

UCI Health

UCI Health – Orange
UCI Health – Fountain Valley
UCI Health – Placentia Linda

Joint Implementation Strategy

2026 – 2028

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Joint Implementation Strategy

Introduction and Purpose

UCI Health comprises the clinical enterprise of the University of California, Irvine. In March 2024, UCI Health acquired Tenet's Pacific Coast Network, which includes medical centers, formerly known as Fountain Valley Regional Hospital, Lakewood Regional Medical Center, Los Alamitos Medical Center, and Placentia– Linda Hospital, as well as its associated outpatient locations.

Joint Implementation Strategy

Given a shared service area of Orange County, California, UCI Health – Orange, UCI Health — Fountain Valley, and UCI Health — Placentia Linda conducted a joint Implementation Strategy. UCI Health – Orange is a 459– bed acute care hospital providing tertiary and quaternary care, ambulatory and specialty medical clinics, behavioral health and rehabilitation. It is the primary teaching location for UC Irvine School of Medicine. UCI Health – Fountain Valley has 293 licensed beds, and UCI Health – Placentia Linda has 114 licensed beds.

This is the first Implementation Strategy for UCI Health – Fountain Valley and UCI Health – Placentia Linda as they changed from for-profit entities to nonprofit hospital facilities.

The Patient Protection and Affordable Care Act through IRS section 501(r)(3) regulations direct nonprofit hospitals to conduct a Community Health Needs Assessment (CHNA) every three years and develop a three-year Implementation Strategy that responds to identified community needs. In 2025, UCI Health – Orange, UCI Health – Fountain Valley, and UCI Health – Placentia Linda conducted a CHNA to comply with federal regulations guiding tax-exempt hospitals. This Implementation Strategy details how the hospitals plan to address the significant health needs identified in the 2025 CHNA.

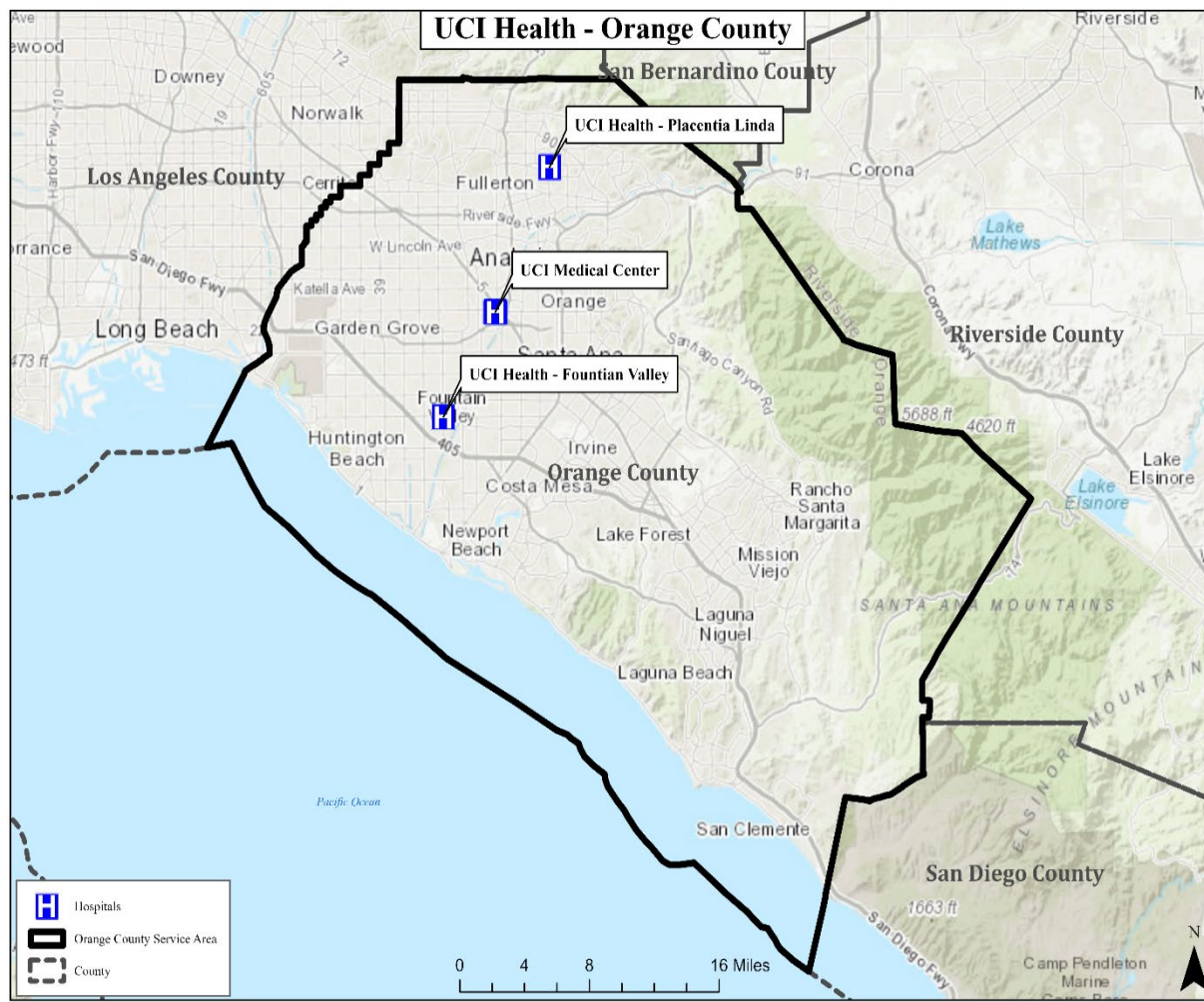
Report Adoption, Availability and Comments

This Implementation Strategy was adopted by the UC Irvine Chancellor in October, 2025. The CHNA and Implementation Strategy are available on the hospitals' website at <http://www.ucihealth.org/community– health>. Public comment on the CHNA and Implementation Strategy is encouraged as community input is used to inform and influence this work. To request a hard copy of this document or to share any feedback or comments, please contact Christopher M. Leo, Executive Director of Government Affairs, at cmleo@uci.edu.

Definition of the Community Served

UCI Medical Center is located at 101 The City Drive South, Orange, CA, 92868. UCI Health – Fountain Valley is located at 17100 Euclid Street, Fountain Valley, CA 92708. UCI Health – Placentia Linda is located at 1301 N. Rose Drive, Placentia, CA, 92870. For the purposes of this report, the hospitals define their shared service area as Orange County.

Orange County cities include: Aliso Viejo, Anaheim, Brea, Buena Park, Costa Mesa, Cypress, Dana Point, Fountain Valley, Fullerton, Garden Grove, Huntington Beach, Irvine, La Habra, La Palma, Laguna Beach, Laguna Hills, Laguna Niguel, Laguna Woods, Lake Forest, Los Alamitos, Mission Viejo, Newport Beach, Orange, Placentia, Rancho Santa Margarita, San Clemente, San Juan Capistrano, Santa Ana, Seal Beach, Stanton, Tustin, Villa Park, Westminster and Yorba Linda. Additionally, there are a number of unincorporated areas in the county.



Community Assessment

The 2025 CHNA process included collection and analysis of data sources for the hospitals' service area. Secondary data were collected from local, county, and state sources to present community demographics, social determinants of health, access to health care, birth characteristics, leading causes of death, acute and chronic disease, health behaviors, mental health, substance use and preventive practices. These data are presented in the context of Orange County and California, framing the scope of an issue as it relates to the broader community. In addition, the CHNA included interviews with key community stakeholders to obtain input on health needs, barriers to care and resources available to address the identified health needs. The collected data were used to identify significant community health needs.

The following significant health needs were identified:

- Access to care
- Chronic diseases
- Economic insecurity
- Food insecurity
- Housing and homelessness
- Mental health
- Overweight and obesity
- Preventive care
- Substance use

Priority Health Needs

Community stakeholder interviews were used to gather input and prioritize the significant health needs. The following criteria were used to prioritize the health needs:

- The perceived severity of a health or community issue as it affects the health and lives of those in the community
- Improving or worsening of an issue in the community
- Availability of resources to address the need
- The level of importance the hospitals should place on addressing the issue

Input from community stakeholders resulted in the following prioritization of the significant health needs:

1. Food insecurity
2. Access to health care
3. Economic insecurity
4. Housing and homelessness
5. Mental health
6. Chronic disease

7. Preventive practices
8. Substance use
9. Overweight and obesity

Prioritized Health Needs the Hospitals Will Address

Once the CHNA was completed, hospital leaders met to discuss the significant health needs. The following criteria were used to determine the significant health needs the hospitals will address in the Implementation Strategy:

Existing Infrastructure: There are programs, systems, staff and support resources in place to address the issue.

Established Relationships: There are established relationships with community partners to address the issue.

Ongoing Investment: Existing resources are committed to the issue. Staff time and financial resources for this issue are counted as part of the community benefit effort.

Focus Area: The hospitals have acknowledged competencies and expertise to address the issue, and the issue fits with the organizational mission.

The CHNA served as the resource document for the review of significant health needs as it provided data on the scope and severity of issues and included community input on the health needs. The community prioritization of needs was also taken into consideration. As a result of the review of needs and application of the above criteria, UCI Health – Orange, UCI Health – Fountain Valley, and UCI Health – Placentia Linda will address access to health care through a commitment of community benefit programs and charitable resources.

Goals have been established that indicate the anticipated impact on this health need as a result of the resources the hospitals will commit to meeting the health need. Strategies to address the priority health need are identified and impact measures will be tracked.

Health Need: Access to Health Care	
Goals	• Increase access to health care for the medically underserved to improve the health and welfare of community residents.
Anticipated Impact	• Increase access to health care and supportive services and reduce barriers to care. • Reduce the percentage of residents who delay obtaining needed medical care.
Strategy or Program	
Community Support	Provide donations and in-kind support to nonprofit community organizations dedicated to addressing access to health care and providing support services.
Financial Assistance for the Uninsured or Underinsured	Provide financial assistance through free and discounted care and government health programs for low-income patients for health care services, consistent with the hospitals' financial assistance policy.
Insurance Enrollment	Assist people who are uninsured or underinsured to enroll in publicly available health insurance programs.
Transportation	Provide transportation support for people who cannot afford transportation to or from medical services and appointments.
Planned Partnerships and Collaborators	CalOptima Coalition of Orange County Community Health Centers Community health centers and community clinics Community-based organizations Orange County Health Care Agency Schools and school districts Senior services

Evaluation of Impact

UCI Health – Orange, UCI Health – Fountain Valley, and UCI Health – Placentia Linda will monitor and evaluate the programs and activities outlined above. Our reporting process includes the collection and documentation of tracking measures, such as the number of people reached or served, implementation of disease management measures, and collaborative efforts to address health needs. An evaluation of the impact of the hospitals' actions to address these selected health needs will be reported in the next scheduled CHNA.

Needs the Hospitals will Not Address

UCI Health – Orange, UCI Health – Fountain Valley, and UCI Health – Placentia Linda cannot address all the health needs present in the community. They will concentrate on those health needs that they can most effectively address given their areas of focus and expertise. Taking existing hospital and community resources into consideration, UCI Health – Orange, UCI Health – Fountain Valley, and UCI Health – Placentia Linda will not directly address chronic disease, economic insecurity, food insecurity, housing and homelessness, mental health, overweight and obesity, preventive practices, and substance use.