STANFORD HEALTH CARE TRI-VALLEY

2025 Community Benefit Report
2026 Community Benefit Plan

Improving health.
Advancing equity.

Stanford
MEDICINE | Health Care
Tri-Valley

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Words from Our President and CEO

As we reflect on Fiscal Year 2025, I am proud of how Stanford Health Care Tri-Valley has deepened its commitment to serving our community. This past year, we dedicated over $58 million to support our neighbors through charity care, community health initiatives, and the education of future health care providers who share our community-centered values. Our ongoing mission is to expand access to exceptional patient care and to address the root causes of health disparities, especially for those who have been underserved or marginalized.

This community benefit report highlights the progress we've made and celebrates the positive impacts we have achieved. I encourage you to explore the report for a comprehensive look at our initiatives and partnerships. Looking ahead, I am excited to continue advancing our work, breaking down barriers to care, and striving for a healthier, more equitable community for everyone.

Sincerely,

Misty Jones, MBA, MSN, RN
President & CEO
Stanford Health Care Tri-Valley

Stanford Health Care Tri-Valley provides high-quality care rooted in science and compassion to support the health and well-being of its community in the East Bay and beyond. The hospital is an integral part of the adult health care delivery system of Stanford Medicine.

By the Numbers

Services
242 Licensed Beds
22 Licensed ICU Beds
13 Operating Rooms

Patient Visits
Doubled the number of monthly transfers in one year
313,884 Outpatient (Excluding Emergency Room Visits)
42,592 Emergency Room
1,307 Births
8,895 Discharges

Community Support
$46M Community Benefit Investment

Our People

1,721 Employees & **980** Medical Staff

Patient Experience

Interpreters
Interpreters are available on demand by phone or video in the most commonly requested languages, including Spanish, Mandarin, Cantonese, Vietnamese, Russian, American Sign Language (ASL), Farsi/Dari, and Korean. In-person interpreters for some languages are available when pre-scheduled. Interpreters proficient in 200+ other languages are available upon request.

Awards & Recognition

The **Stanford Medicine Cancer Center** is part of the Stanford Cancer Institute, an **NCI-Designated Comprehensive Cancer Center**.

NCI
Designated Comprehensive Cancer Center

National Accreditation Program for Breast Cancer
Stanford Health Care Tri-Valley is fully accredited by the National Accreditation Program for Breast Centers, administered by the American College of Surgeons.

NAPBC
NATIONAL ACCREDITATION PROGRAM FOR BREAST CENTERS
ACCREDITED BREAST CENTER
A QUALITY PROGRAM of the AMERICAN COLLEGE OF SURGEONS
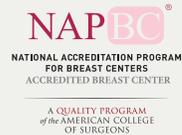
American Heart Association's Gold Plus Get With The Guidelines® – Stroke Quality Achievement Award
Stanford Health Care Tri-Valley received this award for its commitment to ensuring stroke patients receive the most appropriate treatment according to nationally recognized, research-based guidelines, ultimately leading to more lives saved and reduced disability.

American Heart Association
2024 GET WITH THE GUIDELINES
GOLD PLUS
TARGET: STROKE HONOR ROLL
TARGET: TYPE 2 DIABETES HONOR ROLL
STROKE

International Board of Lactation Consultant Examiners
Stanford Health Care Tri-Valley received the International Board Certified Lactation Consultant® (IBCLC®) Care Award in recognition of staffing professionals who hold the prestigious IBCLC certification and provide a lactation program. In addition, the facility demonstrated that it has provided training for nursing, medical, and other staff who care for breastfeeding families, and it has implemented special projects that promote, protect, and support breastfeeding.

IBCLC Care Award
Sponsored by IBLCE & ILCA

Data are based on FY 2024 health system statistics for Stanford Health Care Tri-Valley only.

2025 Community Benefit Report

Stanford
MEDICINE

Health Care
Tri-Valley

INTRODUCTION

Stanford Health Care Tri-Valley has provided high-quality, nonprofit health care to the Tri-Valley and surrounding communities since 1961. Through state-of-the-art technology and highly skilled physicians, nurses, and staff, Stanford Health Care Tri-Valley provides a wide range of health care services at its Livermore, Pleasanton, and Dublin medical facilities. Stanford Health Care Tri-Valley employs multifaceted interventions to support our patients and community as well as address public health needs, informed by guiding principles and partners.

Mission Statement: To care, to educate, to discover.

Vision: Healing humanity through science and compassion, one patient at a time.

Stanford Medicine: Working Across the Health System

Stanford Medicine is an integrated academic health system comprising the Stanford School of Medicine and pediatric and adult health care delivery systems, including Lucile Packard Children's Hospital Stanford, Stanford Health Care, and Stanford Health Care Tri-Valley.

Together, we harness the full potential of biomedicine through collaborative research, education, and clinical care.
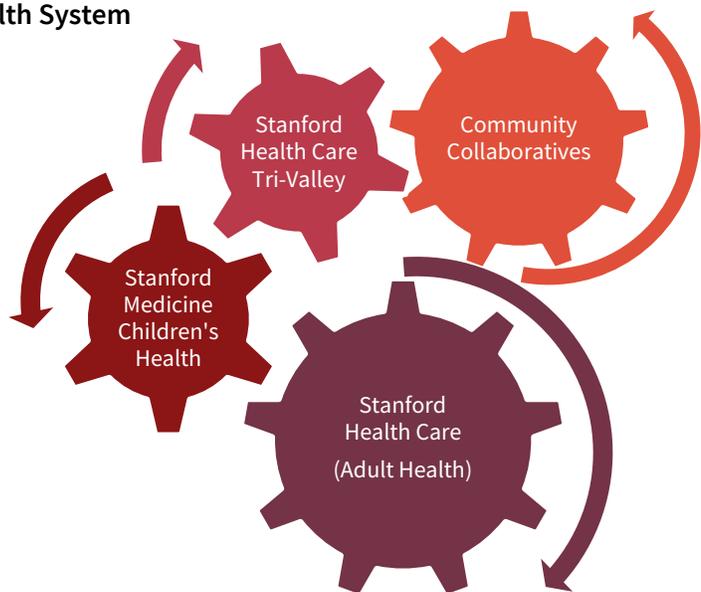
COMMUNITY SERVED

SHC Tri-Valley's primary service area is the Tri-Valley. The Tri-Valley encompasses the suburban cities of Livermore, Pleasanton, Dublin, and San Ramon in the three valleys from which it takes its name: Amador Valley, Livermore Valley, and San Ramon Valley. The cities of Dublin, Livermore, and Pleasanton are in Alameda County, and the cities of Danville and San Ramon are in Contra Costa County. SHC Tri-Valley operates facilities in Dublin, Livermore, and Pleasanton (see map of the community served, right). The Tri-Valley accounts for the majority of SHC Tri-Valley's inpatient discharges. Based on the CHNA findings, Stanford Health Care Tri-Valley provides targeted community benefits across the Tri-Valley area.

Stanford Health Care Tri-Valley serves the Tri-Valley community.

TRI-VALLEY AREA

A majority of residents are non-White.

White 46%
Asian 37%
- 18% Asian Indian
- 10% Chinese
- 3% Filipino
- 6% Other Asian

Multi 10%
Other 4%
Black 2%
Native Am 1%
Pac Isl 0%
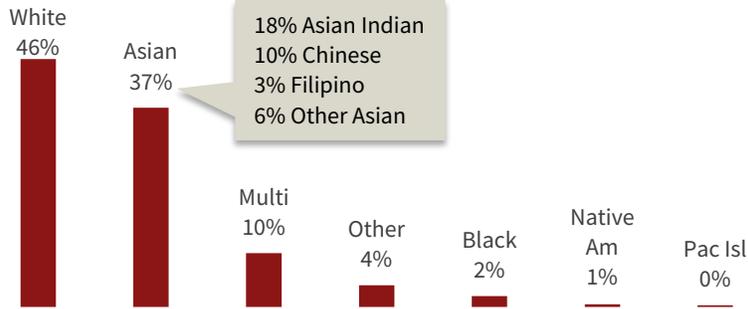
More than one in ten residents are Hispanic/Latino.

13%
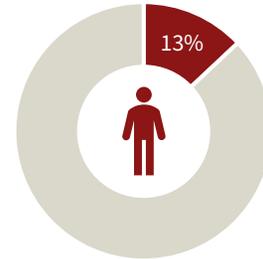
One in four residents are children.

Aged 18-64 61%
Under 18 25%
Over 64 14%
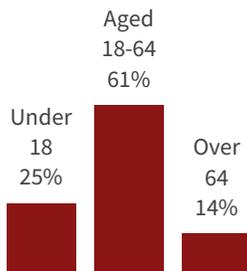
Close to one-third of residents are foreign-born.

31%
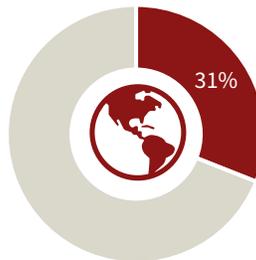
About one in ten people over age 5 speak limited English.

11%
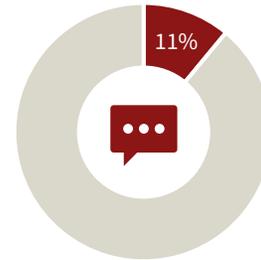
$121,703

household Real Cost Measure (RCM), Alameda County*

$1.5M

median home sale price across Tri-Valley cities

One in six Dublin, Livermore, and Pleasanton households live below the county's RCM.

17%
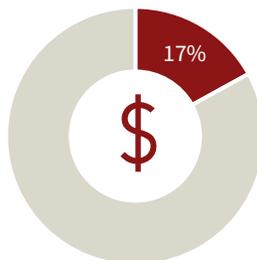
Fewer than one in ten Tri-Valley residents lives with a disability.

7%
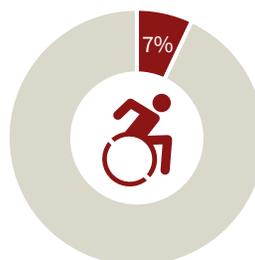
About two-thirds of residents aged 25+ have earned at least a Bachelor's degree.

65%
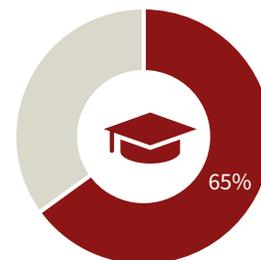
*Dollar amount not provided for sub-county area. Sources: United Way: Real Cost Measure, 2021. Five cities' data: Redfin.com: Median home sale price, 2024. U.S. Census Bureau: race and age, 2019–2023, other demographics, 2023.

ABOUT COMMUNITY BENEFIT

From the beginning, Stanford Health Care Tri-Valley has been dedicated to improving the health of the communities it serves. Over the past three decades, the hospital has listened closely—through community forums, focus groups, and surveys—to identify health and wellness needs, and to address the needs by shaping its work around what it has learned.

SHC Tri-Valley's Community Benefit program was created to provide essential health care services to members of the community, with a focus on the most vulnerable. At the core of this work is a commitment to addressing the social determinants of health and breaking down barriers that affect well-being and opportunity, including housing, economic security, and social support.

To address these needs, SHC Tri-Valley partners with local community-based organizations and government agencies to support programs that improve the health of the community, working together to address the various needs of community members. This annual Community Benefit Report describes the impact of these partnerships over the past fiscal year and the 2026–2028 Community Benefit Plan outlines the strategies SHC Tri-Valley will pursue to further improve community health in the year ahead.

SHC Tri-Valley is committed to delivering exceptional Community Benefit across all the communities throughout its service area. Every three years, SHC Tri-Valley selects several priority health areas and, with its partners, carries out related initiatives and programs that improve community health and well-being.

SHC Tri-Valley's community engagement efforts also include community building, workforce development, advocacy, and health education and prevention. By supporting and advancing positive change, we work to promote health equity now and for future generations.

In the Community: Beyond Hospital Walls

Community Health Needs Assessment	Stanford Health Care Tri-Valley's triennial community health needs assessments guides strategy and decision-making, using primary and secondary data collection methods. Its hallmark is capturing community voice, particularly of the most vulnerable community members
Community Partnerships	Stanford Health Care Tri-Valley partners with community-based organizations addressing identified health needs to co-create and implement interventions that deliver long-term, sustainable, impactful solutions to improve community health and well-being.
Communication	Stanford Health Care Tri-Valley fosters and engages in bi-directional communication with the community. This communication measures and ensures accountability and impact.

THE COMMUNITY BENEFIT CYCLE

Stanford Health Care Tri-Valley's Community Benefit work starts with a comprehensive Community Health Needs Assessment (CHNA) every three years to determine the greatest health needs of the community. This work is in collaboration with public health departments, hospital partners, community-based organizations, and community leaders, listening closely to people from the communities these partners serve. Based on the CHNA, SHC Tri-Valley engages in its Community Benefit planning process to develop the initiatives and strategies that it will deploy, in concert with its partners, to address selected community health needs for the coming three years.

SHC Tri-Valley partners with community-based organizations already working on each health need, participates in local collaboratives, and provides community health improvement grants. By building on the strong foundation already in place, SHC Tri-Valley advances priority health initiatives and supports community members in reducing barriers to care and achieving improved health and wellness.

The hospital reports annually on the status of its Community Benefit plan to the California Department of Health Care Access and Information.

The Community Benefit Process
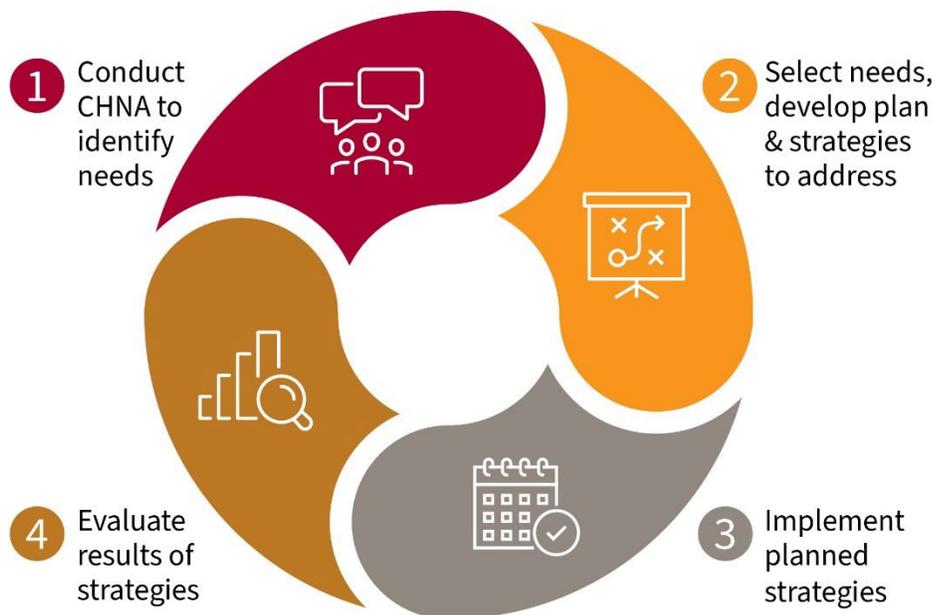
2022 CHNA PROCESS, PRIORITIZATION, AND 2023-2025 SELECTED HEALTH NEEDS

As required by California Senate Bill 697, SHC Tri-Valley produced a CHNA in 2022. It actively collaborated with other nonprofit hospitals in this work. The goal was to collectively gather community feedback, understand existing data about health status, and prioritize local health needs in each hospital area.[1]

Health needs were identified by synthesizing primary qualitative research and secondary data, and filtering those needs against a set of criteria. Needs were then prioritized by SHC Tri-Valley's Community Benefit Advisory Group (CBAG), employing the community's prioritization of health needs and additional criteria. The final health needs were selected by the CBAG after reviewing the data, the prioritization process, and current SHC Tri-Valley community health initiatives. The CBAG then applied another set of criteria, from which four significant health needs were selected:

Behavioral Health: Mental health in the Tri-Valley is considered by key informants to be at a critical level since the COVID-19 pandemic began and is perceived as especially bad for youth. Experts say there is limited access to mental/behavioral health care in the Tri-Valley compared to other parts of the county. Substance use and alcohol are issues for Tri-Valley residents; binge drinking is higher in Dublin and Pleasanton than it is statewide.

Economic Stability and Housing: The cost of living in the Tri-Valley is extremely high and affordable housing is lacking. The COVID-19 pandemic worsened existing problems, with many losing jobs and needing to stretch resources. Key informants said food insecurity and homelessness have been on the rise in the area due to the pandemic. Educational inequities, such as the completion of college prep courses, were made worse by lengthy periods of virtual schooling; this can affect future opportunities of Tri-Valley residents.

Health Care Access and Delivery: Smaller proportions of adults in Tri-Valley cities had routine annual check-ups, and smaller proportions who had high blood pressure were taking medication to manage their condition, compared to their peers statewide. CHNA participants said there was a shortage of health care providers in the Tri-Valley. Key informants pointed to an income gap impacting the ability of many to access care, highlighted inequities in access to care among low-income, Black, and LGBTQ+ groups, and called for more culturally competent providers who represent the community.

Healthy Lifestyles: A smaller proportion of youth in some Tri-Valley cities are healthy (not overweight/obese, engaging in regular physical activity) compared to their peers across the state. There are disparities in heart disease deaths and child fitness statistics in the Tri-Valley, with some vulnerable populations doing worse than others. The Tri-Valley's built environment is not optimal for healthy lifestyles, based on grocery store access, super centers and club stores, and the area's walkability index.

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[1] Find California SB 657 at https://hcai.ca.gov/wp-content/uploads/2020/10/SB697-Report-to-the-Legislature-Community-Benefit.pdf. For information about Stanford Health Care Tri-Valley's 2022 CHNA process and for a copy of the 2022 CHNA report, please visit https://stanfordhealthcare.org/tri-valley/about-us/community-benefits.html.

Stanford Health Care Tri-Valley's Overall Community Investment

Giving Back Through Community Benefit

Stanford Health Care Tri-Valley's annual community investment focuses on improving the health of our community's most vulnerable populations, supporting the health of the broader community, and providing opportunities for health education, research, and training. To accomplish these goals, all community benefit investment addresses the four prioritized community health needs: behavioral health; economic stability and housing; health care access and delivery; and healthy lifestyles.

In 2025, SHC Tri-Valley engaged in Community Benefit activities to improve the health status of Tri-Valley community members, both within and beyond its hospital walls.

Total net value of quantifiable benefits provided to the community:
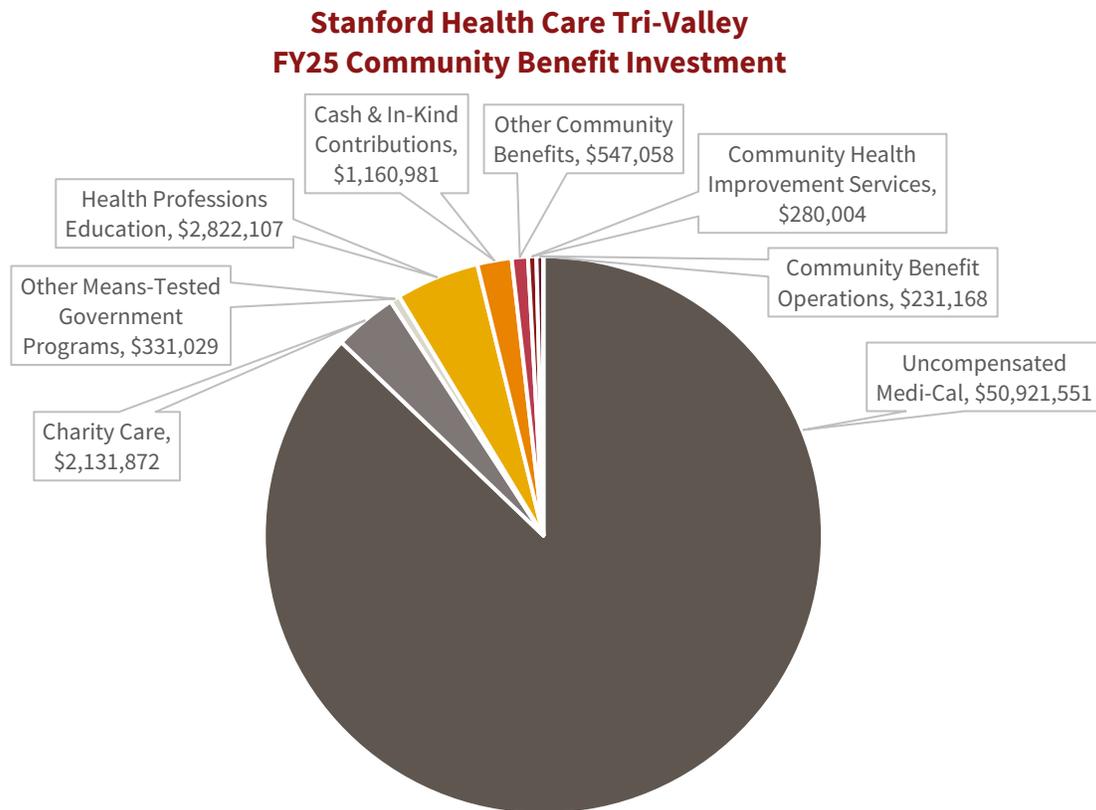
$58,425,770*

in fiscal year 2025

plus $119,784,099 in uncompensated Medicare

Overall Community Investment

California Senate Bill 697 (1994) mandates that nonprofit hospitals report annually on their strategies to improve community health. This report covers fiscal year (FY) 2025 beginning September 1, 2024, and ending August 31, 2025. During this time, SHC Tri-Valley invested over $58 million in services and activities to improve the health of the communities it serves, including vulnerable populations.

In addition to providing details on this investment, this report describes the community benefit planning process and the [Community Benefit Plan for FY 2026](#).

Stanford Health Care Tri-Valley FY25 Community Benefit Investment

Pie chart with the following segments:
- Cash & In-Kind Contributions, $1,160,981
- Other Community Benefits, $547,058
- Community Health Improvement Services, $280,004
- Health Professions Education, $2,822,107
- Community Benefit Operations, $231,168
- Other Means-Tested Government Programs, $331,029
- Charity Care, $2,131,872
- Uncompensated Medi-Cal, $50,921,551

Stanford Health Care Tri-Valley also experienced a Medicare shortfall of almost $120 million in uncompensated funds in FY 2025.

Financial Assistance

SHC Tri-Valley is proud to be part of the safety net supporting the community's most vulnerable groups. Although this is one of the nation's most affluent areas, many people still struggle and often go without essential health care and community resources. Along with its Community Benefit efforts, SHC Tri-Valley provides financial assistance to people who qualify[2] and includes those efforts in its Community Benefit valuation as undercompensated costs of medical care and charity care costs.

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[2] To learn more about our financial assistance programs, please visit https://stanfordhealthcare.org/tri-valley/patients-and-visitors/financial-assistance.html.

FY25 Financial Assistance ($53,384,453)*

Charity Care, $2,131,872
Uncompensated care provided to patients who cannot afford to pay

Medi-Cal, $50,921,551
Costs associated with serving Medi-Cal beneficiaries

Other Government Means-Tested Programs, $331,029
Costs associated with serving out-of-state Medicaid enrollees

* Stanford Health Care Tri-Valley also experienced a Medicare shortfall of almost $120 million in uncompensated funds in FY 2025.

The remaining categories of SHC Tri-Valley's FY25 Community Benefit investment are shown below.

Health Professions Education, $2,822,107
- Nurse, pharmacist, and allied health professions training

Community Health Improvement Services, $280,004
- Community health education programs, including for older adults
- Patient financial advocacy and enrollment assistance
- Supportive care programs (e.g., for new mothers)
- Post-hospital support: case management, transportation, clothing

Cash and In-Kind Contributions, $1,160,981
- Community clinic capacity building and support
- Community health improvement grants
- Event sponsorships for nonprofit organizations

Other Community Benefits, $547,058
- Workforce development opportunities
- Emergency preparedness
- Community service initiatives for staff

Community Benefit Operations, $231,168
- Community health needs assessment, reporting and compliance costs

Stanford Health Care Tri-Valley's Community Investment in Vulnerable Populations

Community Investment in Vulnerable Populations

Vulnerable populations are defined as groups of people at higher risk for poor health outcomes due to factors including significant barriers to care and economic disparities. Vulnerability is influenced by a combination of social, economic, cultural, and environmental factors, as well as individual circumstances such as disability or health status. According to the California Department of Health Care Access and Information, vulnerable populations include: [3]

- Populations exposed to medical or financial risk by virtue of being uninsured, underinsured, or eligible for Medi-Cal, Medicare, state Children's Services Program, or county indigent programs
- Racial and ethnic groups experiencing disparate health outcomes
- Socially disadvantaged groups, including the following:

  - Unhoused populations
  - Communities with inadequate access to clean air and safe drinking water, as defined by an environmental Healthy Places Index score of 50% or lower
  - People with disabilities
  - People identifying as LGBTQ
  - Individuals with limited English proficiency

These groups are a focus of Community Benefit efforts because they are at greater risk for health disparities, including significant gaps in the quality of care they receive compared to others. A failure to address their needs can lead to significant negative health outcomes and an increased burden on the health care system. Community Benefit plans aim to improve access to care, reduce health disparities, and ensure that all individuals can receive the health services they need.

Total net value of quantifiable benefits provided to vulnerable populations:

$54,534,318*

in fiscal year 2025

plus $119,784,099 in uncompensated Medicare

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[3] California Department of Health Care Access and Information (2022). *HCAI factsheet, hospital community benefits plans: vulnerable populations.* Retrieved from https://hcai.ca.gov/wp-content/uploads/2022/01/Hospital-Community-Benefits-Plans-Program-Vulnerable-Popuations-Fact-Sheet-March-2022-Final.pdf.

Stanford Health Care Tri-Valley
FY25 Vulnerable Populations Community Benefit Investment

Cash & In-Kind Contributions, $495,123

Community Health Improvement Services, $477,516

Other Means-Tested Government Programs, $331,029

Other Community Benefits, $177,227

Charity Care, $2,131,872

Uncompensated Medi-Cal, $50,921,551
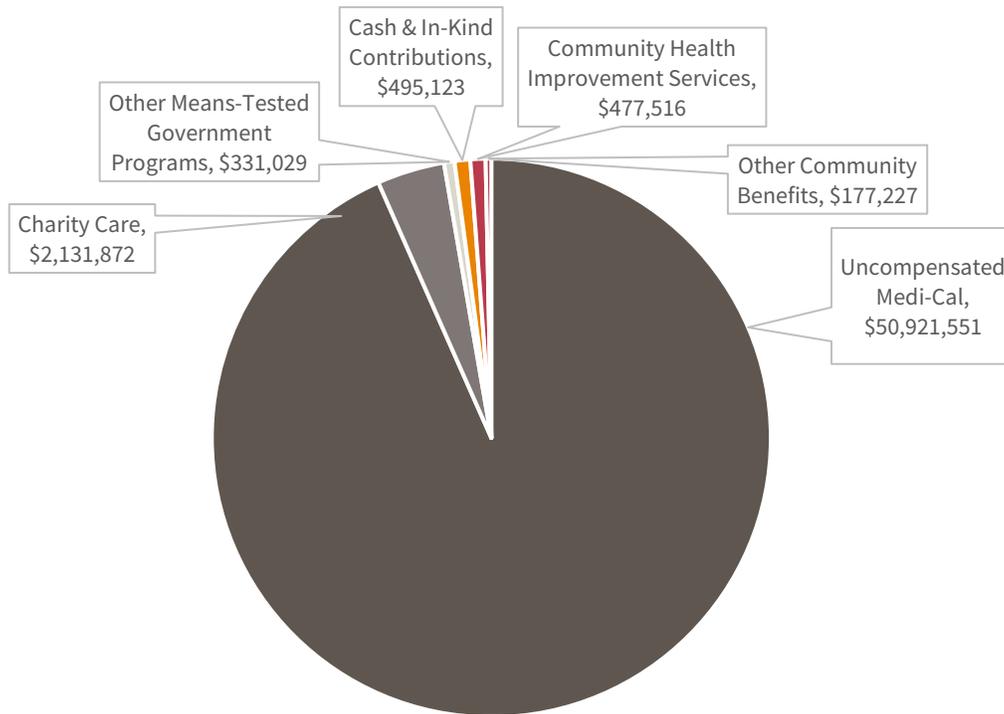
As mentioned previously, Stanford Health Care Tri-Valley provides financial assistance to people who qualify[4] (i.e., are economically vulnerable), and the hospital includes these efforts in its Community Benefit valuation as uncompensated costs of medical care and charity care costs. See the Financial Assistance call-out box in the Overall Community section above for details.

The remaining categories of SHC Tri-Valley's FY25 Community Benefit investments in **vulnerable populations** are shown below.

Community Health Improvement Services, $477,516

- Patient financial advocacy and enrollment assistance
- Post-hospital support: case management, transportation, clothing

Cash and In-Kind Contributions, $495,123

- Community clinic capacity building and support
- Community health improvement grants
- Event sponsorships for nonprofit organizations

Other Community Benefits, $177,227

- Workforce development opportunities

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[4] To learn more about our financial assistance programs, please visit https://stanfordhealthcare.org/tri-valley/patients-and-visitors/financial-assistance.html.

SHC Tri-Valley's Community Benefit Investments in Vulnerable Populations, by Health Need

Note: An asterisk (*) indicates investments that are hospital-based rather than community-based.

BEHAVIORAL HEALTH

Based on the 2022 Community Health Needs Assessment findings, our interventions to improve behavioral health outcomes in our community include both mental/behavioral health and substance abuse interventions. For more information about SHC Tri-Valley's Community Health Needs Assessment, please visit: https://stanfordhealthcare.org/tri-valley/about-us/community-benefits.html.

Partner or Program	Topic	Program Details and FY25 Impact
AXIS COMMUNITY HEALTH	Behavioral Health program	Funded a grant to support one full-time licensed marriage and family therapist (MFT), which has increased capacity and reduced wait times to serve uninsured Tri-Valley residents at Axis' clinical site. Mental health visits: 2,165

ECONOMIC STABILITY AND HOUSING

Based on the 2022 Community Health Needs Assessment findings, our interventions to improve economic stability and housing in our community include: 1) reducing food insecurity and increasing access to healthy food; 2) reducing barriers to employment; and 3) reducing housing instability among vulnerable community members. For more information about SHC Tri-Valley's Community Health Needs Assessment, please visit: https://stanfordhealthcare.org/tri-valley/about-us/community-benefits.html.

Partner or Program	Topic	Program Details and FY25 Impact
ALAMEDA COUNTY VETERANS STAND DOWN	Community event	Sponsored a one-day event to support homeless or at-risk veterans by providing the necessary social and human services to help them improve their lives. In addition to snacks and lunch, resources for veterans, including physical and mental health care, dental checkups, haircuts, and more were offered at this event. Persons served: 250
WORKFORCE DEVELOPMENT	College prep for low-income students	Partnership with Cristo Rey De La Salle—a rigorous and personalized college preparatory curriculum integrated with a corporate work-study experience prepares high school students of limited economic means to succeed in college and in life.
CROSSWINDS CHURCH	Operation Cranberry Sauce	Provided funding to support Operation Cranberry Sauce (OCS). OCS food packages feed a family of five for a Thanksgiving meal. Each low- income family received one box of groceries that included staples and nonperishable items and a frozen turkey. Food packages were provided to approximately 9,000 low-income family members in Livermore, Pleasanton, Dublin, San Leandro, Castro Valley, Hayward, and Oakland. Persons served: approx. 9,000
DAILY BOWL	Food donation	Donated surplus meals & food supplies to Daily Bowl. Daily Bowl then delivers that surplus food which would otherwise go to waste, distributing it to local agencies feeding people who are hungry. Over 2,000 lbs. of food donated
GOODNESS VILLAGE	Housing and health resources	Provided funding towards the salary of a case manager, who provided intensive comprehensive case management services to village residents. Goodness Village is a tiny-home community that provides affordable and permanent housing options in a supportive community for people transitioning out of chronic homelessness. Persons served: 33

Partner or Program	Topic	Program Details and FY25 Impact
LITTLE MIRACLES	Essential supplies	Supported Little Miracles to help fund the gap in providing essential baby supplies to families in need in the Tri-Valley. Funds from this grant will be used to purchase items such as car seats, diapers and baby formula. This organization is consistent with, and supportive of, our mission by providing a healthy start for newborns by equipping families in need with essential supplies. Persons served: 176
OPEN HEART KITCHEN	Food distribution	Provided funding for Open Heart Food Bank. The food bank is the Redistribution Organization of Alameda County Community Food Bank, providing a bridge in East County to redistribute food to the local food pantries of the Tri-Valley who serve food-insecure clients from low-income backgrounds, the unhoused, people with disabilities, and older adults living on fixed-incomes.
PLEASANTON UNIFIED SCHOOL DISTRICT PACE (PLEASANTON ADULT AND CAREER EDUCATION) PROGRAM	Adult and career education	Partnership supports adults with intellectual and developmental disabilities in gaining hands-on workplace experience while preparing for competitive integrated employment. Each intern participates in three rotations during the nine-month program, working alongside an Employment Training Specialist, business mentors, and coworkers at the worksite. Persons served: 1
SUNFLOWER HILL	Housing and programs for people with disabilities	Provided funding in support of the organization of The Irby Ranch Farmers Market program. This program provides fresh fruits, vegetables, and herbs (2x per month) to residents with intellectual and developmental disabilities (I/DD) who reside at Irby Ranch. In addition, it provided produce to go to local community partners working to address food insecurity in the community at large.

HEALTH CARE ACCESS & DELIVERY

Based on the Community Health Needs Assessment findings, our interventions to improve health care access and delivery in our community will focus on improving access to affordable, high-quality health care services for our most vulnerable community members. For more information about SHC Tri-Valley's Community Health Needs Assessment, please visit: https://stanfordhealthcare.org/tri-valley/about-us/community-benefits.html.

Partner or Program	Topic	Program Details and FY25 Impact
COMMUNITY EVENTS	Health fairs	Participated in various health fairs in the community to increase access to health care i.e. Sikh Center, City of Dublin Senior health fair.
MEDDATA*	Patient financial advocacy services	Funded a program that assists low income, uninsured, underinsured, and homeless patients in researching their health care options. Services, covered by SHC Tri-Valley funding and provided at no cost to the client, included helping individuals research eligibility requirements, identify appropriate health insurance programs, complete applications, compile required documentation, and follow up with county case managers as needed.
POST-HOSPITAL SUPPORT*	Medication and basic needs assistance	Provided funding and resources for patients that have limited or no ability to pay for necessary medical and non-medical services through the Social Work and Case Management department. Services include transportation, medications, clothing, and meal assistance. Persons served: 1,230

HEALTHY LIFESTYLES (OBESITY, DIABETES, HEALTHY EATING, ACTIVE LIVING)

Based on the 2022 Community Health Needs Assessment findings, our interventions to improve Healthy Lifestyles (Obesity, Diabetes, Healthy Eating, and Active Living) in our community are focused on outreach and prevention, early education and intervention, and treatment. For more information about the Community Health Needs Assessment, please visit: https://stanfordhealthcare.org/tri-valley/about-us/community-benefits.html.

Partner or Program	Topic	Program Details and FY25 Impact
CAPE (COMMUNITY ASSOCIATION FOR PRESCHOOL EDUCATION) HEAD START, INC.	Nutrition services	Supported CAPE Head Start's provision of meals for preschool-aged children by preparing all meals. CAPE's primary focus is providing the highest quality early childhood development services to meet the needs of low-income children and their families, including health & nutrition. Persons served: 150

Stanford Health Care Tri-Valley's Community Investment in the Broader Community

Community Investment in the Broader Community

According to the Internal Revenue Service, to qualify for exemption under section 501(c)(3), a hospital must:[5]

- Demonstrate that it provides benefits to a class of persons that is broad enough to benefit the community, and
- Operate to serve a public rather than a private interest

In other words, a nonprofit hospital must provide a benefit to the community as a whole, not limited to a narrow group, and it must be for a public purpose, not for private benefit. While helping vulnerable populations is a key component, it must be part of a broader Community Benefit strategy, such as maintaining an emergency room that is open to all or providing health professions education to train new medical professionals.

Nonprofit hospitals provide Community Benefits to the broader community not only because their tax-exempt status creates an obligation to serve the public good, but because it is part of their broad mission. Hospitals like Stanford Health Care Tri-Valley are focused on improving community-level social determinants of health like housing and food security, which ultimately benefits everyone by creating a healthier population and reducing health disparities. As major employers and institutions, hospitals play a role in community well-being beyond their walls, investing in local infrastructure and economic development to ensure long-term community stability and prosperity.
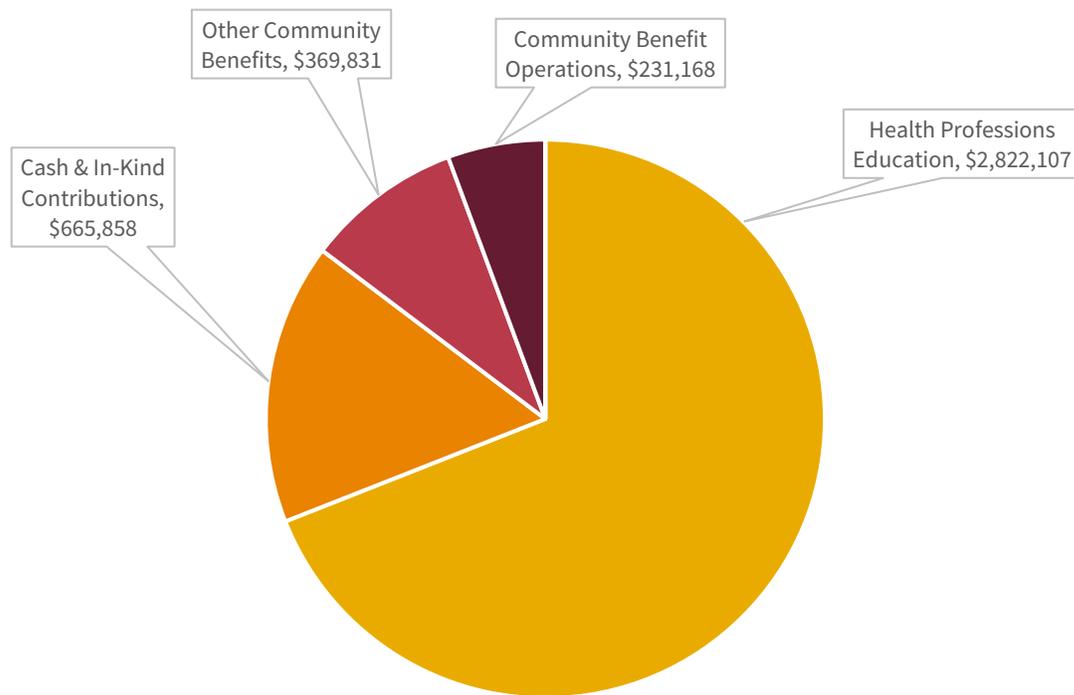
Total net value of quantifiable benefits for the broader community:

$3,891,452

in fiscal year 2025

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[5] Internal Revenue Service. (2025). *Charitable hospitals - general requirements for tax-exemption under Section 501(c)(3).* Retrieved from https://www.irs.gov/charities-non-profits/charitable-hospitals-general-requirements-for-tax-exemption-under-section-501c3.

Stanford Health Care Tri-Valley
FY25 Broader Community Benefit Investment

Other Community Benefits, $369,831

Community Benefit Operations, $231,168

Cash & In-Kind Contributions, $665,858

Health Professions Education, $2,822,107

Note: SHC Tri-Valley also received $197,512 in COVID-related reimbursements (categorized as Community Health Improvement Services), which is not shown in the chart above but accounted for in the total on the previous page.

The remaining categories of SHC Tri-Valley's FY25 Community Benefit investment in the **broader community** are shown below.

Health Professions Education, $2,822,107

- Nurse, pharmacist, and allied health professions training

Community Health Improvement Services

- Community health education programs, including for older adults
- Supportive care programs (e.g., for new mothers)

Cash and In-Kind Contributions, $665,858

- Community clinic capacity building and support
- Community health improvement grants
- Event sponsorships for nonprofit organizations

Other Community Benefits, $369,831

- Workforce development opportunities
- Emergency preparedness
- Community service initiatives for staff

Community Benefit Operations, $231,168

- Community health needs assessment, reporting and compliance costs

SHC Tri-Valley's Community Benefit Investments in the Broader Community, by Health Need

Note: An asterisk (*) indicates investments that are hospital-based rather than community-based.

BEHAVIORAL HEALTH

Based on the 2022 Community Health Needs Assessment findings, our interventions to improve behavioral health outcomes in our community include both mental/behavioral health and substance abuse interventions. For more information about SHC Tri-Valley's Community Health Needs Assessment, please visit: https://stanfordhealthcare.org/tri-valley/about-us/community-benefits.html.

Partner or Program	Topic	Program Details and FY25 Impact
CRISIS SUPPORT SERVICES OF ALAMEDA COUNTY	Healing Hearts 5K Walk/Run for Suicide Prevention	Provided funding and education at event which is focused on providing resources and awareness for suicide prevention. focused on raising awareness of suicide, reducing the stigma associated with depression and mental illness, educating the community about available services, supporting local suicide prevention programs, and providing a safe place to heal for those who have lost loved ones to suicide. Persons served: 125
THREE VALLEYS COMMUNITY FUND	Community Health Impact	The Community Health Impact grant targets Mental Health & Wellness, Health Equity & Access, and Environmental Health & Sustainability. See the Economic Stability and Housing and Health Care Access & Delivery tables in this section for information on the other two categories. • Mental Health & Wellness: Aimed at addressing the continued need for mental health support in our Tri-Valley area and seeks to strengthen mental health services, reduce stigma, and promote social-emotional skills and resilience.

ECONOMIC STABILITY AND HOUSING

Based on the 2022 Community Health Needs Assessment findings, our interventions to improve economic stability and housing in our community include: 1) reducing food insecurity and increasing access to healthy food; 2) reducing barriers to employment; and 3) reducing housing instability among vulnerable community members. For more information about SHC Tri-Valley's Community Health Needs Assessment, please visit: https://stanfordhealthcare.org/tri-valley/about-us/community-benefits.html.

Partner or Program	Topic	Program Details and FY25 Impact
CITY OF LIVERMORE	Community Service Day support	Provided funding in support of the City of Livermore's annual community service day event, as well as provided volunteer support benefiting Junction Avenue School, an underserved school within the Livermore community.
WORKFORCE DEVELOPMENT	High school student training/ workforce development	Continued to invest in high school student training the Regional Occupational Program (ROP). Students worked on units to gain exposure and knowledge into the various medical careers, including: • ROP Medical Occupations • ROP Nursing Experience Persons served: 90
THREE VALLEYS COMMUNITY FUND	Community Health Impact, workforce development	The Community Health Impact grant targets Mental Health & Wellness, Health Equity & Access, and Environmental Health & Sustainability. See the Behavioral Health and Health Equity & Access tables in this section for more information on the other two categories. • Environmental Health & Sustainability: Recognizing the intersectionality of environmental health and personal wellbeing, this category aims to boost environmental stewardship and improve both environmental and public health through education, outreach, and workforce development in the green sector.

HEALTH CARE ACCESS & DELIVERY

Based on the Community Health Needs Assessment findings, our interventions to improve health care access and delivery in our community will focus on improving access to affordable, high-quality health care services for our most vulnerable community members. For more information about SHC Tri-Valley's Community Health Needs Assessment, please visit: https://stanfordhealthcare.org/tri-valley/about-us/community-benefits.html.

Partner or Program	Topic	Program Details and FY25 Impact
BREAST CANCER PREVENTION PARTNERS	Prevention	Provided sponsorship funds to support organization. Breast Cancer Prevention Partners works to eliminate exposure to toxic chemicals and other environmental exposures linked to breast cancer—to save lives and prevent the disease before it starts.
COMMUNITY EVENTS	First-Aid	Provided first aid at local community events such as the Livermore Rodeo.
HERS BREAST CANCER FOUNDATION	Support	Provided sponsorship funds for foundation. HERS supports all individuals healing from breast cancer by providing post-surgical products and services, regardless of financial status. HERS stands for Hope, Empowerment, Renewal, and Support.
CARDIAC HEALTH AWARENESS	Information and education	Provided a wide variety of resources and services to the broader community regarding cardiac information and education, including lectures.
COMMUNITY HEALTH EDUCATION	Quest Science Center: Tri-Valley Innovation Fair	Provided hands-on hand hygiene training and bronchoscopy demonstrations during the Tri-Valley Innovation Fair held at the Quest Science Center, which aims to inspire and nurture everyday exploration for lifelong engagement with science and technology.
CANCER AWARENESS	Supportive care programs	Provide free, non-medical support services to cancer patients, family members, and caregivers regardless of where patients receive treatment. Services provided include support groups, health education classes, seminars, and healing touch supportive care.
NURSING EDUCATION*	Health professions education	Continued to invest in student training programs providing nursing students with in-depth, hands-on experience, including: • Nursing clinical experience • Registered Nurse (RN) preceptorship • MSN and DNP preceptorship Persons served: 268

Partner or Program	Topic	Program Details and FY25 Impact
ALLIED HEALTH PROFESSIONS EDUCATION*	Health professions education	Continued to invest in student training programs for various medical professions, including: • Cardiac rehabilitation • Emergency (paramedic and EMT) • Physical & sports medicine • Surgical technologist • Radiology sciences Persons served: 38
PHARMACY EDUCATION*	Health care practitioners education	Continued to invest in student training programs for various medical professions, including: • Pharmacy preceptorship • Pharmacy residency program Persons served: 20
THREE VALLEYS COMMUNITY FUND	Community Health Impact	The Community Health Impact grant targets Mental Health & Wellness, Health Equity & Access, and Environmental Health & Sustainability. See the Behavioral Health and Economic Stability and Housing tables in this section for information on the other two categories. • Health Equity & Access: Dismantles barriers to healthcare access for traditionally underserved groups, including persons of color, non-English speaking communities, older adults, people with disabilities, low-income households, unhoused, and immigrant population.

HEALTHY LIFESTYLES (OBESITY, DIABETES, HEALTHY EATING, ACTIVE LIVING)

Based on the 2022 Community Health Needs Assessment findings, our interventions to improve Healthy Lifestyles (Obesity, Diabetes, Healthy Eating, and Active Living) in our community are focused on outreach and prevention, early education and intervention, and treatment. For more information about the Community Health Needs Assessment, please visit: https://stanfordhealthcare.org/tri-valley/about-us/community-benefits.html.

Partner or Program	Topic	Program Details and FY25 Impact
CULINARY ANGELS	Meals	Provided funds to support Culinary Angels, a volunteer, donation-based organization that provides nutrient-rich meals and nutrition education to people going through a serious health challenge. Meals are delivered free of charge throughout Livermore, Dublin, and Pleasanton.
MEALS ON WHEELS	Meal preparation	Supported Meals on Wheels program by preparing all meals. This meal program provides local seniors with the nutrition critical to their health and well-being five days a week. Participating homebound seniors were located in Pleasanton, Livermore, Dublin, and Sunol. Some received several meals a day.
SPECTRUM	Administrative	Provided office space to Spectrum, the not-for-profit organization in charge of organizing the Meals on Wheels program in the Tri-Valley area.

2026–2028 Community Benefit Plan

Stanford MEDICINE

Health Care

Tri-Valley

2025 CHNA: IDENTIFICATION AND COMMUNITY PRIORITIZATION OF NEEDS

The 2025 Community Health Needs Assessment (CHNA)[6] assessed community health needs by gathering input from persons representing the broad interests of the community. This primary qualitative input was used to determine the community's priorities. In addition, quantitative (statistical) data were analyzed to identify poor health outcomes, disproportionalities in health, and health trends. Statistical data were compiled and compared against statewide averages and rates.

To be considered a health need for the purposes of the 2025 CHNA, the need had to fit the definition of a health need,[7] be present in at least two data sources, and either be prioritized by multiple key informants and/or focus groups or rise to the list based on statistical data, with at least two direct indicators exhibiting documented differences between groups, failing the benchmark by five percent or more, or showing worsening trends and few supporting resources. The 2025 CHNA identified a total of 11 health needs.

Health needs were identified using a set of collaboratively agreed-upon criteria.
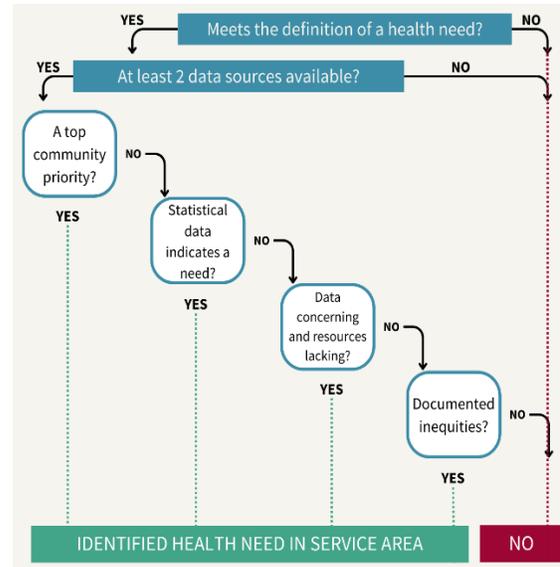
2026–2028 PLAN: HOSPITAL PRIORITIZATION AND SELECTION OF NEEDS

Stanford Health Care Tri-Valley completed a comprehensive strategic planning process to select the health needs and strategies. In the first half of 2025, members of the hospital's ELT and Health Equity Governance Council (together, the "team") met to review the information collected for the 2025 CHNA and Community Benefit planning process, paying special attention to the needs and priorities of the community that were identified during the CHNA. The team was presented with the results of the 2025 CHNA, as well as criteria to prioritize (rank) and select the needs. Team members participated in structured exercises across several months to evaluate the identified health needs, rank them, and select the three health needs SHC Tri-Valley would address.

Ranking criteria involved in needs selection were:

> 1. **Community priority.** The community prioritizes the issue over other issues about which it has expressed concern during the CHNA primary data collection process. Scored 3 if prioritized as one

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[6] For information about Stanford Health Care Tri-Valley's 2025 CHNA process and for a copy of the 2025 CHNA report, please visit https://stanfordhealthcare.org/tri-valley/about-us/community-benefits.html.

[7] A health need was defined in the CHNA report as a poor health outcome and its associated risk(s), or a risk that may lead to a poor health outcome. For further information, see Section 5 of the 2025 CHNA report at https://stanfordhealthcare.org/tri-valley/about-us/community-benefits.html.

of the top five needs by at least one-half (50%) of all focus groups and key informants combined, scored 1 if prioritized as one of the top five needs by 15% or fewer, and scored 2 otherwise.

2. **Potential impact on need.** SHC Tri-Valley can make a meaningful contribution to addressing the need because of its relevant competencies, and/or unique expertise as a health system, and because of an organizational mission/commitment to addressing the need. Scored 3 (substantial differences/strong concern), 2 (moderate differences/some concern), or 1 (minor differences/less concern) by leaders based on expertise and knowledge.

The two scores were summed together, and the top three needs were selected. In May of 2025, guided by a combination of information on community voice, evidence-based and promising practices, anchor institution-informed approaches, and emerging trends, the team ranked the associated strategies. SHC Tri-Valley's FY2026–2028 Community Benefit (Implementation Strategy) plan centers around the selected needs:

Access to Care

Mental and Behavioral Health

Economic Stability

STANFORD HEALTH CARE TRI-VALLEY'S COMMUNITY BENEFIT PLAN

This Community Benefit Plan is a companion to the 2025 CHNA and the 2026–2028 Implementation Strategy report, in that it describes how hospitals will use community benefit and other resources to address priority health needs in their service areas.

Our Strategic Approach

Stanford Health Care Tri-Valley's annual Community Benefit investment focuses on improving the health of the community's most vulnerable populations, including the medically underserved, low-income, and populations affected by health disparities. In response to the 2025 Community Health Needs Assessment, we developed this Community Benefit Plan to guide our investments, institutional practices, and community engagement over the next three years (FY26–FY28). SHC Tri-Valley, through its Community Benefit efforts and via an anchor-inspired approach, is committed to addressing health inequities by promoting equitable access to care.

What Is an Anchor-Inspired Approach?

The anchor approach is centered on leveraging the economic, social, and human capital of "anchors"— large, place-based institutions such as universities, hospitals, and government agencies—to create lasting, positive outcomes in their local communities.

In practice, anchor-inspired strategies align institutional resources—such as hiring, purchasing, investing, and engaging in community partnerships—to support local needs.

Guided by anchor principles and frameworks, SHC Tri-Valley selected strategies based on a combination of community input, data from the CHNA, existing hospital capabilities, research on evidence-based and promising practices (see *Appendix A: Supporting Research on Strategies* for details), and opportunities to make a meaningful and lasting impact. Across all priority areas—Economic Stability, Mental and Behavioral Health, and Access to Care—the plan focuses on:

- Investing in upstream solutions that address the conditions influencing health
- Listening to community voice and building collaborative relationships
- Enhancing the quality and reach of programs and services for community members
- Leveraging hospital resources and partnerships to strengthen systems of care

This approach blends direct service, internal system improvements rooted in anchor principles, and community partnerships. Through these strategies, SHC Tri-Valley aims to strengthen positive outcomes across its service area and support a healthier future for the communities it serves.

ACCESS TO CARE

Why This Matters

Access to health care remains uneven across the Tri-Valley. Health care workforce shortages, high costs, and linguistic and cultural barriers limit care for vulnerable community members. Access to primary and specialty care is particularly strained in underserved regions.

Key Data Highlights

- Shortages of primary care physicians and nurse practitioners in Dublin and Livermore compared to Alameda County overall
- Chronic and infectious disease rates in both Alameda and Contra Costa counties suggest poor access to care
- In both counties, rates of preventable hospitalizations for older adults are highest for the Black population, followed by the Hispanic/Latino population
- Life expectancy lower in both counties than the state overall for the Black population, as well as for Native Americans in Contra Costa County and Pacific Islanders in Alameda County

At a Glance: Barriers to Care

Long wait times

Language & literacy challenges

High cost even with insurance

Transportation gaps

Community Voice

Community members and stakeholders shared:

- Concerns about affordability of care and medications
- Shortages of health providers lead to longer wait times
- Rural and less-populated areas may lack nearby hospitals, clinics, and specialty services
- Outreach efforts are necessary to inform undocumented individuals about their rights and the services that are available to them
- People expressed a desire for providers who are respectful, inclusive, and speak their language

LONG-TERM GOAL

Improve access to affordable, high-quality health care services

SHC Tri-Valley's Approach

A. Investments & Grants

- Support wellness strategies (e.g., health fairs, education, screening) that promote equal access to care
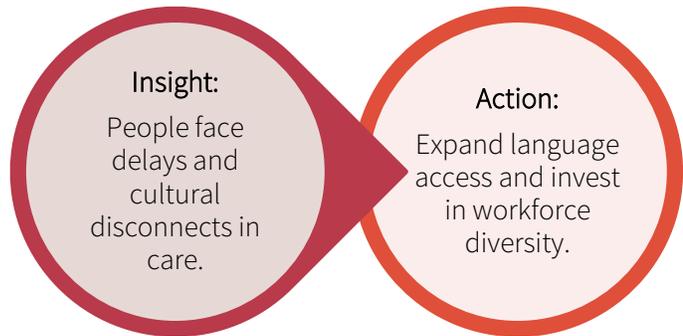
B. Institutional Systems & Practices

- Continue to offer financial assistance, including charity care and uncompensated care
- Encourage care coordination interventions
- Expand access via digital health initiatives
- Support capacity-building opportunities, such as rotating residents through community clinics
- Support enrollment in health insurance
- Support initiatives that address culturally responsive and compassionate/respectful care, including enhanced language access
- Advance health-related social needs screening and linkage to resources

C. Advocacy & Community Engagement

- Advocate for access-focused policies at all government levels

From Insight to Action

Insight:
People face delays and cultural disconnects in care.

Action:
Expand language access and invest in workforce diversity.

How These Strategies Reflect an Anchor-Inspired Approach

- Recognize that access to care is inseparable from the social and economic determinants of health that shape community well-being.
- Acknowledge that many people experience major barriers in accessing quality care.
- Align institutional resources with community needs to remove barriers and promote equity in compliance with state and federal law.
- Help create environments where health services are more accessible, culturally relevant, and better integrated with other

What SHC Tri-Valley Aims to Achieve

- Greater access to culturally sensitive care
- Higher preventive care and vaccination rates
- Reduced ED use and preventable hospitalizations
- Improved outcomes and reduced disparities for community members

MENTAL AND BEHAVIORAL HEALTH

Why This Matters

Mental and behavioral health is a pressing concern in the Tri-Valley. Key challenges include a shortage of mental health providers, especially in Contra Costa County, and disproportionately high rates of depressive symptoms and suicide in Livermore. These challenges were amplified by the COVID-19 pandemic, which increased economic stressors, isolation, and substance use.

Key Data Highlights

- In both Alameda and Contra Costa counties, the highest proportion of hospital discharges among youth were for mental diseases and disorders, more than double the next-highest primary diagnosis
- Greater percentage of people diagnosed with depression in Livermore than people in Alameda County overall
- Higher suicide rate in Livermore compared to the county overall; rates among Whites in Livermore and Asians in Dublin notably higher than Alameda County
- Low supply of qualified mental health providers, especially in Contra Costa County compared to California overall
- Alcohol and tobacco use also a concern

At a Glance: What Else We Heard

Long wait times

Language and culture/service match lacking

Improved coping skills needed

Desire to increase belonging and connection

Community Voice

CHNA participants highlighted the following:

- Growing loneliness, stress, and isolation, exacerbated by economic insecurity and experiences of discrimination
- Concerns about issues with opioid overprescribing and addiction combined with ease of access to drugs in general, plus worries about youth substance use expressed even by youth themselves
- The need for more integrated mental health and substance use services across systems
- Across both counties, common populations of concern included LGBTQ+, Black and Hispanic/Latino communities, youth, unhoused individuals, and justice-involved individuals

LONG-TERM GOAL

Improve access to affordable, high-quality mental/behavioral health care services.

SHC Tri-Valley's Approach

A. Investments & Grants

- Support initiatives to increase the cultural competency of mental/ behavioral health providers in community/safety net clinics
- Support community-based efforts aimed at expanding access to services for mental health and substance use issues
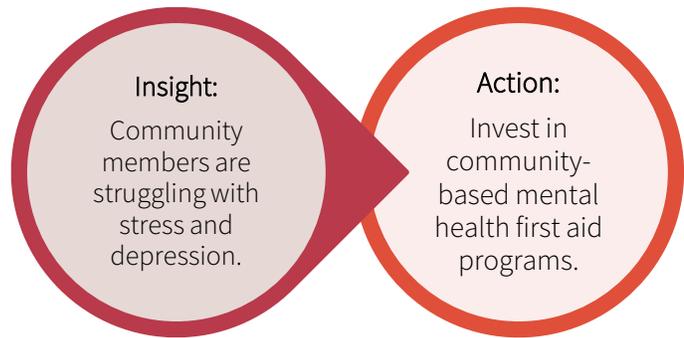- Support screening and referral by community health providers

B. Institutional Systems & Practices

- Support screening and referral/care coordination for mental/behavioral health issues in hospital and emergency care settings
- Increase internal capacity through workforce development and partnerships

C. Advocacy & Community Engagement

- Advocate for mental health parity and policy solutions at the local and state levels

From Insight to Action

Insight: Community members are struggling with stress and depression.

Action: Invest in community-based mental health first aid programs.

How These Strategies Reflect an Anchor-Inspired Approach

- Recognize that mental/behavioral health issues (trauma) are upstream factors contributing to health disparities
- Recognize that many people face significant barriers to accessing mental/behavioral health care.
- Align institutional resources with community needs to remove barriers and promote equity in compliance with state and federal law.
- Help create environments where mental/behavioral health services are more accessible, culturally relevant, and

What SHC Tri-Valley Aims to Achieve

- Improved access to culturally responsive mental/behavioral health services, programs, and providers
- Greater emotional coping and resilience among people served
- Reduced housing instability among people with mental health/substance use issues
- Enhanced coordination across the continuum of care

ECONOMIC STABILITY

Why This Matters

Financial stability plays a key role in the health and well-being of community members. There are pockets of poverty across the Tri-Valley area. The high costs of housing, food, health care, and education make it difficult for many people to meet their basic needs.

At a Glance: Barriers to Economic Stability

Key Data Highlights

- Large differences in educational outcomes and income by race and ethnicity
- Greater gender pay gaps in Alameda and Contra Costa counties vs. California
- Rising homelessness, especially in Dublin and Livermore
- Higher proportion of cost-burdened renters in Livermore than in Alameda County overall, and rental cost-percentages are high across much of the Tri-Valley
- Black and Hispanic/Latino populations more likely to be rent-burdened

High housing costs, high cost of living

Limited access to financial aid, job training

Many needing food support

Overcrowded living conditions

Community Voice

CHNA participants highlighted the following:

- Wages have not kept pace with rising costs, leading to economic strain
- People feel forced to work multiple jobs or cut back on essentials
- Food insecurity seems to have stayed high since the COVID-19 pandemic
- People experiencing greater instability due to unaffordable housing
- Concern for individuals on fixed incomes
- People desire more equitable opportunities in education, jobs, and housing

LONG-TERM GOAL

Reduce economic instability among community members to support improved health.

SHC Tri-Valley's Approach

A. Investments & Grants

- Support social services addressing housing, food, and financial instability
- Fund homelessness prevention and intervention approaches
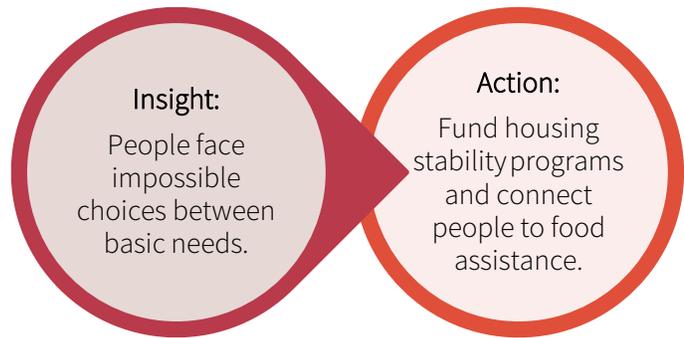- Expand capacity of and access to healthy food access programs (e.g., food banks)

B. Institutional Systems & Practices

- Support case management and care coordination that connects people to housing and other support
- Promote CalFresh and WIC enrollment
- Support hospital screening, referral, and follow-up for health related social needs
- Foster workforce development and job training initiatives
- Support implementation of policies that prioritize purchasing locally and from small businesses

C. Advocacy & Community Engagement

- Support local initiatives focused on economic stability

From Insight to Action

Insight: People face impossible choices between basic needs.

Action: Fund housing stability programs and connect people to food assistance.

How These Strategies Reflect an Anchor-Inspired Approach

- Align institutional resources to support community needs, removing barriers and promoting equity in compliance with state and federal law.
- Shift everyday business practices to foster communities' economic vitality.
- Take an integrated approach to address contributing factors to differing health outcomes in the community.

What SHC Tri-Valley Aims to Achieve

- Increased use of available services and benefits
- Improved housing and food security for vulnerable people
- Greater financial stability for community members
- Reduced economic disparities and poverty

APPENDIX A: SUPPORTING RESEARCH ON STRATEGIES

Access to Care

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