



ADVENTIST HEALTH
Saint Helena & Vallejo

IMPLEMENTATION STRATEGY
Year Three Update, FY 2025
January 1, 2025 – December 31, 2025

2025

Adventist Health
St. Helena

Adventist Health
Vallejo

Table of Contents

I. PURPOSE & SUMMARY.....	3
II. GETTING TO KNOW US	
Who we Serve.....	4
Adventist Health.....	5
III. CHIS Update FY 2025.....	6
High Priority: Access to Care	7
High Priority: Health Conditions - Physical Health	8
High Priority: Mental Health	9
IV. SIGNIFICANT IDENTIFIED HEALTH NEEDS	10
V. COMMUNITY HEALTH FINANCIAL ASSISTANCE FOR	
MEDICALLY NECESSARY CARE COMMITMENT.....	11
VI. CLOSING.....	12
VII. FINANCIAL TABLE.....	13

Purpose & Summary

Non-profit health systems, community-based organizations, and public health agencies across the country all share a similar calling: to provide public service to help improve the lives of their community. To live out this calling and responsibility, Adventist Health St. Helena Vallejo conducts a Community Health Needs Assessment (CHNA) every three years, with our most recent report completed in 2022. Part of that process is engaging our community through focus groups, key informant interviews and surveys. Represented and vulnerable populations included: . Part of that process is engaging our community through focus groups, key informant interviews and surveys. Represented and vulnerable populations included:

Agricultural workers (Spanish-speaking), civic government & leadership, community-based healthcare workers focusing on behavioral health, education, health & human services, higher education, providers, families, food insecure, law enforcement, low-income, medically underserved, men, older adults, public health, students, tribal health services, unhoused and women populations. Now that our communities' voices, stories, and priority areas are reflected in the CHNA, our next step is to complete a Community Health Improvement Plan (CHIP), or as we refer to it, a Community Health Implementation Strategy (CHIS).

The CHIS consists of a long-term community health improvement plan that strategically implements solutions and programs to address our health needs identified in the CHNA. Together with the Adventist Health Community Well-Being team, local public health officials, community-based organizations, medical providers, students, parents, and members of selected underserved, low-income, and minority populations, Adventist Health St. Helena and Adventist Health Vallejo intentionally developed a strategic plan to address the needs of our community.

In this Implementation Strategy Year Three Update, FY 2025, also known as the Community Health Plan Update, FY 2025, you will find the strategies, tactics, and partnerships that worked to address the following health needs as identified in the 2022 Adventist Health St. Helena & Vallejo CHNA:

Access to Care

Health Conditions – Physical Health

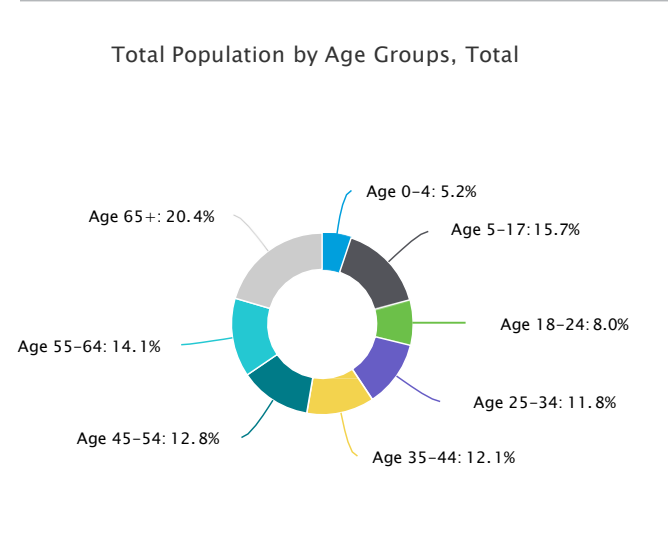
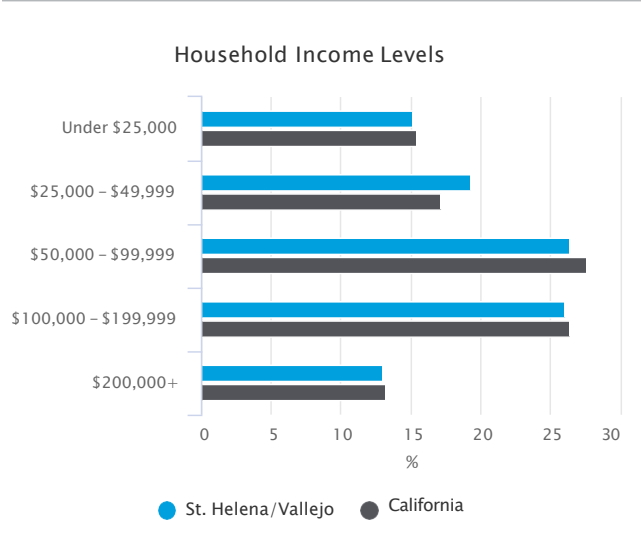
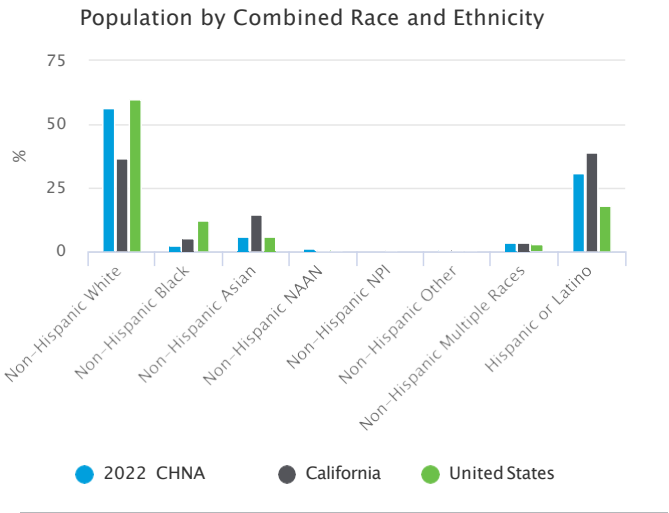
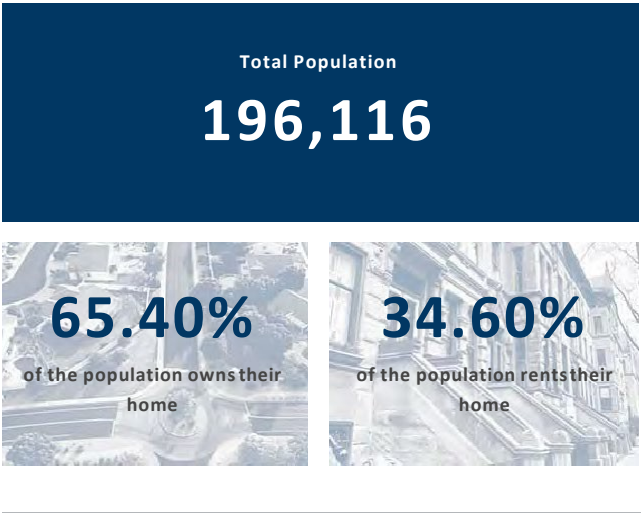
Mental Health

Who We Serve

DEMOGRAPHIC PROFILE

The following zip codes represent Adventist Health St. Helena’s primary service area (PSA), accounting for 75% of hospital discharges. Additionally, we took a collaborative approach and expanded our PSA by inviting Steering Committee members to include the zip codes of those they serve.

The Adventist Health C market has a total population of 196,116 (based on the 2020 Decennial Census). The largest city in the service area is Napa city, with a population of 76,987. The service area is comprised of the following zip codes: 94567, 95423, 95467, 94515, 94576, 94508, 95451, 94599, 94574, 95457, 95453, 94503, 94559, 94558, 95422, 95443, 95461.



About Us

Adventist Health St. Helena & Vallejo

Located in the beautiful Napa Valley, Adventist Health St. Helena is a 151-bed acute-care hospital with key service areas including 24-hour emergency care, Adventist Heart and Vascular Institute, Coon Joint Replacement Institute, Martin O'Neil Cancer Center and Behavioral Health units. We are proud to serve a rural area that ordinarily would not have access to many of the advanced medical services we offer. Adventist Health Vallejo has been serving the Vallejo community and surrounding areas for 30+ years. Our hospital prides itself on providing medical excellence, emergency care, outpatient services, and wellness programs for our behavioral health patients. Adventist Health Vallejo offers short-term psychiatric care for children, adolescents, and adults. In addition, partial hospitalization services for adults who are experiencing psychiatric problems or are dependent on alcohol, drugs, or prescription medications are available.

Adventist Health

Adventist Health is a faith-inspired, nonprofit integrated health system serving more than 80 communities on the West Coast and Hawaii. Founded on Adventist heritage and values, Adventist Health provides care in hospitals, clinics, home care agencies, hospice agencies and joint-venture retirement centers in both rural and urban communities. Our compassionate and talented team of 34,000 includes associates, medical staff physicians, allied health professionals and volunteers driven in pursuit of one mission: living God's love by inspiring health, wholeness and hope. Together, we are transforming the American healthcare experience with an innovative, yet timeless, whole person focus on physical, mental, spiritual and social healing to support community well-being.



Adventist Health's Approach to CHNA & CHIS

Adventist Health prioritizes well-being in the communities we serve across our system. We use an intentional, community centered approach when creating our hospital CHNA's to understand the health needs of each community. After the completion of the community assessment process, we address health needs such as mental health, access to care, health risk behaviors, and others through the creation and execution of a Community Health Implementation Strategy (CHIS) for each of our hospitals and their communities.

The following pages highlight the key findings of the Adventist Health St. Helena & Vallejo CHNA Steering

Committee identified as their top priority health needs, or as we refer to them in this report, their 'High Priority Needs'.

The High Priority Needs are addressed in the Community Health Implementation Strategy and are reported on a yearly basis through the Annual Community Health Plan Update. This is year three of a three-year strategy to improve the health of our community. We invite you to learn about the actions, activities and programs that have been implemented in 2025.

Action Plan for Addressing High Priority Needs

The following pages reflect the goals, strategies, actions, and resources That Adventist Health St. Helena and Adventist Health Vallejo provided in 2025 to address each selected High Priority Need.

ADDRESSING HIGH PRIORITY: ACCESS TO CARE

GOAL	Collaborate to reduce transportation barriers.
Strategy 1:	Work with St. Helena Hospital Foundation to market the Lyft ride program.
Strategy 2:	Collaborate with partners at Napa Valley Transit Authority (NVTa) and Molly's Angels to connect transportation resources to community members who need to access to healthcare.
FY 2025 YEAR THREE Programs/Activity	

COMMUNITY IMPACT Access to Care SUMMARY

- To address access to care we offered a shuttle service for cancer patients who live in Lake County to get to their cancer treatment appointments at Adventist Health St. Helena. Our cancer center is the closest one in this rural area where 48% of our patients are from. These patients fall under the poverty line and one of the barriers to accessing appropriate care is the lack of transportation. Our shuttle service alleviates this issue and provides two trips per day, Monday through Friday.
- St. Helena Hospital Foundation's Mobile Health Unit— affectionately named Mobi and team serve our community's adults, families and most vulnerable residents, including older adults and students. This versatile team provides preventative screenings which include height, weight, BMI, A1c, total cholesterol panel (including education on results), help with medications, education on chronic disease management, and sports physicals for students. The Mobile Health team has also eliminated barriers such as cost, transportation, language, and technology in order to provide COVID-19 vaccines, flu vaccines, and Tdap vaccines. In addition, Mobi provides food distribution to families in the area.

Utilization of the mobile health van addressed more than access to care issues, it also addressed food insecurity issues by providing free fresh produce to community members. The Mobile Health team provided services like produce distribution and health screenings at 145 events in 2025:

- 62,123 lbs. of fresh produce | Estimated value of \$124,000
- Availability at three sites per month - Calistoga, Saint Helena, Napa.
- Provided food to 4,501 households, 18,446 individuals were served including 5,118 children, and 1,917 homebound patients.
- Partners- Up Valley Family Center (Promotoras), Puertas Abiertas, CANV, COPE Family Center

The Mobile Health team provided a total of 1,049 Health Assessments that included blood pressure, height, weight, A1c, total cholesterol panels and health education on the results. They administered approximately 100 high school sports physicals at Saint Helena High School and Calistoga High School. Administered over 1,936 vaccines in 2025 (Covid, Flu, RSV).

Approximately 31.33% of the population in the AHS primary service area lives within a designated Health Professional Shortage Area. Additionally, only 7.42% of residents live within one mile of a hospital with an emergency department, highlighting access challenges within the region. In response, Adventist Health demonstrated its commitment to improving access to care by prioritizing physician recruitment in 2025. These efforts resulted in the successful recruitment of physicians in family medicine and general surgery, along with multiple Advanced Practice Providers across various specialties, strengthening the local care delivery system.

ADVENTIST HEALTH COMMUNITY IMPACT IN THE NEWS:

[Partnership aims to improve farmworker health care in Napa | News | napavalleyregister.com](#)
[Outdoor dinner in St. Helena benefits mobile health program | Lifestyles | napavalleyregister.com](#)

ADDRESSING HIGH PRIORITY: HEALTH CONDITIONS - PHYSICAL HEALTH

GOAL	Reduce behaviors that lead to chronic health conditions.
Strategy 1:	Create an environment that discourages commercial tobacco and nicotine use, provides healthy tobacco-free spaces and places, supports prevention, cessation, and enforcement efforts, and limits/regulates the retail of tobacco products.
Strategy 2:	Encourage healthy behaviors that reduce preventable diseases by making programs/spaces affordable, accessible, and attractive to both English and Spanish speaking individuals.
Strategy 3:	Provide chronic disease and cancer screenings.
FY 2025 YEAR THREE Programs/Activity	

COMMUNITY IMPACT Health Conditions SUMMARY

Adventist Health St. Helena was committed to addressing behaviors that can lead to chronic illness as a priority health need by directing contributions and programming in the community. These included:

- Our donations to UpValley Family Centers (UVFC) allow them to encourage healthy behaviors and reduce preventable diseases through their Promotoras and Senior Lunch and Learn programs. The Promotoras are a group of Community Health Workers who are trained lay people and have a strong capacity for grassroots community engagement, spreading key wellness information to the Spanish speaking members of the community.
- Sponsorship of the walk/run event for Zero Prostate Cancer event. The organization's goal is to help create Generation ZERO - the first generation free from prostate cancer. Sponsorships of their Run/Walk help them keep their fundraising costs low and ensure that more money goes towards saving lives and keeping families together.
- Prostate cancer support groups were made available to community members to provide a supportive environment for individuals affected by prostate cancer. These groups offered education, peer connection, and access to resources that promote emotional well-being and informed decision-making. A total of 43 individuals participated in these support groups, reflecting continued community need and engagement in services addressing cancer-related health conditions.
- Adventist Health St. Helena continued to offer free mammograms to those who are at risk and cannot afford the screening otherwise.
- Educational seminars were offered to the community to provide up-to-date information on advances in the treatment and management of atrial fibrillation (AFib). As part of a broader population health initiative, these efforts aimed to increase awareness, improve health literacy, and empower individuals to seek appropriate care. By enhancing understanding of available treatment options, the program supports community members in making informed health decisions, ultimately contributing to improved well-being and daily functioning.
- Free Diabetes Classes were offered to the public. The purpose of the class is to provide education and support to people and their loved ones/ caregivers who are living with diabetes. The class allows community members to meet one on one with a registered dietician where they focus on nutrition, physical activity, medications, and mental health with the goal of lowering hemoglobin A1c and improving quality of life.
- Cooking demonstrations were provided to the community to encourage healthy behaviors and provide education on nutrition and well-being.

ADDRESSING HIGH PRIORITY: MENTAL HEALTH

GOAL	Work with Mental Health Partners to provide additional treatment and programs to our service area while stimulating an environment that increases mental well-being.
Strategy:	To connect the people of Upper Napa Valley to opportunities that impact individual well-being through engagement, education, and inspiration.
FY 2025 YEAR THREE Programs/Activity	

COMMUNITY IMPACT Mental Health SUMMARY/ALL STRATEGIES

- Adventist Health Vallejo participated in coalition building through the attendance of the Solano County Behavioral Health LPS/PED bi-monthly meetings. This meeting is a county-wide consortium comprised of entities, both public and private, that care for the uninsured, underinsured, homeless, disabled and persons living with mental illness. It is a collaborative group whose main focus is to strategize a multi-system approach to the above-mentioned groups for their betterment and care. They also participated in the Napa County Behavioral Health bi-monthly meetings to address mental health care in Napa Valley.
- Adventist Health Vallejo had 9 volunteers participate in the annual NAMI behavioral health walk to support education and promote mental wellness within the community.
- Contributions were made to Mentis, a nonprofit organization AHSN has partnered with to address mental health needs in the community. Mentis provides bilingual and affordable mental health services to people of every age and income level. Our donations help Mentis provide services from early intervention to outpatient treatment to residential treatment.
- The contributions made to UpValley Family Centers for Senior Lunch and Learns also provided engagement, education and inspiration. The Lunch and Learns at UVFC are aimed at the older adults of the community to help keep them informed of helpful resources when it comes to their health and well-being. Some of the workshops have covered topics from emergency preparedness to housing rights to Medi-Cal expansion. It also provided the opportunity to socialize with others to alleviate the loneliness that many older adults face.

Significant Identified Health Needs

The Adventist Health Community Well-Being team and community partners collectively reviewed all relevant significant health needs identified through the CHNA process. Using a community health framework developed for this purpose, 12 significant health needs were initially considered. The list of significant needs are as follows:

- Access to Care
- Community Safety
- Community Vitality
- Education
- Environment & Infrastructure
- Financial Stability
- Food Security
- Health Conditions
- Health Risk Behaviors
- Housing
- Inclusion & Equity
- Mental Health

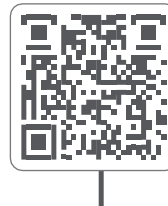
From this group of 12, several high priority health needs were established for Adventist Health St. Helena/Adventist Health Vallejo. High priority health needs were chosen as they had demonstrated the greatest need based on severity and prevalence, intentional alignment around common goals, feasibility of potential interventions, and opportunities to maximize available resources over a three-year period.

Using the criteria mentioned above, we were able to determine which needs were high priority, as compared to those that were significant needs. The High Priority Needs are the focus of the community health implementation strategy and this accompanying Implementation Strategy, Year Three Update, FY 2025. The remaining significant health needs are not addressed directly but will likely benefit from the collective efforts defined in this report. The following table provides additional information on all the significant health needs that were considered.

Adventist Health chose high priority needs to address based on community ranking of needs as well as areas of alignment and scope of expertise within AH St. Helena and AH Vallejo. The remaining significant health needs will not be addressed directly but will likely benefit from the collective efforts defined in this report.

TABLE OF SIGNIFICANT IDENTIFIED HEALTH NEEDS

Access to Care
Health Conditions- Physical Health
Mental Health
Lower Priority Needs that will not be addressed directly by Adventist Health St. Helena and Adventist Health Vallejo due to limited resources, expertise and feasibility of viable interventions
Financial Stability
Health Risk Behaviors
Housing
Food Security
Environment & Infrastructure
Homelessness
COVID
Education



Scan the QR code for the full Secondary Data Report

Community Health Financial Assistance for Medically Necessary Care Commitment

Adventist Health understands that community members may experience barriers in paying for the care they need. That is why we are committed to providing financial assistance to those who may need support in paying their medical expense(s).

Community members can find out if they qualify for financial aid in paying medical bills by completing a financial assistance application. Applications can be filled out at the time care is received or after the bill has been administered. To access the financial assistance policy for more information or contact a financial assistant counselor, please visit <https://www.adventisthealth.org/patient-resources/financial-services/financial-assistance/>.



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Thank you for reviewing our Implementation Strategy Year Three Update, FY 2025.
We are proud to serve our local community and are committed to making it a healthier place for all.
To provide feedback on this community report or other reports referenced, please email community.benefit@ah.org. You may also request a copy free of charge.

To review this report as well as our most recent Community Health Needs Assessment and
Community Health Implementation Strategy, please visit:
<https://www.adventisthealth.org/st-helena/about-us/community-benefit/>
<https://www.adventisthealth.org/vallejo/about-us/community-benefit/>

At Adventist Health, community benefit is an essential extension of our mission and the care continuum. Our investments are guided by our Community Health Needs Assessments and reflect a proactive, strategic approach to improving the health and well being of the communities we serve. All community benefit activities are reported at cost. Patient financial assistance (charity care) included in this report is submitted to the California Department of Health Care Access and Information (HCAI) through the Hospital Annual Financial Disclosure Reports, as required by Assembly Bill (AB) 204. Community benefit expenses related to charity care, Medi-Cal, and other means tested programs are calculated using a cost to charge ratio to reflect the cost of services net of any associated revenue. Other community benefit activities are valued using standard cost accounting methodologies, and restricted offsetting revenue is deducted where applicable to determine the net community benefit.

In accordance with AB 204, Section 95103, net community benefit expenses are reported separately for services provided to vulnerable populations and for services that benefit the broader community. These totals represent the economic value of Adventist Health's commitment to meeting community needs and advancing equitable health outcomes.

Adventist Health St. Helena	Net Vulnerable Population	Net Broader Community	Total Community Benefit
Traditional charity care	\$357,783	\$0	\$357,783
Public programs - Medicaid	\$0	\$0	\$0
Medicare	\$48,047,944	\$0	\$48,047,944
Other means-tested government programs (Indigent care)	\$0	\$0	\$0
Community health improvement services	\$687,305	\$241,881	\$929,186
Health professions education	\$3,779	\$104,433	\$108,212
Non-billed and subsidized health services	\$0	\$16,068,801	\$16,068,801
Generalizable Research	\$0	\$9,070	\$9,070
Cash and in-kind contributions for community benefit	\$8,868	\$159,796	\$168,664
Community building activities	\$0	\$98,598	\$98,598
TOTAL COMMUNITY BENEFITS	\$49,105,679	\$16,682,579	\$65,788,257

Adventist Health Vallejo FY 2025	Net Vulnerable Population	Net Broader Community	Total Community Benefit
Traditional charity care	\$132,808	\$0	\$132,808
Public programs - Medicaid	\$0	\$0	\$0
Medicare	\$0	\$0	\$0
Other means-tested government programs (Indigent care)	\$0	\$0	\$0
Community health improvement services	\$0	\$50,276	\$50,276
Health professions education	\$0	\$266,896	\$266,896
Non-billed and subsidized health services	\$0	\$3,166,204	\$3,166,204
Generalizable Research	\$0	\$0	\$0
Cash and in-kind contributions for community benefit	\$0	\$5,888	\$5,888
Community building activities	\$0	\$1,760	\$1,760
TOTAL COMMUNITY BENEFITS	\$132,808	\$3,491,024	\$3,623,832