Kaiser Permanente Los Angeles Medical Center

Community Benefit Grant Workshop

Community Health Needs Assessment

kp.org/communitybenefit

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Welcome -

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Community Benefit Manager

Catherine Farrell

Director of Public Affairs and Brand Communications

Matthew Giberson

Public Affairs

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Today's Objectives

Learn about:

- Community Benefit Mission & Why
- Community Health Needs Assessment
- LAMC Community – Service Area
- Community Health Needs
- LAMC Prioritization Process
- LAMC Priority Areas
- Single Stage Online

Learn about each other – network!

"This is an opportunity to partner and leverage our organizations' services and resources." – previous workshop attendee

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Kaiser Permanente's mission is to provide high-quality, affordable health care services and to improve the health of our members and the *communities we serve.*

What is Community Benefit and why do we do it?

- Good health extends beyond the doctor's office or the walls of our hospital

- Driven by our commitment to prevention and health promotion to reduce health disparities and improve the overall all health of our members and the communities we serve

- More than grant funding – its collective efforts and partnerships

- Share our assets & expertise –research, physicians and clinical practices and our employees

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Los Angeles Medical Center Community Health Needs Assessment

- A community health needs assessment is conducted every three years (SB 697 and ACA)

- Nonprofit hospitals are responsible for developing and adopting a community benefit plan based on the results of the community needs assessment

- 2016 Community Health Needs Assessment was used to establish all of LAMC's Community Benefit priorities for 2016–2019

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Communities we serve

LAMC's service area includes communities such as:

Alhambra, Altadena, Arcadia, Burbank, Glendale, La Cãnada Flintridge, La Crescenta, Los Angeles (primarily SPA 4), Monrovia, Monterey Park, Montrose, Pasadena, San Gabriel, San Marino, Sierra Madre, South Pasadena, and West Hollywood (East).

City of Los Angeles neighborhoods include Atwater Village, Los Feliz, Silver Lake, Boyle Heights, Chinatown, City Terrace, Downtown Los Angeles, Eagle Rock, East Los Angeles, Echo Park, El Sereno, Glassell Park, Hancock Park, Highland Park, Hollywood, Hollywood Hills, Laurel Canyon, and Montecito Heights.
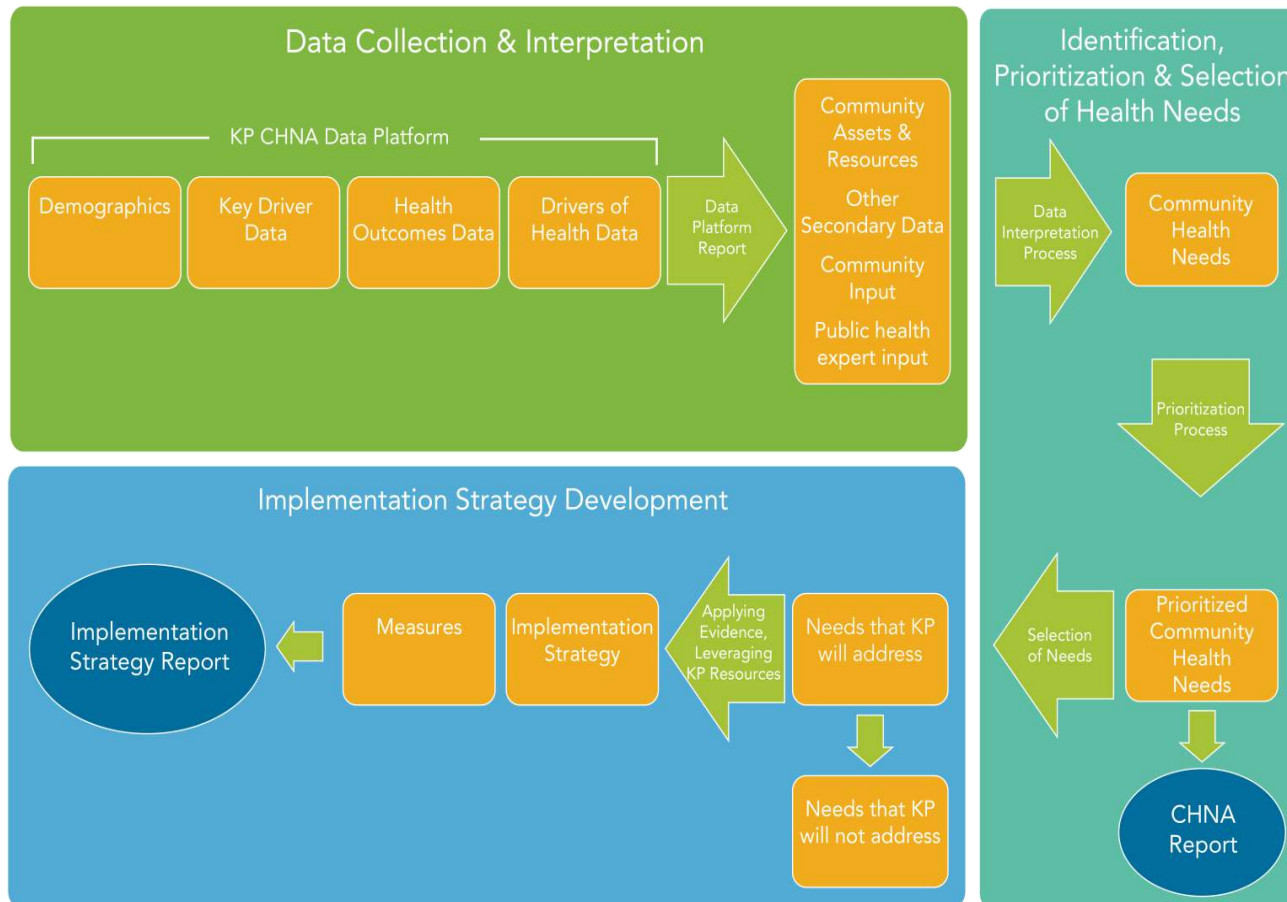
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LAMC Geography

CHNA Process

KAISER PERMANENTE COMMUNITY HEALTH NEEDS ASSESSMENT PROCESS MAP

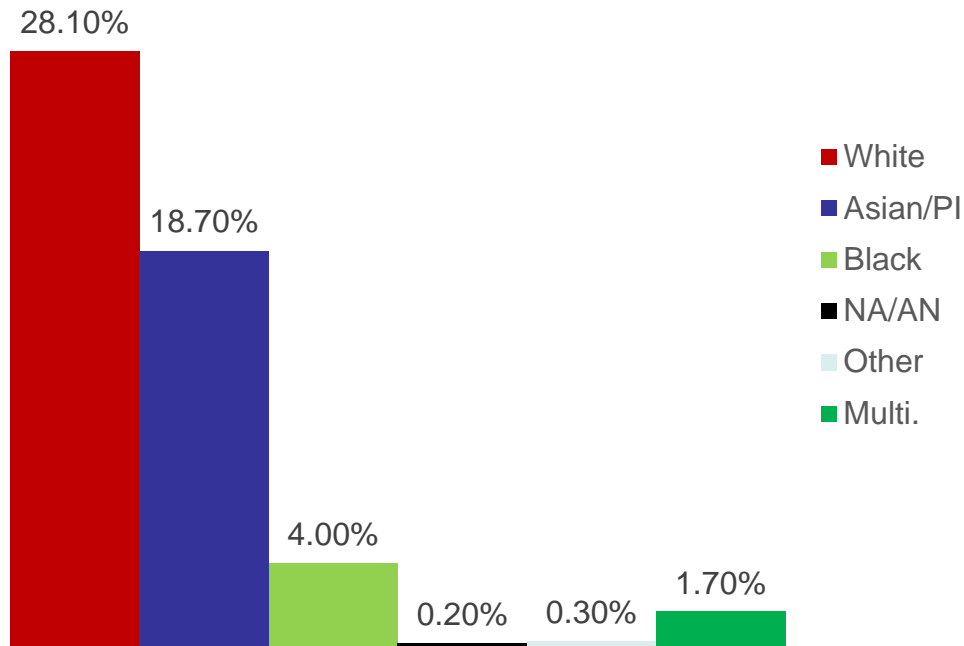# Community Health Needs Assessment Summary and Findings

LAMC Service Area

- In 2013, LAMC's total population was over **2 million** – close to **21%** of the population in Los Angeles County (*U.S. Census Bureau, American Community Survey, 2009-2013*).

- Nearly half (**43.1%**) of the population in the LAMC's service area resides in **SPA 4**. Over a quarter (27.9%) resides in SPA 3 (U.S. Census Bureau Decennial Census, 2010).

- LAMC's service area is nearly **307 square miles** and has a high population density of **6,797.07** persons per square mile, compared to 241.8 in California.
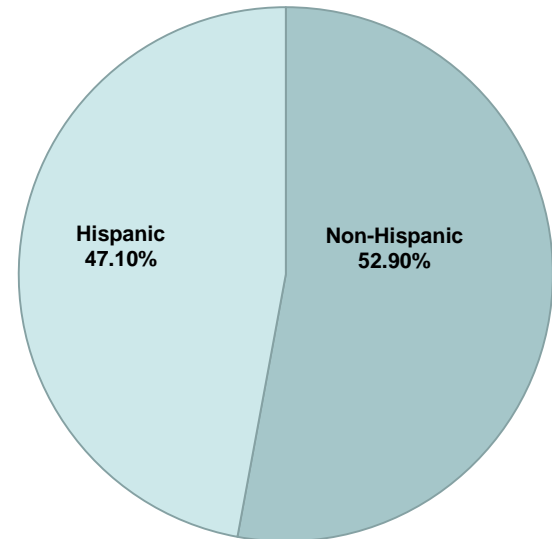
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KFH Los Angeles Medical Center Area and Service Planning Areas

LAMC's focus is on areas of **high need** and **limited resources**, not just zip codes.

Refer zip codes carefully on LAMC CHNA Report.

Race/Ethnicity

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Race*

- White
- Asian/PI
- Black
- NA/AN
- Other
- Multi.

28.10%
18.70%
4.00%
0.20%
0.30%
1.70%

Hispanic Ethnicity

Hispanic
47.10%

Non-Hispanic
52.90%

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Socio-Economic Factors

Income
Below 100% FPL: 21.1%
Below 200% FPL: 45.4%
Children in Poverty: 29.9%

Health Insurance
Uninsured: 26.4%

Educational Attainment
No High School
Diploma: 25.9%

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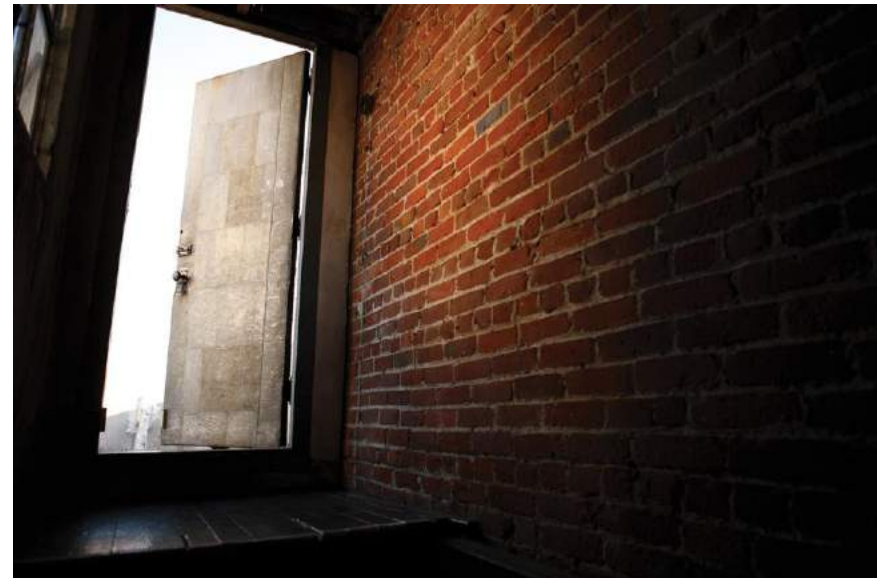
Multiple Health Needs

Community Health Needs (in priority order)

1. **Mental Health**
2. Overweight and Obesity
3. Access to Health Care
4. Substance Abuse
5. STD/HIV/AIDS
6. Diabetes
7. Oral Health
8. Cardiovascular Disease
9. Safety
10. Cancer
11. Asthma

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Methodology LAMC Prioritization

- <u>Methodology Used to Identify and Prioritize Needs</u>

Methodology used to ID health needs	Criteria used to ID health needs	Process used to prioritize health needs	Criteria used to prioritize health needs
• **Review of input from community stakeholder focus groups and key informant interviews** • **Review of KP common indicator health data** • **Comparison of health data with HP2020, Los Angeles County and/or CA average, and historic trends (including previous CHNA)** • **Identification of health disparities of smaller geographic areas or vulnerable communities** • **Review of health drivers**	• Comparison of health data with HP2020, Los Angeles County and/or CA average • Repeated identification in primary data • Represents a health outcome, not a health driver	• Modified Simplex Method • Community forums consisting of: health data review, group discussion, individual survey and ranking	Average ranking from stakeholder surveys using: • Severity of need • Change over time (i.e.: trend) • Availability of resources to address health need

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Online Access Is Here!

For access to the

Kaiser Permanente Los Angeles Medical Center

Community Health Needs Assessment

http://share.kaiserpermanente.org/article/community-health-needs-assessments-3/

CHNA Data Platform

http://assessment.communitycommons.org/kp/

2017 – 2019
LAMC Community Benefit
Funding Priorities

Access to Care

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Long-term Goals

- Enhance individuals' utilization of the community-based health delivery system.

- Improve the capacity of health care systems to provide quality health care services, including the social and non-medical needs of their underserved, low-income patients.

Priority Considerations will be given to:

- Programs that improve appropriate utilization of preventive, primary and specialty health care services that lead to a reduction of non-critical emergency room use and repeat hospitalizations.

- A) the provision of care coordination or B) the provision of community-based, in-home supportive services to underserved, low-income individuals dealing with chronic disease(s).

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Obesity, Overweight and/or Diabetes

Long-term Goals

- Improve linkages between health care services and community-level services.

- Improve access to opportunities for physical activity in the community.

Priority Considerations will be given to:

- Programs that improve referrals by community health centers of underserved, low-income patients to evidenced-based health promotion programs that teach self-management and empowerment techniques for chronic disease management and prevention.

- Multi-level, multi component programs in school settings that produce significant and measurable impact on the health of students and their families in K-12 schools within underserved, low-income communities.

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Mental and Behavioral Health

Long-term Goal

- Improve the knowledge, capacity and infrastructure of health care, organizations and communities to address mental and behavioral health.

Priority Consideration will be given to:

- Community-based, multi-sector collaborative efforts that support mental health and behavioral health for underserved, low-income individuals and their families.

- Programs that enable integration of health care with community-based mental health services, targeting:

  - the recently incarcerated

  - underserved, low-income individuals dealing with or at-risk of alcohol and/or substance abuse

  - homeless individuals living in the greater Hollywood area

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Sexually Transmitted Infections (STI)/HIV

Long-term Goal

- Improve patient access to STI/HIV preventive services including affordable medications and behavioral counseling and support.

Priority Consideration will be given to :

- Programs that improve referral of patients to evidence-based health promotion programs that teach self-management and empowerment techniques for STI/HIV management, prevention and behavioral health
- The provision of high quality health care including preventive services and STI/HIV specialty care for the following at-risk populations:
  - the homeless;
  - underserved, low-income LGBTQ youth and adults; and/or
  - underserved, low-income individuals dealing with or at-risk of alcohol and/or substance abuse.

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LAMC Impact

- Large medical residency program to respond to future healthcare workforce needs, not just for KP but whole system, including safety net clinics.

- Community Medicine Fellows embedded in key community clinics.

- Offering of our Medical Center's knowledge and expertise to nonprofits and community clinic association.

- Engagement of our leaders and physicians in nonprofit organizations and academic institutions.

- Sharing of our research studies and findings.

- Key partnerships with community clinics around planned community access programs.

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New Grant Selection Process

Step 1: Submission of a Online Grant Application by 2:00 pm on March 15, 2017.

Step 2: Review of Grant Applications by the LAMC CB Grant Committee

Step 3: If necessary, conduct site visit(s) or follow up with specific grantees for additional information

Step 4: Notification to all grant applicants on or before July 30th

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Online Grant Application

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Online Grant Application

Important Information.
For all online application technical support
Email: **KP-Community@kp.org**

Partnership Grants

- Highest funding consideration will be given to grant requests submitted by two or more nonprofit organizations partnering to address the same priority need and to provide direct complementary services to the target population.

- Services provided by the partnership organizations should <u>NOT be duplicative or overlapping and must demonstrate a continuum of care</u> addressing the selected priority need.

- The partnership should identify a single organization to function as the Lead Agency through established Memorandum of Understanding (MOU) agreements.

- A completed Grant Partnership Form must be submitted with the online grant application.

Note: Organizations applying as part of a Partnership Grant cannot submit a separate application as an individual organization.

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2nd Year Funding

By invitation only:

At the sole discretion of Kaiser Permanente Los Angeles Medical Center Community Benefit, a successful grantee may be selected for an additional year of funding contingent upon funds availability and that the grantee organization is in "good standing".

Being a selected grantee does NOT mean your organization will be funded a 2nd year.

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Internal Revenue Service

Date: May 24, 2005

HELPLINE YOUTH COUNSELING
12440 E FIRESTONE BLVD STE 1000
NORWALK   CA 90650-4366

Department of the Treasury
P. O. Box 2508
Cincinnati, OH 45201

Person to Contact:
Mrs. E. Eckert ID 31-07436
Customer Service Specialist
Toll Free Telephone Number:
8:30 a.m. to 5:30 p.m. ET
877-829-5500
Fax Number:
513-263-3756
Federal identification Number:
23-7113824

Dear Sir or Madam:

This is in response to your request of May 24, 2005, regarding your organization's tax-exempt status.

In September 1972 we issued a determination letter that recognized your organization as exempt from federal income tax. Our records indicate that your organization is currently exempt under section 501(c)(3) of the Internal Revenue Code.

Our records indicate that your organization is also classified as a public charity under sections 509(a)(1) and 170(b)(1)(A)(vi) of the Internal Revenue Code.

Our records indicate that contributions to your organization are deductible under section 170 of the Code, and that you are qualified to receive tax deductible bequests, devises, transfers or gifts under section 2055, 2106 or 2522 of the Internal Revenue Code.

If you have any questions, please call us at the telephone number shown in the heading of

For 501 c 3 organizations the document should look like this one.

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- Audited financials required for grant requests of $25,000 and over

- Grant Period: July 1 – June 30
    - Funding is not limited to programs just operating within the July 1st to June 30th period. On-going programs are eligible for funding; however, the proposed grant objectives must be met within this period of time.

Reminder:
- CURRENT Board of Directors with Professional Affiliations
- Cover letter on letterhead must show physical mailing address (No PO boxes)

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Community Benefit does NOT fund:

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- Golf tournaments
- Walks, Runs, Bike events
- Professional Associations/affiliations events
- Sorority or Fraternity Community events
- Capital campaigns
- Community health fairs
- Re-granting purposes
- Sports teams
- Individuals
- Academic research
- Endowments
- Political organizations
- Annual fund drives/event sponsorships (i.e. conferences, dinners, luncheons, walks or sporting events)

Or any organization that discriminates on the basis of sex, color, age, religion, disability or sexual orientation

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Grant Application Process

➤ **Online grant release date: February 15, 2017**

➤ **Grant Submission deadline 2:00 p.m. on March 15, 2017**

- Every required document must be completely submitted online by the due dates.

- All submitted grant proposals and supplemental documents become the property of Kaiser Permanente.

- Late or Incomplete applications will **<u>NOT</u>** be accepted. No exceptions.

Highly Competitive

- LAMC is one of the medical centers with highest number of grant requests – average close to 100 in each grant cycle.

- In 2016 over $1.4 million were requested by grant applicants.

- LAMC's service area is nonprofit rich, but we recognize the density of population and high need – sadly, LAMC cannot meet every organizations request.

- LAMC will only be able to meet one-third of the amount requested – just over $500,000.

- LAMC supports organizations whose mission, programs, services and communities of need are well-aligned to our funding priorities.

- Grantees must be committed to evidence-based strategies and accountable to proposed outcomes, objectives, and evaluation methods.

- Partnerships matter to LAMC.

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Expected Outcomes and Evaluation Methods

In this competitive process, expected outcomes and evaluation methods will be key.

Weak Examples:

65% of the program participants will see significant improvements in their health.

1,000 community members will receive information about available health services.

Strong Examples:

200 uninsured children in Boyle Heights will receive oral health screenings, fluoride varnish, preventative care, education, oral health kits and referrals by May 30th.

85% of 700 diabetic case managed patients will maintain or reduce their HbA1c levels to less than 7 and their blood pressure to less than 130/80 by June 1st.

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Key Factors Considered

- Program impact and sustainability
- Responsiveness to funding priorities
- Impact to targeted populations
- Use of evidenced-based strategies
- Magnitude - number of individuals served, community transformation
- Innovation – new, innovative, evidence-based strategies
- Alignment of organization's core programs to funding priorities and LAMC local communities

Not automatic disqualifiers but weigh heavily in final consideration

✓ Current or previous funding support from Kaiser Permanente Regional or other Medical Centers

✓ Consecutive years of funding – after 3 consecutive years chances diminish.

✓ Significant indirect Kaiser Permanente support through the grant applicant's parent organization (chapters, affiliates, partners)

✓ Capacity and/or established support (revenue streams, endowment, institutional)

Automatic disqualifiers: Not in "Good Standing" <u>OR</u> 3 or more grant applications or Letter of Inquiries submission to KP Med Centers or Region.

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Actually only one…. <u>Please don't wait to the last day!</u>

Rushed grant submissions are quite obvious. Just a few examples:

- Request is not clearly responsive to the priority needs and type of direct programs or services funding will be available.
- Lack well written measurable outcomes with proper evaluation methods.
- Requested budget doesn't align to the programs and services being proposed.
- Forms or required documents are not correctly completed or submitted.
- Grammatical errors and typos
- Desperate emails for simple, avoidable issues noted on the FAQs.

For all online grant application IT technical assistance please send an e-mail to KP-Community@kp.org.

Emails to Mario Ceballos regarding online technical issues <u>will only delay</u> the support you need.

Other Resources Available

In addition to grant-making, Kaiser Permanente Los Angeles Medical Center is able to assist community partners with:

- Health education materials
- Educational Theatre http://community.kp.org/be-informed/program/educational-theatre
- Health Sciences Library e-mail: lamc-library-services.scal@kp.org

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Breastfeeding Toolkit: **Visit** **kpcmi.org/how-we-work/breastfeeding-support/**

Health Encyclopedia: Visit kp.org/health (English), kp.org/enciclopedia (Spanish).

Drug Encyclopedia: Visit kp.org/medications

Featured Health Topics: Visit kp.org

Interactive Tools: Visit kp.org/calculators and kpwidgets.com

Video Games: Visit kp.org/amazingfooddetective and kp.org/kidwisdom

Videos: Visit kp.org/watch

Podcasts: Visit kp.org/listen

YouTube Videos: Visit youtube.com/playlist?list=PL69D032C702F0F182

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Prevention Resources

Kaiser Permanente's Thriving Schools: (kp.org/thrivingschools**)**

Weight of the Nation:
(www.share.kaiserpermanente.org/static/weightofthenation/index)

Fire Up Your Feet: (www.fireupyourfeet.org)

Safe Routes to School: (www.saferoutesinfo.org)

Alliance for a Healthier Generation: (www.healthiergeneration.org)

Smarter Lunchrooms Movement: (www.smarterlunchrooms.org)

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Thank you and good luck.

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