

GATEWAYS HOSPITAL
AND MENTAL HEALTH CENTER



Community Health Needs Assessment 2025

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Executive Summary

This 2025 Community Health Needs Assessment (CHNA) evaluates the behavioral and physical health needs of individuals served by Gateways Hospital & Mental Health Center, an independent nonprofit psychiatric hospital located in Los Angeles County's Service Planning Area (SPA) 4. Gateways provides inpatient, residential, and outpatient behavioral health services to adolescents and adults experiencing serious mental illness, many of whom are low-income, uninsured, experiencing homelessness, or involved in the justice system.

The assessment draws on secondary data sources, including the U.S. Census, the American Community Survey, the Los Angeles County Health Survey, and data from the Los Angeles Homeless Services Authority, as well as primary community input gathered through focus groups with Gateways clients, clinical staff, and executive leadership. Together, these sources provide insight into the demographic, social, and health conditions affecting residents of SPA 4 and the populations served by Gateways.

The data indicate that SPA 4 communities experience high levels of poverty, housing instability, behavioral health challenges, and barriers to healthcare access, including higher rates of uninsured residents and substance use–related harms compared to Los Angeles County overall. These conditions contribute to increased demand for coordinated behavioral health and supportive services.

Based on the data analysis and community feedback, Gateways identified four priority community health needs for 2025:

1. Drug and alcohol programs
2. Expanded programming offered through partnerships
3. Youth, adolescent, teen, and young adult mental health services
4. Integrated care that combines physical and behavioral health services

Gateways will address these needs primarily by continuing and strengthening existing programs and partnerships across its inpatient, residential, and outpatient services. Key strategies include integrating substance use treatment into behavioral health programs, expanding collaborations with community organizations to connect clients to additional services, strengthening youth mental health programming through school and community partnerships, and improving integrated care models that coordinate physical and mental health services.

Through these efforts, Gateways seeks to expand access to high-quality behavioral health care, improve health outcomes for vulnerable populations, and strengthen the continuum of care available to individuals experiencing serious mental illness in Los Angeles County.

Introduction

Gateways Hospital & Mental Health Center

Gateways was established in 1953 as an independent nonprofit, non-sectarian institution affiliated with the Jewish Federation Council of Los Angeles. Gateways has been a provider of acute behavioral health services in the communities of Silver Lake, Echo Park, and Boyle Heights since 1953, 1961, and 2005, respectively. The majority of the hospital's patients are low income and have serious mental health concerns, with a large number also experiencing homelessness. An acute psychiatric facility that has both involuntary patients and outpatient programs, Gateways staff includes psychiatrists, internists, registered nurses, licensed vocational nurses, psychologists, social workers, and mental health workers, as well as a range of support personnel. Programs offered at Gateways are delivered through inpatient care, residential services, and outpatient clinics. A significant percentage of the patient population is involved in the legal/justice system.

Gateways Hospital is accredited by the American Osteopathic Association/Healthcare Facilities Accreditation Program (AOA/HFAP) and licensed by the California Department of Public Health. It is a member of the California Healthcare Association, the Healthcare Association of Southern California, and the Association of Community Health Service Agencies. Gateways' residential facilities are licensed by the California Department of Social Services Community Care Licensing Division.

Gateways Hospital has 55 acute psychiatric beds.¹ Inpatients are often referred by Los Angeles County psychiatric emergency rooms and are brought to the facility by ambulance. In addition, Gateways receives referrals directly from the HOME Team to ensure expedient access to care. With more than 65 years of community-based services, Gateways has strong relationships with hospitals, Federally Qualified Health Centers, and mental health clinics in the local community, which enables it to work collaboratively with patients and clients, homeless services agencies, law enforcement, local schools, and behavioral health agencies within the scope of the service encashment area. Most of Gateways' hospital funding comes from the Los Angeles County Department of Mental Health,² while its outpatient programs are funded through a variety of state and local sources. Gateways is a Short Doyle provider for individuals having no health insurance to cover their hospitalization. Support also comes from private and community donations.

Many universities and vocational programs rotate students through the hospital, making education one of the primary non-economic community benefits provided by Gateways. Medical students and other students in healthcare-related fields come from several nursing programs including West Coast University, Los Angeles Valley College, Charles Drew University, and California State University, Los Angeles, as well as health psychology students at California State University, Long Beach. Additionally, Gateways hosts a rotation for third-year medical students at the University of Southern California, as well as additional students from occupational therapy, social work, and psychology programs across the county.

¹ *Hospital Programs—Gateways Hospital*. (n.d.). Gateways Hospital and Mental Health Center.

² *HCAI Reports*, "Hospital Profile: Gateways Hospital And Mental Health Center," <https://hcai.ca.gov/facility/gateways-hospital-and-mental-health-center/>.

Gateways advocates for the needs of its mental health clients as a member of the Hospital Association of Southern California (HASC) and the Association for Community Human Services Agencies (ACHSA). Its community collaborations have yielded assistance with community gang issues, mental health education, parental support, legislative advocacy related to hospital wages, neighborhood watch programs regarding violence and burglaries, and forging alliances with local political associations.

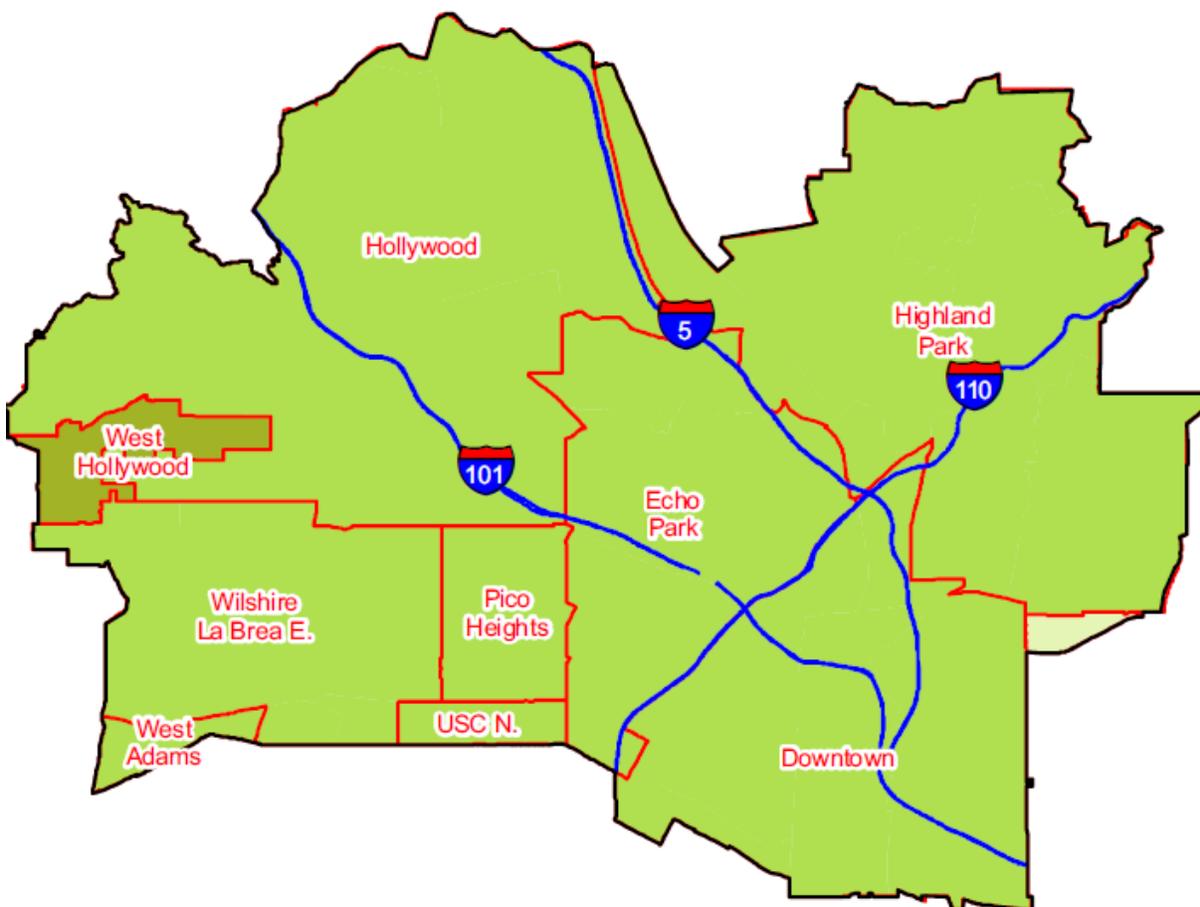
“Working Together Toward a Brighter Future”

Gateways maintains mental health facilities and programs, including an acute care psychiatric hospital, to serve the needs of individuals with mental illness and others requiring inpatient, outpatient, and residential treatment and care regardless of race, creed, national origin, or sex; this includes persons referred to or placed in such facilities or programs by courts or other public agencies.

Gateways’ vision is to serve the most vulnerable populations, regardless of ability to pay, with a caring and nurturing approach, providing quality health resources in a cost-effective manner. Using a performance monitoring process, Gateways maintains efficient and continuous quality improvement for all patients and program clients. Gateways’ value in creating access to programs regardless of one’s ability to pay is an important community benefit, as is its onsite provision of both acute, involuntary inpatient psychiatric care and outpatient services in less restrictive settings. Staff strive to be the best by treating patients and clients with dignity and respect no matter their psychological or physical health conditions. Treatment is focused on teamwork, respect, and innovation.

Gateways’ long-term vision is to become a diversified healthcare company that provides a continuum of mental health services to its patients and clients. Board and staff are presently undergoing a strategic planning process intended to significantly increase Gateways’ impact through organizational restructuring, streamlined operations, diversified revenue sources, enhanced partnerships, and implementing best practices in governance.

Los Angeles County Service Planning Area 4 – Geographic Area



Gateways Hospital and Mental Health Center is located in Service Planning Area (SPA) 4 of Los Angeles County, spanning from West Hollywood to Highland Park, Downtown, Echo Park, and the Wilshire-La Brea East corridor.

Community Served by Gateways Hospital & Mental Health Center

Gateways differs from many other nonprofit hospitals in that its inpatient facility only serves those in acute psychiatric distress, and its residential and outpatient facilities serve those in need of housing and services to support their mental health and wellness. As such, the “community” Gateways serves is important to define.³

- The inpatient facility accepts adolescents (ages 13-17) and adults (18-59) from across Los Angeles County who are in acute psychiatric distress. Most of these individuals do not have health insurance, and many are experiencing chronic homelessness and have mental illnesses, relying heavily on the use of emergency services.

³ *Hospital Programs—Gateways Hospital*. (n.d.). Gateways Hospital and Mental Health Center. Retrieved September 12, 2022, from <https://www.gatewayshospital.org/hospital-programs>

- Residential and outpatient facilities include treatment programs that provide services to children, adolescents, and adults with mental health treatment needs who reside primarily in Los Angeles County's Service Planning Area (SPA) 4, which covers metro Los Angeles. Mental health services are provided as part of in-school and juvenile justice programs, through adult conditional release and stepdown programs, within supportive housing models, and via day centers that include case management, peer support, and medication management.

In summary, Gateways serves 1) adolescents and uninsured adults in acute psychiatric distress, many of whom are chronically homeless, from across the county, and 2) individuals between the ages of 6 and 60 with less intensive mental health service needs and who live primarily within the metro Los Angeles area.

Needs Assessment Methodology

Both primary and secondary data sources were used to assess the needs within Gateways' community of individuals accessing or in need of mental health services and support. The assessment began with a literature review of previous reports related to those Gateways serves. Secondary data sources were examined for multi-year demographics and health-related trends in Los Angeles County and SPA 4. These data sources are publicly available through government and university sources, including the U.S. Census, the American Community Survey, the Los Angeles County Health Survey, and the California Health Interview Survey, as well as the Los Angeles Homeless Services Authority.

Once a preliminary list of needs was created, Gateways conducted three focus groups: one with outpatient and residential clients who spoke directly about their needs, one with Gateways program directors and staff with deep knowledge of the inpatient, outpatient, and residential clients served, and one with members of the Gateways' C-Level Team.

Profile of Demographics and Key Characteristics

The following population and demographic information are presented for both Los Angeles County and SPA 4, which represent the communities served in Gateways' various inpatient, outpatient, and residential services. Unless otherwise noted, all data are sourced from the Los Angeles County Department of Public Health's Community Health Profiles, which are mostly generated based on the American Community Survey (ACS) five-year estimates for the years 2018-2022.

- **Race/ethnicity:** SPA 4 has about the same White population as the rest of Los Angeles County as a whole. It has a slightly lower percentage of Black or African American residents compared to all of Los Angeles City and Los Angeles County. It also has a larger Asian population than the City and the rest of Los Angeles County.
- **Age Distribution:** SPA 4 has an age distribution largely the same as the populations of Los Angeles City and Los Angeles County.
- **Income and Poverty:** SPA 4 has a greater proportion of lower-income households and lesser proportion of higher-income households compared to Los Angeles City and Los Angeles County. SPA 4 also has a greater proportion of children living below the federal poverty line than Los Angeles City and Los Angeles County.
- **Educational Attainment:** SPA 4 has a higher proportion of people with less than a 12th grade education than Los Angeles County, but the same as Los Angeles City. SPA 4 also has a higher proportion of people with bachelor's degrees or higher than both.
- **Housing Indicators:** SPA 4's households have a similar rate of housing burden to households in Los Angeles City, with about half of households paying greater than 30% of their income on housing costs. . However, SPA 4 has a significantly higher population that rents compared to Los Angeles City and Los Angeles County, where a greater proportion of households own their homes.
- **Behavioral Health:** SPA 4 shows trends of higher alcohol and marijuana access, usage, and higher deaths related to drug overdose and suicide compared to both Los Angeles City and Los Angeles County. SPA 4 also has nearly twice as many on-premises alcohol outlets compared to both Los Angeles City and Los Angeles County.
- **Nutritional Access and Consumption:** SPA 4 has less access to fresh fruits and vegetables compared to Los Angeles City and Los Angeles County. There is also a higher population of both children and adults with food insecurity.
- **Healthcare Access:** SPA 4 has a higher proportion of uninsured adults and children compared to Los Angeles City and Los Angeles County, as well as a higher proportion of adults with difficulty obtaining needed medical care.

Demographic Profile of SPA 4

Ethnic Diversity

Comparatively, SPA 4 has about the same White population as the rest of Los Angeles County as a whole. It has a slightly lower percentage of Black or African American residents compared to all of Los Angeles City and Los Angeles County. It also has a larger Asian population than the City and the rest of Los Angeles County.

	SPA 4	Los Angeles City	Los Angeles County
Hispanic or Latino (of any race)	46.7%	47.2%	48.3%
Population of one race:			
Non-Hispanic-White	26.9%	28.7%	25.3%
Black or African American	5.4%	8.2%	7.5%
American Indian or Alaska Native	.2%	.2%	.2%
Asian	16.6%	11.6%	14.7%
Native Hawaiian and Other Pacific Islander	.1%	.1%	.2%
Some other race	.7%	.7%	.6%
Two or More Races	3.4%	3.4%	3.2%

*Data source: US Census Bureau, American Community Survey 5-Year Estimates, 2018-2022.*⁴

⁴ Los Angeles County Department of Public Health. Community Health Profiles. <https://ph-lacounty.hub.arcgis.com/pages/chp>

Age Distribution

SPA 4 has an age distribution largely the same as the populations of Los Angeles City and Los Angeles County. There are slightly less people under age 20 than in the rest of Los Angeles City and Los Angeles County. There is about the same percentage of senior citizens in the SPA, City, and County.

	SPA 4	Los Angeles City	Los Angeles County
17 years and younger	15.6%	18.9%	19.8%
18-64 years	69.8%	66.7%	65.2%
65 years and older	14.5%	14.4%	14.9%

*Data Source: US Census Bureau, American Community Survey 5-Year Estimates, 2018-2022.*⁵

Income and Poverty

SPA 4 has a greater proportion of lower-income households and lesser proportion of higher-income households compared to Los Angeles City and Los Angeles County. In fact, SPA 4 area's median household income is \$72,912 compared to Los Angeles County's \$83,411. SPA 4 also has a greater proportion of children living below the federal poverty line than Los Angeles City and Los Angeles County.

	SPA 4	Los Angeles City	Los Angeles County
Median Household Income	\$72,912	\$76,244	\$83,411
Population Living Below 100% of the Federal Poverty Level	18.3%	16.5%	13.8%
Population Living Below 200% of the Federal Poverty Level	40.7%	37%	31.6%
Children Living Below 100% of the Federal Poverty Level	26.1%	23.7%	19.6%
Children Living Below 200% of the Federal Poverty Level	55.9%	51%	44%

*Data Source: US Census Bureau, American Community Survey 5-Year Estimates, 2018-2022.*⁶

⁵ Ibid.

⁶ Ibid.

Educational Attainment

SPA 4 has a higher proportion of people with less than a 12th grade education than Los Angeles County, but the same as Los Angeles City. SPA 4 also has a higher proportion of people with bachelor's degrees or higher than both.

	SPA 4	Los Angeles City	Los Angeles County
Less than High School	21.3%	21.3%	19.8%
High School Graduate	17.1%	18.7%	20.4%
Some College	20.8%	23.2%	25.2%
Bachelor's Degree or Higher	40.7%	36.7%	34.6%

Data Source: US Census Bureau, American Community Survey 5-Year Estimates, 2018-2022.⁷

Housing Indicators

SPA 4's households have a similar rate of housing burden to households in Los Angeles City, with about half of households paying greater than 30% of their income on housing costs. Additionally, about a quarter of SPA 4 households are severely housing burdened, paying more than 50% of their income on housing costs, a proportion similar to the City's. However, SPA 4 has a significantly higher population that rents compared to Los Angeles City and Los Angeles County, where a greater proportion of households own their homes.

	SPA 4	Los Angeles City	Los Angeles County
Households with Housing Burden (paying greater than 30% of income on housing costs)	51.7%	51.4%	46.8%
Household with Severe Housing Burden (paying greater than 50% of income on housing costs)	27.5%	27.5%	23.9%
Households that Rent Their Homes	78%	63.4%	53.8%

Data Source: US Census Bureau, American Community Survey 5-Year Estimates, 2018-2022.⁸

⁷ Ibid.

⁸ Ibid.

Behavioral Health

SPA 4 shows trends of higher alcohol and marijuana access, usage, and higher deaths related to drug overdose and suicide compared to both Los Angeles City and Los Angeles County. SPA 4 also has nearly twice as many on-premises alcohol outlets compared to both Los Angeles City and Los Angeles County.

	SPA 4	Los Angeles City	Los Angeles County
On-Premises Alcohol Outlet Density (outlets per 10,000 population)	20.60	10.6	10.4
Off-Premises Alcohol Outlet Density (outlets per 10,000 population)	7.6	6.3	6.5
Adults Who Use Alcohol	56.8%	56.3%	56.7%
Adults Who Binge Drink	26%	23.6%	22.1%
Marijuana Storefront Retailer Density (retailers per 10,000 population)	4.2	35.6	2
Adults Who Use Marijuana	21%	18.1%	14.9%
Adults with Diagnosed Depression	18.3%	14.1%	12.4%
Drug Overdose Mortality (deaths per 10,000 population)	23.2	18.6	16.3
Suicide Rate (deaths per 10,000 population)	10.1	8.3	8.6

Data source: California Department of Alcoholic Beverage Control, Active alcoholic beverage licenses for FY21-22, June 2022; California Department of Cannabis Control, September 2023 (for data on licensed storefronts); Weedmaps, May 2023 (for data on unlicensed storefronts); Leafly, May 2023 (for data on unlicensed storefronts); Los Angeles County Office of Cannabis Management, May 2023 (for data on unlicensed storefronts); Los Angeles County Health Survey, 2023. Los Angeles County Annual Death Files 2018-2021 and 2022 (Provisional), assembled from California Department of Public Health Vital Records Data.

Nutritional Access and Consumption

SPA 4 has less access to fresh fruits and vegetables compared to Los Angeles City and Los Angeles County. There is also a higher population of both children and adults with food insecurity.

	SPA 4	Los Angeles City	Los Angeles County
Adults Meeting the Recommended Guidelines for Fruit and Vegetable Intake	12.9%	Unavailable	10.8%
Children with Good or Excellent Community Access to Fresh Fruits and Vegetables	70.3%	74.6%	79.5%
Children with Weekly Fast-Food Consumption	32.5%	34.3%	37.6%
Children in Households with Food Insecurity	32.9%	30.7%	30.3%
Adults in Households with Food Insecurity	29.8%	26.3%	26.3%

Data source: Los Angeles County Health Survey (2023).⁹

Healthcare Access

SPA 4 has a higher proportion of uninsured adults and children compared to Los Angeles City and Los Angeles County, as well as a higher proportion of adults with difficulty obtaining needed medical care.

	SPA 4	Los Angeles City	Los Angeles County
Uninsured Adults	16.9%	14.5%	12.6%
Uninsured Children	4%	3.9%	3.6%
Adults with Medi-Cal	23.5%	25.1%	23.1%
Children with Medi-Cal	60.7%	54.6%	47.7%
Adults with Difficulty Obtaining Needed Medical Care	30.1%	26.2%	25.4%

Data source: US Census Bureau, American Community Survey 5-Year Estimates, 2018-2022.

⁹ Ibid

Data Sources and Methods

Community needs were identified via publicly available federal, state, and local datasets, internal Gateways data, and focus groups with Gateways inpatient and outpatient staff and residential and outpatient clients. Data sources are provided below. Indicators used to identify each health need are detailed in the following section, Gateways Community Health Needs.

Secondary Data Sources

- U.S. Census Bureau estimates from the American Community Survey (ACS)
 - <https://factfinder.census.gov>
- National Alliance for Mental Illness
 - www.nami.org
- California Employment Development Department Occupational Employment Statistics
 - <https://data.edd.ca.gov/Wages/Occupational-Employment-Statistics-OES-Los-Angeles/3xuv-t2e3>
- Los Angeles County Department of Public Health
 - <http://publichealth.lacounty.gov/>
- California Office of Statewide Health Planning and Development
 - <https://report.oshpd.ca.gov>
- Academic research
- News publications
- Advocacy and trade publications

Primary Data Sources: Community Outreach

Gateways staff scheduled three focus groups, one with residential and outpatient facility clients, one with the inpatient, residential, and outpatient program directors and staff, and one with the Gateways' executive team. Focus groups took place virtually via Teams in November 2025 and lasted approximately 30 minutes each.

An email asking for comments on Gateways' community health needs was distributed to contacts at state and county public health agencies in December of 2025. No organizations participated.

Gateways Community Health Needs

Identified Needs

The 2025 Gateways Community Health Needs Assessment identified and prioritized the following health needs:

- Drug and Alcohol Programs
- Expanded Programming Offered Through Partnerships
- Youth, Adolescent, Teen, and Young Adult Mental Health Services
- Integrated Care

Prioritization of Needs

State and federal needs assessment guidelines permit each nonprofit hospital to define its own criteria for categorizing a health need as significant, but it must outline the criteria and describe the process used to prioritize health needs as well as solicit community feedback about the prioritization.¹⁰

In this CHNA, health needs are prioritized in the following order, based on the feedback of the C-Level Suite in a group interview, along with review of relevant professional literature and academic publications (documented in “research base” subsections)

1. Drug and Alcohol Programs
2. Expanded Programming Offered Through Partnerships
3. Youth, Adolescent, Teen, and Young Adult Mental Health Services
4. Integrated Care

1. Drug and Alcohol Programs

Research Base

Many of Gateways’ clients are individuals experiencing homelessness and people living with serious mental illness (SMI). Studies consistently show that individuals with co-occurring mental health and substance use disorders face increased risks of hospitalization, relapse, and chronic health conditions. National data indicate that individuals with SMI are significantly more likely to experience substance use disorders than the general population.¹¹

Integrated behavioral health treatment that addresses both mental illness and substance use disorders has been shown to improve treatment retention, reduce hospitalizations, and improve housing stability. Recovery-oriented care models also emphasize the importance of stable environments, peer support, and community engagement as protective factors against relapse.¹²

¹⁰ Ibid.

¹¹ Substance Abuse and Mental Health Services Administration (SAMHSA). *Key Substance Use and Mental Health Indicators in the United States: Results from the 2024 National Survey on Drug Use and Health*.

<https://www.samhsa.gov/data/sites/default/files/reports/rpt56287/2024-nsduh-annual-national-report.pdf>

¹² SAMHSA. *Integrated Treatment for Co-Occurring Disorders Evidence-Based Practices Kit*.

<https://www.samhsa.gov/data/sites/default/files/reports/rpt56287/2024-nsduh-annual-national-report.pdf>
<https://library.samhsa.gov/sites/default/files/ebp-kit-the-evidence-10242019.pdf>

SPA 4 Metro Area

Los Angeles County's Service Planning Area (SPA) 4 includes one of the largest concentrations of individuals experiencing homelessness in the county. Substance use disorders are common among individuals experiencing homelessness and are frequently associated with trauma, unstable housing, and untreated mental illness.¹³

Community Outreach Feedback

Clients and staff identified substance use treatment as a critical service need. Clients emphasized the importance of sober environments and peer support for recovery. Participants noted that weekly Alcoholics Anonymous and Narcotics Anonymous meetings are helpful but limited in scope. Several clients expressed interest in attending outside recovery meetings to build broader support networks and connect with sponsors. Clients also emphasized that relapse is a common part of recovery and that structured environments can help individuals develop the confidence needed to transition into community recovery programs.

2. Expanded Programming Offered Through Partnerships

Research Base

Collaborative partnerships between behavioral health providers and community organizations are widely recognized as effective approaches to addressing complex health needs. Integrated service models that combine housing, behavioral health services, case management, and social support have been shown to improve outcomes for individuals experiencing homelessness and those involved in the justice system.¹⁴

SPA 4 Metro Area

SPA 4 includes dense urban communities with high levels of poverty, housing instability, and behavioral health service needs. Many residents of SPA 4 face barriers accessing coordinated health and social services, particularly individuals experiencing homelessness or involved in the criminal justice system. Coordinated partnerships between behavioral health providers, housing organizations, educational institutions, and public agencies are therefore essential to improving service access and continuity of care in Metro Los Angeles.

Community Outreach Feedback

Gateways leadership and staff emphasized the importance of partnerships with community organizations, housing providers, and recovery programs. Staff noted that connections to community organizations and peer-support networks can support long-term recovery and help clients transition successfully into community life. Focus group participants also highlighted the importance of community activities and external partnerships that help clients build social networks and maintain recovery after leaving structured treatment environments.

3. Youth, Adolescent, Teen, and Young Adult Mental Health Services

Research Base

Mental health conditions frequently emerge during adolescence and early adulthood. Research indicates that approximately half of all lifetime mental illnesses begin by the mid-teens, and

¹³ UCLA Campuswide Homelessness Initiative. *Homelessness and Health in Los Angeles*.

<https://escholarship.org/uc/item/2gn3x56s>

¹⁴ Substance Abuse and Mental Health Services Administration (SAMHSA). *The Evidence: Integrated Treatment for Co-Occurring Disorders*. <https://library.samhsa.gov/sites/default/files/ebp-kit-the-evidence-10242019.pdf>

three-quarters begin by the mid-twenties.¹⁵ Early identification and treatment of mental health conditions among youth can significantly improve long-term outcomes.

School-based mental health programs, early intervention services, and family-centered care have been shown to reduce hospitalization rates and improve educational and social outcomes. Providing accessible mental health services for youth and young adults is therefore a critical component of community behavioral health systems.¹⁶

SPA 4 Metro Area

Youth and young adults in Metro Los Angeles face multiple mental health risk factors, including exposure to community violence, housing instability, and economic hardship. Behavioral health providers in SPA 4 report increasing demand for services addressing trauma, substance use, and identity-related stressors among youth and young adults. Expanding youth-focused behavioral health services can help address these challenges through early intervention and improved access to treatment.

Community Outreach Feedback

Staff emphasized the importance of early intervention for youth experiencing mental health challenges. One staff member noted that recognizing mental health conditions earlier in life allows individuals to better understand and manage symptoms over time. Staff also highlighted the need for expanded psychiatric testing and stronger partnerships with schools and youth-serving organizations to improve early identification and treatment of youth mental health needs.

4. Integrated Care

Research Base

Individuals with serious mental illness often experience significant physical health disparities compared with the general population. Research shows that people with SMI are more likely to experience chronic health conditions such as diabetes, cardiovascular disease, and respiratory illness.¹⁷ Barriers to accessing physical health services—including lack of insurance, transportation challenges, and fragmented health systems—can prevent behavioral health patients from receiving needed medical care.

Integrated care models that combine physical health services with mental health treatment have been shown to improve health outcomes, reduce hospitalizations, and increase patient satisfaction.¹⁸

SPA 4 Metro Area

Residents of SPA 4 experience significant health disparities and barriers to accessing primary care services. Individuals experiencing homelessness or living with serious mental illness often have difficulty navigating fragmented health systems and may rely heavily on emergency

¹⁵ NIHCM Foundation. *Youth Mental Health: Trends and Outlook*. <https://nihcm.org/publications/youth-mental-health-trends-and-outlook>

¹⁶ CDC. *Promoting Mental Health and Well-Being in Schools*. <https://www.cdc.gov/mental-health-action-guide/about/index.html>

¹⁷ Pizzol, Damiano et. al. *Relationship between severe mental illness and physical multimorbidity: a meta-analysis and call for action*. <https://pmc.ncbi.nlm.nih.gov/articles/PMC10619039/>

¹⁸ NAMI. *Physical & Mental Health Integration*. <https://www.nami.org/advocacy-at-nami/policy-positions/improving-health/physical-mental-health-integration/>

services for medical care. Expanding integrated health care services can help address these disparities by providing coordinated physical and behavioral health treatment within a single care setting.

Community Outreach Feedback

Staff reported that many clients entering Gateways programs have significant physical health needs in addition to behavioral health conditions. Occupational therapy staff noted that clients frequently present with chronic conditions such as diabetes, mobility limitations, and untreated dental issues. Staff also identified the need for partnerships that could provide services such as podiatry, dental screenings, nutrition counseling, and physical therapy to better address these needs.

Available Resources to Address Priority Health Needs

The IRS requires that as part of the CHNA process, Gateways identify what resources it has available to meet its priority health needs. This section describes the resources Gateways has to meet the priority health needs of its community, within both existing Gateways programming and through partnerships.

Gateways Programs

Gateways provides a variety of mental health services, including community-based outpatient services for children, adolescents, and adults, as well as forensic services for adults and a homeless/wellness program for adults.

Inpatient services: Gateways' inpatient services provide short-term, intensive treatment of adolescent (13-17 years old) and adult (18 and older) patients experiencing acute episodes of psychiatric and dual diagnosis disorders, which includes a specialized program for dually diagnosed adults. These services are funded under the Los Angeles County Department of Mental Health Short Doyle program as well as through private payment and Medi-Cal. Gateways' inpatient treatment program accepts referrals from all of Los Angeles County, and thus the individuals served are not limited to residents living in LA County Service Planning Area 4 (SPA 4).

Adolescent outpatient services: Outpatient treatment programs provide services to children and adolescents who can benefit from less intensive treatment than inpatient services. Gateways provides treatment at various Los Angeles Unified School District facilities to treat adolescents on campus and provides intensive services through the Los Angeles County Department of Mental Health. Additionally, an adolescent outpatient program provides mental health services to Juvenile Hall and Juvenile Probation Camp populations. Most individuals served by these outpatient programs reside in SPA 4. Funding is provided through Short Doyle and Medi-Cal.

Residential services: Gateways runs two residential enhanced stepdown programs, Percy Village and Normandie Village East. Both stepdown programs were developed under the Mental Health Services Act in 2004, and both assist individuals transitioning out of locked mental health institutions. The goal of these unlocked residential facilities is to eventually move residents to traditional board and care facilities and toward community reintegration. Percy Village has 136 beds (including 30 indigent beds) and Normandie Village has 60 beds (which includes 10 indigent beds). The primary difference between the two facilities is that Normandie Village is exclusively for forensic clients (i.e., those exiting the criminal justice system), whereas this is not the case at Percy Village. Gateways' residential facilities serve individuals from across Los Angeles County. Funding is provided through the Mental Health Services Act.

Forensic services: The primary function of Gateways' forensic treatment programs is to supervise judicially committed individuals released to the community. Gateways contracts with the California Department of State Hospitals Conditional Release Program (CONREP) Administrative portion to provide evaluation, court liaisons, and expert witness services for adult patients throughout the L.A. County court system found to be not guilty by reason of insanity, incompetent to stand trial, mentally disordered sex offenders, or mentally disordered offenders. Gateways' licensed and certified conditional release program staff provide clinical management for approximately 120 patients conditionally released to L.A. County communities, as well as 650 patients residing in state hospitals. The Gateways Satellite facility provides 18 beds for court-mandated residential and outpatient treatment services to adults (ages 18-64) who are referred through CONREP Administration, and the Satellite residential program provides 20 beds for voluntary residential treatment to adults with a history of mental illness and recent involvement with the criminal justice system. The Forensic Community Treatment Program provides court-mandated outpatient services to 120 adults (18-64) who are referred through CONREP Administration.

Gateways' forensic programming accommodates individuals throughout the L.A. County criminal justice system. Funding is provided through contracts with the California Department of State Hospitals, the California Department of Mental Health Office of Forensic Services, the L.A. County Department of Mental Health, and self-paying (outpatient) clients.

Homeless and wellness services: Gateways provides an integrated continuum of non-traditional mental health services that focus on the needs of adult (ages 18-60 years) mentally ill and dually diagnosed clients who are homeless or are at risk of becoming homeless. These include shelter beds provided by People Assisting the Homeless and healthcare services provided by JWCH Institute (an FQHC) and Homeless Healthcare Los Angeles. The Los Angeles Homeless Services Authority provides emergency shelter vouchers and food cards, and the Vera Brown Personal Care Center provides haircuts and other personal care services. Wellness treatment includes medication management, targeted case management, and peer support for independent mental health clients.

Most of the individuals served by homeless and wellness services reside in SPA 4.

Partnerships

Gateways' array of programs is comprised of a large number of community health providers who work with case directors/managers to ensure that all needs and resources are available to aid Gateways in fulfilling the mental, medical, and after-care services of those individuals who are most vulnerable.

Working relationships with Los Angeles County's Department of Mental Health, Department of Public Health, Department of Health Services, and Board of Supervisors affords Gateways the ability to collaborate and work closely with these entities. This has provided opportunities to work with the urgent care centers and law enforcement (LAPD, Sheriff's Department, and probation departments) to better address the needs of the community, in which almost 35% of residents suffer from mental health, substance use, and forensic issues that keep them in county jails and state mental health facilities.

The following is a list of Gateways' partnerships that, together with its existing programs, help to address community health needs. Gateways funding does not flow to these organizations; rather, these services are provided primarily as in-kind donations.

Community Health Clinics

The following clinics provide follow-up services to Gateways hospital patients after general discharge.

- Los Angeles Christian Health Centers (Federally Qualified Health Center)
 - Also collects medical histories and conducts all physical assessments of Gateways residential facility clients
- Downtown Mental Health (Los Angeles County Department of Mental Health)
- Hollywood Mental Health (Los Angeles County Department of Mental Health)

HIV/AIDS Services

The following clinics provide after-care to Gateways hospital patients.

- AIDS Project Los Angeles
- AIDS Drug Assistance Program

Mental Health Clinics

The following clinics provide after-care to Gateways hospital patients.

- Downtown Mental Health
- Didi Hirsch Community Mental Health
- Northeast Mental Health Center
- Exodus Urgent Care Center
- Hollywood Mental Health

Drug Rehabilitation

The following clinics provide after-care to Gateways hospital patients.

- Didi Hirsch Community Mental Health
- Asian American Drug Abuse Program, Inc.

Specialty Health Services

The following clinics provide after-care to Gateways hospital patients.

- Homeless Healthcare, Los Angeles
- United American Indian Involvement
- National Alliance for Mental Illness (NAMI)
 - Includes Family to Family, a program for the family members of Gateways' adolescent inpatients – this group is held at Gateways Hospital
- Project Return Peer Support Network

Family, Youth and Community Resources

- El Centro Del Pueblo
- P.F. Breese Foundation
- Children's Bureau
- Children's Institute

- Aviva Family Center

Adolescent Group Home Facilities

- Five Acres
- Hathaway Sycamores
- Hillsides
- McKinley Group Home

Adult and Continuing Education

Adult Schools

- Schurr Community Adult School
- Montebello Community Adult School
- California Department of Rehabilitation

Trade Schools

- L.A. Trade Tech
- Community Colleges
- Los Angeles Community College
- East Los Angeles Community College

Universities

- California State University, Los Angeles

Community Based Health Services

- Asian Pacific Counseling and Treatment Center
- Korean Health Education
- United American Indian Involvement, Inc.
- Saban Community Clinic

Institutions for Mental Health Treatment

The following facilities are locked residential facilities that provide a higher level of psychiatric care than Gateways' unlocked residential programs. Clients from these institutions are referred to Gateways residential facilities as part of their "stepdown" process in treatment.

- Alpine
- Harbor View
- La Casa
- Community Care Center
- Landmark Medical Center
- Laurel Park Center
- La Paz Geropsychiatric Center
- Meadowbrook Manor
- View Heights convalescent
- Olive Vista Center

Hospitals

Gateways accepts referrals of uninsured patients from the following hospitals. Gateways may also refer insured patients to these hospitals when appropriate.

- California Hospital Medical Center
- Glendale Adventist
- Glendale Memorial
- Harbor UCLA Medical Center
- Kedren Community Health Center
- LACUSC Medical Center
- Olive View UCLA Medical Center
- Silver Lake Hospital
- White Memorial Medical Center

Implementation Plan

Based on the findings of the 2025 CHNA, Gateways Hospital & Mental Health Center identified four priority health needs:

1. Drug and Alcohol Programs
2. Expanded Programming Offered Through Partnerships
3. Youth, Adolescent, Teen, and Young Adult Mental Health Services
4. Integrated Care

Gateways will address these needs primarily by continuing and strengthening existing programs and partnerships that already serve vulnerable populations in the community. This approach reflects Gateways' long-standing model of providing coordinated behavioral health services across inpatient, residential, and outpatient settings while working closely with community partners to address the complex needs of individuals experiencing serious mental illness.

To address the need for expanded drug and alcohol programs, Gateways will continue integrating substance use treatment services across its inpatient, residential, and outpatient programs. Individuals with co-occurring mental health and substance use conditions are served through programs such as the Inpatient Mental Health Hospital, Adult Residential Facilities Program, Crisis Residential Treatment Program, and Homeless Services Program. Gateways will also continue seeking grant funding and partnerships that allow the organization to expand substance use treatment services for adolescents and adults experiencing behavioral health challenges.

Gateways will address the need to expand programming offered through partnerships by continuing collaborations with community organizations that enhance access to services for clients. Existing partnerships include Queens Care, which supports transportation services to medical appointments; Chinatown Service Center, which provides dental and optometry services; Los Angeles Unified School District, which receives psychological testing and mental health services; and Elevate, which supports Spanish-language outreach and engagement. These partnerships strengthen Gateways' ability to connect clients to services that extend beyond traditional clinical care.

To address the need for youth, adolescent, teen, and young adult mental health services, Gateways will continue operating and expanding services through the Childhood and Adolescent Outpatient Program (GCAOP). This program provides therapy, medication management, case management, and psychological testing for children and youth experiencing mental health challenges. Youth programming also includes educational and skill-building activities focused on mental health awareness, self-esteem, healthy relationships, and coping strategies. Gateways will continue to partner with schools and other community organizations to ensure that youth have access to early mental health intervention and supportive services.

Finally, Gateways will continue advancing integrated care by coordinating mental health, physical health, and social services across its programs. Integrated care efforts include the Family Nurse Practitioner program, which provides on-site medical services; transportation programs that help clients access medical appointments; and partnerships with community providers that offer dental, optometry, and other health services. By continuing these integrated

service models, Gateways aims to improve health outcomes for individuals experiencing complex mental health and social challenges.

The following table summarizes the implementation strategy.

Health Need	Implementation Plan
Drug and Alcohol Programs	<ul style="list-style-type: none"> • Continue integrating substance use treatment within the Inpatient Mental Health Hospital program, Adult Residential Facilities Program, and Crisis Residential Treatment Program, to the extent funding and staff are available. • Continue serving clients with co-occurring mental health and substance use conditions through the Homeless Services (Outpatient Program). • Chief Development Officer and Chief Executive Officer will continue pursuing grants and partnerships to expand substance use treatment programming across Gateways service sites.
Expanded Programming Offered Through Partnerships	<ul style="list-style-type: none"> • Continue partnerships with Queens Care to provide transportation services that help clients attend medical and behavioral health appointments. • Continue dental and optometry services partnership with Chinatown Service Center. • Continue operating a psych testing lab that provides services to LAUSD and other agencies in the service area. • Continue community outreach and Spanish-language engagement through partnerships such as Elevate.
Youth, Adolescent, Teen, and Young Adult Mental Health Services	<ul style="list-style-type: none"> • Continue delivering services through the Childhood and Adolescent Outpatient Program (GCAOP), including therapy, medication management, psychological testing, and case management. • Continue youth programming such as the GCAOP summer camp focused on self-esteem, mental health hygiene, body image, anger management, and healthy relationships. • Continue partnerships with the Los Angeles Unified School District to provide mental health services in schools. • Continue expanding youth services to address trauma, substance use, and other emerging mental health needs among adolescents and young adults.
Integrated Care	<ul style="list-style-type: none"> • Continue the Family Nurse Practitioner program providing on-site medical services for patients receiving mental health treatment. • Continue integrating care across the Inpatient Mental Health Hospital, Adult Residential Facilities Program, Wellness Center, and Homeless Services Program. • Continue transportation services funded through Queens Care to improve access to external medical services. • Continue partnerships that provide physical health services such as dental and optometry care through Chinatown Service Center.

Appendix A: Focus Group Attendance and Questions

Organization / Facility	Participant and Title	Outreach Category
Gateways Hospital	Phil Wong, Chief Executive Officer	C-Level
Gateways Hospital	Brian Thorne, Chief Development Officer	C-Level
Gateways Hospital	Meredith Mead, Senior Director of Clinical Services	C-Level
Gateways Hospital	Cynthia Lermond, Administrative Director/Community Program Director	C-Level
Gateways Hospital	Fay Ji, Chief Financial Officer	C-Level

Organization / Facility	Participant and Title	Outreach Category
Gateways Hospital	Colleen Carrol, Director of Occupational Therapy	Junior & Mid-Level Staff, Focus Group
Gateways Hospital	Alexandra Baumgartner, Occupational Therapist	Junior & Mid-Level Staff, Focus Group
Gateways Hospital	Mia Esquivel, Occupational Therapist	Junior & Mid-Level Staff, Focus Group
Gateways Hospital	Sarah, Manager at Gateways Satellite	Junior & Mid-Level Staff, Focus Group

Organization / Facility	Participant and Title	Outreach Category
Gateways Hospital	A Residential Client, Anonymous Program	Residential and Outpatient Clients

Junior and Mid-level Staff Focus Group Questions

1. What is your first impression of the following list of needs? Are any needs missing?
 - Drug and alcohol programs
 - Stronger partnerships between schools, nonprofits, community groups, and other organizations
 - Mental health services for youth, adolescent teens, and young adults
 - Integration of physical and mental health care
2. How is Gateways meeting each health need?
3. How else can Gateways meet these health needs?

Gateways Client Focus Group Questions

1. In your experience, what is Gateways best at?
2. What kinds of needs do you think Gateways clients have?
3. If you could add or change something for Gateways, what would it be?
4. Are there any other outside partnerships that you think could be helpful?

Appendix B: Suggestions Offered in Focus Groups

Focus Group Source	Suggestion
Junior & Mid-Level Staff	Develop partnerships that provide physical health screenings and referrals for clients receiving mental health services.
Junior & Mid-Level Staff	Establish a podiatry partnership to address foot health issues among clients.
Junior & Mid-Level Staff	Provide nutrition education and counseling for clients with diabetes or prediabetes.
Junior & Mid-Level Staff	Implement dental screenings for clients.
Junior & Mid-Level Staff	Add physical therapy services such as gait training, exercise, and fall prevention.
Junior & Mid-Level Staff	Bring in diabetes educators to support clients with metabolic conditions.
Junior & Mid-Level Staff	Improve integration between occupational therapy, social work, and psychology services.
Junior & Mid-Level Staff	Increase follow-up and continuity between departments as clients transition between services.
Junior & Mid-Level Staff	Hire or designate staff responsible for building external partnerships rather than relying on program directors.
Junior & Mid-Level Staff	Expand trauma-informed care initiatives, including programming focused on positive childhood experiences and family engagement.
Junior & Mid-Level Staff	Expand the new graduate training program for nurses.
Junior & Mid-Level Staff	Provide ongoing education for staff on the populations served by Gateways.
Junior & Mid-Level Staff	Develop job retraining and employment programs to support community reintegration (e.g., models similar to Homeboy Industries).
Junior & Mid-Level Staff	Develop programming that supports smoother transitions between different phases and levels of care.
Junior & Mid-Level Staff	Develop financial literacy programming for clients, including understanding finances and internal program financial systems.
Client	Facilitate opportunities for clients to attend outside Alcoholics Anonymous (AA) meetings in addition to in-house meetings.
Client	Support connections to AA sponsors and recovery networks outside the facility.
Client	Provide anger management training for clients.
Client	Expand physical activity and recreational opportunities.
Client	Offer training on practical life skills such as setting up bank accounts and managing bills.

Appendix C: Evaluation of Progress on 2022 CHNA Priority Health Needs

Since completing the 2022 Community Health Needs Assessment (CHNA), Gateways Hospital & Mental Health Center has made meaningful progress in addressing the priority health needs identified through that assessment.

1. Address Physical Health Services for Mental Health Patients
2. Improve Staff Retention Rates
3. Expand Lifestyle and Social Skill Building Programming
4. Improve or Expand Programming Offered Through Partnerships

Gateways addressed the need to improve access to physical health services for mental health patients by expanding on-site medical services through the Family Nurse Practitioner program, implementing transportation services funded through Queens Care to improve access to external health providers, and developing partnerships with community organizations such as Chinatown Service Center to provide dental and optometry services. These activities helped improve access to preventative care and specialty services for clients who often face significant barriers to healthcare.

To address the need to improve staff retention rates, Gateways implemented several workforce initiatives designed to strengthen staff recruitment and retention. These efforts included implementing a loan repayment program through the California Health & Human Services Agency, introducing signing bonuses and flexible work arrangements, piloting a 9-80 work schedule, and expanding internship and training opportunities through a multi-year mentor internship program grant. Together, these efforts aim to reduce staff turnover and improve continuity of care for clients.

Gateways also continued to expand lifestyle and social skill building programming for clients receiving mental health services. Activities included ongoing off-site excursions led by occupational therapists to promote community engagement, implementation of a sensory program developed in partnership with the USC Occupational Therapy Department, restoration of family visitation policies following COVID-19 restrictions, and development of therapeutic programming such as pet therapy. These programs support clients in building social skills, strengthening relationships, and improving overall well-being.

Finally, Gateways worked to expand programming offered through partnerships with community organizations. Key initiatives included expanding the Queens Care transportation program, implementing a dental and optometry partnership with Chinatown Service Center, establishing a psychological testing laboratory serving LAUSD and other local agencies, and implementing telehealth improvements funded by the Delta Foundation. These partnerships increased access to supportive services and strengthened coordination of care across the community.

The following table summarizes the progress made on 2022 CHNA priority health needs.

2022 CHNA Priority Health Need	Evaluation of Progress
Address Physical Health Services for Mental Health Patients	<ul style="list-style-type: none"> • Hired additional Family Nurse Practitioners to provide on-site medical care for patients receiving behavioral health treatment. • Implemented transportation services funded by Queens Care, including purchase of a van to transport clients to medical appointments. • Established partnership with Chinatown Service Center to provide dental and optometry services to inpatient and outpatient clients. • Expanded preventative care and wellness programming through RN-led health and wellness sessions.
Improve Staff Retention Rates	<ul style="list-style-type: none"> • Implemented loan repayment program through the California Health & Human Services Agency to support staff recruitment and retention. • Introduced signing bonuses and flexible work arrangements for certain positions. • Launched pilot 9-80 work schedule to improve staff satisfaction and retention. • Expanded internship and training programs supported by a \$2.5 million mentor internship grant.
Expand Lifestyle and Social Skill Building Programming	<ul style="list-style-type: none"> • Continued off-site excursions led by occupational therapists to support social engagement and community integration. • Expanded sensory program operated in partnership with the USC Occupational Therapy Department. • Restored pre-COVID family visitation policies to strengthen social support networks for clients. • Developed internal therapeutic programs such as pet therapy and recreational activities.
Improve or Expand Programming Offered Through Partnerships	<ul style="list-style-type: none"> • Expanded transportation partnership with Queens Care to improve access to medical services. • Developed dental and optometry partnership with Chinatown Service Center for physical health services. • Established psych testing lab providing services to LAUSD and other agencies in the service area. • Implemented telehealth and technology improvements funded through grants such as the Delta Foundation telehealth grant.

Appendix D: State and Federal CHNA Requirements

Gateways Hospital & Mental Health Center, a private nonprofit hospital, has completed this Community Health Needs Assessment (CHNA) for 2025 in accordance with California Senate Bill 697, Community Benefits Legislation, and the federal Affordable Care Act.

According to the relevant law, the CHNA must be made widely available to the public and must include the following.

1. A definition of the community served by the hospital facility and a description of how the community was determined;
2. A description of the process and methods used to conduct the CHNA;
3. A description of how the hospital facility solicited and took into account input received from persons who represent the broad interests of the community it serves;
4. A prioritized description of the significant health needs of the community identified through the CHNA, along with a description of the process and criteria used in identifying certain health needs as significant and prioritizing those significant health needs;
5. A description of the resources potentially available to address the significant health needs identified through the CHNA;
6. An evaluation of the impact of any actions that were taken since the hospital facility finished conducting its immediately preceding CHNA to address the significant health needs identified in the hospital facility's prior CHNA(s); and
7. An implementation strategy detailing the methods used to address community health needs identified in the CHNA.

The present document addresses the state-required CHNA and items 1-7 above of the federal requirements, which together encompass the needs assessment components of the state and federal requirements.