Keck Hospital of USC

Annual Report and Plan for COMMUNITY BENEFIT

Fiscal Year 2012

Submitted to:
Office of Statewide Health Planning & Development
Healthcare Information Division
Accounting and Reporting Systems Section
Sacramento, California
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To whom it may concern:

This last year for the Keck Medical Center of USC has been one of great transformation. A tremendous amount of change has occurred within our organization, and as a result, we have uncovered a newfound sense of spirit and purpose – a reaffirmation of our mission to provide uncompromising, compassionate care to the people we serve.

Since our last report, our integrated academic medical center – comprised of Keck Hospital of USC, USC Norris Cancer Hospital and more than 500 faculty physicians of the renowned Keck School of Medicine of USC – has accomplished many successes. We have expanded our reach, grown our clinical offerings, and enhanced our services. We have also put in a significant amount of effort and resources into serving the greater community at large.

At the Keck Medical Center of USC, we understand the vital role we play as healers and stewards of care. We are not just a health care provider. We are leaders – role models – in wellness, which is why we are always looking for new ways to reach out to the greater community in support of healthy lifestyles. Our community benefit program is dedicated to continuing USC’s proud tradition of giving back. Through sponsorship of health-related programs and services, we are doing what we can to address the unmet health care needs of our entire Trojan family.

We thrive on a culture that puts people and their needs first. We are invigorated by opportunities to provide a comfortable environment where our patients can best heal. We are inspired every day to improve the health of our community through innovative, scientific discovery. We are dedicated to our fundamental reason for existence: to help others.

The accounts in this report highlight the continued dedication of our physicians and staff to the health and well being of all of the lives we touch – past, present and future.

Sincerely,

Scott Evans, Pharm.D., M.H.A.
Chief Executive Officer
Keck Hospital of USC
USC Norris Cancer Hospital
Mission Statement
We are the Keck Hospital of USC. We strive to be the trusted leader in quality health care that is personalized, compassionate and innovative.

- We stand for empowerment, integrity, respect, collegiality and vitality
- We commit to authenticity
- We commit to excellence in clinical care, teaching and research
You can count on us to be fully present in the delivery of uncompromising health care.

About Keck Hospital of USC
University of Southern California (USC) acquired University Hospital and Norris Cancer Hospital from Tenet Healthcare Corporation on April 1, 2009. On November 1, 2011 we introduced the Keck Medical Center of USC – a new name in world-class medicine encompassing Keck Hospital of USC (formerly USC University Hospital), USC Norris Cancer Hospital and 500 renowned faculty physicians from the Keck School of Medicine of USC.

Keck Hospital of USC is a private, 411-bed acute care hospital staffed by the faculty at the Keck School of Medicine of the University of Southern California. For several years, Keck Hospital of USC has placed among the best hospitals in the nation in the U.S. News & World Report magazine’s rankings of “America’s Best Hospitals.”

Originally opened in 1991, the hospital offers some of the most sophisticated technology available. Among the hospital's advanced services are neuro-interventional radiology, minimally invasive cardiothoracic surgery, robotic surgery and interventional cardiology. Surgical specialties include organ transplantation and neurosurgery, as well as cardiothoracic, bariatric, esophageal, orthopedic, and plastic and reconstructive surgeries.

Keck Hospital of USC is home to these specialized services:
- Heart, Lung and Vascular Services
- Weight Loss and Digestive Disorders
- Orthopedics and Sports Medicine
- Transplant Programs – specializes in the treatment areas of: bone marrow, heart, kidney, liver and lung transplant
- Neuroscience and neurosurgery
- Diabetes
- Cystic Fibrosis
- Head and Neck
- Ophthalmology
In addition to patient care, Keck Hospital of USC is a site for clinical research, supporting patients participating in cutting edge clinical trials. Keck Hospital of USC is also strongly committed to education. As a member of the USC family, we are a teaching hospital, training residents and fellows in graduate medical education. Keck Hospital of USC is also a highly regarded clinical rotation site for local nursing and allied health programs.
Community Benefit Planning
Keck Hospital of USC continues to build its organizational governance and management structures and focus its programmatic efforts for community benefit. As noted, in April 2009 USC acquired the hospital from Tenet Healthcare Corporation, marking a change from a for-profit to a nonprofit hospital. This change in tax exempt status required a deliberate concentration on providing community benefit.

In FY12, we accomplished the following initiatives in support of our community benefit plan:

- Worked with hospital leaders to plan for community benefit oversight and governance. Identified community stakeholders and hospital leaders to serve on the community benefit oversight committee.
- Last year we subscribed to and installed Lyon software (CBISA community benefit tracking software). Staff received training on use of CBISA and community benefit activities and programs were documented in the system.
- Submitted the annual report to the Attorney General to comply with the conditions of sale for USC University Hospital/USC Norris Cancer Hospital.
- Planned a community focused grant program to support community benefit programs.
- Posted the Community Health Needs Assessment on the website as a strategy to make it widely available to the public.
Community Health Needs Assessment

In 2010, Keck Hospital of USC conducted a Community Health Needs Assessment as required by California law (SB 697). The recent passage of the Patient Protection and Affordable Care Act also requires tax exempt hospitals to conduct needs assessments and develop community benefit plans every three years. With the transition of Hospital ownership in 2009, this was the hospital’s initial community health needs assessment. This community health needs assessment was carried out in partnership with USC Norris Cancer Hospital. The entire Community Health Needs Assessment can be accessed at http://www.keckhospitalofusc.org/uscuhs/community-benefits.

Keck Hospital of USC is located east of downtown Los Angeles on USC’s Health Sciences Campus. The Hospital draws patients regionally from Southern California, with a primary service area of Los Angeles County, California.

Methodology
The assessment incorporated components of primary data collection and secondary data analysis that focus on the health and social needs of the service area. Targeted interviews were used to gather information and opinions from persons who represented the broad interests of the community served by the Hospitals. For the interviews, community stakeholders, identified by the Hospitals, were contacted and asked to participate in the needs assessment. Thirty interviews were completed for the Community Health Needs Assessment from September - November, 2010. Secondary data were collected from a variety of county and state sources to present a community profile, birth and death characteristics, access to health care, chronic diseases, and social issues.

Summary of Findings
This overview summarizes some of the significant findings drawn from the Community Health Needs Assessment.

Community Profile
- The residents of the USC University Hospital services area are primarily Latino (48.3%) and White/Caucasian (27.7%). Asians comprise 13.3% of the population, and Blacks are 8.3% of the population.
- The area has high percentages of children, ages 0-9 (13.8%), youth, ages 10-14 (7.1%), and teens, 15-19 (8.3%).
- Spurred by the recent economic downturn, unemployment has more than doubled from 2000 to 2009.
- 17.9% of the population lives at or below the poverty level and 39.9% are at or below 200% of poverty.
• Less than half the population in L.A. County (49.7%) has more than a High School Education
• 54.1% of residents speak a language other than English in their homes; Spanish is spoken most frequently, among 37.9% of resident households.

Birth and Death Characteristics
• Among pregnant women, 87.2% obtain prenatal care in the recommended first trimester.
• L.A. County has a high rate of low birth weight babies at 73.1 per 1,000 live births; the State rate is 68.3 per 1,000 live births.
• When adjusted for age, the USC University Hospital service area has a considerably higher death rate (774.8 per 100,000) than that of the State (650.1).
• Heart disease, cancer and stroke are the top three leading causes of death.
• When mortality rates are examined by race/ethnicity, Blacks have the highest rates of death (940 per 100,000 population).
• Among Hispanics, heart disease, diabetes and stroke are the leading causes of death.
• The top three causes of premature death (before age 75) in L.A. County are due to coronary heart disease, homicide and motor vehicle crashes.

Access to Health Care
• In L.A. County, 22% of adults and 7% of children are uninsured.
• Adults experience a number of barriers to accessing care, including: the high cost of medical and dental care, no regular source of care (medical home), and linguistic isolation.

Chronic Disease
• Area residents have high rates of blood cholesterol, diabetes and hypertension.
• 7.9% of children have been diagnosed with asthma.
• Rates of TB in the County have fallen almost 8% from 2006 to 2007.
• Seniors are not receiving flu shots and pneumonia vaccines at the recommended rates.

Social Issues
• In L.A. County, 34.8% of adults are overweight and 22.6% are obese.
• Almost one-quarter (23.3%) of all children are considered obese.
• 47.6% of adults and 40.2% of children consume fast foods one or more times a week.
• Among area residents, 15.2% of youth and 36.2% of adults are sedentary and participate in minimal activity during the week.
- 14.3% of the population in the service area smoke; 16.2% have engaged in binge drinking.
- Over 8% of adults experienced mental illness/psychological distress last year.
- The number of homeless individuals has decreased over the last three years with a noticeable move from being unsheltered to sheltered.

**Community Stakeholder Interview Findings**

- Health care access is a major concern aggravated by a worsening economy, loss of jobs and the subsequent lack of health insurance.
- There is a need for culturally-competent and linguistically appropriate care, made all the more difficult by the high level of diversity within the community.
- Fragmentation within the health care system leads to duplication of services or patients being bounced around among providers; no coordination of services, and a low level of communication between the various providers and agencies.
- There is a lack of information or knowledge among community residents regarding available health care options, criteria from program to program, and how to access the system.
- There is a high level of medical illiteracy and a need for basic health education.
- Chronic illness is increasing, particularly diabetes, heart disease and hypertension.
- There has been an increase in overweight or obesity, including the development of Type II Diabetes in children. The impact of obesity has resulted in an increase in related health problems, such as heart disease, hypertension, kidney disease, respiratory problems, joint problems, amputations, diabetes, depression, strokes and certain types of cancer.
- Contributing to the increase in obesity is the lack of access to safe areas to exercise and lack of access to, and education about, healthy food options.
- It is becoming harder to find doctors who take various types of insurance, particularly Medi-Cal and Medicaid, probably because of low reimbursement rates offered.
- The Hospital is encouraged to get involved in joint strategic planning; join in discussions around developing integrated delivery models, particularly around implementation of Health Care Reform.
Community Benefit Services Summary

Community Health Improvement Services
Activities carried out to improve community health.

Community Health Education and Support Groups
The community was served by a number of support groups that included:
Family/Caregiver Support Group, Liver Transplant Support Group, Lung Transplant Support Group, and other support groups. All of support groups are open to the public, free of charge.

The hospital provided health education informational materials and hosted education seminars and workshops on a variety of topics for patients, families, and the public.

Community Based Clinical Services
The LA Times Festival of Books was held at USC this year. The hospital in partnership with the departments of Occupational Therapy, Physical Therapy, Biokinesiology and Pharmacy hosted a booth at the USC Health Pavilion. Visitors received blood pressure screenings, diabetes blood sugar screenings. There were education presentations and handouts, health giveaways and hand washing stations.

A health fair was conducted in November and provided free health screenings to the public: 48 people were screened for cholesterol, 49 people were screened for diabetes, and 46 people were screened for osteoporosis.

Health Care Support Services
Taxi vouchers were made available to patients and families for whom accessing transportation is a barrier to accessing care. Complimentary meals were also made available to community volunteers, families and community members accessing health education and support group sessions.

Health Professions Education
Educational programs for physicians and medical students, nurses and nursing students, and other health care professionals and students.

Graduate Medical Education
Keck Hospital of USC is a clinical setting for 2,045 Interns, Residents and Fellows from the USC Keck School of Medicine.
Nursing Education
135 nursing students from California State University, Los Angeles, Pasadena City College, UCLA, Mount St. Mary’s, Glendale Community College and Azusa Pacific University were precepted or had a student rotation at the hospital during the academic year 2011/2012.

Other Health Professions Education
- 4 Speech Therapists obtained precepted internships at the facility.
- 62 USC Pharmacy students were assigned pharmacist preceptors.
- 117 Occupational Therapy students received 9,420 hours of precepted training.
- 18 physical therapy students obtained precepted training.
- 3 students from the USC Graduate School of Social Work received 1,860 hours of precepting at the hospital.
- Local college students work with preceptors in the Urology Division.

Continuing Education
The hospital hosted a number of education events made available to health providers throughout the USC Keck School of Medicine, hospital staff and the provider community. Events included:
- Lunch and Learns
- Seminars and workshops on a variety of topics

Research
Clinical and community health research, and studies on health care delivery that are generalizable, shared with the public and funded by the government or a tax-exempt entity; does not include the costs of proprietary research.

Clinical trials take place at the USC Health Sciences Campus. Administration and oversight are provided for all research studies that involve Hospital patients and facilities.

Cash and In-Kind Donations
Funds and in-kind services donated to community groups and other nonprofit organizations.

Contributions to nonprofit community organizations and charity events were made to:
- USC Good Neighbors
  Donations support more than 411 community organizations that partner with USC to put children on the pathway to college, make streets safer for families,
and offer activities and programs aimed at improving the health and well-being of residents in the neighborhoods surrounding USC’s campuses.

- Donations of food and clothing were made to a homeless shelter in Los Angeles and at the Asian American Drug Abuse Prevention program.
- A donation was made to support the scholarship program of the National Hispanic Health Foundation, which supports minority education in the health sciences.
- The Dodgers Dream Foundation was supported with a donation to provide educational, athletic and recreational opportunities for the youth of the Greater Los Angeles community. The Foundation places special emphasis on helping traditionally underserved youth.

**Community Building Activities**

Activities that support community assets by offering the expertise and resources of the Hospital.

The Keck Hospital continued its efforts to engage students form local Los Angeles schools that typically enroll underserved students. Students from the Bravo Medical Magnet High School participated in a job shadowing and mentoring program. Each semester, three classes of students spend 7.5 hours a week working with staff in a variety of roles and departments. Area High School students also engaged in several art projects that were displayed on campus and enjoyed by patients, and visitors to the USC Health Sciences Campus in East Los Angeles.
Financial Summary of Community Benefit
Keck Hospital of USC and Norris Cancer Hospital community benefit funding for FY12 (July 2011 – June 2012) are reported as a combined entity and summarized in the table below.

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<thead>
<tr>
<th>Community Benefit Categories</th>
<th>Net Benefit</th>
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<tbody>
<tr>
<td>Charity Care</td>
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<tr>
<td>Unpaid Costs of Medi-Cal and Other Means Tested Government Programs</td>
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<td>Community Health Improvement Services</td>
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<td>Health Professions Education</td>
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<td>Research</td>
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<tr>
<td>Cash and In-Kind Donations</td>
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<td>Community Benefit Operations</td>
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<td><strong>TOTAL COMMUNITY BENEFIT PROVIDED Excluding Unpaid Costs of Medicare</strong></td>
<td>$53,127,485</td>
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<tr>
<td>Unpaid Costs of Medicare</td>
<td>$75,153,019</td>
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<tr>
<td><strong>TOTAL COMMUNITY BENEFIT PROVIDED Including Unpaid Costs of Medicare</strong></td>
<td>$128,280,504</td>
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</tbody>
</table>
Community Benefit Plan for FY 2013
In the year ahead, Keck Hospital of USC will continue to focus on building community benefit infrastructure. Specifically, we will put systems in place to develop institutional support for community benefit and establish programs to address the identified unmet health needs in our community. We will establish leadership oversight for community benefit; initiate program planning, implementation, and evaluation; and enhance the sustainability of organizational and programmatic commitments. In order to accomplish these goals we will:

- Convene a Board level Community Benefit Advisory Committee to include community representatives to provide oversight and policy guidance for all charitable services and activities supported by the Hospital by fall 2012.
- Institute community benefit governance and oversight systems and policies in conjunction with the Community Benefit Advisory Committee by fall 2012.
- Annually track and report community benefit programs using Lyon Software CBISA.
- Initiate our new community grants program by January 2013.
- Initiate an employee volunteer program for community outreach by June 2013.
- Undertake a Community Health Needs Assessment to meet the IRS 501(r)(3) regulations to be completed by spring 2013.
- Develop an Implementation Strategy for approval by the Governing Board by June 2013.
- Widely distribute the Community Health Needs Assessment by June 2013.
- Use the results of the needs assessment to establish community benefit priorities and develop a plan for action that reflects the identified priorities in consultation with the community by June 2013.
- Institute programs that focus on communities with disproportionate unmet health needs by June 2013.
- Create a plan to communicate our commitment to community benefit to the public. Continue to update our web-based and written materials to reflect our nonprofit mission, financial assistance policies, and community benefit efforts by June 2013.
- Establish ongoing systems to document charity care and community benefit programs and associated costs by December 2013.
Contact Information

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Web Address
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Community Benefit Contact
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