Adventist Health Glendale
2022 Community Health Plan

The following Implementation Strategy serves as the 2020 – 2022 Community Health Plan for Adventist Health Glendale and is respectfully submitted to the Office of Statewide Health Planning and Development on May 19th, 2023 reporting on 2022 results.

Executive Summary

Introduction & Purpose

Adventist Health Glendale is pleased to share its Community Health Implementation Strategy for 2022. This follows the development of its 2019 Community Health Needs Assessment (CHNA) in accordance with requirements in the Affordable Care Act and IRS 990 Schedule H requirements and approved by the Adventist Health Board of Directors on October 17, 2019.

After a thorough review of the health status in our community through the community health needs assessment (CHNA), we identified areas that we could address using our resources, expertise and community partners. Through these actions and relationships, we aim to empower our community and fulfill our mission of "Living God's love by inspiring health, wholeness and hope."

The results of the CHNA guided the creation of this document and aided us in how we could best provide for our community and the vulnerable among us. This Implementation Strategy summarizes the plans for Adventist Health Glendale to develop and collaborate on community benefit programs that address prioritized health needs identified in its 2019 CHNA. Adventist Health Glendale has adopted the following priority areas for our community health investments.

- Health Priority #1: Poverty & Homelessness Including Mental Health & Substance Abuse
- Health Priority #3: Access to Medical Care
- Health Priority #4: Cardiovascular Diseases Including Stroke
- Health Priority #5: Preventive Wellness Including Diabetes
- Health Priority #6: Geriatric Support

Building a healthy community requires multiple stakeholders working together with a common purpose. We invite you to explore how we intend to address health challenges in our community and partner to achieve change. More importantly, we hope you imagine a healthier region and work with us to find solutions across a broad range of sectors to create communities that define the well-being of people.

The purpose of the CHNA was to offer a comprehensive understanding of the health needs in Adventist Health Glendale service area and guide the hospital's planning efforts to address those needs.

The significant health needs were identified through an analysis of secondary data and community input. These health needs were prioritized according to a set of criteria that included severity, change over time, resources available to address the need and community readiness to support action on behalf of any health need. Secondary sources include publicly available state and nationally recognized data sources available at the zip code, county and state level. Health indicators for social and economic factors, health system, public health and prevention, and physical environment are incorporated. The top leading causes of death as well as conditions of morbidity that illustrate the communicable and chronic disease burden across Los Angeles County is included. Data for this assessment was collected through US Bureau of Census, Nielsen Clarita's, California Disease Control and Prevention, California Department of Education, United States Department of Health and Human Services, California Office of Statewide Health Planning

and Development, California Department of Public Health, County Health Rankings & Roadmaps, Los Angeles Homeless Service Authority, American Heart Association, National Cancer Institute, Centers for Disease Control, and World Health Organization. When feasible, health metrics have been further compared to estimates for the state or national benchmarks, such as the Healthy People 2020 objectives.

Adventist Health Glendale worked to identify relevant key informants and topical focus groups to gather more insightful data and aid in describing the community. Key informants and focus groups were purposefully chosen to represent medically under-served, low-income, or minority populations in our community, to better direct our investments and form partnerships. The criteria listed recognize the need for a combination of information types (e.g., health indicators and primary data) as well as consideration of issues such as practicality, feasibility, and mission alignment.

For further information about the process to identify and prioritize significant health needs, please refer to the Adventist Health Glendale CHNA report at the following link:
https://www.adventisthealth.org/about-us/community-benefit/

Adventist Health Glendale and Adventist Health

Adventist Health Glendale (AHGL) is an affiliate of Adventist Health, a faith-based, nonprofit integrated health system serving more than 80 communities on the West Coast and Hawaii.

AHGL began as the Glendale Sanitarium opened in 1905, a year before Glendale was founded as a city. By the 1920s, it expanded its medical, surgical, and maternity services, and offered the most advanced medical equipment of the day. Given its growth, a 30-acre hillside was selected for a new hospital location. Overlooking Wilson Avenue, the new and expanded facility opened in the mid-1920s. The current hospital remains on this location today.

In the 1970s, the hospital's name changed to Glendale Adventist Medical Center (GAMC) and in the early 2000s, GAMC began a $220-million renovation and building project, which included the West Tower, the Emergency Department and the Lee Hughes Medical Building. In 2017, the hospital's name was changed to Adventist Health Glendale (AHGL).

AHGL has 800 physicians on staff, 2,600 employees and 900 volunteers. Adventist Health Glendale is dedicated to providing the most comprehensive care in the immediate community and to those who seek our advanced technology and expertise from afar.

Awards and Recognitions

1. Three consecutive 5-star quality ratings by the Centers for Medicare & Medical Services (CMS)
2. 16th consecutive A grade from patient safety organization The Leapfrog Group
3. Recognized at one of America's 250 Best Hospitals by Healthgrades, placing AHGL in the top 5% of hospitals in the country and an overall leader in clinical excellence

4. A Community Hospital Comprehensive Cancer Program Joint Commission's Gold Seal of Approval for its joint replacement program (knee and hip) by the American College of Surgeons' Commission on Cancer.
5. A hospital specially equipped and staffed for the rapid, quality care of heart attack patients by Los Angeles County's Emergency Medical Services
6. First in California to receive DNV Comprehensive Stroke Center Certification
7. Designated High Performing in Maternity Care by *U.S News and World Report.*

Vision

Adventist Health will be a recognized leader in mission focus, quality care and fiscal strength.

Mission Statement

Living God's love by inspiring health, wholeness and hope.

Adventist Health Includes:

- 23 hospitals with more than 3,393 beds
- 370 clinics (hospital-based, rural health and physician clinics)
- 14 home care agencies and eight hospice agencies
- 3 retirement centers & 1 continuing care retirement community
- A workforce of 37,000 including medical staff physicians, allied health professionals and support services

We owe much of our heritage and organizational success to the Seventh-day Adventist Church, which has long been a promoter of prevention and whole person care. Inspired by our belief in the loving and healing power of Jesus Christ, we aim to bring physical, mental and spiritual health and healing to our neighbors of all faiths. Every individual, regardless of his/her personal beliefs, is welcome in our facilities. We are also eager to partner with members of all faiths to enhance the health of the communities we serve.

Our commitment to quality health care stems from our heritage, which dates to 1866 when the first Seventh-day Adventist healthcare facility opened in Battle Creek, Michigan. There, dedicated pioneers promoted the "radical" concepts of proper nutrition, exercise and sanitation. Early on, the facility was devoted to prevention as well as healing. They called it a sanitarium, a place where patients—and their families—could learn to be well.

More than a century later, the health care system sponsored by the Seventh-day Adventist Church circles the globe with more than 170 hospitals and more than 500 clinics, nursing homes and dispensaries worldwide. And the same vision to treat the whole person—mind, body and spirit—continues to provide the foundation for our progressive approach to health care.

Summary of Implementation Strategies

Implementation Strategy Design Process

Stakeholders from the 19 hospital facilities in the Adventist Health System were invited to participate in a Mission Integration Summit on September 26 and 27, 2019. During these two day-long events, participants were introduced to the 2019 Adventist Health Implementation Strategy Template. After the summit, each hospital was invited to participate in a series of technical assistance calls and consultation sessions with representatives from Adventist Health Community Integration and Conduent Healthy Communities Institute to further develop and refine their implementation strategy.

Adventist Health Glendale Implementation Strategy

The implementation strategy outlined below summarizes the strategies and activities by Adventist Health Glendale to directly address the prioritized health needs. They include:

Health Need 1: Poverty & Homelessness Including Mental Health & Substance Abuse

- AHGL Navigator for Homelessness
- AHGL Navigator for Substance Abuse Disorder

Health Need 3: Access to Medical Care

- Family Practice Residency Program

Health Need 4: Cardiovascular Diseases Including Stroke

- Community Education and Screening
- Community Lifestyle Activities
- Community Resources Network

Health Need 5: Preventive Wellness Including Diabetes and Obesity

- Exercise Classes
- Education Classes including Nutrition and Smoking Cessation

Health Need 6: Geriatric Support

- Exercise/Fitness Classes
- Education classes
- Clinical Support

The Action Plan presented below outlines in detail the individual strategies and activities Adventist Health Glendale will implement to address the health needs identified though the CHNA process. The following components are outlined in detail in the tables below: 1) actions the hospital intends to take to address the health needs identified in the CHNA, 2) the anticipated impact of these actions as reflected in the Process and Outcomes measures for each activity, 3) the resources the hospital plans to commit to each strategy, and 4) any planned collaboration to support the work outlined.

No hospital can address all the health needs identified in its community. Adventist Health Glendale 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. This Implementation Strategy does not include specific plan to address the following significant health needs identified in the 2019 CHNA.

Significant Health Needs – NOT Planning to Address

- Dental Health- Adventist Health Glendale does not have the resources to address this priority at this time.

Adventist Health Glendale Implementation Strategy Action Plan

PRIORITY HEALTH NEED: Poverty & Homelessness Including Mental Health & Substance Abuse

GOAL STATEMENT: From 2020-2022 Adventist Health Glendale will work to prevent and reduce homelessness and substance use disorder for patients requiring complex care and follow up.

Mission Alignment: Well-being of People

Strategy 1: The AHGL Homeless Care Navigator will support Behavioral Medicine services for patients who are homeless and at-risk for homelessness, and patients with Substance Use Disorder (SUD).

Program/Activity	Metrics			
Activity 1.1- Assist individuals who are homeless and/or at-risk in connecting with community resources		**Year 1 2020**	**Year 2 2021**	**Year 3 2022**
	Process Measure: Number of individuals screened and consulted about participating in program.	Data Pending	224	228
	Short Term Outcomes: Number of individuals who elect to participate in program	106	98	94
	Medium Term Outcomes: Number of individuals placed in housing and/or prevented from experiencing homelessness	74	67	41
Activity 1.2- Connect individuals with SUD to treatment services in community		**Year 1 2020**	**Year 2 2021**	**Year 3 2022**
	Process Measure: Number of individuals screened and consulted about participating in program	Program to start in 2021	Program delayed due to pandemic (expected to launch early 2022)	212
	Short Term Outcomes: Number of individuals who elect to participate in the program			53
	Medium Term Outcomes: Percentage of treatment success rate Number of readmissions to Emergency Department			N/A

Source of Data:

- MAT & SUN Report 2022; Adventist Health Glendale; Clarity Human Services System; Housing and Urban Development Annual Performance Report

Target Population(s):

- At-risk for homelessness, homeless general population, SMI homeless, SUD patients, BHU/ER/Medical Patients

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

- Full time homeless care navigator and social workers, case workers, and discharge planners from Behavioral Health and Emergency Department

Collaboration Partners: (place a "*" by the lead organization if other than Adventist Health)

- Glendale Homeless Continuum of Care partners include Ascencia, City of Glendale, YWCA, Family Promise of the Verdugos, Armenian Relief Society, All for Health, Glendale Free Health Clinic, Adventist Health Glendale Foundation,

Glendale Youth Alliance, Loaves and Fishes (Catholic Charities), The Salvation Army, Adult Recreation Center, Glendale Police Department, Glendale Fire Department EMS, Cedar House (AFH), HOLA Recuperative Care, NHF National Health Foundation
CBISA Category: (**A -** Community Health Improvement; **E** - Cash and In-Kind; **F -** Community Building; **G -** Community Benefit Operations) • **A-** Community Health Improvement

Strategy Results 2022:

Homelessness and/or At-Risk

In 2022, AHGL built a program to extend services and outreach outside of the hospital for individuals experiencing homelessness and other difficult health and social challenges. A full-time staff member was hired to build a network of community-based resources.

The network of resources included partnerships with the City of Glendale Continuum of Care (COC) HOLA Recuperative Care, NHF National Health Foundation, Horizons Recuperative Care, and Ascencia Glendale and other similar agencies. This network provided support and care to patients navigating the complexities of community resources for help with clothing, food, healthcare, jobs, and housing.

The staff member worked with the Emergency Department (ED), surgery recovery rooms, and other medical areas within the hospital to advocate for patients during their time here at AHGL and as they were transitioned to other facilities.

Substance Use Disorder

Our Behavioral Health Navigator Program launched in 2022 after being delayed due to COVID-19. A Substance Use Navigator was hired in 2022 and supported the ED to serve as the primary access points for the treatment of substance use disorders and co-occurring mental health conditions. The Substance Use Navigator was trained to identify patients who would benefit from initiating medication for addiction treatment (MAT).

The program was built to provide a stigma-free environment that welcomed the disclosure of substance use and provided rapid, evidence-based treatment. Outpatient treatment options were provided for patients identified with substance issues co-occurring with mental health conditions.

PRIORITY HEALTH NEED: Access to Medical Care				
GOAL STATEMENT: From 2020-2022 Adventist Health Glendale will increase access to primary care for vulnerable populations.				
Mission Alignment: Well-being of People				
Strategy 1: Develop a team of physicians who become more knowledgeable of health care disparities and an increase in medical knowledge of problems that disproportionately affect the underserved				
Program/Activity	**Metrics**			
Activity 1.1- Family Residency Program		**Year 1 2020**	**Year 2 2021**	**Year 3 2022**
	Process Measure: Number of students enrolled in program	24	24**	24
	Short Term Outcome: Number of students who complete 3-year program	7	8	8
	Medium Term Outcome: Percentage of students who stay in community to practice family medicine	N/A	N/A	6
Source of Data: • AH Data				
Target Population(s): • Underserved adults and families				
Adventist Health Resources: (financial, staff, supplies, in-kind etc.) • Financial, staff, supplies				
Collaboration Partners: (place a "*" by the lead organization if other than Adventist Health) Loma Linda University, California Department of Health Care Access and Information (HCAI)*, Armenian American Medical Society (AAMS)*, Glendale and Foothills YMCA, City of Glendale*, Glendale Unified School District (GUSD)*, Glendale Community College (GCC)*, Glendale Healthier Community Coalition (GHCC)*, Glendale Community Free Health Clinic*				
CBISA Category: (**A -** Community Health Improvement; **E** - Cash and In-Kind; **F -** Community Building; **G -** Community Benefit Operations) • **A-** Community Health Improvement				

Strategy Results 2022:

Adventist Health Glendale provided free medical services at the 2022 Glendale Health Festival. The festival was a two-day clinic held at the Pacific Edison Community Center for children and adults who do not have health care. Our physicians and nurses donated their time and expertise performing prostate cancer screenings and consultations.

Our resident physicians staffed the Glendale Community Free Health Clinic in 2022. The clinic is open twice a month and serves community members who do not qualify for health care under the Affordable Care Act. The clinic provides services for cardiovascular disease, hypertension, diabetes, thyroid issues, and high cholesterol.

During the school year, our resident physicians supported both the Glendale Unified School District and Glendale Community College (GCC). Donating their time, they staffed GCC Student Health Clinic, provided sports physicals to student athletes, and consulted with high school seniors whose senior projects focused on careers in healthcare.

Our faculty and residents are active members of the Glendale Healthier Community Coalition (GHCC). The coalition was able to be reconvened in 2022. The GHCC wrote and received a $20k grant from California Department of Health Care Access and Information to promote health careers for underserved youth in Glendale. The health care career fair will implement in 2023.

**There are currently 24 students annually that are in enrolled at one given time.

PRIORITY HEALTH NEED: Cardiovascular disease including stroke				
GOAL STATEMENT: Increase awareness of health risks, symptoms, and resources for prevention and disease management for cardiovascular disease including stroke.				
Mission Alignment: Well-being of People				
Strategy 1: Reduce cardiovascular disease risk factors and improve health outcomes for adults ages 40+ by providing lifestyle education, support, and access to a network of related resources and services.				
Program/Activity	**Metrics**			
Activity 1.1- Provide community education sessions and screenings		**Year 1 2020**	**Year 2 2021**	**Year 3 2022**
	Process Measure: Number of community education and screening sessions presented	Currently on hold due to COVID-19	Remained on hold due to pandemic (program launched April 2022)	**5**
	Short Term Outcome: Number of participants in sessions			**518**
	Medium Term Outcome: Percentage of participants reporting knowledge and awareness change results of classes			**N/A**
Activity 1.2- Provide group lifestyle activities (nutrition, physical activity, stress reduction, etc.)		**Year 1 2020**	**Year 2 2021**	**Year 3 2022**
	Process Measure: Number of services and sessions offered	Program to start in 2021	Remained on hold due to pandemic (expected to launch early 2022)	**10**
	Short Term Outcome: Number of participants in sessions			**319**
	Medium Term Outcome: Percentage of participants reporting lifestyle behavior change outside of group sessions			**N/A**
Activity 1.3- Connect individuals to a network of lifestyle resources and services in the community		**Year 1 2020**	**Year 2 2021**	**Year 3 2022**
	Process Measure: Number of active resources and partnerships (clinical & lifestyle)	Program to start in 2021	Remained on hold due to pandemic (expected to launch early 2022)	**4**
	Short Term Outcome: Number of individuals utilizing resources and services			**38***
	Medium Term Outcome: Improved health outcomes (heart events, hospital admissions/utilization) and underlying risks factors			**N/A**
Source of Data: • Go Heart and Online event tracking data				

Target Population(s): • Seniors and other community members at risk for cardiovascular disease, and adults ages 40+
Adventist Health Resources: (financial, staff, supplies, in-kind etc.) • Coordinator, Go Heart • Marketing Department • Live Well Senior Program • Comprehensive Stroke Center and Cardiology
Collaboration Partners: (place a "*" by the lead organization if other than Adventist Health) Heart and Vascular Institute, Neuroscience & Neurology, Cardiology, Live Well Senior Program, American Heart Association*, American Stroke Association*, City of Glendale*, The American at Brand
CBISA Category: (**A -** Community Health Improvement; **E** - Cash and In-Kind; **F -** Community Building; **G -** Community Benefit Operations) • **A-** Community Health Improvement

Strategy Results 2022:

The physicians from our Cardiac Cath Lab, Comprehensive Stroke Center and Heart & Vascular Institute supported the community in 2022 by giving educational talks throughout the year:

- Advances in Structural Heart Disease (Dr. Harry Balian)
- Atrial Fibrillation (Dr. John McKenzie)
- Advances in Stroke Treatments and Prevention (Dr. Lance Lee)
- Cardiovascular Disease (Dr. Vahram Ornekian)
- Neurological Conditions and Memory (Dr. Artin Minaeian) – Prepared and rescheduled

In addition to our physicians, our partnership with Los Angeles County paramedics is vital to the successful treatment for stroke and heart issues in our community. The paramedics are the first responders and know how to divert the patient to our Cath lab during this very unfortunate health situation. This partnership has improved mortality and functionality for our patients coping with heart and stroke issues.

The Go Heart community program was implemented in 2022 to promote active lifestyles. The program focuses on fitness for all ages and offers free yoga, cardio and running classes. The classes meet at venues provided through our partnerships with Glendale Community Services & Parks, Glendale and La Canada YMCA, and The Americana at Brand. These monthly events are managed through the Eventbrite platform and currently have over 485 community members enrolled in the program.
The Go Heart program partners with the American Heart Association (AHA) to promote AHA CPR trainings, heart walks, and educational offerings to our Go Heart community and hospital employees.

*Number of attendees from AHA CPR, AHA Heart Walk and City of Glendale Chest Pain and CPR (provided by AHGL) not included. Total reflects AHGL hosted Chest Pain and CPR presentation attendees only.

PRIORITY HEALTH NEED: Preventive Wellness including diabetes and obesity

GOAL STATEMENT: From 2019-2022 Adventist Health Glendale will educate children and families about the risks of tobacco and the health benefits of exercise and good nutrition.

Mission Alignment: Well-being of People

Strategy 1: Engage our community through preventive wellness classes and grassroots organizing around public health policy.

Program/Activity	Metrics			
Activity 1.1- Provide community education and screening sessions		**Year 1 2020**	**Year 2 2021**	**Year 3 2022**
	Process Measure: Number of sessions presented	33	175	21
	Short Term Outcome: Number of participants in sessions	1170	5569	421
	Medium Term Outcome: Percentage of participants reporting knowledge and awareness change	N/A	N/A	N/A
Activity 1.2- Provide lifestyle group activities (nutrition, physical activity, etc.)		**Year 1 2020**	**Year 2 2021**	**Year 3 2022**
	Process Measure: Number of sessions offered	59	170	34
	Short Term Outcome: Number of participants in session	912	6616	1294
	Medium Term Outcome: Percentage of participants reporting lifestyle behavior change outside of group sessions	N/A	N/A	N/A
	Improved health outcomes (BMI, smoking rates, etc.)	N/A	N/A	N/A

Source of Data:

- AHGL Foundation, Nutrition Services, Diabetes Care Center, Go Heart, Glendale Unified School District, Live Well Senior Program

Target Population(s):

- Youth
- Adults
- Seniors

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

- Educational materials
- Nutrition Services Staff
- Diabetes Care Center
- AHGL Foundation
- Marketing Department

Collaboration Partners: (place a "*" by the lead organization if other than Adventist Health)

• Glendale Unified School District*, Los Angeles County Public Health Cal Fresh, Glendale YMCA, La Canada YMCA, AHGL Foundation, Live Well Senior Program, Nutrition Services
CBISA Category: (**A -** Community Health Improvement; **E** - Cash and In-Kind; **F -** Community Building; **G -** Community Benefit Operations) • **A-** Community Health Improvement

Strategy Results 2022:

In 2022 Adventist Health Glendale Foundation partnered with Glendale Unified School District to create wellness rooms on all five of Glendale's high school campuses. These rooms are designed to improve the mental and emotional well-being for Glendale's high school students. The spaces allow students to reset, restore, talk with counselors, enjoy art and ground themselves when needed. Due to the success of providing these wellness spaces, Glendale Unified is currently conducting space assessment at 19 of their elementary schools. This initiative puts a spotlight on the importance of emotional well-being and exposes students to skills they can use to regulate their mental health for years to come and perhaps throughout their lifetime.

The Diabetes Care Center provides both group and individual educational presentations for the AHGL community. In addition, the center prepared a presentation on obesity for our local senior community. The presentation was provided over Zoom due to the hospital's restrictions on visitors in 2022.

We had several nutrition focused presentations in 2022. AHGL Nutrition Services department presented, "Holiday Eating Tips" in November. Through a grant from our AHGL Foundation, Cal Fresh Healthy Living provided nutrition and cooking demonstration classes throughout the Glendale community. Cal Fresh held over 60 events and food demonstrations in 2022, those events are not included in our totals above.

PRIORITY HEALTH NEED: Geriatric (Senior) Support Services				
GOAL STATEMENT: Provide health education/promotion resources that improve health and well-being for seniors.				
Mission Alignment: Well-being of People				
Strategy 1: Adventist Health Glendale will provide geriatric support through educational, lifestyle, fitness and nutrition classes, and preventative clinical services.				
Program/Activity	**Metrics**			
Activity 1.1- Educational Classes (Lifestyle, Finance, & Clinical)		**Year 1 2020**	**Year 2 2021**	**Year 3 2022**
	Process Measure: Number of sessions offered	26	76	39
	Short Term Outcome: Number of participants in sessions	749	2583	1106
	Medium Term Outcome: Percentage of participants reporting knowledge change	N/A	N/A	N/A
Activity 1.2- Clinical Supports (Vaccine Clinics, Medication Checks, Glucose Checks, etc.)		**Year 1 2020**	**Year 2 2021**	**Year 3 2022**
	Process Measure: Number of services and sessions offered	On hold due to COVID-19	1	N/A* (see note below)
	Short Term Outcome: Number of participants in sessions		203	
	Medium Term Outcome: Number of participants receiving more than 1 clinical service		N/A	
Activity 1.3- Group Lifestyle Activities (Exercise, Nutrition, Social Support)		**Year 1 2020**	**Year 2 2021**	**Year 3 2022**
	Process Measure: Number of sessions offered	72	184	256
	Short Term Outcome: Number of participants in sessions	2381	4641	5826
	Medium Term Outcome: Percentage of participants reporting lifestyle behavior change outside of group sessions	N/A	N/A	N/A
Source of Data: • Live Well Tracking Database				
Target Population(s): • Seniors				
Adventist Health Resources: (financial, staff, supplies, in-kind etc.) • Coordinator for Live Well Senior Program • Fitness Instructors • Subscriptions (Email Marketing, Video Conferencing)				

• Marketing materials (Rack cards, print ads, thank you cards)
Collaboration Partners: (place a "*" by the lead organization if other than Adventist Health) AHGL physicians, Physical Therapy & Rehabilitation, Nutrition Services, Home Care Services, Chest Pain Center, Diabetes Care Center, City of Glendale Community Services*, Descanso Gardens, Cal Fresh, Vallejo Drive Adventist Church, SoCal Alzheimer's Assoc., Eagle Rock Sound Bath Center, 247 Health Club
CBISA Category: (**A -** Community Health Improvement; **E** - Cash and In-Kind; **F -** Community Building; **G -** Community Benefit Operations) • **A-** Community Health Improvement

Strategy Results 2022:

The Live Well Senior Program continued to thrive in 2022. The program operated as a hybrid program due to the pandemic. The addition of online classes and the technical training the program has provided, will forever be incorporated into the Live Well program. Due to the success of our technical training classes in 2021, our members did not require weekly technical training classes in 2022. As we plan and design programs for the future, we have much to celebrate and are grateful.

The Live Well Senior Program had an 8% increase in membership in 2022, this takes our total membership to 1,903 local seniors. Membership is free to anyone over 60 years old and living in our community (Glendale, Eagle Rock, La Canada, La Crescenta and surrounding areas).

Live Well publishes a weekly e-newsletter that provides an overview of what Live Well events are planned for the coming week. The e-newsletter is emailed each Saturday evening and currently has a 60% open rate. This electronic communication was configured in 2020 with the onset of the pandemic and has continued to be an extremely effective, efficient, and economical way to communicate with our members.

In 2022, we increased our fitness class offerings from three classes a week to five class a week. In addition to our balance, cardio, and stretch classes, we added a Tai Chi class and an additional balance class. While most of the classes were virtual in 2022, in the fall of 2022 we partnered with Vallejo Drive Seventh Day Adventist Church to offer two in-person fitness classes each week.

Our physician's prepared and presented many educational programs for our seniors in 2022, topics included:

- The aging eyes
- Osteoarthritis
- Osteoporosis
- The aging heart
- Enlarged prostate
- Stroke treatments
- Pelvic floor health
- Coping with medical emergencies

- New medical devices

Other hospital departments presented:

- Fall Prevention (AHGL Physical Therapy)
- Aging at Home (AHGL Occupational Therapy)
- Chest Pain Warning Signs (AHGL Chest Pain Center)
- Memory Loss (SoCal Alzheimer's Association)
- Holiday eating tips (AHGL Nutrition Services)
- New health monitoring apps (247 Health Club)
- Nutrition and Cooking Demonstration Series (Cal Fresh Healthy Living)

Most of our presentations are recorded and posted on our Adventist Health YouTube channel where they continue to educate and inform all populations.

In an effort to gather and stay safe, Live Well hosted two walking tours at Descanso Gardens in 2022. These events provided an opportunity for our senior members to meet in-person and enjoy a walking tour of the gardens followed by a light reception. At the reception, Live Well promoted the hospital's services and physicians, as well as provided promotional giveaways.

Live Well serves on the Senior Services Committee for the City of Glendale's Community Services and Parks division. The committee is comprised of members from Glendale Fire, Glendale Police, Glendale Library, AARP and other local hospitals. The committee assesses senior needs and develops programs for seniors living in Glendale. Additionally, Live Well coordinates fitness and educational resources for low-income seniors residing in Glendale's senior housing developments. Although the hospital's Live Well program serves a broader geographical area than Glendale, we share best practices and provide input to this important committee.

* Due to COVID-19 restrictions AHGL did not bring seniors to our hospital campus. CVS, Walgreens, and many local health retailers offered free vaccines, testing and screenings.

The Adventist Health + Blue Zones Solution

Our desire to improve community well-being grew out of not only our mission at Adventist Health -to live God's love by inspiring health, wholeness and hope – but also by the sheer need as seen across our system of 23 hospitals. Overwhelmingly, we see issues related to health risk behaviors, mental health and chronic illnesses throughout the communities we serve. That is why we have focused our work around addressing behavior and the systems preventing our communities from achieving optimal health.

In an effort to meet these needs, our solution is to create a sustainable model of well-being that measurably impacts the well-being of people, well-being of places and equity.

In 2020, Adventist Health acquired Blue Zones as the first step toward reaching our solution. By partnering with Blue Zones, we will be able to gain ground in shifting the balance from healthcare – treating people once they are ill – to transformative well-being – changing the way communities live, work and play. In 2021, Adventist Health committed to launching six Blue Zone Projects within our community footprint, and as we enter 2022 these projects are active. Blue Zone Projects are bringing together local stakeholders and international well-being experts to introduce evidence-based programs and changes to environment, policy and social networks. Together, they measurably improve well-being in the communities we serve.