UCSF Benioff Children's Hospital
Oakland

2018 Community Benefit Report

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UCSF Benioff Children's Hospital
Oakland

I. Welcome

I continue to be inspired by UCSF Benioff Children's Hospital Oakland's impact, both locally and globally, and I am delighted to present our 2018 Community Benefit Report. This annual report provides an overview of the various activities our hospital has engaged in this past year that reach beyond our core medical services to address the needs of children.

In 2018, evidence came to light how the U.S. Government has been forcibly separating young immigrant children from their families at the US-Mexico border and keeping them in less-than-humane conditions for extended periods of time. This story brought the terms "adverse childhood experiences" (ACEs) and "childhood trauma" into the mainstream. The news was full of stories about how trauma experienced as a young child can have a lifelong impact on the child's mental as well as physical health.

For many years, Children's Hospital has been a pioneer at addressing childhood trauma in its own backyard. Long-standing community benefit programs at the hospital such as the Center for Child Protection, Center for Vulnerable Child, and Early Intervention Services provide therapy, training, and support groups for families and children who have faced intense adversity.

More recently, Children's Hospital co-developed the first screening tool to identify children who are experiencing or are at-risk for trauma. In the past year, the State of California made the decision to not only endorse this tool, but to pay providers to use it, making it the only child trauma screening tool in the country whose use is reimbursable by a state government. Children's Hospital is also conducting the first study to identify biomarkers of stress in children, and providing unique therapeutic approaches to mitigate trauma in its innovative Resiliency Clinic. The Trauma Informed Care Collaborative and Resilient Beginnings Project, funded by Genentech, represent internal efforts to promote trauma-informed care throughout the hospital.

I am excited to continue this journey of engaging with the community and our partners to create solutions to improve the health and well-being of our children.

Michael Anderson, MD MBA FAAP
President, UCSF Benioff Children's Hospitals & SVP, Children's Services
Vice Chair for Children's Health, Department of Pediatrics, UCSF School of Medicine

II. UCSF Benioff Children's Hospital Oakland

Our Mission

To protect and advance the health and well-being of children through clinical care, teaching, and research.

Our Vision

- High-quality, cost-effective, family-centered care
- Research that benefits children and adults worldwide
- Broad-based teaching and educational activities
- Child advocacy and health policy efforts

Service Area and Scope of Services

UCSF Benioff Children's Hospital Oakland offers a broad range of inpatient, outpatient, and community programs. Although Children's Hospital serves patients throughout Northern California and other states and counties, about 80 percent of Children's patients come from Alameda and Contra Costa Counties. Children's Hospital is a pediatric safety-net hospital for both of these counties, since neither has public hospital beds for children. In 2018, a total of 79,113 patients were served through 9,159 inpatient visits, 209,413 non-urgent outpatient visits, and 44,723 visits to the Emergency Room.

Children's Hospital offers multiple community programs and services. Its Federally Qualified Health Center is the largest pediatric primary care clinic in the Bay Area and includes two comprehensive school-based clinics and one at the Juvenile Justice Center in San Leandro.

The Children's Hospital Oakland Research Institute (CHORI) is dedicated to translating basic and clinical research into health benefits for children. In 2018, CHORI had more than 150 active grants and contracts, which included partnerships with private research organizations, corporations, universities and government entities on local and national levels.

Governance

Since 2014, Children's Hospital has been affiliated with UCSF. UCSF has representation on the Children's Board of Directors, and Children's Hospital retains its identity as a private, not-for-profit 501(c)(3) organization. Children's president is a voting member of the Board of Directors, as are the UCSF Medical Center CEO and the dean of the UCSF School of Medicine. The Regents of the University of California is the corporate parent of Children's Hospital.

III. Community Benefit Report Overview

The Affordable Care Act requires all nonprofit hospitals to complete and submit an annual Community Benefit Report. Although hospitals bring numerous benefits to their local economies, these reports are intended to document the ways that hospitals support the health needs of their communities above and beyond the hospitals' core functions. Although the State of California (via SB 697) provides some general guidance, there is no official definition of a "community benefit." Children's Hospital has employed the following definition: A community benefit is a planned, managed, organized, and measured approach to meet documentable community needs intended to improve access to care, health status, and quality of life. A community benefit should meet one or more of these criteria:

- Responds to public health needs or the needs of a vulnerable or at-risk population
- Generates no (or negative) profit margin
- Would likely be discontinued if the decision were made on a purely financial basis
- Is not considered standard of care for a children's hospital

The following are not considered community benefits: activities designed for marketing or fundraising, services that are considered "the cost of doing business," education for hospital staff, volunteering by employees on their own time, and capital improvements.

Creation & Dissemination of the 2018 Community Benefit Report

The leadership team for the Department of Community Health and Engagement served as the oversight committee for this report. The report was compiled by Justin Del Rosario and Adam Davis. Financial data was provided by Chris Culhane.

The 2018 report has been submitted to the Children's Board of Directors and is made available to hospital staff and the general public through the Children's Hospital website, with further distribution through the Department of Community Health and Engagement. Children's Hospital maintains public awareness of its community services through social media, traditional media, its website, and other publications.

Contact Adam Davis at **AdDavis@mail.cho.org** for questions or more information.

IV. Community Health Needs Assessment

Every three years, nonprofit hospitals are required by federal and state laws to conduct community health needs assessments (CHNA) and use the results to develop a community health improvement implementation plan.

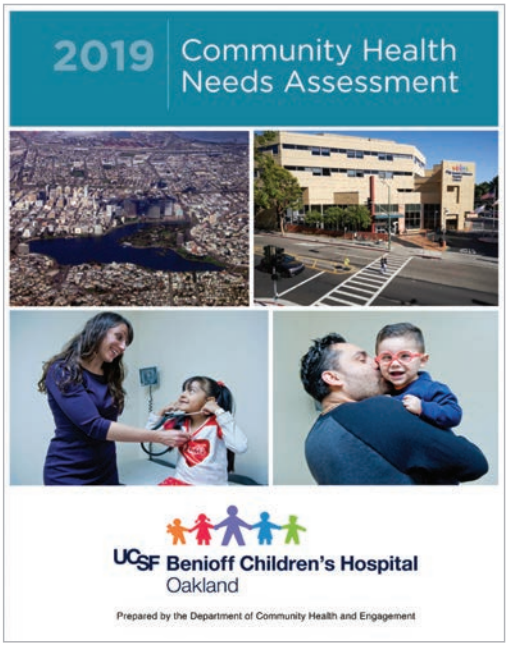
UCSF Benioff Children's Hospital Oakland published its most recent CHNA in 2019. The analysis was done by Actionable Insights, a public health research firm. The objective of the CHNA is:

- To provide necessary information for the UCSF Benioff Children's Hospital Oakland community health improvement plan
- Identify communities and specific groups within these communities experiencing health disparities, especially those relating to chronic disease
- To further identify contributing factors that create both barriers against and opportunities for these populations to live healthier lives.

A community-based participatory research orientation was used to conduct the assessment, which included both primary and secondary data. Primary data collection included input from more than 160 members of the hospital service area, expert interviews with 31 key informants, and 23 focus group interviews with 290 community members. Secondary data analysis included over 500 epidemiological, socio-demographic, and environmental variables.

The Department of Community Health and Engagement's Advisory Committee identified a list of the community's greatest needs based on the collected data. As of July 2019, this committee is working to identify specific priorities and strategies for the 2019-2022 cycle.

The full Community Health Needs Assessment report can be found on the hospital's website:
www.childrenshospitaloakland.org/Uploads/public/documents/publishing/community-health-needs-assessment-report-USCF-BCHO-2019.pdf



V. Undercompensated and Charity Care

UNDERCOMPENSATED GOVERNMENT-SPONSORED HEALTH CARE

The cost of providing care is often more than what Children's Hospitals receive to provide them. This is frequently true for children who have government-sponsored health insurance (such as Medicaid), state children's health insurance, and other means-tested programs. Approximately 70 percent of all visits to Children's Hospital in 2018 were for patients who received government-sponsored health insurance. In each case, Children's Hospital covers the difference, effectively subsidizing health care for children of families who have low income and do not have private insurance.

CHARITY CARE

As part of its commitment to serve the community, Children's Hospital provides free or discounted care, also known as Charity Care, to families who do not qualify for government-sponsored health insurance and who meet certain eligibility requirements. The Charity Care program requires that patients complete an application and provide supporting documentation to verify income level. Self-pay patients who come to the Emergency Department are provided a brochure describing the Charity Care program. A statement on the bill also advises parents who may be eligible for financial assistance. A patient can receive services at any Children's Hospital location, contact us to request a Charity Care application, and then qualify.

VI. Department of Community Health & Engagement

The Children's Hospital Department of Community Health and Engagement (DCHE) was established in 2015 to promote the hospital's role in improving the health of local children, particularly the underserved, as well as to help maintain the hospital's identity and local focus after its affiliation with UCSF. The Department of Community Health and Engagement (DCHE) is responsible for community and government relations, the incubation and management of innovative community benefits programs, research related to health equity, and meeting the hospital's "community benefits" statutory obligations.

DIRECT SERVICES TO PATIENTS & FAMILIES

Family Care Network (FCN)—DCHE is the hub for FCN, a collaboration of seven organizations who coordinate primary medical care, case management, peer advocacy, and legal and mental health services for women and children living with or affected by HIV/AIDS in Alameda and Contra Costa Counties. In 2018, FCN served more than 1,200 individuals.

FETCH (Free and Easy Transportation for Children's Health)—Lack of transportation is cited as the top reason families might miss medical appointments. In collaboration with Lyft and Yoots, FETCH provides free and convenient round-trip transportation to clinic visits for families who lack access to reliable transportation and are at risk of missing their appointments. In 2018, DCHE began a partnership with the Division of Endocrinology to evaluate the impact of FETCH on show rates of diabetes patients with transportation challenges.

Food Farmacies—Many families who receive their care at Children's Hospital rely on inexpensive, processed food due to the unavailability or inaccessibility of healthy foods. DCHE partners with the Alameda County Community Food Bank and Phat Beets Farms to provide two Food Farmacy pop-up markets per month, where families at Children's Hospital can get free: fresh produce, meats, eggs and whole grains, along with easy recipes and other nutrition-related education. DCHE also coordinates the distribution of canned and dried foods to patients throughout the hospital. In 2018, DCHE served approximately 4,000 individuals through its food programs.

FINDconnect®—Poor health outcomes in children are driven more by social, economic, and environmental factors than by genes, behavior, or access to healthcare. The World Health Organization defines the social determinants of health as the circumstances in which people are born, develop, live, and age. Traditionally however, addressing these social determinants of health has been outside the scope of medical practice. DCHE developed a tool to help health and service providers address the needs of lower-income children called FINDconnect. FINDconnect allows providers to quickly screen for and prioritize a family's basic needs and connect the family to community resources to help resolve those needs.

To date, almost 2,000 families have received services through FINDconnect and over 100 medical residents have been trained on how to use it. It is now available to any provider at UCSF Benioff Children's Hospital Oakland. Due to the growing number of interest from outside providers, DCHE began licensing FINDconnect across the country in 2018.

PATIENT EDUCATION

Spread the Word—80% of a child's brain is formed by age 3; research shows that the level of a parent's involvement in their child's life during this critical time directly correlates with language acquisition and school success. DCHE supports early literacy efforts at Children's Hospital by educating caregivers about the importance of talking, reading, and singing to children; supplying books to providers to pass on to parents; and coordinating reading circles. The hope and purpose of these efforts is to make child literacy a routine part of pediatric care.

Department of Community Health & Engagement Staff

PROFESSIONAL & ACADEMIC DEVELOPMENT

CHAMPS—CHAMPS is an award-winning career-building program that provides multi-year, immersive healthcare experiences and individualized support to local students from underrepresented backgrounds in health care who wish to learn about health careers. For more information see page 29.

Trauma-Informed Training Program—Because of the potentially long-lasting negative impact of trauma on physical and mental health, it is important that health care and community providers move towards trauma-informed systems of care. This approach involves both organizational and clinical changes that have the potential to improve patient engagement, health outcomes, and provider and staff wellness, as well as to decrease unnecessary utilization. Children's Hospital staff are partnering with the community to provide trauma-informed care trainings in seven Bay Area counties.

Community, Advocacy, Primary Care (CAP) EXPERT—The DCHE collaborated with Children's Graduate Medical Education Department to develop and implement CAP EXPERT, a required training component for all pediatric residents at Children's Hospital. CAP EXPERT teaches them skills needed to work with patients with complex needs, and builds their proficiencies to work in community settings after their training. Residents also spend time observing in non-medical community settings, such as social service agencies, lactation classes, and parent support groups. One of the competencies taught by CAP EXPERT is cultural humility, an approach to provide care originally developed at Children's Hospital Oakland in the late 1990s. This approach emphasizes the provider's self-humility over their expertise. Its goal is to increase the quality of a clinician's interactions with clients and patients.

HEALTH EQUITY RESEARCH

Food as Medicine—Many families who receive care at UCSF Benioff Children's Hospital rely on inexpensive, processed food due to the unavailability or inaccessibility of healthy foods. In 2017, DCHE was funded by Alameda County to conduct a study called Food as Medicine, aiming to highlight the impact of home deliveries on pre-diabetic families living in poverty. DCHE partnered with a collective of urban farmers to provide food to 60 families for four months. Each week, participants received recipes and cooking demonstration videos that incorporate the food packages. The program proved effective at changing eating behaviors. In 2018, DCHE received additional funding to expand the study to more families and additional clinic sites.

Bay Area Research Consortium on Toxic Stress (BARC-TS)—Adverse events early in life, such as exposure to violence and abuse, can cause toxic stress. If not addressed early, research shows how early Adverse Childhood Experiences (ACEs) can lead to negative biological and behavioral changes which last a lifetime. The science on ACEs is new and not yet integrated into pediatric care. DCHE is leading a ground breaking study to develop and validate screening tools for ACEs that can be used in the pediatric setting to identify children at risk for toxic stress. Using a novel approach that concurrently assesses dozens of different proteins, the study seeks to identify biomarkers that correlate with exposure to ACEs. BARC-TS is the name of the collaboration between DCHE, Children's Claremont Clinic, the Center for Youth Wellness, and the UCSF School of Medicine. In 2018, 302 families were enrolled.

Brilliant Babies—A college degree can break the generational poverty cycle. Only 10% of public high school students in Oakland graduate from college, and many who do are the first in their family. In 2015, Oakland Mayor Libby Schaaf started her signature poverty initiative called The Oakland Promise to combat this issue. One of the four strategies in Oakland Promise is called Brilliant Baby: A two-generational approach in which babies born into poverty in Oakland receive a college savings account opened in their names with an initial seed fund of $500, setting an expectation for college from birth. Brilliant Baby also provides financial coaching for the families who open college savings accounts. At the request of Mayor Schaaf, DCHE is observing Brilliant Baby's impact on a variety of social, economic, and health-related outcomes among 500 babies recruited from Children's Hospital's Claremont Clinic. At scale, Brilliant Baby will serve approximately 2,200 families per year.

VII. Access to Primary Care

Primary Care for Teens and Young Adults

The Division of Adolescent Medicine runs 4 teen and young adult clinics serving 11 to 24 year-olds. These clinics provide an array of services "above and beyond" the standard of care to address the complex economic and societal challenges that young patients may face.

DIRECT SERVICES TO PATIENTS & FAMILIES

Children's Hospital's 4 teen and young adult clinic sites account for over 5,500 visits each year. Most of the young people seen in these clinics live in neighborhoods impacted by poverty, gun violence, substandard housing, food deserts, and other conditions that affect their health and well-being. The clinics serve as national models for full-service primary care centers that integrate behavioral health services to promote adolescent development and wellness.
The sites include:

- **The Teen Clinic** on Telegraph Avenue in North Oakland provides integrated primary and behavioral health care for over 1,000 patients from 11 to 24 years old.
- **The Chappell-Hayes Health Center** is located in West Oakland at the site of McClymonds High School**.** The **Youth Uprising/Castlemont Health Center** is located next to Castlemont High School. These clinics have garnered national attention for their pioneering work of providing behavioral health services along with basic primary care at a school-based clinic. The two school-based health centers are operated in conjunction with the Oakland Unified School District and the Center for Healthy Schools and Communities at the Alameda County Health Care Services Agency.
- **The Alameda County Juvenile Justice Center (JJC) Medical Clinic** provides full medical and behavioral health service for over 2,000 detained young people every year. The Juvenile Justice Center clinic is a collaboration between Alameda County's Health Care Services Agency, Behavioral Health Care Services, Probation Department, and Public Health Department.

Claremont Primary Care Clinic

DIRECT SERVICES

UCSF Benioff Children's Hospital Oakland Claremont Primary Care Clinic provides a medical home to more than 9,000 children every year. The clinic uses a team-based care model that includes care coordination for medically and socially complex patients. Through a combination of direct patient care, family navigation, behavioral health integration, early literacy support and other adjunct services, the clinic provides holistic health care to children speaking more than 30 different languages. Along with general primary care services, a number of integrated clinics serve special populations, including:

- **Encore Clinic—**provides health care and case management to homeless children and families in collaboration with the Center for the Vulnerable Child
- **Foster Care Clinic—**provides health care and case management to children in foster care, in collaboration with the Center for the Vulnerable Child
- **International Clinic—**provides health care to non-English-speaking patients and their families
- **Asthma Clinic—**provides health care and case management to children with complex cases of asthma
- **Charlie's Clinic—**provides primary care, care coordination, case management and parent support for children with Down Syndrome.
- **Chasing Health Outcomes Clinic—**provides health care for children at risk for diabetes mellitus related to obesity.
- **Complex Care Clinic—**provides interdisciplinary care for children with multiple system disorders.

FAMILY EDUCATION

Reach out and Read/Early Literacy—Children are provided with books at well-child visits and the clinic hosts early-literacy events and reading circles year-round. A video created by the Claremont Clinic that runs in the waiting room shows how parents can best support talking, reading, and singing to their young child in everyday activities.

Smoking Cessation: Clinical Effort Against Secondhand Smoke Exposure (CEASE)—CEASE encourages parents who expose their children to tobacco smoke to stop smoking by providing brief on-site counseling and making referrals to the California Smoker's Hotline, where they can receive more intensive counseling and access to nicotine replacement therapy.

FAMILY SUPPORT SERVICES

Family Information and Navigation Desk (FIND)—Provides navigation assistance and referrals for families who have basic needs related to social circumstances that may be impacting the child's health. See page 24 for more information about FIND.

Medical-Legal Partnership—The Claremont Primary Care Clinic has partnered with the East Bay Community Law Center since 2006 to provide patients with pro bono legal services on cases related to their health issues. This service has been expanded to other departments within the hospital setting.

SHINE (Staying Healthy in Nature Everyday)—Low income families experiencing stress or lacking routine access to natural settings have an opportunity to enroll in SHINE, a once-a-month guided outing to various East Bay Regional Parks. These "nature clinics" reduce stress, loneliness, and physical inactivity. Exposure to nature is now known to have both physical and psychological benefits. In addition, the program provides unique educational experiences for youth who seldom "get out in nature." See page 21 for more info.

HEALTH EQUITY RESEARCH

The Primary Care Clinic partners with the Department of Community Health and Engagement and the larger community to engage in groundbreaking research. These research studies have local public health importance and include a focus on asthma, reduction of toxic stress, and social inequities in health care. Particular studies that happened during 2018 include:

- **Pediatric Adverse Child Event Screening and Resiliency Study (PEARLS)—**Part of the Bay Area Research Consortium on Toxic Stress, this study is looking at how to screen for and mitigate adverse events in young children.
- **Brilliant Baby—**This evaluation study seeks to demonstrate the impact across a range of outcomes of providing babies born into poverty in Oakland with pre-loaded college savings accounts and financial coaching for their families.

VIII. Care for Special Populations

Camps

Children's Hospital staff participate in the planning and execution of multiple camps for hospital patients. These camps provide children with support, enrichment, education, and fun!

CAMP BREATHE EASY (ASTHMA)

Located in a beautiful natural setting outside of Livermore, Camp Breathe Easy is a four-day, three-night residential summer camp for underserved children with asthma. Camp Breathe Easy was started and managed by Children's staff from the Primary Care Clinic. In addition to the usual camp activities—such as swimming, boating, ropes courses and sports—Camp Breathe Easy provides asthma education so attendees can learn to better manage their asthma. About 90 children attended Camp Breathe Easy in 2018.

CAMP HEMOTION (BLEEDING DISORDERS)

Each summer, Camp Hemotion holds a week-long residential program at Camp Oakhurst for youth and their siblings ages 7 to 20 who have, or are carriers of, bleeding disorders. Camp Hemotion is the result of a partnership between Children's Hospital and the Hemophilia Foundation of Northern California. Members of the medical team (e.g., nurses, social workers) attend camp to help staff the camp infirmary, providing routine and emergency care for campers. Campers participate in various activities—including training in self-infusion—and learn how to better manage their conditions.

FAMILY CAMP AND B-LEADERS YOUTH RETREAT (HEMOPHILIA)

In collaboration with the Hemophilia Foundation of Northern California, members of the Hemophilia Treatment Center participate in the planning of bleeding-disorder camps and serve as medical staff at the camps Family Camp is a weekend-long camp held each January at Camp Arroyo for families with children suffering from bleeding disorders. B-Leaders Youth Retreat is open to youth ages 14 to 18 suffering from bleeding disorders. Roughly 35 to 40 families attend each year.

DIABETES CAMPS

Camp de los Niños—This one-week residential camp in the Santa Cruz Mountains is for kids 7 to 17 years old. The camp combines traditional camp activities with diabetes education. A Children's Hospital endocrinologist has attended camp as part of the medical staff since 2006. In addition, residents attend to help staff the camp.

Campamento—A UCSF Spanish-language event at Camp Jones Gulch in La Honda. A Children's diabetes educator provides education and helps staff the event.

Bearskin Meadows Camp—A series of summer camps for kids with Type 1 diabetes and their families in Sequoia National Park. Camp is staffed by Children's Hospital endocrinologists and certified diabetes educators.

CAMP SUPERSTAR (SICKLE CELL DISEASE)

Camp Super Star provides traditional "sleep away" experience specifically for children ages 7-16 who have sickle cell. Held over a weekend in the summer on a natural hillside setting outside of Livermore, Camp Super Star offers horseback riding, rock climbing, swimming, a DJ, and a variety of sports. Children's Hospital Oakland's Hemoglobinopathy Program helps sponsor the camp and provides on-site medical support.

Center for Child Protection

While all hospitals interface with victims of abuse, UCCF Benioff Children's Hospital Oakland is the only hospital in northern California with a dedicated child abuse program. Ranked as a Center of Excellence by the Children's Hospital Association, the Center for Child Protection (CCP) cares for close to 700 children annually that are impacted by child abuse, neglect, and/or exposure to violence.

Established in 1984, CCP's interdisciplinary team of specially-trained clinicians and social workers provide comprehensive medical and mental health services and collaborates with other departments at Children's Hospital, government agencies, and community-based pediatric health providers. Along with law enforcement, CCP works with its partners to create a trauma-informed system that:

- **responds effectively to reports of child abuse**
- **collects information to ensure children are protected and offenders held accountable**
- **keeps the needs of victims and their families at the forefront of investigations**
- **connects victims and families to necessary medical, therapeutic, and legal services**

DIRECT SERVICES TO PATIENT & FAMILIES

Forensic Examinations—The Northern California region is home to only four board-certified, practicing child abuse pediatricians, of whom one is on staff at CCP. These uniquely skilled physicians provide inpatient medical consultations, outpatient forensic medical examinations, legal consultation, and witness testimony.

As the region's designated site for pediatric forensic sexual abuse evaluations, CCP operates a specialized response team to address the specific needs of victims of acute sexual abuse. The team responds immediately to all cases treated in the emergency department and is available 24/7. The team:

- Conducts all of the non-acute forensic sexual abuse exams for children under 18 residing in Alameda County
- Provides inpatient medical consultation for all cases concerning potential abuse
- Consults with all investigating agencies in Alameda County
- Delivers expert witness testimony in court

Crisis Assessment & Intervention—CCP's clinical social workers serve as the 1st responders to child abuse cases in the emergency department, responding to immediate physical, emotional, and legal needs of victims of child abuse. The collaboration of CCP social work staff and Social Services allows for around-the-clock social worker availability.

Psychotherapy Services—CCP provides trauma-informed psychotherapy services to children, youth and families impacted by child abuse and/or exposure to violence. Psychotherapy services incorporate culturally-attuned approaches to stabilize and mitigate the short and long-term impacts of adverse childhood experiences. Child and youth victims receive specialized intervention to enhance their ability to participate in the criminal justice process. Psychotherapy specialty services include:

- **Domestic Violence Education and Screening (DOVES):** DOVES is a pioneering program that focuses on the co-occurrence of domestic violence and child abuse. Based at the Alameda County Family Justice Center, the project provides individual and group psychotherapy to children, youth, and their non-offending caregivers who have experienced domestic violence.
- **Parenting After Trauma:** Support and guidance group for parents whose children have been exposed to sexual abuse, physical abuse, or domestic violence
- **Formations:** Psychoeducation group for adolescents focusing on sexual health and healthy relationships
- **Family Builders:** Multi-family psychotherapy group to learn coping skills

Center for the Vulnerable Child

The Center for the Vulnerable Child (CVC) provides medical care, psychotherapy, and social services to approximately 3,000 children and young adults each year living in situations that put them at risk for educational, physical, mental or social health problems. Patients include foster or homeless youth and those with a history of abuse, neglect, or exposure to drugs. To reduce barriers to delivery, services often occur in the caregiver's home or in another location within the community. The CVC is also responsible for running the Federally Qualified Health Center (FQHC) Consumer Advisory Board (CAB), which is composed largely of parents of children who have used FQHC services. The CAB provides feedback to ensure the best possible patient care.

DIRECT SERVICES TO PATIENT & FAMILIES

Child and Adolescent Therapeutic Services (CATS)— The CATS program provides comprehensive mental health services to youth living with their legal guardians, whose special medical needs and concurrent mental health issues threaten to overwhelm family resources, placing them at risk of involvement from the Department of Children and Family Services. Most services are provided in the family's home or at school.

Services to Enhance Early Development (SEED)—SEED is a long-standing collaboration among the CVC, Alameda County's Department of Child and Family Services (DCFS), and Alameda County Public Health Department to provide services to children ages 0– 3 who are dependents of the court. The SEED team consists of infant/early childhood mental health practitioners, developmental specialists, family partners, child welfare workers, and parent advocates working together to provide developmentally sensitive services to these vulnerable children.

Help Me Grow (HMG)—HMG serves young children from birth to age 6 in the Family Reunification program of Alameda County's DCFS. With expertise on the impact of trauma on young children, HMG provides initial developmental assessments and consults with child welfare workers and caregivers to identify the mental health, developmental, and relational needs of children.

Encore Medical Clinics—Encore Medical Clinic provides a medical home for children up to age 19 who are homeless or living in transitional housing, and connects them with specialty and dental care. Encore Medical Clinic is the only child-focused clinic of its kind in the East Bay.

Family Outreach and Support Clinic—This clinic provides primary care for children 0 to 12 years of age who are currently in or have been in foster care

Successful Preschool Adjustment and Readiness for Kindergarten (SPARK)—SPARK promotes successful adjustment to preschool and readiness for kindergarten aged children in transitional living situations. SPARK works, both individually and in groups, with children who are identified by preschool teachers as having behaviors interfering with school participation and peer relationships. SPARK provides assessments of child behavior, parent-teacher consultation, and one-on-one individualized child intervention to improve social skills.

Behavioral Health Integration (BHI) and Pediatric Psychology Program (Triple P)—The BHI program and Triple P increase access to mental health support for children and youth seen in Children's Primary Care and Adolescent Medical Clinics. The clinicians evaluate patients' mental health needs, helping medical staff address the psychological, psychosocial and cultural factors that may be barriers to getting treatment. Services range from brief treatment in the clinic to longer-term mental health intervention using a home-based community service model.

School Based Clinics: Behavioral Health Program— The school-based clinics at McClymonds and Castlemont High Schools integrate medical and behavioral health care to support the health and wellness of adolescents and young adults attending the schools or living in the area. The CVC provides behavioral health services including crisis intervention and individual, family, and group psychotherapy. In addition, each site's behavioral health team participates in coordination of services with Oakland Unified School District staff. Program staff also offer mental health consultations for educators and parents on nutrition, self-care, healthy lifestyles, conflict resolution, reproductive health, and substance abuse prevention.

PATIENT EDUCATION

Foster Parent Support and Education—This weekly educational program is open to all foster parents in the community seeking education and support as they navigate the foster care system and raise children who may be affected by complex trauma.

PROFESSIONAL & ACADEMIC DEVELOPMENT

Services to Enhance Early Development (SEED) Consultation Project—Child welfare workers, police, and public defenders learn about infant mental health and the needs of young children in the welfare system, through interactive consultation.

Practicum Training Programs—CVC offers training for graduate students in the fields of counseling, infant development, social work, and psychology. Students receive weekly supervision and attend case conferences, team meetings, seminars, and didactic trainings.

Training and Workshops—CVC offers training and workshops to community providers serving children and families involved in the foster care system. In 2018, the CVC offered a wide range of trainings from “Culturally Responsive Care” to “Law and Ethics in Psychotherapy.” Continuing education credits are available.

Early Intervention Services

Early Intervention Services provides therapeutic intervention, case management, child development care, and family support services for infants and young children ages 0–6 with emerging developmental, medical, and social-emotional difficulties, as well as exposure to toxic stress and trauma. These services are family-driven, relationship-based, and trauma-informed. A multidisciplinary staff delivers these services at homes, school sites, community-based locations, and a clinic in Jack London Square. Each year, more than 500 families utilize these services, and many more children are reached with training and consultation activities.

DIRECT SERVICES TO PATIENTS & FAMILIES

Neonatal Follow-Up Programs

- **Special Start Home-Visiting Program:** Special Start offers developmental, medical, and psychosocial case management to approximately 225 children per year who are graduates of a Neonatal Intensive Care Unit (NICU), residing in Alameda County, and have complex medical conditions and/or social risk factors. Participants ages 0– 3 receive weekly to monthly home visits by a coordinated team of nurses, developmental specialists, and mental health specialists. This program also includes two parent-support groups for Spanish-speaking families of children with disabilities.
- **High-Risk Infant Follow Clinic (HRIF):** The HRIF program provides developmental assessments and health services for California Children's Services (CCS)-eligible children who are at high risk for neurodevelopmental delay or disability. A multidisciplinary team, over the course of three or more visits, provides neurodevelopmental assessments and case management services for infants and children up to 3 years of age whose care was provided in a CCS-approved NICU. The clinic serves approximately 200 children annually.

Parent-Infant Program (PIP)

- **Local Early Access Program (LEAP):** LEAP, serving 27 children and families, is designed for infants up to age 3 who have developmental disabilities. Program components, offered in English and Spanish, include a parent-child play-based intervention group, home visits focused on developmental intervention, and parent support.

Early Periodic Screening Diagnosis and Treatment (EPSDT) Mental Health Programs—EPSDT mental health programs are designed for children 0–6 with behavioral, emotional or relational difficulties due to trauma, family disruption, or complex medical and developmental histories. Services include comprehensive assessments, home-based therapeutic intervention, and therapeutic parent-child groups. All mental health services are relationship-based, developmentally informed, and inclusive of caregivers. The particular EPSDT programs are the:

- **CARE Early Childhood Mental Health Program:** provides home-based therapy for children with severe trauma or other complexities, and their families.
- **FIRST Perinatal Drug Treatment Support Program:** provides therapy for families where drug use and/or incarceration has disrupted the parent-child relationship.
- **Therapeutic Guidance for Infants and Families (TGIF):** provides group and individual therapy to children and their families who have experienced disruption due to involvement with the criminal justice and child welfare systems.
- **Fussy Baby Program:** providing help for young infants with crying, feeding and sleeping difficulties.

In 2018, approximately 125 children were enrolled in these programs.

PROFESSIONAL & ACADEMIC DEVELOPMENT

Irving B. Harris Early Childhood Mental Health Training Program—EIS administers the only infant and early childhood mental health training program in Alameda County. The program expands the knowledge base and skills of providers for addressing the social/emotional development and mental health needs of young children. This includes a focus on training designed specifically for family support professionals such as, family partners, navigators, and advocates for families. Additionally, the Reflective Facilitators in Training program supports a culturally and ethnically diverse group of professionals designed to increase capacity for leadership within their agencies. A learning community model is also used to develop cross disciplinary cohorts of service providers around particular topics, including trauma. Over 250 professionals have completed the program.

- **EIS Consultation and Training Team:** EIS provides technical assistance and consultation services to numerous community and public county agencies as well as Early Head Start/Head Start programs each year. In addition to offering embedded site case consultation for agency staff and supervisors, EIS mental health and developmental consultants offer content and process training.
- **Advanced Practice Issues in Early Childhood Mental Health Training Series:** Funded by a Title IV-E grant, EIS offers an annual training series, free of charge, for Alameda County providers serving babies and young children at risk for entering the child welfare system.
- **Infancy and Early Childhood Mental Health Consortium: Building and Sustaining a Regional and National Workforce for Immediate and Long-Term Impact:** EIS is helping lead an early childhood mental health workforce development project targeting nine counties in California. Training and telehealth methods will increase promotion, prevention and treatment services for young children in these more rural communities.

HEALTH EQUITY RESEARCH

Early Intervention Services has a research program focusing on how trauma affects early childhood mental health, successful early childhood treatment, and issues related to supporting positive outcomes for young children with medical, developmental and social-emotional delays. Their studies include:

- **The Child Parent Psychotherapy-Health Study**, which investigates the effects of clinical intervention on young children and caregivers who have experienced violence, trauma, and loss.
- **The Home-Visiting Neonatal Follow-Up Study**, which is an evaluation of the effectiveness of a program for severely medically fragile infants at high social risk.

Hemoglobinopathy Center

Sickle cell disease and thalassemia are inherited conditions affecting hemoglobin, the protein within red blood cells required for transporting oxygen. These diseases disproportionately affect people of African and Asian descent. Children's Comprehensive Center for Hemoglobinopathies, one of the largest in the world, treats over 800 children and adults with hemoglobinopathies. Primary care, case management, and education are delivered within the specialized and complex hematology care environment necessary for optimal outcomes in chronic diseases.

DIRECT SERVICES TO PATIENTS & FAMILIES

Some children with hemoglobinopathies have access to bone marrow transplant (BMT), whereby they receive healthy bone marrow that produces normal red blood cells. BMT can cure the hemoglobinopathy disorders. Multiple options for stem cell transplant are also available to patients, including unrelated and sibling cord blood stem cells. BCHO is one of the few institutions in the US that offers gene therapy clinical trials to patients with sickle cell or thalassemia. For medical reasons, children who receive a transplant must live within a 20-mile radius of the hospital for 100 days after transplantation. Families living further may stay at the **Blood and Marrow Transplantation (BMT) House** at no cost. Conveniently located just one block from the hospital, the BMT House can accommodate two families at a time.

This year an expanded effort was undertaken to achieve improved mental health outcomes for patients with sickle cell anemia and oncology. In partnership with psychologists, a patient navigator, mental health interns and the expansion of neurocognitive testing, critical patient needs are being addressed via a multidisciplinary team approach. This team joins our staff of physicians, advanced practice providers, nurses, social workers and administrative support staff in providing truly comprehensive health care to our patients.

FAMILY EDUCATION AND SUPPORT

Thalassemia Outreach Program—The Thalassemia Outreach program engages in patient and community outreach through newsletters, educational handouts in multiple languages, booklets, videos, and presentations, and a website (thalassemia.com).

Thalassemia Support—Thalassemia social workers regularly meet with patients and families individually and in groups to discuss compliance, morbidity, diet, exercise, and the impact of the disease on their mental health and personal relationships.

Sickle Cell and Thalassemia Holiday Parties—Sickle Cell and Thalassemia Outreach teams plan annual holiday parties for patients and families each December. Hundreds of patients, families, and guests attend these events—which include food, games and music—to foster community support for affected individuals.

Sickle Cell Support—Children's Hospital offers a support group for patients and families with SCD, and a holiday party for the pediatric program, and a summer camp, Camp Superstar, which was attended by 33 patients and their siblings this summer. Children's Hospital also partners with the State of California and Centers for Disease Control to increase awareness and advocacy.

Normal
Red Blood Cell

Sickle Shaped
Red Blood Cell

PROVIDER EDUCATION AND ADVOCACY

Health Education and Liaison Program for Sickle Cell Disease "HELP-SC"—The Center began a pilot project, Health Education and Liaison Program for Sickle Cell (HELP-SC) to train health providers from high-risk areas in the management of sickle cell disease. Four attendees from California and Nevada attended the first HELP-SC Adult Boot Camp held at Children's Hospital in May 2018. After the training, attendees received remote video support and follow-up. The goal is to have three boot camps per year.

California Sickle Cell State Action Planning Initiative—More than 50 individuals with SCD, family members, experts, community organizations, and other partners met to create the first-ever California Sickle Cell State Action Plan. The goal of the plan is to create a roadmap to transform health care delivery, access to care and cost-effectiveness of care for Californians with SCD.

HRSA Pacific Sickle Cell Collaborative—In 2018, Children's Hospital and Children's Inherited Blood Disorders (CIBD) hosted physicians and nurses from the grants' collaborative sites in the Western states including a two-day workshop discussing standards of care, project goals and timelines. The Pacific Sickle Cell Regional Collaborative has now expanded to 13 states.

Thalassemia Western Consortium—The HRSA and CDC funded Consortium again met in 2018 in San Diego for the Fourth Annual Meeting. Physicians, nurses, and social workers from the 11 grant sites in the Western states along with federal partners from CDC, met to discuss standards of care guidelines, project goals and timelines. These guidelines will become available on the CDC website. The Thalassemia Center has received continuous support from HRSA to improve access to care for transfusion-dependent thalassemia in the western region. The center collects data on implementation of expert-recommended management guidelines in the region and the increase in number of patients receiving care through the specialty centers.

HIV/AIDS Program

Children's Hospital Pediatric HIV/AIDS program (PHAP), established in 1986, offers comprehensive care to children, youth, and their families who are living with or exposed to HIV/AIDS. Since HIV attacks the immune system, it is critical for infected individuals to begin early medical treatments with combinations of specific medications to improve their quality of life and survival. For most individuals, HIV/AIDS is a chronic condition that can be managed for decades with proper treatment and consistent adherence to medication regimens.

DIRECT SERVICES TO PATIENTS & FAMILIES

HIV/AIDS Clinic—Children's Hospital emphasizes retention in care and adherence to medications in order to suppress a patient's HIV to undetectable levels in the blood. In 2018, 46 patients were followed in the clinic, and currently 96 percent of those have undetectable blood-HIV levels. Assistance is also provided to patients transitioning from pediatric to adult care. 80 teens and young adults have graduated into youth or adult HIV programs since 2001.

Advances in the prevention of mother-to-child transmission of HIV have dramatically decreased the infant infection rate in the United States. However, other countries impacted by HIV/AIDS still struggle with this pandemic, and PHAP continues to see families who immigrate to the United States for whom HIV may be a new diagnosis. International adoption accounts for over half of the hospital's current population of children with HIV infection, and PHAP offers pre- and post-adoption education and services for affected families.

Hope Clinic—Through collaboration among programs in the Family Care Network (FCN), it is possible to identify pregnant women infected with HIV, provide them with care during their pregnancies, and ensure their babies get proper treatment. Infants born to mothers with HIV are monitored for the disease over four to six months by Hope Clinic staff until the possibility of HIV infection has been excluded. Since 1996, over 520 infants have been cared for in the Hope Clinic, none of which have been infected with HIV. In Alameda County, there have been no new infected infants since 2007.

Sexual Assault and Needle Stick Exposures—The team provides preventive services, support services, and education for children at risk of acquiring HIV due to sexual assault or needle sticks Approximately 10 to 20 child victims are treated by our clinicians every year. Since 1997, PHAP has cared for 205 patients exposed to HIV; when returning for follow-up services, none of the patients acquired the virus.

HIV Opt-Out Testing—Children's Hospital offers universal, opt-out HIV testing as part of routine care for all patients 13 years of age and older to comply with recommendations from the Centers for Disease Control. Since the program began in 2014, Children's Hospital has identified eight newly infected youth, a high proportion of whom have had acute HIV infection, meaning, the infection was newly acquired and they were at high risk of spreading HIV to unsuspecting partners.

PATIENT EDUCATION

HIV/AIDS program staff host an annual holiday party as well as facilitates social events for patients and families, including adolescent and parent support groups. In addition, we have a close partnership with Camp Sunburst and a number of HIV-specific camps for children, youth, and their families in Northern and Southern California. The camps enable patients to meet other children and youth with HIV, learn skills and coping mechanisms, and experience reduced levels of isolation.

PROFESSIONAL & ACADEMIC DEVELOPMENT

Program Staff work to educate the community, foster parents, teachers, community providers, and patients' schools about pediatric HIV/AIDS issues through presentations and seminars. A mini-residency program is offered to educate physicians, nurses, and social workers interested in increasing their clinical and psychosocial knowledge about HIV/AIDS. In addition, clinical expertise is shared with medical delegations from countries severely affected by the AIDS epidemic. Medical teams including doctors, nurses, social workers, and public health/government representatives from Côte d'Ivoire, Thailand, Nigeria, and Tanzania have participated in this program.

Psychology-Oncology Program

The cancer program at Children's treats hundreds of children and young adults each year suffering from diseases like leukemia, lymphoma, and brain tumors who. These children undergo treatments for years or even a lifetime. Many children with cancer as well as their families experience mental health challenges, such as depression and anxiety. Due to medical advancements over the last few decades, most children with cancer now survive until adulthood, but may continue to suffer cognitively and emotionally even after remission. Children's Psychology-Oncology program, the only program of its kind in the Bay Area, provides specialized care to address the special social and emotional needs of children with cancer and their families, from diagnosis to resolution.

DIRECT SERVICES TO PATIENTS & FAMILIES

Short and Long-Term Mental Health Therapy— A multidisciplinary team of professionals provides individual psychotherapy, play therapy, stress management, and behavioral modification techniques in order to give emotional support and hope to children with cancer along with their siblings and parents. The Survivors of Childhood Cancer program, which is implemented in coordination with various specialists, provides psychological services to pediatric cancer survivors who have completed treatment two or more years prior. Program participants receive information, guidance, and referrals regarding their medical, economic, and psychosocial needs as they progress into survivorship and adulthood. In 2018, 150 children, both current cancer patients and survivors in remission, received psychotherapy through the program.

EDUCATION AND OUTREACH

School and Social Reintegration— Not only are pediatric cancer patients' school attendance and social interaction affected by their condition and treatment, their cognitive development may also be impaired. The Psychology-Oncology team provides neuropsychological assessments, school presentations, and individualized advocacy for children who have been absent from school or who have cognitive challenges due to cancer treatments.

Teen and Young Adult Cancer Support Group— The Teen and Young Adult Cancer Support Group is a safe place where teens and young adults ages 13 to 21 can connect to find support, resources, and hope while dealing with a cancer diagnosis and the long-term accompaniments of survivorship.

IX. Family Services and Education

Center For Nature and Health

Evidence suggests that natural settings has physical and psychological healing properties, but for various reasons many children do not have access to nature. Children's Center for Nature and Health's (CNH) goal is to ensure all children have access to nature. CNH accomplishes this mission by:

- Conducting clinical research on the impact of nature on health.
- Running a program called **Staying Healthy in Nature Every Day (SHINE)**, a collaboration with the East Bay Regional Parks District which brings low income children at Children's Hospital to the local parks for guided walks and other activities.
- Developing training modules for physicians on the relationship between nature and health.
- Serving on multidisciplinary advocacy collaborations in the Bay Area.

In 2018, CNH held a one-day training for clinicians, community members, and more than a dozen partners all in service of improving health equity and well-being in the East Bay. CNH's randomized trial on "park prescriptions" for stress relief in a low-income clinic was published in PLOS ONE. Also, CNH's interdisciplinary advisory team met in April 2018 and included advisors from Oakland City Parks, East Bay Regional Parks, the National Park Service and San Francisco City Parks, as well as local environmental justice organizations such as Urban ReLeaf and Youth Outside.

Child Life Services

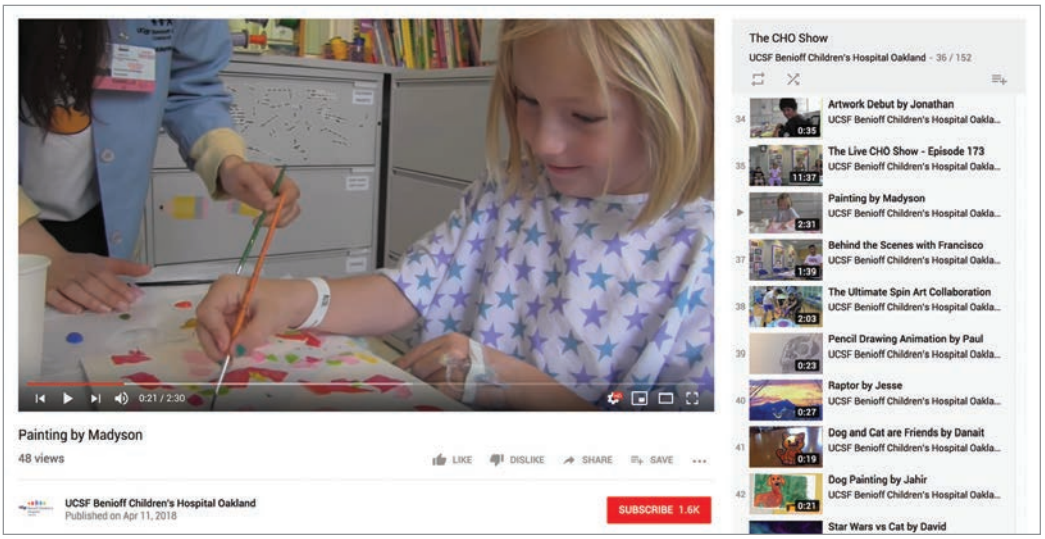
Child Life Services creates opportunities for infants, children, teens, and young adults to learn, play, and creatively express emotion during treatment or hospitalization. The experiences patients have when undergoing surgery, going through diagnostic testing, or receiving a life-limiting diagnosis are all too common, and hugely overwhelming. Child Life Services ensures patients' emotional, social, cognitive, and developmental needs are cared for during their visits to a clinic or stays in the hospital. Certified child life specialists provide therapeutic care to prepare children for procedures, engage patients and families in diagnosis education, and introduce supportive coping skills and comfort measures to master hospitalization, illness, and injury. These interventions help minimize stress, supporting patients now and in the future as they face challenging life events.

DIRECT SERVICES TO PATIENTS & FAMILIES

Jared Kurtin Music Therapy Program—Established in 2008, the Jared Kurtin Music Therapy program employs three board-certified music therapists who provide services throughout the hospital for infants, children, and families. Music therapy is a clinical and evidence-based modality proven to help alleviate pain, reduce trauma, promote physical rehabilitation, support patients' coping skills, alleviate stress, anxiety and depression, stabilize heart rate and blood pressure, and support cognitive and communication skills. The music therapy program is also a training site for graduate-level music therapy students.

Artist-in-Residence Program—The Artist-in-Residence program at Children's Hospital offers creative-arts programming in the hospital classroom, teen lounge, oncology playroom, and infusion center. Children's artists work with patients in groups or in individual bedside visual- and digital-art sessions. In weekly sessions, patients are encouraged to socialize with peers and share their creative projects with the hospital community.

The CHO Show—The CHO Show is a live, interactive TV program broadcast into each patient's room through a closed-circuit television channel. On The CHO Show, patients and families can participate in games, guess at trivia, tell jokes, share advice, and display art or original videos for the entire hospital. Children who cannot leave their rooms have the ability to interact with the CHO show through their hospital room TVs. The CHO Show promotes positive socialization, enabling all patients to contribute their unique viewpoints and experiences. The CHO Show playlist can be found on the hospital's YouTube channel: www.youtube.com/playlist?list=PLLndO3CVvTfJ6Lv1yduB5f3GXUBPO1dvM



Hospital School Program—In partnership with the hospital, the Oakland Unified School District Hospital School program provides academic support for Children's inpatient population. Three general-education teachers provide both bedside and classroom support for patients enrolled in grades K–12. In addition, one special education teacher teaches students ages 3 to 22 who have Individual Education Plans. The school program follows the district's school-year calendar, running all weekdays. The program also provides a variety of enrichment activities such as art sessions, dance, video-making, and interactive science projects.

Family Resource and Information Center—The Family Resource and Information Center (FRIC) is dedicated to offering supportive services for families and caregivers during hospital stays. FRIC's bilingual staff members meet with and welcome each newly admitted patient and family in order to facilitate and guide families. The center serves as a respite and safe space for parents and caregivers so they can better care for themselves and visiting family members. Weekly support groups provide parent-to-parent networking, coffee and conversation meet-ups, group art workshops, knitting, and other wellness activities. The resources available to families include business center accommodations such as computer access, faxing, scanning, cell phone charging, and general information on local community services.

Family Information and Navigation Desk (FIND) & FINDconnect®

Approximately 40% of differences in health are due to social factors, yet these social factors are not traditionally addressed by physicians due to lack of training, time, and incentive. FIND was created by a Children's Hospital pediatrician to assist providers with addressing basic social needs of lower-income families with children. The program allows providers to quickly identify and prioritize basic needs in the child's life and refer the family to community resources to address those needs. Children's Hospital's primary care clinic uniquely considers these social determinants of health to be vital signs, and assessed at all visits along with blood pressure, heart rate, height and weight. To date, over 1,000 families at Children's Hospital's primary care clinic have received services through FIND.

The FIND Team

FINDconnect is a software application created to automate FIND services to help health and service providers address basic needs of lower-income children. FINDConnect allows providers to quickly prioritize a family's basic needs to connect them to local resources that can help resolve those needs. FINDconnect is now available to any provider Children's Hospital and over 100 medical residents have been trained to use it.

In 2018, FINDconnect began the process of scaling beyond Children's Hospital when it became licensed at a clinic in New York. The Department of Community Health and Engagement is currently negotiating to spread FINDconnect to three additional clinics in Alameda County in 2019, and then more after that.

SOCIAL DETERMINANTS OF HEALTH

Poor health outcomes in children are driven more by social, economic, and environmental factors than by genes, behavior, or access to healthcare. The World Health Organization defines the social determinants of health as the circumstances in which people are born, develop, live, and age. Traditionally, however, addressing these social determinants of health has been outside the scope of medical practice.

Examples Include:

- Income
- Education
- Housing
- Food Security
- Employment
- Job Security
- Race/Ethnicity
- Legal Status
- Work Conditions
- Violence
- Outdoor Space
- Abuse/Neglect

Injury Prevention Program

The Injury Prevention Program (IPP), administered by Children's Trauma Services, aims works to reduce the number of unintentional accident-related injuries and fatalities in children through education and by providing equipment to promote safety. The Childhood Injury Prevention Network–Bay Area (CIPN–BA), founded and chaired by the IPP coordinator, is a multidisciplinary group of individuals and agencies who share a passion for a safer world. CIPN–BA is committed to a leadership role in improving the lives of children through building awareness of children's injuries as a public health priority, and through influencing legislation.

PATIENT EDUCATION

Child Passenger Safety—The Keeping Children Safe from Injury booklet is distributed to over 15,000 families each year; the booklet provides car seat safety guidelines and education on various types of injury prevention. Families receive additional car seat safety information in the Parent Handbook called "Driving Home."Every baby in Children's NICU is evaluated for a car seat, and their family must have an appropriate child passenger restraint prior to discharge. When requested by the Rehabilitation Department or NICU, children with special needs receive an assessment for a safe discharge home. When a parent lacks resources, a suitable car seat may be provided at no cost. There is also a Spica Car Seat & Vest loaner program for children discharged in Spica casts. Beyond the hospital, IPP conducts car seat check-ups in the community. A Car Seat Inspection Station is operated monthly.

Home Safety Improvement Program—The Home Safety Improvement program promotes active supervision among parents to keep children safe from accident-related injury. Families receive a wide array of safety devices including window guards, bathtub thermometers, cabinet latches, outlet protectors, and furniture corner cushions.

Helmet Program—Helmets, along with the appropriate education, are distributed in the hospital to children who don't own a helmet or have one that is damaged. Helmets are also distributed at community health and safety events.

Text OUCH to 30644—OUCH is a text campaign that provides safety tips to caregivers of young children. Subscribers receive health and safety text messages each month in English or Spanish. The National Association of Pediatric Nurse Practitioners named it a "Best Practice Tool."

The Prevention of Shaken Baby Syndrome Program (PURPLE)—PURPLE is a program used in the NICU through an agreement with the National Center on Shaken Baby Syndrome. It educates parents and caregivers about normal infant crying and the dangers of shaking an infant. Parents receive either a DVD or a special code to download a phone application along with informational handouts.

Safe Infant Sleep Environment Program—All NICU parents are educated on how to create a safe sleep environment for their infant to prevent Sudden Unexpected Infant Death. Every baby discharged from the NICU receives a sleep sack and cribs are provided based on financial need. Safe-sleep education is provided to every family with an infant less than one year of age.

Medical Social Services

Over 70% of patients at Children's receive Medicaid. Many families have complex non-medical needs which can impact their medical care. Medical social workers assess and address the social, economic, and psychological barriers that patients and their families experience ; many of whom these families are adjusting to a new diagnoses, requirements of chronic conditions, or catastrophic injuries. Social workers consult with physicians, clinicians, community agencies, patients and their families in both inpatient and outpatient settings.

DIRECT SERVICES TO PATIENTS & FAMILIES

On-Call Medical Social Work Services—Social workers at Children's Hospital provide on-call services 24/7 days per week. Specific services include:

- Supportive counseling
- Crisis assessment and intervention
- Referral for concrete services, including lodging, transportation, and meals
- Referral to community resources
- Case management and advocacy
- Brief individual therapy, family therapy, and group treatment

Spiritual Care—The hospital chaplain provides spiritual care and emotional support to patients, their families, and staff—especially as they experience the uncertainty of illness, facing loss, or dealing with trauma. The chaplain provides support to people of all faith perspectives and traditions, including those who identify as spiritual but not religious and those who do not have a faith or spiritual practice. Spiritual care services include:

- Direct care to patients and families dealing with illness, trauma, and loss
- Contact with a patient's or a family's faith leader and/or faith community as needed
- Collaboration with the interdisciplinary medical team
- Advocacy in helping to articulate a patient's or family's needs
- Faith-based rituals

Interpreter Services—Children's Hospital offers qualified medical interpreters 24/7, in 62 languages, free of charge to patients and their caregivers with limited English proficiency or who are deaf or hard of hearing.

Holiday Donation Program—During the winter holidays, medical social workers identify families with limited resources and connect them with community agencies, hospital staff, and private donors who provide them with holiday gifts. In 2018, 75 families qualified to receive Safeway gift cards towards turkeys and trimmings. As a result of the holiday donation program, approximately 200 children received gifts that their families would not otherwise have been able to afford.

PROFESSIONAL & ACADEMIC DEVELOPMENT

Internships—The Medical Social Services department has a long history of affiliations with six graduate schools of social work. From August to June, the department hosts approximately 10 graduate students in the final year of their Master of Social Work program; the interns integrate what they're learning in school with their clinical practice.

Fellowships—The Medical Social Services department offers advanced clinical training and supervision for postgraduates with a Masters of Social Work degree in a year long Medical Social Work Fellowship program. The fellows are integral members of the multidisciplinary outpatient medical team, providing family-focused services to children, adolescents, and young adults diagnosed with medical conditions both acute and chronic.

Complex Pain and Palliative Care Program

Established in 2011, the Palliative Care program (also known as the Palliative Care Team, or PACT), aims to improve the quality of life of children and their families by focusing on pain management as well as other physical, emotional, social, and spiritual needs. Working in collaboration with the child's main health care providers, palliative care ideally begins at the time of the diagnosis of a serious condition and supports the family's goals for the future.

DIRECT SERVICES TO PATIENTS & FAMILIES

The PACT team is available for consultations on an inpatient and outpatient basis and can help with advanced care planning, decision-making, care coordination, pain and symptom management, and anticipatory and post-death grief support. In 2018, the team saw 180 children in various stages of their disease process. 2018 also saw the addition of a new member to PACT—a specially-trained Golden Retriever named Sundance. The addition of **pet therapy** has benefitted patients, family members, and staff alike. Sundance provides affection and a distraction from the sometimes challenging reality of the hospital and being sick; he makes difficult conversations a bit easier and helps with pain, stress, and anxiety.

PROFESSIONAL & ACADEMIC DEVELOPMENT

The Palliative Care team provides ongoing education about pediatric palliative care locally, nationally, and internationally. In 2018, the team hosted two well-conferences on the intersection of ethics, critical care,and palliative care. Additionally, the PACT team provides rotations and internships for students of multiple healthcare disciplines and continues to present at meetings and conferences throughout the year.

FAMILY SUPPORT SERVICES

Reflection Room—The Reflection Room is actually a suite of private rooms dedicated to the care of an imminently dying children or the child who has passed away. The private space allows families the gift of time to say goodbyes, while also allowing for cultural and religious traditions and more family control over the moment. If a family spends time in the Reflection Room, the PACT team is often present to support the family's needs, assist with engaging a mortuary, etc.

Bereavement Packets—Most families are given a customized bereavement packet with resources local to the family's community, as well as information pertinent for families who have children in the household/family. PACT also makes referrals to support groups, but is currently in the process of developing its own support groups for CHO families.

Day of Remembrance—Since 2012, the team has held an annual Day of Remembrance ceremony which takes place in early December. In response to family feedback, the Day of Remembrance will be held in Spring, starting in 2019. This is a day when hospital staff and families come together to remember and honor their deceased children throughout the years. Memory-making art activities and time for community precede the candle-lighting and procession to the main ceremony where families are able to share a few words about their child if they wish.

Art-Felt Memories—Quarterly, the program hosts Art-Felt Memories, a workshop coordinated by our Bereavement Coordinator in partnership with the Art for Life Foundation. The workshop allows families to share memories of their deceased child as they create memory boxes to take home. Each member of the family gets to make their own memory box.

Sports Medicine for Young Athletes

Children's Sports Medicine Center for Young Athletes is a specially designated facility for the care, treatment, and education of young athletes. Since Because growing bones and cartilage—unlike those of a skeletally mature adult—are more susceptible to injuries, young athletes should be managed differently than older athletes. Children's has developed a one-of-a-kind resource for sports injury care, prevention, and education.

PATIENT EDUCATION

Staff from the Sports Medicine Center for Young Athletes are active in the community, providing services at no or below cost. They serve as athletic trainers at 17 local high schools and attend all seven Oakland Athletic League football games and sports championship games. The Center is also a resource for the North Coast Section of the California Interscholastic Federation and provide on-site athletic trainers at all North Coast Section high school championship events. The athletic trainers work with young athletes to not only manage acute injuries, but also provide individual education and group seminars to prevent sports injuries.

PROFESSIONAL & ACADEMIC DEVELOPMENT

The Sports Medicine Center for Young Athletes facilitates community education and outreach to medical professionals (and the general public) through annual medical conferences, pro bono monthly community lectures, and health and safety workshops specifically for young developing athletes. Each year, specialists participate in more than 30 lectures and workshops across Alameda and Contra Costa Counties.

X. Academic and Professional Development

CHAMPS

The Community Health and Adolescent Mentoring Program for Success (CHAMPS) offers educational interventions to help high school students of racial and ethnic minority populations explore health care professions, so that these professions eventually become more representative of California's diverse population. The long-term goal of CHAMPS is to improve health care access and reduce the health disparities present in today's society. CHAMPS partners with local high schools, health academies, universities, medical schools, and residency programs as part of a health professions pipeline.

HIGH SCHOOL STUDENTS

Clinical Internships and Health Careers Training Program—Each year, over 90 high school students from the Oakland and Berkeley public school systems participate in a three year healthcare research internship program. There are four core program components: clinical internships, which let student scholars rotate to different areas of the hospital and gain experience working in the health care field; academic enrichment, which provides students with SAT and college preparation and career planning; psychosocial services, which offers case management and counseling for students; and youth leadership development.

In 2018, CHAMPS graduated 33 scholars. Of these, all completed high school, and all began college in the fall of 2018. Alumni of the program have also returned to support current students through panel discussions and encouraging them during college transitions. In 2018, CHAMPS graduates received significant scholarship awards including a program record of ten recipients of the East Bay College Fund, two recipients of the Making Waves College Alumni Program and the Berkeley Community Fund (both 4-year scholarships), one recipient who received full tuition at Holy Names University, and one recipient of Students Rising Above; which provides scholarships and five years of mentorship beginning their junior year of high school and continuing on through college. Collectively, the CHAMPS class of 2018 received more than $250,000 of financial support.

Students from the three-year Clinical Internships and Health Careers Training program also receive training to become peer health leaders. They deliver health lessons to fellow students, focusing on mental health and conditions that are more prevalent in under-resourced communities. Students practice their public speaking skills while developing original presentations to engage their peers.

2018 CHAMPS Graduates

COLLEGE STUDENTS AND ALUMNI

Career and Leadership Development Programs—In 2018, CHAMPS provided 42 pre-health alumni and local minority college students with career guidance and professional development through the CHAMPS Leadership and Career Development Trainings. The trainings provided critical support for alumni and local college students preparing to navigate their next steps towards health professions by focusing on developing professional and strategic planning skills. In doing this, the students learned how to better utilize social media applications and communicate their skills on resumes, cover letters, in personal pitches, and financial literacy. The skills to meet requirements of today's job market and career development are often not taught in the classroom; but especially for current students and recent graduates, these skills are critical to continue on the pathway towards health professions. CHAMPS also partners with Health Careers Connection (HCC), a national program that helps college students gain summer internships in public health settings.

CONNECTING THE PIPELINE

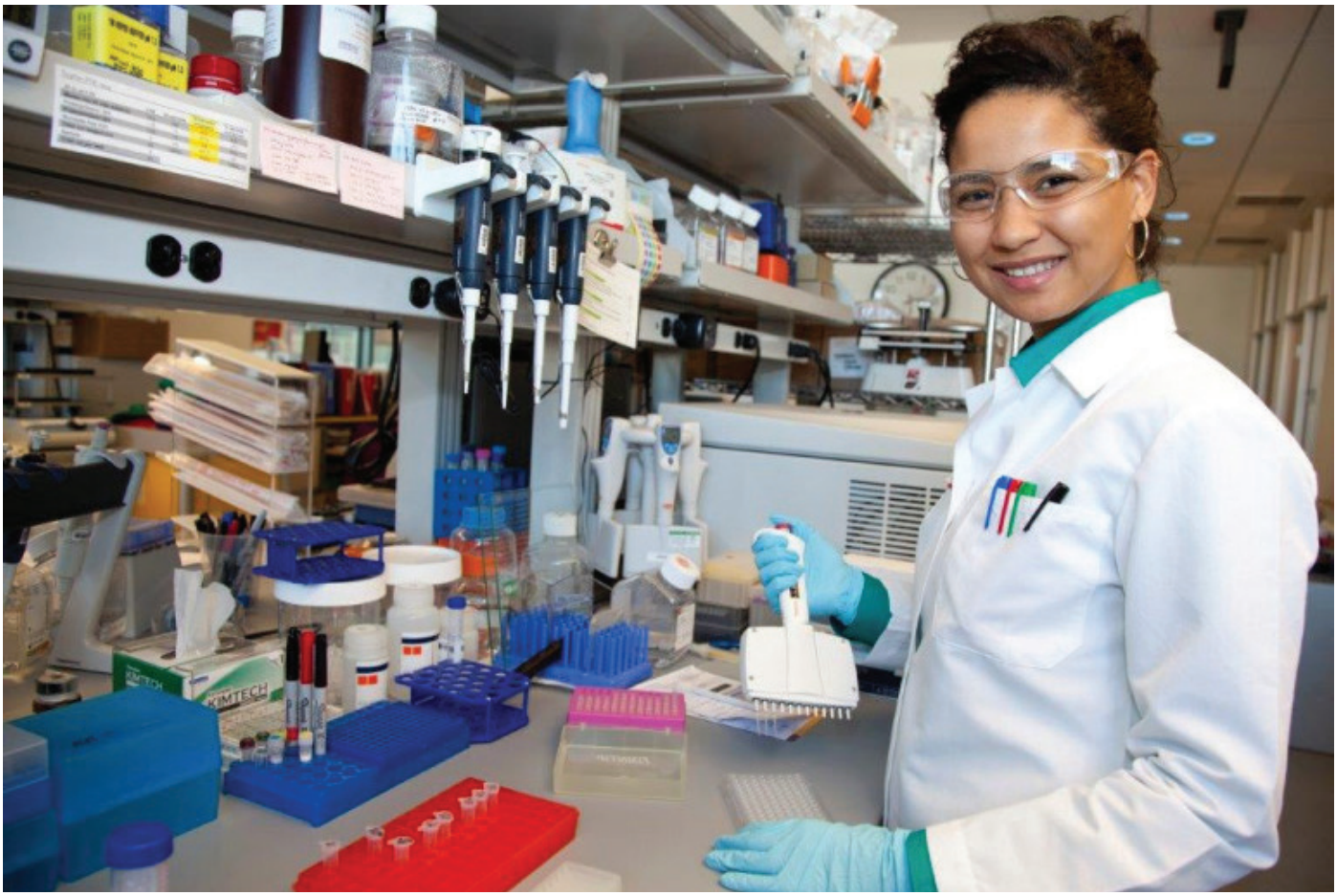
CHAMPS Student-to-Student Network—CHAMPS partners with the Health and Medical Apprenticeship program at UC Berkeley (UCB), the nursing department at California State University East Bay (CSUEB), and the President's Ambassador Program at Samuel Merritt University (SMU) to bring together CHAMPS students with a wide variety of college students studying different health focuses. UCB students serve as mentors and role models; they conduct academic and college preparatory advising, as well as lessons on a number of health topics. Nursing students from CSUEB participate in developing a series of workshops to engage high school students in learning about stress management and healthy lifestyles. Since 2012, CHAMPS has annually hosted SMU students (i.e., candidates pursuing careers in nursing, podiatric medicine, physician assistant, physical and occupational therapy) in a college and career preparatory workshop providing mentorship and guidance on various pathways. These partnerships serve to provide opportunities to build direct connections between high school students and students in the next step of their health careers.

CHORI Summer Student Research Program

The Summer Student Research Program was founded in 1981 to increase diversity in biomedical sciences by providing mentored research experiences to high school and college students from underrepresented demographic groups. More than 1,000 students have graduated from the program. Since 2010, nearly half of all program participants were the first in their family to attend college.

The nine-week summer program involves placement in a research setting under the guidance of a scientific mentor, along with numerous enrichment activities. The summer experience concludes with a day-long research symposium where students present their research findings to faculty, their peers, mentors, friends, and families.

In 2018, the program celebrated its 37th year with 49 students, 20 of whom were in high school. About half performed clinical or behavioral research, while the others worked in basic science or stem cell research. Eight student interns were invited by their mentors to stay on and participate in research activities beyond their summer experience and an additional four students published their research in scientific journals.



Graduate Medical Education

Education and training are a vital part of UCSF Benioff Children's Hospital Oakland's mission. Children's prepares physicians, scientists, nurses, and technicians to be leaders in their chosen fields. Trainees and students are encouraged to remain and practice in the East Bay after they graduate.

MEDICAL STUDENTS

In 2018, Children's Hospital provided month-long training in 13 pediatric specialties for 145 medical students from medical schools across the country. Third-year UCSF medical students rotate through Children's Hospital as one of their core pediatric teaching sites, as do second-year UCSF medical students for their introduction to clinical medicine.

NURSING STUDENTS

In 2018, Children's Hospital provided pediatric nursing training to 685 nursing students from 37 schools of nursing throughout the United States. Clinical placements are made in a variety of settings, including inpatient units, preceptorships with advanced-practice nurses, administrative nursing preceptorships, and preceptorships in specialty areas such as the Emergency Department, Surgical Services, Ambulatory Services, and the Juvenile Justice Center. In addition, Children's Hospital offers two nursing scholarships; The Ava Elliot Scholarship which provides nursing school tuition support and the Ava Elliot Excellence in Nursing Award which provides tuition support for continuing education for nursing staff.

RESIDENTS & THE COMMUNITY, ADVOCACY, & PRIMARY CARE ROTATION

The UCSF Benioff Children's Hospital Oakland Residency Training program continues to be one of the premier training programs in the western United States, with 80 pediatric residents and four chief residents. As part of their required training, residents spend several months on this rotation annually, during which future pediatricians learn how to advocate for the rights, safety, health, and education of children and their families. Residents visit more than 40 community sites, with some sites receiving health eduction. In addition, residents join public health nurses for patient home visits, gaining a more complete understanding of patients' needs in the community.

With funding from the Health Resource and Service Administration, the Graduate Medical Education and Primary Care departments are expanding and enhancing the Community, Advocacy and Primary Care curriculum. Residents at Children's Hospitals are dedicated to serving populations of at-risk children and a large percentage of Children's residents go on to practice in local, often underserved, communities. Up to 40 percent of residents go into fellowship training to become pediatric sub-specialists and many stay at or return to Children's Hospital after subspecialty training.

An additional 259 residents, mostly non-pediatric, rotated through the hospital in 2018. They came to Children's Hospital for the pediatric experience in their specialty which included emergency medicine, general surgery, orthopedics, anesthesiology, neurosurgery, radiology, otolaryngology, family practice, dentistry, and urology; as well as pediatric specialties from nearby programs.

Volunteer Services

Volunteers have served at the heart of UCSF Benioff Children's Hospital Oakland since its founding over 100 years ago. In 2018, more than 400 volunteers served over 29,000 hours supporting young patients, their families, and Children's staff. Children's volunteers reflect the diversity of the surrounding community; they range in age from 16 to 90, speak more than 70 different languages, and come from all over the Bay Area.

Volunteers serve for a variety of reasons including, but not limited to giving back to the hospital as grateful patients or family member, preparing for college or graduate schools, and providing service to the community. Children's volunteers make a difference for patients, families, and staff every day. They provide art activities in the New Outpatient Center waiting rooms, greet and escort families to their appointments, staff the playrooms, read with a child at bedside, hold the most vulnerable babies, tutor patients, stock supplies, and guide families to their destinations. They also support patients and families in anticipation of the winter holidays, helping to sort and wrap thousands of toys.

The Family Advisory Council is a special group of volunteers made up of parents and family members whose children received care at Children's. They work in partnership with hospital staff to promote the family voice through dignity, respect, and information-sharing. The council serves as an advisory resource to leadership and to hospital departments, and it provides input on issues that affect the care and well-being of hospital families.

XI. Government Relations and Advocacy

UCSF Benioff Children's Hospital Oakland pursues its public policy, advocacy, and community engagement goals through a broad range of programs, services, and activities. Advocacy strategies and priority issues are to address the needs of the medical center along with the needs of the communities served. This balance is accomplished through formal government relations representation with policy makers and community leaders, as well as through advocacy and community engagement by hospital staff who serve as representatives of the institution.

COVERNMENT RELATIONS

Children's Hospital advances its advocacy efforts through personal visits with local, state, and federal elected officials and facilitates on-site hospital tours to create greater awareness of the patient-centered environment. The government relations director meets regularly with policymakers, key staff, agency department heads, and community leaders to discuss issues affecting the hospital and children's health care. Every year, the government relations director participates in "Legislative Days" with legislators to brief officials on key health-related topics and to advocate for effective policy, operational and budgetary decision-making to advance solutions to the problems affecting pediatric hospitals, and the health and well-being of children and families.

ADVOCACY AND COALITION-BUILDING

Administration executives, medical staff and other BCHO staff play an active role in advocating on local, state, and national levels. Advocacy is frequently conducted through nonprofit trade associations and professional organizations such as the California Children's Hospital Association, the California Hospital Association's Council of Northern and Central California, the national Children's Hospital Association, the California Medical Association and the American Academy of Pediatrics

From left to right: Congresswoman Nancy Pelosi; Director of Government and Community Relations Doreen Moreno; and CHO President Mike Anderson, MD

PARTICIPATION IN ADVOCACY ORGANIZATIONS

Below is a partial list of the organizations, boards, commissions, and initiatives that UCSF Benioff Children's Hospital staff participate in:

- Alameda Alliance for Health
- Alameda County Asthma Coalition
- Alameda County Child Abuse Prevention Council's Multidisciplinary Team
- Alameda County Children of Incarcerated Parents Partnership
- Alameda County Complete Count Committee (Census2020)
- Alameda County Health Workforce Pipeline Coalition
- Alameda County Help Me Grow Steering Committee
- Alameda County Hepatitis B Free Campaign
- American Academy of Pediatrics Board, California Chapter
- American Board of Pediatrics
- Berkeley Youth Alternatives
- California Adolescent Health Collaborative
- California Children's Hospital Association
- California Hospital Association, Council of Northern and Central California
- California Institute for Regenerative Medicine
- California Medical Association
- California Thoracic Society, Pediatric Committee
- California Wellness Foundation
- Childhood Injury Prevention Network, Bay Area
- Children's Regional Integrated Service System
- Coalition of Freestanding Children's Hospitals
- East Bay Economic Development Alliance
- Ethnic Health Institute
- Family Care Network Leadership Council (HIV)
- First 5 Commission, Alameda County
- Health Careers Connection
- National Association of Pediatric Nurse Practitioners
- National Association of Perinatal Social Workers
- Oakland Promise
- Oakland Thrives
- Oakland Starting Smart and Strong Initiative
- Oakland Workforce Development Board
- Pediatric Diabetes Coalition of Alameda County
- Sickle Cell Disease Advisory Committee
- Society for Social Work Leadership in Health Care
- Temescal Telegraph Business Improvement District
- Transgender Patient Care Committee
- Youth Ventures Joint Power of Authority

XII. Economic Impact

Children's Hospital's methodology for determining the economic value of the benefit to the community incorporates elements of the reporting requirements for the IRS 990 and the California Hospital Association's community benefit valuation standards. The community benefit valuation is the total net cost of charity care, undercompensated medical care, professional education, and community programs, services, and research. Any reimbursement, philanthropic support, grants, or supplemental funding has been subtracted.

ECONOMIC VALUE	FY 2018
Charity Care Free care to uninsured and underinsured patients	**$ 8,337,409**
Government-Sponsored Health Care Unpaid cost of public coverage programs, net of all government funding	**$ 190,051,337**
Subsidy to Ensure Physician Coverage for Uninsured/Underinsured Patients	**$ 44,493,496**
Health Professional Education Graduate medical education, Fellows, Nurses	**$ 6,707,226**
Subsidized Health Programs Clinical services provided despite a financial loss to the organization	**$ 8,551,490**
Community Health Services Activities or programs, subsidized by the hospital, carried out and supported for the express purpose of improving community health	**$ 6,147,997**
Research Includes research costs not covered by external sponsors	**$ 6,360,991**
Advocacy for Children's Health Issues	**Included in operations**
Subtotal	**$ 270,649,946**
Supplemental Revenue Less DSH/Supplemental Funding (SB855/SB1255), Including Measure A Less Net Hospital Provider Fee	 **$ 56,656,936** **$ 61,084,112**
Total Charity Care and Community Benefit	**$ 152,908,899**

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