# AdventHealth Castle Rock 2025-2027 COMMUNITY HEALTH PLAN

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# **Acknowledgements**

This community health plan was prepared by AdventHealth's Rocky Mountain Region
Community Health Improvement
Team with contributions from members of AdventHealth Castle
Rock's Hospital Health Needs
Assessment Committee, a group of hospital leaders from various departments.

We are especially grateful for the internal and external partners who helped guide the development of the community health plan which will enable our teams to continue fulfilling our mission of Extending the Healing Ministry of Christ.

# **Executive Summary**

Portercare Adventist Health System dba AdventHealth Castle Rock will be referred to in this document as AdventHealth Castle Rock or the "Hospital."

### **Community Health Needs Assessment Process**

AdventHealth Castle Rock in Castle Rock, Colorado, conducted a community health needs assessment in 2025. The assessment identified the health-related needs of the community including low-income, minority and other underserved populations. The priorities were defined in alignment with Healthy People 2030, the national initiative aimed at improving the health and wellbeing of people in the United States.

In order to ensure broad community input, AdventHealth Castle Rock created a Community Health Needs Assessment Committee (CHNAC) with AdventHealth Parker and Douglas County Health Department to help guide the Hospital through the assessment process. The CHNAC included representation from the Hospital, public health experts and community members. This included intentional representation from low-income, minority and other underserved populations.

AdventHealth Castle Rock also convened a Hospital Health Needs Assessment Committee (HHNAC) to help select the needs the Hospital would most effectively address to support the community. The HHNAC made this decision by reviewing the priority needs selected by the CHNAC and the internal Hospital resources available.

The CHNAC and HHNAC met from December 2024 - May 2025. The members reviewed the primary and secondary data, helped define the priorities to be addressed. and helped develop the Community Health Plan (CHP) to address those priorities. Learn more about Healthy People 2030 at https://health.gov/healthypeople.

### **Community Health Plan Process**

The Community Health Plan (CHP), or implementation strategy, is the Hospital's action plan to address the priorities identified from the CHNA. The plan was developed by the CHNAC, HHNAC, and input was received from stakeholders across sectors including public health, faith-based, business, and those individuals directly impacted.

The CHP outlines targeted interventions and measurable outcomes for each priority noted below. It includes resources the Hospital will commit and notes any planned collaborations between the Hospital and other community organizations and hospitals.

The defined goals and activities were carefully crafted, considering evidence-based resources and sought to align with AdventHealth's organizational and strategic plans. AdventHealth Castle Rock is committed to addressing the needs of the community, especially the most vulnerable populations, to bring wholeness to our communities.

#### **Priorities Addressed**

The priorities addressed include:

- 1. Health Care Access and Quality: Suicide Prevention
- 2. Mental Health: Substance Use Prevention
- 3. Neighborhood and Built Environment: Food Security

See page 8 for the defined strategies and next steps for each priority selected to be addressed.

#### **Priorities Not Addressed**

The priorities not addressed include:

- 1. Social and Community Context: Health Equity
- 2. Preventive Care
- 3. Injury Prevention
- 4. Economic Stability
- 5. Transportation
- 6. Older Adults
- 7. Health Care Access and Quality

See page 12 for an explanation of why the Hospital is not addressing these issues.

The Community Health Plan is a three-year strategic plan and may be updated during implementation based on changing community needs and priorities. AdventHealth recognizes community health is not static and high priority needs can arise, or existing needs can become less pressing. The Hospital may pivot and refocus efforts and resources to best serve the community.

### **Board Approval**

On May 14, 2025, the AdventHealth Castle Rock Board approved the Community Health Plan goals, activities and next steps. A link to the 2025-2027 Community Health Plan was posted on the Hospital's website on May 14, 2025.

## **Ongoing Evaluation**

AdventHealth Castle Rock's fiscal year is January – December. For 2025, the Community Health Plan will be deployed beginning May 14, 2025, and evaluated at the end of the calendar year. In 2026 and beyond, the CHP will be evaluated annually for the 12-month period beginning January 1st and ending December 31st. Evaluation results will be attached to the Hospital's IRS Form 990, Schedule H. The collective monitoring and reporting will ensure the plan remains relevant and effective.

#### For More Information

Learn more about the Community Health Needs Assessment and Community Health Plan for AdventHealth Castle Rock at https://www.adventhealth.com/community-health-needs-assessments.

## **About AdventHealth**

AdventHealth Castle Rock is part of AdventHealth. With a sacred mission of Extending the Healing Ministry of Christ, AdventHealth strives to heal and restore the body, mind and spirit through our connected system of care. More than 100,000 talented and compassionate team members serve over 8 million patients annually. From physician practices, hospitals and outpatient clinics to skilled nursing facilities, home health agencies and hospice centers, AdventHealth provides individualized, whole-person care at more than 50 hospital campuses and hundreds of care sites throughout nine states. Committed to your care today and tomorrow, AdventHealth is investing in new technologies, research and the brightest minds to redefine wellness, advance medicine and create healthier communities.

In a 2020 study by Stanford University, physicians and researchers from AdventHealth were featured in the ranking of the world's top 2% of scientists. These critical thinkers are shaping the future of health care. Amwell, a national telehealth leader, named AdventHealth the winner of its Innovation Integration Award. This telemedicine accreditation recognizes organizations that have identified connection points within digital health care to improve clinical outcomes and user experiences. AdventHealth was recognized for its innovative digital front door strategy, which is making it possible for patients to seamlessly navigate their health care journey. From checking health documentation and paying bills to conducting a virtual urgent care visit with a provider, we're making health care easier — creating pathways to wholistic care no matter where your health journey starts.

AdventHealth is also an award-winning workplace aiming to promote personal, professional and spiritual growth with its team culture. Recognized by Becker's Hospital Review on its "150 Top Places to Work in Healthcare" several years in a row, this recognition is given annually to health care organizations that promote workplace diversity, employee engagement and professional growth. In 2024, the organization was named by Newsweek as one of the Greatest Workplaces for Diversity and a Most Trustworthy Company in America.

#### **About AdventHealth Castle Rock**

AdventHealth Castle Rock, previously known as Castle Rock Adventist Hospital, is a 90-bed CMS 5-star hospital situated between Denver and Colorado Springs. AdventHealth is one of the nation's largest faith-based health care systems, with more than 100,000 employees, 55 hospitals and hundreds of care sites across nearly a dozen states.

Area residents not only look for our hospital for care but enjoy visiting its healing garden, outdoor space and amazing Manna Restaurant. With the mission of Extending the Healing Ministry of Christ, AdventHealth Castle Rock provides whole-person care for the body, mind and spirit.

#### **Patient & Community Resources**

In addition to education classes, event sponsorships, contributions, and community partnerships, we offer several ongoing community programs.

- Family-to-Family Adoption Support Program offers services to support adoptions customized to the wishes of the patients and adoptive parents.
- Free classes on mental health and first aid support adults, coaches, teachers and social workers learning to recognize signs of mental illness and provide appropriate support.
- The Mommy and Me market helps families in need of pregnancy and children's items.
- Patient Financial Assistance supports families and patients who visit the hospital and offers hotel nights after discharge, medicine, clothing and food, if needed.

#### Recognition

- Leapfrog Hospital Safety Grade A.
- Recognized as a Leapfrog Group Top General Hospital in 2021, 2022 and 2024.
- ACS Chest Pain accreditation.
- Newsweek's top maternity hospital 2024.
- Voted one of the safest places to work by nurses.
- Aetna's top orthopedic facilities in Colorado for Medicare members.

#### **Distinctive Services**

- Breast care
- Emergency Services
- Heart and vascular care
- Primary stroke care center
- Trauma center
- Imaging
- Multi-specialty orthopedics
- Spine
- Colorectal surgery
- Plastic Surgery
- Urogynecology
- Gynecologic oncology

- Sports medicine and
- Physical therapy
- Mother and baby care
- ENT

# **Priority 1: Health Care Access and Quality – Suicide Prevention**

In the Hospital's community, behavioral health care continues to be a prevalent need. The percentage of adults reporting poor mental health has risen in the last three years, from 12.58% to 16.64%. The percentage of adults reporting depression in 2022 was 21.37%, with death by suicide on the rise in this community since 2022. This need was highlighted by the focus groups conducted among youth and older adults — with youth citing increased stress and continuing mental health effects from the COVID-19 pandemic, and older adults mentioning the need for social connection to combat high levels of loneliness. The key informant interviews and focus groups indicates that mental health, substance use prevention, and the increase in suicides were the top concern for community organizations. Choosing to address this priority aligns the Hospital with public health and community organizations battling the rise in mental health conditions in this community.

**Goal:** Increase identification of suicide risk by implementing Zero Suicide, an evidence-based mental health & suicide prevention training that will result in improved post-discharge patient and community member outcomes, including reducing community risk of deaths by suicide.

Activity	Provide clinical and non-clinical trainings to associates and offer community trainings in suicide prevention or mental wellness.	
Output	<ul> <li>Number of hospital and community presentations provided (&gt;= 5 unique training opportunities)</li> <li>Number of participants attending classes and training (&gt;= 400 combined community members and hospital staff trained)</li> </ul>	
Outcome	Offer Zero Suicide training and best practices to clinicians and caregivers.	
Hospital Contributions		Community Partnerships
<ul> <li>The Hospital's Psych Assessment Team and Quality and Patient Safety – staff time to deliver presentations and strengthen relationships with community-based organizations.</li> <li>Hospital volunteer hours to partner with Aspen Effect, a mental health and suicide prevention organization that works to prevent suicide.</li> </ul>		<ul> <li>Aspen Effect</li> <li>You Are Not Alone (YANA)</li> <li>Envision Counseling</li> <li>The Copper Certification</li> <li>Colorado Mental Health First Aid</li> <li>Rocky Mountain Crisis Services</li> <li>Community Mental Health Centers</li> <li>CO's Office of Suicide Prevention</li> <li>Faith-based partners</li> <li>UnitedWay 211 Colorado</li> </ul>

# **Priority 2: Mental Health – Substance Use Prevention**

In the Hospital's community, 19.3% of residents have a prevalence of depression, while 12.7% of the residents report poor mental health. According to the community survey, more than 25% of respondents have been diagnosed with a depressive order and more than 26% have been diagnosed with an anxiety disorder. Almost 60% of the community and public health experts surveyed do not believe the community is good at treating mental health. Awareness and the need to address mental health disorders has been growing in the country. Including mental health as a priority, the Hospital can align to local, state and national efforts for resources and to create better outcomes opportunities over the next three years.

**Goal:** Providing encounters of MOUD (Medication for Opioid Use Disorder) in the Emergency Department (ED) by administering and prescribing opioid alternatives.

Activity	Providing access to ED Medications for Opioid Use Disorder (MOUD) and ED Alternatives to Opioids (ALTOs) and Naloxone distribution tools to advance care and outcomes for individuals with Opioid Use Disorders at risk of overdose.	
Output	<ul> <li>Number of ALTOs provided to eligible community members (&gt;= 75% of ALTOs provided to eligible community members)</li> <li>Establish referral pathways with treatment partners to provide continuity of care and improve transitions back to community for individuals with Opioid Use Disorders. (&gt;= 1 referral pathway established)</li> </ul>	
Outcome	Offer administration and prescription of alternatives to opioids.	
Hospital Contributions		Community Partnerships
<ul> <li>The Psych Assessment Team - staff time to train and screen eligible community members.</li> <li>ED Physicians and Pharmacy – staff time to screen and provide interventions.</li> </ul>		<ul> <li>ED Physician Groups</li> <li>MOUD Providers</li> <li>All Health Network</li> <li>UnitedWay 211 Colorado</li> </ul>

# **Priority 3: Neighborhood and Built Environment: Food Security**

Food insecurity is on the rise in Colorado, as indicated by an 8% increase in SNAP benefits claimed from 2020 – 2022, representing an additional 41,829 individuals who could not afford food without SNAP benefits. In the Hospital's community 10% of individuals report an inability to afford food. This concern was highlighted by the Spanish-speakers focus group, who indicated that rising food prices increase their stress and – for newcomers – are one of the basic needs that they struggle to meet. The older adult focus group report struggles to accommodate rising grocery prices on a fixed income that has not expanded to meet that need. Addressing this priority can make a significant and life-changing difference for families and individuals in the community who struggle to meet the basic need of having adequate meals and nutrition. Increasing the number of people who can eat well and often will have far-reaching effects on the overall health of the community.

Goal: Increase access to affordable, fresh produce and federal food assistance programs and enhancements.

Activity #1	Administer a Social Determinants of Health (SDoH) screening for patients which determines food insecurity.		
Output	<ul> <li>Number of SDoH Food Security screenings completed (&gt;= 75% of inpatient patients screened for SDoH)</li> <li>Establish referral pathways for food insecurity screenings (&gt;= 4 referral pathways established)</li> </ul>		
Outcome	Screen and provide referrals for unmet social risks, including food insecurity.		
Hospital Contributions		Community Partnerships	
<ul> <li>Hospital Case Management Team to administer SDoH screenings.</li> <li>Hospital volunteer staff time to organize a food drive in partnership with The Rock Church and Help and Hope Center.</li> <li>Allocate \$15k to fund Help and Hope Center – Turkey Rock Trot, to increase access points that promote food security.</li> </ul>		<ul> <li>Colorado Blueprint to End Hunger</li> <li>We Don't Waste</li> <li>Family Connects</li> <li>Hunger Free Colorado</li> <li>Help and Hope Center</li> <li>The Rock Church</li> <li>UnitedWay 211 Colorado</li> </ul>	

Activity #2	Support local food businesses' acceptance of and or maintenance of the Supplemental Nutrition Assistance Program (SNAP), Special Supplemental Nutrition Program for Women, Infants, and Children (WIC), or their program enhancements by supporting technology, technical assistance, outreach and promotion through community food advocates/navigators.		
Output	Number of organizations funded that increase access to public assistance benefits programs (>=1 organization funded)		
Outcome	Partner with community-based organizations and businesses to increase utilization of benefits that promote food security.		
Hospital Contributions		Community Partnerships	
<ul> <li>Community Health and Mission staff time to attend coalition meetings.</li> <li>Allocate \$10k to fund Help and Hope Center to increase access points and utilization of food security benefits.</li> </ul>		<ul> <li>Hunger Free Colorado</li> <li>Help and Hope Center</li> </ul>	

### **Priorities Not Addressed**

AdventHealth Castle Rock also identified the following health needs during the CHNA process. In reviewing the CHNA data, available resources, and ability to impact, the Hospital determined these needs will not be addressed.

#### **Social and Community Context: Health Equity**

Health equity is often embedded within other health priorities rather than treated as a standalone issue because of its deep connection to various factors influencing health outcomes. Addressing priorities like access to healthcare and the social determinants of health allows us to combat the root causes of disparities effectively. For example, by improving access to essential services and creating healthier communities, we can significantly advance health equity. This collaborative framework not only ensures a comprehensive strategy but also enhances the impact of initiatives aimed at reducing disparities. By prioritizing health equity within the selected priorities, we can create sustainable, meaningful change that uplifts the health of entire populations.

#### **Preventive Care**

In the Hospital's community, percentages of obesity amongst adults (24%), diagnosed diabetes (6%), high blood pressure (23%), and stroke mortality (26%) are all lower than the state's percentages of 24% for obesity, 7% for diagnosed diabetes, 25% for high blood pressure, and 36% for stroke mortality. There are already strong partnerships between the Hospital and trusted community organizations for disease management, therefore the Hospital did not select this as a priority.

#### **Injury Prevention**

Not selecting injury prevention as a health priority in the Hospital's community is due to the lower incidence of injuries compared to chronic conditions like heart disease or mental health issues. The annual 2016 to 2020 average rate of injury-related deaths in Douglas County is lower than Colorado. While injury prevention is important, the Hospital will allocate resources to other health priorities.

#### **Economic Stability**

In the Hospital's community, the poverty rate for the general population is lower (4%) than the state's (7.5%). The rate of severely rent-burdened adults is also lower (22%) than the state's (25%). The HHNAC agreed that these are important issues, they also agreed that the Hospital is better positioned to focus on other issues based on current available resources.

#### **Transportation**

In the Hospital's community, the percentage of households that do not have a vehicle is lower (3.5%) than the state's (5.5%). While public transportation is fragmented in the county, there are ongoing efforts to expand public transportation lines. The HHNAC agreed that this is an important issue that is being addressed via policy, therefore it was not selected as a priority to be addressed.

#### **Older Adults**

In the Hospital's community, the percentage of seniors living alone is lower (19%) than the state's (27%). But the social engagement index is dramatically decreasing in the county (77%) compared to the state's (85%). While this presents an opportunity to focus on outreaching seniors to strengthen a sense of community and belonging, the HHNAC agrees on not duplicating efforts from the local area agency on aging and other trusted senior organizations, therefore it was not selected as a priority to be addressed.

#### **Health Care Access and Quality**

General access to care is not currently considered a high-priority health issue for the general population in the county, primarily because the community already possesses substantial resources to address healthcare needs. According to data from the Colorado Department of Public Health and Environment, Douglas County has a higher-than-average ratio of primary care physicians, with approximately 1,040 residents per physician compared to the state average of 1,200. Additionally, the county has significant resources that provide a wide range of services, from emergency care to specialized treatments. These factors collectively illustrate that the necessary infrastructure and resources are in place, alleviating the urgency of prioritizing access to healthcare in the county. The hospital will focus on specific initiatives that improve the quality of care via targeted programs, such as substance use prevention and suicide prevention, to improve health outcomes in the county.