Jewish Home & Rehab Center at the San Francisco Campus for Jewish Living

Community Benefit Plan FY2020

Responding to the 2019 CHNA

The following Implementation Strategy serves as the 2019 – 2022 Community Benefit Plan for Jewish Home & Rehab Center at the San Francisco Campus for Jewish Living. It is respectfully submitted to the Office of Statewide Health Planning and Development on 1/18/2021.

Community Benefit FY20:

The Jewish Home & Rehab Center at the San Francisco Campus for Jewish Living and many other hospitals around the country voluntarily subscribe to a common definition of community benefit developed by the Catholic Health Association. Community Benefits are programs or activities that provide treatment and/or promote health and healing as a response to community need.

Operating as a very small specialized geriatric psychiatry hospital unit of the Jewish Home & Rehab Center at the San Francisco Campus for Jewish Living, its main contribution to community benefit is through serving as a training site for various health professions and psychiatry students.

Staff spend time training students and coordinating various learning opportunities focused on increasing the number of health care professionals who are trained to work with geriatric psychiatric patients. Students are exposed to realities that older adults face such as limited financial means and mobility challenges in the community, which can lead to isolation. Additionally, staff is involved with community education and engagement activities to share knowledge and empower those living with and or caring for an older person.

These educational and community engagement experiences provide an opportunity to dispel stigmas/stereotypes about older adults in general. Participants learn what is and what isn't part of the "normal aging process" and are provided insight into older adults experiencing psychiatric/psychological challenges.

In FY20, Jewish Home & Rehab invested a total of \$17,200 on employee labor and supplies to implement the community benefit programs outlined in the Implementation Strategy below as well as community benefit operations costs. The economic value of all community benefit is reported at cost using a cost accounting methodology. Restricted offsetting revenue for a given activity, where applicable, is subtracted from total expenses to determine net benefit in dollars.

See program grids starting on page 5 for outcomes data.

2019 - 2022 Implementation Strategy

Introduction & Purpose

Jewish Home & Rehab Center at the San Francisco Campus for Jewish Living, which operates a nonprofit acute geriatric psychiatry hospital, is pleased to share its Implementation Strategy. This document follows the completion of its 2019 Community Health Needs Assessment (CHNA). In accordance with requirements in the Affordable Care Act and IRS 990 Schedule H requirements, this plan was reviewed by the Board and approved by a designated representative on March 25, 2020.

This report summarizes the plan to develop and/or collaborate on community benefit programs that address at least one of the prioritized health needs identified in the 2019 CHNA. The prioritized health needs include:

2019 CHNA Prioritized Health Needs

- Priority 1: Access to coordinated, culturally and linguistically appropriate care and services*
- Priority 2: Food security, healthy eating and active living
- Priority 3: Housing security and an end to homelessness
- Priority 4: Safety from violence and trauma
- Priority 5: Social, emotional, and behavioral health

Jewish Home & Rehab Center at the San Francisco Campus for Jewish Living

Mission

Enriching the quality of life of older adults.

Vision

To become a regional resource as an integral part of a continuum of care throughout the Bay Area that provides senior adults with a variety of life enriching programs and services that are accessible, promote individual dignity, encourage independence, connect them to their community, and reflect the social, cultural, and spiritual values of Jewish tradition.

The Jewish Home & Rehab Center at the San Francisco Campus for Jewish Living is a nonprofit organization that includes three specialized units:

- Short-Term Rehabilitation Units
- Alzheimer's Garden Unit
- Acute Geriatric Psychiatry Hospital (DBA Jewish Home & Rehab Center)

The hospital is a licensed 13-bed gero-psychiatric inpatient unit devoted to providing behavioral health services exclusively designed for older adults suffering from acute psychiatric disorders. These patients in acute psychiatric crisis require a safe environment, a structured and supportive social milieu, and an effective treatment program. Through an interdisciplinary team approach the hospital accesses different professional and skill groups in real time and are thus able to respond rapidly to patients' changing needs. The small size of the program allows the hospital to truly individualize care to support the health and goals of the patient.

^{*}Abbreviated as "Access to Care and Services" in remainder of document

The hospital addresses the needs of the whole person, not just their psychiatric or mental illness. The following services are offered:

- 24-hour nursing care and services
- Medical assessment and continuing care by geriatricians
- Physical, occupational and speech therapy evaluations
- Daily appointments with specially trained geriatric psychiatrists for therapeutic intervention, as well as medication management
- Recreation therapy to support emotional wellbeing and coping skills
- Social work services to encourage stability during the patient's stay, as well as their continued care and community connection upon discharge

Additionally, the social work team's responsibilities extend beyond the patient, connecting with the patient's family and friends, case manager, and outside medical providers. The social work team gathers the patient's past hospitalization records, medical data, and collateral, so that the interdisciplinary group has the most accurate information.

During a patient's stay, the hospital team collaborates with other community-based providers on a steady basis — from communicating prior to admission with medical professionals and outpatient services received in the past, to making sure patients are discharged with the highest level of services available to them. The social services department connects patients with outpatient services, including (but not limited to) partial hospital programs, intensive outpatient programs, home health services, housing services, medical appointments, psychiatric referrals, therapy services, and transportation services, as well as community programs such as senior centers and socialization programs.

CHNA Overview

The City and County of San Francisco CHNA is conducted by the health department and overseen by the San Francisco Health Improvement Partnership (SFHIP), a multisector collaboration that includes San Francisco Hospitals. The most recent CHNA, completed in May 2019, serves as the common basis for all San Francisco Hospitals, including Jewish Home & Rehab Center at the San Francisco Campus for Jewish Living.

Jewish Home & Rehab Center at the San Francisco Campus for Jewish Living has supplemented the SFHIP CHNA with its own assessment of needs due to the highly specialized population served by the hospital. It also takes into consideration that many of the patients served the hospital come from geographical areas outside of San Francisco. Jewish Home & Rehab Center at the San Francisco Campus for Jewish Living enhanced its own knowledge and understanding of community needs beyond the SFHIP CHNA through the completion of a literature review focused on older adult populations and by conducting key informant interviews with local experts. Collectively, the interview participants have extensive experience and a long history of serving older adults with mental health disorders across the socioeconomic spectrum. This includes people of all genders and from all racial/ethnic backgrounds.

Jewish Home & Rehab Center at the San Francisco Campus for Jewish Living engaged with Facente Consulting to assist with the literature review, key informant interviews, and preparation of the supplemental CHNA. Kaiser Permanente and UCSF, two partners of this hospital also collaborated on the needs assessment.

Implementation Strategy Design Process

Jewish Home & Rehab Center at the San Francisco Campus for Jewish Living contracted with Conduent Healthy Communities Institute (HCI) to facilitate the Implementation Strategy process. HCI convened the hospital's leaders to review the priority health needs identified during the CHNA process and come to agreement on an Implementation Strategy outline.

Taking into consideration input from the key informant participants from the community in the CHNA process and its own resources and expertise, Jewish Home & Rehab Center at the San Francisco Campus for Jewish Living used an inventory of existing and planned programs to narrow its focus to addressing Access to Care and Services. Leaders from Jewish Home & Rehab Center at the San Francisco Campus for Jewish Living then worked with HCI to complete this report.

Implementation Strategy

The Implementation Strategy outlined on the following pages summarizes the strategies and activities that will be taken on by Jewish Home & Rehab Center at the San Francisco Campus for Jewish Living to address Access to Care and Services, which was identified as a priority in the CHNA process.

The following components are included in the program grids below:

- Actions the hospital intends to take to address the health need identified in the CHNA
- Anticipated impact of these actions
- Outcome measures for each activity
- Resources the hospital plans to commit to each strategy
- Any planned collaboration to support the work described

It should be noted that no one organization can address all the health needs identified in its community. Jewish Home & Rehab Center at the San Francisco Campus for Jewish Living is committed to serving the community by adhering to its mission, and using its skills, expertise and resources to provide a range of community benefit programs to address Access to Care and Services. Due to limited resources and/or expertise, this Implementation Strategy does not include specific plans to address other prioritized health needs including: Food Security, Healthy Eating and Active Living; Housing Security and an End to Homelessness; Safety from Violence and Trauma; Social, Emotional and Behavioral Health.

COVID-19 Considerations

The COVID-19 global pandemic declared in early 2020 has caused extraordinary challenges for health care systems across the world including the Jewish Home & Rehab Center's acute psychiatric hospital. Keeping front line workers and patients safe, securing protective equipment, developing testing protocols and helping patients and families deal with the isolation needed to stop the spread of the virus all took priority as the pandemic took hold.

Some of the community benefit strategies noted in this implementation strategy have been temporarily paused or adjusted to comply with current public health guidelines to ensure the health and safety of those participating.

Jewish Home & Rehab Center at the San Francisco Campus for Jewish Living: Implementation Strategy Action Plan

PRIORITY: ACCESS TO COORDINATED, CULTURALLY AND LINGUISTICALLY APPROPRIATE CARE AND SERVICES

Goal Statement: Share knowledge and provide training in support of increasing psychiatric resources for older adults and dispelling the societal stigma associated with psychiatric need.

Objective: By June 30, 2022 train four geriatric psychiatry students

Strategy 1: Serve as a training site for future geriatric psychiatrists

Programs/Activities	Evaluation Measures	Data Source	Baseline	Outcomes Y1 July 2019 – June 2020	Outcomes Y2 July 2020 – June 2021	Outcomes Y3 July 2021 – June 2022
Activity 1.A) Didactic lectures and discussions on relevant patient diagnoses, treatments and medications	# of lectures	Internal		2 lectures held		
Activity 1.B) Internships	# of students	Internal		2 Geriatric Psych Fellows in place until March 2020 - program suspended due to pandemic		
Activity 1.C) Clinical review of patients with geriatric psychiatrists	# of clinical reviews	Internal		32 patient reviews conducted		

Anticipated Outcomes: More psychiatric resources available in Northern California

Target Population(s):

• Third year psychiatry students

Resources: (financial, staff, supplies, in-kind etc.)

- Year 1: Staff time to coordinate the program, physician time for classroom education, physician time for on the floor training with patients
- Year 2: Staff time to coordinate the program, physician time for classroom education, physician time for on the floor training with patients
- Year 3: Staff time to coordinate the program, physician time for classroom education, physician time for on the floor training with patients

Collaboration Partners:

- University of California, SF Department of Psychiatry
- California Pacific Medical Center Residency Program

PRIORITY: ACCESS TO COORDINATED, CULTURALLY AND LINGUISTICALLY APPROPRIATE CARE AND SERVICES

Goal Statement: Share knowledge and provide training in support of increasing psychiatric resources for older adults and dispelling the societal stigma associated with psychiatric need.

Objective: By June 30, 2022 implement a nurse internship program and train four nurses

Strategy 2: Develop and implement a nurse internship program

Programs/Activities	Evaluation	Data	Baseline	Outcomes Y1	Outcomes Y2	Outcomes Y3
	Measures	Source		July 2019 – June 2020	July 2020 – June 2021	July 2021 – June 2022
Activity 2.A) Develop internship program	Program	Internal	New	Developed psychiatric		
outline	Developed		Program	nursing core		
				competencies for		
				current employees		
				that will be		
				incorporated into		
				Nursing Internship		
				program. Placed on		
				hold due to pandemic		
				beginning 3/2020		
Activity 2.B) Educate hospital nurses in	# of nurses	Internal	New	Preceptor program		
formalized preceptor program	educated		Program	developed by JH		
				Nursing Education		
				Dept; one APU RN		
				attended preceptor		
				program		
Activity 2.C) Outreach and recruitment	# of		New	Placed on hold due to		
for possible nurse interns	outreach		Program	pandemic beginning		
	events			3/2020		
	# of interns					

Anticipated Outcomes:

• Nurse internship program in place and 4 nurses trained and working in the field of geriatric psychiatry

Target Population(s):

• Third year nursing students

Resources: (financial, staff, supplies, in-kind etc.)

- Year 1: Staff time to develop, promote and coordinate the program
- Year 2: Classroom training of interns, nurse time for training interns
- Year 3: Classroom training of interns, nurse time for training interns with patients

Collaboration Partners:

- San Francisco State Nursing School
- University of San Francisco

PRIORITY: ACCESS TO COORDINATED, CULTURALLY AND LINGUISTICALLY APPROPRIATE CARE AND SERVICES

Goal Statement: Share knowledge and provide training in support of increasing psychiatric resources for older adults and dispelling the societal stigma associated with psychiatric need.

Objective: By June 30, 2022 engage with five community organization to provide ten community outreach activities

Strategy 3: Provide community outreach to dispel stigma associated with psychiatric need

Programs/Activities	Evaluation	Data	Baseline	Outcomes Y1	Outcomes Y2	Outcomes Y3
	Measures	Source		July 2019 – June 2020	July 2020 – June 2021	July 2021 – June 2022
Activity 3.A) Research community	Research			No community		
outreach programs/events for the senior	Completed			outreach activities		
community				scheduled for 2020,		
,				unable to coordinate		
				due to pandemic		
				beginning March 2020		
Activity 3.B) Create outreach plan to	Outreach			N/A due to pandemic		
secure presentation opportunities at	plan in place			beginning March 2020		
public events focused on seniors/their						
caregivers						
Activity 3.C) Present educational	# of			N/A due to pandemic		
information	presentations			beginning March 2020		
	# of people					
	reached					

Anticipated Outcomes:

• Enhanced relationships with community organizations serving seniors and/or their caregivers, and increased availability of information to help dispel stigma associated with psychiatric need

Target Population(s):

• Seniors, their families and senior caregivers

Resources: (financial, staff, supplies, in-kind etc.)

- Year 1: Staff time for research and outreach plan
- Year 2: Staff time and materials for presentations and outreach efforts
- Year 3: Staff time and materials for presentations and outreach efforts

Collaboration Partners:

To be determined

PRIORITY: ACCESS TO COORDINATED, CULTURALLY AND LINGUISTICALLY APPROPRIATE CARE AND SERVICES

Goal Statement: Share knowledge and provide training in support of increasing psychiatric resources for older adults and dispelling the societal stigma associated with psychiatric need.

Objective: By June 30, 2022 expand current training options from one Social Worker and one Recreational Therapist to two Social Workers, two Recreational Therapists, and two Occupational Therapists

Strategy 4: Provide training to professionals in the areas of social work, recreational therapy and occupational therapy to increase services for older psychiatric patients

Programs/Activities	Evaluation	Data	Baseline	Outcomes Y1	Outcomes Y2	Outcomes Y3
	Measures	Source		July 2019 – June 2020	July 2020 – June 2021	July 2021 – June 2022
Activity 4.A) Program promotion and	Outreach					
outreach	plan in					
	place					
Activity 4.B) Classroom training	# of	Internal		2 SW interns interned		
	students			for 16 hours each per		
	trained /2			week from 1/2020-		
				3/2020 on the unit		
				1 recreational		
				therapist interned		
				from 1/2020 – 3/2020		
Activity 4.C) Floor training	# of	Internal		SW interns received 2		
	students			hours/wk of		
	trained/ 2			supervision per intern		
				by APU Director of SS		
				and Program Director		
				Recreational Therapist		
				intern		

Anticipated Outcomes:

• 2 social workers, 2 recreational therapists, 2 occupational therapists trained in caring for older psychiatric patients

Target Population(s):

• Students from community and regional educational institutions in the areas of social work, recreational therapy and occupational therapy

Resources: (financial, staff, supplies, in-kind etc.)

• Year 1: Staff time to promote and coordinate the program; staff/clinician time to train students

- Year 2: Staff time to promote and coordinate the program; staff/clinician time to train students
- Year 3: Staff time to promote and coordinate the program; staff/clinician time to train students

Collaboration Partners:

• San Francisco State University