Regional Continuum of Care Collaborative Governance
San Diego Regional Economic Development Corporation
San Diego Rescue Mission (SDRM)
San Diego State University (academic partner)
San Diego Unified School District
San Diego Workforce Partnership
San Dieguito Union High School District
San Ysidro Health Center - Federally Qualified Health Center
San Ysidro Health Center (SYHC)
San Ysidro High School
San Ysidro Middle School
San Ysidro School District
SanDi-Can
Santa Fe Christian Schools
South Bay Community Services
South Bay Women's Recovery Center
South County Action Network (SoCAN)
South County Career Center
South County Economic Development Council
South County Regional Task Force on the Homeless
South Bay YMCA
Southwest Senior High School
Southwest Sports Wellness Foundation
Southwestern Community College District
Spondylitis Association of America
St. Charles Nutrition Center

St. Leo's Clinic
Survivors of Suicide Loss
Susan G. Komen San Diego
Sweetwater High School
Sweetwater Union High School District
Team Survivors San Diego
TELACU Housing
Temple Heights Elementary
The Downtown San Diego Partnership
The Grauer School
The Jacobs & Cushman San Diego Food Bank
The Patrician Senior Apartments
The San Diego Brain Injury Foundation
The San Diego Foundation
TOPS Club, Inc.
Torrey Pines High School
Trinity Manor
U.S. Border Patrol, San Diego Sector, Paramedic Unit
U.S. Customs & Border Protection, Office of Field Operations
U.S. Drug Enforcement Agency (DEA)
UCSD Extension Healthcare
UCSD School of Medicine
University City High School
University of California San Diego (UCSD)
University of California San Diego Health System
University of California San Diego (Academic Partner)
University of California San Diego, Skaggs School of Pharmacy & Pharmaceutical Sciences
University of San Diego (USD)
University of Southern California
Villa Serena
Vista Adult School
Vista Chamber of Commerce
Vista High School
Vista La Rosa
Vista Unified School District
Viva Life Health Hub
Western Governors University
Westminster Manor
Westview High School
Women, Infant and Children Program (WIC)
Yellow Ribbon Suicide Prevention Program - San Diego Chapter
Young Leaders in Healthcare

For more information about the programs and services offered by Scripps Health, visit [Scripps.org/CommunityBenefit](https://www.scripps.org/CommunityBenefit) or contact the Scripps Health Office of Community Benefit Services at **858-678-7095**.

