

# Kitsap Public Health Board Health Officer Update

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Health Officer, Kitsap Public Health District  
April 2, 2024



KITSAP PUBLIC HEALTH DISTRICT

# Protecting, Connecting and Thriving We Are All Public Health



*Proteger, Conectar y Prosperar*

## Todos Somos Salud Pública



NATIONAL  
PUBLIC  
HEALTH  
WEEK

KITSAP PUBLIC HEALTH DISTRICT



### OUR VISION

Our vision is a safe and healthy Kitsap County for all.

### OUR MISSION

The Kitsap Public Health District prevents disease and protects and promotes the health of all people in Kitsap County.

### OUR GUIDING PRINCIPLES

#### Prevention

We protect our community by reducing the risks of disease, injury, and early death.

#### Collaboration

We engage with community, convene diverse partners, and work to ensure our efforts are community oriented and create meaningful impact.

#### Quality

We are dedicated to continuous quality improvement and our work is guided by evidence from scientific data, best and promising practices, and incorporates community input to produce the best possible outcomes.

#### Equity

We are committed to all people in Kitsap County having a fair and just opportunity to live safe and healthy lives.

#### Innovation

We proactively and flexibly deploy creative and novel strategies to address current, evolving, and future public health needs.



KITSAP PUBLIC  
HEALTH DISTRICT



KITSAP PUBLIC HEALTH DISTRICT

# 2024-2028 KITSAP COMMUNITY HEALTH PRIORITIES\*



## HEALTHCARE

- Address gaps in **healthcare access**
- Implement strategies to recruit and retain **healthcare workforce**



## MENTAL & BEHAVIORAL HEALTH

- Expand care options for **mental health and substance use disorders**



## HOUSING & HOMELESSNESS

- Ensure **affordable and safe housing**
- Address and prevent **homelessness**

\* Final wording will be decided at our Priority Work Group meetings this spring.

- Kitsap Public Health District. December 2023. [Community Health Assessment](#)
- Kitsap County Division of Aging and Long-Term Care. [Area Plan 2024-2027](#)
- Kitsap Community Resources. April 2023. [Community Needs Assessment](#)
- Kitsap Mental Health Services. March 2023. [Community Needs Assessment](#)
- St. Michael Medical Center. May 2023. [Community Health Needs Assessment](#) and October 2023 [Community Health Implementation Strategy](#)
- JHU's -- [Healthcare System Challenges and Opportunities in Kitsap County](#)



# Community Public Health Goals

- Health Equity and Improved Population Health

## Guiding Principles & Commitments

- Shared Data and Action Plans
- Shared Strengths and Assets
- Accountability and Transparency
- Trusted Partnerships & Strategic Collaboration
- Community Centered and Data Driven
- Flexible and Continuous

## Community Health Improvement Planning





synergy  
 together work **team** word  
 teamwork cooperation agreement  
 plan goal joint  
**strategic** partner project merger  
 connection solution organization joint  
 leadership unity vision **strategy** achievement motivation  
 group **business** collaboration alliance  
 successful union innovation growth manager  
 management success corporate company  
 symbol



Get Involved /  
know your partners

Engage  
partners early

Incentivize

Incorporate in  
decision process



# NEXT STEPS TO IMPROVE HEALTHCARE ACCESS IN KITSAP COUNTY

## KPHD Next Steps Framework

- Convener of the Kitsap Community Improvement Plan
- Launch of a Healthcare Action Collaborative in response to commitments defined by Resolution 2023-04, John's Hopkins Study Team recommendations, and findings from recent community health assessments
- Solidifying KPHD specific action-oriented strategies in the areas below:



**Programmatic  
Operations**



**Community  
Investments**



**Coordinated  
Care**



**Community  
Partnerships**

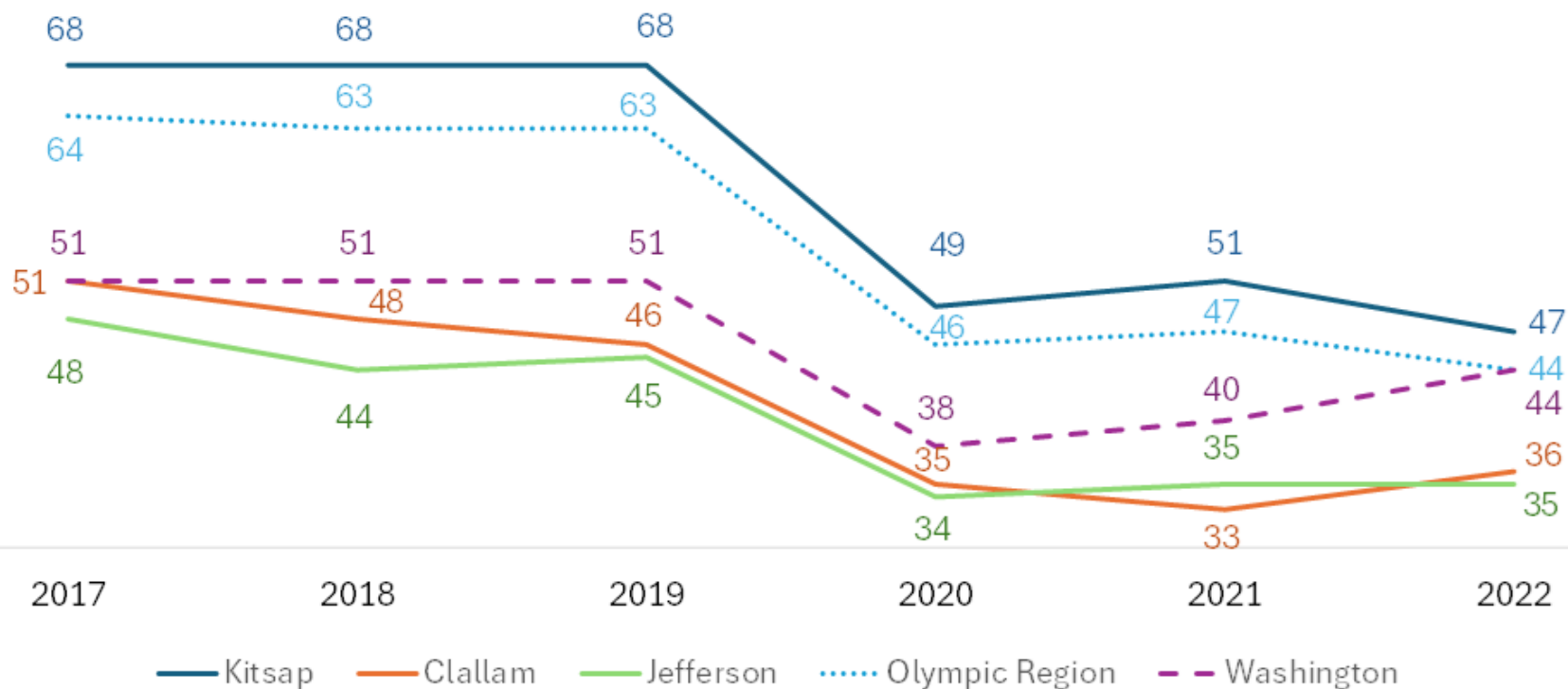


**Policy  
Development**



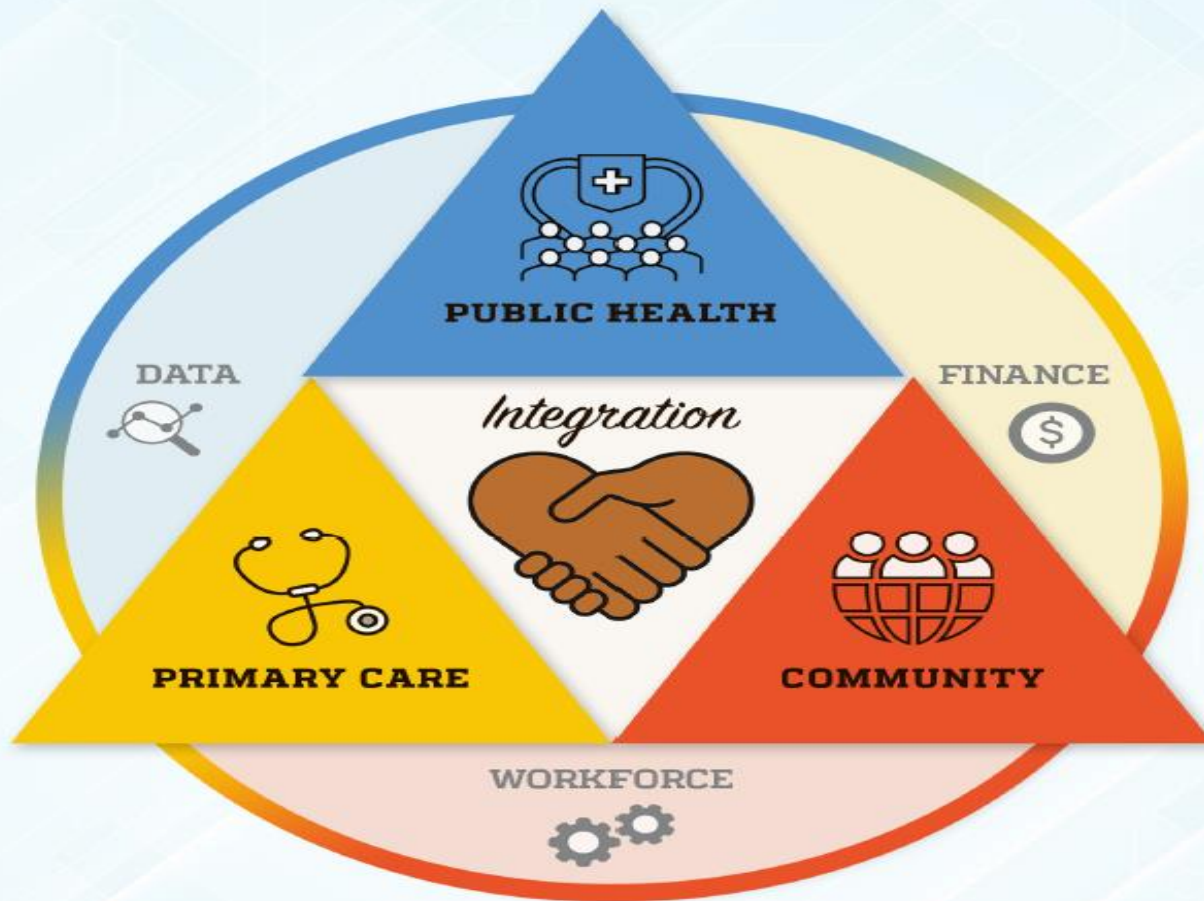
# Emergency Department (ED) Visits by Medicaid Beneficiaries for All Reasons

(Average number of ED visits each month for every 1,000 enrolled Medicaid members)



Source: Health Care Authority (HCA) Medicaid Enrollment and Claims Data. Accessed at <https://hca-tableau.watech.wa.gov/t/51/views/HealthierWashingtonDashboard/Measures?%3AisGuestRedirectFromVizportal=y&%3Aembed=y>, March 2024. [Analyzed by Kitsap Public Health District, Assessment & Epidemiology Program].





## The Integration of Primary Care, Public Health, and Community-Based Organizations: A Federal Policy Analysis





# THE SOCIAL DETERMINANTS SPECTRUM

## Roles for Healthcare



Screening for necessary social, economic, and safety issues in clinical & other settings



In-house social services assistance (at clinical site where screening is performed)



Anchor institution promoting equity via hiring, investments, community benefits



Community-based social and related services: single or multiple programs or services



Changes to laws, regulations, or community-wide conditions; working across sectors

## Roles for Public Health Departments (PHDs)

PHDs can offer best practice screening materials and can aggregate/ analyze data across facilities regarding need.

PHDs can convene community organizations and other sectors to promote linkages, develop materials & advocate for SDOH-related reimbursement.

PHDs can collaborate with one or more anchor institutions, assist them in prioritizing, evidence-based approaches & community-wide strategies.

PHDs can demonstrate need with data, make case for funding for needed services and/ or fund programs themselves.

PHDs can provide evidence of need and demonstrate efficacy of policies and laws at promote health and address the SDOHs.

### Primary Care

Individual patient focus

Diagnosis and treatment emphasis

Clinical sciences essential to professional training

Private sector basis

### Public Health

Population focus

Prevention or response emphasis

Clinical sciences peripheral to professional training

Public sector basis



# Resources

- [Integrating Primary Care and Public Health to Save Lives and Improve Practice During Public Health Crises: Lessons from COVID-19](#)
- [Integration of Primary Care and Public Health \(Position Paper\)](#)
- [The Integration of Primary Care, Public Health, and Community-Based Organizations: A Federal Policy Analysis](#)
- [PBS Documentary The Invisible Shield: Public Health Saved Your Life Today and You Don't Even Know It](#)
- [Medical Debt—An Iatrogenic Epidemic With Mortal Consequences](#)
- [The Improving Social Determinants of Health Act of 2023 \(S./ H.R. \)](#)
- [Kaiser Family Foundation Diagnosis: Debt](#)





Hope lives here.

**Serving Kitsap County for 46 years**







# Comprehensive Recovery Oriented Services

- Adult Outpatient Mental Health and Co-Occurring Substance Use Disorder Services
- Children Youth and Family Services
- Intensive Wrap-Around Services for Youth and Adults
- School based programs
- Supported Housing and Employment
- Five separate 24/7 programs
- Designated Crisis Responder Services



# Convenient Locations Across Kitsap

## Bremerton – multiple sites:

- Adult and Children, Youth and Family Outpatient Services
- Five 24/7 units (Crisis Triage, Pacific Hope & Recovery, Keller Residential Day treatment, Adult Inpatient and Youth Inpatient)
- Madrona Day Treatment (*2 sites, up to 44 students, 1st – 12th grades*),
- Pendleton Place, 72 permanent supportive housing facility & 24/7 onsite staff
- Mobile Crisis Outreach teams (youth and adult)

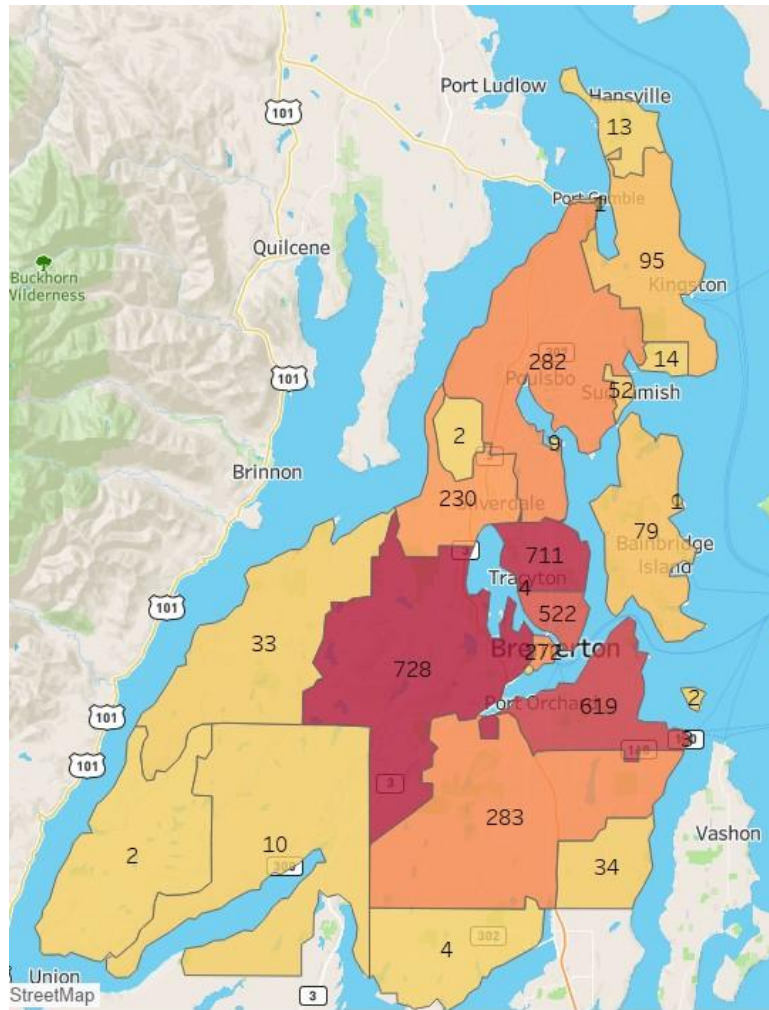
Poulsbo - Hostmark: Adult, Children Youth & Family, and intensive youth services

South Kitsap – Bay St.: Adult, Children Youth & Family, and intensive youth services

In the schools: 9.5 Therapists support 3 high-schools, 1 middle school and 9 elementary schools across the county.



# Serving 4,005 non-duplicated clients from across Kitsap County last year...



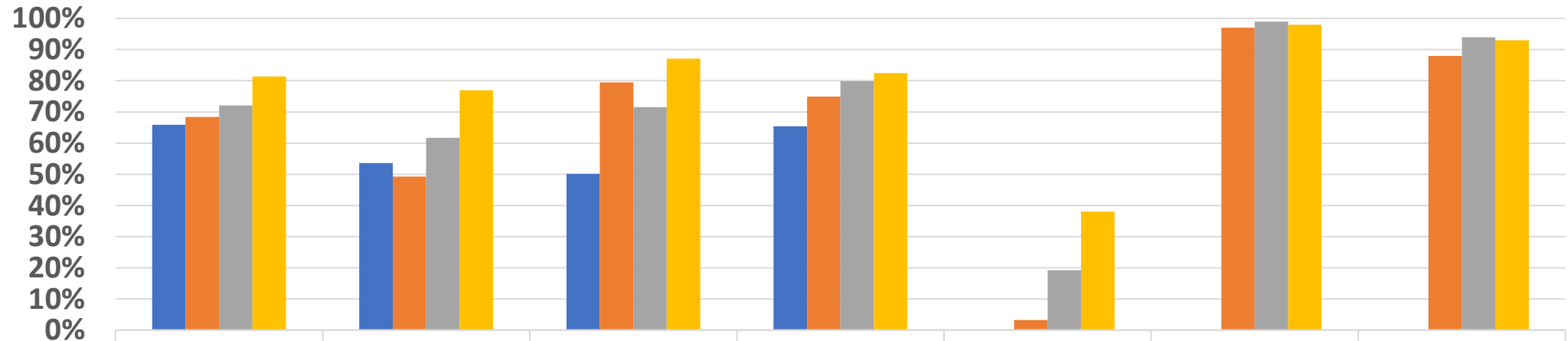
- Bremerton: 39 %
- South Kitsap: 24%
- Central Kitsap: 24%
- North Kitsap: 11%
- Bainbridge Island: 2%

Count of Zip Code  
1 728

# 24/7 Average Annual Occupancy Rate

2021 to 2024 YTD By Program

**Steady increase since 2021**



	Adult Inpatient	Crisis Triage	Pacific Hope & Recovery Occupancy	Keller House	Youth Inpatient	Pendleton Place	KMHS Properties
■ 2021	65.90%	53.60%	50.10%	65.40%	0.00%		
■ 2022	68.40%	49.30%	79.50%	74.90%	3.20%	97.00%	88.00%
■ 2023	72.10%	61.70%	71.50%	79.90%	19.20%	99.00%	94.00%
■ YTD 2024	81.40%	77.00%	87.10%	82.50%	38.00%	98.00%	93.00%



# Clinical Staff

Compassionate. Committed. Highly trained.

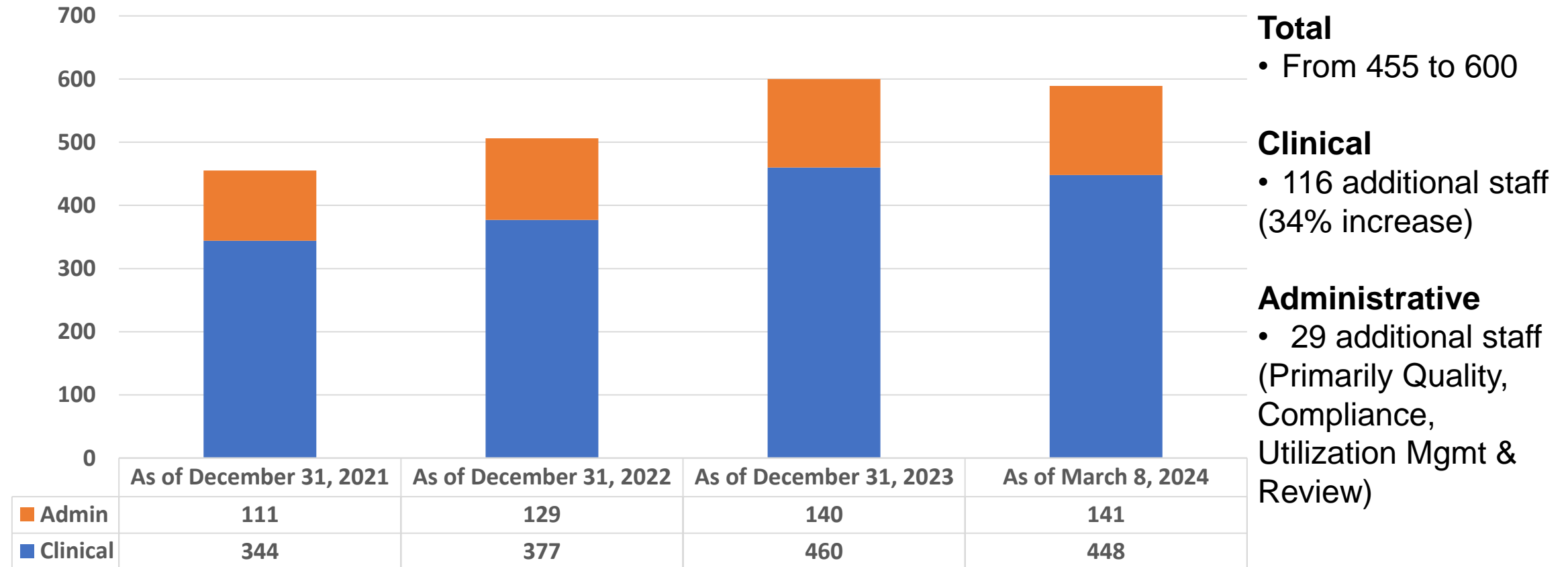


KITSAP  
MENTAL HEALTH  
SERVICES

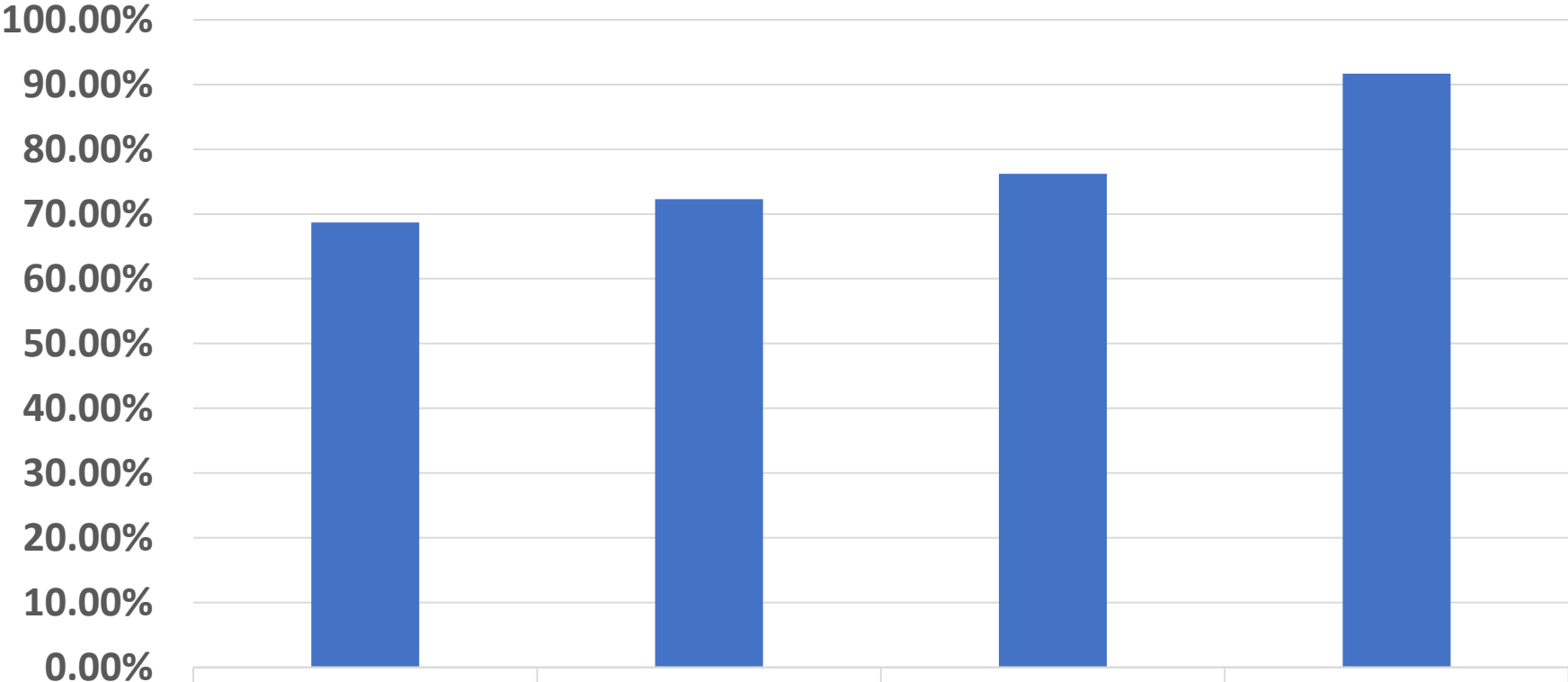


# Overall Employee Growth – 29% Increase

2021 – YTD 2024



# KMHS Staff Retention – Steady Improvement

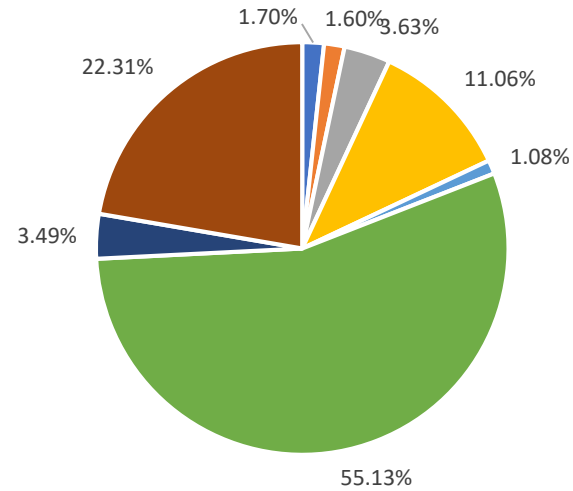


<b>■ Annual Staff Retention</b>	<b>68.70%</b>	<b>72.30%</b>	<b>76.20%</b>	<b>91.67%</b>
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# Reflecting Client & Community Diversity

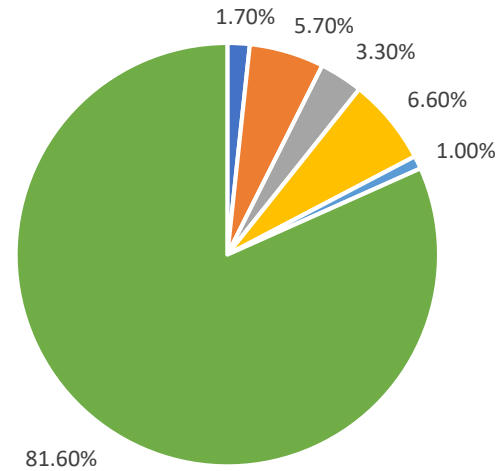
Staff data includes Hispanic or Latino as a separate category so data is not directly comparable.

**Clients - 2023**



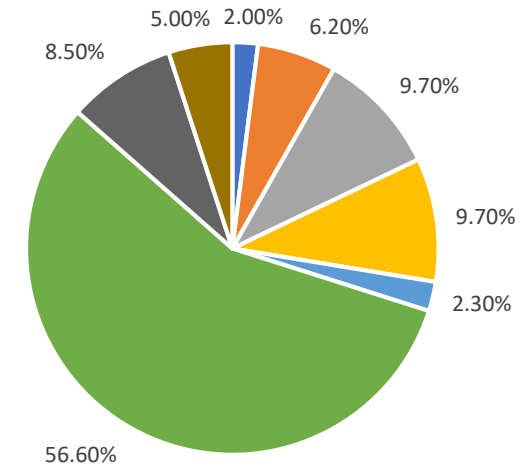
- American Indian or Alaska Native
- Asian or Asian American
- Black or African American
- Multiracial
- Native Hawaiian or Pacific Islander
- White
- Other Race\*
- Unknown/undisclosed\*

**County Residents - 2022**



- American Indian or Alaska Native
- Asian or Asian American
- Black or African American
- Multiracial
- Native Hawaiian or Pacific Islander
- White

**Staff - 2023**



- American Indian or Alaska Native
- Asian or Asian American
- Black or African American
- Multiracial
- Native Hawaiian or Pacific Islander
- White
- Hispanic or latino
- Not specified

# KMHS Priority: Promoting Diversity, Equity, Inclusion & Accessibility Across KMHS

- DEIA Committee, staff led and supported by leadership, determines agency's DEIA priorities
- Newly launched DEIA Council, reporting to CEO, and responsible for monitoring diversity metrics including hiring/termination/compensation, client demographics/diagnosis and discharges, personnel policies.
- 100% staff trained on cultural competency
- Inclusive Communities team, focused on providing services to immigrants, refugees and Hispanic populations
- Wherever possible, KMHS strives to assign clinicians in line with gender, sexual orientation, race/ethnicity preferences of the clients







# Evidence-Based Practices

**We aim to train all clinicians in at least two evidence-based practices within 2 years of hire. These could include:**

- Suicide Risk Assessment
- Motivational Interviewing
- Dialectical Behavior Therapy (DBT)
- Cognitive Behavioral Therapy (CBT)
- Whole Health Action Management (WHAM)



# Specialized Evidence Based Practices

**Many clinicians have been trained in a variety of other evidence based practices, such as:**

- DBT for Eating Disorders
- Eye Movement Desentization & Reprocessing (EMDR)
- Solution Focused Brief Therapy
- Cognitive Behavioral Therapy for Psychosis
- Child-Parent Psychotherapy Training
- Promoting first relationships
- Parent Child Interaction Therapy
- And many others



# Challenges





# Challenges: Staff Recruitment

## Vacancies in Key positions

- Mental Health Professionals: 36 staff + 14 vacancies
- Therapists: 42 staff + 18 vacancies
- Care Coordinators (BA Level): 84 staff + 14 vacancies
- Nurses: 27 staff + 3 on-call Nurse vacancies
- Medical Assistants: 7 staff + 5 vacancies
- Medical Providers: 12 staff + 2 ARNP vacancies

## It's Tough Work!!

Often the newest clinicians are serving the highest acuity individuals, with high caseloads.

## Move to Private Practice and Community

Often following licensure, many licensed providers move to community positions or open their own practices.



# Challenges Facing the Mental Health & Substance Use Disorder System

- **Voluntary nature of services** - The involuntary detainment standard in Kitsap County is exceptionally high. Requires imminent risk of danger to self/others. Gravely disabled is more difficult to prove.
- **System is historically underfunded.** Although definitely improving, reimbursement rates typically do not cover full cost of providing services
- **Significant WAC/RCW/Medicaid/Medicare Administrative burdens** that make barriers to care significantly higher. (2+ hour intakes, multiple assessments that must be repeated every 3-6 months, strict documentation requirements)
- **Youth acuity significantly higher**, often requiring 1:1 care, which generally is hard to accommodate in current staffing models
- **Not licensed to provide care to medically acute individuals**

# On the Horizon

Tailoring services to address community needs





# Expansion Plan

- Nine Acres of Vacant Land on Almira, adjacent to Main campus in Bremerton
- Youth Intensive Services Campus including substance use and withdrawal services, partial hospitalization, additional youth inpatient services
- 6 Classroom Madrona Academy, serving kids 1st – 12th, indoor/outdoor recreation space, and ample space for staff and therapy
- Differentiated Adult Inpatient Services, creating additional space for voluntary and involuntary clients.
- Long Term – Expand access to Adult substance use treatment and withdrawal services
- Mental Health Health Urgent Care co-located with Crisis Triage facility

# Other Highpoints

- Launching Transcranial Magnetic Stimulation Services (TMS) in May (Ribbon Cutting May 16<sup>th</sup>!)
- Launching a bi-monthly community education series, with first session scheduled for Thursday, April 5<sup>th</sup>, at Olympic College on the topic of Rethinking Approaches to Substance Use Recovery. Details on the KMHS website.
- Offering free/low-cost community training including Mental Health First Aid for youth and adults, QPR Suicide Prevention (Question, Persuade, Refer), De-escalation approaches for non-clinical staff
- KMHS is now a Certified Community Behavioral Health Center!
- On the path to Facility Accreditation, which means we will be able to serve people on Medicare and Commercial insurance in our 24/7 units

For more information

Monica Bernhard, CEO

[monicab@kmhs.org](mailto:monicab@kmhs.org)



Hope Lives Here



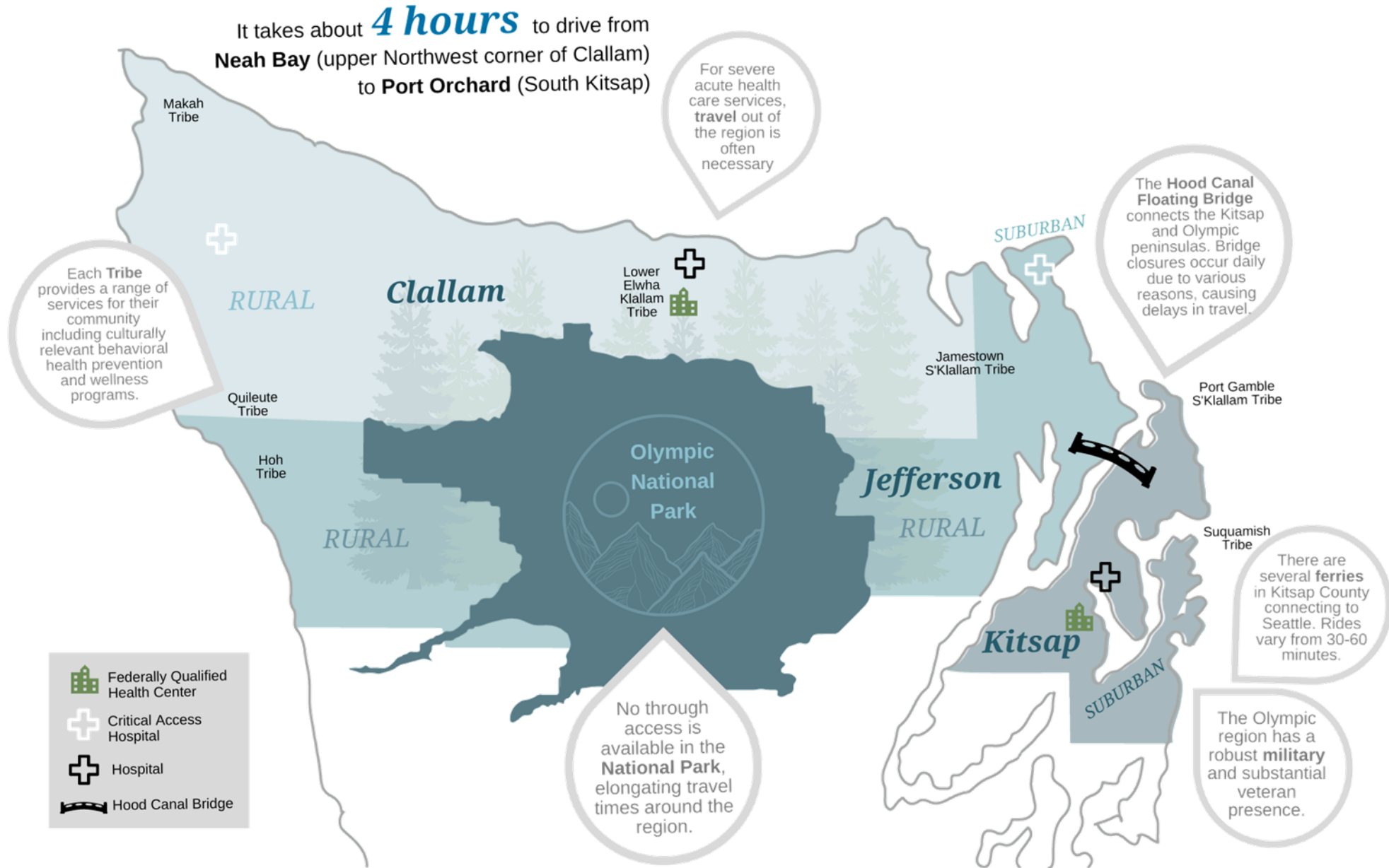


# *Connecting Community Members to Care*

*Collaborative, field-based  
approaches across the  
Olympic Region*

- **Improving patient experience and outcomes**
- **Preserving emergency services**
- **Reducing costs**

# The Olympic Region







Improve individual and population health and advance **equity** by addressing the **determinants of health**



Reduced stigma of substance use disorder



Access to full spectrum of care



Individual needs are met timely, easily, and compassionately



Long-term, affordable, quality housing

# STRATEGIES



Convening, learning, & maximizing



Funding coordination



Advocacy & engagement



Data sharing & transparency



Communication



Place-based approaches

# The Connecting Community Members to Care report...

- **Demonstrates the value and impact** of local programs
- **Elevates** creative ideas
- **Advocates** for sustainable solutions
- **Provide a tool** for partners and decision makers
- **Supports regional efforts** to meet individual needs timely, easily, and compassionately





**Meeting people where they are to provide timely, compassionate care. Programs and services aim to meet the unique needs of the diverse communities in the Olympic region.**

- **Community paramedicine**
- **Co-Response**
- **Mobile-integrated health**





# The role of first responders

*“I know I’m not fixing anything; I’ll see them again.  
It’s like the same house catching fire every third day.”*

## Historically:

Acute intervention  
for emergent needs

- Trusted resource
- First and sometimes only point of contact

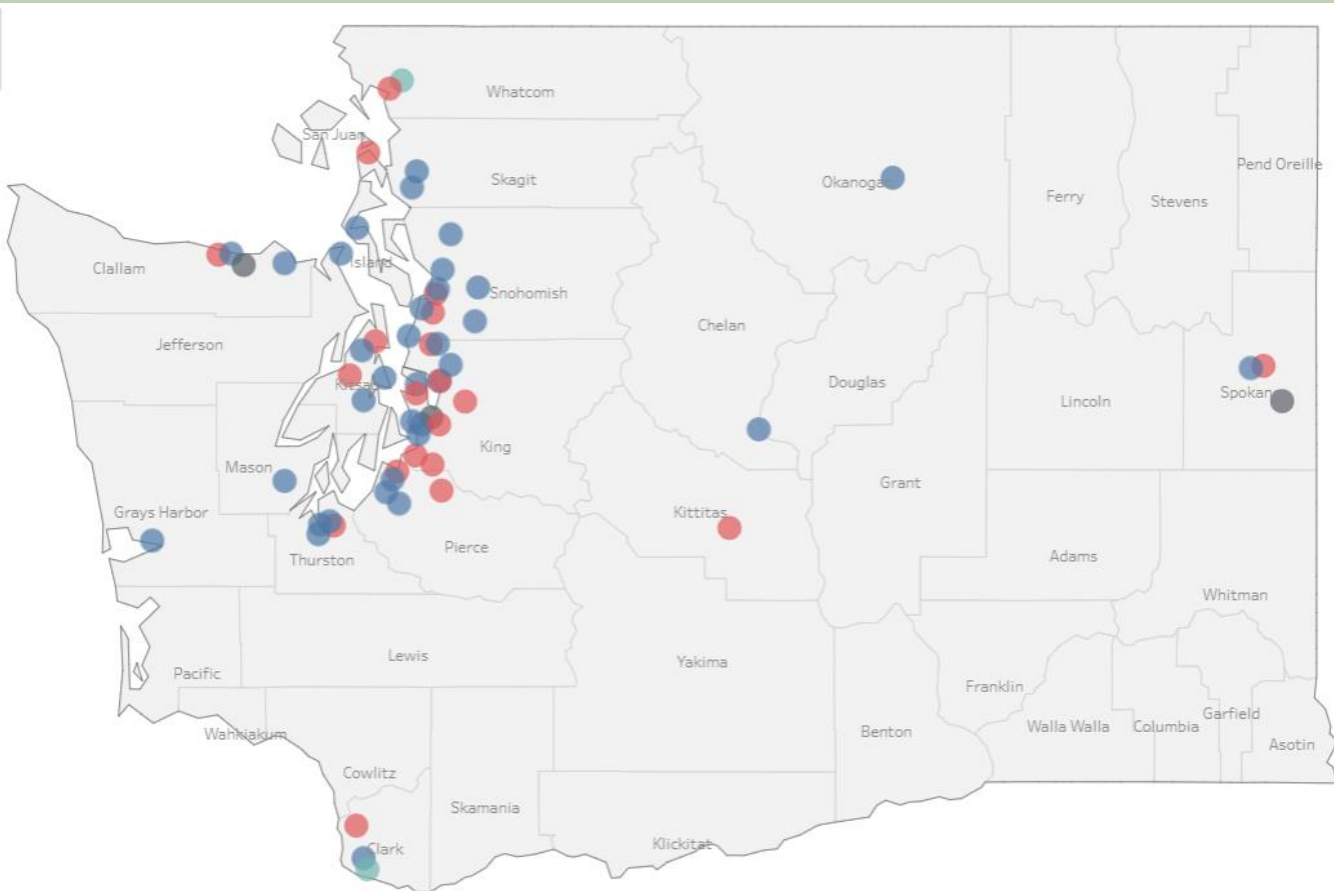
## Today:

Higher and more frequent volume of non-emergent calls  
Chronic conditions  
Unsolvable in single visit

**Increased costs**  
**Taxes limited emergency resources**

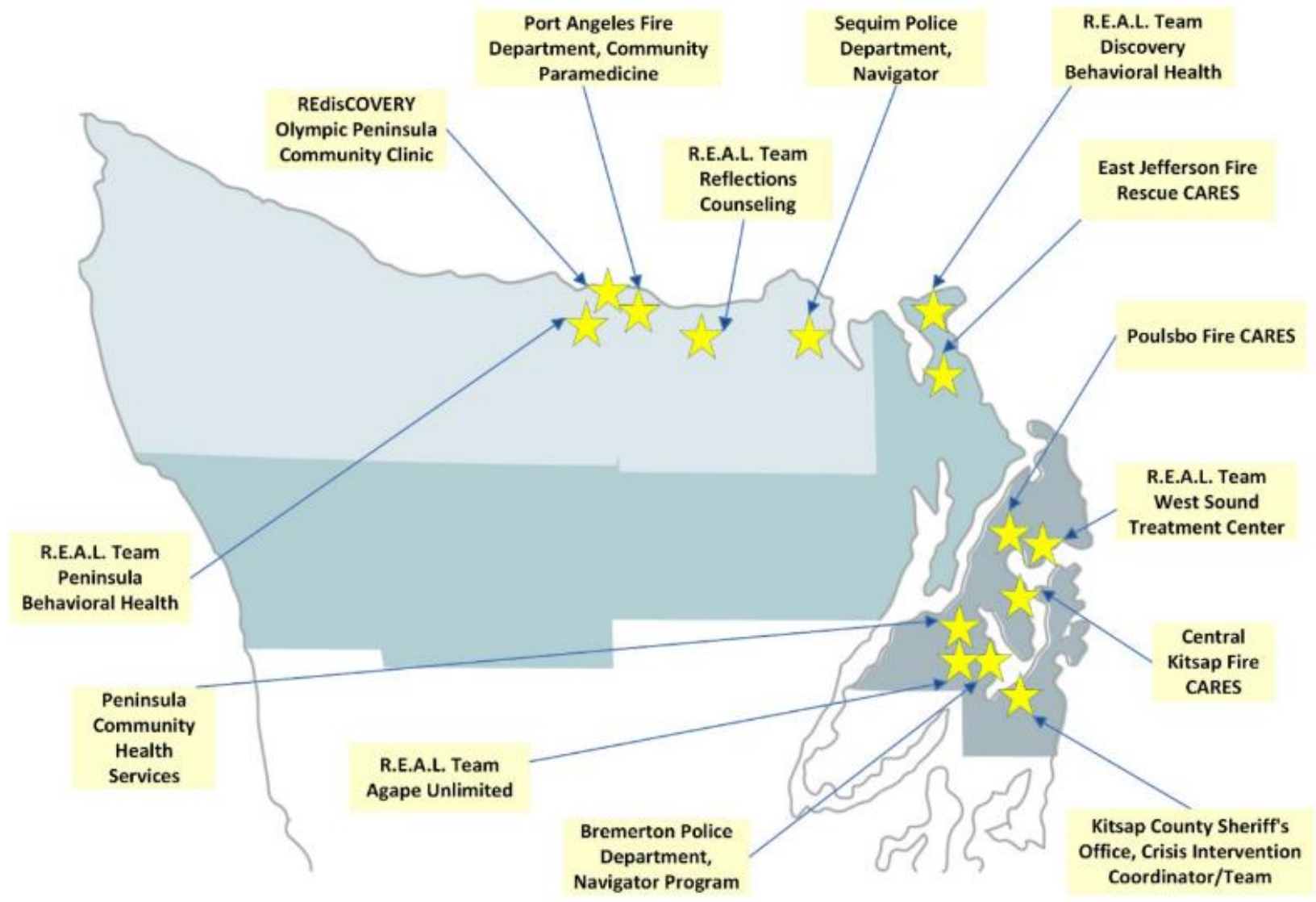
# A larger movement

*“We can't control what people call 9-1-1 for. We can control how we respond.”*



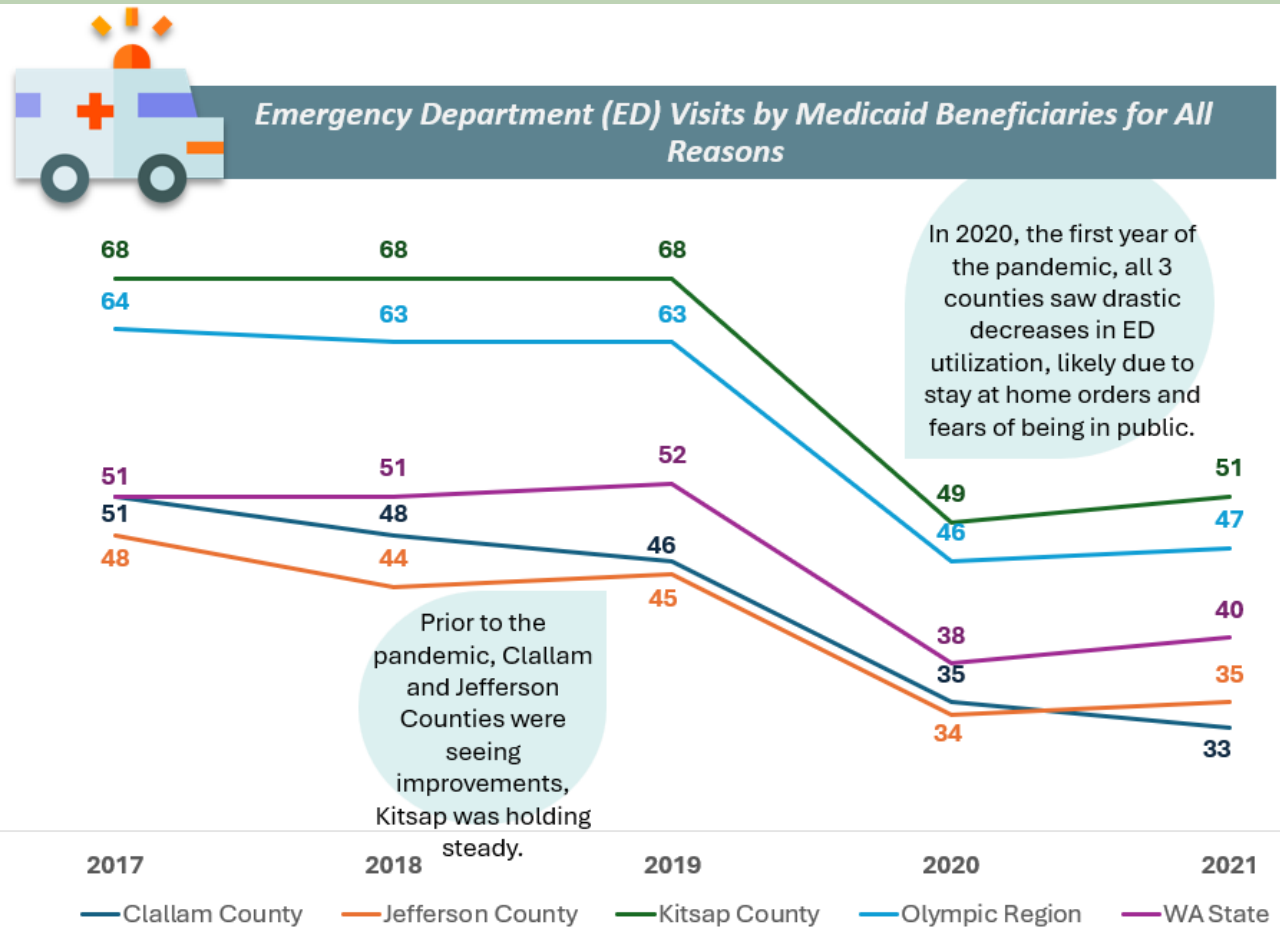
**More than 400 programs  
across 40 states (2023)**

Figure 4



# Local needs

“Visits are exceeding pre-pandemic levels.”



Source	<a href="#">Health Care Authority</a>
Population Measured	Medicaid Beneficiaries
Definition	The rate of community members enrolled in Medicaid with visits to an emergency department, including visits related to mental health and substance use disorder.
Key Code	A lower rate is better
Measure	Rate is calculated per 1,000 Medicaid Member Month
OCH Focus Area	All Focus Areas

**ED utilization is high**

**Limited resources:**  
 Primary care  
 Specialty care  
 Behavioral health  
 Resources for aging



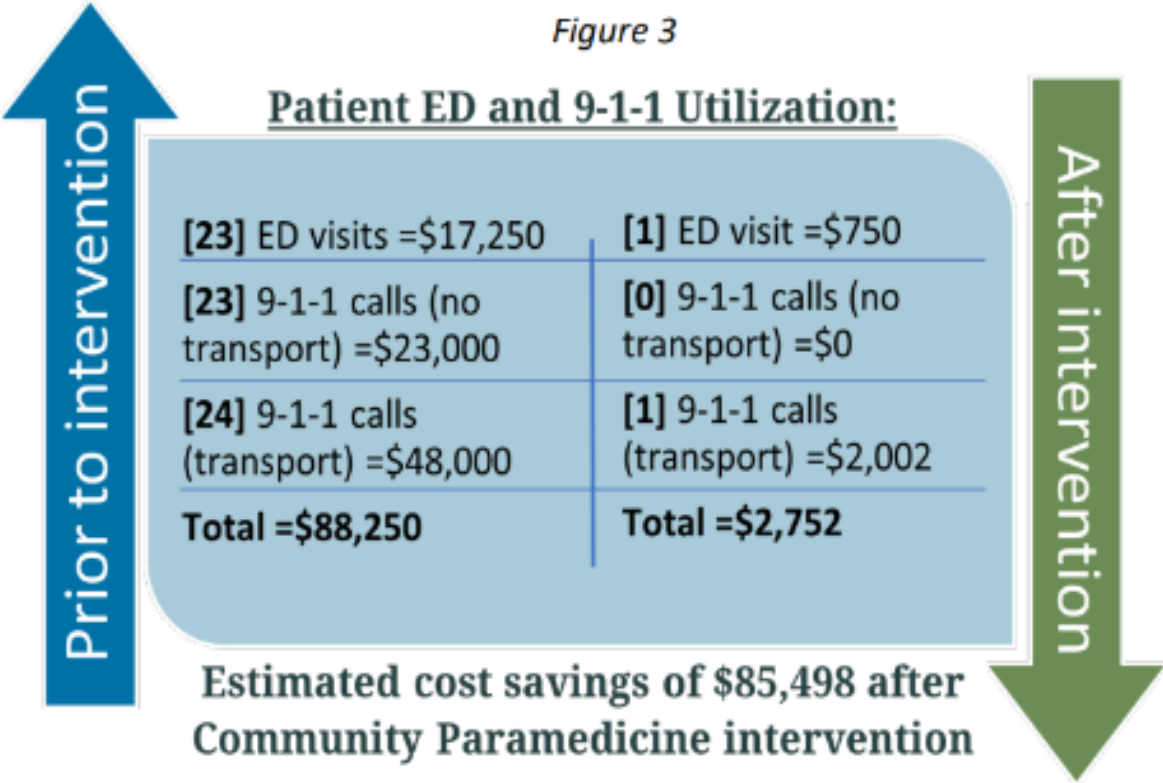
# Partner successes:

*“Within 1 year of engaging with the community paramedicine program the patient's 9-1-1 calls decreased by 35%.”*



Figure 3

### Patient ED and 9-1-1 Utilization:



## Partner successes: Central Kitsap Fire & Rescue CARES

This Community Assistance, Referral, and Education Service is a partnership between Central Kitsap Fire & Rescue and the City of Poulsbo that connects people with support and services that meet their individual needs.

- 289 referrals received and 186 people assisted January-June 2023
- 27 individuals connected to care January-June 2023
- 19 avoided 9-1-1 calls because of on-scene activity/home visit and 20 times fire crews relieved in the field January-July 2023





## Partner successes: Poulsbo Fire CARES program

**Poulsbo Fire CARES is a collaboration between the Poulsbo Fire Department and the City of Poulsbo that serves community members facing behavioral health-related issues and chronic medical conditions.**

- 299 referrals received and 257 people assisted January-June 2023
- 88 individuals connected to care January-June 2023
- 74 avoided 9-1-1 calls because of on-scene activity/home visit and 7 times fire crews relieved in the field January-July 2023



## Partner successes: Kitsap County Sheriff's Intervention Coordinator

The Crisis Intervention Coordinator (CIC) works to divert people experiencing mental health needs away from the criminal justice system and toward treatment through referrals to the proper social agencies.

In 2022:

- 204 unique community members served
- 391 interactions with clients
- 48 referrals to local R.E.A.L. Teams





# Partner successes: Bremerton Police Department Behavioral Health Navigator Program

**Navigators collaborate with Bremerton police officers to co-respond to calls that involve individuals experiencing suicide ideation, mental or behavioral health, child protective services, adult protective services, or complex health issues.**

**In 2022:**

- 506 referrals to navigators
- 558 individuals contacted by navigators
- Almost 75% of individuals contacted accepted help

# Partner successes: Salish R.E.A.L Teams

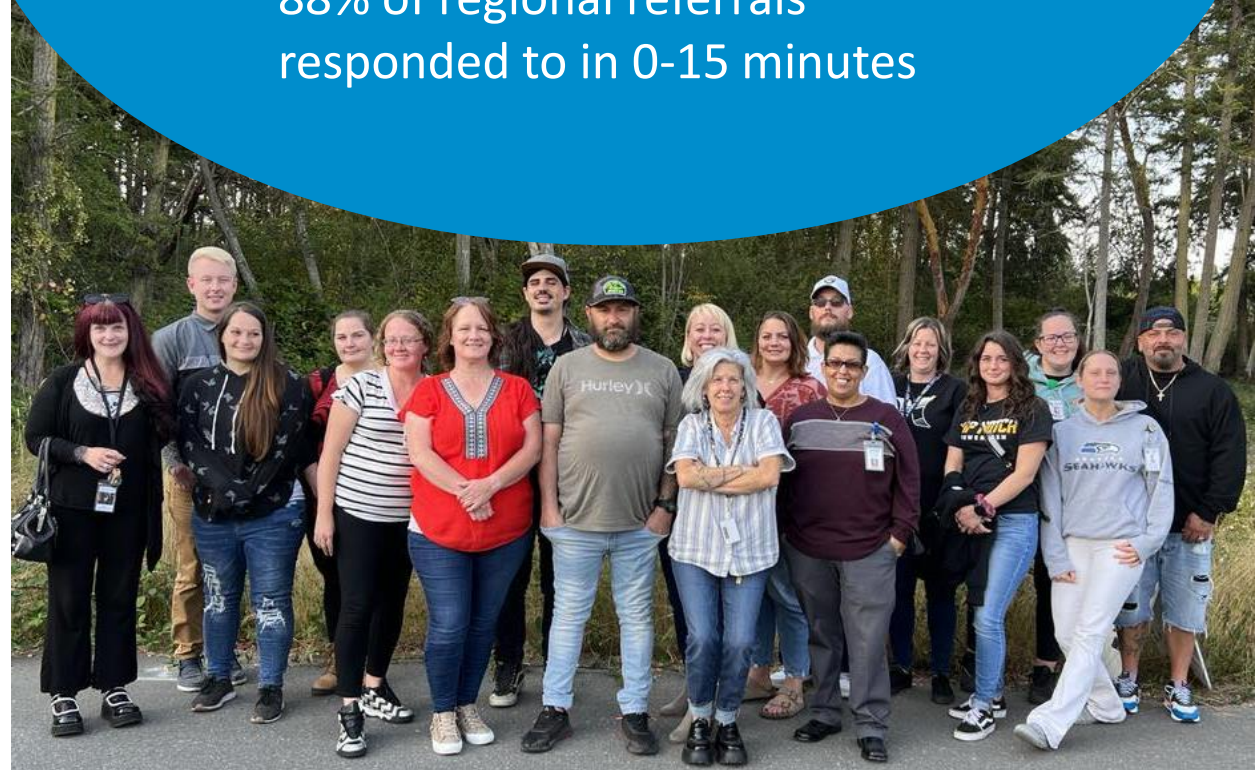
R.E.A.L. (Recovery, Empowerment, Advocacy, and Linkage) Teams are a client-driven, harm reduction model to support individuals along their recovery journey, at their individual pace. Each R.E.A.L. Team consists of a project manager to engage community and conduct outreach, a case manager, and two recovery coaches to directly respond to referrals.

R.E.A.L. Teams provide 24/7 support and respond within 90 minutes to referrals received.

1,731 individuals served 2022-23:

- Clallam: 874
- Kitsap: 700
- Jefferson: 157

88% of regional referrals responded to in 0-15 minutes



## Partner successes:

### Bremerton Ambulatory Team (BAT)

In 2020, Peninsula Community Health Services collaborated with the Bremerton Fire Department to establish the Bremerton Ambulatory Team. That team consists of a medical provider, medical assistant, and community health worker, as well as support from behavioral health professionals. They reduce the number of non-emergent EMS calls by meeting people where they are.





# Key takeaways

## Successes

- Reduced stress on emergency response systems and improved 9-1-1 response to complex needs
- Collaboration across multi-disciplinary partners and bi-directional referrals
- Collaboration across programs to improve care delivery
- Services tailored to the skills of available workforce

## Challenges

- Administrative burden
- High caseloads
- Limited and insecure funding (sustainability)
- Inconsistent standards, training, and measures of success across programs

# Suggestions for programs



Invite elected officials to see your work first-hand.



Build up ability to track quantitative data in addition to the qualitative stories.



Collaborate with key community partners such as hospitals, behavioral health teams and programs, Managed Care Organizations, and local referral sources to better coordinate response.



Coordinate with other like programs to standardize data collection and analysis.



Conduct, or partner with, a community needs assessment to understand the unique challenges and needs of the community.



Use a broad spectrum of data, including EMS, to inform program planning and quality improvement.



Plan for program expansions over time to meet increasing referrals.



Consider incorporating telehealth into the broader spectrum of care.

# Call to Action

## Community partners

- Partner with and make referrals to/from your local program
- See a need? Consider expanding or replicating a program
- Create standards for skills, training, and education across programs
- Advocate to include as a Medicaid reimbursable service

## Elected officials

- Learn more and direct connect with programs operating in your district
- Add these services as a Medicaid covered benefit
- Support policies, bills, and laws that create sustainable funding

## OCH

- Create opportunities for collaboration
- Elevate regional challenges and opportunities to decision makers
- Partner across ACHs to collaborate and advocate
- Share innovative successes
- Consider these partners in renewal waiver planning



# Questions?



We want to partner with YOU.  
Sign up for the newsletter at  
[olympicch.org](https://olympicch.org)

Connect with a team member at  
[OCH@olympicch.org](mailto:OCH@olympicch.org)

# St. Michael Medical Center

**Chad Melton**

*President*

*St. Michael Medical Center*

*April 2, 2024*



# SMMC at a Glance





# Caring for Our Community

We provide convenient access to high-quality, cost-effective health care facilities and providers.

While that includes access to hospital care, we also work hard to provide health care services outside our hospital, keeping residents healthy closer to home.



**336-bed Medical Center**, new Medical Tower, Level II Trauma Center, Cancer Center, Medical Pavillion



Expanding access to primary care with new **Family Medicine Clinic** in Bremerton; **family medicine + obstetrics residency program**



24/7 **hybrid ED/urgent care centers**



Partnered with Contessa to operate **VMFH Home Recovery Care**, currently at St. Joseph Medical Center, with plans to expand

# Tower Expansion Project Underway

- Groundbreaking ceremony on Oct 4, 2023
- 74 additional acute care beds
- **Total capital investment ~\$105M**
- Expansion enables SMMC to support more acute services in Kitsap
- Decompress emergency room boarding





# SMMC Operational Improvements



**Leapfrog 'A' safety grade** for 12 consecutive cycles

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Added **100 new RNs** in 2023; **96% nurse residency retention** rate (yr 1) since 2020

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**CMS 4-star rating;** improvement in 4 of 5 categories

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**Lower staff turnover**  
15.2% vs 22.1%

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**Improved patient experience** from 18th percentile to 49th in 2023

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**Improved nursing turnover** of 10% in FY24 vs 20.5% in year prior

# An Economic Growth Engine

**Health care systems are community-building engines.** Talented potential employees considering moving to a new area prioritize foundational resources like the quality of schools and availability of medical care. Not only that, but **high-quality health care is something our communities deserve.**

## Annually in Kitsap, VMFH and SMMC support:



1,800 births



13,200 surgical procedures performed



\$54.6M in community benefit



14,400 admissions



360,000 outpatient visits



2,500 employees; largest private employer in Kitsap



80,000 ER visits; busiest ED in Wash.



Fastest door-to-balloon times for heart attacks



\$252M annual payroll

# Investing in the Kitsap Community



# Investing in the Kitsap Community

Community benefit reflects our responsibility to improve the overall health of the community by **providing care for all and making meaningful investments necessary for a healthy population.**

Another way we invest in Kitsap is through our **support of patients enrolled in Medicare and Medicaid.**

- **80% of our patients** are covered by these programs
- Medicare reimburses **only 75%** of the cost of their care; Apple health **reimburses at 48%**
- SMMC nonetheless ensures these patients have **access to all the high-quality care we provide.**

## COMMUNITY BENEFIT



**\$2.5 Million**  
Charity Care



**\$37.5 Million**  
Uncompensated Care  
(Unreimbursed cost of providing Medicaid services)



**\$54.6 Million**  
Community Benefit  
(Charity care + uncompensated care + community programs)

# Investing in the Kitsap Community

In keeping with our mission of caring for all in the community, we dedicate significant resources to programs and services that **increase access to health care for the vulnerable and uninsured and improve the health of our community**. VMFH donated a total of **\$1.7M** to community organizations in FY23, including the following:

## IN-HOME & RESPITE CARE

**\$190,000+**

- Benedict House
- Bremerton Medical Respite Center
- KC Help

# Investing in the Kitsap Community

MENTAL & BEHAVIORAL HEALTH

**\$150,000+**

- North Kitsap Fishline Counseling
- Olympic Community of Health
- Pacific Hope and Recovery Center
- Wellfound Behavioral Hospital
- Kitsap Mental Health Services



# Investing in the Kitsap Community

HEALTH EQUITY & PRIMARY CARE

**\$380,000+**

- Project Access Northwest
- Peninsula Community Health Services
- Marvin Williams Recreation Center
- Kitsap Immigrant Assistance Center
- YMCA of Pierce and Kitsap Counties

# Building Tomorrow's Healthcare Workforce

*Partnership with Olympic College and Kitsap County*

- **Virginia Mason Franciscan Health donated \$2.5M to Olympic College** in support of building a new regional health sciences campus at the college's Poulsbo location
- Partnership will **add capacity for more than 600 students annually** to health sciences programs over the next four years



# Advancing Health Equity

## More in Common Alliance

- CommonSpirit's **10-year, \$100M initiative** to address health inequities
- **Partnership with Morehouse School of Medicine** will address lack of representation among care providers
- Hosted event in Bremerton in Feb.





# Challenges.

# Challenges Facing Healthcare



# Commitment to Kitsap

# Commitment to Kitsap

- **CARES program** with local fire departments to see patients in their homes
- **Toy drives** for kids in the hospital
- **Port Orchard Food Bank** disaster relief, VMFH first to respond
- **Equipment donations** to local organizations





# Commitment to Kitsap



Thank you.