A message to the community from the President and Chief Executive Officer

As a Daughters of Charity Health System Local Health Ministry, O'Connor Hospital lives out our Mission daily. Our dedicated associates, physicians and volunteers provide comprehensive, compassionate health care to our patients and their families. For more than 122 years, O'Connor Hospital has addressed the needs of our community by providing health care services without delay or limitations and without regard to the patient’s ability to pay.

Our commitment to addressing the growing health care needs of our community is stronger than ever. O'Connor Hospital recognizes the need to be an essential community partner and to provide community benefit programs and activities for our neighbors in need. The Santa Clara County 2010 Health Profile Report will help us evaluate our community benefit activities and the impact they are having on the community.

Reflecting on fiscal year 2011, I am proud to report that O'Connor Hospital provided approximately $39,199,723 in benefits to our community, a 17 percent increase from the previous year. This is our investment in a basic human right -- that all people have a right to compassionate and excellent health care. The numbers only tell a part of the story; the real impact is in the life of each individual whom O'Connor Hospital has served and cared for.

Since 1889, O'Connor Hospital has been caring for people just like those you will read about in this year’s Community Benefit Report. Over the years, the faces change but the O'Connor Hospital Mission does not: to serve the sick and those living in poverty: body, mind and spirit. Thank you for being a companion on the journey with us.

James F. Dover, FACHE
President and Chief Executive Officer
O'Connor Hospital
About O'Connor Hospital

O'Connor Hospital is a 358-bed acute care, not-for-profit, Catholic community hospital located in the heart of San Jose, California. Established in 1889, O'Connor Hospital was built by area philanthropists and operated by the Daughters of Charity of St. Vincent de Paul. O'Connor Hospital and the Daughters of Charity have served Santa Clara County longer than other hospitals in the region. For more than 122 years, O'Connor Hospital has been providing comprehensive, excellent health care that is attentive and compassionate to the whole person – body, mind and spirit.

Today, O'Connor Hospital continues to thrive, providing excellent medical care with a special focus on the needs of low-income, underserved populations. O'Connor sponsors the Health Benefits Resource Center, the Pediatric Center for Life, a Parish Nursing program, the Family Health Center and the Stanford-affiliated Family Medicine Residency Program. Key services include cardiology, oncology, mother-baby care, orthopedic and joint replacement services, vascular care, wound care and emergency services. O'Connor Hospital is a Joint Commission Certified Center of Excellence for Hip and Knee Replacement, Wound Care and a Primary Stroke Center. Additionally, the hospital is fully accredited by The Joint Commission, the California Department of Public Health and the Center for Medicare and Medicaid Services.

O'Connor Hospital’s experienced team of 1,592 associates, 585 medical staff members, and 262 volunteers provide quality health care to the community, welcoming all patients regardless of their financial circumstances. In fiscal year 2011, O'Connor had 12,746 patient admissions; 53,682 Emergency Department patient visits and 3,341 babies were born at O'Connor Hospital.

O'Connor Hospital plays a vital role in the health and well-being of Santa Clara County. We provide comprehensive health care services without delay or limitations and without regard to the patient’s ability to pay. We are a leader in our community in serving the underserved and marginalized. O'Connor Hospital responds to the needs of our community and adapts to provide care and services in unmet areas. Our Mission of serving the sick and those living in poverty is what guides us.
About the Daughters of Charity Health System

O’Connor Hospital is a member of the Daughters of Charity Health System. The health system is comprised of six hospitals and medical centers that span the California coast from Daly City to Los Angeles.

For more than 375 years, our sponsors, the Daughters of Charity of St. Vincent de Paul, have been serving the sick and the poor through healing ministries around the world. O’Connor Hospital operates with the Mission Statement, Vincentian Values and vision of the Daughters of Charity Health System as an integral part of every gathering, policy and decision.

Mission Statement
In the spirit of our founders, St. Vincent de Paul, St. Louise de Marillac and St. Elizabeth Ann Seton, the Daughters of Charity Health System is committed to serving the sick and the poor. With Jesus Christ as our model, we advance and strengthen the healing mission of the Catholic Church by providing comprehensive, excellent health care that is compassionate and attentive to the whole person: body, mind and spirit. We promote healthy families, responsible stewardship of the environment and a just society through value-based relationships and community-based collaboration.

Vincentian Values
The Charity of Christ urges us to:
Respect
   Recognizing our own value and the values of others.
Compassionate Service
   Providing excellent care with gentleness and kindness.
Simplicity
   Acting with integrity, clarity and honesty.
Advocacy for the Poor
   Supporting those who lack resources for a healthy life and full human development.
Inventiveness to Infinity
   Being continuously resourceful and creative.
Community Needs Assessment

O'Connor Hospital is located in the heart of San Jose, the largest city in Santa Clara County. With more than 1.8 million residents, Santa Clara County is the sixth most populated of California’s 58 counties and the most populated county in the Bay Area. More than half of the County’s population lives in San Jose. The County’s population is expected to grow to more than 2.3 million by 2050.

Santa Clara County’s population is diverse: 38% of residents are White, 31% are Asian, 26% are Hispanic, slightly more than 2% are African American, and 3% are other races/ethnicities. The County has a large foreign-born population, with 38% of its residents born outside the U.S. This represents the highest proportion of immigrants in any county in California. More than 100 languages and dialects are spoken in the County. In 2007, Santa Clara County became one of only ten counties in the U.S. where at least half the residents speak a language other than English at home. Approximately 25% of the population is aged 18 and younger, while more than 10% of residents are 65 and older. One in six individuals will be a senior citizen by 2020 in Santa Clara County.

Santa Clara County has the highest median household income in the state. A large segment of the population is affluent and well-educated. The median annual household income in the County was $88,848 in 2008. More than four in ten County households have annual incomes of $100,000 or more and nearly half the adults have a bachelor’s degree or higher. In stark contrast to the fact that Santa Clara County has one of the highest median incomes and costs of living in the U.S., nearly one in ten children and one in 12 adults in the County live in poverty. More than one in five households in Santa Clara County (22%) live below the Self-Sufficiency Standard.

Community profile information in this report was sourced from the Santa Clara County 2010 Health Profile Report. This report was developed by the Santa Clara County Public Health Department in collaboration with the Santa Clara County Community Benefits Coalition, of which O’Connor Hospital is a active member. The Coalition identifies challenges and opportunities for government agencies, community organizations, and health care organizations to improve the health and quality of life in Santa Clara County.

Key health findings from the Santa Clara County 2010 Health Profile Report are:

- The percentage of uninsured adults in Santa Clara County increased from 8% in 2000 to 18% in 2009.
- The percentage of adults in Santa Clara County who are overweight or obese increased from 52% in 2000 to 56% in 2009.
- The percentage of adults with high blood pressure increased from 20% in 1997 to 26% in 2009.
- The percentage of adults who were told by a health professional that they have diabetes increased from 5% in 2000 to 8% in 2009.
O’Connor Hospital’s Focus

O’Connor Hospital acknowledges there are many pressing community needs. We have chosen to focus our efforts on activities that build upon the foundation set by our previous community benefit initiatives (serving the poor, minority populations, elderly and children). The activities O’Connor focused on during fiscal year 2011 fall into two reporting areas: Access to Care and Community Health Education. The programs and activities we support are determined based on the following:

- Serving the sick and those living in poverty that lack basic resources.
- Developing and implementing community-based programs targeted towards improving health and lifestyle behaviors and illness prevention.
- Promoting and sponsoring events that offer health care services and education to the community at large.
- Providing information and advocating for low-income, uninsured or underinsured people to gain access to medical insurance, government assistance programs, health care services and continuum of care.

For the purpose of this report, the activities O’Connor Hospital prioritized in fiscal year 2011 will be reported and categorized by benefits for persons living in poverty and benefits for the broader community.

<table>
<thead>
<tr>
<th>O’Connor Hospital Community Benefits Fiscal Year 2011</th>
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<tbody>
<tr>
<td>Benefits for Persons Living in Poverty</td>
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<tr>
<td>Benefits for Broader Community</td>
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<tr>
<td><strong>Total Quantifiable Benefits</strong></td>
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<tr>
<td>Unpaid Costs of Medicare Program</td>
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<tr>
<th>O’Connor Hospital Community Benefits Activities</th>
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<tr>
<td>Benefits for Persons Living in Poverty</td>
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<tr>
<td>Charity Care</td>
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<td>Health Benefits Resource Center</td>
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<td>Medical Respite Program</td>
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<td>New Directions Case Management Program</td>
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<tr>
<td>Unreimbursed Cost of Public Programs</td>
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</tbody>
</table>
Benefits for Persons Living in Poverty

O’Connor Hospital’s Mission and Values drive us to care for and advocate for those living in poverty. In fiscal year 2011, O’Connor provided more than **$38.2 million** in community benefit activities that benefit persons living in poverty. The activities that fall into this category aim to improve access to care for low-income individuals, the medically underserved and other vulnerable populations. These activities include providing health care services to the underinsured and uninsured community members, operating the Health Benefits Resource Center, contributions and partnerships with community programs that care for the homeless.

*Health care services to the underinsured and uninsured.*

O’Connor Hospital’s unreimbursed cost of public programs (excluding unreimbursed costs of Medicare) was more than $34.3 million in fiscal year 2011. O’Connor provided health care services to more than **58,447 individuals** who turned to the hospital or one of its community health clinics (Pediatric Center for Life and Family Health Center) for care.

O’Connor Hospital’s Pediatric Center for Life (PCFL) is a primary care clinic that provides excellent, comprehensive health care to children and adolescents from low-income families. The center administers well exams, immunizations, urgent care treatment for illnesses and injuries, case management and referrals by an onsite medical social worker, and health insurance enrollment assistance to children and their families. Since its founding in 1991, PCFL has provided preventative and urgent care services to more than 16,780 children. Many of the children remain patients of PCFL throughout adolescence, allowing for a greater continuity of care than what is provided at other safety-net clinics.

O’Connor Hospital’s Family Health Center (Residency Clinic) is a unique collaboration between a group of primary care physicians (Residency program faculty) and Stanford University Family Medicine Residents. The residents are enrolled in a three-year training program that leads to Board Certification in Family Medicine with a special understanding of the needs of the underserved community. Residents work with patients in all stages of life and with a variety of special circumstances. The center cares for a large number of urban poor families providing comprehensive maternal and child services, mental health consultations and comprehensive acute, chronic and wellness care. Residents also provide care to the home-bound and geriatric population and to mentally and developmentally disabled populations.

In fiscal year 2011, O’Connor Hospital provided more than $3.2 million in costs of charity care services to **3,335 individuals**. Charity care at cost is the cost of care for services provided to individuals with no means of paying.

*Health Benefits Resource Center*

The O’Connor Hospital Health Benefits Resource Center (HBRC) is a one-stop informational and referral service that advocates for those living in poverty. The HBRC opened in October 2010 in response to the community’s need for a resource center, and helps low-income individuals with health insurance enrollment assistance, CalFresh (food stamps) enrollment and reporting and linkage to additional community resources. In fiscal year 2011, it cost O’Connor Hospital $400,469 to create and operate the program which connected with more than **2,080 individuals** and provided health insurance enrollment assistance to 362 people.
**Contributions and partnerships with community programs that care for the homeless**

**Medical Respite**
The Santa Clara County Medical Respite Program is a collaborative program between the Hospital Council of Northern & Central California, EHC Lifebuilders, the Valley Homeless Healthcare Program and local hospitals. As part of the collaborative, O’Connor Hospital provided **$50,000** to help fund the program in fiscal year 2011. The program provides 15 beds for homeless patients who are being discharged from the hospital. These beds provide a clean, safe place for the patients to recuperate and continue with self-care rather than trying to recuperate on the streets. Additionally, the program offers social services resources such as health insurance enrollment assistance and housing assistance.

**New Directions Case Management Program**
O’Connor Hospital partners with Hospital Council of Northern & Central California, EHC Lifebuilders and local hospitals in this collaborative program designed to help reduce frequent use of Emergency Room services by individuals with complex medical and psychosocial needs. The program provides case management and linkage to appropriate community resources for stabilization of the patient beyond the hospital. In fiscal year 2011, O’Connor Hospital provided **$112,500** to help operate the program which served more than 90 individuals.
Education Beyond Books

The O’Connor Hospital Pediatric Center for Life (PCFL) is a primary care clinic dedicated to providing equal access to quality health care for children from low-income families. Throughout the 2010-2011 school year, PCFL has taken strides to expand the Daughters of Charity Health System Mission of promoting healthy families by partnering with the Franklin McKinley Children’s Initiative (FMCI).

The FMCI is a community-based collaboration whose vision is to create and support an inclusive, safe, healthy, and caring community in which families and service providers recognize their interdependence as they work collaboratively toward sustaining an environment where children and adults can thrive.

Under the umbrella of FMCI, PCFL coordinated with the Catholic Charities Communities Organizing Resources to Advance Learning (CORAL) after-school program at Santee Elementary School. PCFL nurse practitioner Sarah Flores taught eight classes to 22 fifth graders in enrolled in the CORAL program. The primary focus of the weekly classes was to provide information about nutrition and healthy lifestyles.

Sarah’s lesson plans covered topics such as healthy eating habits; the importance of exercise; how weight affects your health; genetic risk factors for disease; diabetes and controlling blood sugar; nutrition; behavior risk factors for disease; how foods affect blood sugar; cholesterol; eating disorders and obesity. The children chose to learn about diabetes first as many of them have a family history of the disease and want to understand it better in order to reduce their risk of developing it.

Sarah also incorporated games and exercises to reinforce the lessons she taught. The kids and Sarah exercised, rain or shine, at each of these sessions demonstrating to them that exercise can be done anywhere, anytime; without excuses.

Additionally, Sarah worked with the Santee Elementary School’s weekly mothers group to discuss various concerns. Her workshops with the mothers group covered topics such as genetic risk factors for disease; methods of weight loss; cooking healthy meals; weight and adolescents; reading food labels; vitamins; BMI and types of exercise. “I was impressed by how eager the moms were to learn!” Sarah said. “We had lively open discussions and debunked many myths surrounding nutrition, exercise, and risk factors for disease.”

Although it was a challenge to adapt lesson plans to the needs and interest of the students as well as the mothers, Sarah found that “The mothers were very engaged...open to the information, frequently asking questions and eager to learn.” Her most memorable moment occurred during a discussion of obesity. One of the students shared her story of being bullied about her weight and how it made her feel to be teased. “I took the opportunity to talk to the class about bullying, how it impacts the victim, and the importance of being strong and standing up for the victim rather than following the crowd,” said Sarah. “I was so impressed by how brave that student was for sharing her story.”
Benefits for the Broader Community

O’Connor Hospital supports a wide range of programs and activities that provide information and resources to improve the health and welfare of the broader community, providing more than $963,000 in community benefit activities in fiscal year 2011. Activities included presenting community health education classes, participating in community health fairs and screenings, providing health professions education, and partnerships with community organizations.

Community Health Education
In fiscal year 2011, more than 1,772 individuals attended one of O’Connor Hospital’s health education classes. The classes address a wide range of health topics including preventative care, physical activity, nutrition, end-of-life decisions and more. Additionally, each month, O’Connor presents a series of childbirth and family education classes for new families to learn more about the birthing process and how to care for newborns.

O’Connor Hospital also provides a variety of support groups with a safe, healing environment where community members can gather together to cope with their illness or learn about an illness in support of a loved one. In fiscal year 2011, approximately 950 individuals attended a support group meeting at O’Connor Hospital.

Community Health Fairs and Screenings
Each year, O’Connor Hospital is pleased to partner with and participate in community events and health fairs by providing health education information and screenings. In fiscal year 2011, O’Connor provided screenings to more than 700 individuals.

On May 14, 2011, O’Connor Hospital hosted a Family Health Fair Day where the T-Dap (whooping cough) vaccine booster was given to middle and high school children. The health fair was held in response to a new immunization law requiring all students entering seventh through twelfth grades in the 2011-2012 school year to be immunized with a pertussis (whooping cough) vaccine booster. In addition to administering 110 doses of the vaccine, the health fair also provided glucose, cholesterol and blood pressure screenings, health insurance enrollment assistance and many interactive educational opportunities for children and their families.

Health Professions Education
O’Connor Hospital partners with local educational institutions to provide a hands-on learning experience for physicians, nurses, chaplains and other health care professionals. In fiscal year 2011, more than 390 health care professionals conducted their residency, internship or preceptorship at O’Connor Hospital.

Partnerships with Community Organizations
O’Connor Hospital believes in community-based collaboration and is committed to working with partners to build a healthier community. We work with the American Cancer Society, Breathe California, Santa Clara County Child Abuse Council and many more organizations to achieve goals that are greater than what the hospital or organization can accomplish alone.

In addition to supporting organizations as an institution, individual members of our hospital staff and medical staff are actively involved with a variety of organizations and causes.
Our People at Work in the Community

Pamela Brotherton-Sedano, MS, RN, CPHQ, CPHRM, CHC, CCEP
Vice President, Patient Safety/Corporate Responsibility Officer

Volunteer work is an integral component of life for Pamela Brotherton-Sedano. Once she began doing volunteer work in her teens at Presentation High School, she never turned back.

In addition to her duties as the Vice President of Patient Safety and Corporate Responsibility Officer at O’Connor Hospital for the past four years, Pamela serves on the board for the California Society for Healthcare Risk Management, the Presentation High School Alumnae Committee and Habitat for Humanity Silicon Valley.

As a board member of Habitat for Humanity Silicon Valley, Pamela currently works on board development and board recruitment. She says the goal is “to serve families in the community who do not have a simple and decent home to live in. When you don’t have to worry about where you live, then you can worry about other things like getting kids an education.” In this way, Pamela is able to help families stop the cycle of poverty—a social phenomenon that is very difficult to escape.

“Everyone deserves a chance to be able to have a safe, simple decent place to live,” she stated. “We are all blessed, and we should be giving back to the community in both big and small ways.”

Lee Mayer, RN, NP
Coordinator, Palliative Care Program

In her role as Coordinator of the Palliative Care Program at O’Connor Hospital, Lee Mayer serves as a consultant and pain care specialist for patients with chronic or terminal diseases. While Lee devotes most of her time caring for her patients at O’Connor Hospital, for the last 12 years she has set aside two weeks of her own time in February and September to travel with a specialized group of medical professionals, dentists, and social justice workers to provide care for patients on a global scale.

It is through her work abroad in the global community that Lee has been able to gain her unique sense of compassion and empathy. It is these qualities that have allowed her to be an outstanding asset to the community at O’Connor Hospital.

“While abroad, I see a different dimension of suffering and how to heal with very little, and here you can do the same thing. It’s perspective. You can do something for every single person if you just touch them. It works all around the world. It is simply reaching out. It takes nothing to be kind. Nothing. And it heals just about everything.”
Thad Padua, MD, FAAP  
*Founding Pediatrician and Medical Director of the Pediatric Center for Life*

As an advocate for child health in the community, Dr. Thad Padua strives to provide health care for children of low-income families. He has been serving as the medical director of the Pediatric Center for Life since its founding in 1991, with the intention of “help[ing] to improve the health care system for needy families.”

“I’ve always cared for this population,” Dr. Padua said. “My whole career is dedicated to making sure there is equal access to health care.”

In addition to 20 years of utmost dedication to this clinic, Dr. Padua is on the board for both the Lucile Packard Foundation for Children’s Health and O’Connor Hospital. He is also a part-time medical director for the Santa Clara Family Health Plan, who’s goal is to help improve the health of the local population through population management — a cause that Dr. Padua holds dear to his heart. Earlier this year Dr. Padua was recognized for his hard work and contributions to the community by receiving the Physician Provider Award in the inaugural Health Care Hero Awards in Santa Clara County.
O’Connor Hospital
Community Benefit Plan Fiscal Year 2012

O’Connor Hospital’s fiscal year 2012 Community Benefit Plan is based on the hospital’s Mission and the identified focus areas outlined in the Santa Clara County 2010 Health Profile Report. The health profile report identifies the following areas in our community that need improvement: access to health care, chronic disease and smoking. Our fiscal year 2012 plan identifies activities O’Connor Hospital will continue, implement and increase, that will focus on access to health care and community health education.

Led by our Mission, O’Connor Hospital is dedicated to improving the health and well-being of the individuals in our community. To this end, we partner with a variety of community organizations that share in our vision and commitment to the community. Through partnerships, O’Connor Hospital is able to provide:

- Assistance to vulnerable populations
- Support and care for individuals and their families battling disease
- Educational opportunities for the next generation of health care workers
- Health education and support to community members
- A variety of additional contributions to the broader community.

Goal 1
Improve access to ongoing, comprehensive, compassionate health care for the medically underserved and other vulnerable populations.

Target Populations: Individuals living in Santa Clara County who are:

- Homeless
- Low-income
- Underinsured
- Uninsured

Community Need: According to the Santa Clara County 2010 Health Profile Report, the percentage of uninsured adults in Santa Clara County increased from 8% in 2000 to 18% in 2009. The percentage of adults who could not see a doctor due to the cost of or lack of insurance more than doubled from 5% in 2000 to 13% in 2009.

Strategy 1: Operate the Health Benefits Resource Center (HBRC), a one-stop information and referral service that will advocate participation among the working poor in valuable health-related programs such as Medi-Cal, Healthy Families and CalFresh (food stamp program).

Action Plan:

- The HBRC will assist at least 75 individuals with insurance eligibility.
- The HBRC will assist at least 50 individuals with Food Stamp enrollment.
**Strategy 2:** Provide Charity Care for individuals needing assistance who qualify.

**Action Plan:**
- O'Connor Hospital will provide at least $2 million in Charity Care at cost.
- O'Connor Hospital will publicize our Charity Care policy to individuals who qualify by providing information utilizing a variety of communication tools.

**Strategy 3:** Provide medical support and case management for at-risk individuals who make frequent visits to the Emergency Department.

**Action Plan:**
- O'Connor Hospital will continue to provide funding for the Medical Respite Center.
- O'Connor Hospital will continue to provide funding for the New Directions Program.
- The Health Benefits Resource Center will assist at least 45 homeless individuals and connect them with social service agencies.

**Strategy 4:** Conduct health screenings at low or no cost for community members.

**Action Plan:**
- O'Connor Hospital will partner with RotaCare Bay Area to provide Radiological and Laboratory services to patients from the San Jose RotaCare Clinic.
- O'Connor Hospital will participate in at least five health fairs.
- O'Connor Hospital will continue to offer community blood pressure screenings at the Cardiac Rehabilitation Center.

**Strategy 5:** Provide comprehensive health care services to underinsured patients.

**Action Plan:**
- O'Connor Hospital will continue to accept Medi-Cal patients.
- O'Connor Hospital will continue to sponsor the outpatient primary care clinics: Family Health Center and Pediatric Center for Life.

**Goal 2**
Increase health education services for the community, with a special emphasize on chronic diseases.

**Target Populations:** Individuals living in Santa Clara County who:
- Have been diagnosed with a chronic disease
- Are at-risk of developing a chronic disease
- Caregivers for individuals with a chronic disease

**Community Need:** According to the Santa Clara County 2010 Health Profile Report, obesity and diabetes are two chronic diseases that have a profound impact on our community. The prevalence of overweight and obesity among middle and high school students in Santa Clara County is at 25%. Thirty-seven percent (37%) of African-American and 36% of Hispanic middle and high school students were overweight or obese in 2007-08.
The percentage of adults in Santa Clara County who are overweight or obese increased from 52% in 2000 to 56% in 2009. Overweight and obesity rates are higher among adults with low incomes. Hispanic adults have the highest rate of both overweight and obesity: 68% of Hispanic adults were overweight or obese compared to 55% of County residents overall in 2009.

The adult diabetes rate in Santa Clara County has also increased. The percentage of adults who were told by a health professional that they have diabetes increased from 5% in 2000 to 8% in 2009. A higher proportion of Hispanic adults have been diagnosed with diabetes: 11% of Hispanics were diagnosed with diabetes compared to 7% of Whites and 5% of Asians in 2009.

**Strategy 1:** Provide preventative services for individuals who are diagnosed with or are at-risk of developing a chronic disease.

**Action Plan:**
- Continue to conduct community health screenings through participation at health fairs.
- Expand the Living Well Community Education Class offerings to include sessions that focus on chronic disease prevention and management.

**Strategy 2:** Provide support for those diagnosed with, or caring for, someone living with a chronic disease.

**Action Plan:**
- Continue to host a variety of community support groups.
- Utilize the HBRC to provide linkage to additional support resources in the community.

**Strategy 3:** Improve community health education communications.

**Action Plan:**
- Publicize new Living Well Community Education Classes to target audiences, such as neighborhood schools for healthy eating and obesity classes.
- The HBRC staff will distribute information about classes and support groups to the broader community and O'Connor patients.
- Utilize Facebook to promote Living Well Community Education Classes and provide tips for healthy living.
# O'Connor Hospital FY 2011 Community Benefit Financial Overview

## Benefits for Persons Living in Poverty

<table>
<thead>
<tr>
<th>Category</th>
<th>Persons Served</th>
<th>Total Community Benefit (CB) Expense</th>
<th>Total CB Expense as a Percent of Total Expense</th>
<th>Direct Offsetting Revenue</th>
<th>Net Community Benefit Expense</th>
<th>Net CB as Percent of Total Expense</th>
<th>YTD Budget Net CB Expense</th>
<th>Prior YTD Actual Net CB Expense</th>
<th>YTD % Diff FY 2011 vs FY 2010</th>
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<td>Charity Care at Cost</td>
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## Benefits for the Broader Community

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<tr>
<th>Category</th>
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<th>YTD Budget Net CB Expense</th>
<th>Prior YTD Actual Net CB Expense</th>
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<td>Health Professions Education</td>
<td>390</td>
<td>$16,028</td>
<td>0%</td>
<td>$0</td>
<td>$16,028</td>
<td>0%</td>
<td>$60,000</td>
<td>$5,281</td>
<td>203%</td>
</tr>
<tr>
<td>Subsidized Health Services</td>
<td>279</td>
<td>$285,557</td>
<td>0%</td>
<td>$0</td>
<td>$285,557</td>
<td>0%</td>
<td>$432,000</td>
<td>$572,990</td>
<td>-50%</td>
</tr>
<tr>
<td>Research</td>
<td>0</td>
<td>0%</td>
<td>0%</td>
<td>$0</td>
<td>0</td>
<td>0%</td>
<td>0</td>
<td>0</td>
<td>0%</td>
</tr>
<tr>
<td>Cash and in kind Contributions to Community Groups</td>
<td>16,188</td>
<td>$121,632</td>
<td>0%</td>
<td>$0</td>
<td>$121,632</td>
<td>0%</td>
<td>$60,000</td>
<td>$40,498</td>
<td>200%</td>
</tr>
<tr>
<td>Community Building Activities including CB operations</td>
<td>0</td>
<td>$4,160</td>
<td>0%</td>
<td>$0</td>
<td>$4,160</td>
<td>0%</td>
<td>$40,000</td>
<td>$23,374</td>
<td>-82%</td>
</tr>
<tr>
<td><strong>Total quantifiable community benefits for the broader community</strong></td>
<td>22,638</td>
<td>$1,029,216</td>
<td>0%</td>
<td>$65,834</td>
<td>$963,382</td>
<td>0%</td>
<td>$1,444,000</td>
<td>$1,424,614</td>
<td>-32%</td>
</tr>
<tr>
<td><strong>Total Quantifiable Benefits</strong></td>
<td>90,864</td>
<td>$67,863,240</td>
<td>21%</td>
<td>$28,663,518</td>
<td>$39,199,723</td>
<td>12%</td>
<td>$38,844,000</td>
<td>$33,596,595</td>
<td>17%</td>
</tr>
<tr>
<td><strong>Unpaid Costs of Medicare Program</strong></td>
<td>33,147</td>
<td>$144,523,161</td>
<td>46%</td>
<td>$106,053,989</td>
<td>$38,469,172</td>
<td>12%</td>
<td>$29,000,000</td>
<td>$32,295,860</td>
<td>19%</td>
</tr>
</tbody>
</table>