Executive Summary

PeaceHealth Sacred Heart Medical Center, University District serves the Eugene, Oregon area with inpatient hospital care, behavioral health services, and emergency care.

- The assessment identified several key community health needs and priorities:

1. Housing and homelessness - There is a critical need for affordable housing and services for the homeless population. PeaceHealth partnered to open The Commons on MLK, providing permanent supportive housing.

2. Mental health and substance abuse - The community needs increased access to mental health and addiction treatment services, especially for youth. PeaceHealth repurposed a building into the Guest House Crisis Stabilization Center to provide short-term residential mental health care.

3. Access to healthcare - PeaceHealth supports school-based health centers to increase access to physical and mental healthcare for students.

4. Food insecurity - There is a need to increase access to healthy, affordable food. PeaceHealth partners with programs like the School Garden Project to educate students about growing and eating healthy food.

5. Childcare - The pandemic highlighted a critical shortage of affordable childcare options for working families.

- The assessment emphasizes the need to address health inequities, particularly for communities of color, low-income families, rural residents, LGBTQ+ individuals, and other vulnerable populations.

- PeaceHealth is committed to collaborating with community partners to address these priorities through targeted programs and investments in the areas of housing, mental health, community-based care, and food access.

The report outlines PeaceHealth's ongoing efforts and future plans to improve community health in alignment with these identified needs and priorities.

Biggest Gaps in Service

1. Mental health and substance abuse treatment, especially for youth and young adults. The report mentions there is "an urgent need among youth and young adults for increased access to mental healthcare and addiction treatment in schools and in other community settings."

2. Childcare services, which are described as being in crisis. The report states that all 36 Oregon counties qualify as "childcare deserts" for infants and toddlers.

3. Primary care and specialty services, especially in rural areas. The report notes that "the number of available providers for basic and critical care services is declining" which has "created a significant gap in available healthcare services, driving up wait times and wait lists, and making it nearly impossible to access care in more rural communities."

4. Behavioral health services, with the report mentioning long wait times and limited residential stabilization options.

5. Services for chronically homeless individuals with complex healthcare needs. The report suggests these individuals often "fall through the cracks" of existing systems.

6. Culturally appropriate care and services for Black, Indigenous, and People of Color communities, who are described as having less access to healthcare and being at higher risk for chronic medical conditions.

7. Food security and access to healthy food options in certain areas described as "food deserts."

The report emphasizes that these gaps are often interconnected and disproportionately affect vulnerable populations in the community.

Greatest Barriers to Care
1. Workforce shortages: The report mentions a significant gap in available healthcare services due to a declining number of providers, particularly in general practice, dentistry, and mental health. This has led to increased wait times and difficulty accessing care, especially in rural communities.

2. Income and poverty: The report indicates that low-income families often struggle to access adequate healthcare due to financial constraints.

3. Limited access for vulnerable populations: The assessment highlights disparities in healthcare access for Black, Indigenous, and People of Color (BIPOC), LGBTQ+ individuals, people with disabilities, and those living in rural areas.

4. Mental health and substance abuse treatment: There is a lack of sufficient mental health and addiction treatment services, particularly for youth and young adults.

5. Childcare: The pandemic exacerbated the shortage of affordable childcare options, which can indirectly affect healthcare access by forcing parents (especially women) to leave the workforce.

6. Transportation: While not explicitly stated, the report implies that transportation to healthcare facilities can be a barrier, especially for rural residents.

7. Cultural and language barriers: The report mentions the need for culturally appropriate services, suggesting that cultural and language differences can be barriers to healthcare access.

8. Lack of integrated care: The report notes that many clients have co-occurring mental health and addiction disorders, often complicated by chronic physical health conditions, but traditional treatment usually provides services in either mental health or addictions—not both.

9. Limited residential stabilization options: For individuals with complex needs who are not adequately served in outpatient environments.

The Unique Needs of the Community

1. Affordable housing: The report highlights a critical shortage of affordable housing options, with 58% of Lane County residents renting and a very low vacancy rate of 2.01%.

2. Services for the chronically homeless: There's a need for housing-first models and supportive services for those experiencing long-term homelessness.

3. Mental health and substance abuse treatment: Particularly for youth and young adults, there's an urgent need for increased access to these services in schools and community settings.

4. Childcare: The community faces a severe shortage of affordable, quality childcare options, especially for infants and toddlers.

5. Culturally appropriate healthcare: There's a need for services that cater to the growing diversity of the community, particularly for Black, Indigenous, and People of Color populations.

6. Food security: Improving access to healthy, affordable, and culturally appropriate food is identified as a critical issue.

7. School-based health services: The community has a unique need for integrated physical and mental health services within schools.

8. Crisis stabilization services: There's a need for short-term residential programs for individuals experiencing mental health crises.

9. Community health workers: The report emphasizes the need for more traditional health workers to connect healthcare and social supports.

10. Support for essential workers: During the pandemic, there was a specific need for childcare and support services for frontline healthcare and essential workers.

11. Services for rural areas: The report notes difficulties in accessing care in more rural communities.

What the Hospital or CCO is Doing Well
1. School-based health centers: PeaceHealth has partnered with local school districts to provide physical and mental health services to students through school-based health centers. These centers have provided thousands of healthcare visits and serve a significant number of BIPOC students.

2. Housing for the homeless: PeaceHealth partnered with Homes for Good and Lane County to launch The Commons on MLK, a 51-unit housing community for people experiencing chronic homelessness. This facility follows the Housing First model and provides wraparound services.

3. Mental health crisis support: PeaceHealth repurposed the Patterson Street Guest House into a Crisis Stabilization Center, providing short-term residential care for individuals experiencing mental health crises.

4. Community partnerships: The report highlights numerous partnerships with local organizations to address various health needs, including childcare, food insecurity, and behavioral health services.

5. Addressing food insecurity: PeaceHealth is partnering with the School Garden Project of Lane County to educate children about growing and eating healthy food.

6. Responding to the COVID-19 pandemic: The hospital adapted quickly to provide support during the pandemic, including partnering with organizations to set up emergency childcare for healthcare workers.

7. Focus on equity: The report indicates a strong emphasis on addressing health disparities and providing equitable care, particularly for vulnerable populations.

8. Commitment to community health: PeaceHealth demonstrates a holistic approach to community health, addressing social determinants of health beyond just medical care.

9. Flexibility and innovation: The report shows that PeaceHealth has been willing to repurpose facilities and adapt services to meet changing community needs.

Strengths of the Community
1. Community activism and engagement: The report mentions that Eugene is "a community of activists," citing an example of over 7,000 people gathering to protest racial injustice.

2. Collaborative spirit: There are numerous examples of community organizations, healthcare providers, and local government working together to address challenges, such as the Community Vaccination Collaborative.

3. Rapid response to crises: The community quickly mobilized resources during the pandemic and wildfires, with organizations and businesses stepping up to provide emergency support.

4. Growing diversity: The report notes that the community is becoming more diverse, which is seen as a positive development.

5. Strong educational focus: Eugene is described as a "vibrant social center known for education and innovation."

6. Robust network of community organizations: The report mentions numerous local organizations working on various issues, from housing to food security to youth services.

7. Commitment to social justice: There's a strong emphasis on addressing inequities and supporting vulnerable populations.

8. Innovative approaches to healthcare: The community has implemented creative solutions like school-based health centers and crisis stabilization programs.

9. Environmental consciousness: The report refers to Eugene as the "Emerald City," suggesting a focus on green spaces and environmental issues.

10. Adaptability: The community showed resilience and flexibility in adapting services and support during the challenges of the pandemic.

Priorities

1. Housing and Homelessness:
   - Develop housing-first models
   - Improve access to service-enriched housing
   - Support homeless prevention services

2. Mental Health and Substance Abuse (HOPE):
   - Increase access to mental health treatment and addiction services
   - Focus on prevention of substance dependence
   - Expand services for youth and young adults
   - Increase individual, community, and systemic resilience for behavioral health

3. Community Care (CARE):
   - Expand knowledge, access, and engagement with community caregivers
   - Grow traditional health worker roles (e.g., community health workers, peer support specialists)
   - Increase access to physical and mental healthcare in schools

4. Food Security (NOURISH):
   - Address food insecurities to enhance family and child well-being
   - Increase equitable access to culturally appropriate, nutritious food
   - Expand fruit and vegetable community programming and food education

5. Childcare:
   - Support solutions for quality, affordable, and accessible childcare

6. Health Equity:
   - Address health disparities, particularly for communities of color, low-income families, rural residents, LGBTQ+ individuals, and other vulnerable populations

7. Integrated Care:
   - Promote collaboration between healthcare providers and community partners
   - Develop coordinated systems of prevention, treatment, and recovery

8. Workforce Development:
   - Address workforce shortages in healthcare and related fields