
Community Health Improvement Plan

2025-2028

**Hillsboro Medical Center
Implementation Plan**



OHSUHealth
Hillsboro Medical Center

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Executive Summary: Message from the President & CEO

Hillsboro Medical Center is pleased to share our 2025-2028 Community Health Improvement Plan (CHIP). Reflective of our mission, vision, and values, we are committed to providing the best health care available for the patients we serve. Since 2016, our clinical affiliation with OHSU Health has resulted in improved access for the community. Through our partnership with OHSU Health, we proudly offer graduate medical education residencies in family medicine and internal medicine. Together, these initiatives bring more providers and services to the community, improving access to both primary care and specialty care. From our first two residency classes, for example, over half of the graduates chose to practice in Oregon.

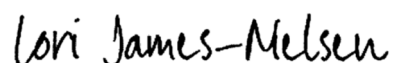
Improving the health of our community is a fundamental role of our organization. We work to build a healthier community through the programs we offer, the investments we make and the strategies we implement. Knowing where to focus our resources begins with the 2025 Community Health Needs Assessment (CHNA). Hillsboro Medical Center partners with other organizations in the Portland-metropolitan area that comprise the Healthy Columbia Willamette Collaborative (HCWC). HCWC is committed to advancing equity in our communities, identifying priorities for our CHIP, and identifying activities that leverage collective resources to improve the health and well-being of our communities.

Hillsboro Medical Center prioritized the following areas where we can affect the most significant change. During the 2025-2028 time period, our focus areas will be as follows:

1. Focus Area #1: Mental Health and Substance Abuse
2. Focus Area #2: Traditional Health Workers
3. Focus Area #3: Language Accessibility
4. Focus Area #4: Workforce Development

The Community Health Needs Assessment (CHNA) and Community Health Improvement Plan (CHIP) are conducted in accordance with the Patient Protection and Affordable Care Act (ACA), IRS Section 501(r)(3), which requires tax-exempt hospitals to conduct a CHNA and create a CHIP every three years. The 2025 CHNA was posted October 3, 2025, and the 2025-2028 CHIP priorities were approved by the Hillsboro Medical Center Board of Directors on October 23, 2025. The CHIP was made widely available to the public through posting on the hospital website on November 10, 2025: https://tuality.org/about/community_benefit_report/. Printed copies are available at no charge, upon request.

The executive leadership team at Hillsboro Medical Center looks forward to focusing on these updated priority areas and reporting results annually in our Community Benefit Report. We invite you to explore these documents that outline how we intend to address health concerns in our community and partner to achieve improvements in overall community health.



Lori James-Nielsen, RN, BSN, MHA
President and Chief Executive Officer
Hillsboro Medical Center



Introduction: About Hillsboro Medical Center

Hillsboro Medical Center’s Commitment to the Community

Established in 1918, Hillsboro Medical Center is a not-for-profit, community-based health care organization in Washington County, Oregon. With over 100 years of history in the community, we operate as an independent organization, governed by community board members. We provide significant funding to benefit our patients through community education, investment in community health, and support of our community partners.

Primary Service Area

Western Washington County, from Aloha and Beaverton west to the Coast Range, including Hillsboro, Cornelius, North Plains and Forest Grove; roughly 250,000 people and growing. Washington County has the second highest population in Oregon, 600,372 residents. Through the OHSU Transfer Center, patients from throughout the state also receive care at the hospital.

Hillsboro Medical Center Locations

- Hillsboro Medical Center: 215 licensed beds with state-of-the-art acute care and Level 2 neonatal ICU
- 7th Avenue Medical Plaza
- 8th Avenue Medical Plaza
- Over 20 primary care and specialty clinics
- Community Health Education Center
- ¡Salud! Services mobile outreach program for vineyard workers
- Mobile mammography unit

Medical Staff

We have over 600 OHSU and HMC physicians and credentialed health care providers as well as 54 medical residents.

Workforce

One of the region's largest employers, with approximately 1,370 employees and 90 volunteers.

Demographics


The local community is highly diverse, illustrating the importance of focusing on health equity as we serve the needs of the entire community. Hillsboro Medical Center works diligently to hire staff and providers who share the diverse languages and cultures of our patients. Presently, the largest non-white patient population group is Hispanic/Latino and 17.9% of our county and 16.5% of our hospital staff are Hispanic/Latino. 47% of our medical residents are non-white.

A Culture of Service to Our Community

Our mission and values go beyond providing services to patients. Hillsboro Medical Center's employees, providers and volunteers help comprise the very fabric of our community. Hillsboro Medical Center encourages each person to give back to the community—in time, energy, and resources—that are personally meaningful, rewarding, and enjoyable.



Mission, Vision and Values



We are Hillsboro Medical Center

MISSION & VISION: Why do we exist?

MISSION
Using skill and compassion, we are building a healthier community by bringing quality clinical care and unparalleled service to our region, in partnership with our patients, physicians and health care professionals.

VISION
To be the health system of choice for our region, our patients, our providers and our employees, by delivering the highest quality care at an exceptional level of service.

VALUES: How do we behave?

COLLABORATION COMPASSION EXCELLENCE INTEGRITY

PILLARS: What do we do?

PEOPLE ACCESS VALUE EDUCATION

STRATEGIC ANCHORS: How will we succeed?

COMMUNITY CENTERED LEAD WITH HEART STRATEGIC PARTNER

PRIORITY FOCUS AREA

We are committed to enhancing the experience of our patients.

DEFINING OBJECTIVES: Short-Term & Specific Goals

- Access
- Communication
- Employee Engagement
- Transitions of Care
- Facility Comfort & Environment

STANDARD OPERATING OBJECTIVES: Ongoing Priorities

- Budget & Finance
- Daily Operations
- Learn & Teach
- Quality & Patient Safety
- Talent & Culture

Annual Community Benefit Provided by Hillsboro Medical Center

Hillsboro Medical Center makes significant contributions to the community each year. Community Benefit includes the cost of free care provided to low-income community members, the cost of free community-sponsored programs, and the unpaid cost of providing care for government-insured community members.

Total community benefit provided by Hillsboro Medical Center in the most recent years included:

- FY18 \$14,152,943
- FY19 \$13,639,719
- FY20 \$17,762,869
- FY21 \$20,969,087
- FY22 \$21,327,486
- FY23 \$28,655,203
- FY24 \$30,302,754

Financial Assistance/Planning for the Uninsured and Underinsured

Hillsboro Medical Center provides care for all patients, regardless of ability to pay. A financial assistance policy is in place to provide free or discounted services based on financial eligibility.

The Insurance Verification team at Hillsboro Medical Center has implemented processes related to HB3320, Presumptive screening including:

- New process implemented July 1, 2024, requiring staff to screen any insured patient with a balance over \$500 for financial assistance prior to billing.
- Patients under 300% of the Federal Poverty Level (FPL) have medically necessary charges fully written off to charity care.
- Screeners utilize MyChart, e-mail, phone calls and letters to screen patients.
- Screeners ask patients who fall under the income limit if they would like to be screened for Medicaid eligibility.
- Through education, screeners have increased awareness among staff regarding the financial assistance policy.

Financial Assistance Levels

- 100% financial assistance usually will be provided for households with gross family income at or below 300% of the Federal Poverty Level (FPL).
- 65% financial assistance usually will be provided for households with gross family income between 300% and 400% of the Federal Poverty Level (FPL). The 65% discount is applied to charges less the 35% self-pay discount.
- *Uninsured Patients*—for emergency and medically necessary care:
 - 100% financial assistance if gross family income is at or below 300% of the Federal Poverty Level (FPL).
 - 65% financial discount less the 35% self-pay discount.
- *Commercially insured patients*—for emergency and medically necessary care:
 - 100% financial assistance if gross family income is at or below 300% of the Federal Poverty Level (FPL).
 - 65% financial assistance if gross family income is between 300% and 400% of the Federal Poverty Level (FPL).

Applying for Financial Assistance

- Information about the financial assistance program is posted in the lobby areas of the hospital and in the 7th Avenue Medical Plaza. Financial Assistance information is also found online and on billing statements.
- Requests for financial assistance may be made verbally or in writing at any point before, during or after the provision of care.
- Information about the financial assistance policy may be obtained free of charge by phone, in person or in writing.
- Financial assistance requests may be proposed by sources other than the patient, such as the patient's physician, family members, community or religious groups, social services or hospital personnel. Staff will reach out to the patient/responsible person in order to complete a screening.

- Anyone requesting financial assistance will be screened for eligible medical programs prior to being given a Financial Assistance Application, which includes instructions on how to apply.
- Consideration for financial assistance will occur once the applicant has completed the Financial Assistance Screening and/or supplies a completed Financial Assistance Application with supporting documents, including verification of income.
- Dedicated Insurance Verification staff screen all patients for financial ability to pay and assist them with insurance applications and preparing financial assistance documents.

Summary of the CHNA and CHIP Planning Process

Community health is impacted by a variety of factors. The CHNA describes the current state of health of a specific community. It involves hearing from community members about their community strengths, resources, gaps and health needs. CHNAs are used by hospitals, public health, and community-based organizations to create programs and services to improve the health of the community.

The 2025 CHNA was conducted as a rigorous process with other health care organizations in the four-county Portland-metropolitan area. The Healthy Columbia Willamette Collaborative (HCWC) is a unique public-private partnership that includes all health systems, health departments and coordinated care organizations (CCOs) within the region. HCWC is responsible for facilitating the alignment of efforts to develop a shared CHNA across the four-county region.

The HCWC is a formal, charter-bound partnership to fund and guide a regional CHNA. This is HCWC's fifth collaborative CHNA used by the partners to inform community-level investments in health and well-being. HCWC Partners include:

- CareOregon
- Clackamas County Health, Housing and Human Services
- Health Share of Oregon
- Hillsboro Medical Center
- Kaiser Permanente
- Legacy Health
- Multnomah County Health Department
- Oregon Health & Science University
- Portland Adventist Medical Center
- Providence Health & Services
- Trillium Community Health Plan
- Washington County Public Health

This unified and comprehensive approach assesses the overall health needs of the larger community, with a heightened focus on the social determinants of health as they impact marginalized and underserved communities. The CHNA aims to prioritize needs, eliminate duplicate efforts, leverage resources, and enable collaborative efforts in implementing and tracking improvement activities. This collaborative approach supports the creation of an effective, sustainable process with stronger community relationships.

The CHNA findings are utilized to create the Community Health Improvement Plan (CHIP). Hillsboro Medical Center's director of community outreach drafts the CHIP with input from the hospital leadership team and community subject matter experts including leaders from Washington County Public Health and local community-based organizations. Identified needs relevant to the hospital are prioritized, analyzed and assigned implementation strategies. The final draft is then presented to the Hillsboro Medical Center Board of Directors for review and approval.

Hillsboro Medical Center anticipates some strategies may change throughout the three-year process and will make necessary updates to the priorities, if necessary.

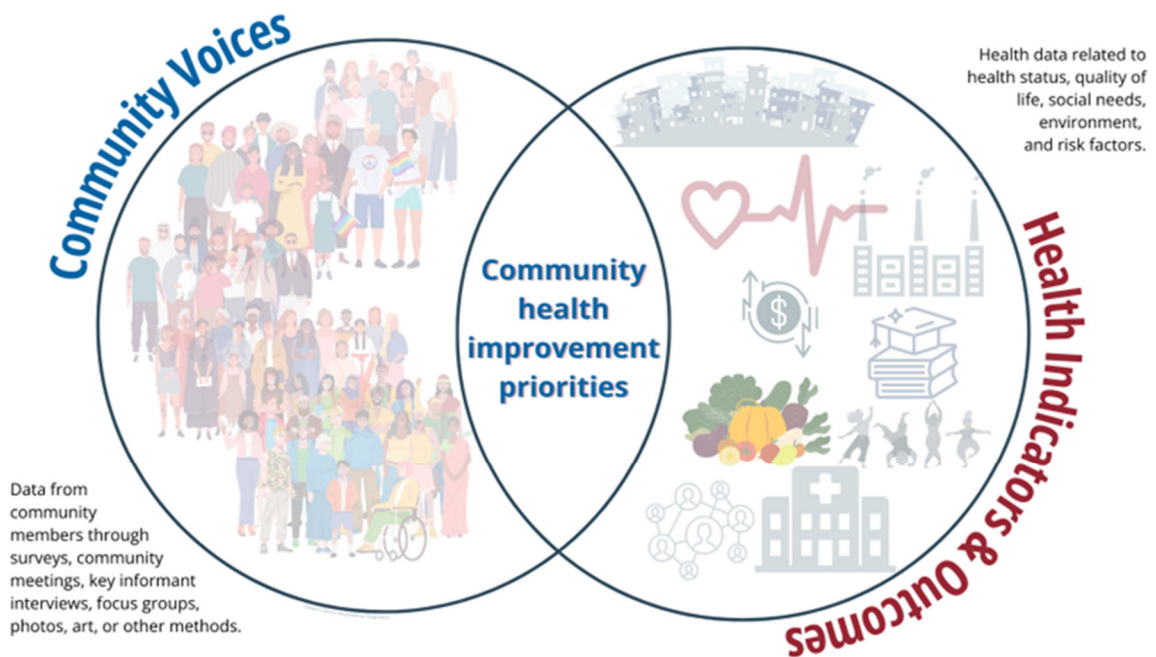
Equity and Community Voice

Development of the CHNA relied upon the input of a Community Advisory Group (CAG). To ensure the CHNA remains a responsive and actionable tool, the update process involved ongoing monitoring of health trends and disparities through timely data collection, community engagement and cross-sector collaboration. This included integrating new quantitative data from public health surveillance, as well as qualitative insights from community partners and residents.

Findings presented in the CHNA are the result of analyzing multiple data sources. Data includes quantitative and qualitative data primary sources (data collected first-hand through CAG engagement, surveys and focus groups) and secondary sources (data collected by another entity or for another purpose).

The CHNA utilized secondary data to understand health outcomes within the community and the community shared ideas on how best to address these issues. The CHNA relied on community voices and stories to identify and define the root causes of poor health outcomes that should be addressed through community improvement efforts. Thirty-seven community-specific focus groups were led by members of the CAG and other community partners. Nine focus groups were conducted in a language other than English (Arabic, Cantonese, Dari, Farsi, Mandarin, Russian, Spanish, Swahili, and Ukrainian), engaging over 350 community members. Three quarters of the participants identified as people of color and 60 percent of the community members preferred to speak a language other than English.

The HCWC Community Health Survey launched on October 7, 2024, and was open to the public through December 31, 2024, available in 19 languages.



Identifying Health Priorities

Community Advisory Group (CAG) members, online survey respondents and focus groups helped to prioritize the areas of focus.. Based on the survey data, the majority of respondents felt they were healthy, yet they identified their community's health as being less healthy. Survey respondents identified the top health conditions as chronic disease, mental health, dental issues and substance use. Upon full review of the data and survey responses, the HCWC leadership team narrowed the top priorities to the following:

1. Support more trauma-informed physical and mental health services and supports, clinics and/or community centers.
2. Expand investments in traditional health workers to increase community representation in the work force.
3. Ensure adequate resources for language accessibility in services and education and invest in health literacy efforts.

Key Data and Demographics: Health and Social Indicators

Social Determinants of Health

Social determinants of health are key to a community's well-being and are woven throughout the implementation strategies. Economic disparities related to income, housing and education impact the health of a community, particularly as they influence health literacy and access to services. Improvements noted since the last CHNA include:

- More people had health insurance
- High school graduation rates were up
- The unemployment rate was low
- More households had internet access
- More people feel supported by and within their community

Areas that continue to need attention include:

- Homelessness
- Violent crime
- Accidental deaths (including overdoses)
- Transportation barriers
- Food insecurity
- Behavioral health conditions
- Distrust in the health care system
- Culturally competent care

CHIP Priorities

Hillsboro Medical Center prioritized the focus areas according to where we can most directly impact our community. During the 2025-2028 time period, our focus areas are as follows:

- Focus Area #1: Implement more trauma-informed physical and mental health services and supports
- Focus Area #2: Provide outreach and invest in traditional health workers to improve community trust and to provide culturally-sensitive navigation and support
- Focus Area #3: Ensure adequate resources for language accessibility in health care services and education
- Focus Area #4: Create more opportunities and capacity for workforce development

Hillsboro Medical Center will measure improvements through the Measurements/ Metrics identified within each identified focus area. These will be monitored annually and will be reviewed in the annual Community Benefit Report to assure improvements are achieved and sustained.

Health Needs Identified but not Addressed

Given organizational priorities and the restraints of time, money and expertise, Hillsboro Medical Center categorized interventions into the priority strategies. No single organization can address all the issues present in the community single-handedly. Through our partnerships, though, we are confident the other identified needs will be addressed by the community-based organizations, Washington County Public Health, and the CCOs.

In addition to the HCWC partners, the following community agencies and organizations received a copy of the finalized CHNA and Hillsboro Medical Center's proposed CHIP priorities:

- Adelante Mujeres
- Centro Cultural

- Community Action of Washington County
- Community Service Network
- Forest Grove School District
- Hillsboro School District
- Hillsboro Health & Education District
- Pacific University
- Portland Community College
- Project Homeless Connect
- Virginia Garcia Memorial Health Center



Focus Area #1: Implement more trauma-informed physical and mental health services and supports	
Strategies	Metrics/Measurements
<p>Provide trauma-informed care training for staff upon hire and annually; provide access to additional training resources in Compass and HealthStream</p> <p>Align Hillsboro Medical Center (HMC) mental health referrals with the new Washington County Center for Addiction Triage and Treatment (CATT)</p> <p>Reduce number of substance use disorder patients brought to HMC Emergency Department</p> <p>Distribute Naloxone to patients with opioid prescriptions to reduce risk of overdose</p> <p>Promote availability of Improving Addiction Care Team (IMPACT) services at HMC</p> <p>Promote availability of Office-Based Addiction Team (OBAT) services in HMC primary care clinics</p> <p>Support awareness of Behavioral Health Consultant (BHC) services integrated within HMC primary care clinics</p> <p>Provide medical resident outreach visits for marginalized community members experiencing houselessness</p> <p>Implement a grant-funded peer-assisted telemedicine program for rural people who use drugs seeking services for HIV, hepatitis C, substance use, and mental health.</p>	<p>Trend: # of patients brought by Police and Sheriff to HMC ED for detox/safety</p> <p># of staff and providers receiving training in trauma informed care</p> <p># of Primary Care Clinic patients accessing BHC services</p> <p># of inpatients referred to services through HMC IMPACT program</p> <p># of outpatients referred to services through HMC OBAT program</p>
<p>Collaborators/Partners: HMC Clinical Education, HMC Emergency Department, HMC Social Work, HMC Case Management, HMC Pharmacy, Hunter Spencer, DO, Residency Program, Washington County Public Health, Project Homeless Connect, Center for Addiction Triage and Treatment (CATT), Hawthorn Walk-In (Crisis) Center, Local addiction treatment agencies (CODA, 4D Recovery, etc.)</p>	

Focus Area #2: Provide outreach and invest in traditional health workers to improve community trust and to provide culturally-sensitive navigation and support

Strategies	Metrics/Measurements
Hire Community Health Workers (CHW) to support patients in HMC Women’s and Children’s Center and primary care clinics	# of patients served by mobile mammography unit
Expand Women’s and Children’s community education website to include Spanish	# of patients served by ¡Salud! Services mobile unit
Promote community-wide availability of mobile units e.g., HMC Mobile Mammography Unit, ¡Salud! Outreach mobile unit, Pacific University Eye Van, Virginia Garcia mobile units, Dental vans, etc.	# of patients served by the Braner Family Safety Resource Center
Provide referral information to patients experiencing transportation challenges	Trend: Appointments scheduled within 10 days (primary care)
Provide referral information to patients experiencing food insecurity	Trend: % referral appointments made
Support growth of Hillsboro Food Co-op, which will be located on Block67 adjacent to the HMC campus	
Increase community awareness of the HMC Braner Family Safety Resource Center including car seat safety, infant sleep safety, locking cabinets for medications/guns, etc.	
Provide referrals to <i>Help Me Grow</i> and <i>Healthy Beginnings</i> programs sponsored by Washington County Public Health	
Provide <i>HMC Baby Club</i> and <i>Be Strong Families Parents Café</i> education and support groups	
Provide health/cancer screening, wellness/nutrition information, and referral information at community events and organizations (Farmer’s Markets, Adelante Mujeres, Hillsboro Senior/Community Center, etc.)	
Collaborators/Partners: HMC Women’s and Children’s Center, Braner Family Safety Resource Center, HMC Women’s Clinic, HMC Primary Care Clinics, ¡Salud! Services, Breast Health Services, Community Outreach, Hillsboro Food Co-Op, City of Hillsboro, Washington County Public Health, Centro Cultural	

Focus Area #3: Ensure adequate resources for language accessibility in health care services and education

Strategies	Metrics/Measurements
<p>Improve community access for patients with communications needs, including auxiliary aid kits.</p> <p>Increase staff knowledge about interpreter services; evaluate a centralized scheduling model for in-person interpreters.</p> <p>Implement sign language interpretation program (ASL)</p> <p>Hire 2.0 FTE Spanish interpreters</p> <p>Improve access to Spanish translations of website materials, patient documents, and MyChart electronic health record</p> <p>Investigate possibility of providing automatic translation of HMC website</p> <p>Provide in-person and virtual pre-natal/parenting classes in English and Spanish; implement simultaneous interpretation and obtain interpretation devices and upgraded conference room audio</p> <p>Continue Patient and Family Advisory Council to access patient feedback from diverse community representatives</p> <p>Support HMC Residency program with diverse outreach opportunities</p> <p>Improve awareness of services through increases in social media followers: Facebook, Instagram, LinkedIn</p>	<p>Annual summary of interpretation/translation costs, available equipment, etc.</p> <p># of virtual consultations</p> <p>Trend: # of social media followers</p> <p>% Primary Care residents who are no-white</p>
<p>Collaborators/Partners: HMC Quality Department/Patient Advocate, HMC Marketing-Communications, Residency Programs, HMC Internal Medicine Clinic</p>	

Focus Area #4: Create more opportunities and capacity for workforce development	
Strategies	Metrics/Measurements
<p>Support legislation that supports workforce development</p> <p>Continue to increase workforce diversity</p> <p>Meet regularly with Hillsboro Health & Education District partners to discuss shared workforce training opportunities as the new PCC/VG/HSD buildings on Block 56 are developed</p> <p>Increase the number of clinical placement hours; pursue possibility of bringing medical assistant, phlebotomy, and/or surgical tech training program to HMC</p> <p>Provide guest speakers at school district health career events</p> <p>Participate in Synapse Healthcare Career Explorations Camp for high school students</p> <p>Provide mentorship of Hillsboro High School sports medicine students (M.D. residents)</p> <p>Provide job shadows/observations for high school students from Hillsboro, Forest Grove and Banks School Districts</p> <p>Provide clinical rotations for Hillsboro School District and Forest Grove School District certified medical assistant training programs</p> <p>Provide clinical rotations for Portland Community College (PCC) Certified Nursing Assistant training program</p>	<p>Equal Employment Opportunity Commission (EEOC) Annual Report</p> <p>Sponsorships – financial support of non-profit community organizations</p> <p>Scholarships – financial support for education</p> <p># of high school students served with mentorship, education, or internships</p> <p># of hours of clinical preceptorships in nursing and ancillary areas</p>
<p>Collaborators/Partners: HMC Human Resources, HMC Clinical Education, Residency Programs, Virginia Garcia Memorial Health Center, Pacific University, Portland Community College, Hillsboro School District, Forest Grove School District, Banks School District, Oregon Healthcare Workforce Institute (Area Health Education Center at Pacific University)</p>	

Conclusions and Next Steps

Hillsboro Medical Center and the Healthy Columbia Willamette Collaborative (HCWC) demonstrated significant improvement since the previous Community Health Needs Assessment period. Implementation strategies can be found on the Hillsboro Medical Center website in annual Community Benefit Reports. Examples of previous HCWC member accomplishments are included in Appendix A.

For more information, to request a copy, provide comments or view electronic copies of current and previous community health needs assessments or improvement plans, visit the Hillsboro Medical Center website, under Partners and Reporting at https://tuality.org/about/community_benefit_report/.

Who to Contact for Questions or More Information about the CHNA/CHIP

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Appendix A: Letter from the HCWC Partners – 2022-2025 Accomplishments

On behalf of the Healthy Columbia-Willamette Collaborative (HCWC), I am happy to share a summary of community health improvement initiatives and activities our collaborative partners have been able to implement between 2023 and 2025.

The summary provided in this letter reflects a broad variety of projects, initiatives and activities that were informed by the HCWC's 2022 Community Health Needs Assessment (CHNA) report, which provides a detailed status of the regional community's health, and community-informed findings and recommendations centered around four focus areas:

At a high level, HCWC Partners utilized the 2022 Community Health Needs Assessment to inform programmatic decisions and community investments through the following:

- Providing community health grants supporting access to behavioral health/substance use disorder services, and access to care and support services
- Providing community grants to support behavioral health workforce and economic security
- Enhancing access to healthcare services and programs through increased provision of healthcare interpretation and translation services at no cost
- Significant effort throughout all counties to reduce opioid overdoses by increasing access to naloxone, wound care kits and syringes
- Provision of patient/member education around healthcare through community events, resource fairs, markets, etc.; participation includes all system partners
- Increasing systems coordination (OHA certification process, billing/claims guidance, etc.), and capacity building efforts for Traditional Health Workers (THW) and Community Health Worker (CHW) workforces
- Helping Federally Qualified Health Center (FQHC) partners in understanding the value of integrating THWs into the delivery of healthcare services
- Increasing referrals to THW/CHWs

We are grateful to collaborate across systems and honored to partner with the community, deferring to their wisdom and leadership.

Sincerely,
Christine Kan
Manager, Community Health at Health Share and
Convener, Healthy Columbia-Willamette Collaborative

Appendix B: State of the Region: Health Status and Priorities

