



**Saint Alphonus Regional Medical Center and
Regional Rehabilitation Hospital
Community Health Needs Assessment (CHNA)
Implementation Strategy**
Fiscal Years FY24-26



Saint Alphonus

A Member of Trinity Health

Saint Alphonus Regional Medical Center (SARMC) and the Saint Alphonus Regional Rehabilitation Hospital (SARRH) jointly completed a comprehensive Community Health Needs Assessment (CHNA) that was adopted by the Board of Directors on June 5, 2023. SARMC performed the CHNA in adherence with applicable federal requirements for not-for-profit hospitals set forth in the Affordable Care Act (ACA) and by the Internal Revenue Service (IRS). The assessment considered a comprehensive review of secondary data analysis of patient outcomes, community health status, and social influencers of health, as well as primary data collection, including input from representatives of the community, community members and various community organizations.

The complete CHNA report is available electronically at [2023 Community Health Needs Assessment for Saint Alphonus Regional Medical Center - Boise](#) or printed copies are available at 6130 Emerald Boise, ID 83704.

Our Mission

We, Saint Alphonus and Trinity Health, serve together in the spirit of the Gospel as a compassionate and transforming healing presence within our communities.

Our Hospitals

Saint Alphonus Regional Medical Center (SARMC) in Boise, Idaho is dedicated to delivering advanced medical services in a spiritual, healing environment throughout southwest Idaho, eastern Oregon and northern Nevada. Through innovative technologies, compassionate staff, and warm, healing environments, Saint Alphonus strives to provide care that is focused on patients. Founded in 1894 by the Sisters of the Holy Cross, SARMC was the first hospital established in Boise, bringing health care to the poor and underserved. Now referred to as Saint Alphonus Regional Medical Center, our licensed medical-surgical/acute care 381-bed facility serves as the center for advanced medicine and is poised to support the community well into the future. Saint Alphonus also has an intricate system of health and wellness services that extend into the communities around our region.

The Saint Alphonus Regional Rehabilitation Hospital (SARRH), an affiliate of Encompass Health, is committed to helping patients regain independence after a life-changing illness or injury. SARRH is a 40-bed rehabilitation hospital that opened in July 2019 across the street from the SARMC campus. It serves the Boise area as a leading provider of inpatient rehabilitation for stroke, spinal cord injury, brain injury, and other complex neurological and orthopedic conditions. SARRH uses an interdisciplinary team approach that includes physical, speech and occupational therapists, rehabilitation physicians, rehabilitation nurses, case managers, dietitians and more, combined with our advanced technology and expertise, to help patients achieve their goals. Patients receive at least three hours of therapy five days per week while under the constant care of registered nurses, many of whom specialize in rehabilitation, and frequent independent private practice physician visits.

Services offered by SARMC and SARRH include, but are not limited to: brain injury program, breast care, cardiology and vascular care, cancer care, diabetes care and education, emergency and trauma, endoscopy, hospitalists, infusion clinic, laboratory, Mako Robotic-Arm® Assisted Joint Replacement, maternity services, neuroscience, nutrition, orthopedics, pain management, palliative care, pharmacy,



physical therapy and rehabilitation, pulmonary diagnostics, radiology and medical imaging, research, sleep disorders, spine care, stroke center, surgical services, including Treasure Valley Surgery Center, telestroke, women’s and children’s services, and wound and hyperbaric.

Saint Alphonus is a proud affiliate of Trinity Health, one of the largest multi-institutional Catholic health care delivery systems in the nation. Trinity Health serves people and communities in 25 states from coast to coast with 88 hospitals and 131 continuing care facilities, home health and hospice programs, 125 urgent care centers, and the second largest Program of All-Inclusive Care for the Elderly (PACE) program in the country. For more information, please visit www.saintalphonus.org, and www.Trinity-Health.org.

Our Community Based Services

In addition to the SARMC and SARRH facilities, Saint Alphonus also provides community-based services through the Saint Alphonus Medical Group (SAMG). This includes the Center for Global Health and Healing along with a variety of medical specialties such as women’s’ health, pediatrics, family practice, urgent care, physical therapy, and orthopedics.

The Saint Alphonus Health Alliance (SAHA) is a physician-led network sponsored by the Saint Alphonus Health System, The Alliance represents a new model of healthcare delivery, known as a clinically integrated network, based on a strategy to tightly align physicians, hospitals, and payers to provide better access to care, better clinical quality, and control costs.

Saint Alphonus serves its mission through the community health and well-being (CHWB) department. The CHWB department houses services to improve community-clinical linkages for our patients and residents in the communities served by Saint Alphonus. This includes the Community Health Worker Hub, mobile clinical services, Faith Community Nurses, Catholic School nurses, language access resources, tobacco treatment specialists, Family Centers that encompass patient education, counseling, and other therapeutic services for new parents and families, and extensive community outreach to address the social influencers of health.

Our Community

The 2023 Greater Treasure Valley Community Health Needs Assessment (CHNA) represents an unprecedented partnership to align several independent regional assessments to identify the health needs of more than half of Idaho residents. This collaborative approach utilized a social determinants of health (SDoH), also known as social influencers, framework to determine the top priorities of ten counties in the Greater Treasure Valley region of Idaho. This framework defines health in the broadest sense and recognizes SDoH factors such as employment, housing, and access to health care have an impact on the community’s health. In this report, the Greater Treasure Valley Region includes ten counties across Idaho’s Public Health Districts 3 and 4: Ada, Elmore, Boise, Valley, Gem, Adams, Canyon, Washington, Payette, and Owyhee Counties.

The Greater Treasure Valley Region accounts for 45.8% of Idaho’s population. Public Health District 3 has a total population of 297,548 residents making up 16.4%



of the state’s population. Public Health District 4 has a total population of 532,667 residents making up 29.4% of the state’s population. The population in Idaho from 2010-2020 increased by 17.3%. Counties experiencing outsized growth include Ada County increasing by 26.1%, Canyon County by 22.3%, and Valley County by 19.1%. Idaho had the highest percentage of population growth in the nation in 2022.



Idaho is home to a majority white population. Compared to the state average, Public Health District 3 has a higher percentage of non-white residents. Canyon, Elmore, Owyhee, and Payette counties all have above average rates of Hispanic/Latino residents. Public Health District 4 has a higher than the state average rate of non-Hispanic Black residents.

When compared to the Idaho average, Public Health District 3 has higher rates of youth (age 17 or less), while Public Health District 4 has lower rates of youth and higher rates of middle-aged and young adults. Both regions have senior populations similar to the state average.

The Greater Treasure Valley is home to more than 50,000 veterans. Compared to the statewide average (8.8%), each Public Health District has a slightly higher percentage of veterans (9.8% in Public Health District 3 and 9.1% in Public Health District 4). Elmore County, the location of Mountain Home Air Force base, has the largest veteran population (22.1%).

The Americans with Disabilities Act defines a disability as a “physical or mental impairment that substantially limits one or more major life activities.” People with disabilities may be unable to work and often face higher rates of poverty. The Idaho state average of this population is 13.6%. Public Health District 3 is above this average at 15.4%, and Public Health District 4 is below the statewide average at 10.9%. Rural areas tend to have higher rates of this population. In the Greater Treasure Valley, Gem County has the largest percentage of residents with disabilities (22.5%).



Limited English proficiency measures those who identify speaking English less than “very well” on the U.S. Census. Public Health District 3 has a higher percentage of this population (3.2%) than the statewide average (1.8%). In Public Health District 3, Owyhee County has the highest level of limited English proficiency population (8.2%).

Saint Alphonse is a mission-driven, innovative health organization that strives to become the national leader in improving the health of communities and each person served. This CHNA Implementation Strategy is inclusive of Saint Alphonse Medical Center (Boise) and the Saint Alphonse Regional Rehabilitation Hospital.

Our Approach to Health Equity

While community health needs assessments (CHNA) and Implementation Strategies are required by the IRS, Trinity Health ministries have historically conducted CHNAs and developed Implementation Strategies as a way to meaningfully engage our communities and plan our Community Health & Well-Being work. Community Health & Well-Being promotes optimal health for people experiencing poverty or other vulnerabilities in the communities we serve by addressing patient social needs and investing in our communities through dismantling oppressive systems, including racism, and building community capacity. Trinity Health has adopted the Robert Wood Johnson Foundation’s definition of Health Equity - “Health equity means that everyone has a fair and just opportunity to be as healthy as possible. This requires removing obstacles to health such as poverty, discrimination, and their consequences, including powerlessness and lack of access to good jobs with fair pay, quality education and housing, safe environments, and health care.”

This implementation strategy was developed in partnership with the community and will focus on specific populations and geographies most impacted by the needs being addressed. Racial equity principles were used throughout the development of this plan and will continue to be used during the implementation. The strategies implemented will mostly focus on policy, systems and environmental change as these systems changes are needed to dismantle racism and promote health and wellbeing for all members of the communities we serve.

Health and Social Needs of the Community

The CHNA conducted between June and December 2022 identified the significant needs for health and social drivers of health within the Greater Treasure Valley community. Community stakeholders then prioritized those needs during a facilitated review and analysis of the CHNA findings. The significant health needs identified, in order of priority include:

1. Safe, affordable housing and homelessness

- Housing vacancy rates in the report region have been steadily decreasing for many years, making it more difficult for many households, especially low-income households, to obtain housing. A vacancy rate of 4% or less is dangerously low, and each district falls at or below that level. Ada, Canyon, and Payette Counties specifically all fall below 4%. Low vacancy rates such as these can result in housing shortages and rising housing costs.
- A dwindling housing supply can drive up home prices, especially in areas experiencing as much growth as the Greater Treasure Valley. Each public health district, as well as the state of Idaho and the nation, has seen median home values skyrocket in the last decade. Ada and Valley counties have seen the most dramatic rise in median home values, each increasing by more than \$100,000 since 2015.

2. Behavioral health, including mental health and well-being and substance misuse

- All ten counties in the report region are classified as mental health provider shortage areas.
 - Community members identified behavioral health as a top priority in the Greater Treasure Valley, which is inclusive of both mental health and well-being and substance misuse. Residents across Idaho and the region report high rates of poor mental health (nearly 15% for Public Health District 3 and 13% for Public Health
-

District 4).

- Survey respondents noted high levels of concern regarding the community's response to overall mental health issues, ability to seek treatments, mental health in specific populations such as veterans and youth, and suicide. When coupled with the focus group and interview data, there is a serious concern for youth mental health and the ability to seek and find treatment given a lack of providers who can treat child or adolescent mental health.
- When looking at survey data collected on substance use, community members report high concern for individuals' ability to seek treatment for substance use and misuse, specifically methamphetamine use, and stigma associated with receiving treatment. The focus groups and interviews commonly involved a discussion of how substance misuse, and mental health are closely tied together and that a community cannot address one issue without acknowledging the other.

3. Access to affordable healthcare, including oral and vision health

- All but one county in the report region are considered to be primary care health professional shortage areas. In Public Health District 4, there are 110 primary care physicians per 100,000 residents and in Public Health District 3, there are only 37 primary care physicians per 100,000 residents. The low supply in Public Health District 3 may lead to residents in those counties finding physicians in Public Health District 4, creating more of a workload for those care providers.
- Barriers preventing or limiting an individual's ability to access health care services can lead to increased poor health outcomes and impact overall health equity. Barriers to health care services mentioned in the primary data include limited number of providers, long wait times to see providers, inconvenient operating hours, coverage, access to insurance, lack of awareness of available services, and costs associated with care.
- Many residents in the Greater Treasure Valley do not have adequate access to oral health care. All but one county in the report region are considered to be dental health professional shortage areas.

Hospital Implementation Strategy

Significant health and social needs to be addressed

SARMC and SARRH, in collaboration with community partners, will focus on developing and/or supporting initiatives and measure their effectiveness to improve the following needs:

- Safe, affordable housing and homelessness – CHNA pages 41-55.
- Access to affordable healthcare, including oral and vision health – CHNA pages 15-34.
- Behavioral health, including mental health and well-being and substance misuse – CHNA pages 27-31.

This implementation strategy specifies community health needs that the hospital, in collaboration with community partners, has determined to address. The hospital reserves the right to amend this implementation strategy if circumstances warrant. For example, certain needs may become more pronounced and require enhancements to the described strategic initiatives. During these three years, other organizations in the community may decide to address certain needs, indicating that the hospital should refocus its limited resources to best serve the community.

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Safe, affordable housing and homelessness



Goal: Saint Alphonsus seeks to improve the availability of attainable housing for the residents of the Greater Treasure Valley regardless of their income status.

| CHNA Impact Measures | 2024 Baseline | 2026 Target |
|--|---------------|-------------|
| Increase the number of attainable housing units in Ada County made possible in participation by Saint Alphonsus Regional Medical Center by 193 units by June 30, 2025. | 0 units | 193 units |
| Establish a Supportive Housing Investment Fund in collaboration with the City of Boise and other local partners by June 30, 2025. | \$0 | \$8M |

| Strategy | Timeline | | | Hospital and Committed Partners (align to indicate committed resource) | Committed Resources (align by hospital/committed partner) |
|---|----------|----|----|---|--|
| | Y1 | Y2 | Y3 | | |
| Support the Denton Street Apartment development for residents between 30-80% Area Median Income | x | x | x | SARMC | Amount TBD, in kind support from CHWB Director to convene, fundraise, and lead on workforce outreach and childcare development |
| | x | x | x | Trinity Health | \$3.5M community investment loan |
| | x | x | x | The Pacific Companies | Project lead and developer, \$1.7M LIHTC and \$4M Idaho workforce housing fund applicant, etc |
| | | x | x | TBD Child Care Provider | Provide onsite operations of sliding-scale fee childcare |
| | x | x | x | City of Boise | \$6.7M |
| | | | | Focus location(s) | Focus Population(s) |
| | | | | Boise, ID 83704 | Persons who make 30-80% of the Ada County Area Median Income or less |
| Strategy | Timeline | | | Hospital and Committed Partners (align to indicate committed resource) | Committed Resources (align by hospital/committed partner) |
| | Y1 | Y2 | Y3 | | |
| Collaborate with the Boise Continuum of Care and develop a Supportive Housing Investment Fund (SHIF) to quickly scale supportive housing in the community and sustainably fund support services | x | x | x | SARMC | \$100k/year for SHIF |
| | x | x | x | City of Boise | \$7.5M |
| | x | x | x | Boise Ada County Housing Authority | Financial contribution TBD |
| | x | x | x | Our Path Home- Continuum of Care | In kind stewardship of funds and leadership of SHIF activities |
| | x | x | x | SHIF Administrator | In kind fiduciary services |
| | | | | Focus location(s) | Focus Population(s) |
| | | | | Boise, ID including priority zip codes 83703, | People experiencing homelessness |

83704, 83705, and 83706

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Access to affordable healthcare, including oral and vision health

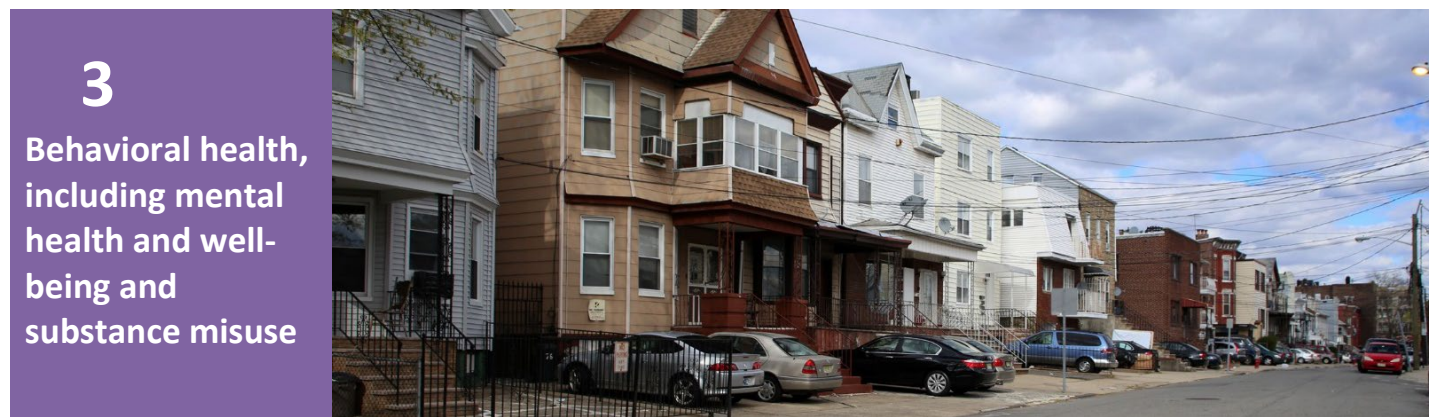


Goal: Improve access to affordable healthcare services for community members regardless of income and insurance status

| CHNA Impact Measures | 2024 Baseline | 2026 Target |
|---|----------------|-----------------|
| Provide healthcare services in collaboration with community partners for at least 450 uninsured or underinsured individuals by June 30, 2025. | 60 individuals | 450 individuals |

| Strategy | Timeline | | | Hospital and Committed Partners (align to indicate committed resource) | Committed Resources (align by hospital/committed partner) |
|---|---|----|----|---|--|
| | Y1 | Y2 | Y3 | | |
| Provide specialist referrals, labs, and imaging for uninsured/underinsured patients at Genesis Community Health (independent safety net clinic) | x | x | x | SARMC and SAMC-Nampa | ~\$120k/year in annual services to Genesis patients |
| | x | x | X | Genesis Community Health | Healthcare provider, refer to Saint Alphonsus for additional services |
| | Focus location(s) | | | | Focus Population(s) |
| | Clinic located at 83714 serving the Greater Treasure Valley | | | | Ada County- including priority zip codes 83703, 83704, 83705, 83076, 83714 |
| Strategy | Timeline | | | Hospital and Committed Partners (align to indicate committed resource) | Committed Resources (align by hospital/committed partner) |
| | Y1 | Y2 | Y3 | | |
| Lead dental health collaborative in the Greater Treasure Valley to address local gaps in oral health care | x | x | x | SARMC | \$10k/year to Genesis and TRHS, in kind leadership support for the collaborative |
| | x | x | x | Terry Reilly Health Services (TRHS) | Dental care provider, collaborative member |
| | x | x | x | Genesis Community Health | Dental care provider, collaborative member |
| | Focus location(s) | | | | Focus Population(s) |
| Clinics in 83714, 83702, 83705 serving Greater Treasure Valley | | | | Individuals with Medicaid, Medicare, uninsured, or underinsured in need of oral health care | |
| Strategy | Timeline | | | Hospital and Committed Partners (align to indicate committed resource) | Committed Resources (align by hospital/committed partner) |
| | Y1 | Y2 | Y3 | | |
| Explore mobile clinic operations in the SARMC/SARRH service | | x | x | SARMC | ~\$3500/clinic in operations |
| | | | x | Community Partners TBD- i.e. food | In kind provision of free services |

| | | | |
|------|--|--|--|
| area | | distribution, dental partners, legal aid, etc. | alongside medical clinic |
| | Focus location(s) | | Focus Population(s) |
| | Ada County- including priority zip codes 83703, 83704, 83705, 83076, 83714 | | Individuals who are uninsured, underinsured, or otherwise struggle to access a primary care medical home |



Goal: Improve access to behavioral health resources for patients and community members

| CHNA Impact Measures | 2024 Baseline | 2026 Target |
|--|------------------------|-------------------------|
| Provide behavioral health training for colleagues and community members to identify and address mental health issues in others to at least 100 participants by June 30, 2023. | 20 participants | 100 participants |

| Strategy | Timeline | | | Hospital and Committed Partners (align to indicate committed resource) | Committed Resources (align by hospital/committed partner) |
|---|---|----|----|---|---|
| | Y1 | Y2 | Y3 | | |
| Provide Question, Persuade, Refer (QPR) training to Saint Alphonsus Colleagues *shared strategy between Boise and Nampa hospitals* | x | x | x | SARMC and SAMC-N | In kind organizing monthly trainings, convening and training trainers. Provide up to 24 trainings per year. |
| | x | | | SARMC Foundation | \$3k for materials and to train-the-trainers- may apply again as needed |
| | Focus location(s) | | | | Focus Population(s) |
| | Saint Alphonsus Health System footprint | | | | Front line colleagues who interact with patients and community members that could identify people with suicidal ideations or intentions |
| Strategy | Timeline | | | Hospital and Committed Partners (align to indicate committed resource) | Committed Resources (align by hospital/committed partner) |
| | Y1 | Y2 | Y3 | | |
| Provide Adult and Youth Mental Health First Aid Trainings at no cost to community members *shared strategy between Boise and Nampa hospitals* | x | x | x | SARMC and SAMC-N | In kind support of colleague time to teach MHFA trainings (up to 21 classes/year) |
| | x | | | Optum Idaho | Reimbursing Saint Alphonsus for 2 classes/month |
| | x | x | x | Additional funders | TBD- grant seeking |

| | Focus location(s) | | | | Focus Population(s) |
|---|---|----|----|---|--|
| | Saint Alphonsus Health System footprint | | | | Colleagues and community members |
| Strategy | Timeline | | | Hospital and Committed Partners (align to indicate committed resource) | Committed Resources (align by hospital/committed partner) |
| | Y1 | Y2 | Y3 | | |
| Explore additional community-based opportunities to support youth mental health *shared strategy between Boise and Nampa hospitals* | x | x | x | SARMC and SAMC-N | In kind support of CHWB Director and Coordinator to identify opportunities to collaborate on youth mental health |
| | x | | | Central and Southwest District Health Dept | TBD financial and in kind support to address youth mental health |
| | x | | | St Lukes Health System | TBD financial and in kind support to address youth mental health |
| | x | | | City of Boise | TBD financial and in kind support to address youth mental health |
| | Focus location(s) | | | | Focus Population(s) |
| Ada County- including priority zip codes 83703, 83704, 83705, 83076, 83714 | | | | Youth experiencing mental health challenges | |

Adoption of Implementation Strategy

On September 19, 2023, the Board of Directors for Saint Alphonsus Health System met to discuss the 2023-2025 Implementation Strategy for addressing the community health and social needs identified in the 2023 Community Health Needs Assessment. Upon review, the Board approved this Implementation Strategy and the related budget.

Michael Ballantyne
Michael Ballantyne (Oct 16, 2023 12:52 PDT)

October 16, 2023

Michael Ballantyne, Saint Alphonsus Health System Board Chair

