

# **Community Benefit Report**

## **Hoag Memorial Hospital Presbyterian**

**2010**

**OSHPD Facility ID #106301205**

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# Hoag Memorial Hospital Presbyterian Community Benefit Plan Update 2010

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## **Executive Summary**

The Community Medicine department at Hoag Memorial Hospital Presbyterian was established in 1995. Since its beginning the program has focused on two principal strategies:

- Provide necessary healthcare-related services which are unduplicated in the community.
- Provide financial support to existing community based not-for-profit organizations which already provide effective healthcare and related social services to meet community health needs.

The Department of Community Medicine, led by its Director, Gwyn Parry, MD, is responsible for the coordination of Hoag Hospitals' Community Benefit reporting, and provides free programs to assist the underserved in the community. These include Community Case Management, Mental Health and Psychotherapy, Health Ministries Coordination, and Project Wipeout. In addition to these services, many other Hoag Hospital departments provide community health services including education and support groups which are free to the community. The hospital also has substantial relationships with local colleges and universities to invest in the education of various health professions.

Community Medicine grants support Hoag Health Associates- organizations that provide a broad range of services, including the following:

- Free medical and dental care
- Adult day care and education for persons who suffer from Alzheimer's disease or mild dementia, with support and education for their caregivers and families
- Transportation services for local senior centers

Finally, Hoag Hospital provides uncompensated care (charity) to patients who are unable to pay for the full cost of their care. These expenditures amounted to over \$14 million in Fiscal Year 2010 (October 1, 2009 through September 30, 2010.) The hospital charity care and self pay discount policy states that self-pay and uninsured patients who are unable to pay for the full cost of their care may qualify for charity or discounts on a sliding scale for incomes up to 400% of the federal poverty level.

Total quantifiable Community Benefit expenditures for FY2010 at Hoag Hospital amounted to \$ 107 million.

This report provides detailed descriptions of Hoag Hospital's Community Benefit programs and services, and includes quantifiable data for expenditures by these programs in Fiscal Year 2010.

## **Introduction**

The Hoag Memorial Hospital Presbyterian Community Benefit Program was formalized in 1995 and has grown significantly since that time. We have served over eighty not-for-profit community organizations in a variety of health and social service categories. We continue to emphasize the development of sustained collaborative relationships and the provision of unduplicated services to disadvantaged residents in our community as core elements of the program.

Hoag Memorial Hospital Presbyterian is a full-service, not-for-profit hospital of 498 licensed beds. Located on the Pacific Coast in Newport Beach, California, it is 34 miles southeast of Los Angeles. Fully accredited by the Joint Commission on Accreditation of Healthcare Organizations (JCAHO) and designated as a Magnet Hospital by the American Nurses Credentialing Center (ANCC), Hoag offers a comprehensive mix of health care services. These include the Centers of Excellence in Cancer; Heart and Vascular Institute; Neurosciences Institute; Orthopedic Services; and Women's Health Services.

Since opening the Newport Beach campus in 1952, Hoag has grown from a single-site hospital to having three hospitals across two campuses and multiple satellite outpatient services locations. Hoag has instilled its exemplary brand of quality patient care at all locations. American Nurses Credentialing Center's (ANCC) Magnet Recognition Program® has re-designated Hoag Hospital Newport Beach as a Magnet hospital and extended the Magnet designation to Hoag Hospital Irvine in recognition of the commitment to nursing excellence at both hospitals.

Hoag has also received acclaim as a top ranking hospital from consumer publications. In June 2010, US News & World Report released its latest top 100 hospital rankings. The Cancer Institute ranked 9<sup>th</sup> among California hospitals and the highest in Orange County. For the 15th consecutive year, Hoag has been named the most preferred hospital by Orange County residents based on a consumer study by National Research Corporation (NRC). And in a readers poll, The Orange County Register selected Hoag Hospital as the Best Hospital in Orange County, a title Hoag has claimed for 15 of the 16 years the poll has been taken.

The hospital serves its surrounding communities with health centers located in Costa Mesa, Huntington Beach, Fountain Valley, Aliso Viejo, two Irvine locations and its newest location in Newport Beach just a few blocks from Hoag Hospital Newport Beach. Hoag successfully opened Hoag Hospital Irvine (HHI) on September 1, 2010. The new hospital is an acute care general hospital with a fully-staffed emergency room focused on improving the flow of emergent care and feature Hoag Orthopedics, an inpatient hospital within HHI, progressive cardiac care and dedicated hospitalists committed to expanding care 24/7. Hoag currently employs over 5,300 dedicated, highly skilled people and is fortunate to have a strong volunteer program composed of 1,400 participants who provide over 100,000 hours of annual support.

## **History**

Hoag Hospital was opened in 1952 as a community partnership between the Presbyterian Churches of the Los Ranchos Presbytery and the George Hoag Family Foundation, a private charitable foundation.

As a not-for-profit institution, ownership and board election remain vested equally in the corporate members: the 58 Presbyterian churches of the Los Ranchos Presbytery and the charitable George Hoag Family Foundation. Governance is provided by a Board of Directors comprised of sixteen voting members who serve overlapping three-year terms. Board membership consists of twelve individuals elected at large, and an additional three voting members who are elected from the active medical staff. The hospitals' Chief Executive Officer is also seated on the board as a voting member. An annual meeting at the end of the fiscal year provides the corporate members the opportunity for the election/reelection of directors for the ensuing year.

Since its founding the hospital has welded a strong commitment to the community that it serves, including the provision of services for those who constitute a more vulnerable, at-risk population. Such care, for both inpatients and outpatients, is often only partially compensated. With excellence of management and the diligent stewardship of funds, Hoag has been able to sustain its financial strength. As a result, Hoag has been able to maintain a continuing commitment to quality of care while developing and expanding community programs and partnerships. Most of the funds expended upon Community Benefit are from operating income. Nursing professorship grants and our Cell Biology work in primary clinical research are funded by transfers from the hospital foundation.

## **Hoag Hospital Irvine**

Hoag Hospital achieved another milestone in its 55-year history by opening Hoag Hospital Irvine (HHI) on September 1, 2010. HHI is an acute care general hospital offering residents of Irvine and the surrounding communities a wide spectrum of inpatient and outpatient services, as well as a fully staffed emergency room dedicated to improving the flow of patient care.

HHI is an 84-bed hospital which boasts 2 fully modernized operating rooms for both inpatient and outpatient surgeries. The beautifully remodeled hospital features new radiology equipment including MRI, CT, nuclear medicine, ultrasound, and Interventional Suite. In addition there are new cardiac catheterization labs, as well as new laboratory equipment including chemistry analyzers, hematology analyzers and blood banking equipment.

With experienced and dedicated physician leadership in concert with advanced technology, HHI offers patients the same quality care they've come to know from Hoag's Newport Beach campus.

Hoag Hospital Irvine is located at 16200 Sand Canyon Ave., Irvine, CA, right off the 405 freeway at Sand Canyon. For more information, visit [www.hoag.org](http://www.hoag.org).

## **Mission, Core Values, and Vision**

Hoag's Mission Statement is developed and regularly reviewed by hospital leadership, approved by the hospital Board of Directors, and communicated to Medical Staff and employees throughout the hospital. The hospital Mission Statement and Core Values are as follows:

**“Our mission as a not-for-profit, faith-based hospital is to provide the highest quality health care services to the communities we serve.”**

### *Core Values*

Excellence

Respect

Integrity

Patient Centeredness

Community Benefit

The hospital Vision Statement declares:

**“Hoag is a trusted and nationally recognized healthcare leader.”**

The hospital has designated six Core Strategies to achieve our mission and vision:

### *Quality and Service*

Hoag Hospital will be recognized as a leading hospital in California for its excellent performance in safety, service and clinical quality.

### *People*

Hoag Hospital will attract, develop, and retain a high-performing workforce and develop a workplace environment that reflects its values and commitment to its employees.

### *Physicians Partnerships*

Hoag Hospital will create sustainable, mutually beneficial partnerships with exceptional physicians.

### *Strategic Growth*

Hoag Hospital will be the specialty hospital of choice throughout Orange County.

### *Financial Stewardship*

Hoag Hospital will maintain its financial strength within the AA bond rating category.

### *Community Benefit and Philanthropy*

Hoag Hospital will provide resources and partner with community-based organizations to improve the health of our communities.

## Community Benefit Philosophy

***We are encouraged by the better angles of our nature and the disposition of our hearts to think favorably of our fellows, regardless of their circumstances, and to do them good: improving and sustaining their health and the quality of their lives and thus benefiting all.***

The Department of Community Medicine provides direct services and collaborates with other not-for-profit community-based organizations to promote the health of our communities. The Department coordinates Hoag Hospital Community Benefit activities, driven by the health needs of our surrounding communities, which are regularly reviewed in an ongoing manner.

Hoag's Community Benefit Program is guided by five Core Principles:

- *Emphasis on Disproportionate Unmet Health-Related Needs (DUHN)* - We concentrate on residents who have a high prevalence of severity for a particular health concern; and on residents with multiple health problems and limited access to timely high quality health care.
- *Emphasis on Primary Prevention* – We focus on program activities that address the underlying causes of persistent health problems as part of a comprehensive strategy to improve health status and quality of life in local communities.
- *Build a Seamless Continuum of Care* – We work to develop and sustain operational linkages between clinical services and community health improvement activities to manage chronic illnesses among uninsured and publicly insured populations.
- *Build Community Capacity* – We target our charitable resources to mobilize and strengthen existing effective community health services.
- *Emphasis on Collaborative Governance* – We emphasize *Networking* to exchange information; *Coordination* of synergistic activities; *Cooperation* in sharing resources; and *Collaboration* to enhance the combined capacity of our community health partners.

The department provides services which are unduplicated in the community. These currently include case management, community counseling and the coordination of faith-based nursing. Each of these programs is focused on DUHN community residents. We help these individuals obtain the health care and related services that they need, including medical insurance, and assist them by coordinating the necessary medical, dental and social services.

In order to promote effective access to health care and related services, the department works in collaboration with a number of not-for-profit community based organizations to provide insurance coverage as well as free services to underserved and vulnerable residents, many of whom are undocumented. Department services provide immediate solutions to the needs of some residents, and we give grants to expand insurance coverage and enhance the medical services available to these individuals.

Charity care is an integral component of the benefit that Hoag provides to the community. The current hospital Charity Care and Self Pay Discount Policy provide assistance on a sliding scale for uninsured and self-pay patients with family incomes up to 400% of the Federal Poverty Level.

The Federal Poverty Level is defined as a minimum amount of income that a family needs for food, clothing, transportation, shelter and other necessities. For a family of four, the current annual Federal Poverty Level in FY2010 was \$22,050. The current Charity Care and Self-Pay Discount Policy is provided in Appendix A. In FY2010 the hospital served 13,632 Charity Care cases.

A summary of the quantifiable Community Benefit provided by Hoag Hospital in FY2010 (October 1, 2009 through September 30, 2010) is provided in Appendix B, which begins a section that provides narrative descriptions of Hoag Hospital Community Benefit programs. Appendix C provides a detailed listing of the Community Benefit programs with the total expenditures.

### **Primary Initiatives for FY2011**

- Continue to provide and expand Community Medicine services, with an emphasis upon health promotion and disease prevention activities.
- Sustain Community Health Collaborations.
- Promote the expansion of Community Benefit services for those less fortunate.

## Community Needs Assessment

California Community Benefit legislation, with specified exceptions, requires that not-for-profit hospitals conduct a community health needs assessment every three years. The community health needs assessment involves the identification of both unmet health-related needs and existing community assets. Hoag Hospital meets this requirement with the Orange County Health Needs Assessment (OCHNA), a collaborative partnership of hospitals and other public and private health-related organizations in the county. Hoag's participation with the OCHNA insures the continued viability of this vital source of community health data, which all Orange County hospitals, as well as other organizations, may use to determine priority health concerns. The Web address for the Orange County Health Needs Assessment is [www.ochna.org](http://www.ochna.org).

### **Access to Health Care: A Decade of Gains Lost in the Recent Economic Recession**

From 1998 through 2007 Orange County demonstrated measurable improvements (reductions) in the number of adults and children without health coverage, dropping from a high of just under 15% to a low of 9 % for adults and 11% to a low of less than 4% for children. With the economic downturn that started in mid 2007 and continued into 2009, the gains of the last 10 years have been completely erased. Overall the uninsured population in Orange County has more than doubled from 2007 to 2009 for both adults (increasing from 9% to 20%), which is higher than it was in 1998, and children (increasing from under 4% to just over 10%), which is now just under the uninsured rates of 1998. Ethnic/minority populations throughout OC have experienced the largest losses of health care coverage, with almost one in three Hispanic/Latinos (32%) having no health care coverage; Hispanic children are over four times (16%) more likely than white children (3%) to be without health care coverage; and just over 43% of Latino adults and 15% of all Asians are without coverage health care coverage.

### **Lack of Health Coverage in the Hoag Service Area (ACS 2009)**

Compared to Orange County, there was a greater proportion of children (0-17) and non-elderly adults (18-64) in the Hoag service area that were without any form of health care coverage in 2009.

- **Orange County:** 10% of children and 23% of non-elderly adults were without any form of health care coverage.
- **Hoag Service Area:** 13% of children and 27% of non-elderly adults were without any form of health care coverage.

Uninsured rates are even worse in cities that have higher proportions of low-income and minority populations; these cities have seen their unemployment rates more than double from 2007 to 2009. The countywide unemployment rate increased from an average of 4% in 2007 to 10% in September 2010.

- **Santa Ana:** 47% of Adults (18-64) and 20% of children (0-17) are uninsured; rate of unemployment rose from 6% in 2007 to 15% as of September 2010.
- **Garden Grove:** 35% of Adults (18-64) and 13% of children (0-17) are uninsured; rate of unemployment rose from 5% in 2007 to 12% as of September 2010.
- **Costa Mesa:** 28% of Adults (18-64) and 12% of children (0-17) are uninsured; rate of unemployment rose from 4% in 2007 to 9% as of September 2010.

- **Westminster:** **21%** of Adults (18-64) and **9%** of children (0-17) are uninsured; rate of unemployment rose from 4% in 2007 to **11%** as of September 2010.

### **Body Weight, Obesity, and Chronic Diseases**

Any effort to increase the quality of life and health of patients over time must consider increasing healthy eating, physical activity and healthy weight a priority, the first step to reducing and controlling chronic disease such as diabetes and heart disease.

The percentage of Orange County children and adults who are either overweight or obese has continued to rise over the last years, similar to state and national rates. The Hoag service area did slightly better than county rates, but still had significant number of both children and adults who are at an unhealthy weight according to the 2007 OCHNA survey. For both Orange County and the Hoag service area, there was a gender difference among adults, showing men as significantly more likely than women to be overweight or obese; the gender disparity applied to children as well.

- **Orange County:** **31%** of children were overweight or at risk for being overweight; **54%** of adults were overweight or obese.
- **Hoag Service Area:** **29%** of children were overweight or at risk for being overweight; **50%** of adults were overweight or obese.

The impact of obesity on health overall is dramatic, especially compared to those with a healthy body weight:

#### **Orange County (OCHNA 2004):**

- **13%** of overweight/obese adults reported having **diabetes**, compared to only **1%** of healthy weight adults.
- **33%** of overweight/obese adults reported **high blood pressure** and **27%** reported **high cholesterol**, compared to only **13%** and **16%** respectively of healthy weight adults.
- **23%** of overweight/obese adults had **arthritis**, compared to **15%** of healthy weight adults.

#### **Hoag Service Area (OCHNA 2004):**

- **15%** of overweight/obese adults reported having **diabetes**, compared to only **1%** of healthy weight adults.
- **33%** of overweight/obese adults reported **high blood pressure** and **30%** reported **high cholesterol**, compared to only **11%** and **13%** respectively of healthy weight adults.
- **23%** of overweight/obese adults had **arthritis**, compared to **15%** of healthy weight adults.

The fiscal impact of health problems related to obesity is just as dramatic. According to the California Center for Public Health Advocacy, it is estimated that California spent over \$41 billion on obesity related health care in 2006, with Orange County representing over \$3 billion of those costs.

### **Diabetes and Other Chronic Conditions**

Adults who have been diagnosed with one chronic disease, such as diabetes, are at greater risk for additional chronic diseases than those who do not have diabetes.

**Orange County (OCHNA 2004):**

- Of Orange County adults who reported having diabetes, **40%** also had arthritis. In contrast, **17%** of Hoag service area adults without diabetes had arthritis.
- **62%** of adults with diabetes also had high blood pressure; among those without diabetes; **21%** had high blood pressure.
- **24%** of adults with diabetes also had heart disease; only **4%** of those without diabetes reported having heart disease.
- Nearly **17%** of adults with diabetes were also diagnosed with cancer, compared to **7%** of adults without diabetes who were diagnosed with cancer.

**Hoag Service Area (OCHNA 2004):**

- Of Hoag service area adults who reported having diabetes, **45%** also had arthritis. In contrast, **17%** of Hoag service area adults without diabetes had arthritis.
- **65%** of adults with diabetes also had high blood pressure; among those without diabetes, only **19%** had high blood pressure.
- **27%** of adults with diabetes also had heart disease; only **4%** of those without diabetes reported having heart disease.
- Nearly **19%** of adults with diabetes were also diagnosed with cancer, compared to **6%** of adults without diabetes who were diagnosed with cancer.

The average cost of a hospital stay for an individual admitted with diabetes in 2007 was approximately \$16,454. Of the 10 most costly health conditions, four (heart disease, diabetes, hypertension and hyperlipidemia) are often linked to obesity, poor nutrition and lack of exercise.

**Mental and Behavioral Health**

The last decade saw some increases in the proportion of those with mental health coverage, rising along with general health care coverage rate. As coverage substantially decreased in 2008 and 2009, mental health coverage also would have decreased, leaving many with no access to needed mental health services.

**Orange County (OCHNA 2007):**

- An estimated **6%** of Orange County children between 6 and 17 years have been diagnosed with a mental or behavioral health problem.
- **8%** of parents with children (6-17) had sought out advice from their primary care physician regarding their child's emotional or behavioral problem.
- **16%** of adults expressed concerns about their own mental and emotional health in the previous year.

**Hoag Service Area (OCHNA 2007):**

- An estimated **7%** of Hoag service area children between 6 and 17 have been diagnosed with a mental or behavioral health problem.
- **9%** of parents with children (6-17) had sought out advice from their primary care physician regarding their child's emotional or behavioral problem.
- **16%** of adults expressed concerns about their own mental and emotional health in the previous year.

## **Service Objectives**

The service objectives of the Community Benefit program remain as initially defined:

- **Access:** To ensure adequate access to medical treatment through the availability of inpatient, outpatient and emergency medical services.
- **Services for Vulnerable Populations:** To provide health care services to uninsured, underinsured and indigent populations.
- **Education/Prevention:** To address the community health needs identified by the community health needs assessment through screening, prevention and education programs and services.
- **Research:** To provide new treatments and technologies to the local community through participation in primary clinical research.
- **Collaboration:** To establish and participate in collaborations which address community health priorities.
- **Coordination:** To provide case management services which coordinate medical and social services for vulnerable community residents

## **Department of Community Medicine Programs**

The department of Community Medicine provides direct Community Benefit service programs and coordinates Community Benefit reporting at Hoag Hospital. This section of the report provides information for each of the Community Medicine programs and achievements in FY2010.

### **Community Case Management**

This program exists to provide assistance to needy residents as they negotiate the local health care delivery system. Many local residents may not use available resources due to language barriers, lack of insurance, and lack of awareness about existing health care resources. The Case Managers assist in resource brokering for those within our community, gaining access to needed services. Bilingual Case Managers work with Share Our Selves Free Medical and Dental Clinic (SOS) to assess each patient's eligibility for funding resources, including MediCal and Medical Services Initiative Program (MSI). Over 650 SOS patients were screened for MSI coverage in FY2010. If the patient is eligible for insurance, the Case Manager coordinates the application process and connects the patient to a variety of health care providers, thus providing a seamless continuum of care from onset of illness to recovery. In addition to assistance with insurance eligibility screening and application, Community Case Management staff provided assistance for 2327 SOS patients who were referred for hospital services in FY2010. There were 108 patients referred for surgical consults in FY2010 with over 90 patients receiving surgical treatments.

Community Case Management staff work in several other programs to improve access to health care services for low-income residents in our community:

- We recently established a relationship with Families Forward in Irvine to provide access to Hoag Hospital Irvine for medically necessary services for those in need within their program.
- We have collaborated with the Orange County Health Care Agency to provide Pertussis vaccine to those families within our community for no charge. Over 200 family members of infants/small children obtained the vaccine.
- We collaborated with community physicians, to provide free access to the Sweet Success gestational diabetes education program for 50 low-income women during the reporting period.
- We continue in a collaborative agreement with AccessOC which provides free low risk surgeries for those within our community, extending the services to Hoag Irvine.
- We have a long-term partnership with local senior centers to provide a personal alert (Lifeline) system to frail homebound elderly residents. Senior Centers make referrals to our Case Managers, who establish the service. Hoag Hospital paid for the installation and monthly services for 15 individuals in this program in FY2010.

Case management is an educational process, to provide an increased awareness of the services available and to offer preventative health tips. Case management also supports the hospital staff providers who call upon Case Managers to assist with community resources and referrals for patients with difficult circumstances.

**Contact Rebecca Barnard, MSN, RN, Community Services Program Manager at (949)764-6953 or [rebecca.barnard@hoag.org](mailto:rebecca.barnard@hoag.org)**

## **Mental Health and Psychotherapy Program**

The Mental Health and Psychotherapy Program was founded to provide free bilingual bicultural services to people who otherwise could not obtain mental health services. The majority of the program's clients are low-income and uninsured. The number of clients who are underinsured continued to grow this past year. These clients have limited health insurance with no mental health/behavioral health benefits or they have benefits but can no longer afford the co-payments and/or deductibles.

During FY 2010, the program added a bilingual and bicultural Farsi speaker increasing the number of employed full-time bilingual Master's prepared social workers to seven. During FY 2010 the program provided mental health services to 453 clients in the form of psychotherapy, resource brokering, and/or case management. In addition the program offered psychotherapeutic and psychoeducational groups to 844 participants. All services are offered on a voluntary basis and at no charge. A review of client demographics found that the majority of the clients seen through the Mental Health and Psychotherapy Program are female (71%), Hispanic (93%), and speak Spanish (69%) as their primary language. The average age of the clients was 30. Fifty-four percent of the clients had at least a high-school education. Forty-nine percent of the clients reported having an annual household income below \$20,000. The average client completed 17.3 sessions.

The program has proven to be highly efficient and effective. The program utilized a clinical assessment tool (DASS) to measure levels of depression, anxiety and stress in clients. According to pre and post test scores, clients who participated in 10 sessions saw a statistically significant decline in depression (4 point reduction), anxiety (3 point reduction), and stress (5 point reduction) scores.

In FY 2010 the program provided a supervised clinical internship program for five MSW (Master of Social Work) students from the University of Southern California and from California State University at Long Beach. The program provided consultation, support and education to paraprofessionals at partner agencies such as Share Our Selves Free Medical and Dental Clinic, Girls Incorporated and the Newport Mesa Unified School District. This support included telephone consultation, workshops and in-service education during FY 2010. In addition to support for the staff of partner agencies, the Mental Health and Psychotherapy Program offered several different psychotherapeutic and psycho educational groups and workshops for the partner agency clients. These efforts allow our partner agencies to offer mental health services at no cost to their clientele and all services are provided in-kind to the not-for profit agencies. Some examples include: a cancer support group, depression support groups, self esteem groups and stress management workshops. Groups were also offered for parents, families and adult couples struggling with relationship issues.

During FY 2010, the program also expanded its support to the Mary and Dick Allen Diabetes Center at Hoag Hospital. The Mental Health and Psychotherapy Program became responsible for all the mental health services being provided to young adults with type 1 diabetes. Psychotherapy in individual and group format was offered to the young adults and their caregivers/significant others. Psychoeducational workshops were also offered.

**Contact: Michael Rose, LCSW, Program Manager at (949)764-6278 or  
Michael.Rose@hoag.org**

## **Health Ministries**

The Health Ministries Program supports individual Parish Nurse Programs throughout Orange County. The program is based on an integrative model of health and wellness by incorporating the physical, emotional and spiritual needs of a person through ‘wholistic’, intentional and preventive interventions. Individuals receive care and attention from Parish Nurses/Faith Community Nurses through one to one, group or community health activities. The Health Ministries program, coordinated by two Hoag RNs, provides leadership, expertise and resources necessary to support existing church partnerships and to promote expansion of the model to other Faith Communities. Currently 31 partner congregations from 11 different denominations and belief systems have joined the Health Ministries team. Each faith community has a Registered Nurse (RN) within the church who administers the program along with a health ministry team. Except for a few who are paid church staff, the majority of the nurses donate their time as volunteers.

Monthly Health Ministries Luncheons are provided for the Faith Community Nurses (FCN), giving them the opportunity to meet and network with other FCN’s in our community. Speakers from a variety of local agencies also attend the meetings providing resources and education for the nurses. With this time together various programs and activities within each faith community are shared, often resulting in implementing new ideas and programs in other partner churches.

The program participates in a number of collaborative efforts with other not-for-profit agencies. Collaborative efforts with Alzheimer’s Family Services Center in Huntington Beach have produced in-depth education of dementia prevention along with earlier identification and treatment by bringing educational programs into the congregations. Collaborative efforts with our Mental Health and Psychotherapy Program have led to Social Workers providing free counseling and support groups to low- income and uninsured clients within a number of our faith communities. There are approximately 23,000 congregants that belong to our 31 associated congregations. The program enables the FCN’s to work within their congregation and community providing programs, resources and education specific to the needs of their population. It is important to note that the particular values, beliefs and practices unique to each individual congregation are integrated into an individual church’s program. The Parish Nurse provides intentional care of the spirit, thus empowering individuals in their journey towards a ‘wholistic’, health affirming balance of mind, body and spirit.

Keeping with Health Ministries focus on health promotion and disease prevention nearly 9,000 doses of flu vaccine were dispensed and given to our faith partners; community collaborators, such as the Share Our Selves Clinic, Hoag Irvine, the Irvine School District and several Senior Centers. Within our faith communities 225 people were certified in CPR with or without AED training and First Aid. Various other activities and programs were administered by the FCN’s such as: health fairs, disaster preparedness, blood pressure clinics, blood drives, proper hand washing technique, health and spiritual related articles in church newsletters, health education classes, support groups, visits to congregants, health counseling, referrals and many more invaluable and intangible services to our many faith community members here in Orange County.

**Contact: Cassie Parker BS, RN Coordinator of Health Ministries at 949-764-6565 or [cassie.parker@hoag.org](mailto:cassie.parker@hoag.org)**

## **Project Wipeout**

The mission of Project Wipeout is to educate and raise awareness on injury prevention at the beach, particularly neck and spinal cord injuries, by distributing beach safety information locally and nationwide.

Project Wipeout:

- Emphasizes education on drowning and neck and spinal cord injury prevention
- Focuses its efforts on those most at risk, children and young people between the ages of 16 and 30
- Participates in community events and provides free beach safety educational presentations and materials to schools and community organizations
- Collaborates with members of Lifeguard and Fire Departments, teachers, parents and committed volunteers to broaden public access to our beach safety message.

Project Wipeout's intent is to provide basic information on the types of injuries that occur, how they happen, and what to do to protect against them. This information is disseminated via presentations, videos, and printed materials at schools, community events, lifeguard training, and seminars. More than 30,000 copies of Project Wipeout brochures, coloring books and activity books are distributed annually through community events and at elementary, junior high and high schools.

Print materials are also used at presentations given by local lifeguards, which feature Project Wipeout's video (mandatory viewing for trainees in Orange County's junior guard programs). It is also being used throughout the U.S. and by lifeguard departments as far away as England and Australia, and it is seen by thousands of elementary, junior high and high school children every year.

**Contact: Kris Okamoto, RN, CNRN, Project Wipeout Coordinator at (949) 633-6825 or [kenoka@pacbell.net](mailto:kenoka@pacbell.net)**

## **Other Hoag Community Benefit Activities**

Hoag Hospital's commitment to Community Benefit is best exemplified by the dedication of an entire department to the coordination and provision of Community Benefit programs. The hospital's Community Benefit activities are not limited to the department of Community Medicine, however. Other hospital departments provided a wide range of Community Benefit activities in FY2010, including health professions education, clinical research, support groups and many more. This section of the report features a discussion of some examples of the Community Benefit activities that were provided by other hospital departments in the current reporting period.

### **The Mary & Dick Allen Diabetes Center**

About eight percent of Americans have diabetes. One quarter of these individuals are undiagnosed. The total estimated cost of diabetes in the United States in 2007 was \$174 billion, including \$116 billion in excess medical expenditures and \$58 billion in reduced national productivity (Diabetes Care, March 2008). While diabetes alone is ranked as the sixth leading cause of death in the U.S., it also indirectly contributes to deaths by other causes, including cardiovascular disease, stroke and kidney disease (National Vital Statistics Report, CDC, 2006). Diabetes is also closely linked to other serious medical outcomes, including kidney failure, blindness, and leg and foot amputations.

The Mary & Dick Allen Diabetes Center at Hoag Hospital provides diabetes education and support services to adults at its Newport Beach location. The two principal services are the American Diabetes Association-accredited Diabetes Self Management Education (DSME) and State of California Diabetes and Pregnancy Program-affiliated Sweet Success program for women with gestational diabetes. Community and Medical Professional Education are also critical components of our services.

The Center has partnered with CHOC (Children's Hospital of Orange County) to provide bilingual clinical services, education, and support for children diagnosed with diabetes, and outreach, educational screening for children considered at risk for developing diabetes.

In response to the near epidemic growth in diabetes cases, the Center is undertaking some significant steps:

1. Expansion of the existing services provided to adults, into a comprehensive care service, through the incorporation of on-site physician sub-specialties (Endocrinology, Podiatry, Ophthalmology) via a *1206D clinic* model;
2. Implementation of a state of the art electronic health care record capable of integrating with the electronic superhighway for medical information systems
3. Expansion of the class curriculum to include Medical Nutrition Therapy, Pharmacy Services, and expanded Psychosocial Support Services;
4. Design and implementation of programs aimed to serve the special needs of young adults with diabetes ages 18-30 transitioning into independent adulthood;
5. Collaboration with universities to design and participate in research activities;
6. Development of specific community outreach activities, aimed at vulnerable and underserved residents with diabetes or at risk for diabetes.

**Contact: Beryl Manasevit RN, MN, Director at 949-764-6241 or [Beryl.Manasevit@hoag.org](mailto:Beryl.Manasevit@hoag.org)**

### **Health Professions Education**

In an effort to increase the community pool of available trained and educated health professionals, Hoag Hospital invests annually in health professional training and development. The hospital currently works with a number of professional groups in this endeavor, including Nurses, Physical Therapists, Pharmacists, Laboratory professionals and Social Workers. Please see Appendix C: Health Professions Education for a breakdown on expenditures for FY 2010.

### **Clinical Research**

Hoag Hospital participates in primary clinical research in several clinical services: the Hoag Cancer Institute, the Neuroscience Institute, the Heart and Vascular Institute, and Women's Health Services. Most of these studies are to evaluate the effectiveness of pharmaceuticals, biological agents and medical devices. In addition to these physician led investigations, several nursing studies are also ongoing. Most of these studies receive financial support from external funders, including the Hoag Hospital Foundation.

The Hoag Cell Biology lab focuses on utilizing a patient's own immune cells, blood cells and tumor cells, thus providing "personal treatment" for a patient's own unique cancer biology. The unique biotherapy trials associated with the Cell Biology Laboratory include autologous ("of-the-self") tumor cell vaccines, and autologous activated lymphocytes to treat cancers of the brain and melanoma. In addition to these cancers, plans for the coming year include applying our unique expertise for lung and ovarian tissue projects. As the Executive Medical Director of the Hoag Cancer Center, Dr. Robert Dillman is the Principal Investigator for these studies. In FY2010, 13 patients benefited from participation in this program which was funded by the Hoag Hospital Foundation. Total Foundation expenditures for FY2010 for this program was \$643,000.

### **OB Education**

Hoag's philosophy is that with every birth of a child, there is also the birth of a new family. Through a variety of educational classes and support services, Hoag OB Education supports families throughout the exciting journey of pregnancy and parenthood. OB Education provides a multitude of educational and support programs including a complete Prepared Childbirth Series, which also has a condensed Saturday and Sunday session for busy parents that are not able to attend during the week. OB Education also provides specific education for all demographics including mothers over the age of 35, mothers of multiples and a cesarean birth class.

One of the most widely attended classes is the car seat class, which helps to prepare new parents to take their newborn home from the hospital. New parents are given information about how to select, use and install their baby's car seat. This class had 486 attendees in FY 2010. One of our newer programs available to the community is our Post-Partum Adjustment Support Group. Facilitated by a Licensed Clinical Social Worker (LCSW), this ongoing group provides support, education and an opportunity to discuss the new challenges of parenthood. Supports persons and babies are welcomed.

Hoag Babyline is an information hotline for parents that operates seven days a week and is answered by an OB Education registered nurse with special expertise and knowledge about pregnancy (before, during and after), as well as baby care and breastfeeding. The Babyline staff serves as a key resource for new and expectant parents. The Babyline is available to the community at large Monday through Friday from 9am - 6pm, Saturday 10am – 3pm and Sunday from 10am - 12:30pm. The hotline received 10,866 calls in FY 2010.

## **Project Sun Safe**

Project Sun Safe was developed at the Hoag Cancer Institute in 2003, as an educational safety program for all ages. Project Sun Safe's mission is to increase awareness of skin cancer prevention on a local, regional and national level through complimentary school presentations and community events. Project Sun Safe aims educate the community about sun safety and teach that protection and prevention go hand in hand. The following information is provided through the program at live presentations to schools, community fairs, health fairs, lifeguard training, youth groups and community organizations.

- SPF 45 Sun Screen Packet
- SPF 45 Sun Screen Tube (junior lifeguards only)
- Literature
- Pencil
- Long sleeve t-shirt (junior lifeguards only)
- Water bottle or equivalent item (junior lifeguards only)

Each year approximately sixty presentations are provided and it is estimated that nearly twenty thousand people are affected by this program directly and indirectly. By partnering with members of lifeguard, fire departments, teachers, parents and committed volunteers, we broaden public access to our skin cancer prevention message. During FY2010, Project Sun Safe trained approximately 2300 junior lifeguards from Newport Beach, Huntington Beach, and Laguna Beach Junior Lifeguard Programs.

## **Anticoagulant Clinic**

The Anticoagulation Clinic was established by Hoag Hospital in 1999 as a free community service for 30 patients, and has grown to serve over 1600 patients in FY2010. The main goal of the program is to manage oral anticoagulation therapy by monitoring and evaluating patient clotting factor data. The clinic also coordinates care, and educates patients who visit the clinic an average of 2.5 times per month. The program provides telephone consultation and support to patients, family members, and referring physicians. Patients visit an outside lab for blood testing. Test results are reviewed by a staff RN who contacts the physician and patient within 24 hours for dosing regime changes or other actions. The cost to Hoag of running this program was approximately \$1,225,440 in FY2010

## **Hoag Community Health Associates**

The principal strategy of the Department of Community Medicine is to not “reinvent the wheel” with respect to providing necessary community health programs and services. We work closely with a broad array of community based not-for-profit organizations, and provide grant funding to some organizations whose services are consistent with our priorities. Further, we sometimes act as a fiscal intermediary for third party foundation funds. This collaboration enables us to participate in the follow-up process, by providing guidance and monitoring for grantees. This section of the report provides descriptions of some of our most important community health associates and their achievements in FY2010.

### **Share Our Selves Free Clinic (SOS)**

Hoag Hospital’s Department of Community Medicine and Share Our Selves Free Clinic have nurtured a unique partnership since 1984. This partnership between SOS and Hoag demonstrates a sustainable model for others to follow and truly expands access to all levels of health care for the community. The SOS and Hoag collaboration includes more than 150 volunteer healthcare specialists available to provide care to SOS patients. Hoag supports the clinic by providing diagnostic tests, procedures, hospitalizations and ER visits for SOS patients free of charge. Hoag also employs the Medical and Associate Medical Directors who are stationed full time at the SOS Clinic. This referral system and clinical support gives SOS the ability to make life-saving care available to patients and ensures continuity of care, seamless discharge planning, and patient tracking. SOS and Hoag ER utilize ER Connect, a web based system that links patients with medical homes, an innovative model of which SOS was a key partner in developing.

For the subject fiscal year, SOS provided care to over 7,000 low-income, uninsured individuals. Over 40 percent of SOS patients are shared with Hoag Hospital, either starting at Hoag and receiving follow up care at SOS or, starting at SOS and referred to Hoag for advanced diagnostics, treatment, surgery, emergency services, or hospital admission. More than 25% of these patients were ER diversions and many of these patients have a chronic disease that needs the complex case management offered by SOS. Non-insured or underinsured hospital patients can be released to follow up care to the SOS Clinic and have access to SOS’s extensive social services in addition to clinical care. Approximately 120 patients each month are referred to volunteer specialty providers at Hoag for care that covers the full spectrum of dental and medical specialists.

In 2010, SOS and Hoag partnered with El Sol Science and Arts Academy in Santa Ana to establish the SOS-El Sol Wellness Center, a school-based health center. The SOS – El Sol Wellness Center offers an opportunity to extend health and wellness care to low income families and individuals in the County. The Wellness Center will provide urgent care to the El Sol Academy students and their families. Opening school doors to health and wellness care for the entire family promotes children’s educational attainment and lifelong well-being. The extensive and integrated services provide support to families, promoting health and family stability. The SOS Free Clinic Medical Director, Dr. Margarita Pereyda, an employee of Hoag, is the Medical Director (MD) of the Wellness Center.

Hoag is unique in its collaborative spirit and a model in efficient, effective, and respectful healthcare.

Karen McGlinn, Executive Director of Share Our Selves, praises this extensive hospital-clinic connection, saying that “this relationship creates a community where healthcare for all becomes the focus of service and sets the standard for others to follow suit.” The relationship between SOS and Hoag makes an incredible system of care available to both SOS and Hoag patients and is a tremendous statement of caring and belief in the importance of access to care for everyone, regardless of ability to pay.

**Contact: Margarita Pereyda, MD, SOS Medical Director at 949- 650-0186 or mpereyda@shareourselves.org.**

### **Madres Militares**

Rita Armendariz, the Eligibility Coordinator in the Department of Community Medicine, founded Madres Militares as a support group for local families of active duty military personnel. The group is modeled after another local group, Military Moms, and expands the reach of these services into the Spanish-speaking community of Orange County. This group, which currently includes 41 members, meets once per month at SOS to share personal stories to alleviate feelings of isolation, helplessness and fear, and to listen to guest speakers on military policies and experiences. Not all individuals are able to attend peer support group meetings and some may require assistance beyond the scope of a group support program. In these circumstances, the program provides personalized assistance, referrals and sometimes financial assistance for funeral arrangements and other urgent needs. Requests from family members may be as simple as assistance in finding out whom to contact to find out where their child is stationed, or as complex as locating resources for childcare or individual mental health counseling.

Madres Militares has provided consolation and comfort to its members in times of need, and the solidarity they share gives them strength to cope with what are sometimes very difficult circumstances. Some achievements for FY 2010 include:

- 622 Care packages sent out to Afghanistan
- Provided support to 53 non Member Families in our community (i.e. counseling, financial resources, transportation, communication, connection to family readiness support groups)
- Organized a Resource Fair at Camp Pendleton for returning Marines and their families
- Organized a new component of our support group **Wounded Warriors** and their families. Along with transportation resources, ramp building for transitioning our veterans from base living to back home support
- In collaboration with other support groups, organized a Christmas Party at Camp Pendleton for the various units 500 Guest of Active Duty and their families
- Sent out support letters to active duty and kept corresponding through out the months of deployment.
- Provided support to the Gold Star support group of families of the fallen in Orange County. Have included 5 more families this year.
- Provided support for Deployments and Homecomings for various Army and Marine Units.
- Invited military personnel and other professionals to speak on different issues and updates at our Monthly Meetings.

**Contact: Rita Armendariz, Eligibility Coordinator at (949)764-6279 or rita.armendariz@hoag.org**

## **Alzheimer's Family Services Center**

The far-reaching issue of losing a loved one to the epidemic of Alzheimer's disease or another dementia is of growing significance in communities across the nation. Unless there is a cure, the number of seniors affected by Alzheimer's and their care partners will double to approximately 300,000 by 2030 in our community of Orange County alone. Unfortunately, no one prepares a family for the often overwhelming experience of eldercare. Shouldering the physical, financial, and emotional demands of caring for a loved one with dementia can be particularly difficult for caregivers juggling caregiving with work, or risking their own well-being to provide care. Often families feel like their only care option is to place a loved one in a nursing home. For the last 30 years, Alzheimer's Family Services Center (AFSC) has been equipping families with the time off, coping skills, and knowledge they need to keep loved ones at home for as long as possible.

Founded in 1980 by a small group of visionary community leaders, AFSC has been committed to the mission of improving quality of life for families challenged by Alzheimer's disease or another dementia through services tailored to meet individual needs. Over the last three decades, we have developed into a state-of-the-art, dementia-specific center where cognitively impaired individuals receive compassionate care, and families can access much-needed support and education. Out of the 20 adult day health care providers in Orange County, we are proud to be the only Alzheimer's Day Care Resource Center, and as such have the capacity to provide care for persons from the earliest to most advanced stages of dementia, even after discharge elsewhere for difficult-to-manage behaviors such as wandering. ***In all that we do, our goals are to promote the continued dignity and personhood of individuals across the course of dementia and ensure families have access to the support and education they need to provide the best possible care for their loved ones.***

Grounded in the latest research and clinical guidelines, AFSC's services include:

***Dementia-Specific Adult Day Health Care (ADHC)*** – Every day, an average of 80 participants, from the earliest to most advanced stages of dementia, receive compassionate, individualized care at AFSC's homelike, dementia-specific facility. Participants benefit from medical, rehabilitative, psychosocial, and nutritional ADHC services based on an individualized plan of care within the context of a stimulating recreational program. AFSC maintains a 1:5 staff-to-participant ratio, far exceeding the minimum ADHC regulatory requirement of 1:16 and the average 1:7 at other centers. Staff successfully draw out each participant's remaining strengths through a variety of activities, ranging from word puzzles to art therapy. Customized care is further available via three innovative tracks of programming: (1) the "New Connections Club" for active early-stage individuals with the desire, insight, physical capacities and remaining cognitive abilities to engage in a physically and mentally challenging set of research-based therapeutic activities, (2) "Pathways," a specialized activity group for participants who have mild cognitive difficulties but are unable to participate in the "New Connections Club" due to physical limitations, and (3) the "Friendship Club" for persons as they progress from the early into the moderate and severe stages of dementia. All care is provided under the supervision of a medical director and coordinated with each participant's primary care physician.

***Supportive Care Management*** – AFSC's care management support helps keep families together for as long as possible, as ADHC, in and of itself, represents only a partial solution to the challenges of eldercare. To successfully continue care at home, caregivers need more than time off during the day; they need a 24-hour plan and ongoing support to manage emerging problems such as night-time pacing.

As research has repeatedly demonstrated, comprehensive interventions that incorporate ad-hoc counseling from a professional are most effective in delaying institutionalization. At AFSC, caregivers of enrolled participants as well as nearly 500 callers annually receive intensive support to manage the medical, psychosocial, and behavioral complications of dementia from a 7-member care management team of social workers who provide services under the supervision of a licensed clinical social worker. Callers benefit from information and referral, ad hoc telephone and in-person counseling, and relationship-building home visits designed to address high-risk situations (e.g., living alone).

***Support Groups*** – Caregivers community-wide have access to 91 free support group sessions offered by AFSC in partnership with the Alzheimer’s Association of Orange County on an annual basis. Support groups represent an important vehicle for caregivers to gain knowledge, skills, and support from their peers as well as a professional leader.

***JumpStart*** – *JumpStart* is a nationally recognized weekly support and education program for early-stage individuals and their care partners. Couples benefit from ongoing weekly parallel support group sessions, as well as bi-monthly education workshops led by dementia experts who address topics of interest, from medications to driving. The program is also available to early-stage individuals who do not have a care partner (i.e., live alone) but are able to participate meaningfully in a support group. To meet the need for ongoing support, early-stage individuals are allowed to attend for as long as they meet eligibility criteria (i.e., cognitive capacity to participate).

***Short-Term Counseling*** – Short-term counseling provides an “extra boost” when a caregiver needs focused support to develop and implement solutions for problems in care. Individual, family, and couples counseling is available to help address problems such as family conflicts over care, negative emotions, depression, unhealthy caregiving styles, and difficult transitions (e.g., placing a loved one in long-term care). We offer this service in multiple formats (i.e., session-by-session or packages of combined individual or family support and education sessions).

***Caregiver Education*** – Access to accurate knowledge about dementia diagnosis, treatment, and care is critical to caregiver well-being. Caregiver education services are designed to empower attendees with essential knowledge and coping skills and, thereby, help alleviate caregiver risk for mental and physical health problems.

***Community Education & Outreach*** – Dementia education and outreach services are designed to improve community health by addressing the lack of accurate information about dementia diagnosis, treatment, and available care-related services among at-risk seniors, caregivers, and health care professionals. Education and outreach efforts range from classes for health care professionals to participation in health fairs and large community events that reach caregivers and at-risk seniors countywide.

All services are provided by an expert staff of 43 professionals rich in cultural, linguistic, and professional diversity under the leadership of Cordula Dick-Muehlke, Ph.D., a licensed clinical psychologist and recognized expert in dementia care.

AFSC is deeply embedded in the Orange County community and was able to reach 6,923 unduplicated individuals in FY 09-10, as follows:

- 227 unduplicated elders benefited from dementia-specific adult day health care services.
- 615 callers received 1,124 hours of caregiver assistance, including information and referral, ad hoc telephone and in-person counseling, and relationship-building home visits to address high risk situations.
- An additional 384 caregivers of enrolled participants received 1,589 hours of individualized care management.
- 117 unduplicated caregivers gained support from peers and a professional facilitator through 79 caregiver support group sessions.
- 893 unduplicated caregivers learned about dementia and gained skills to cope with everyday challenges through 30 educational activities.
- 316 unduplicated at-risk seniors were reached via 15 education activities, with total attendance of 422.
- 933 unduplicated health care professionals were reached via 15 education sessions, with total attendance of 993.
- 3,438 unduplicated individuals gained greater awareness about services provided at AFSC via 290 outreach activities.

Beneficiaries of AFSC's high-quality programs provided highly positive evaluation feedback in FY 09-10:

- 91% of caregivers responding to the FY 09-10 adult day health care program survey rated the care management and support they received at AFSC as very good or excellent ( $\underline{m} = 4.7$ , on a scale of 1, poor, to 5, excellent).
- 100% of caregivers responding to the FY 09-10 support group survey reported being better able to manage a loved one's care ( $\underline{m} = 4.5$ , on a scale of 1, strongly disagree, to 5, strongly agree), feeling less stressed ( $\underline{m} = 4.2$ ) as a result of attending, and gaining a better understanding of a loved one's condition through information received ( $\underline{m} = 4.5$ ).
- 91% of FY 09-10 *JumpStart* survey respondents reported that they would use the information presented in the program's education workshops ( $\underline{m} = 4.5$ , on a scale of 1, strongly disagree, to 5, strongly agree).
- 100% of individuals attending education activities reported both increased knowledge ( $\underline{m} = 4.5$ , on a scale of 1, strongly disagree, to 5, strongly agree) about Alzheimer's disease, and 95% reported the intent to implement strategies learned ( $\underline{m} = 4.5$ ).

Always on the cutting edge of dementia care, AFSC has made a notable impact in the field through collaborations with like-minded community stakeholders, such as Hoag Memorial Hospital Presbyterian, and exporting the agency's expertise and knowledge. AFSC's four simple *Memory Care Tools* – teddy bears, old-time music, hand towels for folding, and squeeze balls – were adopted as a new standard of care for patients with dementia hospital wide at Hoag. Not only did AFSC develop the policies and procedures for use of the tools, but also provided in-person and online training to health care professionals on how to implement person-centered

strategies, rather than rely on physical or chemical restraints, for managing difficult behaviors (e.g., anxiety, agitation, resistance to care, and wandering) while patients with dementia are hospitalized. In FY 10-11, AFSC will make *Memory Care Tools* available to caregivers community-wide.

Hoag Hospital owns the AFSC facility and provides it at no charge, including maintenance services as specified in the lease, to the agency. Additionally, the hospital provides annual operating and transportation grants, and in-kind services such as consultation in nursing and compliance-related issues to the center. The executive director and one dementia education specialist are members of the Hoag Department of Community Medicine, both out-stationed at AFSC.

**Contact: Cordula Dick-Muehlke, Ph.D., Executive Director at (714) 593-1840 or CDickMuehlke@AFSCenter.org**

### **Newport Mesa Unified School District**

Hoag Hospital collaborates with the Newport Mesa Unified School District providing a grant to support staffing at the HOPE Clinic, a school based health center. The HOPE Clinic is a program of Health Services and participates in the Child Health and Disability Prevention Program and the Vaccines for Children Program. Children and families who receive services at the clinic are not charged. Health promotion and well child exams are the cornerstone of the program.

The primary focus is to promote wellness and prevent illness through periodic well child exams and routine immunizations. Services are at no cost to families and provided by a bilingual Spanish-speaking staff. The HOPE Clinic offers guidance and support to families looking for a variety of health services including developmental assessments, parent education and anticipatory guidance, assistance with insurance enrollment and referrals to medical and social support services. The clinic staff are district employees and are familiar with district services and school requirements. One of the clinic strengths is that staff know school requirements and are able to assist families in meeting those requirements for school participation.

The HOPE Clinic is unique in that it is a school based health center located in a community school setting. It is housed on a campus with an elementary school, district run preschool, a Head Start Program, an adult education center run by the district, two after school programs including the Boys and Girls Club and SOY, Ave Our Youth, an after school program to prevent gang involvement, and the community theatre. The HOPE Clinic is staffed with Nurse Practitioners with a supervising physician, an Office Assistant, Health Assistant, and an Ameri-Corps VISTA Volunteer.

During 2009/2010 some program components remained the same and others changed. However, and as a result of support from collaborative partners such as Hoag Hospital, the HOPE Clinic was able to tailor services in response to community needs. Dr. Riba's Health Club continued to offer a specialty program addressing childhood obesity, nutrition, and fitness for children and families. The Orange County Health Care Agency continued to offer the Women, Infant, & Children (WIC) nutrition program. The Children's Health Initiative of Orange County provided an insurance application assistor one day per week. HOAG Community Medicine Counseling Program discontinued onsite service. Instead, the program received referrals to provide counseling at their offices.

The counseling program also designed classes or group support meetings to address specific needs at community sites conveniently located in the community and often at school sites. Additionally, in 2009/2010, we lost the position of the bilingual Community Facilitator who was actively engaged in community education, coordinating health fairs, outreach, translation, linking children and families to resources, and case management.

During 2009/2010, the HOPE Clinic provided well over 7357 distinct services including 2443 child health exams, over 2256 child immunizations, and 591 developmental assessments. Although each child is offered insurance assistance, there are those who access temporary insurance at the clinic. Approximately 463 children received this type of insurance. HOPE Clinic provides some services to adults including Tuberculosis testing for employees and district volunteers, Hepatitis B vaccines for employees, and flu vaccine for children, families, and members of the local community. In 2009/2010, 881 adults received Tuberculosis screening. The tuberculosis screening is required for members of the community who wish to volunteer at school. Approximately 723 children and adults received the flu vaccine.

### **YMCA**

In FY2010, the YMCA of Orange County received a gift from Hoag Memorial Hospital Presbyterian that enabled the Y to provide fitness, nutrition and lifestyle changing programming to at-risk and special need populations in Orange County. These programs were conducted through Dr. Riba's Fit-Club™ YMCA Program in Santa Ana, New Horizons program for Orange County adults with special needs and the YMCA Foster Care Youth Mentoring Program serving current and former foster youth throughout Orange County. Below is a brief description of each program area as well as the number of participants supported in the programs:

- **Dr. Riba's YMCA Fit-Club™**- The goal of the Fit Club™- YMCA Program is to prevent and treat childhood obesity and prevent the onset of type 2 diabetes through health and nutrition education, cooking demonstrations, and physical activity. The program targeted 100 students from Willard Intermediate School in Santa Ana, California, but ended up serving over 200 youth. The program was implemented throughout the 2009-2010 year, both school year and summer. Students participated in the Fit Club™-YMCA Program four days per week for two to three hours each day. Using BMI (Body Mass Index) scores as a metric to determine success, the program reported that 39% of the youth decreased their BMI in the school year program and 87% of the youth decreased their BMI in the summer program.
- **YMCA Mentoring** – 321 children in the foster care system were matched with over 100 volunteers through monthly “Fun Days,” academic mentoring and one-on-one community mentors. Children may participate in one or any combination of the three programs if they currently are, or have been in the foster care system. This includes children in kinship care, as well as children who have already been adopted. With over 3,000 children and youth in the foster-care system in Orange County, there is an ongoing need for educational opportunities for foster youth to learn skills that will help them live a better more healthy life. In 2010, the program implemented a healthy living component to the monthly Fun Days. Promoting exercise, nutrition, and overall well-being, our Fun Days included workshops for parents and volunteers, educational information for kids, as well as healthy snacks, meals, and take-home activities such as recipes and exercise logs.

- **YMCA New Horizons** – Provides social and recreational programming for over 400 adults with developmental disabilities throughout the county. In addition to providing the social skill training to the individuals who participate in the program, New Horizons also provides a period of much needed “respite” for the families who care for the adult with a disability. Many of New Horizons participants are at risk for Type 2 diabetes and other chronic health conditions related to obesity. Each week approximately 45 adults with developmental disabilities attend on a Thursday, Friday, or Saturday for an evening of recreation, a special overnight camping trip or community excursion. In 2010, a Fitness and Healthy Lifestyle Component was implemented into the New Horizons program. The three tiered fitness component included 1) a stretching and exercise portion added at the start and finish of each regularly scheduled event; 2) a weekly take-home activity; and 3) a Fit Club program that would introduce an optional training night once a week. Through the implementation of this fitness component, tracking BMI’s, exercise and healthy eating, New Horizons was able to positively impact the lives of developmentally disabled adolescents and adults throughout Orange County.

### **Orange County Health Care Agency**

A strong partnership with the Orange County Health Care Agency has been integral to Hoag’s Community Benefit efforts. Hoag has committed significant funds in support of the Health Care Agency’s Child Abuse Services Team (CAST). CAST is a multi-disciplinary team program for conducting child abuse investigations, esp. sexual abuse investigations, at a single site. The program’s coordinated on-site services have enabled social services, law enforcement, deputy district attorneys, medical providers, and therapists to collaborate in investigations. The child-focused environment at CAST serves to reduce further trauma for these children and to enhance the investigation.

### **Senior Transportation**

The Community Benefit Program collaborates with seven community senior centers for transportation services for their program participants. These organizations offer a broad range of services including congregate meals, health screenings, educational, social and physical activities for their participants. In providing transportation services for seniors, we assist them in their efforts to sustain good mental and physical health, and to maintain their independence. The seniors use the transportation services to attend doctor appointments, shop and do errands, and participate in group social activities. The seven organizations served are: Alzheimer’s Family Services Center; Costa Mesa Senior Center; Huntington Beach Council on Aging; Irvine Adult Day Center; Newport Beach’s Oasis Senior Center; South County Senior Services, and Laguna Beach Seniors. Total Hoag expenditures on transportation for approximately 115,000 senior passenger trips in FY 2010 was \$443,550.

## **Appendices**

- Appendix A**      **Hoag Hospital Charity Care and Self Pay Discount Policy  
(page 27)**
- Appendix B**      **Hoag Hospital Quantifiable Community Benefit for FY2010  
(page 31)**
- Appendix C**      **Hoag Hospital Community Benefit Expenditures by  
Program (page 32-36)**

## Appendix A

<b>HOAG MEMORIAL HOSPITAL PRESBYTERIAN HOSPITAL POLICY</b>	Number: <b>9.10</b>	Page: <b>Page 1 of 5</b>
	Effective Date: <b>01/23/09</b>	
	Supersedes (Date): <b>04/08/08</b>	
	Original Date: <b>12/01/70</b>	
Signatures of Policy Reviewers (*as required):		
Director  _____ <b>Kevin Don</b>  President & CEO:  _____ <b>Richard Afable, MD</b>	Executive Director  _____ <b>Bret Kelsey</b>	Sr. Vice President & CFO  _____ <b>Jennifer Mitzner</b>
Title/Subject: <b>Charity Care and Self Pay Discount Payment Policy</b>		

### 1.0 PURPOSE:

- 1.1 A significant component of Hoag Hospital's mission is to provide care for patients in times of need. Hoag provides charity care as a benefit to our community as a not-for-profit hospital. Hoag is committed to assisting low-income and/or uninsured eligible patients residing within its community through well-communicated and appropriately implemented discount payment and charity care programs. All patients will be treated fairly, with dignity, compassion, and respect.
- 1.2 Financial assistance policies must balance a patient's need for financial assistance with the hospital's broader fiscal stewardship.
- 1.3 Outside debt collection agencies and the hospital's internal collection practices will reflect the mission and vision of the hospital.
- 1.4 Financial assistance provided by Hoag Hospital is not a substitute for personal responsibility. It is the responsibility of the patient to actively participate in the financial assistance screening process and where applicable, contribute to the cost of their care based upon their individual ability to pay.

### 2.0 POLICY:

- 2.1 Hoag Hospital provides financial assistance to patients who do not have insurance coverage at family income levels up to four times the Federal Poverty Income Guidelines. The Hospital gives consideration to eligible patients residing within its community and to patients, whether or not they have insurance and regardless of income level if there are exceptional circumstances.
- 2.2 Business services staff will discuss program options with patients who have expressed a need for financial assistance in resolving their hospital bills.
- 2.3 Qualifying patients are referred to MSI or Medi-Cal and those not eligible are reviewed for Patient Assistance under Charity Care. Adjustments are made based upon the patient's eligibility level in the programs.
- 2.4 Any patient seeking financial assistance (or the patient's legal representative) shall provide information concerning health benefits coverage, financial status, and any other information that is necessary to make a determination regarding the patient's status relative to the hospital's charity care policy, discounted payment policy, or eligibility for government-sponsored programs. Confidentiality of information and the dignity of the individual will be maintained for all that apply for charitable services.

- 2.5 Charity guidelines will be reviewed and adjusted annually according to the Federal Poverty Guidelines established by the Department of Health and Human Services (see FPL Table below).
- 2.6 Hoag Hospital will define the standards and scope of practices to be used by its outside (non-hospital) collection agencies, and will maintain written agreements from such agencies that they will adhere to such standards and scope of practices.
- 2.7 Hoag Hospital, or outside agencies operating on behalf of the hospital shall not, in dealing with low-income uninsured patients who are at or below 200% of the Federal Poverty level, use wage garnishments or foreclosure of liens on primary residences as a means of collecting unpaid hospital bills. This requirement does not preclude Hoag Hospital from pursuing reimbursement from third party liability settlement or tortfeasors or other legally responsible parties.
- 2.8 Patients who have an application pending for either government-sponsored coverage or for Hoag Hospital's own charity care and financial assistance, will not knowingly be referred to a collection agency prior to 120 days from the date of discharge or date of service.
- 2.9 At the time of billing, Hoag Hospital will provide to all low-income uninsured patients the same information concerning services and charges provided to all other patients who receive care at the hospital.
- 2.10 Patients who have been denied charity care or other discounts may appeal the denial, in writing, within 10 days of receiving the denial. The appeal should include supporting documentation and evidence as to why the appeal is being following address:

Hoag Memorial Hospital  
 One Hoag Drive, P.O. Box 6100  
 Newport Beach, CA 92658-6100  
 Attention: Director PFS, Business Services

The patient's appeal will be considered and a response with the decision will be mailed to the patient within 10 days of receiving the appeal. All decisions of the Director will be considered final and additional appeals will not be permitted.

**3.0 DEFINITION OF CHARITY CARE SERVICES AND PATIENT ASSISTANCE SERVICES:**

- 3.1 Charity Care may be provided for the following:
  - 3.1.1 Patient services provided to uninsured patients who qualify for financial assistance based on the hospital's charity care policy.
  - 3.1.2 Underinsured patients who indicate an inability to pay their unpaid balance may be screened for possible financial assistance.
  - 3.1.3 Uninsured patients, who can pay for part of their care, but indicate an inability to pay the remainder.
- 3.2 Charity Care Excludes:
  - 3.2.1 Elective services are generally not eligible for consideration under the Charity Care program.
    - 3.2.1.1 Certain specialty services are excluded. Following are a few examples: CDU, cosmetic and gastric bypass services.

**4.0 CHARITY CARE ELIGIBILITY REQUIREMENTS:**

- 4.1 The following factors will be considered when determining the amount of charity write-off provided.
- 4.2 Patient should reside in hospital's primary or secondary service area or have received emergency or specialty services.

- 4.3 Uninsured patients at or below 400% of the Federal Poverty Income Guidelines are eligible to apply for financial assistance under Hoag Hospital's Charity Care Discount payment policy (see Table below).
- 4.4 Evidence of eligibility will be requested and must be provided if patient/family are available. Patients should be screened for charity care prior to admission, at time of admission, or as soon as possible following treatment.
- 4.5 Additional considerations will be made such as:
  - 4.5.1 employment status,
  - 4.5.2 family size,
  - 4.5.3 certain living expenses of a reasonable and necessary nature,
  - 4.5.4 amount and frequency of hospital and other health care bills, and
  - 4.5.5 assets and liabilities.
- 4.6 All payment resources must first be explored and applied to health care expenses including third party payers, Medicare, Medi-Cal, Cal-OPTIMA, MSI, and Victims of Crime.
  - 4.6.1 If a patient is eligible for Medi-Cal, any charges for Days of Service Not Covered by the patient's coverage may be written off to charity without a completed financial statement. This does not include any Share of Cost (SOC) amounts that the patient must pay before the patient is eligible for Medi-Cal.
  - 4.6.2 Patients unable to pay the total billing for specialty services not covered by their insurance may be considered for charity coverage for a portion of the cost.
  - 4.6.3 Patients unwilling to disclose any financial information during charity screening or Medicare/Medi-Cal screening will not be processed as charity care.

**5.0 CHARITY CARE DISCOUNT:**

2009 HHS Poverty Guidelines						
Up to 400% FPL = Discount to 125% Medicare DRG Rate						
Up to 350% FPL = Discount to Medicare DRG Rate						
Up to 200% FPL = 100% Charity Write Off						
Size of Family	Gross Yearly 100% of FPL	Gross Yearly 200% of FPL	Gross Yearly 300% of FPL	Gross Yearly 350% of FPL	Gross Yearly 400% of FPL	** For Each Add'l Person Add
1	\$ 10,830	\$ 21,660	\$ 32,490	\$ 37,905	\$ 43,320	\$ 3,740
2	\$ 14,570	\$ 29,140	\$ 43,710	\$ 50,995	\$ 58,280	\$ 7,480
3	\$ 18,310	\$ 36,620	\$ 54,930	\$ 64,085	\$ 73,240	\$ 11,220
4	\$ 22,050	\$ 44,100	\$ 66,150	\$ 77,175	\$ 88,200	\$ 14,960
5	\$ 25,790	\$ 51,580	\$ 77,370	\$ 90,265	\$ 103,160	\$ 18,700
6	\$ 29,530	\$ 59,060	\$ 88,590	\$ 103,355	\$ 118,120	\$ 22,440
7	\$ 33,270	\$ 66,540	\$ 99,810	\$ 116,445	\$ 133,080	\$ 26,180
8	\$ 37,010	\$ 74,020	\$ 111,030	\$ 129,535	\$ 148,040	\$ 29,920
* Patients who qualify for Charity services but are > 200% FPL will be given a 60% discount for Outpatient Services						
** For families with more than 8 persons, add \$3,740 for each additional person.						

## **6.0 SELF-PAY PATIENT DISCOUNTS ELIGIBILITY REQUIREMENTS:**

- 6.1 Patients who do **NOT** qualify for Charity Care under Hoag Hospital's Charity program in accordance with Sections 4.0 and 5.0 above, and who do not have insurance or who have inadequate insurance coverage and are considered "Self-Pay" will be eligible for a Prompt Payment discount.
  - 6.1.1 Excludes cosmetic and other specified cash programs.
  - 6.1.2 Prompt Payment discount requires full payment is made at the time of service or within 30 days of discharge or date of service unless other arrangements have been made.
  - 6.1.3 Patients who qualify for a discount **MUST** make a full deposit of estimated charges at the time of, or prior, to receiving services in order to qualify for the discount.
  - 6.1.4 Unless other payment arrangements have been made, patients will be billed for the remainder of their balance due and the balance must be paid in full within 15 days of receipt of the bill. If payment is not received within 15 days, the discount will be removed and the full billed charges will be due and payable upon receipt.

## **7.0 SELF-PAY DISCOUNT:**

- 7.1 35% off charges for Prompt Payment, as defined in section 6.0 above.

### Multidisciplinary Review:

Review and/or input were given by the following: **Administration; Business Services**

**Policy Originator:** Business Services

### Reference:

**Filename:** 9.10 Charity Care

## Appendix B

### Hoag Hospital Quantifiable Community Benefit Summary Trend FY 2010

#### A. Unreimbursed Cost of Direct Medical Care Services - Charity Care

*Definition: The direct cost of medical care provided by Hoag; consists of unreimbursed costs (calculated utilizing cost-to-charge ratios) of providing services to the county indigent population, charity care, and care provided to patients identified and referred by the SOS Free Medical and Dental Clinic and the Hospital's Community Case Management Program.*

	FY2010	FY2009
Medical Services Indigent (MSI)	\$ 7,585,000	\$ 5,434,000
Charity Care	\$ 7,261,307	\$ 6,851,755
Community Case Management and SOS Free Clinic Referrals	\$ 1,791,206	\$ 1,389,712
MediCal/Cal Optima Cost of Unreimbursed Care	\$ 9,907,000	\$ 8,029,000
Medicare Cost of Unreimbursed Care	\$ 66,068,000	\$ 47,059,000
<b>Total Cost of Unreimbursed Direct Medical Care Svcs</b>	<b>\$ 92,612,513</b>	<b>\$ 68,763,467</b>

#### B. Benefits for Vulnerable Populations

*Definition: Services and support provided to at-risk seniors and children, the indigent, uninsured/underinsured and homeless to facilitate access to preventive and immediate medical care services.*

Community Health Services	\$ 4,251,994	\$ 4,208,068
Health Profession Education	\$ 23,281	\$ 30,930
Subsidized Clinical Specialty Services	\$ 1,183,364	\$ 680,756
Cash and In-Kind Contributions	\$ 1,220,833	\$ 2,193,604
Community Building Activities	\$ 20,596	\$ 17,324
Community Benefit operations	\$ 755,851	\$ 806,983
<b>Total Benefits for Vulnerable Populations</b>	<b>\$ 7,455,919</b>	<b>\$ 7,937,665</b>

#### C. Benefits for the Broader Community

*Definition: Health education, prevention and screening programs, information and referral services, and supportive services available to community residents.*

Community Health Services	\$ 1,265,705	\$ 1,160,148
Health Profession Education	\$ 542,625	\$ 554,415
Subsidized Clinical Specialty Services	\$ 1,928,356	\$ 1,082,183
Cash and In-Kind Contributions	\$ 1,097,313	\$ 256,296
Community Building Activities	\$ 200,593	\$ 116,900
Foundation Expenditures for Community Benefit	\$ 2,120,820	\$ 3,550,253
<b>Total Benefits for the Broader Community</b>	<b>\$ 7,155,412</b>	<b>\$ 6,720,195</b>

**Total Community Benefit and Economic Value**      \$ 107,223,844      \$ 83,421,327

**Total Community Benefit and Economic Value  
(excluding Medicare Cost of Unreimbursed Care)**      \$ 41,155,844      \$ 36,362,327

#### Notes:

1. Cost of care figures (section A) are estimated, based upon annualized results of 9 months of operations.
- 2.. The 2010 Fiscal Year included 12 months: October 1, 2009 through September 30, 2010

Appendix C

**Benefits for Vulnerable Populations**

**Net CB Expenditure**

***Community Health Improvement Services***

Alzheimer's Family Services Center	\$	1,004,106
Children's Wellness Program	\$	4,000
Community Case Management	\$	192,802
Community Mental Health Services	\$	557,839
Community Mobile Meals Programs	\$	1,673
Employees for Local Community Non-profits	\$	733,390
Equipment Loan Program-Senior Center	\$	697
Lifeline	\$	6,399
Newport Community Counseling Center	\$	10,000
Newport Mesa Unified School District (HOPE Clinic)	\$	201,539
Oak View Community Center Mobile Clinic	\$	5,859
Senior Transportation (6 agencies)	\$	443,550
SOS Medical and Dental Clinic	\$	1,090,140
<b>Total Community Health Services</b>	<b>\$</b>	<b>4,251,994</b>

***Health Professions Education***

Social Work Internship Program	\$	23,281
<b>Total Health Professions Education</b>	<b>\$</b>	<b>23,281</b>

***Subsidized Clinical Specialty Services***

ECU Call Panel	\$	1,183,364
<b>Total Subsidized Clinical Specialty Services</b>	<b>\$</b>	<b>1,183,364</b>

***Cash and In-Kind Contributions***

Access California Services	\$	45,000
Age Well Senior Services	\$	65,000
California Kids Healthcare Foundation	\$	250,000
Casa Teresa	\$	25,000
CAST Program-Health Care Agency	\$	150,000
Costa Mesa Senior Center	\$	12,857
Court Appointed Special Advocates (CASA)	\$	2,500
Healthy Smiles for Kids OC- Dental	\$	7,000
Irvine Adult Day Health Services	\$	10,409
March of Dimes	\$	10,000
MOMS Orange County	\$	5,000
Newport Mesa Schools Foundation	\$	10,461
Oasis Senior Center	\$	515,000
Orange County Rescue Mission	\$	15,000
PADRE Foundation	\$	32,606
Save Our Youth (SOY)	\$	5,000
Someone Cares Soup Kitchen	\$	35,000
Sweet Success Express (SSEP)	\$	15,000
Trauma Intervention Program	\$	10,000
<b>Total Cash and In-Kind Contributions</b>	<b>\$</b>	<b>1,220,833</b>

**Community Building Activities**

Project SEARCH

**Total Community Building Activities**

\$ 20,596  
\$ **20,596**

**Community Benefit Operations**

Community Medicine Operations

Dedicated Staff

**Total Community Benefit Operations**

\$ 172,332  
\$ 583,519  
\$ **755,851**

**Total Benefits for Vulnerable Populations \$ 7,455,919**

**Benefits for the Broader Community****Net CB Expenditure*****Community Health Improvement Services***

Asthma Prevention Education	\$	2,000
Better Breathers Support Groups	\$	1,432
Brain Tumor Support Group	\$	2,410
Breast Cancer Outreach and Support Groups	\$	1,500
Cancer Center Education and Support Groups	\$	158,781
Corporate Communications Community Outreach	\$	261,464
Community Education Presentations	\$	5,430
Diabetes Education and Support Groups	\$	25,368
Enterostomal Outpatient Services	\$	4,081
First Aid Stations at Community Events	\$	6,024
Flu Immunization Clinic Expenses	\$	192,188
Health Ministries Program	\$	157,013
Madres Militares Support Group	\$	1,500
Nutrition Education Community Presentations	\$	218
Neurosciences Community Lectures	\$	468
OB Education	\$	131,889
Parkinsons Community Support Programs	\$	67,700
Pastoral Care Education and Support Groups	\$	32,953
Pharmacy Presentations at Pulm/CHF Groups	\$	2,080
Project Sun Safe	\$	26,499
Project Wipeout	\$	107,155
Smoking Cessation Programs	\$	7,133
Stroke Education Outreach	\$	70,419
<b>Total Community Health Services</b>	<b>\$</b>	<b>1,265,705</b>

***Health Professions Education***

Clinical Care Extender Program	\$	168,489
Diabetes Education Internship	\$	4,156
Hospital Case Management Internships	\$	24,200
Laboratory Internships	\$	64,880
Pharmacy Student Clinical Rotations	\$	16,500
Physical Therapy Internships	\$	128,000
UCI Paul Merage School of Business	\$	110,000
Medical Education-Grand Rounds	\$	26,400
<b>Total Health Professions Education</b>	<b>\$</b>	<b>542,625</b>

***Subsidized Clinical Specialty Services***

Anticoagulation Clinic	\$	1,225,440
CHOC Pediatric Diabetes Services at the Allen Diabetes Center	\$	454,056
ETOH/Psych/Ancillary Patient Transfer Program	\$	248,860
<b>Total Subsidized Clinical Specialty Services</b>	<b>\$</b>	<b>1,928,356</b>

***Cash and In-Kind Contributions***

AIDS Services Foundation	\$	25,000
Alzheimer's Association	\$	50,000
American Diabetes Association	\$	20,000
American Lung Association	\$	25,000
American Red Cross	\$	25,000
Arthritis Foundation	\$	25,000

Boys and Girls Club of the Harbor Area	\$	6,000
CA-HI-NV Exchange Club of OC	\$	250
CHOC General Grants	\$	285,000
Corona Del Mar Chamber of Commerce	\$	10,000
Donations to Community Organization	\$	1,988
Epilepsy Alliance of Orange County	\$	20,000
Epilepsy Support Network	\$	25,000
Family Service Team	\$	5,000
Food Donations	\$	13,945
Girls Inc.	\$	15,000
Goodwill of Orange County	\$	60,000
Health Care Council	\$	3,958
Human Options	\$	25,000
Irvine Children's Fund	\$	12,000
Irvine Community Alliance Fund	\$	24,000
Irvine Police Explorers	\$	7,500
Irvine Public Schools Foundation	\$	5,000
Juvenile Diabetes Research Foundation	\$	12,000
Kenya Medical Mission	\$	24,000
Kiwanis Costa Mesa	\$	2,500
Mardan Foundation of Educational Therapy	\$	10,000
National Kidney Foundation of Southern California	\$	5,000
National Multiple Sclerosis Society	\$	2,500
National Parkinson Foundation-OC Chapter	\$	12,000
Orange Coast College Foundation	\$	15,000
Orange County Human Relations Commission	\$	5,000
Orange County Medical Association	\$	2,500
Orange County United Way	\$	101,775
Saint Joachim Catholic Church	\$	5,000
St. Joseph Hospital	\$	1,000
UCI Institute of Memory Impairments and Neurological Disorders	\$	10,000
VCOC- Irvine Programs	\$	29,000
Vietnamese Community of Orange County (VNCOC)	\$	5,000
Women Helping Women	\$	10,000
YMCA Community Services	\$	150,000
Youth Employment Services	\$	5,397
<b>Total Cash and In-Kind Contributions</b>	<b>\$</b>	<b>1,097,313</b>
<b>Community Building Activities</b>		
Coalition of OC Community Clinics	\$	21,000
Community Disaster Preparedness Planning	\$	61,869
Health Funders Partnership of OC	\$	35,000
Orange County Congregation Community Organizations (OCCCO)	\$	2,500
Orange County Health Needs Assessment (OCHNA)	\$	80,224
<b>Total Community Building Activities</b>	<b>\$</b>	<b>200,593</b>
<b>Total Foundation Expenditures</b>	<b>\$</b>	<b>2,120,820</b>
see summary on next page		
<b>Total Benefits for the Broader Community</b>	<b>\$</b>	<b>7,155,412</b>

**Foundation Expenditures for Community Benefit**

**Net CB Expenditure**

***Community Health Services***

Cancer Center Community Programs	\$	70,000.00
Cancer Center Medical Director	\$	100,000
Chemical Dependency Scholarships	\$	104,860
Diabetes Center Community Programs	\$	500,000
Project Wipeout	\$	235
Breast Cancer Medical Director	\$	50,000
Womens Health Services Medical Director	\$	50,000

***Total Community Health Services*** \$ **875,095**

***Health Professions Education***

Nursing professorships	\$	600,000
<b>Total Health Professions Education</b>	<b>\$</b>	<b>600,000</b>

***Clinical Research***

Breast Cancer Study	\$	2,300
Cancer Center Cell Biology Lab	\$	643,425
<b>Total Clinical Research</b>	<b>\$</b>	<b>645,725</b>

**Total Foundation Expenditures for Community Benefit** \$ **2,120,820**

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