



Salem Health West Valley

**Oregon Health Authority Supplemental Narrative CBR-1
Fiscal Year July 2023- June 2024**

About Salem Health Hospitals and Clinics

Salem Health Hospitals and Clinics (SHHC) has been the region's leader in locally controlled health care since 1895, providing the community with award-winning care for generations. Salem Health facilities include Salem Hospital, West Valley Hospital in Dallas and Salem Health Medical and Specialty Clinics throughout the Mid-Willamette Valley. Salem Health collectively serves Marion and Polk Counties as its primary service area, while also providing high-quality, sought-after care to those in the surrounding counties of Linn, Benton, Lincoln, and Yamhill.

SHHC's not-for-profit hospitals are licensed for a total of 669 beds (644 on the Salem campus and 25 at West Valley campus in Dallas). In July 2022, a new inpatient building opened on the Salem campus, adding 150 beds to meet the current and growing need. In June 2023, 19 beds were added to the Dallas campus.

About West Valley Hospital

West Valley Hospital, located in Dallas, has been serving the community for more than 100 years. It is the home of Polk County's only 24-hour emergency department, and it offers a wide range of services including imaging, surgery and rehabilitation. West Valley Hospital is licensed for 25 beds, which may "swing" from inpatient care to skilled nursing, depending on the needs and acuity level of the patient.

Our mission is to improve the health and well-being of the people and communities we serve. We are proud to partner with the best physicians in the region to bring exceptional and compassionate care to our region.

In addition to inpatient and emergency care, West Valley Hospital's community benefits from the following services offered through the SHHC health system:

- Anticoagulation
- Cardiology
- Diabetes/nutrition education
- Imaging
- Infusion
- Lab
- Orthopedics
- Urology
- Rehabilitation/physical therapy
- Surgery
- Transitional care
- Volunteers/Connections Van
- Wound care

Service Area

Marion and Polk Counties are in the Willamette Valley and are the 5th and 13th most populous counties in Oregon respectively. This community spans about 1,950 square miles, of which 1,200 are in Marion and 750 are in Polk. As of 2020 there were approximately 433,353 people living in the community of Marion and Polk Counties, which is about 10% of the total state population. Of those, it is estimated that 345,920 people live in Marion and 87,433 live in Polk.

In Polk County, the largest cities are Dallas, Falls City, Independence, Monmouth, and Willamina, as well as a portion of Salem (west), the composite of which approximately 84% of Polk's population resides. Those who live outside of the major population areas in the community may experience greater difficulty accessing resources like health care services and healthy foods. Transportation can be difficult given the limited public transportation in these rural areas.

Educational achievement has been improving in recent years as a higher percentage of community members have a high school diploma/GED. In Polk County, 91% of adults in Polk County have a high school diploma or GED. However, the percentages drop significantly for Latino populations – just 61% in Polk County. Educational achievement in Marion County was lower than Polk and the state, especially with regards to college graduates. In Marion County 23% of people had a bachelor's degree or higher, compared to 31% in Polk. Educational achievement differed by sex, race and ethnicity, geography, and disability status.

Marion and Polk Counties have a higher percentage of people living below the federal poverty level than Oregon as a whole. A greater percentage of females were living in poverty than males. About 1 in 10 people are food insecure. More children experience food insecurity in Marion County, but 18% of those in Polk County live in a food desert. To be considered a food desert, a census tract must be designated as both low-income and have low access to supermarkets or large grocery stores where healthy foods are available.

Key Findings for Marion & Polk Counties:

- A greater percentage of the community population is younger, under the age of 25, than Oregon. In coming years, the community is expected to shift, with a greater percentage of older adults making up the population.
- The community has a higher percentage of members that speak a language other than English at home than Oregon. Roughly, 1 in 4 households (25%) in Marion speak a language other than English, compared with 12% in Polk and 15% in Oregon. The most common languages spoken after English were Spanish, various Asian or Pacific Islander languages, and Russian.
- About 15% of community members are living with a disability, which has been decreasing over time and this number is higher in Polk County than surrounding areas, especially in ambulatory disabilities, and self care. Polk County also has more veterans, 11% of the population compared with 9% for Marion County and Oregon. The proportion of community members living with a disability differed by race and ethnicity.
- About 16% of Polk County community members lived outside of its largest cities. Because the area is already rural and there is little to no mass transit, this makes transportation challenging for residents.
- The community is growing, aging, and becoming more diverse, a trend that is predicted to continue. Population projections estimate that there will be 500,000 community members by 2035. Older adults will represent a greater proportion of the overall population in the future than they do currently.

Community Health Needs Assessment

A community health needs assessment (CHNA) is conducted annually in cooperation with local partners, including Marion County Health & Human Services, Polk County Health Department, Santiam Hospital and Clinics, Legacy Health, and Kaiser Permanente, Willamette Health Council, and PacificSource Community Solutions, the local coordinated care organization.

The community health needs assessment gathers data from various reliable sources to identify local strengths and the most pressing health challenges using an evidence-based framework. This information

is then used to create a community health improvement plan (CHIP), which identifies strategies and tactics to address the identified priority areas. The current priority areas are behavioral health supports, substance use prevention, and housing.

Process and Method

The process uses MAPP (Mobilizing for Action through Planning and Partnerships) to assess and improve the health of the community. MAPP is a flexible, evidenced based framework, created by the National Association of County and City Health Officials (NACCHO). MAPP allows communities to cast a wide net, collecting data in multiple ways to understand local health and what contributes to local health conditions. MAPP casts a wide net collecting data in various ways to understand local health and why health conditions occur. This information is then used to identify key priority areas for improvement in the Community Health Improvement Plan (CHIP) over a designated period. Although the CHNA strives to be comprehensive, it should not be thought of as an exhaustive compendium of every local measure that exists; rather, this document utilizes select measures that best capture the health of the community. MAPP builds off previous work conducted by the community. A key takeaway from the last process was that three years is not enough time to make substantial gains in the CHIP priority areas. Annual evaluations and updates, as well as mid-year reflections that allow us to check and adjust the work allow additional insight into whether tactics are making the difference originally intended.

A full description of the collaborative process used to identify and prioritize health needs can be found in the introduction and methods section of the [Marion-Polk Community Health Needs Assessment](#). Surveys, community town halls, assessment of a variety of systems and casting a wide net to include a number of community partners, as well as extensive review and analysis of data from multiple sources were used to establish community needs. While the team strived to use the most reliable, valid, and up to date data available; it is important to acknowledge these limitations and seek to address them in future studies, as well as be nimble in responding to the constantly changing needs of our community.

While SHHC works to address the priorities established by the two-county collaborative, they also consider the unique health needs within each community its hospitals serve, allocating resources toward services, outreach, prevention, education, and wellness opportunities where the greatest impact can be realized.

Significant Community Benefit Activities Addressing Identified Needs

Priority Areas: Housing, Behavioral Health, Substance Abuse Prevention.

West Valley Hospital conducts suicide screening on each individual seeking care in the Emergency Department. Suicide prevention supports are also provided to our community through QPR (Question, Persuade, Refer) trainings and engagement in the Mid-Valley Suicide Prevention Coalition. West Valley Hospital provides funding and volunteers to Fall City Thrives and its Fall City Happy Dance, a community event which raises awareness around mental health and resiliency, including a community resource fair.

West Valley Hospital is a smoke free campus. The hospital screens 100% of its patients for tobacco use and provides all tobacco users with community cessation resource information. The American Lung Association's Freedom from Smoking curriculum is offered at no cost through our Community Health Education Center (CHEC) and the Health Education and Outreach teams provide community-based education to schools related to tobacco prevention. Salem Health's Trauma Prevention team conducted classes and presentations around substance abuse prevention, including smoking, vaping, marijuana and methamphetamine use.

West Valley Hospital supports the Polk County Service Integration Team (SIT), both financially and serving as members on the team. The purpose of SIT is to facilitate collaboration among community partners to provide coordinated resources and information for individuals and families to fill gaps in areas such as housing, transportation needs, and healthy foods. Service Integration Teams are community partners expediting solutions by matching resources to clearly defined needs, while avoiding duplication of service. SIT intervenes in a variety of circumstances and provide multiple resources, connecting individuals and families and minimizing toxic stress.

Marion and Polk Counties have a higher percentage of people living below the federal poverty level than Oregon as a whole. A greater percentage of females were living in poverty than males and about 1 in 10 people are food insecure. West Valley Hospital partnered with Dallas Emergency Food Bank and the Dallas Downtown Association to address food insecurity and food desert challenges.

West Valley Hospital provided funding and partnership to Salem Free Clinics to expand health screenings and health care for people in Polk County, which has a significant provider shortage. The Oregon provider to population ratio is 1:358. In Polk County, the ratio is one provider for every 2,245 people. The free clinics with access to medical, dental and mental health care are extremely important for this community.

West Valley Hospital expanded its efforts to increase the availability of car seats and assistance with car seat installation by partnering with Bambinos, which has the only certified car seat installers in Polk County.

Community Health Educators improved bike safety by providing free helmets and safety instructions at local Bike Rodeos.

In conclusion, West Valley Hospital strives to fulfill its mission to improve the health and wellbeing of the people and communities it serves through ongoing efforts and partnerships. Nearly constant assessment and evaluation of the efficacy of programs as well as nonprofits also serving these needs allow West Valley Hospital to engage new community partners, increase levels of awareness, and improve upon effective strategies of health and community strength going forward.