



Community Hospital
of the Monterey Peninsula
Montage Health

2023 COMMUNITY BENEFIT PLAN



APRIL 2024 Dedicated to identifying and meeting the changing healthcare needs of the people of the Monterey Peninsula and surrounding communities.

Prepared by:

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SECTION 1 Executive summary

For 90 years, Community Hospital of the Monterey Peninsula has been dedicated to caring for the community, from birth to end of life. Our doctors, staff, and volunteers provide a robust range of services and programs, including those that make up our community benefit efforts. Those activities are described in this community benefit plan for the fiscal year ending December 31, 2023. Community benefit services are free or subsidized programs and services provided to meet identified community health needs and to serve the public interest. The plan meets the requirements and reflects the spirit of California's community benefit legislation, SB 697, as well as IRS requirements. It documents organizational leadership, partnerships with other community organizations, and services to meet the health needs of at-risk populations in the community.

In keeping with SB 697, benefits are tracked in four community focus areas:

- Building healthy communities
- Health education and wellness
- Improving access to care
- Special care for special needs

Within that framework, Community Hospital sets priorities and goals to address specific health-related issues, relying on an extensive Community Health Needs Assessment (CHNA), done every three years. Based on that assessment and in alignment with the hospital's mission, goals, and strategic priorities, Community Hospital is focused on developing and/or supporting strategies and initiatives to address three areas identified as having greatest need:

- Access to health services
- Diabetes
- Mental health

To help address specific needs in those areas and in the broader focus areas of SB 697, Community Hospital in 2023 provided 78 benefit services with an economic value of \$195.9 million. Of these dollars, 24 percent (\$46 million) specifically served the economically disadvantaged.

Thirty-five hospital departments were active in providing community benefit services and the hospital collaborated with 180 organizations in community benefit activities.

COMMUNITY BENEFITS BY COMMUNITY NEED/FOCUS AREA

Community focus area	BENEFIT DOLLARS		BENEFIT SERVICES	
	Total	Percentage	Total	Percentage
Building healthy communities	\$2,375,776	1.21%	12	15.3%
Health education and wellness	\$3,513,505	1.79%	43	55.1%
Improving access to care	\$189,646,211	96.7%	13	16.7%
Special care for special needs	\$458,130	0.23%	10	12.8%
All benefit services	\$195,993,622	100%	78	100%

COST-BASED VALUE DEFINITIONS

SB 697 category

Dollars

Medical care: vulnerable populations

Traditional charity care, at cost \$3,419,298

Unpaid cost of Medi-Cal program \$42,493,443

Medical care: broader community

Unpaid cost of Medicare program \$81,837,410

Unpaid cost of other government programs \$8,932,841

Negative-margin services \$50,605,984

Other benefits

Broader community and vulnerable populations \$4,701,217

Health research, education, and training \$4,003,429

Total benefits \$195,993,622

SECTION 2

Vision, mission, and commitment

VISION AND MISSION

Community Hospital is a tax-exempt, nonprofit organization serving the residents of the Monterey Peninsula and surrounding communities. Community Hospital is a subsidiary of Montage Health, a tax-exempt, nonprofit corporation that also owns other healthcare-related entities that closely collaborate to meet the healthcare needs of our community. The Board of Trustees for Montage Health also serves as the Board of Trustees for the hospital. The hospital, established in 1934, is an active, caring member of the community that provides compassionate, high-quality healthcare services at a competitive cost.

MONTAGE HEALTH VISION

Our vision is to improve lives by delivering exceptional care and inspiring the pursuit of optimal health

MONTAGE HEALTH MISSION

We believe our community's greatest resource is the health of its people. Our family of organizations is dedicated to the pursuit of optimal health for all people in Monterey County, from birth to end of life.

We believe the achievement of optimal health requires proactive partnering with physicians and other clinicians, healthcare and community organizations, and, most importantly, each person we serve. Achieving this goal requires our ongoing commitment to delivering exceptional value-based care that is:

- Preventive (building and retaining health)
- Restorative (facilitating recovery from illness or injury)
- Palliative (maximizing well-being when recovery is not possible)

We are dedicated to care that is coordinated across all care settings to meet each person's own goals and needs.

We believe optimal health on an individual level is possible only when each person actively participates in their own healthcare. We inspire that participation through personalized information, education, and support, provided by a coordinated and compassionate team.

ORGANIZATIONAL COMMITMENT

The depth, breadth, and significant economic value of the benefit services described in this plan, and those of preceding years, demonstrate our strong commitment to community benefit services. Community Hospital's leadership of and participation in hospital-driven and collaborative Community Health Needs Assessment activities, and our investment of time and resources in an objective-oriented benefit planning system, also attest to our commitment to community benefit services and the spirit of both SB 697 and IRS requirements.

STRATEGIC PLANNING

The Montage Health Board of Trustees oversees strategic planning for the hospital and actively supports the

hospital's commitment to community benefit services in its strategic initiatives. Initiatives are selected for implementation, in part, based on the Community Health Needs Assessment activities.

CHARITY CARE

Policy and funding: To help meet the needs of low-income, uninsured, or underinsured patients, Community Hospital provides care for community residents, without regard to their ability to pay. The sponsored care and discount program also meets the requirements of AB 774. Funding is provided by philanthropic contributions and through the hospital's operating budget. The program grants sponsored (charity) care and/or discounted care solely based on a person's financial need, regardless of age, sex, race, national origin, physical or mental disability, sexual orientation, religion, color, ancestry, marital status, citizenship, medical condition, or veteran status. Patients may apply for assistance before receiving hospital services or after the hospital provides the care. A copy of the policy in effect during 2023 can be found on our website at montagehealth.org/2023-financial-assistance-policy/

Implementation and procedures: The Patient Business Services and Care Coordination Services departments review applications for the sponsored care and discount programs. The patient/responsible party and/or service department are notified of the final eligibility decision in writing. An appeal of the decision may be made to the director of Patient Business Services. In 2023, the income limit for sponsored care was 300 percent of the federal poverty level, and the income limit for the discount program was 400 percent of the federal poverty level.

Communication to patients and the community: The hospital provides basic information about the organization in every inpatient room, including sponsored care and discount programs. Community Hospital publicly displays information on the general program in key service locations and provides information to every patient at the time of registration for services and enclosed with billing statements. Information on specialty programs (e.g., free baseline mammography through the Sherry Cockle Fund) are provided to patients who register for these specific services.

Through its public website, Community Hospital also publicizes the sponsored care and discount programs, and illustrates the benefits of the programs.

COMMUNITY BENEFIT FUND GRANTS

Community Hospital's Community Benefit Program includes a significant annual commitment of funds for grants to nonprofit organizations and multi-agency collaborative organizations in support of health assessment and improvement projects within our service area. Community Hospital gives higher priority to projects that involve collaboration among organizations and make appropriate use of Community Hospital's clinical expertise. Grants are awarded under the Community Benefit Program objectives of building healthy communities, health education and wellness, improving access to care, and providing special care for special needs.

The program's overall priorities and funding are reviewed and approved by the Board of Trustees annually, and grant decisions are made by the hospital's executive team. Grant applications are welcome at any time. See our website for a complete description of the grant program at montagehealth.org/about/caring/benefit/apply-grant.

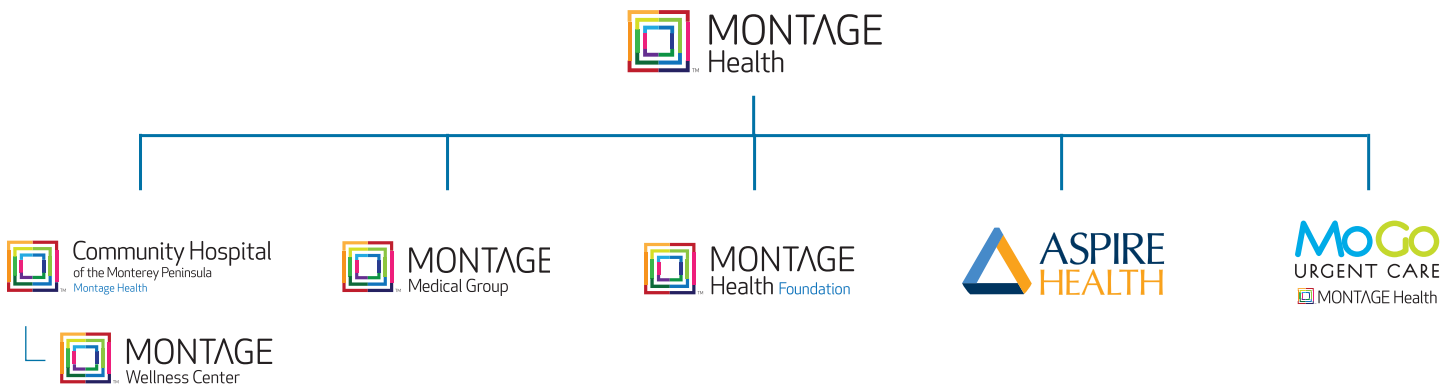
In 2023, Community Hospital awarded a total of \$782,718 in 69 grants to 64 organizations.

Board participation: The Board of Trustees provides overall leadership to the community benefit process by establishing the mission and strategic goals of the hospital. The board approves the community benefit plan annually, including the program’s own mission, scope, and grant-making guidelines, as well as the triennial Community Health Needs Assessment and its top identified priorities.

Staff participation: Staff participation begins with an ongoing community benefit inventory to identify community benefit services. Staff works with management in developing mission-driven community benefit activities and in planning appropriate changes to existing services as well as new services. Department directors and their staff members manage and implement essentially all community benefit services, including formulating objectives, collecting data, and providing cost and related data for the community benefit plan.

Physician participation: Physicians participate in hospital and community programs, in collaborative relationships with Community Hospital and other providers, and through involvement in medical staff committees.

Montage Health itself, and the other non-hospital entities, also engage in community benefit activities. While the value of these benefits is excluded from the hospital’s totals reported in this plan, they were significant in 2023. The entities and the contributions are below.



Entity	Community benefit service	2023 contribution
Montage Health	Physician recruitment program for primary care and specialty physicians; this activity was previously reported as part of the hospital's community benefit contributions	\$24,549,298
Aspire Health Plan	Medicare Advantage insurance plans for local seniors; operated as a negative-margin service and co-owned by Salinas Valley Health	\$4,417,035
Aspire Health Population Health	Population health management services including diabetes education and prevention, transitional care management, primary care medical home, and pediatric wellness coaching; operated as a negative-margin service and co-owned by Salinas Valley Health	\$1,040,200
Montage Medical Group	Nonprofit network of primary care and specialty physician clinics dedicated to improving access to care; operated as a negative-margin service	\$36,461,657
	Total	\$66,468,190

SECTION 3 Community served and collaboration

Community Hospital’s primary service area is the Monterey Peninsula, health facility planning area (HFPA) #707. The Monterey Peninsula includes Carmel, Carmel Valley, Del Rey Oaks, Marina, Monterey, Pacific Grove, Pebble Beach, Sand City, Seaside, Big Sur, and unincorporated areas of Monterey County (see service area map).

Factors used in defining the community for community benefit planning purposes include:

1. Community reliance on Community Hospital’s services — the hospital’s market share of Peninsula resident discharges was approximately 80.6 percent in 2023
2. Hospital reliance on the community — residents of the Peninsula accounted for approximately 76 percent of the hospital’s patients in 2023
3. Community benefit history and collaborative relationships with community organizations
4. Desires and perspectives of community groups with which the hospital collaborates

The socioeconomic characteristics of the Monterey Peninsula span a broad spectrum. Carmel and Pebble Beach are relatively affluent communities with substantial retired and senior populations. Big Sur and other unincorporated parts of the county are largely rural in character. The communities surrounding the former Fort Ord army base (Seaside, Marina, and Sand City) are less affluent and continuing to grow, with a younger population, more children, and significant racial and ethnic diversity. Despite the socioeconomic variations, the Monterey Peninsula is a distinct sub-region of Monterey County with a well-defined sense of community.

AREA WE SERVE



WHO WE SERVE

The population of the hospital’s primary service area is estimated at 136,656 people. It is predominantly non-Hispanic White, but also has a substantial Hispanic population. The demographic breakdown, according to the US Census Bureau, is non-Hispanic White (63.1 percent), Hispanic (19.3 percent), Asian (10.8 percent), African American/Black (4.4 percent), and other (2.4 percent). Among area residents, 27.4 percent are low income, living below 200 percent of the federal poverty level.

The six target groups within the service area identified for community benefit planning are:

- Infants/children/youth
- Women
- Seniors
- Economically disadvantaged
- Community subgroups, e.g., military, students, ethnic populations
- General community

COMMUNITY COLLABORATIONS

Community Hospital collaborates with members of our community on both community assessment and community benefit service activities, including through our grantmaking program and the extensive community involvement of our staff and doctors.

Benefit service collaborations involved 180 local organizations in 2023, shown by type of organization below. Specific collaborators in the three priority areas — access to health services, diabetes, and mental health — are included later in this report.

COLLABORATING ORGANIZATIONS COMMUNITY BENEFIT ACTIVITIES

Type of organization	Number of organizations
Business	25
Community groups	61
Educational	33
Healthcare	36
Public agencies	25
Total collaborators	180

SECTION 4 Community Health Needs Assessment

Community Hospital completed a Community Health Needs Assessment (CHNA) in 2022 as required by state and federal law. The CHNA is done every three years, with the next scheduled for 2025. For the 2022 assessment, Community Hospital partnered with Salinas Valley Health, Mee Memorial Healthcare System, Natividad Medical Center, the Monterey County Health Department, and United Way Monterey County to create the Monterey County Health Needs Collaborative. The CHNA provides information that determines the implementation plan that outlines the hospital's effort to address priority health needs.

Professional Research Consultants (PRC) conducted a statistically valid telephone survey of randomly selected local adults and online community outreach surveys. The survey was based largely on the Centers for Disease Control and Prevention (CDC) Behavioral Risk Factor Surveillance System (BRFSS). In addition, we collected and analyzed secondary data from national, state, and local sources such as incidence rates of disease and causes of death, etc. The data was then compiled and benchmarked against the goals of the national Healthy People 2030 initiative sponsored by the U.S. Department of Health and Human Services. The assessment also included valuable input from community stakeholders with expertise in public health, as well as others who represent the broad interests of the community.

Based on the assessment, these were identified as the most significant community health needs:

- Access to health services
- Diabetes
- Mental health

Analysis of the assessment revealed that the majority of existing Community Hospital community benefit services, and those of our related Montage Health entities, continue to be appropriately directed. It also identified potential opportunities to bring greater emphasis to services targeted at the top three priority needs. The complete report on the needs assessment is available at montagehealth.org/about/caring/benefit/needs-assessment/

SECTION 5 Value of benefit services

Benefits data collection includes an inventory of all community benefit activities, including:

- Description and objectives
- Target groups and community needs served
- Collaborative partners
- Occurrences and number of persons served
- Staff and volunteer hours and costs

Community benefit dollars include only free, discounted, subsidized, or negative-margin services and the unpaid cost of public programs, less funds received from fees and other sources. No indirect cost is added to unpaid cost of public programs, negative-margin services, general charity, or overhead costs.

SERVICES BY SB 697 CATEGORY

SB 697 category	Number of services	Cost
Medical care services	8	\$187,288,976
Other benefits: broader community	10	\$3,226,528
Other benefits: vulnerable populations	7	\$1,474,689
Health research, education, and training	53	\$4,003,429
Total services	78	\$195,993,622

VALUE AND SERVICES BY COMMUNITY NEED FOCUS AREA

Following is the dollar value of and number of services for each hospital-identified focus area.

Focus areas	Amount	Number of services
Building healthy communities	\$2,375,776	12
Health education and wellness	\$3,513,505	43
Improving access to care	\$189,646,211	13
Special care for special needs	\$458,130	10
Total services	\$195,993,622	78

HEALTH AND WELLNESS SERVICES BY TYPE OF SERVICE

Type of service	Number of services
Health fairs/screenings	3
Information and presentations	5
Support groups	10
Training classes	20
Other	40
Total services	78

COMMUNITY BENEFIT FUND GRANTS

Grants are generally single-year commitments to support current or new programs consistent with the mission of Community Hospital. Higher-priority projects are those that involve collaboration among organizations, make appropriate use of Community Hospital's clinical expertise, and improve access to care. In 2023, there were 69 grants, with an average amount of \$11,344.

Focus area	Number of grants	Dollar amounts
Building healthy communities	25	\$172,458
Health education and wellness	6	\$37,500
Improving access to care	10	\$304,000
Special care for special needs	28	\$268,760
Total	69	\$782,718

COST-BASED VALUE DEFINITIONS

As prescribed by SB 697, community benefit dollars presented in this report include only free, discounted, subsidized, or negative-margin services and the unpaid cost of public programs, less funds received from fees and other sources. Unpaid costs of public programs are presented using the hospital's cost accounting data. No indirect cost is added to unpaid cost of public programs, negative-margin services, general charity, or overhead cost centers.

VALUE BY SB 697 CATEGORY

SB 697 category	Dollars
Medical care: vulnerable populations	
Traditional charity care, at cost	\$3,419,298
Unpaid cost of Medi-Cal program	\$42,493,443
Medical care: broader community	
Unpaid cost of Medicare program	\$81,837,410
Unpaid cost of other government programs	\$8,932,841
Negative-margin services	\$50,605,984
Other benefits:	
Broader community and vulnerable populations	\$4,701,217
Health research, education, and training	\$4,003,429
Total benefits	\$195,993,622

EVALUATING THE ECONOMIC VALUE

One benchmark for evaluating the economic value of community benefit services provided is the dollar value of the hospital's tax-exempt status. A desirable community benefit dollar value exceeds the value of tax-exemption. Elements included in calculating the value of tax-exempt status include:

- Interest rate differential on tax-exempt financing for long-term debt
- Property tax on assessed value
- State income tax obligation without tax exemption
- Federal income tax obligation without tax exemption

In 2023, Community Hospital returned to the community far more in community benefits than the value of its tax exemption:

Hospital cost of community benefits	\$195,993,622
Value of tax exemption	\$38,530,803
Community benefits per dollar of tax exemption value	\$5.08

COMPARISON WITH PRIOR YEAR

The following table compares the value of community benefits for 2023 with the value for 2022:

SB 697 Category	2022	2023	Net change
Medical care: vulnerable populations			
Traditional charity care, at cost	\$2,405,391	\$3,419,298	\$1,013,907
Unpaid cost of Medi-Cal program	\$50,332,552	\$42,493,443	-\$7,839,109
Medical care: broader community			
Unpaid cost of Medicare program	\$80,151,570	\$81,837,410	\$1,685,840
Unpaid cost of other government programs	\$8,289,926	\$8,932,841	\$642,915
Negative-margin services	\$34,423,832	\$50,605,984	\$16,182,152
Other community benefits	\$3,773,047	\$4,701,217	\$928,170
Health research, education, and training	\$3,604,610	\$4,003,429	\$398,819
Total quantified benefits	\$182,980,928	\$195,993,622	\$13,012,694

SECTION 6

2023-2025 implementation strategy

PRIORITY HEALTH ISSUES TO BE ADDRESSED

In consideration of the top health priorities identified through the community health needs assessment process described in Section 4 — and taking into account hospital resources and overall alignment with the hospital's mission, goals, and strategic priorities — Community Hospital is focused on developing and/or supporting strategies and initiatives to address:

- Access to health services
- Diabetes
- Mental health

COMMUNITY HEALTH NEEDS THAT ARE NOT AMONG SELECTED FOCUS AREA AND WHY

The identified health needs not selected for focus during the 2023–2025 implementation period are: cancer, heart disease and stroke, housing, infant health and family planning, injury and violence, nutrition, physical activity and weight, oral health, potentially disabling conditions, respiratory disease, and substance use. Community Hospital has chosen specific community health needs as a top priority to address, but will continue to provide a significant array of community health services in support of the other identified needs as well. In some cases, the needs are currently being addressed by other community organizations.

IMPLEMENTATION PLANS

COMMUNITY NEED ADDRESSED: ACCESS TO HEALTH SERVICES

Scope

Primarily residents of the hospital's primary service area, though some of the strategies have Monterey County-wide impact

Goal

Improve access to healthcare services and insurance coverage for individuals and families

Table 1. Strategies for addressing access to health services

Strategy	Population served	2023 outcomes
<p>1. Provide funding and support aimed at improving access to primary care for underserved populations</p>	<p>Un- and under- insured individuals</p>	<p>A total of \$304,000 was funded to 10 organizations that provide healthcare access and services to underserved residents. Additionally, the hospital provided lab work and diagnostic testing for patients of RotaCare Monterey, a clinic that provides free medical care to uninsured residents.</p> <p>As a result of grant funding, 788 primary care visits were provided to adults and children by Monterey County Health Department’s clinics in Seaside and Marina.</p> <p>Grant funding for the Monterey Peninsula Unified School District provided support for school nurse staffing.</p>
<p>2. Provide medically necessary hospital services for those who are unable to pay for them</p>	<p>Un- and under- insured individuals</p>	<p>\$3,419,298 of care was provided through the financial assistance program.</p> <p>1,327 patients benefitted from the financial assistance program.</p>
<p>3. Recruit and retain doctors and advanced practice providers in specialties where a local shortage is demonstrated</p>	<p>Broader community</p>	<p>16 doctors and 4 advanced practice providers were hired for Montage Medical Group in demonstrated-shortage specialties. In addition, 10 doctors were recruited for Community Hospital.</p>
<p>4. Increase access to affordable health insurance</p>	<p>Un- and under- insured individuals</p>	<p>12,000 people are currently enrolled in Blue Shield Trio HMO insurance plan.</p> <p>The plan is the first widely available HMO plan in the region and was created to provide access to high-value care at a lower monthly premium than most other PPO plans. Montage Health and Salinas Valley Health are participating organizations.</p> <p>692 people received assistance enrolling in health insurance programs available in our county.</p>

Community partners

- Aspire Health
- Central California Alliance for Health
- Big Sur Health Center
- Dentistry4Vets
- ITN Monterey County
- Montage Health
- Montage Medical Group
- Monterey County Department of Social Services
- Monterey County Health Department
- Monterey Peninsula Unified School District
- RotaCare Monterey
- Salinas Valley Health
- Valley Health Associates

COMMUNITY NEED ADDRESSED: DIABETES

Scope

Primarily residents of the hospital's primary service area, though some of the strategies have Monterey County-wide impact

Goal

Improve access to prediabetes and diabetes education and care

Table 2. Strategies for addressing diabetes

Strategy	Population served	2023 outcomes
1. Increase awareness and identification of prediabetes and diabetes	Broader community with a focus on residents in the city of Seaside	<p>Community Hospital's Diabetes Services successfully tested a process to provide prediabetes and diabetes medical screening, and tested the impact of the outreach activity on the participants' awareness of prediabetes and diabetes. The average score for awareness before outreach was 83.97 percent. After the outreach activity, average awareness rose to 97.44 percent.</p> <p>This community outreach and screening event took place in the city of Seaside, where there is a high rate of diabetes and prediabetes. 28 people had their blood glucose measured and values interpreted by Diabetes Services nurses.</p> <p>The hospital participated in 3 health fairs with screenings. 153 people received blood glucose screening and 125 of those people also had their cholesterol tested.</p>

Strategy	Population served	2023 outcomes
<p>2. Improve access to prediabetes and diabetes education and prevention services, including medication management</p>	<p>Countywide</p>	<p>The number of referrals to Diabetes and Nutrition Therapy from Montage Medical Group, Aspire Medicare Advantage, the hospital, and other community providers was 3,267. This is an increase from 2,746 in 2022.</p> <p>Diabetes and Nutrition Therapy Clinic saw 2,613 patients for diabetes. Of the 760 patients who had an initial A1C and a follow-up A1C and attended Diabetes Self-Management Education classes, 405 showed improvement in A1C. Average A1C improvement was 1.62%</p> <p>In 2023, Aspire Health launched a revamped Pediatric Wellness Program, called Healthy Together, and expanded it from a four-session curriculum to a six-session curriculum. The program had more than 1,200 referrals from providers throughout Monterey County.</p>
<p>3. Provide nutrition, physical activity, and weight management curriculum through school programming</p>	<p>Children in Monterey County schools</p>	<p>Kids Eat Right is a free program for fourth and fifth graders. In five weekly sessions, students learn simple lessons on the importance of eating fruits, vegetables, and whole grains, reading and understanding nutrition labels, and staying active. This hands-on program provides the opportunity for kids to prepare and enjoy healthy meals in class.</p> <p>During the 2022-2023 academic year, 3,236 students participated in Kids Eat Right, which was offered in 22 schools. After participating, the average overall change in knowledge was 35.6 percent. Kids Eat Right (KER) staff also attended 29 events and provided more than 2,000 attendees with information and resources. KER also offers family workshops that provide education on nutrition and physical activity, as well as the opportunity to create healthy snacks together.</p> <p>Our Don't Feed the Diabetes curriculum was offered in 37 schools, with 5,736 students participating during the 2022-2023 academic year. Don't Feed the Diabetes curriculum is for children of all ages – elementary, middle, and high school. It is a one-lesson curriculum that focuses on the importance of healthy habits and diabetes prevention. It is provided by Aspire Health.</p>

Community partners

- Anthem Blue Cross
- Aspire Health
- Blue Zones Project Monterey County
- Boys and Girls Club
- Central Coast YMCA
- City of Seaside
- Community Partnership for Youth
- CSUMB (Institute for Community Collaborative Studies)
- First Tee
- Girls Inc.
- Mee Memorial Healthcare System
- Montage Health
- Montage Medical Group
- Montage Wellness Center
- Monterey County Health Department
- Monterey County Office of Education
- Monterey County school districts
- Monterey Peninsula College
- Natividad
- RotaCare Monterey
- Salinas Valley Health
- Salinas Valley Medical Clinic
- Salud Para La Gente
- United Way Monterey County

COMMUNITY NEED ADDRESSED: MENTAL HEALTH

Scope

Primarily residents of the hospital's primary service area, though some of the strategies have Monterey County-wide impact

Goal

Improve access to general mental health services and align with other agencies to maximize resources for those in need

Table 3. Strategies for addressing mental health

Strategy	Population served	2023 outcomes
<p>1. Support and improve access to care for mental health services</p>	<p>Countywide</p>	<p>There were 29,028 visits (21,138 visits with a psychiatrist/nurse practitioner and 7,890 visits with a psychologist/LCSW) in Outpatient Behavioral Health Services. This department has 18 contracted practitioners (psychiatrists and psychologists), three nurse practitioners, and four LCSW therapists.</p> <p>The Crisis Stabilization Unit in the Emergency department provides short-term child, adolescent, and adult observation psychiatric services. 485 patients (105 children/adolescents and 380 adults) were served in 2023.</p>
<p>2. Support and improve access to mental health services for children and families</p>	<p>Countywide</p>	<p>Ohana, Community Hospital’s mental health program for children and adolescents, served 2,326 unique patients. 910 evaluations were completed by Ohana evaluation service. Ohana has 73 providers and 89 staff. The Prevention Team provided 140 classes, presentations, and tabling events, reaching 6,904 people. Mental Fitness groups were provided in Monterey Peninsula Unified School District for 222 students.</p>
<p>3. Support and improve access to resources and treatment for substance use disorders</p>	<p>Broader community</p>	<p>The Substance Use Navigator saw 1,409 patients in the Emergency department. 824 hospital patients were referred to a treatment program. The hospital’s Recovery Center had 79 admissions and 2,135 visits.</p>

Community partners/planned collaboration

- Acadia Healthcare
- Access Support Network
- Addictions Center of America
- Adult and Teen Challenge
- Aspire Health
- Beacon Health
- Community Action Team
- Community Human Services
- Door to Hope
- Interim, Inc.
- Medi-Cal providers
- Monterey County Behavioral Health
- Monterey Peninsula Pediatric Group
- Monterey Peninsula Unified School District
- Montage Health
- Montage Medical Group
- Multi-Disciplinary Outreach Team (MDOT)
- National Alliance on Mental Illness (NAMI)
- Pacific Rehabilitation and Pain
- Stanford Medicine Children's Health Pediatrics
- Substance Use Response Team
- Sun Street Centers
- The Bridge Restoration Ministries
- Valley Health Associates