
FY25

COMMUNITY BENEFIT REPORT/

PROGRESS ON 2024-2026 COMMUNITY HEALTH IMPROVEMENT PLAN

Queen of the Valley Medical Center

Napa, California

Reporting Period: July 1, 2024 - June 30, 2025

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To provide feedback on this CB Report or obtain a printed copy free of charge, please email Teresa Smith, CH Program Manager at Teresa.Smith@Providence.org



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EXECUTIVE SUMMARY

Providence continues its Mission of service in Napa County through Queen of the Valley Medical Center (QVMC). QVMC is an acute-care hospital, founded in 1958 and located in Napa, California. The hospital's service area is the entirety of Napa County, including 138,000 people.

QVMC dedicates resources to improve the health and quality of life for the communities it serves, with special emphasis on the needs of the economically poor and vulnerable. In FY25, the hospital provided \$38,249,480 in Community Benefit in response to unmet needs. FY25 CB Report can be located online at: [Caring for the Napa Community | Queen of the Valley Medical Center | Providence](#). The most recent CHNA and CHIP can be located online at: [CHNA and CHIPs | Providence](#) under Northern California then Napa.

2024-2026 QVMC Community Health Improvement Plan Priorities

As a result of the findings of our [2023 CHNA](#) and through a prioritization process aligned with our Mission, resources, and hospital strategic plan, Queen of the Valley Medical Center will focus on the following areas for its 2024-2026 Community Benefit efforts:

PRIORITY 1: HOMELESSNESS & HOUSING INSTABILITY

Limited housing stock pushes prices so high as to be out of reach for many and creates an especially demanding situation for those with low income. The cost of living is extremely high, and earning a livable wage is a struggle. Housing stability creates a foundation for further stability. Fear of, and disrespect to, unhoused individuals can result in feelings of isolation. Paperwork and housing support systems are cumbersome. Demand for low-cost options may lead to unfair housing practices from landlords.

FY25 Accomplishments

In FY25 Providence Queen of the Valley Medical Center Community Health made a financial investment in Generation Housing. As Generation Housing expands into the Napa Valley, it aims to develop data-driven evidenced-based policies that will increase housing production, streamline processes, and reduce development time and costs. Generation Housing's pro-housing campaign will leverage the work and lessons learned from its Sonoma County launch while adapting to Napa Valley's unique context. In October of 2025 Valle Verde Apartments opened. Valle Verde Apartments is a new construction of 24 multifamily apartments. All 24 units were shared with households earning less than 60% of the area median income. Providence QVMC is proud to have previously invested \$1 million dollars into a joint project including both Heritage House and Valle Verde Apartments.

Not only has Providence QVMC invested in the development of affordable housing stock in Napa County, but the CARE Network Program in collaboration with Abode Services, is actively taking part in monthly case conferencing for shared clients at both the Napa North Center and the South Napa Shelter. This new collaboration has seen great results in coordination and assisting clients in becoming housed and accessing medical care and needed resources.

PRIORITY 2: BEHAVIORAL HEALTH & SUBSTANCE USE DISORDER

The scale of the mental health crisis appears to have overwhelmed the care system. Mental health is often an unaddressed, underlying issue. There are valuable sources of mental health support outside the formal care system and participants report relying on friends and family for comfort or strength. The task of providing mental health support can be a heavy weight to bear. Mental health providers often experience compassion fatigue and opportunities for self-care can be difficult to access with busy caseloads. Substances such as alcohol, tobacco, and drugs may be used as a form of self-medication. There are common misconceptions about substance use (across all demographics), leading people to underestimate the harm done.

FY25 Accomplishments

QVMC Community Health has continued to increase its capacity to provide culturally appropriate mental health services across Napa County. In FY2025 QVMC CARE Network Licensed Clinical Social Workers (LCSWs) began providing Mental Health Therapy to high-risk CARE Network clients. This service was previously provided by a Community Building Organization, Mentis. The program continues to develop, and referrals are increasing. In FY25 the Substance Use Navigator at QVMC was instrumental in placing a Naloxone Distribution Box outside the doors of Emergency Room. The caregiver served as a member of the Napa Opioid Safety Coalition which created a Naloxone Distribution Box Project across Napa County to reduce harm from fentanyl and other drugs by offering free naloxone nasal spray and Fentanyl Test Kits.

PRIORITY 3: ACCESS TO HEALTH CARE & DENTAL SERVICES

Participants named cost and inability to navigate systems as barriers to accessing healthcare. Because many people have no stable relationship with a primary care provider and wait times for appointments can be months, the emergency room often becomes the first access point for care. It is difficult to access transgender care in Napa County. There is concern about lack of access to health insurance for mixed-status families and people losing their insurance due to job loss during the pandemic. Caregivers and community members shared that accessing dental care can be difficult for all ages because there are few dental appointments available locally.

FY25 Accomplishments

In FY2025 QVMC CARE Network had over 21,000 client encounters across Napa County while the Queen's Mobile Dental Clinic provided 3738 services to Napa County Youth. The Queen has continued to partner with CommuniCare+OLE hosting a bimonthly HIV clinic. CommuniCare+OLE provides the clinic space, the physician and clinic support, while the Queen's CARE Network team offers wraparound services including nursing, social work, and community health worker support. In FY2025 the clinic provided 188 clinic visits.

PRIORITY 4: ECONOMIC STABILITY

Many participants spoke about the need for living wage jobs and increased wages to meet the high cost of living in Napa County. They shared that families with low incomes often experience housing instability and use most of their income to meet basic needs, often being forced to make spending tradeoffs. A substantial proportion of employment opportunities center around agriculture and hospitality, which

often come with low wages and can sometimes have poor working conditions. Many people that work in Napa, including teachers, librarians and others who serve the community, cannot afford to live here. Youth are highly aware of the financial stress of their families and fear for their own financial future.

FY25 Accomplishments

Queen of the Valley Community Health grants shared with local Community Partners in FY2024 increased capacity to serve Napa County community members in FY2025. A grant shared with Napa Farmers Market increased the CalFresh Market Match available to Napa County low-income community members by 19% in 2024. A community grant shared with Molly's Angels in CY2024 enabled Molly's Angels to expand its services in FY2025 by hiring additional paid part-time drivers to address challenging ride requests, including trips to up valley locations and long-distance medical appointments. The focus on expanding its deployment of paid drivers to replace the use of Lyft drivers improved ride fulfillment, which now nears 100%, providing clients with consistent, familiar drivers, fostering trust and meaningful relationships.

About Providence

For nearly 170 years, Providence has been dedicated to supporting communities across the seven states we serve. We have always believed in the power of collaboration, recognizing that strong partnerships are essential to our vision of health for a better world.

As we focus on our core operations of delivering high-quality, compassionate care, we rely on partners in local communities to help us get upstream so we can address the social factors that affect health, especially in communities experiencing high levels of health disparities.

At the heart of this collaboration is our community benefit programs. Every year, our family of organizations identifies unmet community needs and responds with strategic contributions and partnerships. Through this work, we aim to meet basic health needs, remove barriers to health, build resilient communities and find innovative ways to serve those who are most vulnerable.

Together, our 125,000 caregivers (all employees) serve in 51 hospitals, 1,014 clinics and a comprehensive range of health and social services across Alaska, California, Montana, New Mexico, Oregon, Texas and Washington.

For more information go to: <https://www.providence.org/about/annual-report>

Introduction

Who We Are

Our Mission As expressions of God’s healing love, witnessed through the ministry of Jesus, we are steadfast in serving all, especially those who are poor and vulnerable.

Our Vision Health for a Better World.

Our Values Compassion — Dignity — Justice — Excellence — Integrity

Queen of the Valley Medical Center is an acute-care hospital founded in 1958 and located in Napa, California. The hospital has 198 licensed beds, more than 1280 caregivers (employees), and professional relationships with many local physicians. Major programs and services offered to the community include acute rehabilitation, bariatric surgery, cancer, cardiac, emergency, maternity and infant care, neurosciences, and orthopedics.

Our Commitment to Community

Queen of the Valley Medical Center dedicates resources to improve the health and quality of life for the communities it serves, with special emphasis on the needs of the economically poor and vulnerable. During the most recent fiscal year, it provided \$38,249,480 in Community Benefit¹ in response to unmet needs and to improve the health and well-being of those served in Napa County.

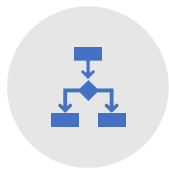
Health Equity

At Providence, we acknowledge that all people do not have equal opportunities and access to living their fullest, healthiest lives due to systems of oppression and inequities. We are committed to ensuring health equity for all by addressing the underlying causes of racial and economic inequities and health disparities. Our Vision is “Health for a Better World,” and to achieve that we believe we must address not only the clinical care factors that determine a person’s length and quality of life, but also the social and economic factors, the physical environment, and the health behaviors that all play an active role in determining health outcomes.

¹ A community benefit is an initiative, program or activity that provides treatment or promotes health and healing as a response to identified community needs and meets at least one of the following community benefit objectives: a. Improves access to health services; b. Enhances public health; c. Advances increased general knowledge; and/or d. Relieves government burden to improve health. Note: Community benefit includes both services to the economically poor and broader community. To be reported as a community benefit initiative or program, community need must be demonstrated. Community need can be demonstrated through the following: 1) community health needs assessment developed by the ministry or in partnership with other community organizations; 2) documentation that demonstrates community need and/or a request from a public agency or community group was the basis for initiating or continuing the activity or program; 3) or the involvement of unrelated, collaborative tax-exempt or government organizations as partners in the community benefit initiative or program.

To ensure that equity is foundational to our CHIP, we have developed an equity framework that outlines the best practices that each of our hospitals will implement when completing a CHIP. These practices include, but are not limited to the following:

Figure 1. Best Practices for Centering Equity in the CHIP



Address root causes of inequities by utilizing evidence-based and leading practices



Explicitly state goal of reducing health disparities and social inequities



Reflect our values of justice and dignity



Leverage community strengths

Community Benefit Governance

Queen of the Valley Medical Center demonstrates organizational commitment to the community benefit process through the allocation of staff time, financial resources, participation, and collaboration with community partners. The Northern California Regional Director of Community Health Investment and the local QVMC Community Health Investment Program Manager are responsible for coordinating implementation of State and Federal 501r requirements.

The Community Benefit Committee (CBC) is the board appointed oversight committee of the Community Outreach department at Queen of the Valley Medical Center. The CBC is composed of Providence Queen of the Valley community board members, internal Providence stakeholders and staff (Chief Executive or designee, mission leader, community health leaders) and external community stakeholders representing subject matter experts and community constituencies (i.e., faith based, FQHC's, mental health, homeless services, education, and Public Health). CBC reviewed the data collected in the 2023 Community Health Needs Assessment process to identify and prioritize the top health-related needs in Napa County for this 2024-2026 CHIP. The committee also oversees and governs budget, investments, program continuation or discontinuation, populations of focus and community-wide engagement.

Planning for the Uninsured and Underinsured

Our Mission is to provide quality care to all our patients, regardless of ability to pay. We believe that no one should delay seeking needed medical care because they lack health insurance. That is why Queen of the Valley Medical Center has a Financial Assistance Program (FAP) that provides free or discounted services to eligible patients. In FY25, QVMC provided \$2,643,353 in free and discounted care through our Financial Assistance Program.

One way Queen of the Valley Medical Center informs the public of FAP is by posting notices. Notices are posted in high volume inpatient and outpatient service areas. Notices are also posted at locations where a patient may pay their bill. Notices include contact information on how a patient can obtain more information on financial assistance as well as where to apply for assistance. These notices are posted in English and Spanish and any other languages that are representative of 5% or greater of patients in the hospital's service area. All patients who demonstrate lack of financial coverage by third party insurers are offered an opportunity to complete the Patient Financial Assistance Application and are offered information, assistance, and referral as appropriate to government sponsored programs for which they may be eligible. For information on our Financial Assistance Program go to:

<https://www.providence.org/billing-support>.

Medi-Cal (Medicaid)

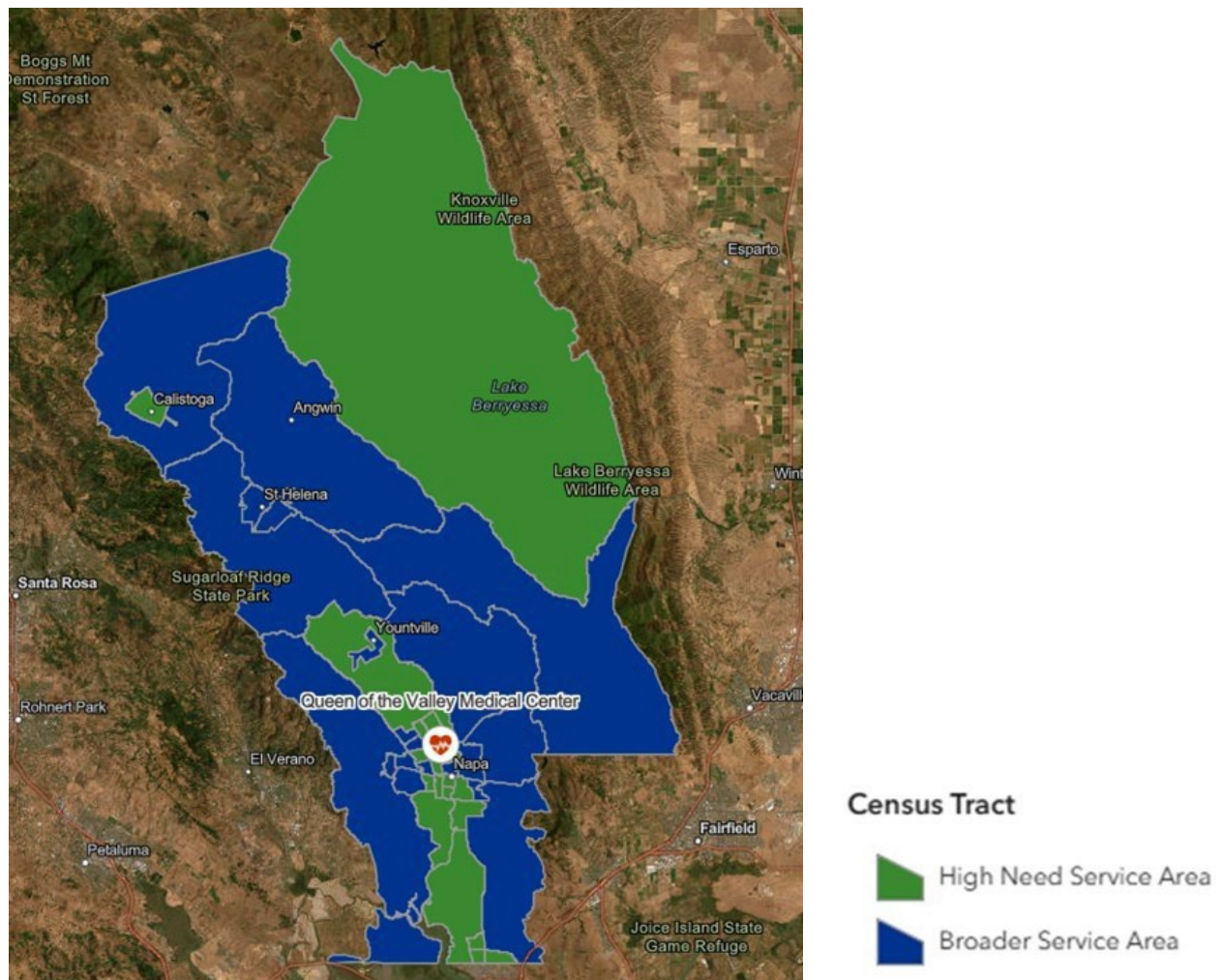
Queen of the Valley Medical Center provides access to the uninsured and underinsured by participating in Medicaid, also known as Medi-Cal in California. In FY25, Queen of the Valley Medical Center provided \$27,915,273 in Medicaid shortfall.

OUR COMMUNITY

Description of Community Served

Queen of the Valley Medical Center's service area is Napa County and includes a population of approximately 138,000 people.

Figure 2. Queen of the Valley Medical Center Total Service Area



To facilitate identifying health disparities and social inequities by place, we designated a “high need” service area and a “broader” service area, which together make up the Napa County Service Area. Based on work done by the Public Health Alliance of Southern California and their [Healthy Places Index \(HPI\)](#) tool, we identified the high need service area based on income, education, English proficiency, and life expectancy.

Community Demographics

POPULATION AND AGE DEMOGRAPHICS

Younger age groups are disproportionately represented in the high need communities of Napa County, representing households with young children. Alternatively, age groups 55 and over are less likely to fall into the high need communities or live within those designated census tracts. The male-to-female distribution is equal across Napa County geographies.

In 2021, there were an estimated 26,755 adults aged 65 and above in Napa County and 6,662 children under the age of five (Figure 3). The older adult population has been steadily increasing, while the population of children under age five has been declining.

POPULATION BY RACE AND ETHNICITY

Individuals who identify as Hispanic (below), Asian, or “other race,” are more likely to live in high needs census tracts than their peers of other races.

SOCIOECONOMIC INDICATORS

Table 1. Income Indicators for Napa County Service Areas

Indicator	Broader Service Area	High Need Service Area	Napa County
Median Income Data Source: 2021 American Community Survey Year: 5-year estimate	\$117,926	\$84,690	\$97,421
Percent of Renter Households with Severe Housing Cost Burden Data Source: 2021 American Community Survey Year: 5-year estimate	25.4% (1,625 renter households)	24.2% (2,510 renter households)	24.6% (4,135 renter households)

The median income in Napa County in 2021 was higher than the California median income (\$97,421 vs. \$83,226). In the high need service area of the county, the median income was \$84,690.

Severe housing cost burden is defined as households that are spending 50% or more of their income on housing costs. Renters in Napa County have continued to face severe housing cost burdens in recent years, with approximately 1 in 4 renter households spending 50% or more of their income on housing.

Full demographic and socioeconomic information for the service area can be found in the [2023 CHNA for Queen of the Valley Medical Center](#).

COMMUNITY NEEDS AND ASSETS ASSESSMENT PROCESS AND RESULTS

Summary of Community Needs Assessment Process and Results

Through a mixed-methods approach, using quantitative and qualitative data, we collected information from the following sources: American Community Survey, Behavioral Risk Factor Surveillance System, local public health data, California Healthy Kids Survey, Feeding America, U.S. Census Bureau, and the Live Healthy Napa County Language Inclusion Survey. To actively engage the community, we conducted 15 listening sessions with people who have chronic conditions, are from diverse communities, have low-incomes, and/or are medically underserved. We also conducted 12 key informant interviews and 7 additional preliminary data feedback sessions with 13 representatives from organizations that serve these populations, specifically seeking to gain deeper understanding of community strengths and opportunities.

Those vulnerable populations represented in the 15 listening sessions included the following:

- Agriculture Workers through Napa County Housing Authority
- Local Youth receiving services at UpValley Family Centers
- Unhoused accessing Napa County Mental Health Services
- Parents accessing Napa County Mental Health Services
- Filipino Americans
- Foster Youth
- General Adults
- LGBTQ Youth
- LGBTQIA+ Adults and Older Adults
- General Older Adults
- Spanish Speaking Adults
- Spanish Speaking Older Adults

Some key findings include the following:

- Participants named cost and inability to navigate systems as barriers to accessing healthcare. Because many people have no stable relationship with a primary care provider and wait times for appointments can be months, the emergency room often becomes the first access point for care.
- Most key informants spoke of the high cost of housing as a challenge in Napa County. There is a strong need for more affordable housing to help families and individuals meet their basic need for safe and healthy housing.
- Long wait lists can be a result of a lack of behavioral health providers in general. There is a particular need for more bilingual and bicultural providers, as there is a lack of culturally responsive and linguistically appropriate behavioral health services.

- Some communities (for example, seniors, youth, LGBTQ, minorities) find their needs unmet and their perspective unheard in Napa County civic society. Marginalized groups often experience prejudice and hate speech that makes them isolated and fearful.

While care was taken to select and gather data that would tell the story of the hospital's service area, it is important to recognize the limitations and gaps in information that naturally occur.

Significant Community Health Needs Prioritized

The list below summarizes the rank ordered significant health needs identified through the Community Health Needs Assessment process:

PRIORITY 1: HOMELESSNESS & HOUSING INSTABILITY

Limited housing stock pushes prices so high as to be out of reach for many and creates an especially demanding situation for those with low income. The cost of living is extremely high, and earning a livable wage is a struggle. Housing stability creates a foundation for further stability. Fear of, and disrespect to, unhoused individuals can result in feelings of isolation. Paperwork and housing support systems are cumbersome. Demand for low-cost options may lead to unfair housing practices from landlords.

PRIORITY 2: BEHAVIORAL HEALTH AND SUBSTANCE USE DISORDER

The scale of the mental health crisis appears to have overwhelmed the care system. Mental health is often an unaddressed, underlying issue. There are valuable sources of mental health support outside the formal care system and participants report relying on friends and family for comfort or strength. The task of providing mental health support can be a heavy weight to bear. Mental health providers often experience compassion fatigue and opportunities for self-care can be difficult to access with busy caseloads. Substances such as alcohol, tobacco, and drugs may be used as a form of self-medication. There are common misconceptions about substance use (across all demographics), leading people to underestimate the harm done.

PRIORITY 3: ACCESS TO HEALTH CARE AND DENTAL SERVICES

Participants named cost and inability to navigate systems as barriers to accessing healthcare. Because many people have no stable relationship with a primary care provider and wait times for appointments can be months, the emergency room often becomes the first access point for care. It is difficult to access transgender care in Napa County. There is concern about lack of access to health insurance for mixed-status families and people losing their insurance due to job loss during the pandemic. Caregivers and community members shared that accessing dental care can be difficult for all ages because there are few dental appointments available locally.

PRIORITY 4: ECONOMIC STABILITY

Many participants spoke about the need for living wage jobs and increased wages to meet the high cost of living in Napa County. They shared that families with low incomes often experience housing instability and use most of their income to meet basic needs, often being forced to make spending tradeoffs. A

substantial proportion of employment opportunities center around agriculture and hospitality, which often come with low wages and can sometimes have poor working conditions. Many people that work in Napa, including teachers, librarians and others who serve the community, cannot afford to live here. Youth are highly aware of the financial stress of their families and fear for their own financial future.

Needs Beyond the Hospital's Service Program

No hospital facility can address all the health needs present in its community. We are committed to continuing our Mission through community grants to local non-profits in Napa County and in-kind services to multiple community collaborations.

The following community health need identified in the joint Napa County CHNA will not be addressed and an explanation is provided below:

- Childcare: Queen of the Valley Medical Center is not positioned to directly address the additional need for Childcare in Napa County; however, we actively partner with Community Resources For Children and other local Community Building Organizations to address the identified need.

COMMUNITY HEALTH IMPROVEMENT PLAN

Summary of Community Health Improvement Planning Process

The 2024-2026 Community Health Improvement Plan (CHIP) is designed to address the needs identified and prioritized through the 2023 Community Health Needs Assessment (CHNA). We recognize the greatest needs of our community will change over time, and we are dedicated to adapting our efforts accordingly. Our commitment remains steadfast in supporting, strengthening, and serving our community in alignment with our Mission.

Queen of the Valley Medical Center's CHIP involves a comprehensive approach led by the Community Health Department, Live Healthy Napa County, and the Community Benefit Committee. Strategies outlined in the CHIP encompass a diverse array of approaches, including direct service programming, support for community organizations, and collaborative commitments aimed at addressing the identified priority need areas.

While Racial Equity and LGBTQ Inclusion was not designated by Queen of the Valley as a standalone priority area, Queen of the Valley Medical Center Community Health will continue to incorporate strategies addressing the needs of the Black, Indigenous, and People of Color (BIPOC) community and those most likely to experience discrimination within each priority area. This acknowledgment underscores our commitment to addressing health disparities and promoting equity across all facets of our community health initiatives.

Addressing the Needs of the Community: 2024-2026 Key Community Benefit Initiatives and Evaluation Plan

2025 Accomplishments

COMMUNITY NEED ADDRESSED #1: HOMELESSNESS & HOUSING INSTABILITY

Long-Term Goal(s)/ Vision

A sufficient supply of safe, affordable housing units to ensure that all people in the community have access to a healthy place to live and access to supportive services.

Table 2. Strategies and Strategy Measures for Addressing Homelessness and Housing Instability

Strategy	Population Served	FY25 Accomplishments
1. Support the development of affordable housing stock, including permanent supportive housing units	Chronically homeless and very low-income individuals and older adults	In October of 2025 Valle Verde Apartments opened. Valle Verde Apartments is new construction of 24 multifamily apartments. All 24 units were shared with households earning less than 60% of the area median income. Providence QVMC is proud to have previously invested \$1 million dollars into this supportive housing project in.

2. Support the launch of a housing advocacy organization to promote effective housing policy to increase the supply, affordability, and diversity of homes	Low-income individuals, families, older adults, Latine, and people experiencing homelessness	A donation of \$200,000.00 was made to the Generation Housing Napa Valley (GHNV), a project of the Tides Center. GHNV has launched the GHNV Advisory Council convening local leaders to develop guiding principles tailored to Napa's unique housing needs and policy challenges.
3. Invest in respite shelter services supported with CARE Network complex care management	Individuals experiencing homelessness who are being discharged from local hospitals and need respite services	A commitment of \$350,000.00 was made to Catholic Charities of the Diocese of Santa Rosa. This charitable donation was conditioned upon its use toward Napa Nightingale medical respite. CARE Network along with the staff at Napa Nightingale cared for 26 clients for a total of 1308 bed nights.
4. Enhance CARE Network outreach at the South Napa Shelter and enhance CARE Network care management services at supportive housing locations	Individuals experiencing or at risk of homelessness	<p>CARE Network had 49 encounters through outreach and brief interventions at the South Napa Shelter.</p> <p>Care Network care management services are now offered at 6 supportive housing and shelter locations in Napa County.</p> <ul style="list-style-type: none"> • Adrian Street Apartments • Heritage House • North Napa Center • Napa Nightingale • Napa's South Shelter Clinic • Valley Lodge Apartments

Evidence Based Sources

- [National Institute for Medical Respite Care](#)
- [National Health Care for the Homeless Council](#)
- [Healthy People 2030 Housing and Homes](#)

Resource Commitment

Queen of the Valley Medical Center will commit staff time from its Community Health department, community grants and restricted funding from its Care for the Poor budget. In partnership with Providence Government and Public Affairs division, local CHI leaders will advocate for an increased supply and affordable housing.

Key Community Partners

Queen of the Valley Medical Center values cross-sector collaboration and believes that non-profit

organizations and local government organizations must work together to solve community-level problems. We plan to partner with the following organizations to address this need:

- Abode Services
- Catholic Charities of the Diocese of Santa Rosa
- City of Napa Housing Division
- Generation Housing
- Jamboree Housing
- Napa County Housing and Homeless Services
- Napa County Housing Coalition
- Share the Care Napa Valley
- UpValley Family Centers

COMMUNITY NEED ADDRESSED #2: BEHAVIORAL HEALTH AND SUBSTANCE USE DISORDER

Long-Term Goal(s)/ Vision

Ensure equitable access to high quality, culturally responsive, and linguistically appropriate mental health and substance use disorder services, especially for populations with low incomes.

Table 3. Strategies and Strategy Measures for Addressing Behavioral Health and Substance Use Disorders

Strategy	Population Served	FY25Accomplishments
1. Increase local capacity to provide culturally appropriate mental health services	All of Napa County especially medically compromised, older adults, Spanish speaking residents, and new moms	74 mental health therapy sessions shared with CARE Network clients 701 Perinatal Emotional Wellness mental health therapy sessions occurred 636 Mental Health Therapy sessions provided to older adults through Mentis's Healthy Minds Healthy Aging Initiative. A grant in the amount of 135,000.00 was shared with Mentis in support of Healthy Minds Healthy Aging.
2. Increase support to Emergency Department patients with substance use disorders	Patients cared for in the Emergency Department who desire treatment for substance use disorders	419 Substance Use Navigator encounters in both the Emergency Room and throughout the multiple units of the hospital. 1241 Narcan units and 1007 Fentanyl Testing strips were distributed from the Narcan Distribution Box located in front of the QVMC Emergency Room.

3. CARE Network to enhance the continuum of care, increasing identification, screening, and access to mental health and SDOH services for Emergency Room Latine patients	Latine patients in the Emergency Room	505 total Emergency Room encounters 304 Emergency Room patients were screened for MH with the PHQ4 363 Emergency Room patients were screened for SDOH
4. CARE Network to increase percentage of enrolled ECM clients who are screened with the PHQ9	Eligible Partnership HealthPlan members	94.5% of CN ECM clients were screened with PHQ2/PHQ9
5. Administer community grants to enhance resources to expand prevention, education, and intervention of behavioral health services	All Napa County residents especially Older Adults, Latine residents, and the Youth	A donation of \$100,000 was made to the Progress Foundation. During the initial 6 months of the grant 46 unduplicated individuals received crisis residential treatment in the 8-bed crisis residential home. This facility allows for diversion away from psychiatric hospitalization at a more restrictive, out of County, and more costly level of care.

Evidence Based Sources

SAMHSA - Substance Abuse and Mental Health Services Administration

Prevention Institute

Board of Behavioral Sciences (BBS)

NAMI: National Alliance on Mental Illness

Resource Commitment

Queen of the Valley Medical Center will commit staff time across the CARE Network program, provide grants to local partners, and facilitate funding from various health system sources. In partnership with Providence Government and Public Affairs division, local CHI leaders will advocate for increased access to mental health and substance use care with focused community-based solutions.

Key Community Partners

Queen of the Valley Medical Center values cross-sector collaboration and believes that non-profit organizations and local government organizations must work together to solve community-level problems. We plan to partner with the following organizations to address this need:

- Archway Recovery Services
- Buckelew Programs
- Communicare+OLE
- Mentis

- Napa County HHS Behavioral Health Division
- Napa County Narcan Taskforce
- Napa Opioid Safety Coalition
- Napa County Suicide Prevention Council
- Progress Foundation

COMMUNITY NEED ADDRESSED #3: ACCESS TO HEALTH CARE & DENTAL SERVICES

Long-Term Goal(s)/ Vision

To ease the way for all people to access the appropriate level of care at the right time.

Table 4. Strategies and Strategy Measures for Addressing Access to Health Care and Dental Services

Strategy	Population Served	FY25 Accomplishments
1. Build a Network of bilingual bicultural Birth Doulas in Napa County	Uninsured and underinsured Latine women, MediCal population	12 bilingual bicultural women have been trained to be birth doulas. They are currently within an 8-month mentorship as they work together to complete requirements to qualify to become MediCal providers through Partnership HealthPlan in Napa County.
3. Provide early oral health screening, prevention, treatment, and education to low-income children; complete dental care delivery, including checkup, treatment, and oral health education for patient/parent.	Low-income, uninsured, and under-insured individuals age 6 months to 26 years of age	The Queen's Mobile Dental Clinic completed 276 Oral Health screenings, 3738 clinic services serving 1628 unduplicated Napa County children.
4. Increase access to specialty care including HIV care, diagnostic screenings, and procedures	Low-income and/or uninsured Napa County residents	188 HIV Clinic Contacts 56 Napa County residents received services through Operation Access including 169 specialty appointments, and 77 diagnostic and or surgical services.
5. Maintain number of CARE Network clients enrolled in Enhanced Care Management	Eligible Partnership HealthPlan members	196 unduplicated enrolled ECM clients

Evidence Based Sources

Healthy People 2030 Health Care Access and Quality

Health Equity IHI Institute for Healthcare Improvement

Health Equity CDC

Resource Commitment

Queen of the Valley Medical Center will commit caregiver time, provide grants to local community partners, and facilitate funding from various health system sources. In partnership with Providence Government and Public Affairs division, local CHI leaders will advocate for improvements in access to care.

Key Community Partners

Queen of the Valley Medical Center values cross-sector collaboration and believes that non-profit organizations and local government organizations must work together to solve community-level problems. We plan to partner with the following organizations to address this need:

- Communicare+OLE
- COPE Family
- Napa County HHSA
- Napa County Office of Education
- Napa Valley Unified School District
- Operation Access
- Partnership HealthPlan of California
- Providence Medical Group

COMMUNITY NEED ADDRESSED #4: ECONOMIC STABILITY

Long-Term Goal(s)/ Vision

Increase economic stability for populations with low incomes.

Table 5. Strategies and Strategy Measures for Addressing Economic Stability

Strategy	Population Served	FY25 Accomplishments
1. Administer community grants to support and build capacity to fresh, nutritious, culturally, and/or medically appropriate food	Latine residents Low-income Older Adults	A community grant was shared with Napa Farmers Market in CY2024. This grant is focused on increasing the CalFresh Market Match available to Napa County low-income community members. 525 CalFresh households were served in 2024. This is a 19% increase over 2023.

2. Administer community grants to support and build capacity to accessible and affordable transportation	Latine residents Low-income Older Adults	A community grant was shared with Molly's Angels in CY2024. This grant is focused on transportation for Seniors and decreasing social isolation for Napa County older adults. Molly's Angels expanded its services by hiring additional paid part-time drivers to address challenging ride requests, including trips to up valley locations and long-distance medical appointments. Mollys Angels served 1349 clients in CY2024.
3. Administer community grants to support and build capacity of local emergency funds for basic needs	Low income and Latine residents	Two CY2024 community grants were shared with local non-profits to support and build capacity of local emergency funds. The non-profits that were recipients of these dollars included NEWS and UpValley Family Centers. During the reporting period, NEWS served 20 households (42 individuals including children) received tailored flexible financial assistance, often braided with other funding sources to meet basic needs which included food/clothing, rent, utilities, security measures, household items, transportation, and more. During the same reporting period, UpValley Family Centers assisted 21 households serving 54 individuals that were covered by QVMC funds for the cost of rent, utilities, and emergency expenses.

Evidence Based Sources

Healthy People 2030 Economic Stability

Centers for Disease Control and Prevention – Economic Security

Feeding America

Resource Commitment

Queen of the Valley Medical Center will commit caregiver time, provide grants to local community partners, and facilitate funding from various health system sources. In partnership with Providence Government and Public Affairs division, local CHI leaders will advocate for accessible and affordable basic needs.

Key Community Partners

Queen of the Valley Medical Center values cross-sector collaboration and believes that non-profit organizations and local government organizations must work together to solve community-level

problems. We plan to partner with the following organizations to address this need:

- Live Healthy Napa County
- Napa Farmers Market
- Napa County Safety Food Network
- UpValley Family Centers
- Molly's Angels
- NEWS

Other Community Benefit Programs

Table 6. Other Community Benefit Programs in Response to Community Needs

Initiative (Community Need Addressed)	Program Name	Description	Population Served (Low Income, Vulnerable or Broader Community)
1. Racial Equity	Latines Lead Napa Initiative	The Latines Lead Napa initiative increases the capacity of community and government systems to partner with Latine community members, build Latine residents' capacities and abilities to co-create system improvements and advocate for policy change. In FY2025 fourteen women continued their journey committing to mental health and housing advocacy across Napa County. Their project focus was to build their individual and collective capacity as Community Liaisons to help other Latine residents access services through a network of family resourced centers and emerging bi-lingual media outlets. Additional trainings and civic engagement/advocacy included "How to Present an Effective Message" training, "Voter's Choice Napa New Voter" training, and advocacy efforts around housing, the Napa County Budget, and a Napa County Statement of Support for Marginalized Communities.	Low-income, Vulnerable, Latine Community

2. Racial Equity	Parent University	Napa Valley Parent University addresses long-term economic, social, and academic impacts local Latine families face following the multiple natural disasters, the pandemic, and decades of inequity. NVPU equips parents to become more involved in their children's education through more than 50 classes. The free bilingual classes range from family literacy, wellness, financial health, housing, Parent Leadership, to navigating today's political environment with personal agency. and more. Parent University brings parents onto school campuses to build confidence, skills, and community. In FY2025 Parent University made 15,372 contacts with parents.	Low-income, Vulnerable, Latine Community
3. Racial Equity and Mental Health	Healthy for Life	A school-based physical and wellness program at 8 Title 1 schools in Napa County designed to increase physical activity, improve self-esteem, and promote healthy behaviors. In FY2025 Healthy for Life made 20619 contacts with Napa Valley Unified School District students.	Low Income or Vulnerable
4. Access to Health Care	Perinatal Education	The Napa County community is invited to take part in both virtual and in-person perinatal classes in both English and Spanish. Classes include hospital tours, childbirth preparation, newborn care, epidural education, cesarean births, breastfeeding, partners to parents, grandparents, infant massage, car seat safety and more. In FY2025 the perinatal educators made 1507 contacts with expecting and new parents.	Broader Community

FY25 COMMUNITY BENEFIT FINANCIALS

In FY25, Queen of the Valley Medical Center invested \$38,249,480 in key community benefit programs. \$37,566,174 was spent in community benefit programs for the vulnerable which includes \$2,643,353 in traditional charity care (also known as Financial Assistance at cost), \$27,915,273 in unpaid cost of Medi-Cal and \$683,306 in community benefit spend for the broader community. Queen of the Valley Medical Center applies a ratio of cost to charge to quantify financial assistance at cost, unreimbursed Medicaid (Medi-Cal), and other means-tested government programs. The cost to charge ratio is aligned with the IRS Form 990, Schedule H Worksheet 2. Our community benefit program expenses are reported in alignment with the total cost incurred to run our programs, and we offset any restricted revenue received to arrive at our net community benefit expense.

Providence Queen of the Valley Medical Center, Napa, California

FY25 (July 1, 2024 - June 30, 2025)

Financial Assistance and Means-Tested Government Program	Vulnerable Population	Broader Community	Total
Traditional Charity Care	\$2,643,353	\$0	\$2,643,353
Medi-Cal	\$27,915,273	\$0	\$27,915,273
Other Means-Tested Government (Indigent Care)	\$0	\$0	\$0
Sum Financial Assistance and Means-Tested Government Program	\$30,558,626	\$0	\$30,558,626

Other Benefits			
Community Health Improvement Services	\$5,136,198	\$437,856	\$5,574,054
Community Benefit Operations	\$1,058,546	\$245,450	\$1,303,996
Health Professions Education	\$0	\$0	\$0
Subsidized Health Services	\$81,321	\$0	\$81,321
Research	\$0	\$0	\$0
Cash and in-kind Contributions for Community Benefits	\$731,483	\$0	\$731,483
Other Community Benefits	\$0	\$0	\$0
Total Other Benefits	\$7,007,548	\$683,306	\$7,690,854

Community Benefits Spending			
Total Community Benefits	\$37,566,174	\$683,306	\$38,249,480
Medicare (non-IRS)	\$24,829,409	\$0	\$24,829,409
Total Community Benefits with Medicare	\$62,395,583	\$683,306	\$63,078,889

Telling Our Community Benefit Story: Non-Financial Summary of Accomplishments

Before the inception of community benefit, the Sisters of St. Joseph of Orange established a priority to care for the poor and vulnerable. Carrying out their mission that extends back to LePuy, France, 1650, these women were brought together by a Jesuit priest, Father Jean Pierre Medaille, who formed a new association of women, without cloister or distinctive dress, consecrated to God, to live together combining a life of prayer with an active ministry to the sick and poor. He instructed these women to go into the community, divide it into sectors, identifying the greatest needs while also seeking like-minded people who can help. To this day, now entrusted in the hands of the laity, we continue with this mission and follow these same instructions and inspiration from our founding Sisters.

Awards

In June of 2025, the Queen of the Valley CARE Network team was recognized with a CalAIM Make a Difference Award by Partnership HealthPlan of California. QVMC CARE Network was one of 16 organizations selected from across Partnership's 24-county service region for advancing holistic, community-focused health care. Also receiving an award in FY2025 was Dr. Maryam Mohsenzadeh, Senior Manager of the Queen's Mobile Dental Clinic. Dr. Maryam Mohsenzadeh was named the 2026 South Division Philanthropy Physician Champion Award honoree for Providence QVMC. These recognitions affirm Queen of the Valley's commitment to serving the poor and vulnerable through innovative and integrated care solutions.

Health Equity




We are committed to ensuring health equity for all by addressing the underlying causes of racial and economic inequities and health disparities. Our Vision is "Health for a Better World," and to achieve that we believe we must address not only the clinical care factors that determine a person's length and quality of life, but also the social and economic factors, the physical environment, and the health behaviors that play an active role in determining health outcomes. Throughout FY25 Community Health served as a Health Equity Dyad partner to meet health equity related requirements from the Joint Commission. These work streams included workflows designed to complete Social Drivers of Health (SDoH) screenings, interventions, and referrals for all admitted patients at QVMC. The second workstream focused on 30-day readmissions for Hispanic/Latinx Heart Failure patients. A third Health Equity project creates a continuum of care to improve identification and access to behavioral health services for Emergency Department Latinx patients. The health equity projects address disparities of care and access barriers.

The Queen's Heart Safe Program

The Queen's Heart Safe Program – a partnership between Providence Queen of Valley Medical Center, Queen of the Valley Foundation, and the Via Heart Project – works to make Napa County a HEARTSafe Community. Focused on increasing survival rates from sudden cardiac arrest, the program provides widespread CPR training and places automated external defibrillators (AEDs) in public spaces across the county. In CY2024 the program trained 6171 individuals including 5th, 7th, and 9th grade students through its CPR in Schools Initiative. It also placed an additional 6 AEDs across Napa County. The Queens Heart Safe Program empowers citizens to recognize and respond to cardiac emergencies, helping save lives through awareness, training, and access to life-saving tools.

2025 CB REPORT GOVERNANCE APPROVAL

This 2025 Community Benefit Report was adopted by the Community Benefit Committee of the hospital on September 25, 2025. The final report was made widely available by November 20, 2025.

<div>Signed by:  31DBC82CC6E842A...</div>	10/29/2025
Dr. Teresa Shinder Chair, Community Benefit Committee Providence Queen of the Valley Medical Center	Date
<div>DocuSigned by:  33985D7A0B114AE...</div>	10/29/2025
Garry Olney Chief Executive, Providence St. Joseph Health	Date
<div>Signed by:  4876E507C38E4FE...</div>	10/29/2025
Michael Robinson Chief Community Health Officer, South Division Providence	Date

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