

USC Verdugo Hills Hospital

Implementation Strategy

FY 2026-2028



USC Verdugo Hills Hospital

Keck Medicine of **USC**

USC Verdugo Hills Hospital CHNA Implementation Strategy

This Implementation Strategy describes how USC Verdugo Hills Hospital (USC VHH or the hospital) plans to address significant needs described in the Community Health Needs Assessment (CHNA) published by the hospital on June 30, 2025. See the CHNA report at <https://uscVHH.org/giving/community-outreach>. USC Verdugo Hills Hospital plans to implement the initiatives described during fiscal years 2026 through 2028.

Conducting the CHNA and developing this Implementation Strategy were undertaken by the hospital to assess and address significant health needs in the community served by USC VHH, and in accordance with Internal Revenue Service regulations in Section 501(r) of the Internal Revenue Code.

This Implementation Strategy addresses the significant community health needs described in the CHNA report. This document identifies the significant needs the hospital plans to address through various strategic initiatives and explains why the hospital does not intend to address certain other significant needs identified in the CHNA report.

This document contains the following information:

1. About USC VHH
2. Definition of the Community Assessed by USC VHH
3. Summary of Significant Community Health Needs
4. Implementation Strategy to Address Significant Health Needs
5. Significant Community Health Needs USC VHH Will Not Address
6. Adoption of the Implementation Strategy by USC VHH's Authorized Body

1. About USC VHH

USC Verdugo Hills Hospital is a private, nonprofit, community hospital that has been serving the cities of Glendale and La Cañada Flintridge, and the surrounding foothill communities of Southern California, for more than 40 years. The hospital's services include a 24-hour emergency room, a primary stroke center, bariatric and minimally invasive surgery, orthopaedic surgery, occupational, physical and speech therapy, cardiac rehabilitation and imaging and diagnostic services. The USC VHH team also includes patient navigators who offer guidance and education, and coordinate care to ensure patients are well informed and prepared every step of the way.

The hospital is part of Keck Medicine of USC (the University of Southern California's clinical enterprise) and is one of two university-based medical systems in the Los Angeles area. Keck Medicine combines academic excellence, world-class research, and state-of-the-art facilities to provide highly specialized care for some of the most acute patients in the country. USC's internationally renowned physicians and scientists provide world-class patient care at Keck Hospital of USC, USC Norris Cancer Hospital, USC Verdugo Hills Hospital, USC Arcadia Hospital,

and more than 100 clinics located in Los Angeles, Orange, Kern, Tulare, and Ventura counties.

2. Definition of the Community Assessed by USC VHH

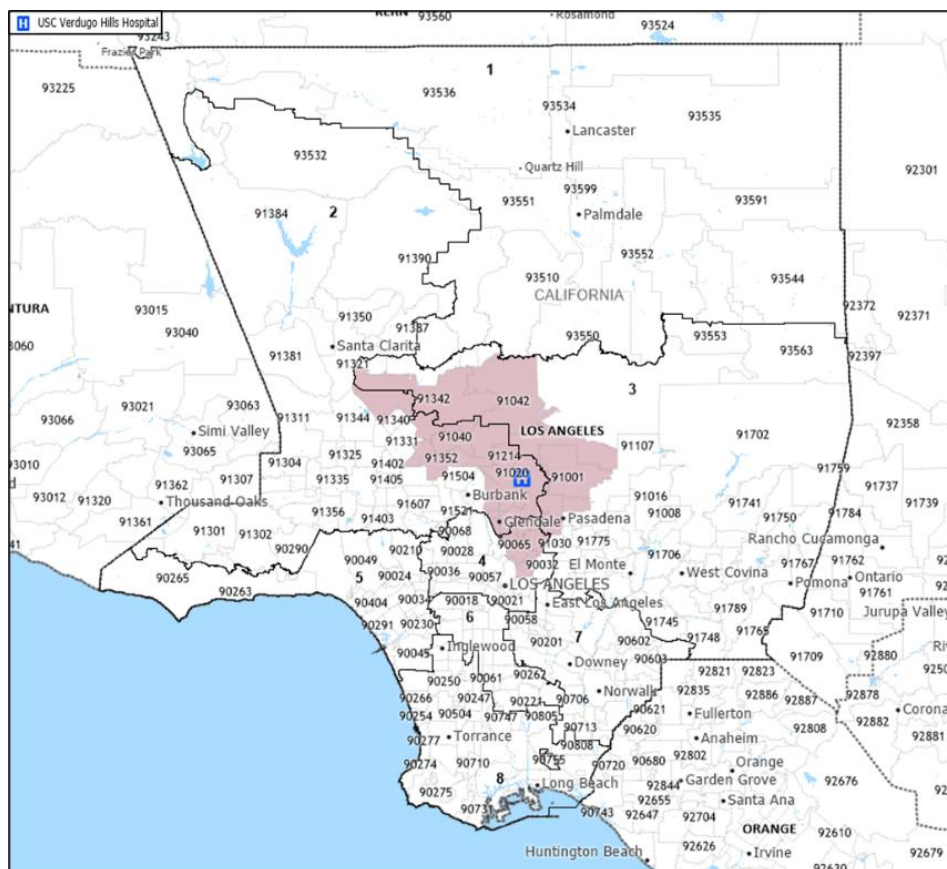
For purposes of this CHNA, the USC VHH community is defined as 22 ZIP Codes within Los Angeles County, representing 14 cities or communities comprising portions of Service Planning Areas 2, 3, and 4 (San Fernando, San Gabriel, and Metro). The community was defined by considering the geographic origins of the inpatient discharges and outpatient visits during the year ended June 30, 2024.

For the year ended June 30, 2024, the 22 ZIP Codes accounted for 57.2 percent of USC VHH's inpatient cases and 66.5 percent of its outpatient cases.

In 2023, the USC VHH community was home to approximately 675,000 people.

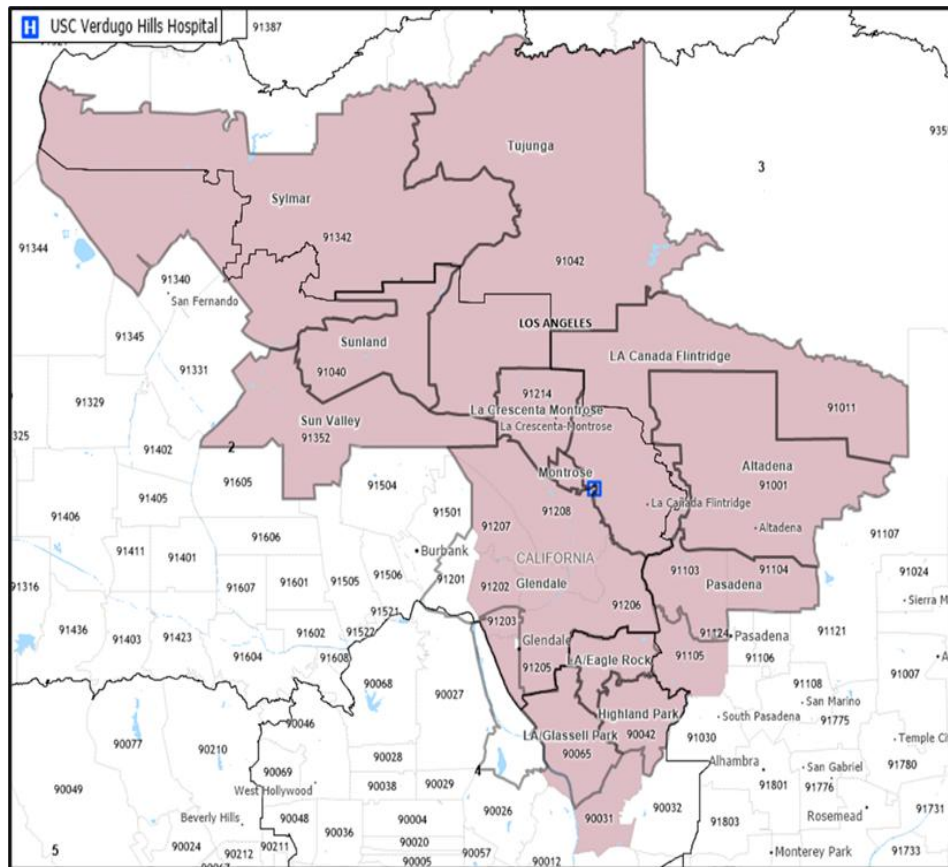
The following maps portray the community that was assessed and the hospital's location.

Map of the USC Verdugo Hills Hospital Community within Los Angeles County



Source: Los Angeles County Department of Public Health and Caliper Maptitude, 2024.

Map of the USC Verdugo Hills Hospital Community



Source: Los Angeles County Department of Public Health and Caliper Maptitude, 2024.

3. Significant Community Health Needs

As determined by analyses of quantitative and qualitative data, the significant health needs in the community served by USC Verdugo Hills Hospital are (presented in alphabetical order):

- Access to Health Services
- Dental Health
- Health Literacy
- Mental Health
- Needs of Older Adults
- Nutrition, Physical Activity, and Chronic Conditions
- Preventive Practices
- Social Determinants of Health
- Substance Use

The 2025 CHNA report describes each of the above community health needs and why they were determined to be significant.

4. Implementation Strategy to Address Significant Health Needs

This Implementation Strategy describes how USC VHH plans to address the significant community health needs identified in the 2025 CHNA report. A committee consisting of USC VHH staff and leadership reviewed findings in the CHNA report and identified significant community health needs that the hospital intends and does not intend to address during fiscal years 2026 through 2028.

As part of that decision-making process, the committee considered criteria such as:

- Whether the need is being addressed by other organizations;
- The extent to which the hospital has expertise or competencies to address the need;
- The availability of resources and evidence-based interventions needed to address the need effectively;
- The frequency with which stakeholders identified the need as a significant priority; and
- The potential for collaborations with other community organizations to help address the issue.

By applying these criteria, USC VHH determined that it will implement initiatives to address the following significant community health needs:

- **Access to Health Services**
- **Mental Health**
- **Needs of Older Adults**

The following pages describe the actions USC VHH intends to implement to address each of the significant needs, identifies the resources the hospital plans to commit, and any planned collaborations between the hospital and other organizations.

Access to Health Services

1. Goal: Increase access to comprehensive, high quality health care services for vulnerable populations.

1.1 Support community members accessing healthcare services regardless of their ability to pay	
Initiatives	Anticipated Impact
- Educate community members on how to qualify for financial assistance based on the USC VHH financial assistance policy - Assist community members to enroll in financial assistance, health insurance, and prescription drug programs	- Increase the number of community members who have health insurance coverage and understand their benefits - Financial assistance is provided to eligible patients who are uninsured and underinsured
Planned Collaboration	Hospital Resources
- Community clinics (FQHCs) - Primary care physicians - Community-based organizations	- Staff time to assist community members with enrollment - Resources to coordinate and implement program - IT support - Promotional items and materials - Interpreter services for those with limited English proficiency (LEP)
Measurement	
Number of people assisted/enrolled in coverage (Conifer/CRCA)	
1.2 Improve community members' ability to get medical care and support services	
Initiatives	Anticipated Impact
- Provide transportation support (rideshare, ambulance services, and van transportation) for those in need - Provide medications, medical supplies, and at-home infusions for those in need - Offer free and low-cost health services (flu vaccinations, mammograms, and DME)	Increase the number of community members who can get healthcare, support services, and supplies when needed
Planned Collaboration	Hospital Resources
- Premier - Affinity Ambulance - Lyft - Convalescent Aid Society	- Clinical and non-clinical staff time to coordinate and execute program - Medical and general supplies and technology resources to coordinate and implement programs
Measurement	
- Number of people assisted/served - Estimated \$35,000 annually for transportation support	

2. Goal: Expand and strengthen the healthcare workforce and create a strong provider network.

2.1 Expand community clinical practices and improve access to primary care	
Initiatives	Anticipated Impact
• Provide post-discharge follow-up care to improve the recovery process and health outcomes • Provide post-discharge navigation support, care coordination, referrals, and resources after procedures and tests • Provide education, support, and referrals for high-risk patients after an emergency department visit • Provide warm-hand-off referrals to Community Resource Center for Aging (CRCA) and other clinical and social support resources • Strengthen and expand referral networks and expand access to high quality primary and specialty care throughout the community via USC Care and Keck Community Medical Group • Optimize care transitions and care coordination for community members by partnering with post-acute care providers	• Improve coordination care and navigation to improve access to primary care • Increase the number of patients who receive optimum post-discharge care and follow-up
Planned Collaboration	Hospital Resources
• Community Resource Center for Aging (CRCA) • Keck Community Medical Group • Post-Acute Care Collaboration • USC Care	• Clinical and non-clinical staff time to coordinate and execute program • Technology resources to coordinate and implement programs • Interpreter services for those with limited English proficiency (LEP)
Measurement	
• Number of people assisted (Cipher Health Program) • Number of CRCA referrals • Number of connections to post-acute care	
2.2 Collaborate with community partners to improve workforce development for healthcare careers	
Initiatives	Anticipated Impact
• Provide high school and college students learning opportunities • Collaborate with local schools to increase student and family awareness and interest in healthcare careers through Day of Discovery • Build and foster a strong and stable registered nurse workforce via the Practice Transition Accreditation Program (PTAP) • Continue to empower outstanding students with financial need to achieve academic/ career success through the USC Bovard Scholars program	• Improve career pathways and strengthen healthcare workforce • Support nursing excellence and quality patient outcomes • Support community members with financial need to achieve academic and career success • Diversify talent in the healthcare industry • Improve social determinants of health for community members

2.2 Collaborate with community partners to improve workforce development for healthcare careers (continued)	
Planned Collaboration	Hospital Resources
• AGBU Manoogian-Demirdijian School • Armenian Mesrobian School • Benjamin Franklin High School • Blair High School • Crescenta Valley High School • La Cañada High School • Eagle Rock High School • Flintridge Sacred Heart Academy • Rose and Alex Pilibos High School • St. Francis High School • Verdugo Hills High School • Glendale Community College	• Clinical and non-clinical staff time to coordinate and execute program • Resources for education, training, and promotion • IT support and resources
Measurement	
• Number of participants • Number of people completing PTAP and Bovard Scholars program	

Mental Health

3. Goal: Improve mental health and access to mental and behavioral health services.

3.1 Promote suicide awareness and prevention strategies	
Initiatives	Anticipated Impact
• Cohost the annual Suicide Awareness and Prevention Conference	• Improve knowledge and awareness of risk factors, prevention strategies, treatment, and crisis intervention
Planned Collaboration	Hospital Resources
• American Foundation for Suicide Prevention • National Association of Social Workers (NASW) • Didi Hirsh Mental Health Services • National Alliance on Mental Illness (NAMI) Glendale • U.S. Vets	• Clinical and non-clinical staff time to coordinate and execute program • Technology resources to coordinate and implement program
Measurement	
• Number of participants • CEUs provided for community health professionals	
3.2 Improve emotional and mental wellbeing for older adults	
Initiatives	Anticipated Impact
• Provide 24/7 crisis assessments, therapies, and comprehensive emotional and mental health care options to meet the needs of adults aged 50+ • Provide grief and loss support groups and services through the six-week Beyond Blue series	• Improved support and behavioral health care for older adults experiencing mental health crisis • Improved support for community members experiencing grief and loss

3.2 Improve emotional and mental wellbeing for older adults (continued)	
Planned Collaboration	Hospital Resources
• Glendale Police Department • Burbank Police Department • Los Angeles County Sheriff's Department • Community Resource Center for Aging	• Clinical and non-clinical staff time to coordinate and execute program • Resources for education, training, and promotion
Measurement	
• Number of people served • Number of participants	
3.3 Improve access to mental and behavioral health care and reduce stigma	
Initiatives	Anticipated Impact
• Organize and participate in community events focused on mental and behavioral health • Annual USC VHH Health Fair • Pasadena Village Older Adults Resource Fair • National Alliance on Mental Illness (NAMI) Walks • Glendale Fire Service Day • City of Glendale Senior Street Fest • Pasadena Celebrates Older Americans Month • LA Suicide Prevention Summit • NAMI GLAC Conference • Suicide Awareness and Prevention Conference • Collaborate with local advocacy groups and coalitions to support policies that promote mental health awareness and funding for mental health services	• Promote inclusiveness and create safe spaces for discussion • Increase the number of community members who access mental and behavioral health care services when in need • Increase the number of community members participating in screening for mental and behavioral health conditions including depression, anxiety, and substance use
Planned Collaboration	Hospital Resources
• National Alliance on Mental Illness (NAMI) • American Foundation for Suicide Prevention • Didi Hirsh Mental Health Services • Cancer Support Community Greater San Gabriel Valley • Glendale Fire Department • Image Enhancement Center at USC Norris	• Clinical and non-clinical staff time • Screening materials and equipment • Training and education • Promotion of events
Measurement	
• Number of events/partnerships • Number of participants	

Needs of Older Adults

4. Goal: Improve health and wellbeing for older adults.

4.1 Integrate 4Ms Framework of an Age-Friendly Health System	
Initiatives	Anticipated Impact
Phase 1: - Establish protocols to ensure patient goals related to healthcare (health and treatment goals & living wills) are obtained, reviewed and documented Phase 2: - Screen patients for risks regarding mentation, mobility, and malnutrition - Screen older adults for geriatric specific social vulnerability including social isolation, economic insecurity, limited access to healthcare, caregiver stress, and elder abuse and provide appropriate referrals and resources - Strengthen community partnerships to expand the support network for care of older adults Phase 3: - Provide support and financial assistance for staff and community partners to obtain the Certified Professional in Age-Friendly Health Care (CPAFH) credential - Explore feasibility of implementing an Age-Friendly Care for Caregivers Model	- Provide care that aligns with each older adult's specific health outcome goals and care preferences, including end of life care - Use age-friendly medication that does not interfere with patient goals, mobility, or mentation - Prevent, identify, treat, and manage dementia, depression, and delirium across settings of care - Ensure that older adults move safely every day to maintain function
Planned Collaboration	Hospital Resources
Community Resource Center for Aging	- Clinical and non-clinical staff time - Technology and other support resources to implement programming - Financial support for education, training, and credentialing
Measurement	
- Phase 1: Protocols in place/documentation - Phase 2: Number of partners, percent patients screened, positive screens and referrals - Phase 3: Number of professionals credentialed and feasibility assessment for Care for Caregivers Model	

4.2 Provide evidence-based screenings and education focused on risk reduction and healthy aging	
Initiatives	Anticipated Impact
• Host an annual USC VHH health fair and screening event • Provide education and updates on brain health research and clinical practice including genetics, dementias and Alzheimer's Disease through the Brain Health Forum • Provide education and increase awareness of stroke recognition • Provide monthly educational Doc Talk lecture series • Provide nutrition education workshops and series • Participate in outreach and screening events	• Increase knowledge and awareness of evidence-based screening recommendations for older adults • Improve nutrition knowledge and chronic disease management skills and abilities • Increase the number of older adults who receive recommended health screenings
Planned Collaboration	Hospital Resources
• YMCA of the Foothills • Glendale Police Department • Glendale Fire Department • Community Center of La Cañada • NAMI • USC Alzheimer's Disease Research Center • California Alzheimer's Disease Center • Rancho Los Amigos	• Clinical and non-clinical staff time • Screening materials and equipment • Training and education • Promotion of events
Measurement	
• Number of participants • Number of events and partnerships	
4.3 Increase access to specialized services, resources, and support systems tailored for older adults	
Initiatives	Anticipated Impact
Collaborate with the Community Resource Center for Aging and community partners to offer classes, workshops, support groups and other programs that promote health and wellbeing of older adults, including: • Completion of advance directives • Guided Autobiography Workshops • Grief & Loss: Beyond Blue Support Groups • Caregiver Night Out Activity Programs • Solo Aging Education and Discussion Sessions • Coffee Talk (health and wellness support) • Educational Presentations and Community Engagement Events	• Improve social connectedness for older adults • Create and foster community support for healthy aging and care of older adults

4.3 Increase access to specialized services, resources, and support systems tailored for older adults (continued)	
Planned Collaboration	Hospital Resources
- Community Resource Center for Aging - Glendale Library Arts and Culture (Guided Autobiography Workshops and Solo Aging Education) - YMCA of the Foothills (Caregiver Night Out)	- Clinical and non-clinical staff time - Screening materials and equipment - Training and education - Promotion of events
Measurement	
Number of participants/people served	
4.4 Improve identification and treatment for substance use disorders among the older adult population	
Initiatives	Anticipated Impact
- Provide navigation support and crisis intervention to address substance use among older adults - Support and facilitate connection to outpatient substance use treatment programs	Increase the number of community members connected to substance use treatment programs
Planned Collaboration	Hospital Resources
- Tarzana Treatment Centers - Cri-Help - Aegis Treatment	- Substance Use Navigator position (FTE) - Training and education - Resources to implement program
Measurement	
Number of people connected to treatment	

5. Needs USC VHH Will Not Address

USC VHH has selected three of the nine significant health needs identified in its 2025 Community Health Needs Assessment (CHNA) to focus on in this Implementation Strategy. This Implementation Strategy outlines specific initiatives set forth to address specific health needs identified in the 2025 CHNA. USC VHH engages in many other community benefit, preventive, and wellness activities with the goal of improving the health and wellbeing of the diverse community served and although some significant needs were not included in this strategy with direct initiatives, there is overlap and work being done to address these health concerns. The following provides the rationale for why certain significant needs were not selected as a focus for this Implementation Strategy.

Dental Health was not selected as a focus of this Implementation Strategy due to the need having a relatively low priority compared to other needs and other facilities and organizations are already addressing this need.

Health Literacy was not selected as a focus of this Implementation Strategy due to the need having a relatively low priority compared to other needs and this need is included in initiatives targeted for other priorities such as access to care, mental health, and needs of older adults.

Nutrition, Physical Activity, and Chronic Conditions were not selected as a focus of this Implementation Strategy due to resource constraints or limitations, and this need is included in initiatives targeted for other priorities such as needs of older adults.

Preventive Practices was not selected as a focus of this Implementation Strategy due to the need having relatively low priority compared to other needs, other facilities or organizations are already addressing the need, and this need is included in initiatives targeted for other priorities such as access to health services, mental health, and needs of older adults.

Social Determinants of Health was not selected as a focus of this Implementation Strategy due to the need having relatively low priority compared to other needs, resource constraints or limitations, and this need is included in initiatives targeted for other priorities such as access to health services, mental health, and needs of older adults.

Substance Use was not selected as a focus of this Implementation Strategy due to relatively low severity/number of community members impacted by the need and this need is currently being addressed by having a full-time substance use navigator position.

6. Implementation Strategy Adoption

The USC Verdugo Hills Hospital Governing Board of Directors reviewed and adopted this Implementation Strategy on September 23, 2025.