![Sutter Health logo]

SUTTER SANTA ROSA REGIONAL HOSPITAL

2025 – 2027 Implementation Strategy Responding to the 2025 Community Health Needs Assessment

Approved by the Sutter Bay Hospitals Board of Directors
October 17, 2025

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General Information

Date written plan was adopted by authorized governing body	October 17, 2025
Date written plan was required to be adopted	May 15, 2026
Authorized governing body that adopted the written plan	Sutter Bay Hospitals Board
Was the written plan adopted by the authorized governing body on or before the 15th day of the fifth month after the end of the taxable year the CHNA was completed?	Yes ☒ No ☐
Date facility's prior written plan was adopted by organization's governing body	October 19, 2022

Summary: 2025 Implementation Strategy

The Implementation Strategy (IS) describes how Sutter Santa Rosa Regional Hospital (SSRRH), a Sutter Health system not-for-profit hospital, plans to address significant health needs identified in the 2025 Community Health Needs Assessment (CHNA) in calendar (tax) years 2025 through 2027.

The 2025 CHNA and the 2025 - 2027 IS were undertaken by the hospital to understand and address community health needs, in accordance with state law and the Internal Revenue Service (IRS) regulations pursuant to the Patient Protection and Affordable Care Act of 2010.

The hospital reserves the right to amend this IS as circumstances warrant. As outlined in this document, SSRRH has identified the following significant health needs to be addressed in 2025-2027:
1. Access to Care
2. Income and Employment
3. Mental and behavioral health including substance use

SSRRH welcomes comments from the public on the 2025 CHNA and 2025 - 2027 IS. Written comments can be submitted:

- By emailing the Sutter Health System Office Community Benefit department at *SHCB@sutterhealth.org;*
- Through the mail using the hospital's address at 30 Mark West Springs Road, Santa Rosa, CA 95403; and
- In-person at the hospital's Information Desk.

Sutter Health's CHNA reports and IS plans are publicly available online at *http://sutterhealth.org/about-us/community-benefit/community-health-needs-assessment.* In addition, the IS will be filed with the Internal Revenue Service using Form 990, Schedule H.

Introduction/Background

About Sutter Health

SSRRH is affiliated with Sutter Health, a not-for-profit healthcare system dedicated to providing comprehensive, high-quality care throughout California. Committed to innovative, high-quality patient care and community partnerships, Sutter Health is pursuing a bold new plan to reach more people and make excellent healthcare more connected and accessible. . Currently serving 3.5 million patients, thanks to our dedicated team of approximately 60,000 employees and clinicians, and 14,000+ affiliated physicians and advanced practice clinicians, with a unified focus on expanding care to serve more patients.

Sutter Health delivers exceptional and affordable care through its network of hospitals, medical groups, ambulatory surgery centers, urgent care clinics, telehealth, home health, and hospice services. Dedicated to transforming healthcare, at Sutter Health, getting better never stops. Learn more about how Sutter Health is transforming healthcare at *sutterhealth.org* and *vitals.sutterhealth.org*.

Community Benefit

As part of Sutter Health's commitment to fulfill its not-for-profit mission and to help serve some of the most vulnerable in its communities, Sutter invests annually in community benefit programs that help improve the overall health and wellbeing of the regions Sutter serves. Sutter's investments in community benefit programs and services increased to more than $1 billion in 2024. This investment includes $96 million in traditional charity care, which covers medically necessary care to eligible patients, regardless of their ability to pay; $665 million in unreimbursed costs of providing care to Medi-Cal patients; and investments in community health programs to address identified community health needs. In 2024, Sutter sharpened its focus to address pressing community needs in three main priority areas: access to care, including chronic disease prevention and management; mental health and substance use treatment; and workforce development. See more about how Sutter Health reinvests into the community and works to advance healthy outcomes for all by visiting *sutterhealth.org/community-benefit*.

2025 Community Health Needs Assessment Approach

The CHNA was conducted by Harder+Company Community Research (www.harderco.com).

Assessment Process and Methods

The data frame for the CHNA included data from the Kaiser Permanente CHNA Data Platform (*https://public.tableau.com/app/profile/kp.chna.data.platform/viz/2025CommunityHealthNeedsDashboard/1a_StartHere*), which includes a core set of 85 indicators from publicly available data sources, as well as additional secondary data from local reports and other online sources. The research team also conducted primary data collection with a diverse group of community members. A total of 17 unique individuals participated in one-on-one or group interviews, and 11 participants participated in one of three focus groups. Those who participated included representatives from local health departments, community-based organizations, and other local government agencies, as well as clients of local service providers, and individuals representing people who are medically underserved, low income, or who face unique barriers to health.

The social determinants of health were used to identify and organize secondary (quantitative) data. Datasets included measures to describe mortality and morbidity and social and economic factors such as income, educational attainment, and employment. Furthermore, the measures included indicators to describe health behaviors, clinical care (both quality and access), and the physical environment. When data were available, indicators were examined by race and ethnicity at the subcounty level to document health and social inequities.

Process and Criteria to Identify and Prioritize Significant Health Needs
Measures from Kaiser's CHNA data platform were clustered into 15 potential health needs. Primary and secondary data for each health need were scored and assigned a weight. Weighted values for each need were summed, converted to a percentile score for easy comparison, and then ranked to determine the four significant health needs.

Community Served

Sutter Santa Rosa Regional Hospital is located at 30 Mark West Springs Road, Santa Rosa, CA 95403. For the purposes of this CHNA, the primary service area consists of the 36 ZIP Codes which make up Sonoma County (Figure 1). Located in Northern California, Sonoma County includes three distinct regions with 30 towns and cities, each with its own unique landscape. The Valleys and Vineyards region is known for its lush countryside and is home to 18 wine regions. The Redwoods and Rivers region includes wineries as well as redwood reserves. The western edge of Sonoma County runs 55 miles along the Pacific Ocean and makes up the Coastal region of the county.

Figure 1: Community Served by SSRRH.

Selected population characteristics for SSRRH's service area are found in Table 1, below.

Population Characteristics: Sonoma County	
Total Population	481,812
% Non-White or Hispanic	42.7
Median Age (yrs.)	43.3
Median Income	$100,707
% Poverty	8.9
% Unemployed	4.0
% Uninsured	4.1
% Without High School Degree	11.9
% With High Housing Costs	42.1
% With Disability	12.4
Race/ethnicity	
% White	57.3
% Hispanic or Latinx	30.3
% Two or more races	5.2
% Asian	4.3
% Black or African American	1.6
% Some other race	0.8
% Native Hawaiian or Pacific Islander	0.3
% American Indian or Alaska Native	0.2

Source: U.S. Census Bureau, American Community Survey, 2023 5-Year Estimates

Significant Health Needs Identified in the 2025 CHNA

Primary and secondary data were analyzed to identify and prioritize the significant health needs in the service area. The following significant health needs were identified in the 2025 CHNA:

1. Access to care
2. Housing and homelessness
3. Income and employment
4. Mental and behavioral health including substance use

Sutter Health's Approach to Implementation Strategies

We are passionate about giving back to the communities that trust us with their health. As a not-for-profit health system, we improve health outcomes beyond the walls of our hospitals and care facilities through community benefit investments and collaborative partnerships. Community-based services, mobile clinics, transportation services, and prevention and wellness programs are among the ways Sutter Health seeks to put its mission into action. Our commitment to healthier lives begins with building stronger communities.

When creating our IS, we focus on innovative and effective strategies, collaborative partnerships and sustainable solutions to address the most pressing community health issues. Using the CHNA as our guide, we tailor our approach in each community to consider the unique needs of those living in the hospital service area. In addition to the CHNA, we also consider:

- Key stakeholder input from community leaders and service providers.
- Data analysis showing gaps in care for Medi-Cal and uninsured individuals.
- Where we can lend our health care expertise to provide valuable tools, perspective or services.
- Existing community capacity to determine where more resources are needed and avoid duplication of efforts.

We have streamlined our IS approach across the Sutter Health system to be more effective in meeting community needs and share best practices across regions. We have identified these three areas as our overarching community health goals:

- **Access to Care, including Chronic Disease Prevention and Management** – increase capacity and reduce barriers for vulnerable patients accessing primary and specialty care, and implement programs to prevent and manage chronic diseases.
- **Mental Health and Substance Use Treatment** – improve access to and quality of mental health and substance use disorder services in clinics, schools, or community-based settings.
- **Workforce Development** – invest in the future generation of healthcare workers to improve the workforce pipeline and access to care.

Health Needs SSRRH Plans to Address

The health needs the hospital will address in 2025-2027 are:

1. **Access to Care**- Access to holistic, quality health care services – including having low-cost insurance and culturally responsive care options – is important for promoting a high quality of life for everyone. While Sonoma County appears healthy overall, the high concentration of wealthy and healthy individuals masks the high need that exists for historically marginalized communities. Racial health disparities are more severe in Sonoma County compared to the state average.[1] Sonoma County residents face several challenges in accessing the most appropriate care to meet their needs. Barriers include high costs, mistrust in the healthcare system, cultural stigma surrounding seeking care, long wait times, and opportunities for more specialized providers who are culturally or linguistically competent. According to interview respondents, Sonoma County is facing a shortage of healthcare providers, and more providers who are multilingual and culturally diverse are needed. Extended waitlists further worsen the challenges in accessing care. Additionally, insurance coverage rates differ by race and ethnicity, with Native Hawaiian/Pacific Islander and Hispanic/Latinx communities experiencing the highest levels of uninsurance compared to other racial and ethnic groups.[2]

2. **Income and Employment-** Economic security is a key component of health and wellbeing, as the economic opportunity afforded by steady employment promotes a sense of purpose and provides opportunities to improve one's economic circumstances over time. Sonoma County faces unique challenges due to the coexistence of extreme wealth and poverty. Data reveal disparities across race and ethnicity, where historically marginalized communities face the greatest burdens related to income and employment.[3] The high cost of living in Sonoma County has detrimental effects on community members who make lower incomes, many of whom are providing services the community needs, such as health care providers, home health aides, teachers, child care providers, agricultural workers, and food service workers. Some interview respondents highlighted the difficult situations and increasing needs that agricultural workers in Sonoma County often face. For example, during days with poor air quality, agricultural workers are often seen outside without OSHA required safety equipment (i.e., N95 respirators), which increases their risk for and prevalence of asthma and heart disease.

3. **Mental and behavioral health including substance use**- Behavioral health is the foundation for healthy living, and encompasses mental illness, substance use and overdoses, and access to service providers for preventive care and treatment. Across many standard measures of mental and behavioral health, Sonoma County is doing better than state and national averages, yet many residents experience mental and behavioral health challenges. Interview respondents report observing poorer mental health than in previous years, exacerbated by higher levels of loneliness and isolation stemming from the COVID-19 pandemic. Additionally, there are disparities in access to mental/behavioral health services due to stigma, expense, and opportunities for more culturally and linguistically responsive providers. Community leaders share some communities hold or experience stigma related to needing or receiving mental health services. They also express there is a need for more culturally and linguistically responsive mental health providers who are equipped to serve LGBTQ+, Asian, and migrant communities, as well as more pathways into these careers.

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[1] RACE COUNTS, racecounts.org/county/Sonoma
[2] American Community Survey Table S2701 2023 1-yr estimates, data.census.gov
[3] RACE COUNTS, racecounts.org/county/Sonoma

SSRRH Implementation Strategies

To ensure we are meeting the needs outlined in our CHNA, each hospital's IS aligns with the prioritized health needs of the hospital's service area while also supporting our organization's strategic approach.

This IS describes how SSRRH plans to address significant health needs identified in the 2025 CHNA and is aligned with the hospital's charitable mission. The strategy describes:

- Actions the hospital intends to take, including programs and resources it plans to commit,
- Anticipated impacts of these actions and a plan to evaluate impact, and
- Any planned collaboration between the hospital and other organizations in the community to address the significant health needs identified in the 2025 CHNA.

Below is an outline of the priority health needs SSRRH plans to address in 2025, as well as the goals and strategies we will implement to achieve the listed outcomes.

Priority Health Need	Goal	Strategies	Anticipated Outcomes
Access to Care	Improve access to healthcare and chronic disease prevention and management by investing in integrated, person-centered systems of care and partnerships across clinical, community, and educational settings.	Invest in safe and supportive short-term residential care to help community members experiencing housing insecurity heal from an illness or injury and transition to stable housing.	Program participants experience access to healthcare, housing and other community-based services that support health and address basic needs.
		Expand the capacity of community clinics to provide high quality primary healthcare services by investing in capital campaigns and programmatic support.	Community clinics make annual progress toward and/or complete capital projects and patients access primary care and other health services.
Income and Employment	Cultivate a talent pipeline, enhance workforce readiness, and support the broader community.	Prepare high school students for meaningful employment within the healthcare industry and other fields, through career pathways, mentorship, and social-emotional and academic supports.	High school students in the program gain access to education/job training programs for the skills, mentorship, and social-emotional support necessary to secure meaningful employment in healthcare and other fields.
		Invest in a skilled clinical and non-clinical healthcare workforce by supporting post-secondary allied health programs and students through tailored learning experiences, mentorship, tutoring, and other support services.	Program participants will have access to post-secondary allied health programs that provide education or job training and services to support housing and other basic needs.

Priority Health Need	Goal	Strategies	Anticipated Outcomes
		Increase employment readiness by investing in programs that foster personal, professional, and leadership development.	Program participants have access to education, job training programs and employment opportunities, and successfully complete these offerings
Mental and Behavioral Health Including Substance Use	Cultivate community mental health by expanding access to inclusive, trauma-informed prevention, intervention, crisis and substance use disorder services through innovative, culturally responsive delivery systems.	Invest in trauma-informed mental health crisis response and navigation services that provide rapid access to stabilization, care coordination, and culturally competent support to reduce harm, avoid unnecessary hospitalization, and promote access to ongoing behavioral health care for all.	Community members will have access to behavioral health crisis services and other mental health support services.
		Invest in a coordinated network of culturally responsive, trauma-informed, and community-based mental health and/or substance use prevention and intervention strategies—spanning prevention, crisis care and post-stabilization, housing and vocational support, integrated healthcare models, and workforce development—to optimize access, strengthen service capacity, and improve behavioral health outcomes for underserved, uninsured, and high-risk populations across all age groups.	Community members will have access to services addressing behavioral health, primary care and basic needs.
		Invest in mental health interventions for youth to address emotional and psychological challenges early, optimize access for underserved populations, and support the development of coping skills, resilience, and long-term mental wellbeing.	Youth will have access to services addressing behavioral health, primary care and basic needs.

Sutter Health regularly monitors the impact and effectiveness of our community health strategies to ensure programs meet the needs of the communities we serve. We require all community partners who receive funding to report measurable outcomes demonstrating the impact of their

programs. These reports help track program success, so that we may shift our strategies to more effectively meet the needs in the CHNA if needed.

Health Needs SSRRH Does Not Plan to Address

No hospital can address all the health needs present in its community. This IS does not include specific plans to address the following significant health needs that were identified in the 2025 Community Health Needs Assessment:

1. Housing and homelessness

SSRRH is committed to serving the community by adhering to its mission, using its skills and capabilities, and remaining a strong community partner so that it can continue to give back to the areas we serve. Therefore, we will not be addressing the health needs listed above for the following reasons:

- With limited resources available, we are prioritizing the needs we are positioned to most effectively address.
- There are already capable organizations working to address the other health needs.
- We are providing resources to the areas most aligned with our skillset and capabilities.
- There is not sufficient time for us to impact meaningful change for all identified health needs.