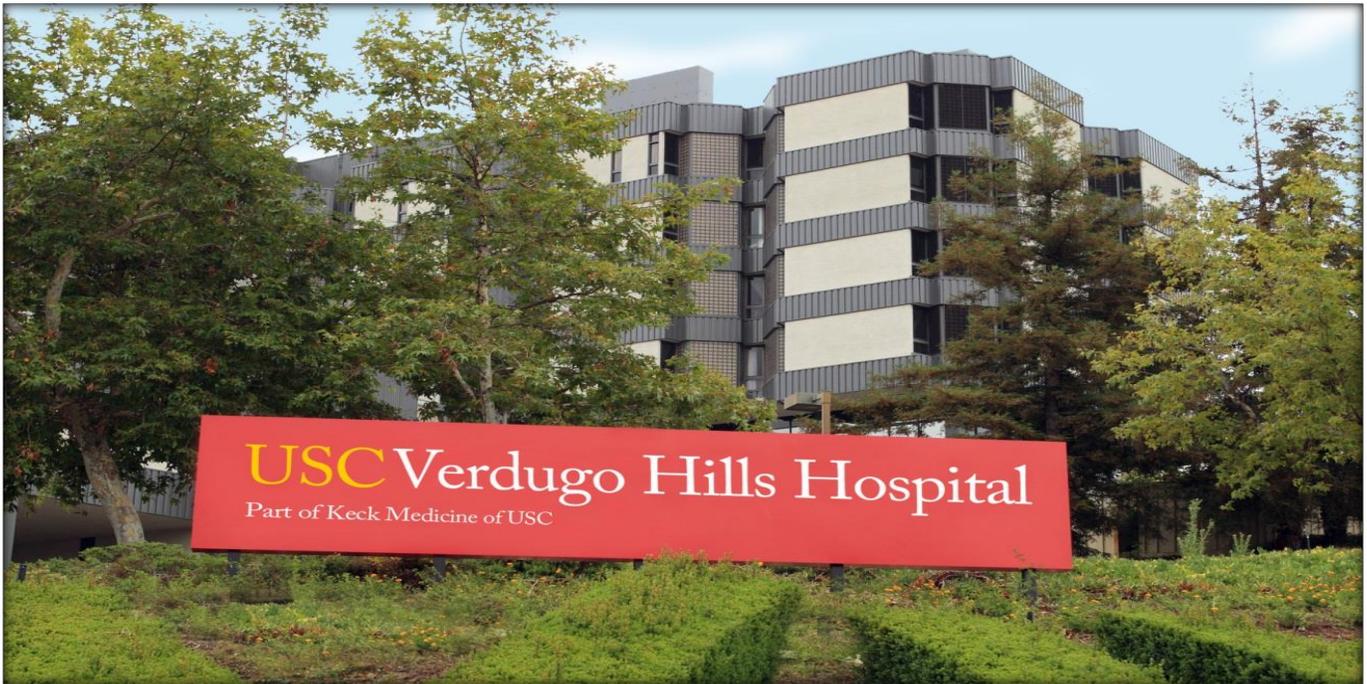


# USC Verdugo Hills Hospital

Keck Medicine of USC



Annual Report and Plan for Community Benefit  
USC Verdugo Hills Hospital  
Fiscal Year 2021 (July 1, 2020 - June 30, 2021)

Submitted to:  
Department of Health Care Access and Information  
Accounting and Reporting Systems Section  
Sacramento, California

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## About USC Verdugo Hills Hospital

### Keck Medicine of USC

Keck Medicine of USC is the University of Southern California's medical enterprise. Encompassing academic excellence, world-class research and state-of-the-art clinical care, we attract internationally renowned experts who teach and practice at the Keck School of Medicine of USC, the region's first medical school.

We operate the Keck Medical Center of USC, which includes two acute care hospitals: Keck Hospital of USC and USC Norris Cancer Hospital. The enterprise also owns the community hospital USC Verdugo Hills Hospital, and it includes more than 40 outpatient facilities, some at affiliated hospitals, in Los Angeles, Orange, Kern, Tulare and Ventura counties. In addition, we operate USC Care Medical Group, a medical faculty practice.

### USC Verdugo Hills Hospital

USC Verdugo Hills Hospital began in 1947 as Behrens Memorial Hospital. Rather than expand the Behrens facility, a new hospital was built on the hilltop land donated by the Greene family. In 1972, Verdugo Hills Hospital was created serving patients in the cities of Glendale and La Cañada Flintridge, as well as the surrounding Foothill communities of Southern California. In 2013, Verdugo Hills Hospital partnered with the University of Southern California (USC) and became part of Keck Medicine of USC, creating USC Verdugo Hills Hospital.

USC Verdugo Hills Hospital (USC-VHH) is a 158-bed nonprofit community hospital. Services include a 24-hour emergency room staffed by USC faculty physicians; a primary stroke center; bariatric and minimally invasive surgery; OB-GYN and infant services; orthopedic surgery; occupational, physical and speech therapy; cardiac rehabilitation; and imaging and diagnostic services including mammograms, magnetic resonance imaging (MRI), CT scans and angiograms. USC-VHH has a six-bed, state-of-the-art neonatal intensive care unit (NICU) to provide care for infants born prematurely or with critical medical conditions.

### Awards

USC-VHH was the recipient of the following awards and accolades:

- Top hospital for LGBTQ+ patients and health-care workers by the Human Rights Campaign
- Lantern Award by the Emergency Nurses Association, the only community hospital in Southern California to receive the award
- The first hospital in California to receive Board of Certification in Emergency Nursing (BCEN) Honorary Certification Recognition

## Mission and Values

### Mission

Our mission is to provide personalized, high-quality healthcare relevant to our patient community.

### Vision

Our vision is to differentiate our hospital by delivering excellent clinical outcomes and superb customer service.

### Governance

The USC Health System Board provides strategic, financial, and operational oversight to the USC Health System and clinical care activities across the University and its health professional schools, enables the USC Health System to be nimble and thrive in a competitive Los Angeles health care market, and continues to ensure patient access and experience meet the highest levels of safe and quality care.

#### USC Health System Board

Wanda M. Austin, PhD

Tia Bush

Carol L. Folt, PhD

Rod Hanners

Gerald Hickson, MD

John Kusmiersky, JD

Leonard D. Schaeffer

Steven D. Shapiro, MD

William E.B. Siart

Jim Staten

Charles F. Zukoski, PhD

The Board of Directors provides organizational leadership for community benefit. The Board functions as an oversight and policy-making body for the hospital's community benefit commitments, efforts and strategic alignment with community needs. The Board has accountability for community benefit performance.

#### USC Verdugo Hills Hospital Governing Board

Todd Andrews

Tammy Capretta, RN, MPH

Carl R. Chudnofsky, MD

Alexandria Darras, MD

Armand H. Dorian, MD, MMM, FACEP

Steven Giannotta, MD

Rod Hanners

Tina Ito  
Happy Khanna, MD  
Joseph Ouzounian, MD  
David Sagal  
Shawn T. Sheffield, MBA, MHA  
Steve Wilder

### **Community Advisory Board**

The Community Advisory Board is an advisory committee for the hospital's community benefit programs and reports to the Board of Directors. The Advisory Board reviews and validates legal and regulatory compliance specific to community benefit mandates, assures community benefit programs and services are effectively meeting identified community health needs, and increases transparency and awareness of community benefit activities. The members of the Advisory Board include:

Sue Wilder, Chair  
Kandi Wopschall, II, Secretary  
Lola Abrahamian  
Chandnish Ahluwalia, MD  
Todd E. Andrews  
Patricia Beauchamp  
Soo Kim Choi  
Paul Craig  
Robert E. Develle, Jr.  
Armand Dorian, MD  
Sheila Dunbar  
Tim Feeley  
Steven Hartford, MD  
Todd Tucker

## Caring for our Community

USC-VHH recognizes its obligation to provide service above and beyond its role as a healing facility. This report demonstrates tangible ways in which USC-VHH fulfills its mission to improve the health and wellbeing of our community and provide personalized, high quality health care. USC-VHH provides financial assistance to those in the community who cannot afford services, or whose health insurance does not cover all services rendered. In addition, USC-VHH invests in the community to increase access to health care services and improve health.

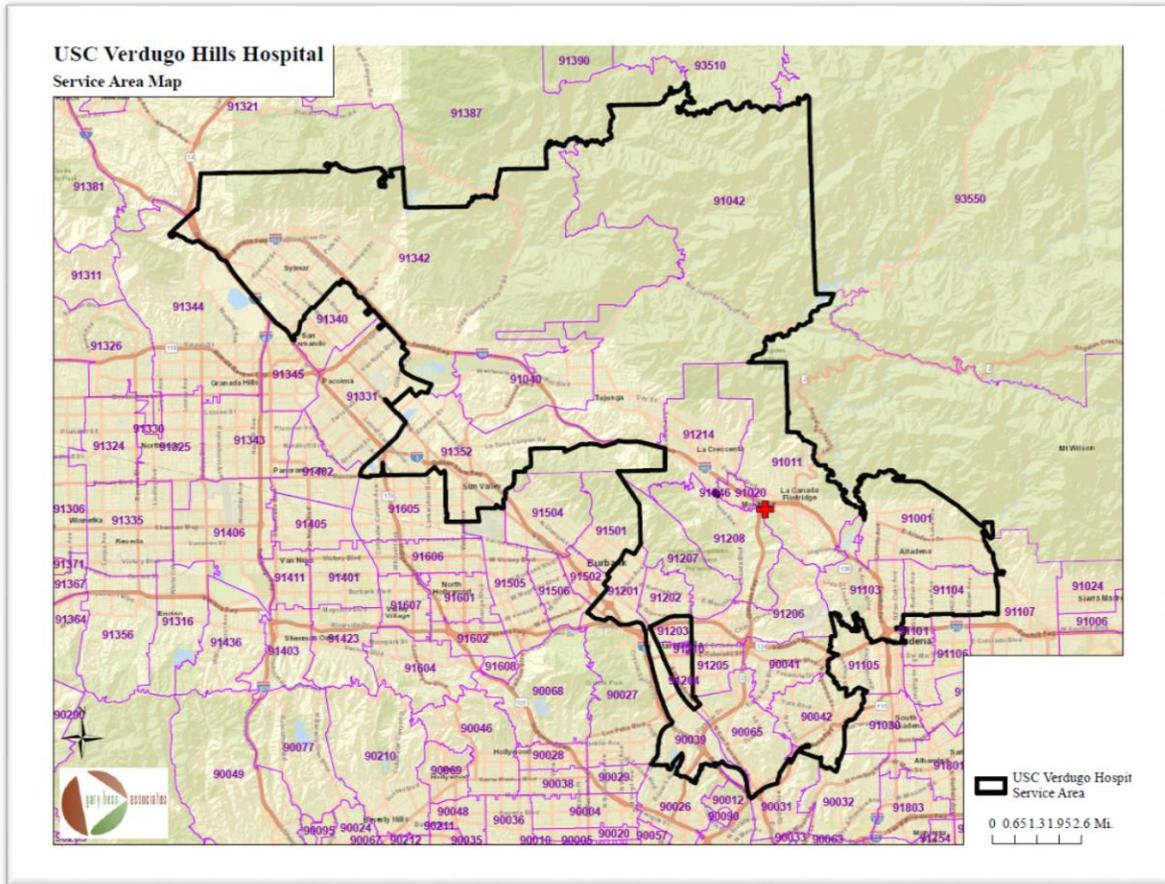
### Service Area

USC-VHH is located at 1812 Verdugo Boulevard, Glendale, California, 91208. The service area is located in Los Angeles County and includes 20 ZIP Codes, representing 14 cities or communities. The hospital service area was determined from the ZIP Codes that reflect a majority of patient admissions.

**USC Verdugo Hills Hospital Service Area**

<b>Geographic Areas</b>	<b>ZIP Codes</b>
Altadena	91001
Glendale	91201, 91202, 91205, 91206, 91207, 91208
Highland Park	90042
LA Canada Flintridge	91011
La Crescenta Montrose	91214
LA/Eagle Rock	90041
LA/Glassell Park	90065
Los Angeles	90039
Montrose	91020
Pasadena	91103, 91104
Sun Valley	91352
Sunland	91040
Sylmar	91342
Tujunga	91042

## Map of USC Verdugo Hills Hospital Service Area



### Community Snapshot

The population of the USC-VHH service area is 666,468. Children and youth make up 20.1% of service area population, 64.9% are adults, and 15.0% are seniors, ages 65 years and older. The service area has a higher percentage of seniors than found in the county (12.2%). Almost half of the population (45.9%) is White. At 33% of the population, Latinos or Hispanics are the second largest race/ethnic group in the service area. Asians make up 14% of the population in the service area and African Americans are 4% of the population.

Among area residents, 13.6% are at or below 100% of the federal poverty level (FPL) and between 11.3% to 12.1% of service area children are at 200% of FPL or below (low-income). In the service area, 18.2% of adults are high school graduates, and 47.1% of the population in the service area has graduated college.

## **Community Health Needs Assessment**

USC-VHH completed a Community Health Needs Assessment (CHNA) in 2019 as required by state and federal law. The CHNA is a primary tool used by USC-VHH to determine its community benefit plan, which outlines how it will give back to the community in the form of health care and other community services to address unmet community health needs. The assessment incorporated components of primary data collection and secondary data analysis that focused on the health and social needs of the service area.

The CHNA examined up-to-date data sources for the service area to present community demographics, social determinants of health, access to health care, birth characteristics, leading causes of death, acute and chronic disease, health behaviors, mental health, substance use and misuse, and preventive practices. When applicable, these data sets were presented in the context of Los Angeles County, California and compared to the Healthy People 2020 objectives.

Targeted interviews and focus groups were used to gather information and opinions from persons who represent the broad interests of the community served by the hospital. Twelve (12) interviews were completed from January to March 2019. Interviewees included individuals who are leaders and/or representatives of medically underserved, low-income, and minority populations, local health or other departments or agencies that have current data or other information relevant to the health needs of the community. Input was obtained from the Los Angeles County Department of Public Health.

## **Community Engagement**

In addition, Keck Medicine of USC commissioned the National Health Foundation (NHF) to conduct a Community Environmental Scan in 2019 to create a three-dimensional picture of the hospital's communities, including their social, economic and physical barriers to healthy living, and engage the community for their perspectives on these issues.

This community engagement strategy was designed to gather community input on disparities within the hospital's service area, understand community resources, gauge gaps in services, clarify and enhance the community profile and provide recommendations for strategies and investments that could address community concerns and health disparities. Data collection occurred in three phases: community canvassing; focus groups; and community stakeholder surveys.

Community canvassing occurred at four large events across the hospital's service area. The canvassing events engaged 71 residents. During these canvassing events, community residents were recruited for focus groups in multiple languages. Six (6) focus groups engaged 65 persons and were conducted from July to October 2018.

Finally, community stakeholders were identified during these community canvassing and focus group recruitment events. Executive leaders in community organizations or schools, or individuals heavily involved in addressing community issues through local government were identified as qualified stakeholders. The responding stakeholders represented a broad range of interest in the hospital's services area and included nonprofit leaders, school principals, police department representatives and local government officials. Stakeholder surveys were developed and disseminated once canvassing and focus group themes emerged. Twelve (12) community stakeholders participated.

### **Priority Health Needs**

Health needs were identified from secondary data using the size of the problem (relative portion of population afflicted by the problem) and the seriousness of the problem (impact at individual, family, and community levels). The analysis of secondary data yielded a preliminary list of significant health needs, which then informed primary data collection. The primary data collection process was designed to validate secondary data findings, identify additional community issues, solicit information on disparities among subpopulations, ascertain community assets to address needs and discover gaps in resources.

The identified significant health needs were prioritized with input from the community. Access to health care, economic insecurity, mental health, substance use and misuse, and chronic disease were ranked as the top five priority needs in the service area. The calculations of the community input resulted in the following priority ordering of the significant health needs:

1. Access to health care
2. Economic insecurity
3. Mental health
4. Substance use and misuse
5. Chronic diseases
6. Overweight and obesity
7. Preventive practices
8. Sexually transmitted infections
9. Dental care
10. Senior health
11. Transportation

The complete CHNA report and the prioritized health needs can be accessed at <http://uscvh.org/giving/community-benefit>. We welcome feedback on the Community Health Needs Assessment and Implementation Strategy. Please send your feedback to: [Deborah.weirick@med.usc.edu](mailto:Deborah.weirick@med.usc.edu).

## **Addressing Priority Health Needs**

In FY21, USC-VHH engaged in activities and programs that addressed the priority health needs identified in the FY20-FY22 Implementation Strategy. USC-VHH has committed to community benefit efforts that address access to care, preventive care, chronic diseases, mental health and senior health. Selected activities and programs that highlight the USC-VHH commitment to the community are detailed below. Senior health activities are incorporated in the other priority health need sections.

### **Access to Care/Preventive Care**

Access to care is a key determinant of health that provides preventive measures and disease management, reducing the likelihood of hospitalizations and emergency room admissions. Routine health care includes screenings, check-ups, and counseling to prevent illness, disease, or other health problems. Individuals, who receive services in a timely manner, have a greater opportunity to prevent or detect disease during earlier, treatable stages.

### **Response to Need**

#### Transportation

Lack of transportation is a documented barrier to accessing health care services. The hospital provided taxi vouchers, ambulance services and van transportation for low-income patients and families who could not afford transportation to obtain needed health care services

#### Clinical Services

USC-VHH provided medications, medical supplies and infusions for persons who were indigent and could not afford these medically-necessary resources.

#### Community CPR

Classes available to the community included infant CPR and Basic Life Support (BLS) training.

#### Flu Shots

USC-VHH administered flu shots at its Drive-Through Flu Shot Clinic.

#### Support Groups and Workshops

Support groups and workshops offered breast feeding advice and support to new mothers as well as fathers. The support groups were facilitated by a lactation specialist.

### **Chronic Diseases**

Chronic diseases are long-term medical conditions that tend to progressively worsen. Chronic diseases, such as cancer, heart disease, diabetes and lung disease, are major causes of disability

and death. Chronic diseases are also the major causes of premature adult deaths.

## **Response to Need**

### Health Education

The hospital made health education sessions available to the public. Doc talk sessions addressed a number of disease prevention and health and wellness topics.

### Community Support

Financial support was provided to community organizations that offered chronic disease education and prevention activities.

## **Mental Health**

Good mental health is associated with improved health outcomes. Indicators and contributors to poor mental health include poverty and low-levels of education. The need to access mental health services was noted as a high a priority among community members.

## **Response to Need**

### Stepping Stones

A geropsychiatric program, Stepping Stones is designed to help relieve emotional and personal distress for individuals age 50 and older. Through inpatient and outpatient programs, USC-VHH employs a variety of therapeutic options, including medical management, cognitive behavioral therapy, psychoanalysis, art, music and movement therapy to help patients. Stepping Stones also works to help patients with dementia regain their memories through creative therapy methods and allow them to maintain as much independence as possible.

### 5<sup>th</sup> Annual Suicide Awareness and Prevention Conference

Hosted a virtual Suicide Awareness and Prevention Conference. The event brought together a multidisciplinary team of psychiatrists, neurologists, mental health advocates, policymakers and community leaders to discuss the underlying causes and risk factors for depression and suicide, as well as identify ways to safely discuss such issues with loved ones.

### Brain Health Forum

Hosted a virtual forum on brain health. Topics included Exercise and the Brain, Genetics of Alzheimer’s Disease, Protective Effects of Social Connection, and Healthy Lifestyle.

### Community Support

Financial support was provided to community organizations that offered mental health education and prevention activities.

Provided funding for psychiatric care for vulnerable patients who could not afford the treatment.

### **Senior Health**

Seniors may experience disease and disability as a result of aging. The hospital serves a high percentage of seniors making senior health a priority community health need.

### **Response to Need**

#### Community Resource Center for Aging (CRCA)

The USC Community Resource Center for Aging helps older adults improve their quality of life by providing access to a robust network of resources, community-based services and support systems that specialize in navigating the unique challenges of aging. Services are available to all members of the community, free of charge, including family members and caregivers. People can also receive guidance navigating both daily needs, like food and medicine delivery or transportation, to major life decisions like long-term care or assisted living. Access to the CRCA is free to anyone in the community.

### **COVID-19 Response**

USC, Keck Medicine and USC Verdugo Hills Hospital established dedicated coronavirus update pages to serve a variety of audiences needing to know safety precautions, visitor policies and more.

#### COVID Outreach, Education and Vaccines

Keck Medicine of USC developed many education materials on COVID-19 and provided community outreach to distribute the education materials. The hospital hosted four community outreach vaccination events. USC-VHH hosted more than four vaccine clinics for the community.

#### Research

Ali Gholamrezanezhad, MD, a clinical emergency radiologist with Keck Medicine of USC, was one of the first researchers to study COVID-19 in early 2020. Today, Gholamrezanezhad has co-authored more than 40 papers on the disease, gathering and analyzing a wide array of data and patient scans.

#### Vaccine Access

Keck Medicine has been increasing efforts to raise vaccination access to the predominantly Latino communities around the Health Sciences Campus. Given the disproportionate impact of COVID-19 on Latino and African American communities, efforts to quickly vaccinate these high-risk community members was important. In January 2021, Keck Medicine of USC opened up 300 slots

for the first dose of the COVID-19 vaccine to the 65-and-older family members of Environmental Health Services employees and cafeteria workers.

#### National Advocacy

Lourdes Baezconde-Garbanati, PhD, MPH, a member of the Pandemic Research Center at the Keck School of Medicine of USC, the Associate Director of Community Outreach at USC Norris Cancer Center and chair of the Board of Directors of the National Alliance for Hispanic Health, presented to the White House COVID-19 Health Equity Task Force. The task force, which is chaired by Marcella Nunez Smith, MD, MHS, of Yale School of Medicine, was created by President Joe Biden and Vice President Kamala Harris to study and address the disproportionate impact of the pandemic on some of the nation's most vulnerable communities.

## **Community Benefit Services Summary FY21**

### **Accomplishments in FY21 (July 1, 2020 to June 30, 2021)**

Community benefit services promote health and healing and are focused on addressing the identified unmet health needs of the community. For a program or service to be considered a community benefit it must: improve access to health care; or enhance the health of the community; or advance medical or health care knowledge; or reduce the burden of government or other nonprofit community efforts. Due to COVID-19, some of our annually supported programs and events were postponed. Other programs were transferred from in person events to virtual meetings to allow for social distancing.

### **Community Health Improvement Services**

*Definition: activities carried out to improve community health, available to the public, which address a community need.*

### **Community Health Education**

#### Health Education Seminars

The hospital made health education sessions available to the public. Doc talk sessions addressed a number of disease prevention and health and wellness topics, including: cancer prevention and treatment, heart health, weight loss, diabetes awareness, nutrition and wellbeing, COVID-19, stroke awareness, men's health and women's health, COPD, mental health, depression, bone and joint health, brain health, breast health, prostate health, and healthy aging. In FY21, 250 community members tuned into these virtual classes.

#### 5<sup>th</sup> Annual Suicide Awareness and Prevention Conference

Hosted a virtual Suicide Awareness and Prevention Conference in FY2021. The event brought together a multidisciplinary team of psychiatrists, neurologists, mental health advocates, policymakers and community leaders to discuss the underlying causes and risk factors for depression and suicide, as well as identify ways to safely discuss such issues with loved one. 178 practitioners and community members participated.

#### Brain Health Forum

Hosted a virtual forum on brain health. Topics included Exercise and the Brain, Genetics of Alzheimer's Disease, Protective Effects of Social Connection, and Healthy Lifestyle. 100 community members participated.

#### Community Resource Center for Aging (CRCA)

The USC Community Resource Center for Aging helps older adults improve their quality of life by providing access to a robust network of resources, community-based services and support

systems that specialize in navigating the unique challenges of aging. Services are available to all members of the community, free of charge, including family members and caregivers. People can also receive guidance navigating both daily needs, like food and medicine delivery or transportation, to major life decisions like long-term care or assisted living. Access to the CRCA is free to anyone in the community. 139 individuals received resource counseling.

#### Community CPR

Classes available to the community included infant CPR and Basic Life Support (BLS) training. 319 individuals received training.

#### BEGINNINGS Early Pregnancy Class

As part of the hospital's Family Education Program, classes addressed pregnancy-related health topics, including nutrition, common discomforts of pregnancy, relaxation techniques and baby's development in the womb. Classes were offered monthly and were open to the public; 108 persons participated. A decision to deliver at the hospital was not required to participate.

#### New Mothers Forum Support Group

Weekly discussion groups were open to the public and helped new mothers ease through the adjustments of motherhood. The support group was facilitated by a family education program instructor; 24 encounters were provided.

#### Support Group and Workshops

Support groups and workshops offered breast feeding advice and support to new mothers as well as fathers. The support groups were facilitated by a lactation specialist. Open and free to the public, babies in arms were welcomed. A total of 190 encounters were provided.

#### Infant Care Workshops

This class taught new and expectant parents the practical skills for newborn care, including diapering, bathing, taking an infant's temperature, safety related information and basic first aid; 184 individuals attended these classes.

#### Lamaze Series

Lamaze classes prepared expectant parents for a safe, healthy birth by providing current and evidence-based information. The classes build confidence and teaches childbirth coping mechanisms. 12 Lamaze series of classes was provided and each class provided 5 weekly sessions. 144 expectant parents participated.

## **Community-Based Clinical Services**

### Flu Shots

USC-VHH administered 325 flu shots at its Drive-Through Flu Shot Clinic.

### COVID-19 Vaccines

USC-VHH hosted more than four vaccine clinics for the community. All totaled – USC-VHH vaccinated over 7,000 community members.

## **Health Care Support Services**

### Transportation Services

Transportation is a documented barrier to accessing health care services. The hospital paid for taxi vouchers, ambulance services and van transportation for 152 low-income patients and families who could not afford transportation to obtain needed health care services.

### Psychiatric Care

Provided psychiatric facility care for 44 vulnerable patients who could not afford needed psychiatric care.

### Other Support Services

Provided medications, medical supplies and recuperative care support for 9 indigent individuals.

## **Health Professions Education**

*Definition: education programs for physicians, nurses, nursing students, and other health professionals.*

### **Nursing Education**

495 nursing students participated in clinical rotations at USC-VHH. Students participated from numerous schools, including Azusa Pacific University, California State University, Los Angeles, California State University, Northridge, Glendale City College, and Pasadena Community College, Western University of Health Sciences, West Coast University, Grand Canyon University, and Mount Saint Mary's University.

### **Other Health Professions Education**

26 health professional students were educated and performed their clinical hours and/or internship rotations in health administration, occupational therapy, physical therapy, nutrition, sterile processing, Certified Nursing Assistants and Emergency Medical Technicians.

### **Cash and In-Kind Donations**

*Definition: funds and in-kind services donated to community groups and nonprofit organizations.*

Funds were donated to nonprofit community groups and local organizations. The support of these organizations furthered the hospital's mission and addressed the community health needs identified through the CHNA.

### **In-Kind Donations**

- Scrubs were donated to Armenian Medical Relief

### **Community Benefit Operations**

*Definition: direct and indirect costs associated with assigned staff, community health needs assessments, community benefit planning, tracking, reporting, evaluating and operations.*

In FY21, funding supported:

- Community benefit staff salary, benefits and expenses
- Administrative support for community benefit
- Community benefit consultants

### **Community Building Activities**

*Definition: activities that support community assets by offering the expertise and resources of the hospital organization. These activities may address the root causes of health problems or the determinants of health, such as education, homelessness, poverty and the environment.*

### **Workforce Development**

USC-VHH participated in community programs that encouraged careers in the health professions. 225 local high school students from high schools in Los Angeles participated in a Healthcare Day of Discovery, a program to introduce health care careers to students.

### **Economic Development**

USC-VHH actively supported issues impacting community health and safety by partnering with the Crescenta Valley Chamber of Commerce, the Glendale Chamber of Commerce and the La Cañada Kiwanis Club.

## Financial Summary of Community Benefit

The USC-VHH financial summary of community benefit for FY21 (July 1, 2020 to June 30, 2021) is summarized in the table below. The Hospital's community benefit costs are in compliance with Internal Revenue Service instructions for Form 990 Schedule H and are based on the Medicare cost report adjusted for the Form 990 reporting period.

Community Benefit Categories	Net Benefit
Charity Care/Financial Assistance <sup>1</sup>	\$2,861,021
Unpaid Costs of Medi-Cal <sup>2</sup>	\$8,999,554
Unpaid cost of Indigent Care <sup>2</sup>	\$63,393
Education and Research <sup>3</sup>	\$3,562,597
Other for the Broader Community <sup>4</sup>	\$344,026
<b>Total Community Benefit Provided Excluding Unpaid Costs of Medicare</b>	<b>\$15,830,591</b>
Unpaid Costs of Medicare <sup>2</sup>	\$17,893,343
<b>Total Quantifiable Community Benefit</b>	<b>\$33,723,934</b>

<sup>1</sup> Financial Assistance includes traditional charity care write-offs to eligible patients at reduced or no cost based on the individual patient's financial situation. Financial Assistance or Charity Care does not include costs for patients who had commercial insurance, but could not afford their out-of-pocket costs.

<sup>2</sup> Unpaid costs of public programs include the difference between costs to provide a service and the rate at which the hospital is reimbursed.

<sup>3</sup> Costs related to the health professions education programs and medical research that the hospital sponsors.

<sup>4</sup> Includes non-billed programs such as community health education, screenings, support groups, clinics, support services and community benefit operations.

## Community Benefit Plan FY22

USC-VHH continues to implement activities and programs to address the priority needs in our service area. Given the current unprecedented times as a result of COVID-19, USC-VHH anticipates some FY22 plans may be modified due to urgent community needs and situational restrictions that may limit how we are able to support the health and wellbeing of at-risk individuals and families in the hospital service area.

### Significant Needs the Hospital Intends to Address

USC-VHH intends to take actions to address the following health needs that were identified in the FY19 CHNA and detailed in the FY20-FY22 Implementation Strategy:

- Access to care/preventive care
- Chronic diseases
- Mental health
- Senior Health

#### Health Need: Access to Care/Preventive Care

##### Goals

Increase access to health care for the medically underserved and improve community health through preventive practices.

##### Actions

1. Provide financial assistance through both free and discounted care for health care services, consistent with the hospital's financial assistance policy.
2. Provide transportation support to increase access to health care services.
3. Support primary care providers by offering USC specialty care expertise from the physicians at Keck Medicine of USC.
4. Offer free and low-cost health care services and immunizations to reduce disease and disability.
5. Educate primary care physicians about preventive practice offerings.
6. Develop free and low-cost educational health-care programming on preventive practices.

#### Health Need: Chronic Diseases

##### Goal

Reduce the impact of chronic diseases and increase the focus on chronic disease prevention and treatment education.

##### Actions

1. Provide chronic disease education, screening and treatment.

2. Offer health information and referrals to needed services at community health events.
3. Provide public health education in the media and community health awareness events to encourage healthy behaviors and prevent chronic diseases.
4. Increase knowledge of and access to resources that address symptoms of chronic diseases such as cardiac rehabilitation and diabetic wound care.

### **Health Need: Mental Health**

#### **Goal**

Increase access to mental health care resources, services and education. Decrease the stigma associated with seeking mental health care.

#### **Actions**

1. Provide health education and support groups that offer information, resources and assistance on mental health issues.
2. Develop partnerships among USC mental health specialists, primary care providers, addiction counselors and community-based mental health service providers to increase screening and treatment of mental health problems.
3. Collaborate with local mental health advocacy groups to provide education to identify and respond to signs of mental illness.

### **Health Need: Senior Health**

#### **Goal**

Enhance senior health and wellbeing.

#### **Actions**

1. Offer community education focused on issues pertinent to seniors.
2. Provide free health screenings for seniors.
3. Offer classes for seniors that promote health.
4. Explore creating a senior resource center that will connect seniors to other community-based resources.

### **Needs the Hospital Will Not Address**

Taking existing hospital and community resources into consideration, USC-VHH will not directly address the remaining health needs identified in the CHNA, including: economic insecurity, dental care, overweight and obesity, sexually transmitted infections, substance use and misuse, and transportation. USC-VHH chose to concentrate on those health needs that can most effectively be addressed, given the organization's capabilities. The hospital has insufficient resources to effectively address all the identified needs and, in some cases, the needs are currently addressed

by others in the community. USC-VHH will continue to look for opportunities to address community needs and provide assistance where we can make a meaningful contribution.

### **Evaluation of Impact**

USC-VHH will monitor and evaluate the programs and activities outlined above. The reporting process includes collection and documentation of tracking measures, such as the number of people reached/served and collaborative efforts to address health needs.

### **Contact Information**

USC-Verdugo Hills Hospital  
1812 Verdugo Boulevard  
Glendale, CA 91208  
<https://uscvh.org/>

### **Community Benefit Contact**

Deborah Weirick  
[Deborah.weirick@med.usc.edu](mailto:Deborah.weirick@med.usc.edu)