Bakersfield Memorial Hospital

Hospital HCAI ID: 106150722

Community Benefit 2025 Report and 2026 Plan

Adopted November 2025

Dignity Health.
Memorial Hospital

A message from

Ken Keller, President, and Robert Noriega, Chair of the Dignity Health Memorial Hospital Board of Directors.

Dignity Health's approach to community health improvement aims to address significant health needs identified in the Community Health Needs Assessments that we conduct with community input, including from the local public health department. Our initiatives to deliver community benefit include financial assistance for those unable to afford medically necessary care, a range of prevention and health improvement programs conducted by the hospital and with community partners, and investing in efforts that address social determinants of health.

Memorial Hospital shares a commitment with others to improve the health of our community, and delivers programs and services to help achieve that goal. The Community Benefit 2025 Report and 2026 Plan describes much of this work. This report meets requirements in California (Senate Bill 697) that not-for-profit hospitals produce an annual community benefit report and plan. We are proud of the outstanding programs, services and other community benefits our hospital delivers, and are pleased to report to our community.

In fiscal year 2025 (FY25), Memorial Hospital provided $45,163,810 in patient financial assistance, unreimbursed costs of Medicaid, community health improvement services and other community benefits. The hospital also incurred $31,791,114 in unreimbursed costs of caring for patients covered by fee-for-service Medicare.

The hospital's Board of Directors reviewed, approved and adopted the Community Benefit 2025 Report and 2026 Plan at its November 19, 2025 meeting.

Thank you for taking the time to review this report and plan. We welcome any questions or comments, which can be submitted using the contact information in the At-a-Glance section of this report.

Ken Keller
President

Robert Noriega
Chairperson, Board of Directors

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At-a-Glance Summary

Hospital HCAI ID: 106150722

Report Period Start Date: July 1, 2024 **Report Period End Date**: June 30, 2025

Community Served	Dignity Health Bakersfield Memorial Hospital opened its doors to the public in 1956 to serve the growing needs of the community and is Bakersfield's largest acute care hospital facility. The hospital's service area encompasses 13 ZIP Codes in the cities of Arvin, Bakersfield, and Taft within Kern County in California's Central Valley.
Economic Value of Community Benefit	$45,163,810 in patient financial assistance, unreimbursed costs of Medicaid, community health improvement services, community grants and other community benefits $31,791,114 in unreimbursed costs of caring for patients covered by fee-for-service Medicare Community benefit expenses for services to vulnerable populations and to the broader community are listed by category in the Economic Value of Community Benefit section of this report.
Significant Community Health Needs Being Addressed	The significant community health needs the hospital is helping to address and that form the basis of this document were identified in the hospitals' most recent Community Health Needs Assessment (CHNA). Needs being addressed by strategies and programs are: • Access to health care • Chronic diseases • Food insecurity • Mental health • Overweight and obesity • Preventive practices • Substance use
FY25 Programs and Services	The hospital delivered several programs and services to help address identified significant community health needs. These included: ***Access to Health Care and Preventive Care*** Community Health Improvement Grants Program Community Health Initiative Community Wellness Program Patient Financial Assistance Homemaker Care Program Kern Connected Community Network Outpatient Nurse Navigation Program Prescription Purchases for Indigents Transportation for Patients in Financial Need

	Chronic Diseases Asthma Management Program Chronic Disease/Diabetes Self-Management Program Community Health Improvement Grants Community Wellness Program Healthy Kids in Healthy Homes ***Food Insecurity*** Community Health Improvement Grants Replate edible food recovery and donation program Kern Connected Community Network Learning and Outreach Centers ***Mental Health and Substance Use*** Anti-Vaping Program Art and Spirituality Center Behavioral Health Navigator Program Community Health Improvement Grants Mental Health Support Groups ***Overweight and Obesity*** Community Health Improvement Grants Community Wellness Program Health Equity Plan Activities Healthy Kids in Healthy Homes
FY26 Planned Programs and Services 	All programs listed above are planned to continue, with specific activities and impacts detailed in the following sections.

This document is publicly available online at:
https://www.dignityhealth.org/central-california/locations/memorial-hospital/about-us/community-benefit-report-health-needs-assessment

Written comments on this report can be submitted to the Special Needs and Community Outreach, 2215 Truxtun Avenue, Bakersfield, California 93301, or by e-mail to Donna.Sharp@commonspirit.org.

Our Hospitals and the Community Served

About Memorial Hospital

Memorial Hospital is a Dignity Health hospital. Dignity Health is a member of CommonSpirit Health.

- Memorial Hospital is located at 420 34th Street, Bakersfield, California, 93301.
- Licensed for 385 beds.
- The hospital includes a full-service Emergency Department with an Accredited Chest Pain Center and Nationally Certified Stroke Center. The facility also features the Robert A. Grimm Children's Pavilion for Emergency Services, Kern County's first and only dedicated children's ER. Memorial Hospital is home to the Sarvan and Heart and Brain Center, offering innovative and minimally invasive procedures, such as Transcatheter Aortic Valve Replacement (TAVR) and WATCHMAN device implant.

Our Mission

As CommonSpirit Health, we make the healing presence of God known in our world by improving the health of the people we serve, especially those who are vulnerable, while we advance social justice for all.

Our Vision

A healthier future for all – inspired by faith, driven by innovation, and powered by our humanity.

Financial Assistance for Medically Necessary Care

It is the policy of CommonSpirit Health to provide, without discrimination, emergency medical care and medically necessary care in CommonSpirit hospital facilities to all patients, without regard to a patient's financial ability to pay. This hospital has a financial assistance policy that describes the assistance provided to patients for whom it would be a financial hardship to fully pay the expected out-of-pocket expenses for such care, and who meet the eligibility criteria for such assistance. The financial assistance policy, a plain language summary and related materials are available in multiple languages on the hospital's website.

Description of the Community Served

The hospitals' service area includes the following cities and ZIP Codes.

Bakersfield Memorial Service Area

Place	ZIP Code
Arvin	93203
Bakersfield	93301, 93304, 93305, 93306, 93307, 93308, 93309, 93311, 93312, 93313, 93314
Taft	93268

A summary description of the community is provided below, and additional details can be found in the CHNA report online.

The population of the service area is 625,147. Children and youth, ages 0-17, make up 29.8% of the population, 59.6% are adults, ages 18-64, and 10.6% of the population are seniors, ages 65 and older. The largest portion of the population in the service area are Hispanic or Latino residents (55.4%), 30.7% are White or Caucasian residents, 5.2% are Asian residents, and 5% are Black or African American residents. 2.7% of the population are non-Latino multiracial (two-or-more races) residents, 0.4% are American Indian or Alaskan Native residents, and 0.1% are Native Hawaiian or Pacific Islander residents.

Among the residents in the service area, 19.1% are at or below 100% of the federal poverty level (FPL) and 42.1% are at 200% of FPL or below. In the service area, 25.7% of children live in poverty, 13.9% of senior adults live in poverty, and 44.6% of families with a female head of household with minor children live in poverty. The unemployment rate in the service area among the civilian labor force, averaged over 5 years, is 8%. The median household income in the service area is $71,566.

In the service area, 92% of the civilian, non-institutionalized population have health insurance, and 96.3% of children, ages 18 and younger, have health insurance coverage. Among county residents, 40.6% have Medi-Cal coverage.

Educational attainment is a key driver of health. In the hospitals' service area, 22.4% of adults, ages 25 and older, lack a high school diploma, which is higher than the state rate (15.6%).

The U.S. Health Services Administration (HRSA) designates medically underserved areas/populations (MUA) as areas or populations having too few primary care providers, high infant mortality, high poverty, or a high elderly population. Much of the service area, including the East Bakersfield area, and rural areas surrounding and between Taft and Arvin, as well as north of Bakersfield, are designated as Medically Underserved Areas (MUAs) for primary care.

Community Assessment and Significant Needs

The hospital engages in multiple activities to conduct its community health improvement planning process. These include, but are not limited, to conducting a Community Health Needs Assessment with community input at least every three years, identifying collaborating community stakeholder organizations, describing anticipated impacts of program activities and measuring program indicators.

Community Health Needs Assessment

The health issues that form the basis of the hospital's community benefit plan and programs were identified in the most recent CHNA report, which was adopted in April 2025. The hospital makes the CHNA report widely available to the public online and a written copy is available upon request.

CHNA web address:
https://www.dignityhealth.org/central-california/locations/memorial-hospital/about-us/community-benefit-report-health-needs-assessment

The CHNA contains several key elements, including:

- Description of the assessed community served by the hospital;
- Description of assessment processes and methods;
- Presentation of data, information and findings, including significant community health needs;
- Community resources potentially available to help address identified needs; and
- Discussion of impacts of actions taken by the hospital since the preceding CHNA.

Community Groups that Attended or Engaged in the CHNA:

- California Farmworker Foundation
- Community Action Partnership of Kern
- First 5 Kern
- Kern County Department of Human Services
- Kern County Department of Public Health
- Kern County Foundation
- Kern County Network for Children
- Jim Burke Ford Education Foundation
- Mission at Kern County
- National Healthcare and Housing Advisors
- Open Door Network

Vulnerable Populations Represented by These Groups:

- The unhoused
- People with disabilities
- Individuals with limited English proficiency

Significant Health Needs

The CHNA identified the significant needs in the table below, which also indicates which needs the hospital intends to address. Identified needs may include specific health conditions, behaviors and health care services, and also health-related social needs that have an impact on health and well-being.

Significant Health Need	Description	Intend to Address?
Access to health care	Access to health care refers to the availability of primary care, specialty care, vision care and dental care services. Health insurance coverage is considered a key component to ensure access to health care. Barriers to care can include lack of transportation, language and cultural issues.	☑
Birth Indicators	Poor pregnancy and birth outcomes include low birthweight, preterm births and infant mortality. These are associated with late or no prenatal care, unplanned pregnancy, cigarette smoking, alcohol and other drug use, being HIV positive, obesity, maternal age, and poor nutrition.	☐
Chronic Diseases	A chronic disease or condition usually lasts for three months or longer and may get worse over time. Chronic diseases can usually be controlled but not always cured. The most common types of chronic diseases are cancer, heart disease, stroke, diabetes, and arthritis.	☑
Crime and Safety	Violent crimes include homicide, rape, robbery and assault. Property crimes include burglary, larceny and motor vehicle theft. Injuries are caused by accidents, falls, hits, and weapons, among other causes.	☐
Economic Insecurity	Economic insecurity is correlated with poor health outcomes. People with low incomes are more likely to have difficulty accessing health care, have poor-quality health care, and seek health care less often.	☐
Education	Education significantly impacts health. People who possess higher levels of education generally experience better health outcomes and longer lifespans.	☐
Environmental Conditions	Polluted air, contaminated water, and extreme heat are environmental conditions that can negatively impact community health.	☐
Food Insecurity	The USDA defines food insecurity as limited or uncertain availability of nutritionally adequate foods or an uncertain ability to acquire foods in socially acceptable ways.	☑

Significant Health Need	Description	Intend to Address?
Housing and Homelessness	Homelessness is known as a state of being unhoused or unsheltered and is the condition of lacking stable, safe, and adequate housing.	☐
Mental Health	Mental health includes our emotional, psychological, and social well-being. It affects how we think, feel, and act.	☑
Overweight and Obesity	Overweight and obesity are common conditions that are defined as the increase in size and amount of fat cells in the body. Obesity is a chronic health condition that raises the risk for chronic diseases. Overweight and obesity are linked to a lack of physical activity and unhealthy eating habits.	☑
Preventive Care	Preventive practices refer to health maintenance activities that help to prevent disease. For example, preventive care includes vaccines, routine health screenings (mammogram, colonoscopy, Pap smear) and injury prevention strategies.	☑
Sexually transmitted infections	Sexually transmitted infections (STIs) usually pass from one person to another through sexual contact. Common STIs include syphilis, gonorrhea, and chlamydia.	☐
Substance use	Substance use is the use of tobacco products, illegal drugs, prescription drugs, over-the-counter drugs or alcohol. Excessive use of these substances or use for purposes other than those for which they are meant to be used, can lead to physical, social or emotional harm.	☑

Significant Needs the Hospital Does Not Intend to Address

Taking existing hospital and community resources into consideration, Bakersfield Memorial Hospital will not directly address the remaining significant health needs identified in the CHNA, which include birth indicators, crime and safety, economic insecurity, education, environmental conditions, housing and homelessness, and sexually transmitted infections. Knowing there are not sufficient resources to address all the community health needs, Bakersfield Memorial Hospital chose to concentrate on those health needs that can most effectively be addressed given the organization's areas of focus and expertise. The hospital has insufficient resources to effectively address all the identified needs and, in some cases, the needs are being addressed by others in the community.

2025 Report and 2026 Plan

This section presents strategies and program activities the hospital is delivering, funding or on which it is collaborating with others to address significant community health needs. It summarizes actions taken in FY25 and planned activities for FY26, with statements on impacts and community collaboration. Program Highlights provide additional detail on select programs.

Planned activities are consistent with current significant needs and the hospital's mission and capabilities. The hospital may amend the plan as circumstances warrant, such as changes in community needs or resources to address them.

Creating the Community Benefit Plan

The hospital is dedicated to improving community health and delivering community benefit with the engagement of its management team, board, clinicians and staff, and in collaboration with community partners.

Hospital and health system participants included:

- Patient Experience
- Mission Integration
- Communications / Marketing
- Foundation / Philanthropy
- Neuro and Cardiac Services
- Quality

Memorial Hospital engaged the Community Benefit Committee and the Special Needs and Community Outreach Leadership Team to examine the significant health needs. The CHNA served as the resource document for the review of the significant health needs as it provided statistical data on the severity of issues and included community input. Also, the community prioritization of the significant health needs was taken into consideration.

The programs and initiatives described here were selected based on:

- Existing Infrastructure: There are programs, systems, staff and support resources in place to address the issue.
- Established Relationships: There are established relationships with community partners to address the issue.
- Ongoing Investment: Existing resources are committed to the issue. Staff time and financial resources for this issue are counted as part of our community benefit effort.

- Focus Area: The hospital has acknowledged competencies and expertise to address the issue and the issue fits with the organizational mission.

Community Health Core Strategies

The hospital intends that program activities to help address significant community health needs reflect a strategic use of resources. CommonSpirit Health has established three community health improvement core strategies to help ensure that program activities overall address strategic aims while meeting locally-identified needs.

- Extend the care continuum by aligning and integrating clinical and community-based interventions.
- Implement and sustain evidence-based health improvement program initiatives.
- Strengthen community capacity to achieve equitable health and well-being.

Report and Plan by Health Need

The tables below present strategies and program activities the hospital has delivered or intends to deliver to help address significant health needs identified in the community health needs assessment. They are organized by health need and include statements of goals and anticipated impact, and any collaboration with other organizations in their delivery.

Health Need: Access to Health Care (Including preventive practices)

Strategy or Program	Summary Description	Active FY25	Planned FY26
Community Health Improvement Grants	Offers grants to nonprofit community organizations that provide health care access and preventive care programs and services.	☒	☒
Community Health Initiative	Increases access to health insurance and health care for hard-to-reach individuals in Kern County. Provides application assistance and educates families on the importance of preventive care.	☒	☒
Community Wellness Program	Provides community health screenings and health education on a variety of prevention topics.	☒	☒
Financial assistance for the uninsured or underinsured	Provides financial assistance to those who have health care needs and are uninsured, underinsured, ineligible for a government program or otherwise unable to pay.	☒	☒
Homemaker Care Program	Provides in-home services, linkages to health care resources and social services that improve the quality of life for vulnerable clients.	☒	☒
Kern Connected Community Network (CCN)	Hospital care coordination and community partner agencies work together to identify the health and health-related social needs of vulnerable patients and electronically link health care providers to organizations that provide direct services.	☒	☒
Outpatient Nurse Navigator Program	Comprehensive case management is provided to patients who are identified as being at high risk for unnecessary hospital readmission.	☒	☒

	Services are initiated by referral from the Care Coordination team.		
Prescription Purchases for Indigents	Purchases necessary medications in emergency situations for people who must have the medicines for their health but have no money to buy them.	☒	☒
Transportation	Provides transportation support to vulnerable people to access health care services.	☒	☒
Goal and Impact: Increase access to health care for the medically underserved and reduce barriers to care.			
Collaborators: Community clinics, faith groups, health care providers, community-based organizations, public health and city agencies			

Health Need: Chronic Diseases

Strategy or Program	Summary Description	Active FY25	Planned FY26
Asthma Management Program	Asthma educators provide education to individuals and monitor client usage of rescue and controller medications.	☒	☒
Chronic Disease/Diabetes Self-Management Program	Provides residents who have chronic diseases, including diabetes, with the knowledge, tools and motivation needed to become proactive in their health through six-week workshops.	☒	☒
Community Health Improvement Grants	Offers grants to nonprofit community organizations that provide programs and services that address chronic disease prevention and treatment and healthy eating and active living.	☒	☒
Community Wellness Program	Provides health education on nutrition, diabetes, cholesterol and hypertension.	☒	☒
Health Equity Plan Activities	Increases awareness and confidence among participants in the Diabetes Self-Management Program by providing them with	☒	☒

	knowledge and tools to actively manage their health.		
Healthy Kids in Healthy Homes	Provides information to children on the topics of nutrition, exercise, and lifestyle in an eight-session program.		
Goal and Impact: Increased compliance with chronic disease management recommendations.			
Collaborators: Community-based organizations, public health, faith community, senior service agencies, youth organizations, community clinics, schools and school districts			

Health Need: Food Insecurity

Strategy or Program	Summary Description	Active FY25	Planned FY26
Community Health Improvement Grants	Grant funds are awarded to nonprofit organizations to deliver services and strengthen service systems, which improve access to food for vulnerable and underserved populations.	☒	☒
Kern Connected Community Network	Addresses the social determinants of health and links referred patients to appropriate and needed community-based services.	☒	☒
Learning and Outreach Centers	In collaboration with other community service agencies, provide referral services, food, clothing, and education to the most vulnerable and needy residents of the community.	☒	☒
Replate Program	Facilitates food donation by collecting the hospital's surplus food to distribute to communities facing food insecurity	☒	☒
Goal and Impact: The hospitals' initiative to address the social determinants of health and food insecurity are anticipated to result in: increased access to health and social services to help residents of Kern County stay healthy and experience a better quality of life.			
Collaborators: Key partners include: public health, faith community, community clinics, food bank/pantries, housing and homelessness agencies, senior centers and community-based organizations.			

Health Need: Mental Health and Substance Abuse

Strategy or Program	Summary Description	Active FY25	Planned FY26
Anti-Vaping program	Offers anti-vaping education programs at local schools.	☒	☒
Art and Spirituality Center	Provides opportunities for artistic expression, meditation, relaxation, and creativity to promote health and well-being, aiding in physical, mental, and emotional recovery, including relieving anxiety and decreasing the perception of pain.	☒	☒
Behavioral Health Navigator Program	Supports the emergency department as a primary access point for treating substance use disorders and mental health conditions. It employs trained navigators to identify patients who can benefit from starting medication for addiction or mental health services.	☒	☒
Community Health Improvement Grants	Offers grants to nonprofit community organizations that provide mental health and substance use programs and services.	☒	☒
Mental health support groups	The Community Health Initiative provides free mental health support groups to individuals who live with mental health challenges.	☒	☒

Goal and Impact: Reduce drug and alcohol addiction, and increase prevention, screening, assessment, and treatment of mental health disorders.

Collaborators: Schools and school districts, community-based organizations, youth programs, law enforcement, and collaboratives that seek to support mental health and substance use needs

Health Need: Overweight and Obesity

Strategy or Program	Summary Description	Active FY25	Planned FY26
Community Health Improvement Grants	Offers grants to nonprofit community organizations that provide programs and services that address healthy eating and active living to reduce obesity.	☒	☒
Community Wellness Program	Provides health education on nutrition, diabetes, cholesterol and hypertension.	☒	☒
Healthy Kids in Healthy Homes	Provides information to children on nutrition, exercise, and lifestyle in an eight-session program.	☒	☒

Goal and Impact: Improved healthy eating and physical activity behaviors.

Collaborators: Community-based organizations, public health, faith community, senior service agencies, youth organizations, community clinics, schools and school districts.

Community Health Improvement Grants Program

One important way the hospital helps to address community health needs is by awarding restricted financial grants to non-profit organizations working to improve health status and quality of life. Grant funds are used to deliver services and strengthen service systems, to improve the health and well-being of vulnerable and underserved populations related to CHNA priorities.

In FY25, the hospital contributed $285,500 to the grants below totaling $472,500. The figures below represent grants that the hospital made in conjunction with Mercy Hospitals of Bakersfield. Some projects may be described elsewhere in this report.

Grant Recipient	Project Name	Health Needs Addressed	Amount
Alzheimer's Disease Association of Kern County	Community Health Empowerment Initiative	Access to Care, Chronic Diseases	$32,500
CityServe Network	CityServe Educational Collaborative Community Champion Initiative	Education, Housing and Homelessness	$40,000
Flood Ministries	Kern River Valley Bridge for a Brighter Future	Food Insecurity, Housing and Homelessness	$100,000
Kern County Network for Children	Kern County Network for Children	Access to Care, Food Insecurity, Mental Health, Substance Use	$50,000
Kern Partnership for Children and Families	Healthy Families: Healthy Choices, Healthy Futures	Education, Mental Health	$50,000
Links for Life	Links for Life Health & Wellness Program	Access to Care, Chronic Diseases, Preventive Practices	$50,000
Teen Challenge (Kern County Chapter)	Teen Challenge of Southern California (Kern County Chapter)	Housing and Homelessness, Mental Health, Substance Use	$75,000
Youth Connection of Kern County	Youth Connection of Kern County	Education	$75,000

Program Highlights

The following pages describe a sampling of programs and initiatives listed above in additional detail, illustrating the work undertaken to help address significant community health needs.

Community Wellness Program	
Significant Health Needs Addressed	• Access to health care • Chronic diseases • Overweight and obesity • Preventive practices • Substance use
Program Description	The Community Wellness Program focuses on preventive health by providing on-site screenings, health and wellness education, and services for residents throughout Kern County. The program encompasses initiatives that address prevention through cancer screenings, education on cardiovascular disease, asthma, diabetes, and obesity, as well as outpatient nurse navigation services for patients at high risk of hospital readmission.
Population Served	The population served are low-income individuals and families without health insurance and/or qualify for publicly funded health care plans and have a chronic condition or live with someone with a chronic condition.
Program Goal / Anticipated Impact	The Community Wellness Program will increase access to preventive health screenings and education for residents of Kern County.
FY 2025 Report	
Activities Summary	• Provided health screenings at 14 community sites. • Provided the Healthy Kids in Healthy Homes program to 2nd, 3rd, and 4th graders at 3 Bakersfield City School District school sites. • Provided community health education classes that focus on the following priorities – obesity, diabetes, asthma, cardiovascular disease, breast health, and substance abuse.
Performance / Impact	• 68% of health screening participants reported making a positive lifestyle change. • 639 flu shots were provided. • 96% of children who attended Healthy Kids in Healthy Homes workshops participated in 6 out of 8 classes. • 95% of health education participants surveyed reported having a better understanding of how to live a healthy lifestyle.

	● 100% of children who attended the Youth Tobacco Program participated in 3 out of 5 classes. ● 100% of Asthma Management Program participants had their asthma "controlled" when exiting the program. ● Delivered 11 cancer education classes and 2 mammogram screening events. ● 100% of the Outpatient Nurse Navigator program patients avoided readmission to the hospital within 7 days of their discharge date.
Hospital's Contribution / Program Expense	The total FY25 expense for the Community Wellness Program was $670,028. Of this amount, $182,671 was grant dollars and donations, and $487,357 was contributed by Mercy and Memorial Hospitals. Other hospital contributions include program supervision, fundraising support, bookkeeping, and human resources support.
FY 2026 Plan	
Program Goal / Anticipated Impact	The Community Wellness Program will increase access and availability to preventive health screenings and education for residents of Kern County. The anticipated impact of these services include: ● 70% of health screening participants surveyed will report making a positive lifestyle change. ● Provide 500 flu immunizations for residents of Kern County. ● 80% of children who attend Healthy Kids in Healthy Homes workshops will complete the workshop by participating in six out of eight classes. ● 90% of health education participants surveyed will report having a better understanding of how to live a healthy lifestyle. ● 80% of children who attend the Youth Tobacco Prevention workshops will complete the workshop by participating in 3 out of 4 classes. ● 70% of Asthma Management Program participants will have improved asthma status when exiting the program. ● Plan and deliver quarterly cancer education and screening events. ● 95% of the Outpatient Nurse Navigator program patients will avoid readmission to the hospital within 7 days of their discharge date.
Planned Activities	Our programs will continue to collaborate with community health centers, churches, school districts, health care providers, health plans, and family resource centers to provide community health education.

Chronic Disease/Chronic Pain/Diabetes Self-Management Programs	
Significant Health Needs Addressed	• Chronic diseases
Program Description	The Healthier Living Self-Management Programs are designed for persons who have diabetes and other chronic illnesses, providing them with the knowledge, tools, and motivation needed to become proactive in their health. The length of each seminar varies from six to eight weeks, covering a variety of topics including nutrition, exercise, medication use, and communication with doctors, stress management, and evaluating new treatments.
Population Served	Participants are individuals without health insurance and/or who qualify for publicly funded health care plans and have a chronic condition or live with someone with a chronic condition.
Program Goal / Anticipated Impact	Decrease hospital admissions for two of the most prevalent ambulatory care sensitive conditions in our community (diabetes and congestive heart failure).
FY 2025 Report	
Activities Summary	• Delivered 22 seminars that were between six to eight weeks in length targeted at persons with diabetes and other chronic diseases during the fiscal year.
Performance / Impact	• 97% of participants who registered for Healthier Living completed the seminar by attending 4 out of 6 classes. • 100% of participants with a chronic disease who completed Healthier Living seminars remained healthier after their seminars, as measured by those who avoided admissions to the hospital or emergency department for three months following their participation in the program.
Hospital's Contribution / Program Expense	The total FY25 expense for the Healthier Living Self-Management Programs was $38,202. Of this amount, $10,346 was grant dollars and donations, and $27,856 was contributed by Mercy and Memorial Hospitals. Other hospital contributions include program supervision, fundraising support, bookkeeping, and human resources support.
FY 2026 Plan	
Program Goal / Anticipated Impact	The hospital's initiatives to address chronic diseases are anticipated to result in increased focus on chronic disease prevention education and increased compliance with chronic disease management recommendations. The anticipated impact of the Healthier Living program includes: • 95% of participants who register for a Healthier Living workshop will complete the seminar by attending the required number of classes.

	• 95% of participants with a chronic disease who complete Healthier Living seminars will remain healthier after their seminars, as measured by those who avoid admissions to the hospital or emergency department for three months following their participation in the program.
Planned Activities	We will continue to partner with community health centers, churches, school districts, senior centers, and family resource centers.

Community Health Initiative

Significant Health Needs Addressed	• Access to care • Mental health
Program Description	The Community Health Initiative works with public, private and non-profit organizations to enroll individuals in health insurance programs. We provide training and referrals to partner agencies, and work at the local and state levels to help streamline the sometimes burdensome process of navigating the public health system.
Population Served	We work to provide access to care for individuals and families. Mental health activities are provided to Spanish-speaking populations.
Program Goal / Anticipated Impact	Kern County residents will have access to health care, will be able to navigate health insurance coverage to access care, and will utilize preventive care.
FY 2025 Report	
Activities Summary	Provided education to every client to ensure they understand and know how to access care. Made follow-up utilization calls to those individuals who are assisted with health insurance enrollment to ensure they have selected a health plan, primary care physician and have scheduled their first appointment.
Performance / Impact	• 99% of individuals who began the health insurance application process completed enrollment. • 72% of enrolled individuals received utilization services. • 92% of individuals who completed an evaluation will report feeling a sense of well-being after attending mental health support group sessions.
Hospital's Contribution / Program Expense	The total FY25 expense for the Community Health Initiative was $387,649. Of this amount, $101,836 was grant dollars and donations, and $285,813 was contributed by Mercy and Memorial Hospitals. Other hospital contributions include program

	supervision, fundraising support, bookkeeping, and human resources support.
FY 2026 Plan	
Program Goal / Anticipated Impact	• 95% of individuals who begin the health insurance process will complete enrollment. • 75% of enrolled individuals will receive utilization services. • 95% of individuals who attend a mental health activity will report an improvement in their mental health well-being.
Planned Activities	We will continue to work with several local organizations to reach the different populations residing in Kern County. Partners will include: community health centers, public health, social services, school districts, community-based organizations, churches, Promotoras and others. Support groups, workshops and presentations will be provided to help reduce the stigma of mental health in Latino communities.

 **Homemaker Care Program**	
Significant Health Needs Addressed	• Access to care
Program Description	The Homemaker Care Program provides non-medical, in-home supportive services to seniors and adults with disabilities. The majority of clients are partially or wholly subsidized, primarily through hospital funds. The program also offers free vocational training to individuals who are unemployed and/or seeking entry-level employment in this industry, as well as to unpaid friend or family caregivers and paid caregivers who wish to increase their skills.
Population Served	Seniors, disabled adults, adult-children caregivers, and job seeking individuals are the primary beneficiaries.
Program Goal / Anticipated Impact	Provide seniors and disabled adults with high-quality supportive services, allowing them to remain in their homes, living independently for as long as possible. Provide job-seeking individuals with comprehensive caregiver training to increase their knowledge, skills, and confidence to deliver competent care to seniors and disabled adults.
FY 2025 Report	
Activities Summary	• Collaborated with senior-related and health care related companies, organizations and public agencies to increase our ability to advocate for our clients and help all seniors advocate for themselves.

	• Provided services to increase access to care for vulnerable seniors and disabled clients. • Linked underserved clients to needed health care and social service resources. • Collaborated with other organizations to identify candidates for the training program. • Provided in-person caregiver training.
Performance / Impact	• Improved the quality of life for 100% of clients as determined by an annual survey. • Maintained a minimum overall satisfaction level of 97% for excellence in maintaining dignity and quality of service as determined by a monthly survey. • Conducted 4 training sessions during the fiscal year. • Improved the knowledge and skills of 100% of the graduating students as disclosed by a comparison of a pre-course assessment to a post-course examination for each graduate.
Hospital's Contribution / Program Expense	The total FY25 expense for the Homemaker Care Program was $339,872. Of this amount, $158,647 was comprised of client fees, grants, and donations, and $181,225 was contributed by Mercy and Memorial Hospitals. Other hospital contributions include program supervision, fundraising support, bookkeeping, and human resources support.
FY 2026 Plan	
Program Goal / Anticipated Impact	• Improve the quality of life for 95% of clients, as determined by an annual survey. • Maintain a minimum overall satisfaction level of 90% for excellence in maintaining dignity and quality of service, as determined by annual survey. • 90% of students who graduate from the Caregiver Training Program will receive an average score of 80% or higher in course exams.
Planned Activities	Our programs will continue to collaborate with local organizations to provide services for seniors and adults and disabilities.

Social Determinants of Health (Basic Needs Services)	
Significant Health Needs Addressed	• Preventive practices • Food insecurity • Mental health
Program Description	The Learning and Outreach Centers are located in economically depressed neighborhoods of southeast Bakersfield. In collaboration with other community service agencies, the centers provide referral services, food, clothing, education, and health

	screenings to the most vulnerable and needy residents of the community. The after school program provides tutoring support five days a week to underserved youth. The Art and Spirituality Center provides opportunities to experience the healing benefits that may come from creative expression, including meditation, movement, self-reflection, and prayer. These experiences promote health and well-being by aiding in physical, mental, and emotional recovery including relieving anxiety and decreasing the perception of pain.
Population Served	The Learning and Outreach Centers serve individuals living in underserved areas of southeast Bakersfield. The Art and Spirituality Center programs are available to all adults (and children, when specified) in the community who may benefit from healing through creative expression.
Program Goal / Anticipated Impact	Increase access to health and social services to help residents of Kern County stay healthy physically, emotionally and spiritually.
FY 2025 Report	
Activities Summary	• The Learning and Outreach Centers provided basic need services to vulnerable residents living in underserved neighborhoods of southeast Bakersfield. • The Art and Spirituality Center offered programs in a variety of artistic classifications, both in-person and virtually, to promote physical, emotional and spiritual healing.
Performance / Impact	• 47,652 individuals were assisted with basic living necessities at the Learning & Outreach Centers. • 88% of students maintained a grade point average of 2.5 or higher. • 16,702 individuals were served through the Art and Spirituality Center programs. • 100% of Art and Spirituality Center participants reported feeling a general sense of well-being and improved quality of life after completing their workshop(s).
Hospital's Contribution / Program Expense	The total FY25 expense for the Learning and Outreach Centers and the Art and Spirituality Center was $430,318. Of this amount, $57,626 was grant dollars and donations, and $372,692 was contributed by Mercy and Memorial Hospitals. Other hospital contributions include program supervision, fundraising support, and human resources support.
FY 2026 Plan	
Program Goal / Anticipated Impact	• 40,000 individuals will be assisted with basic living necessities at the Learning & Outreach Centers. • 85% of students will maintain a 2.5 grade point average or higher.

	• Provide services to 15,000 individuals through Art and Spirituality Center programs. • 99% of Art for Healing participants will report an improved sense of well-being as a result of completing their workshop(s).
Planned Activities	Our programs will continue to partner with local community-based organizations to achieve their goals. Some partners include school districts, food banks, family resource centers and community based organizations.

 **Community Health Improvement Grants Program**	
Significant Health Needs Addressed	• Access to health care • Chronic diseases • Food insecurity • Mental health • Overweight and obesity • Preventive practices • Substance use
Program Description	Award grant funding to local non-profit organizations to support collaborative efforts aimed at addressing significant health needs identified by the hospitals, as outlined in the latest Community Health Needs Assessment.
Population Served	Vulnerable and underserved populations in Kern County.
Program Goal / Anticipated Impact	Increased access and reduced barriers to health care, preventive care, mental health and substance abuse services, basic needs and chronic disease prevention and treatment for the medically underserved. The hospital actively partners with non-profit organizations working to improve health status and quality of life in the communities we serve. Grant funds are used to deliver services and strengthen service systems, to improve the health and well-being of vulnerable and underserved populations and reduce disparities.
FY 2025 Report	
Activities Summary	Mercy and Memorial Hospitals awarded $472,500 in grant funding to nine Kern County non-profit organizations.
Performance / Impact	• The Community Grants Committee reviewed all grant proposals and provided recommendations for organizations and projects to be funded. • Grant projects addressed the following identified health needs: o Access to care

	o Birth indicators o Chronic diseases o Food insecurity o Housing and homelessness o Substance use and misuse o Mental health o Preventive practices
Hospital's Contribution / Program Expense	The total FY25 expense was $472,500. Other hospital contributions include grant administration.
FY 2026 Plan	
Program Goal / Anticipated Impact	• The Community Grants Committee will review all grant proposals and provide recommendations for organizations and projects to be funded. • Mid-year site visits will be conducted to evaluate the progress of the grant projects.
Planned Activities	The Community Health Improvement Grants Program will continue to partner with local non-profit organizations to address significant health needs identified in the hospital's Community Health Needs Assessment.

Other Community Health and Community Building Programs

The hospital delivers community programs, services and non-quantifiable benefits in addition to those described elsewhere in this report. Like those programs and initiatives, the ones below are a reflection of the hospital's mission and its commitment to improving community health and well-being.

Health Professions Education – Bakersfield Memorial Hospital regularly sponsors training for medical students, nurses, and other students in the healthcare field. Thousands of hours each year are committed to providing a clinical setting for undergraduate training and internships for nursing professionals, technicians, and other health professionals from universities and colleges.

Prescription Program - The Prescription Purchase for Indigent Program purchases necessary medications in emergency situations for people who must have the medicines for their health but have no money or insurance to purchase them. The hospital's social workers identify patients in need of medication and request the medication from Komoto Pharmacy.

Art Cart - The Art and Spirituality Center offers bedside art-making, reflective, and other creative experiences provided by an Art Cart Specialist or volunteer.

Acoustic Remedies - The Art and Spirituality Center takes the healing power of music directly to the besides of patients admitted at Mercy and Memorial Hospitals serving as a non-invasive treatment option that promotes health and well-being. The various elements of music including rhythm, melody, harmony, and tempo stimulate a cognitive and emotional response that helps to positively affect mood and results in improved healing.

College Dream Program - The College Dream Program provides educational tutoring services, mentoring services, assistance with college applications, assistance with financial aid applications, and ensures students current classes align with their academic goals.

Homework and After School Clubs - The Learning and Outreach Centers provide an academically structured after school program for underserved students attending first through sixth grade. The program focuses on providing a safe environment for children to work on homework and other academic skills.

Economic Value of Community Benefit

The economic value of all community benefit is reported at cost. Patient financial assistance (charity care) reported here is as reported to the Department of Health Care Access and Information in Hospital Annual Financial Disclosure Reports, as required by Assembly Bill 204. The community benefit of Medicaid, other means-tested programs and Medicare is calculated using a cost-to-charge ratio to determine costs, minus revenue received for providing that care. Medicare reported here excludes Medicare reported as a part of Graduate Medical Education.

Other net community benefit expenses are calculated using a cost accounting methodology. Restricted offsetting revenue for a given activity, where applicable, is subtracted from total expenses to determine net benefit in dollars.

Financial Assistance and Means-Tested Government Programs	Vulnerable Population	Broader Community	Total
Traditional Charity Care	**$5,506,499**		$5,506,499
Medi-Cal	$32,627,306		$32,627,306
Other Means-Tested Government (Indigent Care)	$0		$0
Sum Financial Assistance and Means-Tested Government Programs	**$38,133,805**		**$38,133,805**
Other Benefits			
Community Health Improvement Services	$937,966		$937,966
Community Benefit Operations	$445,887	$61,893	$507,780
Health Professions Education		$3,983,176	$3,983,176
Subsidized Health Services	$2,958		$2,958
Research	$0	$0	$0
Cash and In-Kind Contributions for Community Benefit	$1,591,712	$6,413	$1,598,125
Other Community Benefits			$0
Total Other Benefits	**$2,978,523**	**$4,051,482**	**$7,030,005**
Community Benefits Spending			
Total Community Benefits	**$41,112,328**	**$4,051,482**	**$45,163,810**
Medicare	$31,791,114		$31,791,114
Total Community Benefits with Medicare	**$72,903,442**	**$4,051,482**	**$76,954,924**

**The hospital also invested $81,480 in community building activities, which are reported separately from community benefit expenses in accordance with IRS Schedule H instructions.

Hospital Board and Committee Rosters

Memorial Hospital Board of Directors

Morgan Clayton
Tel-Tec Security

Daniel Clifford
Bolthouse Properties, LLC

Christina Del Toro-Dias
Physician

John R. Findley, MD
Physician

Brad Hannink
Finance Advisor

Ken Keller
Bakersfield Memorial Hospital

Donald McMurtrey
Retired, Business Owner

Javier Miro, MD
Physician

Robert Noriega
Young & Woolridge

B.J. Predum
Mercy Hospitals of Bakersfield

Susie Small
Oilfield Construction

Community Benefit Committee

Felicia Boyd
Mercy and Memorial Hospitals

Lisa Bradley
Tejon Indian Tribe

Brynn Carrigan
Kern County Public Health

Morgan Clayton
Tel-Tec Security
Board Member, Mercy and Memorial Hospitals

Aaron Falk
Kern Community Foundation

Steve Flores
Community member

Amanda Frank
Kern County Superintendent of Schools

Pawan Gill
Kern Family Health Care

Cherese Grell
CityServe

Toni Harper
Friends of Mercy Foundation and Bakersfield Memorial Hospital Foundation

Mikie Hay
Jim Burke Ford Foundation

Pam Holiwell
Community member

Tori Jacobs
Comprehensive Blood & Cancer Center

Lisa Jacoby
Mercy and Memorial Hospitals

Anna Laven
National Healthcare and Housing Advisors

Miriam Ocampo-Arreola
Kern County Department of Human Services

Jeremy Oliver
Kern County Aging and Adult Services

Mikin Plummer
Kern County Builders Exchange

Stacy Riddle
Mercy Hospitals of Bakersfield

Michele Shain
Bakersfield Memorial Hospital

Donna Sharp
Mercy and Memorial Hospitals

Violeta Trujillo
Mercy and Memorial Hospitals

Frenchy Valenzuela
Mercy and Memorial Hospitals

Joan Van Alstyne
Mercy Hospitals of Bakersfield