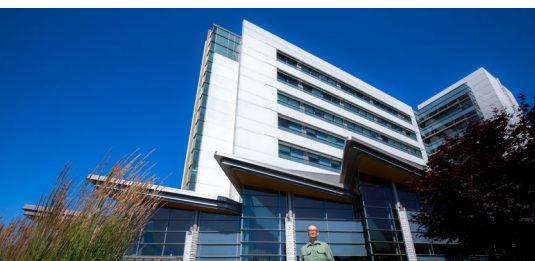


# A Vital Bridge with the Community

*PeaceHealth Southwest Medical Center*

## 2022-2025 Community Health Needs Assessment



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# Message from leadership:

**Strong. Resilient. Compassionate. Collaborative. Courageous. These words define our Vancouver community.**

Our region is built on a strong foundation of people working together for the collective good. At the core of our community are educational institutions, community service organizations, health partners and local businesses.

In times of great need like the COVID-19 pandemic, the collective work of our community demonstrated what it means to care compassionately for the most vulnerable, the underserved, the marginalized—anyone who needs a helping hand.

PeaceHealth is proud to serve beside many exemplary organizations. Each shares an unwavering commitment to making our community more just and welcoming for all. The pandemic has made the disparities that exist in our community more visible, opening more eyes to the growing inequities in access to healthcare, disparities in health outcomes and access to affordable housing.

Financial support and collaboration with our partners has allowed us to do more than we could alone. These partners include Clark County Food Bank, Council for the Homeless, the Free Clinic of Southwest Washington, League of United Latin American Citizens (LULAC), NAACP Vancouver, Pacific Islander Community Association of Southwest Washington, the Patricia Nierenberg Early Care and Education Center, and Share of Vancouver. Collectively, we have helped save families from eviction; provided onsite healthcare to some of our most vulnerable; managed the quarantine and isolation shelter for the county; provided social service support and resources to the unhoused; helped ensure thousands of families remained fed; subsidized childcare services for our own caregivers so they could continue to meet the healthcare needs of our community; and worked with our Black, Indigenous and People of Color communities to provide COVID-19 testing and vaccines.

The challenges brought forth by the pandemic have caused us to rethink how we can bring more dignity, respect and humility to our work. For example, during the pandemic we established new relationships and partnered to provide culturally specific COVID outreach, testing and vaccination events. We have grown and learned along with our community, and are grateful for the outpouring of community support.

It is with this knowledge that we forge ahead, as there is much more work to be done. We will continue to address food insecurity, housing for the unsheltered and advocate for social and health justice for all. It is our PeaceHealth Mission; it is who we are. We are honored to be a part of this community, standing with our partners and the people of Southwest Washington.



A handwritten signature in black ink that reads "Sean Gregory".

Sean Gregory  
Chief Executive,  
PeaceHealth Columbia Network



A handwritten signature in black ink that reads "Liz Cattin".

Liz Cattin  
Director of Community Health,  
PeaceHealth Columbia Network

# Our report to the community

## The importance of a Community Health Needs Assessment

Every three years, each PeaceHealth location conducts a Community Health Needs Assessment (CHNA) as required by the 2010 Patient Care and Affordable Care Act.

Tax-exempt hospitals like ours—as defined by IRS Section 501(r)—use the CHNA to report current community needs, statistics, and activities.



We are also expected to develop an implementation strategy outlining our plans to improve health and well-being of the communities we serve. We see our CHNA report and implementation strategy as much more than a requirement or obligation. Through this narrative, we are presenting the story of our dedication and service to the community and people we serve. Beyond traditional medical services and care, we are committed to helping people in need.

Click to view previous editions of our [CHNA](#) and [implementation strategy](#).

### OUR KEY FINDINGS

There is a critical **need for all types of housing in Clark County: affordable housing, workforce housing and shelter options for the unhoused**. The lack of housing available in the community and severe lack of affordable options is a common concern of our community partners, specifically as financial support resources provided during the COVID-19 pandemic slow and eviction moratoriums are lifted.

Another common theme is the **need for connection between service providers that support the Black, Indigenous, and People of Color communities and other underserved individuals. Partners voiced specific concerns for the Latinx and Pacific Islander communities** who have struggled to get COVID vaccines and tests, as well as adequate food supplies. Community health workers, peer support specialists and community health advocate programs should be expanded along with collaborations between all health and social service providers in support of the social determinants of health.

**The need for opioid use disorder treatment** has grown as synthetic opioid use has increased across the nation and in our area during the pandemic. Similarly, the **need for behavioral health supports** continues. The mental health needs of our community—especially children—have grown during the pandemic.

A common concern of partners is the **need for a stable workforce**. Workforce shortages, partially due to COVID, have impacted services for those in need. One important and overlooked reason for the workforce shortage is the **lack of availability of childcare, specifically low-income childcare**. In many cases, this shortage has prevented people in need from reentering the workforce.

## WHAT IS OUR COMMUNITY NEEDS ASSESSMENT PROCESS?

We conducted a thorough review of publicly reported data from state and local resources like Washington State Department of Health, Washington State Department of Commerce, Washington Office of Superintendent of Public Instruction, and Clark County Public Health. Additionally, we reviewed national sources of information related to the social determinants of health including Feeding America, The Robert Wood Johnson Foundation Community Health Rankings, and the U.S. Centers for Disease Control and Prevention. Our data collection and analysis were completed in the fall of 2020.

We also reviewed the Clark County Community Services CHNA and the Vancouver Housing Authority Strategic Plan, and held listening sessions with community partners to learn about needs in Clark County from their perspective that may not be reflected in the larger data set.

Attendees in our listening sessions included representatives from Clark County Public Health, Clark County Community Services, Area Agency on Aging & Disabilities of Southwest Washington, YWCA of Clark County, Vancouver Housing Authority, Southwest Washington Accountable Community of Health, Clark County Food Bank, Share of Vancouver, Vancouver Farmers Market, Council for the Homeless, the Free Clinic of Southwest Washington, and the Community Foundation for Southwest Washington. At the listening sessions we learned about the impact of COVID-19 on our community and the connections between health and support services provided by our valuable partners through their experience and expertise.

## WHO WE ARE AND WHAT WE BELIEVE IN

Located in Vancouver, Washington near I-5, I-205 and the Washington/Oregon border, PeaceHealth Southwest Medical Center and its associated PeaceHealth Medical Group clinics serve the community as a Level II trauma center, a trusted provider of emergency and urgent care, primary and specialty care, home health and hospice services, cancer care, cardiothoracic surgery, and neonatal intensive care services with strong connections to other regional providers of medical care. We provide vital services to Clark County and adjacent communities, reaching north to our sister hospital in Longview, and east to Skamania County in the Columbia River Gorge.

### About PeaceHealth Southwest Medical Center

**235.41** Average daily census

**450** Total licensed beds

**5.07** Average length of stay (days)

**16,959** Inpatient discharges

**321,540** Outpatient clinic visits

**3,710** Employees

**1,129** Active medical staff

**67,248** Emergency Department visits

**11,844** surgeries

Source: PeaceHealth FY 2021; Active medical staff as of October 2021



Photo credit: City of Vancouver

We partner with other local healthcare providers to ensure equal access for all members of our community.

We work closely with Federally Qualified Health Centers (FQHCs), such as Sea Mar Community Health Centers, who, like PeaceHealth, accept all patients regardless of ability to pay. We also work with Free Clinic of Southwest Washington, Kaiser Permanente Northwest, Rebound Orthopedics & Neurosurgery, Legacy Health System, Vancouver Clinic, Columbia River Mental Health and other community-based organizations to serve the clinical and non-clinical needs of our community.

As Clark County's largest employer, our reach is broad. We provide living-wage jobs and care for community member health through our regional network of care and nearby System Services Center, PeaceHealth's centralized corporate office, also located in Clark County. With a focus on serving the needs of each individual patient—from hospital care to recovery—we are committed to patient safety, transparency, and continuous improvement.

Access to behavioral health services, adequate healthy food and affordable housing continues to be a challenge for members of our community. Other concerns are access to affordable childcare and the inability to maintain employment due to unmet childcare needs, which impacts a family's ability to provide for their basic food and housing needs. With a focus on these issues and the affected households, PeaceHealth Southwest Medical Center caregivers have formed strong partnerships with community organizations to ensure social services are in place to address some of these gaps.

# Supporting health justice for all

## From our very beginning to the present day

PeaceHealth was founded by the Sisters of St. Joseph of Peace, who traveled west in 1890 to care for early settlers and people in need. Their legacy continues today as we recognize that achieving health and well-being is a lifelong journey.

We are committed to our Mission: We carry on the healing Mission of Jesus Christ by promoting personal and community health, relieving pain and suffering, and treating each person in a loving and caring way. We are driven by our belief that good health and community well-being are fundamental rights. We support health justice for all and are especially called to be of service to the most vulnerable members of our community. We believe that every person should receive safe and compassionate care—every time, every touch.

### **BUILDING A NETWORK OF CARE FROM THE INSIDE OUT**

Inspired by a challenge from the [Catholic Health Association's "We Are Called" Pledge](#), we have embarked on a journey to "put our own house in order." We recognize that change starts from within, believing that our caregivers can best focus on others when we put our focus on caring for them. This has been an essential element in preserving our 130-year legacy of community service and care.

PeaceHealth has more than 7,000 employees in our Columbia network located in Southern Washington. More than 5,000 of those employees are located throughout the Southwest Medical Center service area and nearly 2,000 work at our System Services Center. Our caregivers are a vital part of our community. Like others, they have been impacted by the pandemic.

In 2020, 620 of our Clark County employees received support with housing and utilities (56%); access to care or basic services like internet, transportation and childcare (27%); and food access (17%). In addition to creating a supportive workplace, PeaceHealth continues to refine hiring practices to ensure a diverse workforce. We are committed to implementing change reflective of our Core Values: respect, stewardship, collaboration and social justice.

**But we need to do more—and we cannot do it alone.** This is why community-based partnerships like the ones described in this assessment are crucial to our community's success. They enable all of us to address social determinants of health and improve care and access.

**"We have a responsibility to shine a light on the profound effect inequities have on health and well-being, and to do something about it. We are called to promote the inherent dignity of each person, to further the common good and seek justice through solidarity, especially in service to the most vulnerable."**

– Liz Dunne, President and Chief Executive Officer, PeaceHealth

**PROMOTING SOCIAL JUSTICE ACROSS CLARK COUNTY—AND BEYOND**

PeaceHealth has taken steps to increase awareness of social inequities and promote health justice among patients, caregivers in our organizations and across the greater healthcare community. We also recognize the significant journey that lies ahead—with partners and with our community—to move the needle on health justice, equity and inclusion.



**RECOGNIZING INEQUITIES AND ELEVATING PARTNERSHIPS**

During these unprecedented times, it has become evident that Black, Indigenous and People of Color (BIPOC) communities are at higher risk for chronic medical conditions, COVID incidence and death from COVID. With less access to healthcare, immigration concerns, language barriers, higher poverty rates and the likelihood of working in close contact with other people in essential worker jobs, these members of our community are at a higher risk of severe outcomes from COVID-19. In 2021, the Clark County Council formally recognized the disparities in Clark County, passing a resolution declaring racism a public health emergency.

Many of the BIPOC families in Clark County live in multi-generational housing, often with more than one family residing in one location. Cultural differences and communication barriers have made it difficult to reach Pacific Islander, Latinx and Slavic members of our community.

**A growing community...**

**CLARK COUNTY:**

**501,869**

Population

**VANCOUVER:**

**187,615**

Population

**17.62%**

2010-20 population growth

**15.96%**

2010-20 population growth

*Source: World Population Review*

**...is becoming an increasingly diverse one**

% Race/Ethnicity Data of Population				
	Vancouver	Clark County	Washington	U.S.A.
White	72	78	68	60
Latinx	14	10	13	19
Multi-Racial	6	4	5	3
Asian	6	5	10	6
Black/African American	2	2	4	13
Native Hawaiian/Pacific Islander	2	<1	<1	<1
American Indian/Alaska Native	<1	1	2	1


*Source: U.S. Census Bureau, 2020*


## Poverty's expansive grip

Poverty rate by race in  
Clark County

 **20%**  
Native Hawaiian/  
Pacific Islander

 **16%**  
Latinx

 **15%**  
Other

 **15%**  
Black/  
African American

 **13%**  
Multiple Races

 **11%**  
Asian

 **11%**  
American Indian/  
Alaska Native

 **8%**  
White

Source: [U.S. Census 2020](#)

Because of these challenges, PeaceHealth partnered with the League of United Latin American Citizens (LULAC), Pacific Islander Community Association of Washington (PICA-WA), Clark County Public Health, Free Clinic of Southwest Washington and Southwest Washington Accountable Community of Health (SWACH) to advocate for, and address the needs of our marginalized BIPOC community members.



Community health advocates began to intentionally focus on the needs of Latinx and Pacific Islander communities during the COVID-19 pandemic. With bilingual staff and culturally specific outreach, these providers were able to support basic needs by supplying food and self-care items, housing supports, and education about COVID-19. PeaceHealth provided \$50,000 to LULAC to support culturally-specific food distribution, and \$75,000 to the Free Clinic of Southwest Washington to support their outreach to diabetic members of the Latinx community. We also collaborated with these partners to coordinate access to COVID testing and vaccines.

PeaceHealth Southwest provided \$80,000 to Share of Vancouver, \$75,000 to Council for the Homeless, \$93,000 to the Clark County Food Bank, and \$30,000 to Educational Service District 112 to support housing, quarantine and isolation, food, personal care items and childcare as part of the community's COVID-19 response efforts.

From 2019 through 2021, PeaceHealth has invested \$1.9 million in programs and partnerships in service to Clark County residents. Funded and in-kind program partners include Clark County Food Bank, Clark County Public Health, Columbia River Mental Health, The Community Foundation of Southwest Washington, Council for the Homeless, ESD 112, Foundation for Vancouver Public Schools, the Free Clinic of Southwest Washington, Lifeline Connections, LULAC, Mercy Housing Northwest, Oregon Health & Science University, Sea Mar Community Health Centers, Share of Vancouver, SWACH, Vancouver Farmers Market, the Vancouver Housing Authority, Washington State Extension Service, and YWCA. Additionally, PeaceHealth has provided land and capital for the construction of Mercy Housing affordable housing, providing 69 apartment homes for low-income families in Vancouver.

Through our robust partnerships in Southwest Washington, nearly 17,000 lives were impacted in 2020 through ongoing work and COVID-19 response funds provided to partners who responded to the need for food, housing, personal care items and social supports of our most vulnerable community members.



# A year that inspired action

## Answering the call during an unprecedented time in history

2020 saw a remarkable convergence of critical challenges in the United States: racial and social justice and COVID-19. The pandemic has cast a brighter light on how continuing inequities in income, education and access to health and social services inordinately affect Black, Indigenous and People of Color community members. As the pandemic has progressed, it has become clear that vulnerable members of our community were more at risk for infection, hospitalization, and death.

PeaceHealth [took a closer look](#) at data from our Clark County facilities from 2019-2021. We found that while only 6.4% of patients served identified as Latinx, the percentage of patients testing positive for COVID-19 who identified as Latinx was nearly 3 times that rate at 18%. At Southwest Medical Center, patients identifying as Latinx were hospitalized at a rate higher than their population size and compared with all other racial and ethnic minority groups.

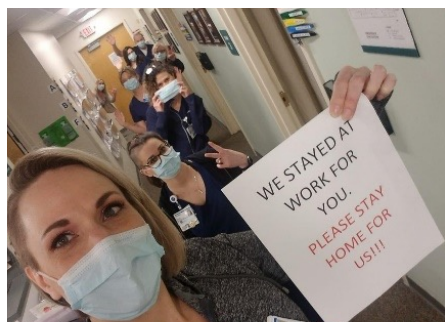
## COVID-19 VACCINATION EFFORT

### Bridging the gap in our community

Our PeaceHealth physicians have heard this need and have played an essential role in talking with the community about creative solutions for care. This includes support to mitigate the impacts of COVID-19 and increase access and outreach for vaccine education.

PeaceHealth partnered with several community organizations to host three COVID testing events in August 2020 and three vaccination events in March 2021. PeaceHealth funded the events in partnership with the PeaceHealth Southwest Medical Center Foundation.

Each event served 300 to 500 people who also received food and COVID education. More than 4,000 pounds of food were distributed. Other sponsors included SWACH, LULAC, NAACP Vancouver, Bridgeview Resource Center, Odyssey World International Education Services, Sea Mar Community Health Centers, Vancouver St. Vincent de Paul Society Food Pantry, Providence Health & Services, Kaiser Permanente Northwest, Southwest Washington Community Foundation, Clark County Health Department and Clark County Food Bank. PeaceHealth Urgent Care hosted the vaccinations.



### COVID-19's disproportionate impact

**6.4%**

of total patients identifying as Hispanic/Latinx

**18%**

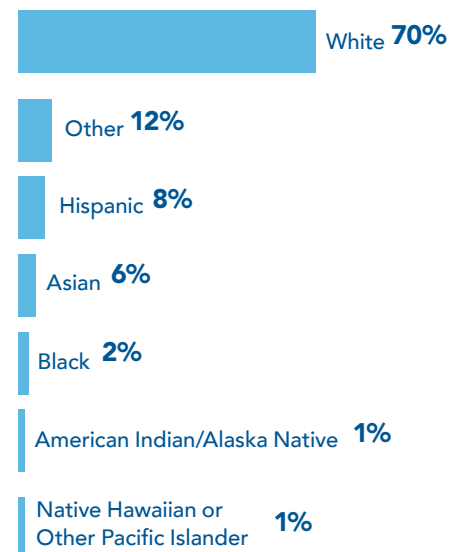
of patients testing positive for COVID-19 from Hispanic/Latinx population

Source: PeaceHealth

### Percent of fully vaccinated population, by race and ethnicity

**55.3%**

of Clark County is fully vaccinated, and of those



Source: [Washington State Department of Health COVID-19 Data Dashboard](#) (As of 11/22/2021)

## COVID-19 CULTURALLY RESPONSIVE OUTREACH

The COVID-19 pandemic has made the health disparities that people of color experience more visible in our county, state, and nation. These gaps are due to structural flaws in our systems of healthcare, education, employment and housing.

Culturally representative organizations supporting our Latinx community report providing aid to more than 1,100 undocumented families impacted by COVID-19. These families lack access to healthcare and employment rights, financial access to subsidies, or support for joblessness, and also have a profound lack of trust in systems that could support those needs.

To help address systemic access and trust barriers, several culturally-specific community organizations—including the Southwest Washington Equity Coalition, LULAC, NAACP Vancouver, Pacific Islander Community Association of Washington and the Cowlitz Tribe—have deployed culturally and linguistically appropriate outreach, education, and access to COVID-19 vaccines. Their work focuses on neighborhoods where Black, Indigenous and People of Color experience housing insecurity and unequal access to medical care.

In addition, PeaceHealth is one of the founding members of the Oregon-Washington Slavic Health Workgroup that has been working on COVID-19 vaccination outreach since May 2021. The workgroup has more than 60 members from multiple public health departments, health systems and nonprofits serving the Slavic community in Oregon and Washington. This group has met biweekly since April 2021 to share resources about Slavic-specific COVID-19 outreach efforts.

We continue to support our engagement in partnerships such as the Southwest Washington Equity Coalition and Southwest Washington Accountable Community of Health in order to break down systemic barriers to care. This includes supporting the pursuit and acquisition of a \$1 million Health Resource Services Administration grant to mobilize culturally-appropriate, community-based workforce efforts to increase COVID-19 vaccine access, education and engagement. The effort plans to add an additional 10 community-based workers to conduct outreach to socially vulnerable communities.

In addition to the impacts of COVID-19 on Black, Indigenous and People of Color, we have seen other challenges in our community. There is an urgent need to address the workforce shortfall for all areas of social service and health care, improve the provider pipeline and establish more community care options. To meet growing care needs, it has never been more important for us to collaborate with our community partners as we expand community-based care options, referral networks and alternative care practices.

**“As our population ages, there is a greater need for healthcare. We face an even bigger challenge recruiting providers to work in our most remote communities in Southwest Washington. We must work together to address workforce challenges that we face as a community.”**

– Meghan McCarthy, System Director of Community Health, PeaceHealth



**OUR FOUR PILLARS OF COMMUNITY HEALTH**

Our four pillars of community health ensure that we are partnering to create a healthy community beyond the walls of our medical center and clinics. Across these pillars is the awareness of our solemn responsibility to care for the most vulnerable and underserved people in our communities while promoting diversity, equity and inclusion in everything we do.

**BRIDGING THE GAP IN OUR COMMUNITY**

Our priority is to provide the best care possible to our entire community. In order to do this, we need to provide an equitable system of support that recognizes needs, focuses on overcoming barriers and builds resiliency for key segments in our community, including:

- Low-income households and children living in poverty
- People experiencing homelessness
- People experiencing food insecurity
- Black, Indigenous and People of Color communities
- Individuals with mental health or substance use conditions



**HOME**

Improve access to service-enriched housing



**HOPE**

Increase education, access to treatment and prevention of dependence



**CARE**

Expand knowledge, access and engagement with community caregivers



**NOURISH**

Address food insecurities to enhance family and child well-being



# Primary care for the unhoused

## Help delivered in supportive housing

Over the past decade, the vacancy rate of rental properties has fallen in Clark County. For many years, the rental vacancy rate has been 1% or lower with available rental housing in the spring of 2021 at just 0.8%, the fourth lowest in the state of Washington. The state average for rental housing during the same time period was about 4%, while the national average was 5.8%.

In Clark County, there is significantly more need for low-income housing than there is housing available. Currently the waiting list for low-income vouchers is closed, with only 2,800 vouchers available for the entire community. There are currently 1,745 households on the voucher waiting list, 806 of which have children under the age of 18. [Of all renters in Clark County](#), 44% are cost burdened, meaning more than 30% of their income goes to housing costs. Nearly 24% are severely cost burdened, meaning more than half of their monthly income is spent on housing.

In the 2020 Point in Time Count by the Washington State Department of Commerce, there were 916 homeless individuals in Clark County including 516 unsheltered, according to the Council for the Homeless. In 2020, the Council-coordinated entry program for Clark County reported 3,972 households who were homeless, including 6,359 individuals. Twenty-six percent were under the age of 18; 37% identified as Black, Indigenous and People of Color; and 65% reported they were newly homeless. People of Color are significantly more likely to experience poverty and homelessness in Clark County.



### Housing realities of Clark County, 2020

**44%**  
cost-burdened renters

**24%**  
severely cost-burdened renters

**0.8%**  
rental vacancy rate

**88**  
transitional housing beds

**232**  
year-round emergency shelter beds

**384**  
rapid rehousing units

**673**  
permanent supportive housing units

Source: [Clark County Housing Options Study and Action Plan](#)  
Source: [CFTH-2021 Housing Inventory Chart](#)

### THE COMMUNITY SPOKE—AND WE LISTENED

While providers of housing are working to find solutions and Project HOPE is a start, we know in Clark County there is still a significant need for:

- Shelter beds or innovative programs to house the unhoused
- More low-income housing units
- New workforce housing to support the growth of business economy

**“We cannot end homelessness in Clark County without addressing the systemic racism that leads to disproportionately higher rates of homelessness within the BIPOC community when compared to the percentage of representation in the general Clark County population.”**

– Kate Budd, Former Executive Director, Council for the Homeless (Source: [Columbian](#))

## PROJECT HOPE (HOUSING OUTREACH AND PRIMARY CARE EXPANSION)

PeaceHealth collaborated with the Southwest Washington Accountable Community of Health, Share of Vancouver, Vancouver Housing Authority, Oregon Health & Science University to provide onsite primary care to residents in one permanent supportive housing location.

This program has served 31 individuals experiencing chronic homelessness, many of whom have struggled with long-time medical and mental health diagnoses and substance use disorder. Individuals served by Project HOPE had previously not accessed health care due to travel barriers to appointments, a lack of trust in the health care system and the stigma often felt by individuals who are unhoused. Participants averaged four diagnosed chronic medical conditions at the inception of the program.

Our partnership and pilot program sought to address these issues and engage residents in their own healthcare by providing care at the supportive housing location. Partially funded by Southwest Washington Accountable Community of Health Medicaid Transformation dollars, PeaceHealth provided on-site physician services four hours a week along with support from a research assistant, housing case managers, pharmacists and behavioral health case managers—all provided by program partners at the supportive housing location.

At the start of the program in October 2020, the PeaceHealth physician sought to build trust with residents, providing basic care and outreach in an informal atmosphere. As the program progressed, patients became more trusting and began to schedule appointments—in many cases for chronic conditions that had been untreated for years. Thirty-one individuals were served in the first year of the pilot, 67% with active mental health diagnoses and 78% had an active substance use disorder. During the first year of operation, residents increased visits with primary care by 200% compared to data prior to the program and 78% of residents established care with the physician on site.

**“The Project HOPE Clinic has been a true gift to some of the most vulnerable people in our community. The clinic is a space where our clients can access lifesaving medical care with dignity and self-determination. People who previously went nearly entirely without medical care now have access in their own homes to services like preventative care, management for chronic health issues, and health care coordination. We really appreciate that needed service.”**

– Amy Reynolds, Deputy Director, Share of Vancouver

### People experiencing homelessness by the numbers, 2020

**3,972**  
homeless households,  
**6,359**  
people\*

**913**  
homeless families\*

**3,194 (50%)**  
female or non-binary\*\*

**1,272**  
homeless seniors (55-70)\*\*

**1,661**  
homeless children under 18\*\*

**3,323**  
households called the housing hotline\*\*

**2,378**  
(37%) of homeless identified as Black, Indigenous and People of Color\*\*

\*Source: 2020 Point in Time Count, Washington State Department of Commerce

\*\*Source: [CFTH-2020 Systems Number Report](#)



At the end of the first year, residents have reported feeling positive about their experience. They “have been heard” by their doctor, have less fear of stigma and have established trust to feel safer accessing healthcare. The physician and case managers felt that the continuum of care was greatly improved with stronger connections to emergency room services and medical specialists when needed to support residents. The physician and pharmacist also observed better chronic disease management. We are still compiling data from the first year of operation and see Project HOPE as a low-cost, high-impact program to continue as we seek to care for the needs of the chronically ill and unhoused. Final program evaluation and planning for future expansion is just beginning.

**KEY BENEFITS**

- Provides a non-judgmental environment for social services and care.
- Upholds the dignity and respect of each individual through robust wraparound services.
- Breaks down barriers to engagement by meeting individuals where they are.

**First year progress for Project HOPE**


**31**  
individuals served

**67%**  
mental health diagnoses

**78%**  
substance use disorders

**200%**  
increase in primary care visits

**78%**  
of residents established physician care

 **HOME - Community priorities:  
Creating affordable housing**

PeaceHealth looks forward to working with both public and private partners to address the critical housing needs in Clark County with a focus on increasing the inventory of shelter beds and low-income housing units.

In the late summer of 2022, Mercy Housing Northwest will open 69 affordable apartment homes near the PeaceHealth Southwest Medical Center campus. The apartment homes are currently in construction on land donated by PeaceHealth. We hope to expand this partnership in the future with Mercy Housing Northwest and other providers of housing in the region.

We will also focus advocacy efforts in support of the economic need to increase availability of affordable housing and shelter beds in Clark County.





# Support when it is needed most

## Community programs inspire hope

Clark County has struggled with substance use along with the rest of the state and the nation. In 2021, 14% of county adults smoked compared to 12% in Washington state.

In November 2021, Clark County Public Health published new information warning of a significant increase in opioid overdose deaths due to fentanyl, up 200% from 13 deaths in 2019 to 39 deaths in 2020.

Like many other health-related concerns, Substance Use Disorder (SUD) and behavioral health needs of our community increased over the past two years during the COVID-19 pandemic. According to the New York Times, drug overdoses grew 30% nationally in 2020 to a record high of 93,000 deaths—with pronounced increases on the West Coast. There has been a significant increase in deaths related to synthetic (non-prescribed) fentanyl, all opioids (prescriptions/heroin) and stimulants like methamphetamine.

According to research by the University of Washington Drug and Alcohol Institute, overdose deaths have climbed by 37% in our state. The largest contributor to this increase was from fentanyl and other illegal drugs.

### The opioid crisis in our community and state, 2020-2021

**37%**

increase in Washington state overdose deaths, 2020

*(Source: University of Washington Drug and Alcohol Institute Washington state)*

**15%**

of all Washington state deaths are drug overdoses

*(Source: WA DOH Opioid Overdose Dashboard)*

**200%**

increase in Clark County opioid deaths, 2021

**14%**

of Clark County adults smoke tobacco

**33%**

of 12th graders have used alcohol in the past 30 days

*(Source: 2019 Healthy Youth Survey)*

### THE COMMUNITY SPOKE—AND WE LISTENED

We know there is a need for behavioral health and Substance Use Disorder treatment in Clark County. Our efforts have focused on building systemic supports for children, youth and adults to further increase access to services and coordinated systems for prevention, treatment and recovery.

### OPIOID TREATMENT NETWORK

PeaceHealth Southwest Medical Center, in partnership with Lifeline Connections, received a grant from the Washington State Department of Health to create a low barrier medication-assisted treatment (MAT) program for patients suffering from Opioid Use Disorder. This includes individuals abusing or addicted to both heroin and prescription narcotics. PeaceHealth and Lifeline have operated the program for three years—and each year the program has grown. It now includes resources and treatment options for individuals with Stimulant Use Disorder—who use methamphetamine and similar substances—as well as treatment for Alcohol Use Disorder.

Lifeline provides PeaceHealth with an onsite opioid educator and peer support specialist who are available to meet with patients in the hospital when they present for care and express interest in treatment. Typically, when individuals are struggling with substance use and are ready to discuss entering treatment, there is a very small window of opportunity to engage them in services. This program has allowed PeaceHealth patients on-site initiation of treatment and a warm handoff to the treatment provider, increasing the likelihood of treatment success.



PeaceHealth Caregiver provides assistance at Project Homeless Connect

In the past three years, the Opioid Treatment Network has served 504 patients with their substance use treatment needs and has also addressed their food, housing, transportation and other needs to ensure care is provided for all trauma or challenges a patient is experiencing.

## PANDEMIC'S TOLL ON YOUTH

In March of 2021, the University of Washington in partnership with the Washington State Health Care Authority, Office of Superintendent of Public Instruction and Washington State Department of Health, surveyed more than 32,000 high school students in grades 9-12 across Washington State for the [COVID-19 Student Survey](#).

The results were staggering and sobering: more than 17.2% of high school students reporting they have seriously considered attempting suicide. These statistics reflect the urgency with which we need to strengthen our mental health support for youth.

We have heard from our community partners that children and young adults have struggled with their mental health due to the isolation and stress of the pandemic. We do not yet have local data to support these concerns, but we know that research over the next two to five years will help us better understand the impact on some of our most vulnerable community members. We have a close connection to local school districts and youth and family organizations, and we will continue to work side by side with them to support behavioral health needs in our community.

## Clark County behavioral health by the numbers, 2019-2021

**8th**

leading cause of death in Washington is death by suicide

(Source: [www.afsp.org/statistics](http://www.afsp.org/statistics))

**16%**

age-adjusted suicide rate per 100,000 individuals

(Source: [www.afsp.org/statistics](http://www.afsp.org/statistics))

**88%**

of Washington communities without enough mental health providers

(Source: [www.afsp.org/statistics](http://www.afsp.org/statistics))

**58%**

12th graders unable to stop or control worrying

(Source: [2019 Healthy Youth Survey](#))

**22%**

12th graders considered attempting suicide, 2018

(Source: [2019 Healthy Youth Survey](#))



## KEY BENEFITS

- Opioid educator provides on-site direct program enrollment.
- Peer support specialist provides on-site support in time of crisis.
- Community connectedness and vital handoffs to community organizations.



## HOPE - Community priorities: increased access for all

In addition to the well-established programs in our community, there is a need for increased access to mental health and substance use disorder treatment. We will continue to work collaboratively to bring these needed supports to our community.

We fully support community efforts underway to provide mental health crisis services for children and teens and to strengthen behavioral health services for individuals. We will partner to ensure new programs are developed to address these needs and others over the next three years.

**“No one is immune from addiction. It affects people of all age, races and families. The Opioid Treatment Network offers support to individuals suffering with addiction. With the goal of starting where you are and doing what you can, we support all participants in working towards becoming the best versions of themselves.”**

– Jaimee Maves, MSW, OTN Program Coordinator, PeaceHealth



# Holistic care for vulnerable youth

## Wraparound support services for foster youth

Preventive, holistic care happens in many settings and the demand is high. Our partnerships with YWCA of Clark County, Southwest Washington Accountable Community of Health, Lifeline Connections and other organizations reach deep into our communities to engage individuals and families in their everyday lives, addressing social, economic and behavioral needs that impact their health.



This is especially true for individuals who are in transition: leaving jail or prison, exiting substance use treatment, transitioning from inpatient mental health services or exiting the foster care system as young adults. Each of these transitions has the potential to end in homelessness if community members do not have access to the resources they need to successfully move into their new living situation.

Our goal is to help create supportive environments and relationships where vulnerable community members can develop vital skills and community relationships. These can help them meet their needs for housing, transportation, health care, food and other daily necessities critical to their health and well-being.

Many individuals in Clark County have struggled to meet their needs due to disability, low income, marginal housing, or struggles with mental health and substance use disorder. Individuals dealing with these issues often struggle to maintain their health and well-being, leading to the development of chronic diseases or frequent visits to the emergency department or hospital for care.

According to the [National Foster Youth Institute](#), one out of every four foster youth will become homeless within four years of aging out of foster care. In addition, 50% of the homeless population has spent time in foster care. For these vulnerable young adults who have experienced trauma, lack of support for safe housing, nutrition and emotional well-being needs can significantly and negatively affect their ability to find employment, maintain their health and establish healthy relationships.

**“ The abuse Mark experienced as a child led to anger and challenging behaviors in his teen years. As he grew up in the foster care system, Mark struggled and eventually became homeless. His Independent Living Skills (ILS) advocate helped him obtain his birth certificate and social security cards, which he needed to be able to move forward with his life. Mark found an apartment with some friends, but unfortunately, they had access to family supports he didn’t, and they moved out without paying rent, which led to an eviction. Mark worked with his ILS advocate to gain steady employment, pay off his debt, and open a bank account. With assistance from his advocate, he was approved for a housing voucher and moved into a place on his own, that ILS helped him furnish. Mark aged out of foster care when he turned 21, but decided to work towards his diploma. The ILS Program has been a consistent source of support in his life. He further reached out to his ILS advocate for help getting connected to a doctor and dentist who will be covered by his insurance—something he had never done before. Mark has been empowered to take control of his life through the support of ILS and has long-term goals of pursuing a career working with children.”**

--Vanessa Yarie, Deputy Director, YWCA of Clark County

## THE COMMUNITY SPOKE—AND WE LISTENED

Community-based organizations have requested stronger connections be established between sectors to ensure all who seek services receive the supports they need. Community health workers, peer supports, and community health advocates are the key to creating these connections.

In an effort to address whole person care, PeaceHealth Southwest supported the YWCA of Clark County's Independent Living Skills Program for young adults exiting foster care in Clark County. PeaceHealth funded the YWCA of Clark County Independent Living Skills (ILS) program from July 2019 to June 2021. The ILS program helps youth and young adults successfully transition from state-supported foster care to independent living through education, resources, and advocacy that empower program participants to define and achieve their goals.

PeaceHealth's support allowed ILS program leaders to improve foster youth's mental, emotional, behavioral, and physical health by increasing emergency assistance funds and program staff. In the 24 months funded by PeaceHealth, ILS advocates served 141 young adults with one-on-one case management, group meetings, resource referrals, and rent and food assistance.

Together PeaceHealth and ILS have made an immediate, positive impact on vulnerable foster youth in Clark County. Teens and young adults heading out on their own consistently encounter barriers to success including limited access to affordable healthcare, housing, lack of rental and employment history, and low financial literacy skills. The partnership with PeaceHealth allows ILS staff to tackle these barriers head-on and propel youth onto a path of healthful living as contributing community members and global citizens.



## CARE – Community priorities: Supporting the whole person

The need for community health workers, advocates and peer supports is evident to address individual needs that are not addressed by healthcare, but impact health. We are committed to continuing to work with our community providers to add new community health worker positions in support of care for the whole person.

We recognize that one size does not fit all for our community. We seek to support and partner with organizations who will meet the specific needs of our priority populations: disabled, elderly, BIPOC, and children to reduce healthcare disparities through advocacy and individual empowerment outside of traditional healthcare settings.

## QUOTES FROM INDEPENDENT LIVING SKILLS (ILS) PARTICIPANTS:

**“ I like that you [ILS] help us find jobs. I think it should be for everybody. It helps you connect with community and people.”**

**“ I have never doubted for a minute that my ILS advocate cares about me and wants what's best for me.”**

**“ ILS helps you learn what you need to do, and you have fun in the mix.”**

## KEY BENEFITS

- Works to eliminate barriers to accessing social determinants of health resources for vulnerable community members.
- Promotes improvements in communication and collaboration between community support service organizations.
- Encourages development of a community health advocate model to build access to care.



# Improving access to healthy foods

## Nourishing those in need

Access to healthy affordable food is central to the health of all community members. We are called to improve access to healthy food for all—not just because we believe everyone should have access to nutritious food, but because food insecurity has a negative lifetime impact. There is a clear connection between food insecurity and chronic nutrition-related diseases like diabetes, obesity and heart disease. Improving access to healthy food can support good health and prevent chronic disease for everyone.

The COVID-19 pandemic erased decades of progress in reducing food insecurity. In 2018, [an estimated 1 in 9 Americans](#) was food insecure—or more than 37 million people, including more than 11 million children. That number peaked in 2020 and still has not returned to pre-pandemic levels.



Clark County food bank participant picking food

### THE COMMUNITY SPOKE—AND WE LISTENED

We are partnering with BIPOC community organizations and food banks to expand access to healthy foods for community members.

We are creating connections with local food sustainability coalitions to address upstream barriers to fresh produce.

### Clark County Food Access

**8.4/10**

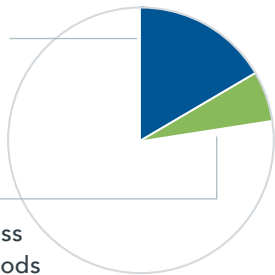
Food Environment Index  
in Clark County

**10%**

Food  
insecurity

**5%**

Limited access  
to healthy foods



Source: [Clark County, Washington | County Health Rankings & Roadmaps](#)

A food environment index indicates access to healthy foods by considering the distance someone lives from a grocery store or supermarket, locations for healthy food purchases in most communities and the inability to access healthy food because of cost barriers. The Food Environment index ranges from a scale of 0 (worst) to 10 (best) and equally weights two indicators of food environment: 1) limited access to healthy foods, and 2) food insecurity.

In 2019, Feeding America, a national expert in food insecurity, reported that 48,070 individuals in Clark County were food insecure. That equates to 10% of the total Clark County population. In 2019, 10.4% of the population in Washington state was food insecure compared to 10.9% nationally. It is projected that the number of food insecure individuals in the United States increased to 13.9% in 2020 and 12.9% in 2021 and 11.4% in Washington state. Feeding America predicts 1 in 8 individuals and 1 in 6 children will experience food insecurity in 2021.

Food insecurity is caused by an individual or family not having the resources to meet their basic needs. Many households experience periodic food insecurity while they struggle with multiple factors including lack of access to affordable

housing, healthcare, and a living wage. Often households have to make difficult choices between purchasing food or paying other bills.

Not all people who experience food insecurity live below the poverty line. Of the 10% of individuals in Clark County that are food insecure, only 63% qualify for the Supplemental Nutrition Assistance Program (SNAP), formerly known as the Food Stamps Program. The other 37% of food insecure individuals do not meet the low-income requirements to qualify for assistance and must find food in other ways.

### PROMOTING ACCESS TO HEALTHY AND CULTURALLY SENSITIVE FOODS

PeaceHealth has partnered with many organizations to address hunger over the past three years, investing \$440,600 in support of Clark County Food Bank, Vancouver Farmers Market, YWCA, LULAC and Meals on Wheels People to support food distribution; access to fresh, culturally-specific produce; cooking classes and nutrition education programs.

### SUPPORT FOR INDIVIDUALS LEAVING THE HOSPITAL

Starting in July of 2020, PeaceHealth Southwest Medical Center established a partnership to expand the Meals on Wheels program provided by Meals on Wheels People to meet the short-term nutrition needs of food insecure patients as they are discharged from the hospital. Patients who express interest receive 90 days of home-delivered meals after they leave the medical center.

This partnership has allowed PeaceHealth and Meals on Wheels People to serve patients in Southwest Washington of all ages who need high quality nutrition to recover from an illness. Typically, individuals need to be 60 years of age or older to qualify for one meal a day from Meals on Wheels. Our program has allowed us to increase access to anyone leaving a PeaceHealth Hospital in Southwest Washington and provide them with two meals each day.

By fall 2021, 88 patients had been served at the time of discharge from the hospital, with a significant reduction in emergency department visits and inpatient readmissions for enrolled patients compared to the previous 12 months. The first 17 months of data show only 46 emergency room visits and 22 hospital readmissions for patients 90 days after enrolling in the program. That compares to 215 emergency room and 114 hospital readmissions for patients the year prior to enrolling in the program. As the pilot continues, we will measure annual data to confirm success and potential continuation and expansion of the program.

**PeaceHealth funded programs, helping to feed Clark County**

**212,000**  
food boxes distributed

**130,658**  
additional lbs. of food distributed

**14,000**  
individuals served

*Source: Clark County Food Bank and LULAC*



*Meals on Wheels People volunteer*

#### QUOTES FROM MEALS ON WHEELS PEOPLE PARTICIPANTS:

- “ I’m so grateful for Meals on Wheels People. I love the friendly chats with the volunteers. They help me stay connected since my wife passed away. I don’t know what I would do without them. I hope I never have to find out.”
- “ My 92-year-old grandmother has been receiving Meals on Wheels once it became difficult for her to shop and cook for herself on the daily basis. It has been such an incredible gift. Without these meals, I know she would go hungry. I’m grateful to the organization and all the volunteers that keep this going and ensure seniors are being fed.”
- “ I like the gravy and scalloped potatoes. The protein is good. I really appreciate the milk. I appreciate the service. It is helpful to me. The people who deliver the meals are so nice.”
- “ I appreciate you all very much. You’re kind, compassionate, helpful. Without your help with food, I would go without food for the last 2-3 days of the week.”
- “ God bless all the people who do this for so many. This is the only square meal I get all day. I would be lost without them.”
- “ Staff and volunteers are amazing. My diet is so much better with your service and I never go hungry.”

#### KEY BENEFITS

- Improves access to local food sources and education has increased.
- Supports healthy eating habits and food choice empowerment for individuals and families.
- Decreases hospital emergency room visits and repeat hospital admissions.



### NOURISH – Community priorities: Getting food where it’s needed

Access to healthy food has improved in the past two years due to the local and federal COVID response funds, but we still have work to do. We will continue to partner with local food banks and BIPOC community organizations to improve access for individuals in need. We will conduct research and identify opportunities to advocate for public policy changes at the local, state, and federal level to improve the supports available to food insecure individuals.



# Final thoughts

## For times ahead

Our Community Health Needs Assessment process holds us accountable to listening and learning from our communities. PeaceHealth recognizes that our work is far from over. The needs are forever evolving—and so are we.

We are humbled and honored to serve and learn from our communities. We pledge to continue our collaborative work, standing beside our partners during these challenging times. We invite you to join us in our pursuit of health justice for all.

**TOGETHER WE WILL BUILD THE FUTURE.**