



LEGACY
HEALTH

Legacy Emanuel Hospital & Health Center

DBA

Legacy Emanuel Medical Center

Community Health Improvement Plan

FY24–FY26

(April 1, 2023–March 31, 2026)

Mission

Our legacy is good health for our people, our patients, our communities and our world. Above all, we do the right thing.

Vision

To be essential to the health of the region.

Values

*Respect • Service • Quality • Excellence
Responsibility • Innovation • Leadership*



CONTENTS

Executive Summary	4
About Legacy Health	5
Purpose of this Plan	6
CHIP Frameworks	7
Social Determinants of Health	7
Health Equity	7
Health Disparities	7
Identification of CHIP Priority Areas	9
Summary of CHIP Planning Process	10
Implementation Plan – Goals, Objectives, and Strategies	11
Table 1.	11
Legacy Health Implementation Plan for the <i>Access to Culturally and Linguistically Responsive Health Care</i> Priority Area within the Quad-County Region, FY24–FY26	
Table 2.	12
Legacy Health Implementation Plan for the <i>Essential Community Services and Resources</i> Priority Area within the Quad-County Region, FY24–FY26	
Table 3.	14
Legacy Health Implementation Plan for the <i>A Neighborhood for All</i> Priority Area within the Quad-County Region, FY24–FY26	
Evaluation Plan	14
Legacy Health Commitment	14
References	15

Legacy Emanuel Medical Center

Community Health Improvement Plan

Executive Summary

The Legacy Health vision is to be essential to the health of the region. Legacy remains committed to this vision and our mission and fulfills its commitment to the community through partnerships and community investments. Legacy Health participates in the development of the regional quad-county (Clark County in Washington and Clackamas, Multnomah and Washington counties in Oregon) community health needs assessments (CHNAs) and then develops and implements community health improvement plans (CHIPs) for the Legacy hospitals and clinics within the quad-county region.

The Fiscal Year (FY)24–FY26 Legacy Emanuel Medical Center CHIP is the strategic implementation plan for the Legacy Emanuel FY24–FY26 CHNA.¹ The CHNA was based upon the 2022 Healthy Columbia Willamette Collaborative (HCWC) CHNA,² which represents the health and social conditions and priority issues of community members within the quad-county region.

The Legacy Community Benefit department and Community Benefit Advisory Committee implemented a prioritization process to determine which of the thirteen original priority issues within the four priority areas of the 2022 HCWC CHNA would be the focus of Legacy Emanuel’s community health improvement activities during FY24–FY26. Six issues within three areas were chosen: access to affordable health care, culturally and linguistically responsive health care, economic opportunity, educational opportunity, culturally specific and healthy foods and physical safety in the community.¹

The Legacy Emanuel Medical Center FY24–FY26 CHIP responds to the areas and issues selected for action in the Legacy Emanuel FY24–FY26 CHNA.¹ Guided by Legacy’s mission of good health for our communities, this CHIP will direct Legacy Health and Emanuel’s community-focused efforts and investments to address the priority areas and issues over the three-year period.

Each priority area has a set of targeted goals, objectives and strategies that will be continuously assessed and revised as needed to reflect changing community needs and available resources. Legacy Health believes that multi-year, sustainable partnerships with the community have strong potential to affect long-term health status. Therefore, the Legacy Emanuel FY24–FY26 CHIP implementation plan includes both effective community-engaged strategies used in prior CHIPs as well as new

strategies. This plan is not intended to be an exhaustive list of all Legacy Health efforts to address community needs but rather an overview of the work to be done to specifically impact our current prioritized areas and issues.

Finally, the Legacy Emanuel FY24–FY26 CHNA and CHIP are produced in accordance with the Patient Protection and Affordable Care Act (ACA), IRS Section 501(r)(3), which requires tax-exempt hospital organizations to conduct a CHNA and adopt an implementation plan every three years.³ In compliance with IRS requirements, the CHNA and CHIP are approved by the Legacy Health Board of Directors and made available to the public.

About Legacy Health

Legacy Health is a nonprofit health system that offers a unique blend of health services across the quad-county region and the mid-Willamette Valley. From wellness and urgent care to dedicated children’s services and advanced medical centers, Legacy cares for patients of all ages when and where they need us. To create and maintain healthier communities, our partnerships tackle vital issues such as food insecurity and access to health-related services.

Legacy strives to help everyone live healthier and better lives, with the vision of being essential to the health of the region. The Legacy Health system currently includes:

- Six hospitals; Dedicated children’s care at Randall Children’s Hospital within Legacy Emanuel Medical Center
- More than 70 primary care, urgent care and specialty clinics
- Approximately 14,000 employees
- Nearly 3,000 doctors and other advanced providers
- Laboratory, research and hospice services
- Partnership with PacificSource health plan⁴

Legacy Emanuel Medical Center

Legacy Emanuel Medical Center, founded in 1912, is a local and regional leader in serious clinical illness and injury care. It is one of only two Level 1 trauma centers in Oregon and home to the only burn center between Sacramento and Seattle. As a 554-bed facility, Legacy Emanuel offers a full range of services, including around-the-clock expertise for critical health issues and specialists in trauma, brain surgery, heart care, stroke, significant wounds, burns and more.⁴

Randall Children’s Hospital at Legacy Emanuel is a regional center for the dedicated care of infants, children and teens.⁴ Unity Center for Behavioral Health, a collaboration

between Legacy Health, Adventist Health, Kaiser Permanente and Oregon Health & Science University that provides emergency and inpatient behavioral health services, is licensed under Legacy Emanuel Medical Center.⁵ In addition, Legacy Emanuel serves as the employer and donates the infrastructure for Child Abuse Response and Evaluation Services (CARES NW).⁶

Service area

Legacy Emanuel Medical Center is located in one of the oldest neighborhoods in Portland, Oregon — inner North Portland — slightly north of downtown and on the east side of the Willamette River. Legacy Health hospitals define their service areas by geographic location and where their patients live. Multnomah County, Oregon, is the primary service area for the Emanuel Medical Center. The surrounding Oregon counties, Clackamas and Washington, and Clark County in Washington are served by Legacy and other health systems but are secondary catchment areas for Legacy Emanuel Medical Center. Sociodemographic and health-related data for the service counties can be found in the 2022 HCWC CHNA.²

Purpose of this Community Health Improvement Plan

The Healthy Columbia Willamette Collaborative (HCWC) was founded in 2010 to leverage collective resources and facilitate collaboration to conduct community health needs assessments and develop and implement improvement plans to enhance the health and well-being of communities in the quad-county region. The partnership currently consists of six hospital systems, including Legacy Health, four county health departments, and two coordinated care organizations.⁷

The HCWC completed its fourth regional assessment in 2022. The planning and implementation of the 2022 HCWC CHNA were led by a Community Action Team (CAT)² (pp. 4, 67) comprised of community leaders who represented the diverse populations in the quad-county region. To complete the CHNA, the CAT partnered with the Oregon Health Equity Alliance, members of the HCWC, and Health Management Associates, the agency that facilitated the CHNA process. Funding for the project was provided by the HCWC member organizations.²

In early 2023, the Legacy Emanuel Medical Center completed its FY24–FY26 CHNA,¹ which is based on the findings of the 2022 HCWC CHNA.² This CHIP responds to the community-identified priority areas and issues described in the 2022 HCWC CHNA² and those selected for action in the Legacy Emanuel FY24–FY26 CHNA.¹ Guided by Legacy Health’s mission of good health for our communities, the FY24–FY26 Legacy Emanuel CHIP will direct our community-focused investments and efforts to address these prioritized areas and issues during the three-year CHIP period.

CHIP Frameworks⁸

Health Equity and the Social Determinants of Health

The Legacy Emanuel Medical Center FY24–FY26 CHIP is informed by both health equity and social determinants of health frameworks.

Social Determinants of Health

The state of Oregon defines social determinants of health as “...*the social, economic, and environmental conditions in which people are born, grow, work, live, and age...*” These conditions have a profound impact on the quality and length of life, contribute to health inequities and are influenced by the social determinants of equity - the systemic and structural factors that affect the distribution of social determinants of health and health equity in communities.⁹

Health Equity

Achieving health equity “...*means that everyone has a fair and just opportunity to be as healthy as possible.*”^{10 (p. 2)} Reaching this state requires persistent action to:

- Remove barriers to health, such as poverty, discrimination and their consequences, which include powerlessness and lack of access to housing, safe environments and health care, among others;
- Address historical and contemporary injustices through policy and systems change; and
- Reduce and eliminate preventable health disparities.^{10,11}

Health Disparities

Health disparities are “...*preventable differences in the burden of disease, injury, violence, or opportunities to achieve optimal health that are experienced by populations that have been disadvantaged by their social or economic status, geographic location, and/or environment.*”¹¹

There are many ways to intervene against factors leading to health disparities. These actions vary by target population and system. In health care, some strategies that have led to reductions in disparities include increasing the socioeconomic, racial and ethnic diversity of service providers; teaching and practicing cultural humility; supporting community-oriented primary care; and integrating equity considerations into health system funding.¹² The observation of changes in measures of health disparities resulting from these or other interventions will allow us to assess our progress toward achieving health equity.^{10, 11}

Significant health inequities and health disparities persist within our service community, despite ongoing, evidence-based and collaborative efforts to address the structural and social determinants of these differences.^{2,9} According to the Centers for Disease Control and Prevention, "... communities can prevent health disparities when community- and faith-based organizations, policymakers, employers, healthcare systems and providers, and public health agencies work together to develop policies, programs, and systems based on a health equity framework and community needs."¹¹

Through our CHNA and CHIP planning and implementation activities, Legacy Health, in collaboration with our community, agency and health system partners, is committed to reducing health disparities and working toward the achievement of social and health equity for all members of our community.

The figure below provides a visual representation of the relationships between social and societal determinants and their impact on equity and health.

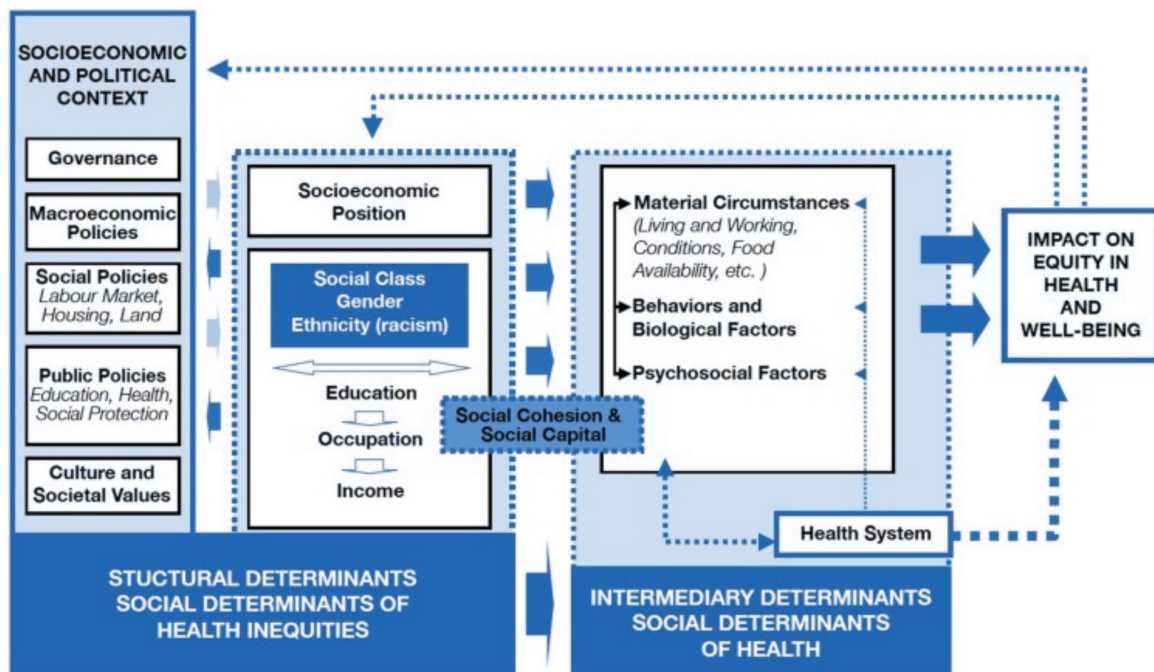


Figure 1: World Health Organization Framework for Social Determinants of Health¹³

Identification of CHIP Priority Areas

The HCWC 2022 CHNA identified four priority areas containing 13 priority issues affecting the local communities in the quad-county region. These issues all disproportionately affect low-income populations, communities of color and other disenfranchised groups; severely impact the well-being of the local communities²; and have known feasible and effective solutions.¹⁴

To determine which of the HCWC 2022 CHNA² community-identified priority areas and issues would be the focus of the Legacy Emanuel FY24–FY26 CHIP, the Legacy Health Community Benefit CHIP planning team (Community Benefit department and Community Benefit Advisory Committee members) considered the current knowledge, skills and resources available within Legacy Health to impact the thirteen priority issues and whether prevention-focused solutions to these issues are available. Consequently, the priority areas and issues that were selected to be addressed in the Legacy Emanuel FY24–FY26 CHIP include:

Legacy Health FY24–FY26 CHIP and CHNA Priority Areas and Issues	
Priority area 1	Access to Culturally and Linguistically Responsive Health Care
Priority issues	Access to Affordable Health Care Culturally and Linguistically Responsive Health Care
Priority area 2	Essential Community Services and Resources
Priority issues	Economic Opportunity Educational Opportunity Culturally Specific and Healthy Foods
Priority area 3	A Neighborhood for All
Priority issue	Physical Safety in the Community

Health needs identified but not addressed

No single health care system, health agency or community-based organization can remedy all the health and social issues present in our communities. The six issues within three areas that were prioritized by Legacy Emanuel Medical Center are those we have the capacity to impact during the FY24–FY26 CHIP period.

The remaining seven priority issues within the four priority areas identified during the 2022 quad-county HCWC CHNA (*trauma-informed care; delayed or avoided health care; transportation; virtual resources; safe, affordable housing; cultural displacement due to gentrification; and social connection*)² ideally will be addressed by other local health systems, agencies and community-based organizations. Legacy Health is committed to engaging with our community partners to address these outstanding issues, when possible.

Summary of the CHIP Planning Process

A comprehensive approach was used to develop this Legacy Emanuel FY24–FY26 CHIP and included the following steps:

1. Reviewed our previous CHIPs and those from other organizations.
2. Compiled best community health planning practices and options (e.g., goals, objectives and strategies) and assessed their potential for use within our CHIP.
3. Engaged the Legacy Health Community Benefit planning team (Community Benefit Department and Community Benefit Advisory Committee) in the development of goal statements for each of the six priority issues within the three priority areas that were chosen for this CHIP.
4. Adopted four goal statements after evaluation and discussion of options.
5. Community Benefit drafted a set of S.M.A.R.T. (Specific, Measurable, Action-Oriented, Realistic/Relevant, and Time-Bound) objective options for each of the four goal statements.
6. The planning team reviewed the objective statement options.
7. Selected nine objective statements after evaluation and discussion of the options.
8. Community Benefit drafted a set of strategies that could be used to meet the nine chosen objectives for the four goal statements within the CHIP implementation plan.
9. Input was sought from our Community Benefit Advisory Committee and other individuals with subject-matter expertise on the proposed strategies to meet the nine objective statements.
10. The final CHIP implementation plan (goals, objectives and strategies) was modified based upon oral and written feedback received from the above consultations.

Implementation Plan — Goals, Objectives, Strategies

The following tables display the current goals, objectives and proposed strategy options for each of the six priority issues within the three priority areas of the Legacy Emanuel FY24–FY26 CHIP. The components of our improvement plan align with those used by partner organizations serving the communities in Clark County in Washington and Clackamas, Multnomah and Washington counties in Oregon and are drawn from evidence-based sources.^{14,15}

TABLE 1 Legacy Health Implementation Plan for the *Access to Culturally and Linguistically Responsive Health Care* priority area within the quad-county region, FY24–FY26

Goal	Community members have equitable access to culturally sensitive, affordable, equitable, trauma-informed and comprehensive health care.
OBJECTIVES	POSSIBLE STRATEGIES
Priority issue — Access to Affordable Health Care	
<p>Objective 1.1</p> <p>By the end of FY26 (March 31, 2026), increase access to health care services for community members who are low-income and/or underinsured or uninsured.</p>	<p>1.1.1 Partner with Project Access Now to increase access to services, health coverage and continuity of care.</p> <p>1.1.2 Partner with local health systems through the Health Systems Access to Care Fund to provide funding and technical assistance to community health clinics to assist with infrastructure and care delivery needs.</p> <p>1.1.3 Support community-based organizations, coalitions and community health clinics to meet the health and social needs of community members.</p> <p>1.1.4 Improve access to behavioral health services through funded partnerships and direct service provision.</p> <p>1.1.5 Assist eligible patients with enrollment in Medicaid and other programs to obtain health insurance coverage.</p> <p>1.1.6 Assess the feasibility of providing health services via telephone or videoconference (telehealth) for all patients, regardless of insurance or financial status.</p> <p>1.1.7 Advocate for policy-related solutions to improve access to affordable health-related services.</p>

continues

TABLE 1 Legacy Health Implementation Plan for the Access to Culturally and Linguistically Responsive Health Care priority area within the quad-county region, FY24–FY26	
Goal	Community members have equitable access to culturally sensitive, affordable, equitable, trauma-informed and comprehensive health care.
OBJECTIVES	POSSIBLE STRATEGIES
Priority issue — Culturally and Linguistically Responsive Health Care	
<p>Objective 1.2 Increase the sustainability and integration of traditional health workers (THW) in clinical and community-based settings by the end of FY26 (March 31, 2026).</p>	<p>1.2.1 Support community-based and Legacy Health efforts to improve workforce utilization of traditional health workers (THW).</p>
<p>Objective 1.3 Expand the provision of culturally and linguistically responsive health care services by the end of FY26 (March 31, 2026).</p>	<p>1.3.1 Support community-based efforts to provide culturally and linguistically responsive, trauma-informed, multi-tiered health services and supports to children, adults and families.</p> <p>1.3.2 Provide practitioners, administrators and other employees with education and training on culturally and linguistically responsive health care and related topics (e.g., cultural humility, diversity, equity, inclusivity, implicit bias, etc.).</p>

TABLE 2 Legacy Health Implementation Plan for the Essential Community Services and Resources priority area within the quad-county region, FY24–FY26	
Goal 2.1	Increase opportunities and capacity for education and workforce development programs that support individuals to earn a living wage.
OBJECTIVES	POSSIBLE STRATEGIES
Priority issue — Economic Opportunity	
<p>Objective 2.1.1 Increase access to workforce development opportunities for community members from underrepresented population groups by the end of FY26 (March 31, 2026).</p>	<p>2.1.1.1 Support and invest in community-based workforce readiness and training programs serving communities of color and groups that have been economically and/or socially marginalized.</p>

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TABLE 2 Legacy Health Implementation Plan for the *Essential Community Services and Resources* priority area within the quad-county region, FY24–FY26

Goal 2.1	Increase opportunities and capacity for education and workforce development programs that support individuals to earn a living wage.
OBJECTIVES	POSSIBLE STRATEGIES
Priority issue — Educational Opportunity	
<p>Objective 2.1.2</p> <p>Increase access to educational opportunities for community members from underrepresented population groups by the end of FY26 (March 31, 2026).</p>	<p>2.1.2.1 Provide scholarships and internships to students from communities that have been economically and/or socially marginalized to pursue higher education in the health care field.</p>
Goal 2.2	Address social, economic and structural conditions to increase community member access to nutrition education and support and to affordable, healthy and culturally relevant food in their neighborhoods.
Priority issue — Culturally Specific and Healthy Foods: Access to Nutrition Education and Support	
<p>Objective 2.2.1</p> <p>Increase access to nutrition education and support by the end of FY26 (March 31, 2026) for community members affected by or at-risk of food insecurity.</p>	<p>2.2.1.1 Support food banks, food pantries, meal programs and other activities to promote healthy eating and access for community members affected by or at-risk of food insecurity.</p>
Priority issue — Culturally Specific and Healthy Foods: Access to Food	
<p>Objective 2.2.2</p> <p>Increase service coordination between community clinics, community-based organizations and health care systems to meet the food-related health and social needs of community members by the end of FY26 (March 31, 2026).</p>	<p>2.2.2.1 Support community-based and Legacy Health efforts to increase the use of traditional health workers (THW) in the coordination of health and social services related to food.</p> <p>2.2.2.2 Expand use of the Unite Us/Connect Oregon platform throughout the Legacy Health system to connect patients to community-based food and social resources.</p>
<p>Objective 2.2.3</p> <p>By the end of FY26 (March 31, 2026), increase access to affordable, culturally appropriate, healthy and dietary-specific foods for community members affected by or at-risk of food insecurity.</p>	<p>2.2.3.1 Support community food access programs and services.</p> <p>2.2.3.2 Support urban agriculture/urban farming activities in the community.</p> <p>2.2.3.3 Advocate for policy-related solutions for community food insecurity.</p>

TABLE 3 Legacy Health Implementation Plan for the A Neighborhood for All priority area within the quad-county region, FY24–FY26

Goal 3	Increase the sense of connection, security, belonging and trust people have in their community.
OBJECTIVES	POSSIBLE STRATEGIES
Priority issue — Physical Safety in the Community	
Objective 3.1 Increase the number of opportunities for community-based social connections, especially for priority populations, by the end of FY26 (March 31, 2026).	3.1.1 Actively collaborate with community-engaged, multisector partnerships to address the root factors associated with community safety. 3.1.2 Provide safe, accessible and high-quality community gathering places (e.g., conference spaces, meeting rooms, green spaces, etc.). 3.1.3 Expand programs and/or events that increase social connections for priority populations.

Evaluation Plan

The Legacy Health Community Benefit Department will monitor and evaluate the implementation of strategies and the achievement of CHIP objectives. The reporting process includes the collection, analysis, interpretation and documentation of process and outcome indicator data from internal and external sources. We acknowledge that the current strategies and indicators may change over time in response to variations in system resources and community status.

Legacy Health Commitment

The priority issues identified in this improvement plan will be addressed through the provision of health services, personnel time and technical assistance, strategic community partnerships, operational funds and Community Benefit Community Health grant awards.

For questions or more information

If you have any questions or wish to obtain a copy of this improvement plan, please email us at CommunityBenefit@LHS.org or visit www.legacyhealth.org/Giving-and-Support/community-engagement/CHNAs.

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