

Community Health Needs Assessment 2022



Mission, Vision & Values

Our Mission

Our Mission is to Improve the Health and Well-being of our Community. Achieving this requires clear priorities, supportive leadership, and staff and community collaboration, which will be engrained in our HERO Values.

Our Vision

At Orchard Hospital, our Vision to ***Provide Quality Health Care Close to Home***, is consistent with the direction of the Orchard Hospital Board of Directors with three main goals in mind:

- Provide High-quality healthcare in the services we provide
- Promote healthy lifestyles with focus on obesity prevention and management, starting with our youth
- Implement key strategies important to our communities that allow us to achieve sustainable operating margins

Our Values

At Orchard Hospital, our governance and decision-making will always be based upon integrity, respect, innovative processes, ethical foundations, and continual self-improvement.

H - Honesty and Integrity

We will make decisions with honesty and integrity that will ensure Orchard Hospital's future.

E - Engaged and Empowered Staff

We will hire staff that are engaged and empowered to make a positive difference in the lives of our patients and each other.

R - Responsive

We will respond to the needs of our community by implementing programs that align with our Community Health Needs Assessment (CHNA).

O - Outcomes-Driven

We will be recognized for having excellent outcomes for the services we provide at Orchard Hospital.

Introduction

Orchard Hospital located in Gridley, California is a 501(c)(3) Critical Access

Hospital offering 24-hour emergency services, inpatient, outpatient, and rural health clinic services. Orchard Hospital is dedicated to always providing the finest personalized healthcare to North Valley communities by offering a wide range of integrated services, from prevention through treatment to wellness.

Orchard Hospital is the only acute care hospital in Gridley, as well as along the Highway 99 corridor between Sacramento and Chico, providing much-needed emergency care for travelers.

Orchard Hospital is certified for 24 general acute care beds (4 Monitored Beds and 20 Unspecified General Acute Care) and offers the following medical services.

Orchard Hospital Services
Cardiology
Social Services
Emergency Services
Inpatient/ Outpatient Surgery
Imaging Services
Respiratory Care
Cardiopulmonary
Laboratory
Physical Therapy
Senior Life Solutions
Clinic Services

Rural Health Clinic Services
Laboratory
Digital Radiology
DEXA Scanning
Digital Mammography
Ultrasound (General & Cardiac)
Physicals
Workers Comp
Industrial Medicine
Drug Screening
Psychotherapy
Physical Therapy
Internal Medicine

Purpose and Overview of the Community Health Needs Assessment

Under the Affordable Care Act, hospitals throughout the country are required to conduct a Community Health Needs Assessment (CHNA) every three years.

The primary purpose of conducting a CHNA is to objectively look at the current health needs of a community, as well as the existing resources available to address those needs, then prioritize the unmet health needs and create an action plan to address them in the coming years.

Using the community feedback and health data gathered, the resulting response and action plan will help shape programs over the next three years

Report Adoption, Availability and Comments

This CHNA report was adopted by the Orchard Hospital Board of Trustees on December 27, 2022.

This report is widely available to the public on the hospital's website, www.orchardhospital.com. Written comments on this report can be submitted to jbunn@orchardhospital.com

2019 CHNA Response

In 2019, Orchard Hospital partnered with Butte County Public Health and the three other hospitals in our county to conduct a Community Health Needs Assessment. The outcome was an action plan that committed the focus of our community outreach efforts on three main areas affecting the health of our community:

- Access to Care
- Mental health and Substance Use Disorders

- Chronic Disease and Conditions
- Adverse Childhood Experiences and Childhood Maltreatment

Orchard Hospital committed to identifying opportunities to collaborate with community partners throughout the region to break down barriers associated with these pressing health and social needs, as well as providing the education and other tools members of our community need to be proactive in their health and lifestyle choices.

Action Plan and Results from 2019 Community Health Needs Assessment:

Access to Care – Response to Need

Community Health Events

Orchard Hospital participated in community health events throughout the surrounding areas to ensure high-risk and underserved individuals had access to health care and health education:

- Town Hall Meeting at Gridley High School – The Town Hall meeting was in collaboration with Si Se Puede and the Nicotine Action Alliance coalition, Gridley High School, Butte County Public Health and Northern Valley Catholic Social Service. This event provided education on flavored tobacco, cessation resources, health screening resources for tobacco-related health issues, student-run town hall presentation.
- Sports Registration Night at Gridley High School – Orchard Hospital partnered with Gridley High School to provide free athletic physicals to high school students.
- Orchard Hospital Teddy Bear Clinic – The annual Teddy Bear clinic partners Orchard Hospital with Cal-Fire, Butte County Sheriff’s Department, Gridley Police Department, and California Highway Patrol to educate and familiarize local children about emergency situations. The Teddy Bear clinic allows children to bring an “injured” stuffed animal to receive treatment from medical staff by starting at triage, radiology, X-ray and some cases visiting the surgical area designed just for the miniature teddy bear patient.

- Community Health Fair – Orchard Hospital partnered with the Gridley Lions Club to hold an annual Community Health Fair. This free event is offered to all ages and provides an opportunity to learn about many healthy lifestyle resources. A-1C testing for diabetes, blood glucose, blood pressure, free flu-vaccines, and free eye exams.
- Annual Flu & Covid Clinics – Orchard Hospital provides multiple Flu and Covid vaccine clinics annually throughout the community. Several clinics were in collaboration with Butte County Public Health and the local schools.
- Covid-19 Testing Clinics – Orchard Hospital provided ongoing Covid-19 testing for the community.

Mental Health and Substance Use – Response to Need

Orchard Hospital offered easy access at the hospital and clinic for safe disposal of medications and syringes.

Orchard Hospital implemented a program called Senior Life Solutions which provides assistance to individuals suffering from one or more of the following: crying, hopelessness, loneliness, restlessness, sadness, coping with loss, decreased energy, difficulty sleeping, low self-confidence and life transitions. We will continue to grow this program and offer another track.

Orchard Hospital will continue collaborating, partnering with and supporting other programs and organizations to extend our reach and impact in high needs areas, including, but not limited to:

- Butte County Behavioral Health
- Butte County Drug Abuse Prevention Task Force
- Butte County Tobacco Prevention Coalition
 - Smoking Cessation
- Orchard Hospital Senior Life Solutions
- Offering counseling for Mental Health

Chronic Disease and Conditions – Response to Need

Orchard Hospital recruited and retained a physician specializing in internal medicine and recruited and retained a Chiropractor. Orchard Hospital participated in the local annual Farmer’s Market to promote healthy diet and educate the community on chronic conditions. Orchard Hospital implemented a patient portal that offers health records on Apple products like an iPhone, iPad, Apple Watch and iPod touch. With the health app, health records are available and easily assessable to patients.

Adverse Childhood Experiences and Child Maltreatment – Response to Need

Add the sports physical night in here to add mental health screening and at clinic. Personal Safety screening

Prioritization Process

Significant 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). To determine size or seriousness of the problem, the health need indicators that were identified in the secondary data were measured against benchmark data; specifically, county rates, state rates and/or Healthy People objectives. Indicators related to the health needs that performed poorly against one or more of these benchmarks met this criterion to be considered a health need.

The list of significant health needs 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. Community focus groups and stakeholder interviews were used to gather input and prioritize the significant health needs.

Top priorities identified in partnership with our communities:

Significant needs were identified through a review of the secondary health data and validation through community stakeholder surveys. The significant needs identified are as follows:

- Access to Care
- Mental Health Issues
- Substance Use Disorders
- Chronic Diseases (Diabetes, Aging problems, Heart disease, Lung Disease, Stroke)
- Low crime/safe neighborhoods
- Adverse Childhood Experiences and Childhood Maltreatment
- Overweight & obesity

From 2023-2025, Orchard Hospital will address the following health needs through a commitment of community programs and resources.

Orchard Hospital's CHNA Oversight team:

Julie A. Bunn, Foundation, Grants and Community Outreach Coordinator

Stephanie Orozco, Marketing and Social Media Coordinator

Kami Duntsch, Chief Human Resource Officer

Kirsten Storne-Piazza, Chief Clinic Administrator

Service Area

Orchard Hospital is located at 240 Spruce St., Gridley, CA 95948. The service area includes five communities consisting of 5 ZIP Codes in Butte County.

Orchard Hospital Service Area	
Zip Code	City
95948	Gridley
95917	Biggs
95974	Richvale
95965	Oroville
95966	Oroville
95953	Live Oak

Community Profile

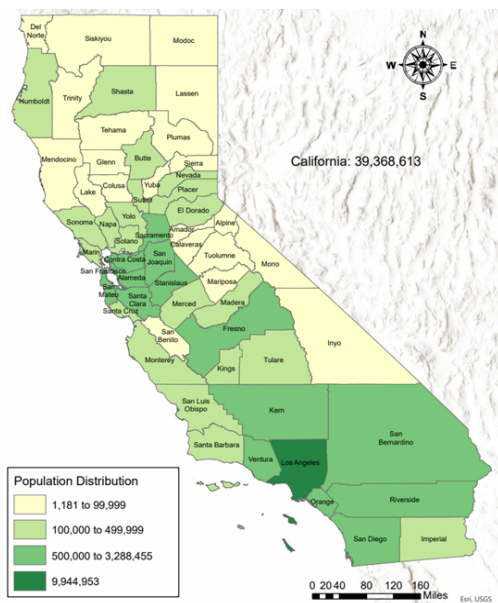


Figure 1: Population distribution

Source: State of California, Department of Finance, E-2. California County Population Estimates and Components of Change by Year, July 1, 2021.

Butte County is in the Northern portion of the Sacramento Valley Region of North Central California and encompasses approximately 1,677 square miles, of which 1,636.5 square miles are land and 41 square miles are water. According to the 2021 California Department of Finance County Population State and County Population Estimates, California's population is 39,368,613, and Butte County is ranked the 28th largest county with a population of 201,158 (see Figure 1).

Primary Data Collection

Orchard Hospital conducted a survey in order obtain an estimate of the prevalence of behaviors and conditions in Butte County.

The full report and summary table of risk factors data from the 2022 Survey can be found in the Appendix.

Secondary Data Collection

Orchard Hospital staff spoke with representatives from Public Health, law enforcement agencies, neighboring hospitals, and clinic systems in order to gather insight and feedback for the Community Health Needs Assessment.

Participants were asked to share their professional and personal thoughts and experiences regarding access to health care, obstacles and barriers to quality health care and ability to live healthy lives.

The results of this feedback are included in the Executive Summary and assisted in the development of the Action Plan.

2022 Executive Summary

The results of were reviewed for their degree of commonality. Secondary health metric data was made to align with health survey and qualitative focus group data, such that those health factors with the greatest alignment became evident. The health factors most substantially implicated that emerged through this process are:

- Access to Care
- Mental Health Issues
- Substance Use Disorders
- Chronic Diseases (Diabetes, Aging problems, Heart disease, Lung Disease, Stroke)

Access to Care: Access to health services is a leading health indicator (LHI) for the Healthy People 2020 (HP-2020) national health objectives. A person's ability to access health services profoundly affects their health and well-being. Having a usual Primary Care Provider (PCP) is associated with: greater patient trust in the provider; better patient-provider communication; increased likelihood that patients will receive appropriate care; and lower mortality from all causes[i]. Access to mental health and oral health care are also both important, as both mental health conditions and oral health correlate strongly with physical health and well-being.

Access to Care | Primary Care Shortage: The Health Resources & Services Administration (HRSA) has determined that there are Primary Care Shortage Areas, Dental Care Shortage Areas, and Mental Health Shortage Areas in Butte County. While only parts of the county meet Primary Care Shortage and Dental Care Shortage Area criteria, the entire county meets Mental Health Shortage Area criteria. Population to provider ratios also demonstrate that Butte County has fewer Primary Care Physicians and Dental Care Providers per capita than the state overall; however, Butte County does have more Non-Physician Primary Care Providers (e.g. Physician’s Assistants, Nurse Practitioners) and Mental Health Care providers per population than the state overall.

Table – Access 1: Population to Provider Ratios: Butte County and California, 2017 & 2021.				
	Butte County		California	
	2017	2021	2017	2021
Primary Care Physician	1,570:1	1,650:1	1,280:1	1,250:1
Dental Care	1,440:1	1,340:1	1,250:1	1,150:1
Mental Health Care	190:1	140:1	350:1	270:1
Uninsured	13%	8%	14%	8%
Mammography Screening	60%	40%	60%	36%

Source: 2017 and 2021 Area Health Resource Data File via County Health Rankings. Retrieved From: <http://www.countyhealthrankings.org/california/buttecounty>

Access to Care | Preventative Practices: Preventive health practices are those that prevent illnesses or diseases, such as screenings and immunizations, or patient counseling to prevent illness[i]. Examples include standard immunizations; and screenings for blood pressure, cancer, cholesterol, depression, obesity, and Type 2 diabetes[ii]. In recent years, several vaccine-preventable diseases once on the verge of eradication, such as measles, have reemerged in the United States, with outbreaks

occurring throughout California, including Butte County. Likewise, sexually transmitted infections (STIs) once thought to be declining or close to eradication, such as syphilis, have shown increasing rates nationally. Many STIs are treatable, but if undetected, may continue to be transmitted; and many more are preventable through education and patient counseling.

The percentage of students having all required immunizations for enrollment into Butte County schools is slightly below the percentage of students statewide (93% vs. 96%), with more conditional entrants – students with some but not all required immunizations – attending Butte County schools than California schools overall (3.1% vs. 1.7%).

According to the BRFS, 47.8% of Butte County respondents over the age of 65 have not had a flu shot in the past 12 months; and 29% had not received the pneumococcal vaccine, which was also greater than the percentage statewide (23.2%). Likewise, 73.2% of Butte County respondents age 50 or older have not been vaccinated against shingles, which was slightly greater than the percentage of respondent’s state and nationwide (68.9% and 71.4%, respectively).

Rates of STIs (chlamydia, gonorrhea, and syphilis) were lower in Butte County than the state, except for syphilis. According to the California Department of Public Health, STD Control Branch 2018 Surveillance Report, in Butte County, rates of primary and secondary syphilis increased by 35.6 cases per 100,000 persons. Chlamydia was 579.4 cases per 100,000 persons and gonorrhea was 186.1 cases per 100,000 persons.

Pertaining to preventative practices for adult smoking, adult obesity, physical inactivity, excessive alcohol drinking, alcohol-impaired deaths, and teen births were all up in Butte County from 2017 to 2021 except teen births and alcohol-impaired driving deaths.

Table – Access 2: Population to Provider Ratios: Butte County and California, 2017 & 2021.

	Butte County		California	
	2017	2021	2017	2021
Adult Smoking	15%	17%	12%	11%

Adult Obesity	26%	23%	30%	24%
Physical Inactivity	19%	17%	23%	18%
Excessive Alcohol Drinking	21%	18%	22%	18%
Alcohol-Impaired Deaths	35%	29%	32%	29%
Teen Births	24	29	16	17

Mental Health and Substance Use Disorders: Like access to care, mental health is a LHI for the HP-2020 objectives. Mental health and physical health are inextricably linked. Evidence has shown that mental health disorders—most often depression—are strongly associated with the risk, occurrence, management, progression, and outcome of serious chronic diseases and health conditions, including diabetes, hypertension, stroke, heart disease, and cancer[i]. Suicide is the tenth leading cause of death in the nation, and the national suicide rate increased by 19.5% between 2007 and 2016.

Mental Health and Substance Use Disorders | Suicide and Depressive Disorders: Suicide rates also tend to be higher in rural areas than in urban settings. Of significant concern, the suicide rate per capita in Butte County is elevated to nearly twice that of California overall (18.1 vs. 10.4 per 100,000 population); and likewise elevated above the HP-2020 objective (10.2). This is especially alarming when viewed in the context of Butte County’s co-occurring elevated metrics for drug induced deaths and excessive alcohol use; as nationally drug induced and alcohol related deaths in combination with suicide, collectively referred to as deaths of despair, have resulted in decreasing life expectancy in the United States since 2015. Rates of depressive disorders, a strong risk factor for suicide, also appear to be elevated in Butte County. Twenty-seven percent of BRFSS respondents in Butte County indicated having been diagnosed with a depressive disorder, compared to 17% statewide, and 20% nationwide. Focus groups also overwhelmingly felt mental health was a top community health priority in Butte County, with 69% of total focus group participants ranking mental health as a very important community health priority area. The finding that all of Butte County meets HRSA Mental

Health Professional Shortage Area criteria highlights a disparity between the populations need for mental health services and the current capacity of the county's healthcare delivery system to meet this demand.

Mental Health and Substance Use Disorders | Opioid Use and Excessive Drinking:

Substance use disorders are defined as both mental health disorders and chronic diseases. The American Society of Addiction Medicine defines addiction as “a primary, chronic disease of brain reward, motivation, memory and related circuitry”. The development of substance use disorders are often preceded by substance misuse, such as taking an opioid medication other than how it was prescribed before meeting criteria for opioid use disorder, or escalating episodes of excessive alcohol consumption before meeting criteria for alcohol use disorder. Across focus groups, 50% of the 88 total participants indicated substance misuse and substance use disorders to be a top community health concern.

The ongoing opioid epidemic continues to be the leading driver of drug-induced deaths nationally. In Butte County, the age-adjusted drug-induced death rate continues to be significantly elevated compared to the statewide rate (30.2 vs. 12.2), with Butte County holding the 5th highest rate out of California's 58 counties. In 2017, mortality attributed exclusively to opioids (e.g. no other class of substances detected) in Butte County was 7.6 per 100,000 population compared with a statewide rate of 5.23; and the rate of hospitalizations for opioid overdose were the highest of all California counties, with 40.3 hospitalizations due to opioids other than heroin per 100,000 population compared to 7.75 statewide; and a rate of 9.95 hospitalizations due to heroin compared to 1.78 statewide. Also, of significant concern is that according to the California Healthy Kids Survey (CHKS), 21% percent of Butte County 11th grade students have used prescription drugs recreationally, compared with 16% of 11th grade students statewide.

Excessive alcohol consumption—which includes binge drinking (4 or more drinks for women and 5 or more drinks for men within about 2 hours); heavy drinking (8 or more drinks a week for women and 15 or more drinks a week for men); and any drinking by pregnant women or those under 21 years of age, is responsible for 88,000 deaths in the United States each year. These include 1 in 10 deaths among working age adults (age

20-64 years), and in 2010, the estimated economic cost to the United States of excessive drinking was \$249 billion. Binge drinking accounts for over half of the deaths and three-fourths of the economic costs due to excessive drinking. The most recently available data from the CDPH Safe and Active Communities Branch demonstrates that in Butte County, rates of emergency department treatment, non-fatal hospital admissions, and deaths due to alcohol were all considerably higher than statewide rates (1011.1 vs. 763.8 per 100,000; 306.6 vs. 143.4; and 16.2 vs. 11.9, respectively). Likewise, 42.5% of adult CHIS respondents in Butte County reported binge drinking, relative to 34.7% statewide. This discrepancy was further supported by the results of the BRFSS, with 22.1% of Butte County respondents reporting binge drinking compared with 17.6% of respondents statewide. A similarly concerning trend among adolescents was demonstrated by the CHKS, with 20% percent of Butte County 11th grade students reporting binge drinking, compared with 11% of 11th grade students statewide.

Chronic Disease and Conditions: Chronic diseases and conditions such as heart disease, cancer, and diabetes are the leading causes of death and disability in the United States, accounting for 7 out of 10 deaths annually. They are also leading drivers of the nation's \$3.3 trillion in annual health care costs, with 90% of healthcare dollars spent in the United States attributed to the treatment of people with chronic physical and mental health conditions[ii]. In Butte County, like the nation and the state, many of the leading causes of death are chronic conditions including heart disease and stroke, cancers, Alzheimer's disease, chronic lower respiratory disease, chronic liver disease, and diabetes. While the mortality rate was only higher for Butte County than the statewide and national rates for some chronic diseases and conditions (cancer, Alzheimer's disease, chronic lower respiratory disease, and chronic liver disease), (See Table X1); all chronic conditions result in substantial portions of health care spending in Butte County. A 2015 study estimated that over 51% of the \$1.4 Billion total annual healthcare expenditures in Butte County could be attributed to six chronic conditions (arthritis, asthma, cardiovascular disease, diabetes, cancer, and depression), while 42.% of total statewide healthcare expenditures could be attributed to these conditions (see Table X2). Forty-eight percent of total focus group participants in Butte County indicated chronic disease and conditions to be a significant community health concern, and 45.5% indicated

overweight/obesity, a predictive factor for many chronic diseases, to likewise be a top health concern. While most chronic conditions are of significant concern in Butte County, some emerged with greater emphasis including cancer, Alzheimer's disease, asthma, chronic lower respiratory disease, and chronic liver disease.

Chronic Disease and Conditions | Cancer: The age-adjusted death rate for cancer was significantly higher in Butte County than the statewide rate, with 162.2 and 140.2 deaths per 100,000 population, respectively. The five-year incidence rate for cancer from 2011 – 2015 was also elevated relative to the state rate at 452.4 and 395.2 cases per 100,000 population, respectively. These trends generally held for most forms of cancer, including lung, female breast, and colorectal cancers. The BRFs also indicated higher rates of cancer, with 8.4% of Butte County respondents reporting having ever been diagnosed with cancer (other than skin cancer), compared with 5.9% of survey respondents statewide.

Chronic Disease and Conditions | Alzheimer's Disease: The age-adjusted death rate for Alzheimer's disease was also significantly higher in Butte County than the statewide rate, with 51.1 and 34.2 deaths per 100,000 population, respectively.

Chronic Disease and Conditions | Asthma: In Butte County 9.7% of Medicare beneficiaries have been diagnosed with asthma, which is higher than the percentage of Medicare beneficiaries diagnosed statewide (7.5%). Results of the CHIS also demonstrate that slightly more adults in Butte County have been diagnosed with asthma than adults statewide (15.0% vs. 14.5%); while 18.3% of Butte County BRFs respondents indicated having ever been diagnosed with asthma, relative to 14.1% of statewide respondents; and 11.8% of Butte County respondents reported currently having asthma relative to 7.9% of statewide respondents.

Chronic Disease and Conditions | Chronic Lower Respiratory Disease: The age-adjusted death rate for chronic lower respiratory disease was significantly higher in Butte County than the statewide rate, with 45.8 and 32.1 deaths per 100,000 population, respectively. The BRFs also indicated higher rates of chronic obstructive pulmonary disease (COPD) – a type of chronic lower respiratory disease, with 7.1% of Butte County

respondents reporting having ever been diagnosed with COPD, compared with 4.5% of survey respondents statewide.

Chronic Disease and Conditions | Chronic Liver Disease: The age-adjusted death rate for chronic liver disease was significantly higher in Butte County than the statewide rate, with 18.4 and 12.2 deaths per 100,000 population, respectively.

Table X-2: Mortality Rates for Chronic Diseases and Conditions				
Age-adjusted death per 100,000	Butte County	California	HP-2020	Rank out of 58 CA
All Causes	765.3	608.5	a	46
All Cancers	162.2	140.2	161.4	49
- Lung Cancer	37.7	28.9	45.5	49
- Female Breast Cancer	21.2	19.1	20.7	46
- Prostate Cancer	19.4	19.6	21.8	24
- Colorectal Cancer	15.7	12.8	14.5	54
Coronary Heart Disease	85.8	89.1	103.4	28
Alzheimer's Disease	51.1	34.2	a	55
Chronic Lower Respiratory Disease	45.8	32.1	a	42
Cerebrovascular Disease (Stroke)	39.3	35.3	34.8	39
Diabetes	18.9	20.7	b	26
Chronic Liver Disease & Cirrhosis	18.4	12.2	8.2	45

Adapted from: California Health Status Profiles, 2018. Available at:
<https://www.cdph.ca.gov/Programs/CHSI/Pages/County-Health-Status-Profi.aspx#pasteds>

Table X-3: Healthcare costs with six chronic conditions			
Healthcare costs	Total healthcare	Total cost of six chronic	Percent of total

	costs		conditions		healthcare costs due to six conditions	
Butte County	\$1,372,360,000		\$625,045,759		50.8%	
California	\$232,390,177,528		\$98,443,138,663		42.4%	
Percent of total healthcare costs	Arthritis	Asthma	Cardiovascular disease	Diabetes	Cancer	Depression
Butte County	7.78%	4.55%	19.99%	5.27%	7.95%	5.26%
California	6.16%	4.06%	16.13%	5.59%	6.01%	4.41%

Adapted from: Brown, P.M., et al. (2015). Economic Burden of Chronic Disease in California 2015. CA Department of Public Health. Sacramento, California: <http://healthpolicy.ucla.edu/publications/search/pages/detail.aspx?PubID=1600>

Chronic Disease and Conditions | Other Notable Chronic Condition: Butte County had a slightly higher age adjusted death rate than the statewide rate for stroke (39.3 vs. 35.3 per 100,000 population). Likewise, a slightly higher percentage of Butte County BRFs respondents (3.3%) reported having ever had a stroke than statewide respondents (2.2%). Approximately one-third (32.2%) of Butte County respondents also reported having high blood pressure, which was slightly higher than for statewide respondents (28.4%). A 2016 UCLA Center for Health Policy Research study estimated the percent of adults in Butte County that are pre-diabetic (43%) was slightly lower than the statewide estimate (46%), and a lower percentage Butte County CHIS respondent reported being diagnosed with diabetes than statewide respondents (7.4% vs. 9.3%). This discrepancy was also found in BRFs results (7.0% vs. 10.5%); however, a slightly higher percentage of CHIS respondents age 65 and over from Butte County were diagnosed with diabetes than the percent of respondents statewide (23.5% vs. 21.4%). Major risk factors for the development of chronic conditions and premature death include being overweight/obese and smoking tobacco products. While the percent of adult CHIS respondents that reported being overweight or obese was marginally lower in Butte County than statewide (60.3% vs. 61.5%), the percent of Butte County BRFs respondents that indicated having no physical activity in the past 30 days was higher than the percent of statewide respondents (28.5% vs. 20.0%); and significantly more Butte County respondents indicated being current smokers than statewide respondents (20.6%

vs.11.3%).

Conclusion and Action Plan

Once the health needs were prioritized by the Orchard Hospital Administration team and Board of trustees, the final step in the CHNA process was to develop an implementation strategy. The purpose of the implementation strategy is to develop a clear set of goals to respond to the priorities identified. This strategy will include a written plan that addresses each of the community health needs identified through the CHNA, describe how the hospital plans to meet the health needs, and identify health needs the hospital does not intend to meet and why.

The following implementation strategy components within each priority were addressed:

1. Objectives/Strategy
2. How
3. Programs/Resources to Commit
4. Impact of Programs/Resources on Health Need
5. Accountable Parties
6. Partnerships/Collaboration

The detailed implementation strategy for each priority can be found in Appendix 6. In summary, the following priorities were addressed through the implementation strategy:

- Access to Care
- Mental Health and Substance Use Disorders
- Chronic Disease and Conditions

The implementation strategy detail for each priority is located in Appendix ___ and provides supporting tactics, programs/resources, accountable parties, and potential partnerships/collaboration.

Supporting Documents

Community Engagement Community Health Needs Assessment Survey

Community Engagement- Survey



Please take a moment to complete the survey below. The purpose of this survey is to seek your input regarding community health problems in south Butte County. Orchard Hospital will use the results of this survey to identify and take action of community needs.

1. Where do you go for routine healthcare?
 Primary care physician
 Urgent Care
 ER
 Other
 None
2. Are there issues that prevent you from accessing healthcare?
 Language barriers
 Don't know how to find doctors
 No insurance
 Other barriers
 No barriers
3. In the following list, what do you think are the three most important factors for a "Healthy Community?"
Check only three:
 Good place to raise children
 Low crime / safe neighborhoods
 Low level of child abuse
 Good schools
 Access to health care (e.g., family doctor)
 Parks and recreation
 Arts and cultural events
 Good jobs and healthy economy
 Strong family life
 Healthy behaviors and lifestyles
 Low death and disease rates
 Religious or spiritual values
 Other _____
4. In the following list, what do you think are the three most important "health problems" in our community? (Those problems which have the greatest impact on overall community health.)
Check only three:
 Aging problems
 Cancer
 Child abuse / neglect
 Dental problems
 Diabetes
 Domestic Violence
 Firearm related injuries
 Motor vehicle crash injuries
 Respiratory / lung disease
 Suicide
 Heart disease and stroke
 High blood pressure
 HIV / AIDS
 Homicide
 Death
 Infectious Diseases (e.g., Hepatitis, TB, etc.)
 Mental health issues
 Rape / sexual assault
 Other _____

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5. In the following list, what do you think are the three most important "risky behaviors" in our community? (Those behaviors which have the greatest impact on overall community health.)

Check only three:

- | | |
|---|--|
| <input type="checkbox"/> Alcohol abuse | <input type="checkbox"/> Tobacco use |
| <input type="checkbox"/> Being overweight | <input type="checkbox"/> Not using birth control |
| <input type="checkbox"/> Dropping out of school | <input type="checkbox"/> Not using seat belts / child safety seats |
| <input type="checkbox"/> Drug abuse | <input type="checkbox"/> Unsafe sex |
| <input type="checkbox"/> Lack of exercise | <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> Poor eating habits | |
| <input type="checkbox"/> Not getting "shots" to prevent disease | |

6. How would you rate our community as a "Healthy Community?"

Very unhealthy Unhealthy Somewhat healthy Healthy Very healthy

7. How would you rate your own personal health?

Very unhealthy Unhealthy Somewhat healthy Healthy Very healthy

8. Approximately how many hours per month do you volunteer your time to community service?

None 1 - 5 hours 6 - 10 hours Over 10 hours

9. Zip code where you live: _____

10. Age:

- 25 or younger
 26-39
 40-54
 55-64
 65 or over

11. Sex: Male Female Non Binary Other: _____

12. Ethnic group you most identify with:

- | | |
|---|--|
| <input type="checkbox"/> African American / Black | <input type="checkbox"/> Native American |
| <input type="checkbox"/> Asian / Pacific Islander | <input type="checkbox"/> White / Caucasian |
| <input type="checkbox"/> Hispanic / Latino | <input type="checkbox"/> Other _____ |

13. Marital Status:

- Married / co-habiting
 Not married / Single

14. Education:

- | | |
|--|---|
| <input type="checkbox"/> Some high school | <input type="checkbox"/> College degree or higher |
| <input type="checkbox"/> High school diploma
or GED | <input type="checkbox"/> Other _____ |

15. Household income

- Less than \$25,000
 \$25,000 to \$49,999
 \$50,000 to \$74,999
 Over \$75,000

16. How do you pay for your health care? (check all that apply)

- | | |
|---|--|
| <input type="checkbox"/> Pay cash (no insurance) | <input type="checkbox"/> Medicare |
| <input type="checkbox"/> Private Health insurance | <input type="checkbox"/> Veterans Administration |
| <input type="checkbox"/> Medi-cal | <input type="checkbox"/> Indian Health Services |
| <input type="checkbox"/> Other _____ | |

17. Where / how you got this survey: (check one)

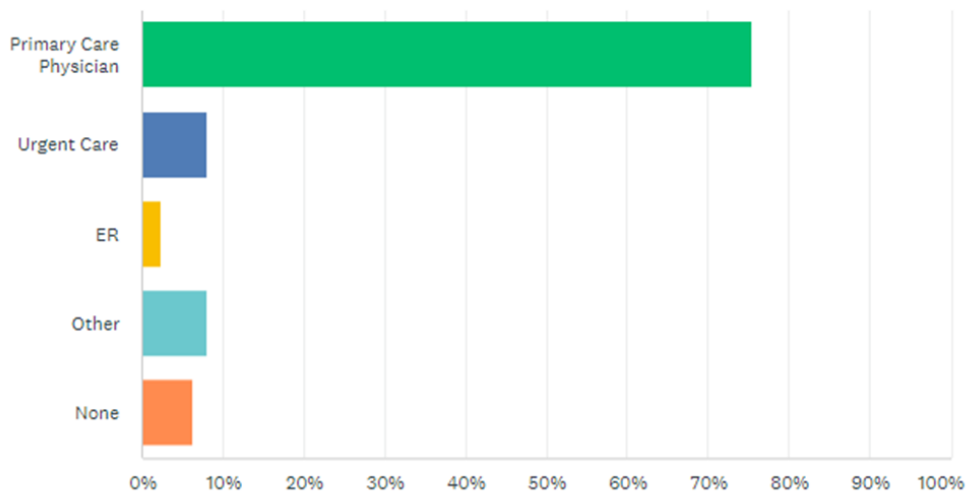
- | | |
|--|---|
| <input type="checkbox"/> Church | <input type="checkbox"/> Newspaper |
| <input type="checkbox"/> Community Meeting | <input type="checkbox"/> Newsletter |
| <input type="checkbox"/> Grocery Store / Shopping Mall | <input type="checkbox"/> Personal Contact |
| <input type="checkbox"/> Mail | <input type="checkbox"/> Workplace |
| <input type="checkbox"/> Other _____ | |

Supporting Documents

Community Health Needs Assessment
Survey Answers

Where do you go for routine healthcare?

Answered: 288 Skipped: 2

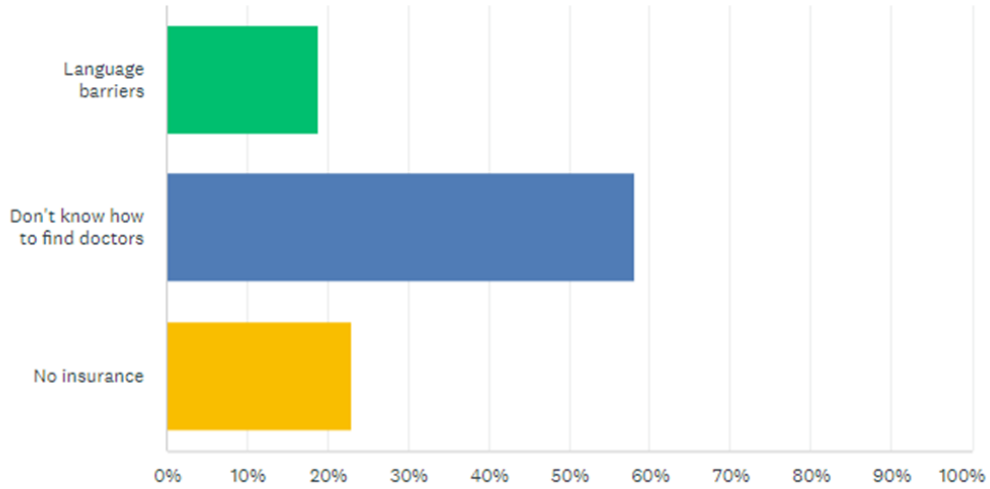


Orchard Hospital Survey - Community Health Needs



Are there issues that prevent you from accessing healthcare?

Answered: 74 Skipped: 216

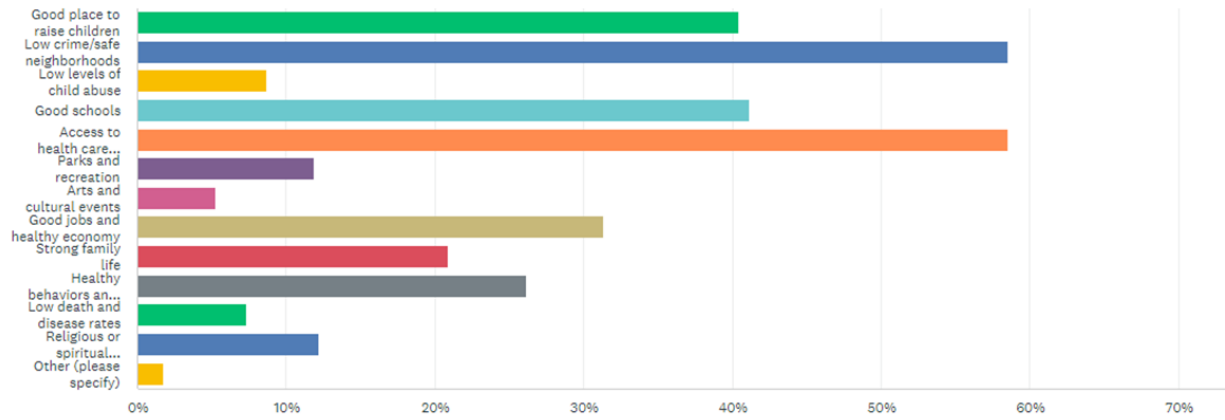


Orchard Hospital Survey - Community Health Needs



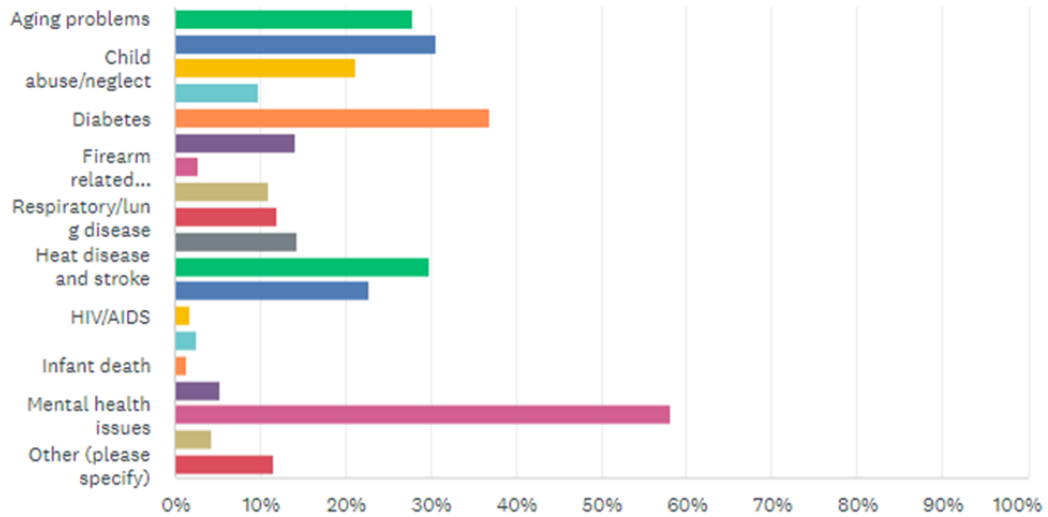
In the following list, what do you think are the three most important factors for a "Healthy Community?" (check only three)

Answered: 287 Skipped: 3



In the following list, what do you think are the three most important "...

Answered: 284 Skipped: 6

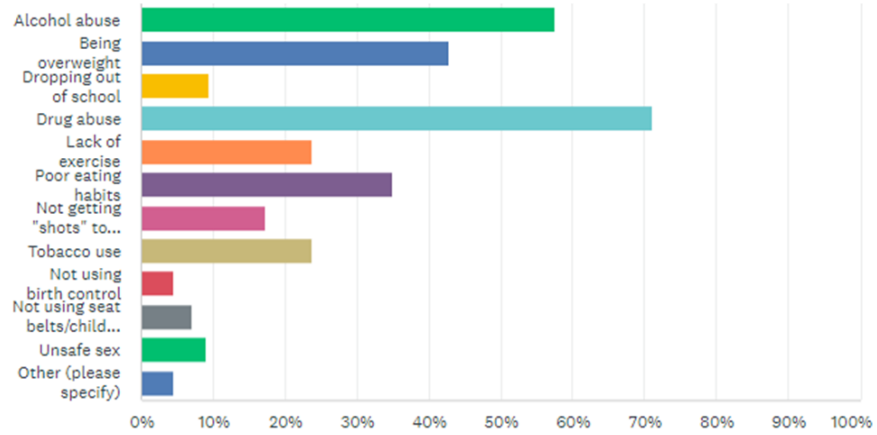


Orchard Hospital Survey - Community Health Needs

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In the following list, what do you think are the three most important "...

Answered: 266 Skipped: 24

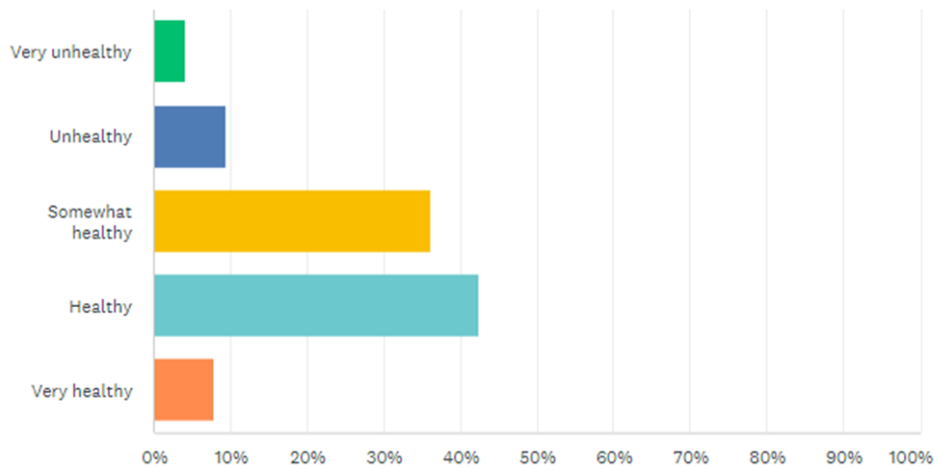


Orchard Hospital Survey - Community Health Needs

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How would you rate your own personal health?

Answered: 266 Skipped: 24

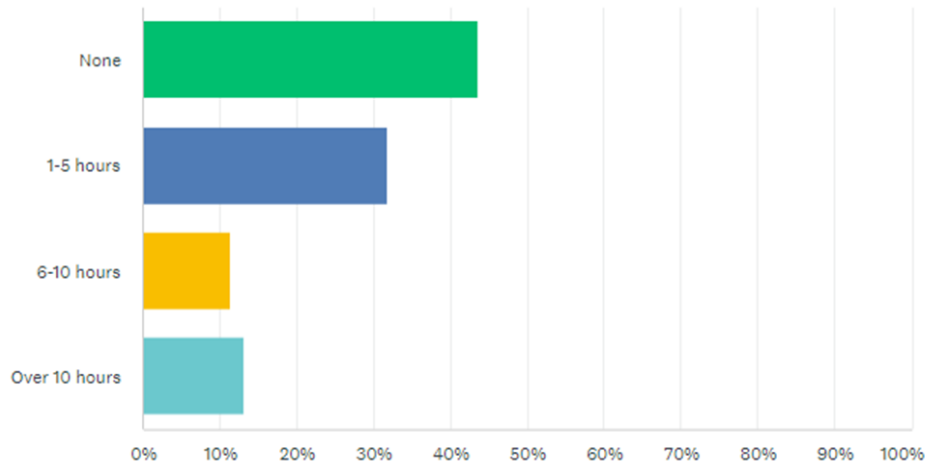


Orchard Hospital Survey - Community Health Needs

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Approximately how many hours per month do you volunteer your tim...

Answered: 264 Skipped: 26



Orchard Hospital Survey - Community Health Needs



What is the zip code where you live?

Answered: 250 Skipped: 40

95966

95948

95917

95966

95966

95965

95966

95966

95965

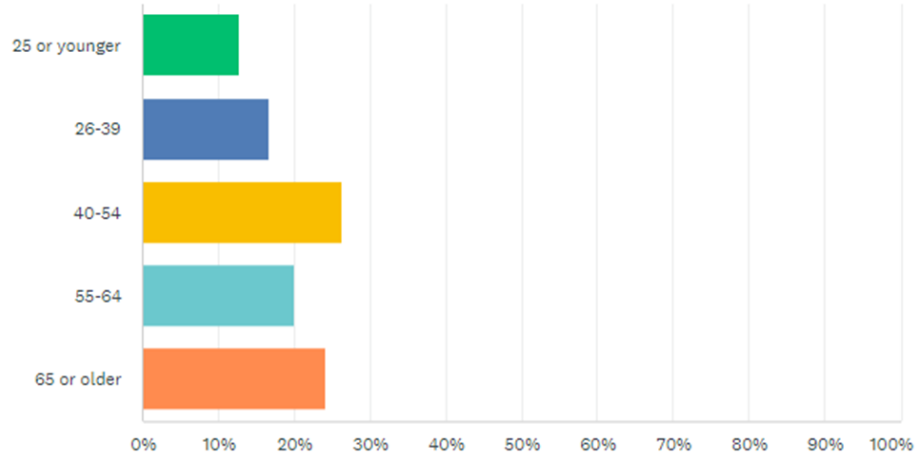
95966

Orchard Hospital Survey - Community Health Needs



How old are you?

Answered: 265 Skipped: 25

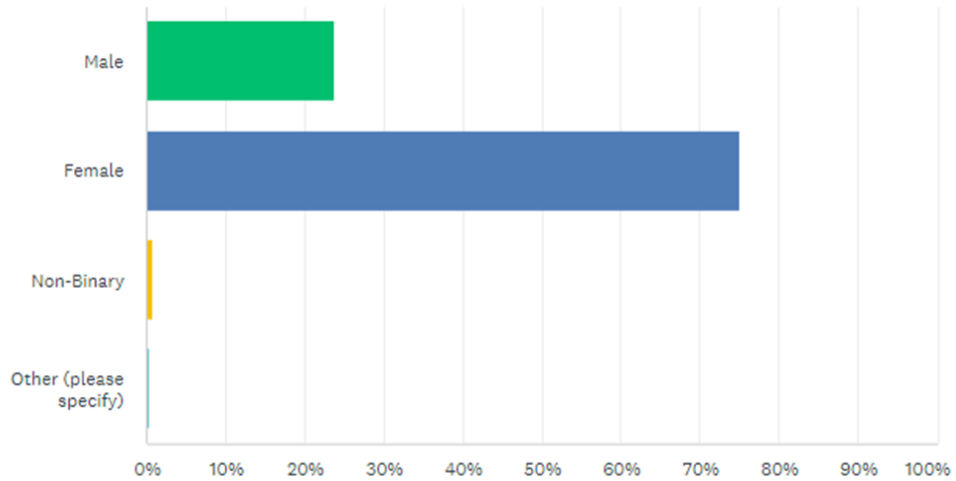


Orchard Hospital Survey - Community Health Needs

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What is your gender?

Answered: 232 Skipped: 58

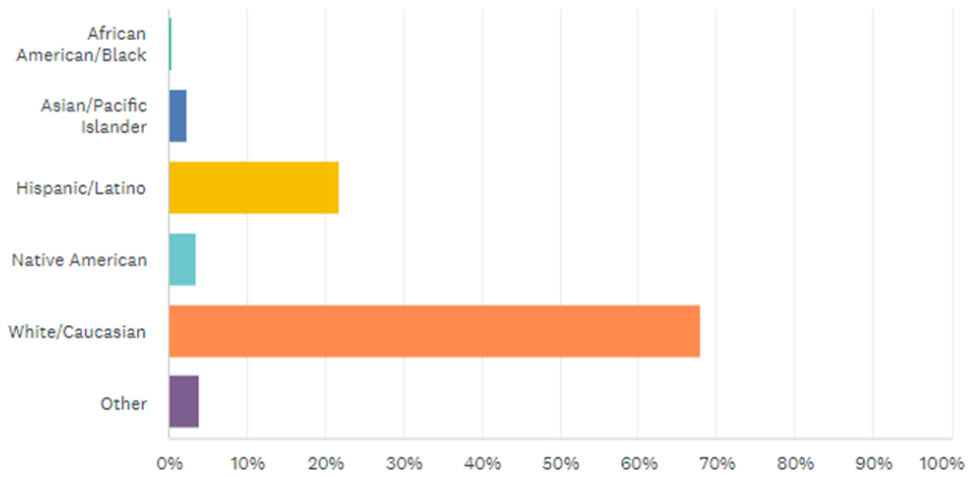


Orchard Hospital Survey - Community Health Needs

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What ethnic group do you most identify with?

Answered: 253 Skipped: 37

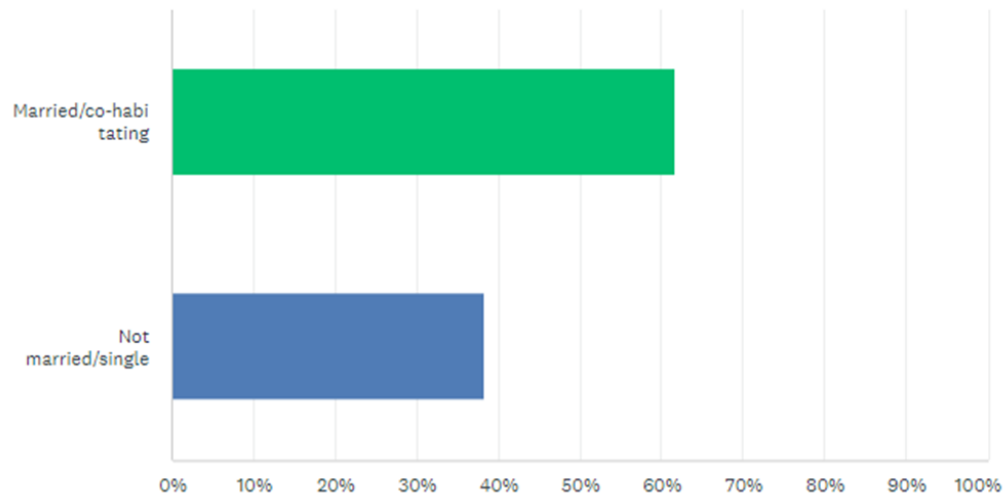


Orchard Hospital Survey - Community Health Needs



What is your marital status?

Answered: 259 Skipped: 31

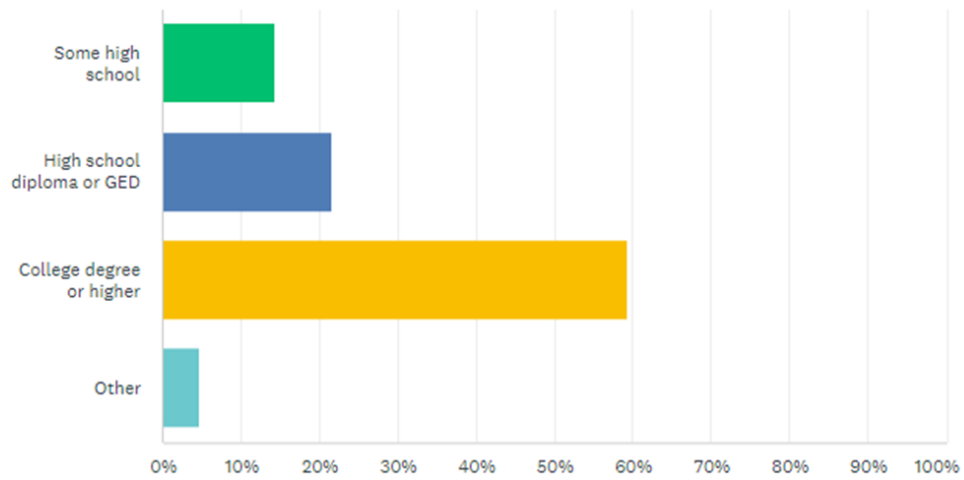


Orchard Hospital Survey - Community Health Needs



What is your highest level of completed education?

Answered: 231 Skipped: 59

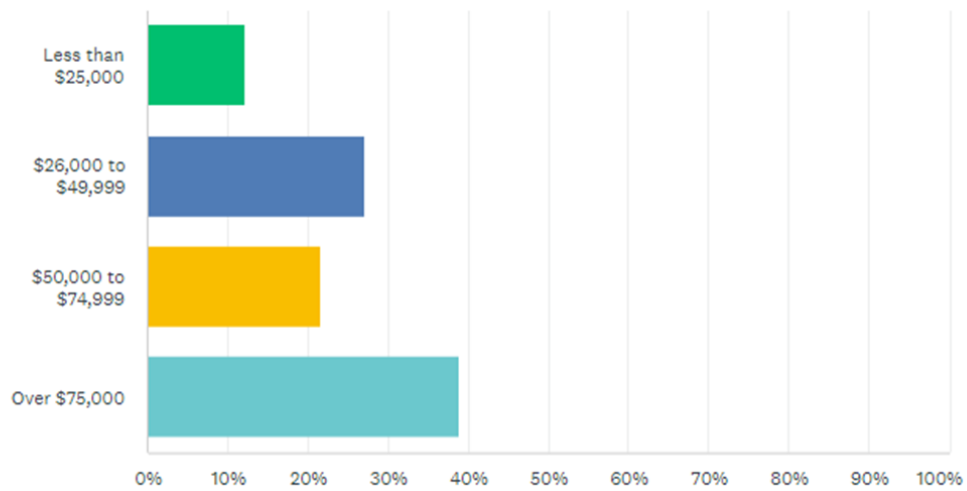


Orchard Hospital Survey - Community Health Needs



What is your annual household income?

Answered: 254 Skipped: 36

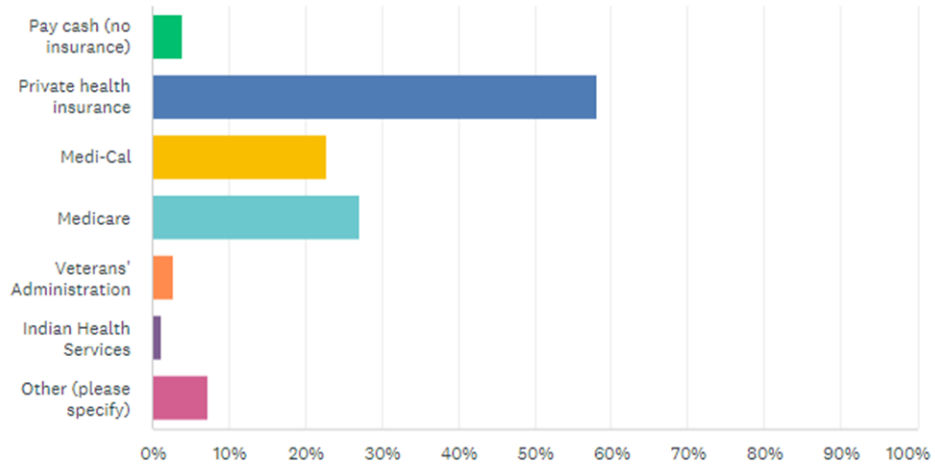


Orchard Hospital Survey - Community Health Needs



How do you pay for your healthcare? Check all that apply

Answered: 251 Skipped: 39

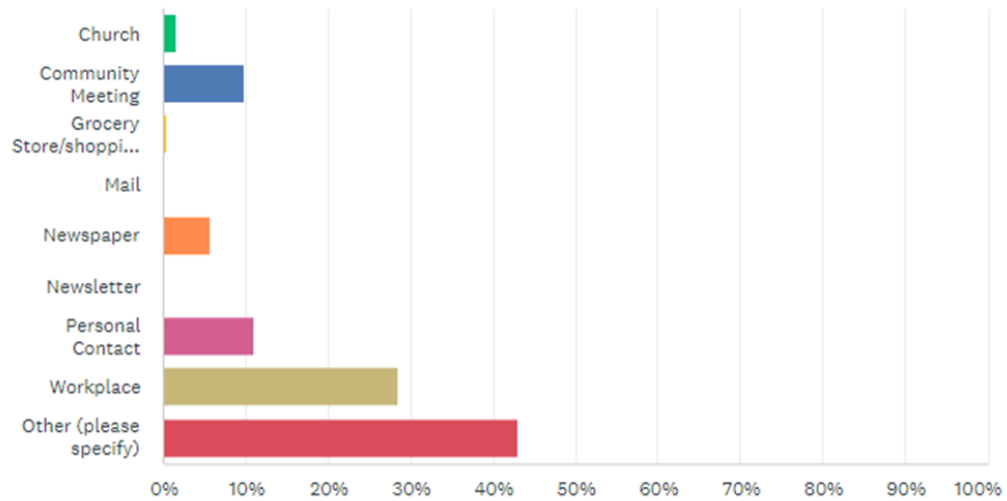


Orchard Hospital Survey - Community Health Needs

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Where/how did you get this survey? Check one

Answered: 263 Skipped: 27



Orchard Hospital Survey - Community Health Needs

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Supporting Documents

Press Releases and Media Coverage



Orchard Hospital Health Needs Survey

We need your help!

Results impact
decisions that
affect your health!



Appendix: 1

Implementation Plan 2022

Table of Contents:

- Access to Care
- Mental Health and Substance Use Disorders
- Chronic Disease and Conditions

Priority: Access to Health Care

Objective/Strategy

The lack of providers and not knowing how to find doctors in Butte County was the dominant theme reflected from responses to the survey. Improving access to healthcare was not just a matter of making it more affordable it is about the services and making them available in our area. Improving access to healthcare is the main focus of Orchard Hospital. Orchard Hospital will continue to offer Specialties and enhance our current service lines to help eliminate those needing to leave the area for healthcare.

How:

Improving access to healthcare services helps to ensure that patients have a usual and ongoing source of care (that is, a provider or facility where one regularly receives care). Patients with a usual source of care have better health outcomes, fewer disparities, and lower costs. We plan on improving this by:

- Improve access to healthcare by expanding care and services in Butte County.
 - Expand Services offered at the Gridley and Oroville Clinics
- Increase number of Providers at the Medical Specialty Centers
 - Hiring more providers with new specialty service lines
 - Providers that speak a second language
 - Increase number of Primary care providers (PCP)
 - Guiding patients to establish a PCP
- Timeliness:
 - Availability of appointments and care for illness or injury when it is needed
 - Time spent waiting in doctors' offices and emergency departments (EDs)
- Substance Use Navigator:
 - Offering Emergency Department and Inpatients access to Substance Use resources

- Free Flu and Covid-19 Vaccination clinics

- Collaborating with local health department to continue to offer Flu and Covid-19 Vaccinations

Priority: **Mental Health and Substance Use Disorders**

Objective/Strategy

Mental illness & Substance abuse ; including but not limited to alcohol, tobacco, illicit drugs and opioids, continue to rise toward the top of the pressing health needs facing Butte County residents. Orchard Hospital will continue to promote smoking cessation among young people and adults within our community in order to decrease the % of those who smoke or use smokeless tobacco. We will also continue to provide our community with a pain management provider, manage prescription pain medications, and provide mental health.

How

Upgrade website to include marketing of programs and services available throughout our community related to mental Health, Substance Use and the use of tobacco.

Communicate services offered at Orchard Hospital through existing and new community marketing. Orchard Hospital employees will be encouraged to participate.

- Implement best-practices for managing prescription pain medications
- Implement Substance Use Navigator program in the Emergency Department
- Provide Continuing Medical Education (CME) for Butte County prescribing providers regarding prescription opioid misuse and abuse.
- Implement Orchard Hospital Adolescent Services Center
- Continue to offer Mental Health Services:
 - Senior Life Solutions
 - Family Licensed Therapist
 - Emergency Room offers Tele-Med Psychiatry

Priority: Chronic Diseases

Objective/Strategy

Enhance care for Chronic Diseases including, but not limited to obesity and diabetes

How

- Communicate service offered through local Service Clubs, Schools, Churches, and at Orchard Hospital through existing and new community marketing.
- Utilize the website and social media outlets to include marketing of programs and services available throughout our community for childhood obesity.
- Continue education through the Health Ambassador Program
 - o GHS Nursing Pathway Students will be instructed on how to educate elementary students and junior high students on nutrition and fitness (play 60)
 - o Orchard Hospital will be able to reaching children ages 9-18 in our service area
 - o Educate on how to make healthy snacks and 60 min fitness activity.

Programs/Resources to Commit

Collaborate with local schools and partner with school nurses and the Center for Nutrition & Activity Promotion. Offer nutritional and fitness program to local schools utilizing the play 60 activities and help children and young adults learn how to move for 60 minutes.

Public Comment

In compliance with IRS regulations 501(r) for charitable hospitals, a hospital Community Health Needs Assessment (CHNA) and Implementation Strategy are to be made widely available to the public and public comment is to be solicited. The previous Community Health Needs Assessment and annual implementation strategies were made widely available to the public on the website www.OrchardHospital.com . To date, no comments have been received.