

# COMMUNITY HEALTH IMPLEMENTATION STRATEGY

Fiscal Years  
**2023-2025**



LOMA LINDA UNIVERSITY  
HEALTH



## Healthy, Equitable Communities

Loma Linda University Medical Center

Loma Linda University Children's Hospital

Loma Linda University Behavioral Medicine Center

Loma Linda University Medical Center – Murrieta

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**Email: [JHutchinson@llu.edu](mailto:JHutchinson@llu.edu) Office Phone: 909-558-3281**

## To Our Valued San Bernardino & Riverside Community Members,

On behalf of the four licensed hospitals of Loma Linda University Health (LLUH), we thank all of the community members who shared their experiences, expertise and ideas for achieving a healthier community. With the support of more than 20 dedicated partner organizations, we heard and learned from nearly 1,000 unique community members. We want you to know that **we listened, your voices matter, and we commit to addressing the greatest health challenges** in our region.

LLUH has served the Inland Empire region for over 100 years. We are committed to engaging in deep and transformative relationships with San Bernardino and Riverside County residents to address the root causes of health challenges and inequities. Since our last Community Health Needs Assessment was conducted in 2019, the COVID-19 pandemic altered much of life as we know it. We have witnessed soaring rates of mental health challenges, rising maternal and infant health inequities, a growing housing crisis, increased food insecurity and lost years of education. While these challenges have been extremely difficult, we have also witnessed the resiliency and regional collaboration that gives us hope for the future.

We want you to know that we are committed to addressing the top health needs in our region through **educational and workforce opportunities, advancing health equity, increasing access to health and wellness resources, and improving maternal and child health outcomes**. This strategy was formally adopted on August 30, 2022 by our LLUH Board of Directors and will be implemented by our LLUH Institute for Community Partnerships (ICP). ICP will put this strategy into action, but also commits to staying relevant and responsive to the evolving needs of our community.

At LLUH these efforts are core to our mission of continuing the teaching and healing ministry of Jesus Christ. We believe that through our community partnerships and relationships built directly with you, we can work together to ensure that our region is a safe and healthy place to live.



*Richard Hart*

Richard Hart, MD, DrPH  
President  
Loma Linda University Health



*Trevor Wright*

Trevor Wright, MHA, FACHE  
Chief Executive Officer  
Loma Linda University Health  
Hospitals



*Juan Carlos Belliard*

Juan Carlos Belliard, PhD, MPH  
Assistant Vice President  
LLUH - Institute for Community  
Partnerships

## Executive Summary

The Community Health Implementation Strategy (CHIS) describes how Loma Linda University Health (LLUH) plans to address the most pressing unmet health needs identified in the [2022 Community Health Needs Assessment \(CHNA\)](#). LLUH's implementation strategy seeks to positively impact the top health challenges identified:

- **Mental health.** The stress and isolation from the pandemic have had devastating effects on nearly every community and population across the region.
- **Heart disease and diabetes.** These remain leading causes of preventable death and morbidity in the Inland Empire.
- **Maternal and child health.** The huge disparities in maternal and infant mortality for ethnically-diverse populations have worsened during the past few years.

Because health inequities are so deeply rooted in our social systems and structures, solutions must also extend beyond the walls of the hospital. The community identified the following factors as having the greatest potential for improving health outcomes in our region: workforce development, youth education, food security, access to healthcare, behavioral health support, safe and affordable housing, access to green spaces and community safety. LLUH's strategy focuses on improving these underlying social and environmental factors that contribute to health and well-being.

The 3-year implementation strategy outlines the goals, actions, and metrics for measuring outcomes and evaluating impact for each of our Community Benefit targets. These targeted efforts ultimately strive to improve economic advancement, improve health equity, increase access to health and wellness resources, and enhance maternal and child health outcomes. The strategy aims to build on the unique strengths of the hospital system, partner organizations, and the community.

In developing the implementation strategy, the Institute for Community Partnerships (ICP), the Community Benefit Administration Council, and hospital leadership worked together to finalize its details. Key factors in the prioritization process included:

- 1) Importance to the community, as shared by nearly 1,000 individuals from across the Inland Empire who participated in the CHNA.
- 2) Magnitude of problem, as identified in macro-level secondary data.
- 3) LLUH's ability to address the need (organizational capacity, existing infrastructure, established relationships, ongoing investment).
- 4) Alignment with regional priorities.

Improving population-level health and eliminating health inequities deeply rooted in our community require a huge team effort. Over the next three-year implementation period (July 2022 - June 2025), LLUH will collaborate with our community and regional partners to create sustained health



improvements across the Inland Empire community. During the FY 2023-2025 funding cycle, LLUH will continue to invest in partner organizations through direct financial awards, capacity building, and in-kind contributions to support operations in order to better serve our community benefit population. Direct financial awards to community partners pursuing the implementation strategy's goals will equal or exceed \$1.8 million over the three-year period. LLUH's investment in local communities ensures that the strategy will remain relevant and responsive to the greatest health needs and will build on the strengths and resilience of our community.

The LLUH hospitals have made a consistent and historic investment in the operations necessary to effectively coordinate and partner with our community. ICP is the strategic arm of the four hospitals' community benefit programming. The four licensed hospitals within the LLUH system coordinate their community benefit investments through ICP in order to maximize the strategic and efficient use of funds.

LLUH will continue to engage and listen to the many voices across our region. This 3-year Community Health Implementation Strategy will continue to evolve in order to remain responsive to the community's needs. Together – with hope and determination – we will address the greatest health challenges in our region.





## LLUH FY2023-2025 Community Health Implementation Strategy

**GOAL 1:** Improve economic mobility through educational and workforce opportunities.

**STRATEGY** Introduce underserved middle and high school students to careers in health.

### INITIATIVES

- Host 3 sessions of *My Campus* annually to expose underrepresented minoritized students to health professions schools (Nursing, Dentistry, Medicine, Pharmacy, Public Health, Allied Health and Behavioral Health) and mentorship opportunities; reach 120 students annually.
- The 2-week *Discovery* program will annually provide 65 minoritized students from the region the opportunity to prepare for college and explore different health professions.
- The *Transition 2 Success* program will annually pair 25 San Bernardino and Riverside County youth with mentors in their health discipline of interest to provide support and guidance to aspiring health professionals.
- Coordinate an annual *Junior High Science Fair* to inspire interest in careers in Science, Technology, Engineering and Math (STEM) that engages 90 middle school students.
- Host *Robotics Simulation* events to teach students how robotics have been integrated into medicine and inspire interest in STEM and health careers; at least 30 high school students participate annually.



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**STRATEGY** Support educational and workforce opportunities for youth and adults from under-resourced communities.

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## INITIATIVES

- Provide 150 scholarships and stipends to at-risk youth in the region to support their transition to higher education.
- Provide 25 scholarships to underrepresented minority students who are currently pursuing higher education programs in health-related fields.
- The *La Escuelita* program will provide free weekly academic tutoring and music lessons to elementary age students from San Bernardino, as well as educational workshops for their parents; Children participate in 350 academic tutoring sessions and 225 music lessons annually; Parents participate in 25 educational workshops annually.
- Invest in workforce development with community-based partners and government to increase outreach to marginalized and specialty populations and their access to livable wage-paying jobs.





## GOAL 2: Advance health equity.

**STRATEGY** Identify social determinants of health through screenings; refer those in need of social services.

### INITIATIVES

- Incorporate a Social Determinants of Health screening tool in EPIC at Loma Linda University Medical Center, Children's Hospital, Behavioral Medicine Center, and Medical Center - Murrieta. Screen 70% of hospitalized patients annually by the end of FY 2025; connect 80% of at-risk individuals and families to resources and community partners.
- Expand *Help Me Grow Inland Empire* to connect more children ages 0-8 with prevention and early intervention services; increase the number of entities referring patients by 20% and increase the number of patients served by 30%.

**STRATEGY** Expand Community Health Worker integration in school districts and hospital systems.

### INITIATIVES

- Create new full-time Community Health Worker positions with benefits; increase the number of CHW positions from 9 to 30 by FY 2025.
- Strengthen LLUH's clinic-based Community Health Worker program to address system barriers that lead to inequities for patients; CHWs reach 700 families and connect them to a total of 2,000 resources annually.
- Build and support Community Health and Education Worker teams in local school districts to address the social determinants of health and education for students and families; Conduct 1,000 home visits annually.





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**STRATEGY** Address food insecurity through access to healthy and affordable food options, community gardens, and access to safe green spaces.

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### INITIATIVES

- Continue to expand the *Jardín de la Salud* in San Bernardino into a community activity and resource center and grow local participation in educational activities that promote healthy lifestyles and food sovereignty.
- Coordinate access to healthy food and fresh produce for local families in need; distribute 5,000 pounds of fresh produce directly to 300 families each week; 4,000 non-perishable food boxes distributed annually.

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**STRATEGY** Increase access to health insurance for vulnerable populations.

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### INITIATIVES

- Collaborate with regional partners to assist at least 4,300 eligible uninsured residents with enrolling in Medi-Cal or retaining coverage and conduct outreach to more than 90,000 people during FY23-FY25.

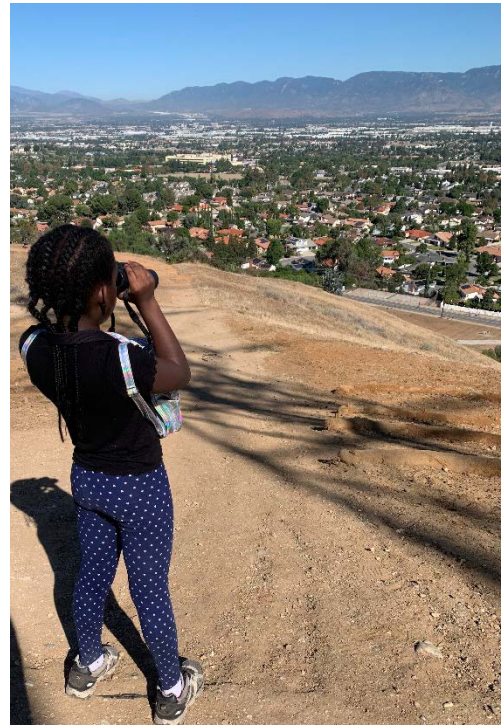
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**STRATEGY** Provide outdoor opportunities to strengthen the physical, mental and emotional well-being for youth in under-resourced communities for youth living in underserved communities.

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### INITIATIVES

- Launch the *SHiNE Program* to empower youth and families through outdoor leadership education, environmental justice engagement, and access to nature; Engage 2,000 participants during FY22-FY25.
- Provide technical assistance to local school districts on partnerships for land use agreements after school to open playgrounds and school yards for exercise and play in communities to increase access to green spaces.



## GOAL 3: Increase access to health and wellness resources.

**STRATEGY** Support healthy lifestyle interventions that reduce chronic diseases.

### INITIATIVES

- The Goal 4 Health soccer league will provide at least 200 local youth annually with a safe outdoor activity that promotes community connection and a healthy lifestyle; at least 40% of students will participate from under-resourced neighborhoods.
- The Parent Health Institute (PHI) engages school district parents in educational workshops in both English and Spanish on health topics including diabetes, nutrition, and asthma, among others; 200 families engaged in-person annually.
- The Produce Rx Program will provide at least 40 educational workshops annually to support community members with or at-risk for chronic diseases to make sustainable lifestyle changes.

**STRATEGY** Increase community building and access to mental health resources.

### INITIATIVES

- Build capacity of Community Health Workers in mental health; 90% of CHWs and CHEWs are trained in Mental Health First Aid to provide crisis response with the community.
- Pilot system for CHEWs to provide referrals to LLUH Resiliency Clinic.



## GOAL 4: Improve maternal and child health outcomes.

**STRATEGY** Review and identify opportunities to strengthen LLUH's policies, systems, provider training, and programming.

### INITIATIVES

- Enhance support for at-risk infants and mothers in the Neonatal ICU through Community Health Workers; CHWs provide 200 families annually with support to address social determinants of health.
- Expand *Reach Out & Read* program to serve 10% more young children annually to encourage healthy growth and early literacy; at least 85% of all children ages 0-5 attending well child visits receive a new age-appropriate book.
- Collaborate with the LLUH Health Equity Committee and School of Public Health in conducting robust qualitative assessments that improve support for mothers and infants.

**STRATEGY** Participate in regional efforts to eliminate racial disparities in maternal and infant mortality.

### INITIATIVES

- Collaborate with regional partners and coalitions to advance maternal and infant health equity.





## Appendices

### Community Needs Addressed























The following table translates the findings from the 2022 CHNA and defines how needs will be:

- **Directly addressed** by the CHIS and LLUH’s initiatives that align with community benefit principles and the 2022 CHNA needs identified.
- **Indirectly addressed** by LLUH’s partnerships with other organizations already working in these areas in the community. LLUH will provide funding, capacity building support, and/or in-kind support to organizations committed to addressing these focus areas.
- **Not addressed** due to it not being an area of either direct investment or indirect work with partner organizations.

#### Top 3 Health Challenges

	Directly addressed	Indirectly addressed	Not addressed
 Mental Health			
 Heart Disease and Diabetes			
 Maternal and Child Health			

#### Social and Environmental Conditions Affecting Health

	Directly addressed	Indirectly addressed	Not addressed
 Workforce Development			
 Youth Education			
 Food Security			
 Access to Healthcare			
 Behavioral Health Access and Support			
 Access to Green Spaces			
 Safe and Affordable Housing			
 Community Safety			

## Institute for Community Partnerships (ICP)

The mission of ICP is to ensure LLUH remains relevant and responsive to the community. The Institute is committed to strategically working with our community partners to better understand and address the needs of the community. ICP implements the LLUH-operated community benefit programs and assessment and provides the research necessary to better target health system interventions to underrepresented people in under-estimated communities to promote resiliency and hope. The Institute oversees the office of Community Health Development to ensure the strategic investment with partner organizations, and the coordination and reporting of community benefit outcomes on behalf of LLUH. This unique model allows LLUH to focus our impact on the community towards the social determinants and in the health priorities where we are working to increase access to care for vulnerable populations.

**Mission** | To ensure Loma Linda University Health is Relevant and Responsive to the Community

**Vision** | To be the primary portal for community engagement between Loma Linda University Health and our local community

**Values** | Collaboration, Respect, Equity, Compassion, Excellence



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Institute for Community  
Partnerships



## Institute for Community Partnerships Team



### **Juan Carlos Belliard, PhD, MPH**

Assistant Vice President | Community Partnerships and Diversity  
Director | Institute for Community Partnerships

### **Nery Pereira and Johanny Valladares**

Administrative Assistant

## **Community Benefit**

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### **Jasmine Hutchinson, MSPH**

Director | Community Benefit  
Associate Director | Institute for  
Community Partnerships

### **Mark Camarena, MNLM**

Manager | Community Benefit

### **Stephanie Palaad**

Coordinator | Community Benefit

## **Community-Academic Partners in Service**

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### **Vivian Navarro, MPH**

Director | Community-Academic  
Partners in Service

### **O. Siquem Bustillos, MPH**

Program Manager | Community-  
Academic Partners in Service

## **Special Program Implementation**

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### **Monique Osorio, MBA**

Program Manager | Medi-Cal Enrollment  
& Special Implementation

### **Taylor Pope, MPH**

Research Associate

### **Evelyn Perez**

Program Coordinator | Outdoor Equity

## **Community Health Development**

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### **Marti Baum, MD**

Medical Director | Community Benefit

## **Community Health Worker Integration**

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### **Cristie Granillo, MEd, MS**

Manager | School District CHW Integration

### **Crissy Irani, MBBS, MPH**

Manager | Hospital-Based CHW Integration

### **Nicole Martinez Camacho**

Community Health Worker | NICU

### **Regan Kelso**

Community Health Worker | NICU

### **Adriana Dominguez**

Community Health Worker | BMC

### **Stormie Ballasco**

Community Health Worker | BMC

### **Lucia Cloud**

Community Health Worker | BMC

### **Rosa Perez Quintanilla**

Community Health Worker | BMC

### **Charles Brown**

Community Health Worker | ED



## Community Benefit Administrative Council

Name	Title	Organization
Jodie Wingo, MHA	Chief Executive Officer	Community Health Association of Inland Southern Region
Marti Baum, MD	Medical Director	Community Health Development, Loma Linda University Health
George Lamb	President/CEO	Faith Advisory Council for Community Transformation
Kevin Mahany	Director of Governmental Products & Enrollment	Inland Empire Health Plan
Bridgette Peteet, PhD	Professor, Department of Psychology	Loma Linda University
Richard Chinnock, MD	Chief Medical Officer and Physician-In-Chief	Loma Linda University Children's Health
Chanell Grismore, DrPH(c), MPH, MCHES	Director, Sickle Cell Services	Loma Linda University Health
Jasmine Hutchinson, MSPH	Director, Community Benefit	Loma Linda University Health
Juan Carlos Belliard, PhD, MPH	Director, Institute for Community Partnerships	Loma Linda University Health
Mark Camarena, MNLM	Manager, Community Benefit	Loma Linda University Health
Alex Dubov, PhD, Mdiv	Associate Professor, Division of Interdisciplinary Studies	Loma Linda University School of Behavioral Health
Willie Davis, PhD	Program Director of Hispanic Center of Excellence in Pharmacy	Loma Linda University School of Pharmacy
Tammy García Chiang	Community Affairs Coordinator	Mexican Consulate in San Bernardino
Monica Guerra, PhD	Senior Project Manager	National Community Renaissance
Salomeh Wagaw, MPH	Health Equity Program Director	Riverside University Health System - Public Health
Ginger Ontiveros, MS	Chief Communications & Community Engagement Officer	San Bernardino City Unified School District
Elizabeth Sneed-Berrie	Public Health Program Coordinator, Black Infant Health Program/Perinatal Equity Initiative	San Bernardino County Department of Public Health
Jacqueline Smith	Mental Health Specialist, Black Infant Health Program	San Bernardino County Department of Public Health
Mayra Barcenas, MPH	Program Coordinator, Division of Environmental Health Services	San Bernardino County Department of Public Health
Brad Gates	Director, Workforce Development Department	San Bernardino County
Marcelino (Mars) Serna, MBA	Parent/Family Community Engagement Project Specialist	San Bernardino County Superintendent of Schools

The [2022 Community Health Needs Assessment](#) acts as our "North Star" in addressing the unmet health needs in our region. We are deeply grateful to all community members and key informants who shared their unique experiences and expertise during this process to support the creation of our implementation strategy. We also wish to thank the following partner organizations for their work in ensuring that a wide range of diverse perspectives were included in our findings:







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