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## Community Benefit Report

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**Annual Report and Plan for Community Benefit  
Casa Colina Hospital and Centers for Healthcare  
Fiscal Year 2024 (April 1, 2023 – March 31, 2024)**

Submitted to:  
Department of Health Care Access and Information  
Accounting and Reporting Systems Section  
Sacramento, California

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## About Casa Colina Hospital and Centers for Healthcare

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### History

Casa Colina is a nonprofit, freestanding, community-governed organization based in Pomona, California. We have been privileged to bring the benefits of rehabilitation to tens of thousands of people since our first patient in 1938.

In 1936, Frances Eleanor Smith founded Casa Colina in response to the tragic polio outbreak. In a hacienda-style house in Chino, California, she created a place to care for young children with polio and teach them how to regain their mobility and self-esteem. In the process, her team developed breakthrough physical therapy modalities for polio patients. As more medical professionals throughout the country learned about the success of these polio disease treatments, other patients began to benefit from these modalities. In fact, President Franklin D. Roosevelt recognized this groundbreaking rehabilitation therapy work.

After the development of a vaccine by Jonas Salk, which led to the near eradication of polio in U.S. in the early 1950s, Casa Colina broadened its services to care for patients of all ages with physical injuries and disabilities. True to Mother Smith's legacy, Casa Colina has been recognized throughout the nation as the first to introduce many of the modalities that are implemented in rehabilitative care today.

### Today

Casa Colina Hospital and Centers for Healthcare has grown into a network of integrated services. The Hospital operates under the corporate umbrella of Casa Colina, Inc. (CCI). The hospital provides services through its acute rehabilitation unit, medical-surgical unit, intensive care unit, surgical suites, outpatient therapy center, physician specialty clinics, satellite outpatient clinics in Azusa, and a pediatric outpatient clinic. Other Casa Colina entities extend the continuum of care and include the Transitional Living Center, long-term residential care facilities in Apply Valley and Lucerne Valley, a diagnostic imaging center, and an adaptive sports and recreation program.

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## Mission, Vision, and Values

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### Mission

Optimize medical recovery and rehabilitation outcomes for all patients in a safe environment that respects their dignity, diversity, and individuality.

### Vision

Leading and defining excellence in specialized medical, surgical, and rehabilitative care.

### Values

Apply clinical excellence, education, and research to enhance quality of life in the communities we serve, with a commitment to compassion, collaboration, and integrity.

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## Awards and Recognitions

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Casa Colina was the recipient of awards and accolades in FY24.

- Five Stars from the Centers for Medicare & Medicaid Services (CMS) for Overall Hospital Quality
- Healthgrades 100 Best Hospitals for Spine Surgery
- Healthgrades Joint Replacement Excellence Award
- Healthgrades Five-Star Recipient for Spinal Fusion Surgery
- Healthgrades Five-Star Recipient for Total Hip Replacement
- Healthgrades Five-Star Recipient for Total Knee Replacement
- Healthgrades Joint Replacement Excellence Award
- Healthgrades Spine Surgery Excellence Award
- Healthgrades Hospital Quality Award for Outstanding Patient Experience
- Designated Blue Distinction Center+ for Knee and Hip Replacement
- *Inland Valley Daily Bulletin* Readers' Choice Awards for regions "Favorite Hospital" and "Best Physical Therapy Center"

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## Inpatient Hospital Services

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Our specialized inpatient rehabilitation programs have earned national recognition for excellence in addressing neurological and orthopedic conditions, with a continuum of medical and rehabilitative care for patients recovering from brain injury, stroke, spinal cord injury, and orthopedic injury and disease. With experienced, multidisciplinary care teams, we tailor each rehabilitation program to the unique needs of the patient.

### **Acute Rehabilitation Unit**

Casa Colina provides inpatient rehabilitation services in a 68-bed Acute Rehabilitation Wing, treating a range of neurological and orthopedic conditions including brain injury, spinal cord injury, stroke, respiratory disorders, multiple traumas, wounds, and burns. Patient care is supervised by a physician specializing in physical medicine and rehabilitation. The rehabilitation services offer innovative technology and equipment that includes therapy gyms, outdoor therapy gardens, hyperbaric chambers, and an assistive technology center.

### **Medical-Surgical Unit and ICU**

Casa Colina Hospital provides a range of inpatient medical-surgical services and has three spacious surgical suites with the most advanced surgical technology, a multi-modality procedure room, a six-bed Intensive Care Unit, and 25 private medical-surgical telemetry beds. The region's top surgeons perform highly specialized surgical procedures using robotic technology for minimally invasive procedures.

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## Outpatient and Other Services

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Casa Colina offers outpatient services to treat orthopedic and neurological conditions. Casa Colina also offers specialty programs for spine and back pain, audiology, sports medicine, adaptive driver training, exoskeleton/robotic-assistive technology, lymphedema, and technology for balance and vestibular issues. Our therapists hold specialty certifications in neurology, orthopedics, pediatrics, and other specialized care.

### **Outpatient Center**

Casa Colina's Outpatient Center offers physician specialty clinics, diagnostic imaging center, physical therapy, occupational therapy, speech-language pathology, and neuropsychology and

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psychological services. A variety of interdisciplinary therapy services are provided for people with functional impairments due to neurological or orthopedic injuries, surgeries, or disease. Certified hand therapy, aquatic therapy, and sports medicine services are also provided.

### **Children’s Services Center**

Casa Colina offers programs for children, ages one month to 15 years, with various disabilities or developmental disorders. A Pediatric Neurologist specializing in the area of Autism Spectrum Disorders provides assessments of children with cognitive and physical delays. Physical, occupational, and speech therapists and early intervention specialists offer services in key areas of development: gross motor skills, fine motor skills, expressive language skills, receptive language, cognitive skills, socialization, and self-help.

### **Azusa Center**

The Casa Colina Azusa Center is a hospital-based outpatient facility treating patients with orthopedic and neurological conditions. Azusa Center offers physical and occupational therapies, speech-language pathology, certified hand therapy, and sports medicine.



### **Physician Specialty Clinics**

Casa Colina’s physician specialty clinics feature many medical specialists working in one location. They treat Multiple Sclerosis, Ehlers-Danlos Syndromes, Parkinson’s disease, cardiology, geriatrics, wound care, and more.

Our physicians collaborate with experienced therapy teams to treat a range of medical conditions. Our Physical Medicine & Rehabilitation (PM&R) physicians enhance and restore functional ability and quality of life to people with physical impairments and disabilities. Our Infectious Disease specialists treat acute and chronic infections of known and unknown etiologies.

### **Outdoor Adventures and Wheelchair Sports**

The Outdoor Adventures and Wheelchair Sports program provides adaptive recreation experiences and wheelchair sports opportunities to individuals with a wide range of disabilities. This therapeutic program emphasizes ability over disability and encourages participants to experience physical and emotional success.

### **Residential Care**

Accredited by the Commission on Accreditation of Rehabilitation Facilities, Casa Colina's Transitional Living Center (TLC) is a 53-bed short-term residential rehabilitation facility that offers a bridge between acute rehabilitation and home. Through rigorous daily therapy, TLC residents experience significant gains in physical and cognitive abilities. In addition to residential rehabilitation, the TLC offers day treatment and advanced day treatment services.

### **Long-term Residential Care**

Casa Colina's satellite locations in Apple Valley and Lucerne Valley provide structured or semi-independent living programs to meet the unique needs of individuals with traumatic brain injury. Our Padua Village Residential Program in Claremont is home to 12 licensed beds for adults with developmental disabilities.

### **Research Institute**

A distinction of Casa Colina is the Research Institute, which conducts translational and clinical



research to measure the impact of rehabilitation treatments, identify new interventions, and improve outcomes. Casa Colina collaborates with leading scientists and researchers at academic institutions, including the California Institute of Technology,

Harvard Medical School, UCLA, and USC, as well as local universities and innovative technology companies.

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## Governance

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The responsible oversight and forward-thinking leadership of the Board of Directors enable Casa Colina to continue to grow in dynamic ways and evolve into one of the country's top medical and rehabilitation facilities. The Board is comprised of physicians, community leaders, and former patients. The Board of Directors provides oversight for the hospital's community benefit program.

### Executive Committee

Gary E. Cripe, Chairman  
Philip Feghali, Vice Chairman  
Kelly M. Linden, President  
Terrance Johnson, Secretary  
Thomas Reh, Treasurer  
Randy Blackman, Past Chairman  
Michael Bien, MD, Chief of Medical Staff

### Directors-at-Large

Steven C. Bast, MD  
Veronica Diaz Cutler, Esq.  
Bruce Pasqua  
Cathy Watrous  
Daniel Wilson, MD, PhD  
Richard Young

### Directors Emeriti

Samuel Crowe  
Stephen Graeber  
Mary Lou Jenson  
Steve Norin



## Caring for Our Community

Casa Colina Hospital and Centers for Healthcare has always been a place of extraordinary hope. For the thousands we serve each year, we are often the last stop on the road to recovery, providing a continuum of rehabilitation services unmatched in our region. For others needing specialized medical-surgical care, we're the first step toward a healthier life. For all our patients and families, our services offer the hope for increased independence, functionality, and vitality.

Casa Colina's impact in the community is felt in many ways, from providing financial assistance to under- or uninsured patients and offering prevention and awareness programs to keep the community healthy, to providing education and training to current and future healthcare professionals. Additionally, Casa Colina invests in the community to increase access to healthcare services and improve health.

### Service Area

Historically, Casa Colina has defined the community it serves as persons with or at risk of disability. These are persons who can benefit from medical and rehabilitation interventions to prevent, remediate, or delay progression of disabling conditions and their impact on function, independence, and quality of life.

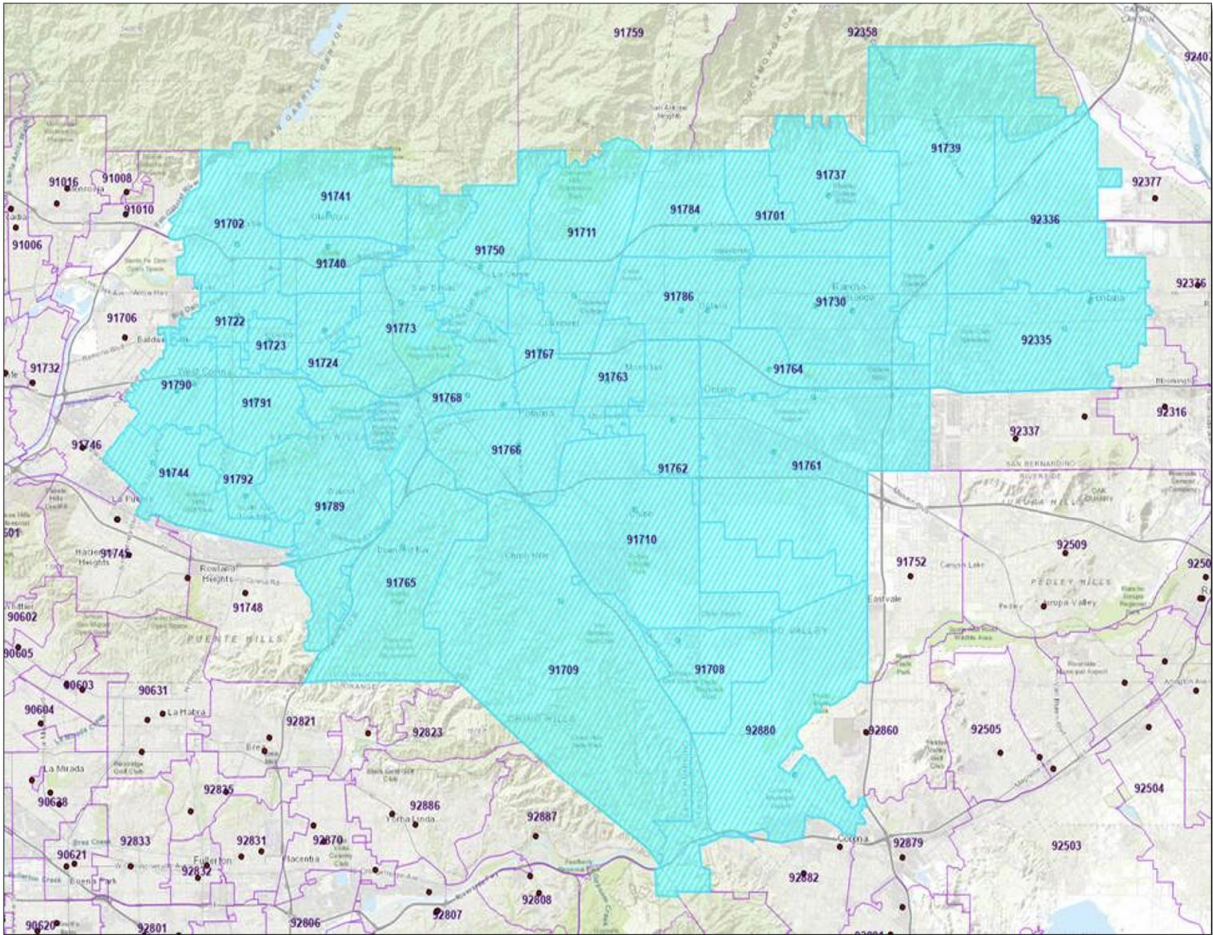
Casa Colina Hospital (CCH) is located at 255 E. Bonita Ave, Pomona, CA 91767. The hospital defined its primary services area as including 34 ZIP Code Tabulation Areas (ZCTA) located within Los Angeles County Service Planning Area 3 (San Gabriel Valley), Los Angeles County and San Bernardino County.

**Casa Colina Hospital Service Area**

Place	ZIP Code	County	Place	ZIP Code	County
<b>Azusa</b>	91702	Los Angeles	<b>Ontario</b>	91761	San Bernardino
<b>Chino</b>	91708	San Bernardino	<b>Ontario</b>	91762	San Bernardino
<b>Chino</b>	91710	San Bernardino	<b>Ontario</b>	91764	San Bernardino
<b>Chino Hills</b>	91709	San Bernardino	<b>Pomona</b>	91766	Los Angeles
<b>Claremont</b>	91711	Los Angeles	<b>Pomona</b>	91767	Los Angeles
<b>Corona</b>	92880	Riverside	<b>Pomona</b>	91768	Los Angeles
<b>Covina</b>	91722	Los Angeles	<b>Rancho Cucamonga</b>	91701	San Bernardino
<b>Covina</b>	91723	Los Angeles	<b>Rancho Cucamonga</b>	91730	San Bernardino

Place	ZIP Code	County	Place	ZIP Code	County
Covina	91724	Los Angeles	Rancho Cucamonga	91737	San Bernardino
Diamond Bar	91765	Los Angeles	Rancho Cucamonga	91739	San Bernardino
Fontana	92335	San Bernardino	San Dimas	91773	Los Angeles
Fontana	92336	San Bernardino	Upland	91784	San Bernardino
Glendora	91740	Los Angeles	Upland	91786	San Bernardino
Glendora	91741	Los Angeles	Walnut	91789	Los Angeles
La Puente	91744	Los Angeles	West Covina	91790	Los Angeles
La Verne	91750	Los Angeles	West Covina	91791	Los Angeles
Montclair	91763	San Bernardino	West Covina	91792	Los Angeles

**Service Area Map**



**Community Snapshot**

Casa Colina conducted its most recent Community Health Needs Assessment (CHNA) in FY24. The population of the hospital service area is 1,660,878 persons. Children and youth, ages 0-17,

make up 23.7% of the population, 63.6% are adults, and 12.7% of the population are seniors, ages 65 and older. Over half (53.9%) of the population in the service area are Hispanic or Latino residents, and 20.5% are non-Hispanic White residents. 16.8% are Asian residents, 5.3% are Black or African- American residents, and 2.7% of the population are multiracial (two or more races) residents; 0.3% of the area population are a race and ethnicity not listed, 0.3% are American Indian or Alaskan Native residents, and 0.2% are Native Hawaiian or Pacific Islander residents. The service area has a lower percentage of White residents, Black or African American residents, and multiracial residents, and a higher percentage of Asian residents, than Los Angeles County and San Bernardino County.

In the service area, 49.7% of the population, ages 5 and older, speak only English in the home, while 34.8% of the population speak Spanish in the home. 12.4% speak an Asian or Pacific Islander language, 1.9% speak another Indo-European language, and 1.2% speak some other language in the home.

The median household income for the hospital service area is \$89,969. The average high school graduation rate in the service area is 83.4%, which does not meet the Healthy People 2030 objective for high school graduation (90.7%). 92.3% of the residents in the service area have health insurance.

### Vulnerable Populations

- In the service area, 10.2% of the residents are at or below 100% of the federal poverty level (FPL), and 26.5% of the population are considered low income, living at or below 200% of FPL.
- 4% of the civilian population, 18 years and older, are veterans.
- In Los Angeles County Service Planning Area 3 (SPA 3), which represents the San Gabriel Valley area, 2.6% of the adult population identify as gay, lesbian, or homosexual.
- From February 2022 to January 2023, there was a 7.5% increase in the total count of people experiencing homelessness in LA County SPA 3, excluding Pasadena. In that same period, San Bernardino County experienced a 25.9% increase in persons experiencing homelessness.
- 9.6% of the service area population has a disability. Among children under age 18, the rate is 3.1%. Among adults, ages 18 to 64, 7.3% have a disability. Among service area seniors, ages 65 and older, 33.7% have a disability. In the service area, 2.9% of the population under age 18 have a cognitive disability. Among the adult population, ages 18 to 64, 3% have a cognitive disability and 3.3% have an ambulatory disability. Among adults, ages 65 and older, 22.5% have an ambulatory disability and 12.4% have a hearing disability.

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## Community Health Needs Assessment Summary

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Casa Colina approved its most recent CHNA in February 2024. The CHNA is a primary tool used by Casa Colina to determine its community benefit plan, which outlines how it will give back to the community in the form of healthcare and other community services to address unmet community health needs. The assessment incorporated components of primary data collection and secondary data analysis that focused on the health and social needs of the service area. The report includes benchmark comparison data that measure the data findings as compared to Healthy People 2030 objectives. Healthy People 2030 is a national initiative to improve the public's health by providing measurable objectives that are applicable at national, state, and local levels.

Casa Colina conducted targeted interviews to gather information and opinions from people who represent the broad interests of the community served by the hospital. Fourteen (14) interviews were completed in August and September 2023. Leaders and/or representatives of medically underserved, low-income, and minority populations, as well as local health or other departments or agencies that have current data or other information relevant to the health needs of the community, were represented in the sample. Input was obtained from the Los Angeles County Department of Public Health.

Casa Colina Hospital also conducted a survey to gather data and opinions from community residents and persons who represent the community served by the hospital, including underserved residents, community business leaders, past Casa Colina patients living with disabilities, members of Casa Colina's Patient & Family Advocacy Council, and hospital staff. From July 17 to September 25, 2023, 331 useable surveys were received.

### **Significant Community Needs**

Significant needs were identified through a review of the secondary health data and validation through stakeholder interviews and community surveys. The identified significant needs included:

- Access to care
- Chronic disease
- Disabilities
- Housing and homelessness
- Mental health

- Overweight and obesity
- Preventive practices (screenings, vaccines)
- Substance use

### **Prioritization of Health Needs**

The identified significant community needs were prioritized with input from the community. The interview respondents ranked access to healthcare, housing and homelessness, mental health, disabilities, and chronic disease as the top five priority needs in the service area. Among community resident surveys, access to care, chronic disease, and preventive care had the highest scores for important and very important needs in the community.

The complete CHNA report and the prioritized health needs can be accessed [here](#). To provide feedback on the CHNA and Implementation Strategy, please contact 909/596-7733, extension 2232.

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## Community Benefit Activities to Address Priority Health Needs

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In FY24, Casa Colina engaged in activities and programs that addressed the priority health needs identified in the FY22-FY24 Implementation Strategy. Casa Colina has committed to community benefit efforts that address access to healthcare and preventive care, chronic diseases, disabilities, and senior health. Activities and programs that highlight Casa Colina's commitment to the community are detailed below.

### Access to Care and Preventive Care

#### Response to Need

##### Financial Aid

Casa Colina provided financial assistance for uninsured and underinsured residents. Following our Financial Assistance Policy, the hospital provided discounted and free healthcare to qualified individuals.

##### Injury Prevention

Throughout the year, Casa Colina Outpatient Therapists conducted free community injury screening clinics and sports medicine clinics for 142 students and athletes who would not otherwise be able to access these services.

##### Community Outreach and Education

Casa Colina collaborated with local educational institutions, nonprofit business organizations, and human services organizations. Casa Colina staff presented educational and interactive events and offered a variety of screenings at no cost to the community. In FY24, Casa Colina reached over 17,100 persons through involvement in community health efforts.

### Chronic Diseases

#### Response to Need

##### Community Education and Outreach

Multiple community education sessions provided information and resources on:

- Arthritis
- Bone health
- Concussions
- Diabetes
- Exercise
- Foot health

- Hip fractures and hip replacements
- Parkinson’s disease
- Peripheral arterial disease
- Reducing injuries
- Stroke prevention

Over 400 people received community education on chronic disease topics.

### Limb Preservation Program

Individuals with diabetes over time may develop neuropathy and loss of sensation in their lower extremities. With this lack of sensation, blisters and wounds of the feet can quickly become infected and lead to increased risk of lower-limb amputation. In response to this problem, Casa Colina provides a Limb Preservation Program in partnership with Dr. David Armstrong of the USC Keck School of Medicine. The goal of the program is to prevent amputations and their adverse health outcomes. Physician specialists from Casa Colina and USC work with community providers to screen and identify individuals at risk for lower-limb wounds. When patients arrive at a partnering clinic or screening site, those at risk for complications from a foot wound are directed to the appropriate level of care. Some will be given podiatric educational resources to better care for their foot conditions. Others may be referred to Casa Colina’s Wound Care & Hyperbaric Medicine Center. The program also features free foot care screening and a health literacy component designed to increase awareness about diabetic foot care among high-risk patients and community physicians.

### Support Groups

Casa Colina reached 664 people through support groups that provided emotional support and important educational information for individuals, their families, and caregivers. Support groups included

- Acquired Brain Injury (ABI)
- Parkinson’s Disease
- EDS (Ehlers-Danlos Syndrome)
- Fibromyalgia



### Parkinson’s Wellness Group

The Parkinson’s Wellness Group provided 142 education and exercise encounters to improve mobility and communication among persons with Parkinson’s disease.

## Disabilities

### Response to Need

#### Expressive Language Skills

Classes promoted expressive language skills by assisting people with communication difficulties because of stroke, including speech impairments such as aphasia, dysphasia, and word finding. Programs facilitated communication opportunities and improved social interaction. 210 community members were assisted.

#### Professional Education and Training

Casa Colina supported healthcare providers and allied health professionals obtaining training in the care of patients with disabilities and chronic diseases. This was accomplished by offering occupational and physical therapy residency programs in physical rehabilitation, orthopedics, and neurology. The hospital provided training in clinical examination, decision-making, and treatment skills.

#### Social Skills and Quality of Life

Infants, children, and teens with disabilities received specialized services and programs. These programs helped children improve their social skills and quality of life. The hospital offered support, education, and resources for families and caregivers of children with disabilities. Casa Colina assisted 31 children through Kids Crew social skills groups, and 33 teens were provided a social skills training evaluation through Teen Scene.

The Good Game Project reached 48 people in inclusive youth recreation development.

#### Transitional Living Center Semi-independent Housing

Casa Colina provided housing for individuals undergoing neurological recovery at the Transitional Living Center (TLC). The fully furnished residence offered an increased level of semi-independent living for appropriate TLC residents to better prepare them for reintegration into home and community life. The two-bedroom home features ADA-compliant ramps, widened doorways, and accessible bedrooms and restrooms, as well as a kitchen, landscaped yard with raised gardening beds, and convenient direct access to the Casa Colina campus.

#### Community Education and Outreach

Casa Colina provided community education and outreach to raise awareness about the prevention and treatment of disabilities. The hospital participated in seminars, health and wellness fairs, and community education events.



## Senior Health

### Response to Need

#### Injury Prevention and Maintenance of Cognitive Functioning

The hospital provided programs focused on senior injury prevention and maintenance of physical and cognitive functioning. Education sessions dedicated to senior health issues and support groups for seniors and their caregivers were provided.

- Provided no-cost vision assessment and treatment clinic for those suffering from vision impairment due to a neurological diagnosis.
- Educated seniors on how to access care.
- Participated in community outreach providing access to healthcare for seniors.
- Provided a variety of education sessions focused on health, injury prevention, and exercise for seniors.

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## Other Community Benefit Programs

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Casa Colina provided additional community benefit services.

### Health Professions Education

*Definition: education programs for physicians, nurses, nursing students, and other health professionals.*

#### Continuing Medical Education

Casa Colina provided medical education to physicians and other health professionals.

#### Physical Medicine and Rehabilitation

The Physical Medicine and Rehabilitation (PM&R) Residency Program at Casa Colina Hospital and Centers for Healthcare is a three-year comprehensive, structured training and educational program. It is associated with the OPTI-West Medical Education Consortium. The PM&R Residency Program offered training experiences in the latest rehabilitation therapies and technologies. Residents worked with attending faculty members from Casa Colina's medical staff in treating patients. Attending physicians participating in the residency training are board-certified in Physical Medicine and Rehabilitation. Board-certified physicians in other medical disciplines and rehabilitation-related healthcare professionals provided additional teaching and training to PM&R residents.

#### Neuropsychology

Casa Colina's Department of Neuropsychology and Psychology is integrated into interdisciplinary treatment teams across the continuum of care. In FY24, seven fellows were engaged in postdoctoral training.

#### Nursing Education

The hospital served as a training site for nursing students from area colleges and universities. In FY24, 280 nursing students participated in clinical training at Casa Colina.

#### Other Health Professions Education

#### Physical Therapy Residency Programs

Casa Colina's Physical Therapy Residency Programs in Orthopedics and Neurology provided

advanced knowledge and skill in a focused clinical environment. Credentialed by the American Physical Therapy Association (APTA), coursework is designed to accelerate a therapist's professional development while allowing them to achieve clinical excellence in all aspects of patient care. Upon completion of the program, clinicians are eligible to apply for the certified specialty examination offered by APTA.

### **Occupational Therapy Physical Rehabilitation Fellowship Program**

Casa Colina's Occupational Therapy Physical Rehabilitation Fellowship Program provided advanced knowledge and skill in a focused clinical environment. The coursework offered training in clinical examination, decision-making, and treatment skills. It is designed to accelerate a therapist's professional development and help them achieve clinical excellence in all aspects of patient care. Rotations were completed for inpatient rehabilitation, transitional living, and outpatient neurology. Upon completion of the program, clinicians can apply for the board certification offered by the American Occupational Therapy Association (AOTA) in Physical Rehabilitation in three years (versus five years).

In FY24, the hospital provided precepted education for health professions students, including:

- Physical Therapists and Physical Therapy Assistants
- Occupational Therapists and Occupational Therapy Assistants
- Speech-language Pathology students
- Health Care Administration Human Resources students

Casa Colina provided lectures to 155 health professions students, including:

- Demonstrated provisions of rehabilitation services to Occupational Therapists at USC's International OT student program
- Executive Function Interventions lecture for international OT students
- Chorea and Huntington's Disease education

### **Subsidized Health Services**

*Definition: clinical programs that are provided, despite a financial loss. Negative margins remain after removing charity care, bad debt, and shortfalls from Medi-Cal. The services meet a community need and, if not offered, would be unavailable in the area or become the responsibility of the government or another nonprofit organization.*

### **Children's Services Center**

The Children's Services Center offered programs for children from infancy to 15 years old with various disabilities or developmental disorders. A pediatric neurologist specializing in Autism Spectrum Disorders directed the program. Physical, occupational, and speech therapists, as well

as early intervention specialists, provided services.

## Research

The Casa Colina Research Institute conducts basic, translational, and clinical research, striving to rapidly transform scientific advances into improved patient care and outcomes. Research at Casa Colina is a collaboration of doctors, scientists, and other rehabilitation professionals. These projects support the mission, vision, and values of Casa Colina. Our current research studies include outcomes-based research projects, which aim to measure the impact of medical rehabilitation in patients with disabilities, and clinical studies, which aim to identify novel interventions for conditions and impairments treated at Casa Colina.



Clinical Research is essential to developing new effective therapeutic interventions for individuals with medical rehabilitation needs. At the Casa Colina Research Institute, we focus on the major diagnoses at Casa Colina to investigate new interventions and support evidence-based clinical practices for the treatment of disabilities caused by a stroke, traumatic brain injury, spinal cord injury, and other neurologic conditions.

The Casa Colina Research Institute’s clinical research projects include studies related to:

- Brain Injury
- Concussion
- Spinal Cord Injury
- Stroke
- Disorders of Consciousness
- Assistive Technologies

In FY24, Caroline Schnakers, PhD presented the talk, “Challenges in Diagnosis and Prognosis of Persons with Prolonged Disorders of Consciousness: From Theoretical Premises to Clinical Practice,” as well as a poster, “Changes in REM Sleep Duration Following Thalamic Low Intensity Focused Ultrasound Pulsation: Preliminary Data,” at the 14<sup>th</sup> World Congress on Brain Injury.

Additional Casa Colina presentations reached clinicians, scientists, clinical scientists, and administrators:

- The Role of Brain Computer Interfaces (BCI) in the Care Management of Disorders of Consciousness (DOCs), a virtual event at the Brain Computer Interface Conference

- EENACOMA Network, a DOC SIG webinar series
- Advocating Care for DoC, a webinar series at the IBIA DOC SIG
- Clinical Implementation of Neuroimaging (PET) Analyses Pipeline for DoCs, a DOC SIG webinar series
- American Medical Rehabilitation Providers Association (AMRPA) presentation on research

## Cash and In-Kind Donations

*Definition: funds and in-kind services donated to community groups and nonprofit organizations.*

Monetary contributions and donations of staff time and expertise were made to nonprofit organizations that support community benefit efforts and address significant health needs in the community. In FY24 Casa Colina supported nonprofit organizations with cash and in-kind donations that furthered the hospital’s mission and aligned with the community health needs identified through the CHNA.

## Community Benefit Operations

*Definition: direct and indirect costs associated with assigned staff, community health needs assessments, community benefit planning, tracking, reporting, evaluating, and operations.*

In FY24, community benefit operations included:

- Community benefit staff salary, benefits, and expenses
- Administrative support for community benefit
- Completion of the Community Health Needs Assessment
- Community benefit consultants

## Community Building Activities

*Definition: activities that support community assets by offering the expertise and resources of the hospital organization. These activities may address the root causes of health problems or the determinants of health, such as education, homelessness, poverty, and the environment.*

## Advocacy

The hospital participated in in-depth conversations with community partners to heighten awareness and education on wheelchair sports opportunities, how to increase access and lower barriers for persons with disabilities, how to make equipment more accessible, and how to increase inclusiveness in the community.

**Workforce Development**

Students from local high schools learned about healthcare careers. Casa Colina participated in community events focused on healthcare professions to create remarkable opportunities for teaching, learning, and research.

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## Financial Summary of Community Benefit

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Casa Colina Hospital’s financial summary of community benefit for FY24 (April 1, 2023 to March 31, 2024) is summarized in the table below. Casa Colina Hospital’s community benefit costs comply with Internal Revenue Service instructions for Form 990 Schedule H. Costs are based on Casa Colina’s overall cost-to-charge ratio.

<b>Community Benefit Categories</b>	<b>Net Benefit</b>
Financial Assistance <sup>1</sup>	\$88,882
Unpaid Costs of Medi-Cal <sup>2</sup>	\$5,430,873
Education and Research <sup>3</sup>	\$2,599,645
Other for the Broader Community <sup>4</sup>	\$1,393,188
<b>Total Quantifiable Community Benefit</b>	<b>\$9,512,588</b>

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<sup>1</sup> Financial Assistance includes traditional charity care write-offs to eligible patients at reduced or no cost based on the individual patient’s financial situation.

<sup>2</sup> Unpaid costs of public programs include the difference between costs to provide a service and the rate at which the hospital is reimbursed. The methodology for calculating shortfalls in Medi-Cal is based on the hospital's cost-to-charge ratio.

<sup>3</sup> Costs related to the health professions education programs and medical research that the hospital sponsors.

<sup>4</sup> Includes non-billed programs such as community health education, screenings, support groups, clinics, support services, cash and in-kind donations, and community benefit operations.

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## Community Benefit Plan FY25

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Casa Colina Hospital continues to implement activities and programs to address the priority health needs in our service area.

### Significant Needs the Hospital Intends to Address

Casa Colina intends to take actions to address the following health needs that were identified in the FY24 CHNA and detailed in the FY25-FY27 Implementation Strategy:

- Access to healthcare
- Chronic diseases
- Disabilities
- Preventive care

### Access to Healthcare and Preventive Care

**Goal:** Increase access to the most appropriate level of healthcare and improve community health through preventive practices.

### Strategies

1. Provide financial assistance for healthcare services consistent with Casa Colina's financial assistance policy.
2. Provide free health information, screenings, and resources at community events.
3. Provide free community sports injury screening clinics.
4. Offer free audiology screenings.
5. Provide education on healthy aging, prevention, treatment, and wellness.
6. Provide website educational resources for brain injury, spinal cord injury, and stroke.
7. Provide programs for injury prevention and maintaining physical and cognitive functioning (i.e., vestibular balance screening).
8. Provide seniors with specialized fitness programs.
9. Provide specialized evaluation services (i.e., our senior evaluation program that gives seniors and their family a comprehensive look at the aging process and gives recommendations for regaining function and maintaining health).
10. Communicate to service area residents how to access healthcare services through established communication methods and social media.

### Impact

The anticipated impact of these actions will be to:

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- Provide financial assistance to qualified patients.
- Increase availability and access to healthcare, screenings, and preventive care services.
- Prevent injury and improve health and well-being.

### **Chronic Diseases**

**Goal:** Reduce the impact of chronic diseases for individuals who have short- and long-term disabilities and increase focus on prevention, education, and treatment.

#### **Strategies**

1. Provide access to specialized gyms and aquatic exercise programs through the community fitness program.
2. Provide education on pain management, disease prevention, treatment, and wellness.
3. Provide support groups for individuals with chronic diseases (stroke, brain injury, Multiple Sclerosis, Parkinson’s disease, cardiovascular disease, and fibromyalgia, etc.) and their families.
4. Provide programs for injury prevention, disability awareness, technology, community resources, and specific skill acquisition for overall better health.
5. Increase the number of healthcare providers and allied health professionals who obtain training in the care of patients with chronic diseases.
6. Implement research focused on improving outcomes and overall function for individuals living with disabling conditions.

#### **Impact**

The anticipated impact of these actions will be to:

- Increase access to wellness and treatment resources.
- Increase compliance with treatment and prevention recommendations.
- Maintain health and wellness of persons with long-term disabilities.
- Develop new therapeutic treatment methods for those living with long term disabilities.

### **Disabilities**

**Goal:** Reduce the impact of disability on health and quality of life and increase the ability to live productive lives.

#### **Strategies**

1. Provide independent and assisted wellness and fitness programs for people with disabilities.
2. Provide health education focused on disability prevention and treatment topics.
3. Provide support groups for individuals with disabilities, their families, and caregivers.

4. Provide comprehensive support programs for persons with disabilities.
5. Increase community collaboration to provide support and resources for persons with disabilities and their caregivers.
6. Offer a continuum of medical and rehabilitative care, including but not limited to: acute rehabilitation, long-term residential rehabilitation, children's outpatient services, adult outpatient rehabilitation services, physician specialty clinics, and outdoor recreational services.
7. Educate and train healthcare providers and allied health professionals to focus on disability care.
8. Assess providing patient navigation services for individuals post-discharge with specific diagnoses (i.e., spine patients).
9. Recruit and train a complement of medical providers to provide services for people with disabilities in one central location.
10. Conduct research to provide treatment for people with disabilities.
11. Advocate on a national and regional level for persons with disabilities.
12. Provide programs for kids to increase social skills and quality of life (such as our Kids' Crew, Teen Scene, and Adventure Club programs).
13. Educate high school and college students and provide professional opportunities to increase learning in the rehabilitation field.

## **Impact**

The anticipated impact of these actions will be to:

- Increase availability and access to health education, support groups, and health programs focused on persons with disabilities, their families, and caregivers.
- Maintain health and wellness of persons with disabilities.
- Increase the number of healthcare providers and allied health professionals who obtain training in the care of patients with disabilities.
- Increase awareness of issues facing disabled persons through advocacy efforts.

## **Evaluation of Impact**

Casa Colina Hospital will monitor and evaluate the programs and activities outlined above as they impact people with disabilities and their wellness, productivity, and physical activity. The hospital has implemented a system to track strategy implementation. The Casa Colina reporting process includes the collection and documentation of program measures and collaborative efforts to address health needs. An evaluation of the impact of Casa Colina's actions to address these significant health needs will be reported in the next scheduled CHNA.

## **Needs the Hospital Will Not Address**

Taking existing hospital and community resources into consideration, Casa Colina Hospital is choosing not to address housing and homelessness, mental health, overweight and obesity, and substance use as identified in the CHNA. Casa Colina cannot address all the health needs present in the community, but it will concentrate on those priority health needs that it can most effectively address given its areas of focus and expertise.

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## Contact Information

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### Community Benefit Contacts

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