



# **COMMUNITY BENEFIT PLAN**

**2011-2012**

**ST. VINCENT MEDICAL CENTER**

**LOS ANGELES, CALIFORNIA**

*Furthering the Healing Ministry of the Daughters of Charity*

# COMMUNITY BENEFIT PLAN

## 2011-2012

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## Table of Contents

<u>Section</u>	<u>Page</u>
I. Introduction	1
II. Organizational Structure	1
III. Mission Statement	1
IV. Community Needs Assessment	2
V. Progress Report 2010–2011	10
A. Information, Enrollment & Referral – Health Benefits Resource Center	10
B. Youth Services and Neighborhood Development – Casa de Amigos	12
C. Community Outreach and Health Promotion – Multicultural Health Awareness and Prevention Center	14
- Education on Breast Cancer, Nutrition and Obesity, Diabetes and Heart Disease	14
- Community Health Fairs	15
- Community Obesity and Prevention Program	16
- Free Flu Shots	16
- Breast Cancer Early Detection Services	16
- Support Services and Special Projects	17
D. Diabetes Prevention/Detection/Management – Community Diabetes Education Program	19
E. Hepatitis Education/Detection/Treatment – Asian Pacific Liver Center	21
F. Job Training/Career Development for Youth – Volunteer Services	23
G. Donated Space for Community Use	25
H. Transportation Services	26
VI. Community Benefit Plan 2011–2012	28
- Information, Enrollment & Referral – Health Benefits Resource Center	28
- Youth and Neighborhood Outreach Services – Casa de Amigos de San Vicente	29
- Information, Education, Screening and Referral Services – Multicultural Health Awareness and Prevention Center	31

-	Diabetes Prevention/Screening/Management – Community Diabetes Education Program	37
-	Hepatitis B Education/Screening/Treatment – Asian Pacific Liver Center	38
-	Job Training/Career Development Services – Volunteer Services	40
-	Charity Care	41
-	Services to MediCal Patients	41
-	Donated Space for Community Use	42
-	Patient Transportation Services	42
VII.	Inventory and Economic Valuation of All Community Benefits	43
VIII.	Plan Review	43
<u>Attachments</u>		
A	- Summary of Quantifiable Community Benefit Classified as to Living in Poverty and Broader Community	44
B	- Service Area Map – St. Vincent Medical Center	45
C	- Charity Care Policy – St. Vincent Medical Center	46

## **I. Introduction**

St. Vincent Medical Center (SVMC) is a 366-bed, short-term acute care, general hospital located in the downtown area of Los Angeles. SVMC specializes in tertiary level services with a long-standing reputation in cardiac care, organ transplantation, oncology services, orthopedic services and the treatment of hearing disorders. SVMC has an extensive and rich tradition of serving the residents of Los Angeles along with patients from other states and from countries throughout the world. Founded in 1856 by the Daughters of Charity of St. Vincent de Paul and Los Angeles' first hospital, SVMC has been serving the community for over 155 years. As a member of the Daughters of Charity Health System, SVMC continues to uphold its primary mission of providing quality medical services to the most vulnerable populations, the sick, the poor, the elderly and children. SVMC is committed to the fulfillment of the mission of its founding Sisters through the delivery of charitable services and care to the community.

## **II. Organizational Structure**

A Community Benefit Committee chaired by a member of senior management, meets monthly to address and discuss how the medical center is fulfilling its role in the community. This group comprised of staff whose departments or programs are involved in a wide-range of community benefit activities and projects:

- reviews and monitors activities spelled out in the plan;
- discusses, initiates and prioritizes plans for future projects in response to community needs;
- ensures proper reporting and tracking of community benefit activities;
- determines and assesses the financial value of certain hospital resources for community benefit purposes, as appropriate; and
- ensures quarterly and annual community benefit reports are submitted to the State.

## **III. Mission Statement**

The Daughters of Charity Health System Mission Statement is an integral part of SVMC and is promoted/presented to all associates during the new employee orientation process, as well as, to all community and leadership volunteers.

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

SVMC Community Benefit initiatives reflect Vincentian values of Respect, Compassionate Service, Simplicity, Advocacy for the Poor, and Inventiveness to Infinity. SVMC has an unwavering commitment to building a healthier community and in developing strong relationships with collaborative partners both internally and externally.

Internal collaboration involves the medical center administration, SVMC associates, physicians, volunteers and donors. Community partners include clinics, churches, community organizations, public agencies, public and private schools, consulates, senior centers, local businesses and individuals from throughout our service areas who share our vision and commitment to our community.

In keeping with this mission, SVMC's contributions to the community include the provision of quality affordable health services with a special concern for vulnerable populations. Our benefit to the community is extended through our commitment of resources and collaboration with both community and faith-based organizations (clinics, churches, etc.) for which the high-risk populations in the central Los Angeles Region are the primary focus. SVMC's benefits to the community extend beyond the traditional area of health care and include job skills training, literacy, gang diversion and other family and youth-oriented activities.

#### **IV. Community Needs Assessment**

##### **Background and Purpose**

In 1994, the California State Legislature enacted Senate Bill 697 (SB 697) requiring non-profit hospitals to conduct a needs assessment every three years. The needs and priorities identified in the tri-annual assessment serve as the basis for our annual community benefit plan. In order to complete the 2010 Community Needs Assessment and consistent with previous needs assessments, SVMC and four other hospitals pooled resources to collect information about the health and well-being of residents in their service community. This group, called the Los Angeles Metropolitan Hospital Collaborative, includes:

- California Hospital Medical Center
- Children's Hospital Los Angeles
- Good Samaritan Hospital
- Kaiser Foundation Hospital – Los Angeles
- St. Vincent Medical Center

##### **Methods**

The SVMC Community Needs Assessment was developed using both quantitative and qualitative data sources. To the extent necessary, secondary or existing datasets were accessed to update the previous needs assessment. Data sources for this purpose include reports from the Los Angeles County

Department of Health Services, including the Los Angeles Health Survey, and additional data on live births and deaths. Additionally, the Project Team utilized 2009 projection data, instead of relying on outdated 2000 Census data (the 2010 Census data would not be available until after this project is completed, and American Community Survey data are not available in the lowest geography, such as zip codes or census tracts, desired by the hospital collaborative).

Thirty key informant interviewees (mostly from community-based organizations providing medical and social services) added important knowledge and experience for their target areas. Other community members and service recipients chosen by community-based agencies provided a broader and more precise perspective about health care services, gaps in services, and suggestions about how to fill them. Their input made it possible to conduct an informative needs assessment with direct implications for policies and resource allocation to address the individual member hospital’s specific priorities. Ten focus groups were conducted to cover the number of communities served by the hospital collaborative. A majority of these focus groups were done with community residents identified by community agencies involved in previous needs assessments and by the collaborative.

### Community Profile

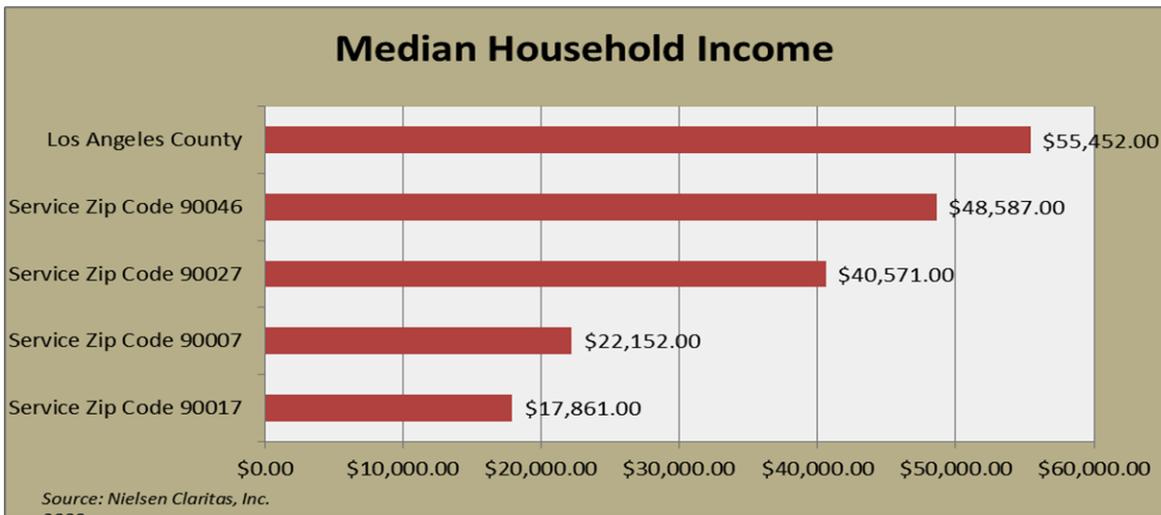
SVMC is located in SPA (Service Planning Area) 4 of Metro Los Angeles. Its service area also includes SPA 6 – South. However, it serves a larger regional area, with patients originating from over 80 cities in Los Angeles, San Bernardino, Riverside and Orange Counties, as well as, from across the country and around the world. While SVMC provides charitable care within these boundaries, it’s primary community benefit service area encompasses: Crenshaw, Echo Park, Hollywood, Northeast Los Angeles, Pico-Union, South Central, West Hollywood, Westlake and Wilshire; and the following 21 zip codes: 90004, 90005, 90006, 90007, 90008, 90010, 90011, 90016, 90017, 90018, 90019, 90020, 90026, 90027, 90028, 90029, 90031, 90037, 90044, 90046, 90057 (see Attachment “B” for map of service area). All zip codes are located in service planning areas 4 and 6.

The following data provide a snapshot of the community served by St. Vincent Medical Center (SVMC).

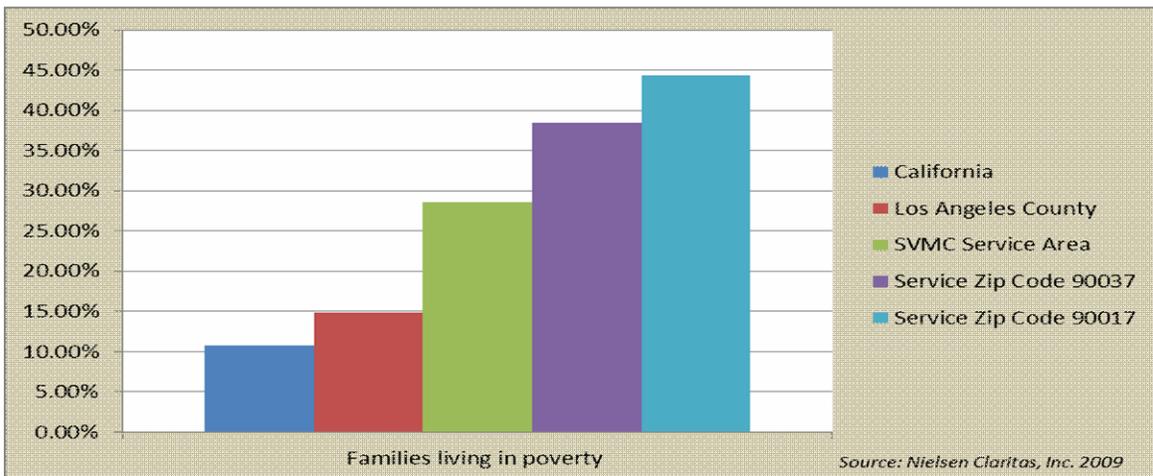
### Demographics

Race/Ethnicity	SVMC	Los Angeles County
White	147,150 - (13.2%)	2,750,423 - (27.4%)
Black or African American	155,101 - (13.9%)	857,211 - (8.6%)
American Indian and Alaskan Native	2,326 - (0.2%)	22,890 - (0.2%)
Asian	129,362 - (11.6%)	1,286,101 - (12.8%)
Native Hawaiian and Pacific Islander	701 - (0.1%)	22,420 - (0.2%)
Some Other Race	2,375 - (0.2%)	19,610 - (0.2%)
Two or More Races	22,953 - (2.1%)	245,452 - (2.5%)
Hispanic/Latino	653,927 - (58.7%)	4,818,082 - (48.1%)
<b>Total</b>	<b>1,114,255 - (100.0%)</b>	<b>10,022,189 - (100.0%)</b>

- In 2009, about 41.7% of the population over the age of 25 in SVMC’s service area did not have a high school diploma, compared to 31.0% of the overall population in Los Angeles County. In 2010, more than two-thirds (69.1%) of the population over the age of 5 spoke a language other than English at home. And 24.8% of the families in this service area were living below the federal poverty level.
- More than three-fourths (79.8%) of the housing units in the SVMC service area were occupied by renters in 2010. About 11.4% of the housing structures in this area were 50 or more units and 17.1% of the housing structures were between 20 and 49 units.
- Median household income in SVMC service area is less than 50% of the Los Angeles County average.

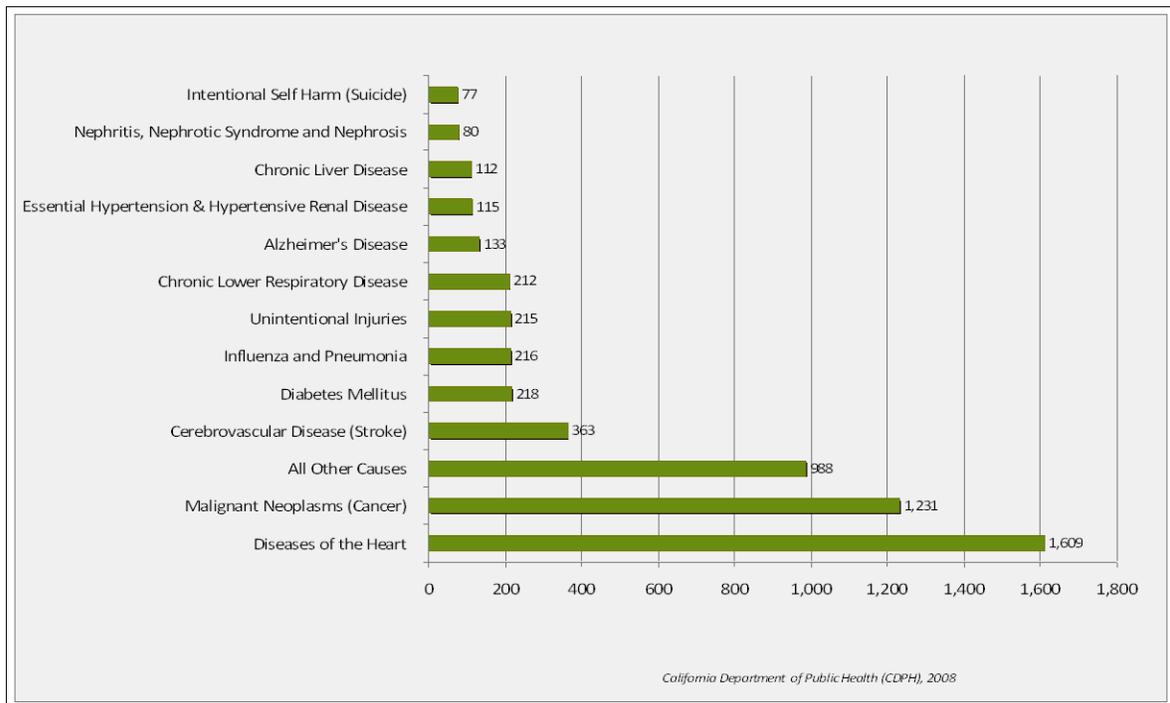


- There was a significant decrease in reported homelessness for the year 2009 compared to 2007 (34.8% decline) and 2005 (41.6% decline).
- Approximately 28% of the families within the SVMC service area live in poverty, almost twice the county average.



## Births & Deaths

- There were 17,397 (3.2%) births in the SVMC service area in 2008. The majority of births (72.0%) were to Hispanic/Latina mothers. Half of all births (50.6%) in this service area were to mother ages 20-29 years and more than 1 in 5 births (21.2%) were to mother's age 30-34 years.
- From 2005 to 2006, 87.3% of pregnant women in Los Angeles County began prenatal care in the first trimester. The following groups of expectant mothers tended not to receive prenatal care during their first trimester: pregnant women who completed some high school, between the age of 15 and 19, or living at home where an Asian language is the primary language.
- In 2008, there were 5,569 deaths in SVMC's service area. The top two causes of death for the SVMC service area were heart disease (28.9%) and cancer (22.1%).
- In the SVMC service area, the most common causes of premature death for 2007 were coronary heart disease, homicide, and motor vehicle crashes.



## **Highlights of Findings**

Since the last needs assessment report in 2007, the communities within the SVMC's service area, much like the rest of the nation, have suffered through a devastating economic recession that left many of its residents more vulnerable. Despite the passage of health care reform legislation, many components of which have not taken effect, many participants reported seeing more and more people losing health insurance. Some of this has to do with high unemployment rate, as many people have lost their insurance coverage when they were laid off.

Both quantitative (or secondary) data and qualitative (or focus group and interview) data suggest that there has been a negative trend most prominently in the area of access to health care and three health-related issues: mental health, diabetes and obesity. Services or programs were either eliminated, hospitals were closed, or eligibility became more restricted. Or community members simply could not afford health services, or prioritized them below more basic needs, such as food and shelter. Both providers and community members identified vision and dental services to be especially lacking in the community. The lack of access to health services affected the older adult population and undocumented population disproportionately.

The emergency room continues to be the last resort for many community members who are uninsured or who delay care. Having patients in the emergency room whose symptoms do not warrant emergency care taxes the quality and efficiency of the health care system. Increasingly, though, community clinics are becoming a regular source of care in Los Angeles health care landscape, especially for immigrants. While this cushioned some of economic blows to health access, it also created a seemingly fractured system.

Despite increasing health needs (or because of it), participants believed that there is a community interest in promoting healthy behavior and in focusing on prevention efforts. Access to green space and healthy food options were often cited as top priorities for the community. The quantitative data also suggested that certain health trends, such as smoking cessation and breast cancer screening, turned positive, when there were concentrated efforts in social marketing, policy advocacy, and community health promotion and outreach.

Other community services have been similarly impacted by the recession. Consistent with the quantitative data, participants reported that there was a rise in childhood diabetes, as a result of increasing obesity rates in this population. Easy access to fast food and the elimination of physical fitness programs were just two reasons cited for this, as the recession had made the fast food option affordable to many families and, because of shrinking school budgets, many schools did not even offer physical education classes anymore. Participants also believed that the recession also had led to stressors, such as unemployment, overcrowding and financial instability, that further complicates the mental health of many community members. In addition, budget cuts have reduced the availability of mental health services.

Participants expressed optimism that hospitals like SVMC will play a leadership or convening role in improving health outcomes in their communities. Some participants suggested and others cited examples of collaboration between hospitals and clinics, schools and community-based organizations that serve hard-to-reach populations as a crucial strategy in promoting health. The community health promoter, or *promotora*, model was especially successful in the Latino community.

### Access

- According to the 2005 California Health Interview Survey, only 3 of the 54 zip codes in SVMC's service area had a 20% uninsured rate for individuals under the age of 65.
- In 2007, the percentage of adults who reported a regular source of care in the Metro and South SPAs of SVMC's service were lower compared to Los Angeles County (74.1% and 79.1% vs. 80.8%) and all other SPAs. However, the Metro and South SPAs have the highest percentage of adults receiving medical services from the Los Angeles County Health Department facilities.
- The percentages of adults and children who did not obtain dental care in the past 12 months because they could not afford it were higher in SVMC's service area than in the Los Angeles County.
- The cost of prescription medication continues to be a problem for low-income, uninsured and under-insured individuals and families. The percentage of adults who did not get their prescription medication in the past year because they could not afford it was higher in SVMC's service area than in the Los Angeles County.
- Two of the biggest barriers to accessing care were transportation and lack of linguistic competence of providers. An additional barrier particular to senior care was a lack of service coordination among an overly fragmented and often competitive long-term care system.
- For community clinics, recent and impending budget cuts, delayed payments, and a growing low-income under-insured population have exacerbated an already overburdened system.

### Mental Health

- The need for mental health services has increased, given the high level of stress due to the worsening economy and unemployment.
- The most frequently cited community mental health issue continues to be depression. Diagnosis of depression had risen since 1999. In particular, women, older adults and American Indians had the highest rate of depression in Los Angeles County.
- In 2007, there were 13.6% of adults diagnosed with depression (up from 12.9% in 2005) in Los Angeles County. The largest increase occurred in SVMC's SPA 4 (11.9% vs. 14.6%). Within SVMC's service area, the percentage of adults diagnosed with depression was 13.6% in SPA 6 and 14.6% in SPA 4.

### Chronic Diseases

- Within SVMC's service area, SPA 4 had an increase in the prevalence rate of diabetes from 2005 to 2007 (14.5% vs. 20.8%). SPA 6 continues to report the highest diabetes prevalence rate in Los Angeles County and California.

- SPA 6 had an increase in the prevalence rate of asthma; while SPA 4 had a decrease.
- SVMC's service area had a 3.0% average increase in heart disease in ten years, compared to an average of 2.7% across all SPAs.
- There was also an increase in hypertension for the SVMC service area. The prevalence of hypertension in Metro SPA 4 had double-digit growth from 1997 to 2007 (13.8% vs. 24.8%). While South SPA 6 continues to have the highest hypertension rates in Los Angeles County at 29.0%.
- Both SPA 4 and SPA 6 had the lowest high blood cholesterol estimates than Los Angeles County and other SPAs.

#### Health Behavior and Preventive Care

- The California Health Interview Survey reported less than half the adults in SVMC's service area consumed at least 5 servings of fruits and vegetables from 2003 to 2005. Regardless of income level or the level of access to fresh fruits and vegetables, consumption differences do not exist among SVMC service area zip codes.
- From 2005 to 2007, SVMC's service area had an increase in individuals who were overweight or obese. Nearly two-thirds (65.2%) of adults in SVMC's SPA 6 were overweight or obese compared to over half (57.4%) of Los Angeles County adults.

#### Cancer

- In Los Angeles County, 34,335 residents were diagnosed with cancer in 2010. Most cancer incidents were attributed to breast cancer, colon cancer, and cervical cancer. Since 2007, cancer screening rates continues to improve and cancer incidence rates have remained steady.
- In the SVMC service area, more than two-thirds of women 40 years and older reported having a mammogram in 2007 or the previous two years. And nearly three-fourths of women 50 years and older reported having a mammogram in 2007 or the previous two years.
- Colon screening rates varied across Los Angeles County, from a low 35.6% in SVMC's SPA 4 to a high 43.3% in SVMC's SPA 6, compared to median 38.1% for Los Angeles County.
- SVMC Metro SPA (84.6%) and SVMC's South SPA (88.3%) reported higher rates of cervical (pap smear) screenings among women than Los Angeles County (84.4%).

#### HIV/AIDS

- The number of HIV/AIDS cases decreased from 2007 to 2010. However, a disproportionate number of cases were reported among people of color and youths. Hispanic and immigrant groups lacked awareness in HIV prevention and proper use of HIV medication.

- In 2009, SPA 4 had the highest number of adolescents diagnosed with AIDS (74) than other SPAs in Los Angeles County. SPA 6 had the second highest number at 58.
- Although the number of HIV/AIDS cases has decreased, the number of individuals living with HIV has increased as many people living with HIV are living longer as a result of better medication.

#### Communicable Diseases

- The number of pertussis cases has increased in 2010. SVMC's service area had the largest number of reported cases in Los Angeles County. SPA 6 reported the highest number (14) and SPA 4 reported 10 cases.
- Among STDs, the rate of chlamydia in Los Angeles County remained higher than California or the United States. SPA 6 reported the highest rate of chlamydia cases with 960.0 cases per 100,000 in 2007 compared to 859.5 per 100,000 in 2005. In both 2005 and 2008, SPA 6 had the highest rate of chlamydia cases in Los Angeles County.

#### **St. Vincent Medical Center's Response to Community Needs**

In response to the long-term health, social service and economic needs that have challenged the residents of its community for many decades, SVMC has initiated and sustained a number of programs and services to address the issues identified in its Community Needs Assessment. These programs have evolved from being distinctly separate from each other to highly coordinated and synergetic. Through collaborative relationships with a network of over 250 partnering organizations comprised of churches, schools, senior centers, consulates, clinics, medical providers and community organizations, SVMC has committed itself to furthering its mission of service to the sick and vulnerable. Strategically, the Community Benefit Plan integrates the services of several programs aimed at:

- Increasing access to primary and specialty care services for underserved populations.
- Offering free health education and screening services for uninsured or underinsured populations in conjunction with referral and follow-up support with a focus on breast cancer, diabetes and heart disease.
- Preventing and managing chronic diseases in high-risk populations, with an emphasis on diabetes/obesity and hepatitis B virus.
- Facilitating enrollment in health insurance and social service programs for uninsured residents.
- Providing at-risk youth and their families academic and recreational opportunities to enhance economic security and reduce vulnerability to crime.

## V. Progress Report: 2010–2011

*“You must serve these poor, sick people with great charity and gentleness so they will see that you go to help them with hearts full of compassion for them.”*

*St. Vincent de Paul*

### A. Information, Enrollment and Referral – Health Benefits Resource Center



St. Vincent Medical Center Health Benefits Resource Center (HBRC) has carried on the Mission of the Daughters of Charity and St. Vincent de Paul by providing services to the less fortunate. With compassionate service and respect for the individuals and number of families served continues to grow year by year.

The HBRC provides access to healthcare services and healthcare information for vulnerable residents of the St. Vincent primary service area in a convenient “one-stop” setting. Modeled after the program at St. Francis Medical Center, services provided by the St. Vincent HBRC include health benefits enrollment assistance, Food Stamp enrollment, health education registration, referral to the Vincentian Fund and various social welfare programs.

Entering its third year of service at St. Vincent, HBRC has become a vital component in our cadre of Community Benefit programs by energizing the synergy among their program directors and staff which has greatly contributed toward unifying outreach and services between the Multicultural Health and Awareness (MHAP) Center, the Community Diabetes Education Program (CDEP), the Asian Pacific Liver Center

(APLC), and Casa de Amigos. Similarly, the various Community Benefit programs are actively promoting HBRC, referring families and individuals every week.

**Listed below are a few key highlights during FY2010–2011**

158 Outreach events attended with partnering faith and community-based organizations for example:

- Hotel Dieu Birthday Celebration: July 13, 2010
- Monseñor Oscar Romero Walk-A-Thon: October 8, 2010
- St. Vincent IPA Senior Center Presentation: November 10, 2010
- St. Vincent Breast Cancer Awareness Forum: October 21, 2010
- Susan G. Komen 2011 Annual Race for the Cure: March 6, 2011
- Faith- and Community-Based Organizations
  - Esperanza Community Housing
  - Casa De Amigos
  - Holy Cross Church
  - Woman Infant and Children
  - New Economics For Women
  - Hotel Dieu
  - General Consulates (Mexico, El Salvador, Thailand, Guatemala)
- Private and Public Schools
  - St. Vincent DOC School Parent Meeting: August 30, 2010
  - Our Lady of Talpa DOC School Parent Meeting: September 2010
  - St. Nicolas Head Start Parent Meeting: December 22, 2010
  - Evelyn Gratts Elem. School Parent Meeting: January 27, 2011
  - St. Vincent DOC School Carnival: April 29, 2011
  - PACE Head Starts Monthly Meetings: Jan 2011 - April 2011
  - LA Unified School - Guidance Assessment Program (GAP)

**Statistics**

- 8,683 Inbound calls inquiring about HBRC services.
- 2,481 Families were screened for health access and CalFresh (formerly known as Food Stamps) Program.
- 579 New health related applications were completed enrolling families into programs such as Medi-Cal, Healthy Families, Healthy Kids, Kaiser Child Health Plan and Access for Infants and Mother (AIM).
- 305 New CalFresh applications completed providing families with access to nutritious foods.
- 248 Families were assisted with retention of benefits for health access and CalFresh program. With the retention assistance, the families will continue to have health care access and more money for food.
- 1,032 Safety net and community referrals like Ability to Pay (ATP), Outpatient Simplified Application Assistance (ORSA), Private Public Partnership (PPP), Monseñor Oscar Romero (Children and Adult) Clinic, shelters, food banks and/or 211 info line.

### **Success Story**

*Mr. R is a single father who is established at the HBRC reached out to us for assistance. He is a single father who is raising two children and his CalFresh benefits were discontinued because he was not able to provide certain verifications. He also lost his job and was in desperate need to fix his CalFresh problem and look for a job. HBRC was able to help him re-apply and was approved for an allotment of \$297 a month. In addition, we were able to provide him with two \$25 gift cards to buy shoes for his children because we noticed during our screening that the children were in need of shoes for school.*

### **B. Youth Services and Neighborhood Development – Casa de Amigos**

Casa de Amigos (Casa) was founded in 1995 by St. Vincent Medical Center (SVMC) and the Daughters of Charity (DOC) in the heavily-populated Pico- Union/Westlake area of Central Los Angeles. Directed toward economically-disadvantaged youth and their families, Casa's programs and services are designed to promote community socio-economic empowerment; build participants' self esteem; mentor positive role models as a deterrent to gang involvement; advocate and promote healthy families; assist with their educational and cognitive development; and promote social and environmental stewardship.



Services are available to all regardless of race, creed, gender or national origin. The community center is open weekdays from 2:00 p.m.–9:00 p.m. and on Saturdays from 9:00 a.m.–2:00 p.m. and attracts between 85-100 members daily, ranging in age from 6 to 60 years. The array of program activities at the community center includes:

**For youth** — after-school and weekend tutoring, academic counseling, music education and instrument practice, computer instruction, indoor

and outdoor co-educational recreation, swimming, soccer leagues, karate, arts and crafts, health and nutrition education, attendance at professional sporting events and mentoring activities concerning gang prevention, tobacco and drug prevention.

**For parents and adults** — music education, computer accessibility, arts and crafts, health and nutrition, Zumba, continuing adult education and parenting programs.

**Key highlights during 2010–2011 include:**

- More than 85 youth consistently accessed the programs and services offered by Casa de Amigos on a daily basis.
- Casa continued to host interns from the Department of Social Work at California State University, Los Angeles. These students collaborated with staff to carry out Casa de Amigos' shared SVMC mission, while obtaining valuable hands on experience. Participants were assisted with socially and economically disadvantaged families who deal with the adversities of socioeconomic stratification.
- Casa continues to be a strong supporter of the Los Angeles Mexican Consulate, Plaza Comunitaria, which seeks to improve the basic educational skill level of Spanish and English language amongst native Spanish speakers.
- Casa is especially thankful to continue to receive the support of the following foundations and organizations: Foundation for Global Sports Development (formerly Justice for Athletes), LA84 Foundation, Daughters of Charity Foundation, Daniel Murphy Foundation, John H. and Nelly Llanos-Kilroy Foundation, Peter Norton Family Foundation, St. Vincent Medical Center Foundation, UPS Foundation, Carrie Estelle Doheny Foundation, Staples Center, Warehouse Shoe Sale, Global Janitorial, and SVMC Auxiliary.
- Casa's Sports/Special Activities Program once again fared well this year. The youth soccer team, ages 7-10, managed to advance to play for 3rd place in the Salvation Army's Winter and Summer leagues but unfortunately lost. The teen soccer team, ages 11-14, placed 3rd in the same Winter league, advanced to play for 3rd place once again last summer, but lost a hard fought game. Both leagues ended in June 2011. Casa de Amigos women's soccer team, ages 18+, was in 2nd place as the season ended in early August 2011.
- Collaborative work with the community and other local agencies remains strong. This year, Casa connected once again with the Los Angeles Archdioceses Youth Program and successfully fostered the employment of youth at Casa de Amigos.
- Casa has once again opened its doors to youth during the mornings of July and August and offered summer programs as part of its

Summer Day Camp. Over 50 youth and their families received educational and recreational programs during the summer.

### **Success Story**

*Two Casa de Amigos participants who are members of Boy Scouts of America Troop 2131 (Alfredo age 11 and Jose age 10) were awarded a \$500 scholarship each to attend Summer Camp with the Boy Scouts of America at Makualla Camp in Crescent Lake, Oregon. Transportation, lodging and meals were included in the scholarship. The scholarships were provided by Troop 67 located in Santa Monica, California which is a well known troop for providing the Boy Scouts of America experience to scouts with disabilities such as Autism. While at Summer Camp, Alfredo and Jose participated in activities such as archery, shooting, kayaking, rope work, wood carving, and instructions in astronomy and botany. It is through partnerships and collaborations with organizations such as the Boy Scouts of America, that Casa de Amigos can offer opportunities that many of the economically disadvantaged youth we serve would otherwise not have.*

### **C. Community Outreach and Health Promotion – Multicultural Health Awareness and Prevention Center**

The Multicultural Health Awareness and Prevention (MHAP) Center's outreach and health promotion is a cornerstone of SVMC's mission to serve the sick and the poor in the timeless tradition of the Daughters of Charity. MHAP Center's focus is on health education, disease prevention, early detection and information and referral services for high-risk ethnic communities including Latino, Korean, Filipino, Thai, Chinese and other vulnerable populations in the central Los Angeles area.

MHAP Center health education and outreach staff works directly in the community through a collaborative network of community and faith-based organizations, government agencies, consulates and health care providers. All services are offered at no charge to eligible individuals, including educational programs, health screening tests, follow-up services, and referrals.

### **In 2010–2011, major programs and services included:**

- Education on Breast Cancer, Nutrition and Obesity, Diabetes and Heart Disease

MHAP Center strengthened and expanded partnerships that were initially formed with community stakeholders for breast cancer outreach and education. The program expanded its health education outreach efforts to include working with community health care, cultural, civic and diplomatic organizations and venues. In addition

to breast cancer education, screenings and referrals, MHAP responded to community health concerns regarding obesity and nutrition, hypertension, diabetes, heart disease, kidney health, and issues concerning seniors and the elderly. Partnerships and collaboration were forged with the Mexican, Salvadoran, Costa Rican, Guatemalan, Philippines, Thai and Korean consulates in Los Angeles, including churches, senior centers, health clinics and other community-based and civic organizations. Also, strong partnership was established with Los Angeles Unified School District Nursing Services.

During 2010-2011, MHAP Center provided information about breast cancer screening and early detection, obesity and nutrition, diabetes screening, and other chronic diseases to 91,584 individuals through one-to-one educational contacts made by outreach staff; group workshops or other educational sessions, and messages through the media and community event advertising. One thousand eight hundred twenty two (1,822) individual were directly contacted. Sixteen thousand seven hundred forty eight (16,748) individual clients participated in group workshops, focus group discussions and educational sessions at a variety of multicultural and ethnically-diverse outreach activities, and community meetings.

Also during the period, 80,567 individuals were exposed to SVMC MHAP Center news articles and educational messages published by local media partners such as Los Angeles Asian Journal, HOY Newspaper, Dia-A-Dia Newspaper, Korea Daily, Korea Times, Weekend Balita and Thai News.

- Community Health Fairs

The MHAP Center participation and organizing of community health fairs is in response to the need for increased access to primary care, health education and health and social-welfare referrals. The center brings health care information and free screening services to community agencies, faith-based organizations and schools at a variety of multicultural and ethnically diverse outreach activities and community health fairs.

MHAP Center organized and sponsored the 2010 Annual St. Vincent Medical Center Community Health Fair on October 22, 2010 in Korea Town. Over 1,200 screening and health services were provided to adults and children and were served by 35 community, medical, and social organizations, with free health services such as Clinical Breast Exam, Mammography Screening, Hearing Exam, Vision Exam, Cholesterol Screening, Hepatitis B Screening, Body Fat Analysis, Glucose Exam, HIV Testing, Blood Pressure Screening, Foot Massage and information on how to apply

for low-cost health insurance, information on various chronic disease and advice from physicians.

MHAP Center planned, organized and sponsored at least four (4) mini-health fairs and participated to at least 16 health fairs in Metro Los Angeles are during the period.

- Community Obesity and Prevention Program

More than 2,367 individuals benefited from obesity and nutritional information provided by the MHAP Center at health fairs and unique nutrition classes, presentations and workshops offered at senior citizen centers and housing complexes, schools, and faith-based and community-based organizations and agencies. One thousand three hundred ninety two (1,392) individuals benefited from body fat analysis and screening.

During the Spring, MHAP Center partnered with LAUSD School Nursing Services, SOS Mentor, LAUSD Beyond the Bell and Newtritious to implement the LAUSD Healthy Schools Campaign program. The campaign is an unprecedented effort that raises awareness about nutrition and fitness and reached over 28,000 students in 700 Los Angeles schools. The culmination of the campaign was a district-wide poster contest open to students of all ages. Through the contest, students were encouraged and empowered to pass on healthy messages to their families, other students, and the community. Poster contest judging was conducted on May 16, 2011 and the Poster Contest Awards Reception & Dinner was held on June 13, 2011 at St. Vincent Medical Center.

- Free Flu Shots

During the fall season, 800 individuals in the community were provided free flu shots during the SVMC annual health fair in coordination with faith-based organizations and Los Angeles Consulates offices of Mexico, El Salvador, Costa Rica and Philippines.

- Breast Cancer Early Detection Services

Since its inception in 1992, the SVMC Community Mammography Program has reduced the barriers for access to breast cancer screening services for medically-underserved women in the central Los Angeles area. Through its collaboration with different community clinics such as KHEIR Community Clinic, Asian Pacific Health Care Venture, Women's Breast Center and the State's Cancer Detection Programs—Every Women Counts (formerly BCEDP), this program offers quality breast health services including mammography, clinical breast exams, breast self examination instruction, follow-up

services and patient tracking at no charge or very low cost to the patient. Low-cost screening is also provided to asymptomatic women ages 30–39 who have a first-degree relative (maternal or paternal) with breast cancer.



During 2010–2011, one thousand two hundred seventy six (1,276) women were referred and/or facilitated for Clinical Breast Examinations and screening mammograms in coordination with partner medical providers. Resulting from these screenings, twenty seven (27) patients were identified and reported to have abnormal findings, and five (5) were diagnosed with breast cancer. Since its inception, the program has screened more than 30,476 women, including new patients and annual returns, with a total of 58 cancers detected.

- Support Services and Special Projects  
During 2010-2011, SVMC in collaboration with the American Cancer Society and other local cancer organizations, continued to provide cancer support services to patients and their family members through programs designed to address both their psychosocial and physiological needs. This includes the Look Good... Feel Better Program and the I Can Cope Project for cancer patients under treatment along with their caregivers. One hundred thirty (130) cancer patients benefited through both programs.
- In 2010–2011, MHAP Center implemented special projects and services including:
  - School Nursing Obesity and Leadership Forum – This forum brought together more than 150 community leaders, mostly

school nurses, P.E. teachers and other administrators representing the eight districts of LAUSD. The event was a joint effort of MHAP Center and LAUSD Nursing Services School Nurses Act to Prevent Obesity (SNAPO) for the purpose of providing education and increasing awareness among school nurses, school personnel and health workers about the major public health threat of obesity.

- Avon Walk for Breast Cancer – MHAP Center Team and Volunteers participated in the Avon Walk for Breast Cancer in Santa Barbara, CA on September 12, 2010. The team staffed a cheering station to give moral support to thousands of walkers, mostly breast cancer survivors and their relatives and friends.
- 2011 Susan G. Komen Race For The Cure – SVMC MHAP Center Team sponsored for the second time the First Aid Team at the Susan G. Komen 2011 Annual Race for the Cure and participated in the 2011 Expo at Dodger Stadium on March 14, 2010. SVMC/MHAP Center Staff promoted the hospital's breast cancer education and outreach program to more than 10, 000 participants.
- C4-SPA4 Breast Cancer Forum – the Comprehensive Cancer Control Coalition in Service Planning Area 4 (C4-SPA4) Breast Cancer Forum was a unique collaboration of community and faith-based organizations, government officials, businesses, foundations, hospitals, universities and community clinics, pooling resources to reduce the burden of breast cancer by focusing on early detection, better treatment, and enhanced survivorship. Seventy five community leaders from different health care providers attended the event.

### **Success Story**

*Isabel, a low- income and uninsured woman, was at a loss in her attempts to obtain assistance for her medical needs until the day she received a flyer about St. Vincent's Multicultural Health Awareness and Prevention Center. With hope and faith, Isabel went to the MHAP Center office. The staff listened as Isabel described her challenges and pleas for help. They offered their full support and provided recommendations to address her medical needs. The MHAP Center facilitated all the necessary documentation required for Isabel to enroll in the Breast Cancer Early Detection Program. After obtaining a free mammogram she was informed it was positive for breast cancer and was referred for further diagnostic testing and treatment at SVMC. The MHAP Center followed Isabel through the entire process, giving her comfort and hope. Now as a breast cancer survivor Isabel has not only received the vital care she needed, but in her own words said, "An Angel gave me the MHAP Center flyer which saved my life".*

#### **D. Diabetes Prevention/Detection/Management – Community Diabetes Education Program**

The Community Diabetes Education Program (CDEP) at St. Vincent Medical Center (SVMC) was established in July 2007 in response to one of the most significant and rapidly rising health problems facing the community surrounding the Medical Center. Generously funded by the Carrie Estelle Doheny Foundation, the CDEP focuses on two main objectives:

1. Provide comprehensive Diabetes Self-Management Education and Training for people with diabetes. In these classes, participants learn to acquire the skills and knowledge necessary to control their blood glucose in order to live healthier and productive lives. They also learn to prevent and manage acute complications and prevent or delay long-term complications of diabetes.
2. Provide diabetes awareness and diabetes prevention education to community members at high risk of developing diabetes. This is achieved through multiple lectures, workshops, and presentations on lifestyle, nutrition, exercise and awareness of diabetes epidemic.



#### **During 2010–2011, CDEP provided the following free services:**

- 102 Community outreach events including health fairs, lectures, presentations, workshops and screenings where 6,000 adults and youth received education on diabetes awareness and prevention. Those events included 41 visits to the consulates of Mexico, El Salvador, Guatemala and the Royal Republic of Thailand, 15 visits to community centers, 11 visits to elementary and middle school in

the community, attendance to 24 health fairs and 11 visits to Casa de Amigos de San Vicente (Casa).

- 80 blood glucose screening events where 4,825 people at high risk for developing type II diabetes, had their blood glucose tested and were given appropriate counseling and referrals based on blood glucose results.
- 460 men and women newly diagnosed with diabetes, those with poorly managed or diabetes out of control, and their support systems received comprehensive bilingual, culturally-sensitive, age-appropriate and compassionate Diabetes Self-Management Education.
- Lectures and 6 webinars where 189 health workers received training in current trends of diabetes, diabetes management and care of the person with diabetes.
- Workshops and screenings where a group of mothers of children at Casa, had their blood pressure, blood glucose, body weight, waist circumference and body mass index (BMI) assessed and received counseling/education based on results.
- 237 participants with fasting or postprandial hyperglycemia, who did not have history of diabetes and were not aware of hyperglycemia, were counseled and referred to medical services during community blood glucose screenings.
- 65 people with history of kidney/pancreas transplant, received education and support on diabetes management during the Kidney/Pancreas Support Group.
- In addition to the services above, CDEP also provided assistance as needed to those individuals with diabetes who walked in the office seeking assistance and orientation on the management of diabetes.

### **Success Story**

*In 2008, E.A. a 44 year-old male had an industrial accident at work. During the time of the accident, E.A. was working at a factory as a forklift operator without any health benefits. He was admitted to the hospital with several fractures on his body. To his dismay, E.A. was also diagnosed with diabetes. Even though he had never felt any of the common symptoms of hyperglycemia, his blood glucose on admission was 750mg/dl. E.A was discharged from the hospital with insulin and oral anti-diabetics. E.A reports that he was very frightened and confused with his new life style: he had metal pins on his legs, had to learn to walk with crutches, learn to use a blood glucose meter to check his blood sugar, learn to use syringes to self-inject insulin, eat “differently” and put up with intense pain. It is important to mention that he was divorced and a father of four children ages five to eighteen. E.A states that it was “too much to deal with” as a result, he decided to give up on his treatment. Dr. V.S. who had heard about the CDEP during a*

*forum that he had attended at St. Vincent Medical Center, and very frustrated with this “noncompliant patient”, decided to refer him. Assisted with crutches, E.A started to attend Diabetes Self-Management Education classes. Following completion of the course, A.E continued to implement what he learned. In addition, he continued with follow up visits to the program for support, questions and concerns. During one of those follow up visits, E.A, verbalized being very depressed and hopeless. Being a single-parent of four, he was dealing with unemployment, frequent visits to the orthopedist, struggling to control his diabetes and attending frequent meetings at the schools where his kids were misbehaving and getting low grades. E.A was encouraged to speak to the School Psychologist, referred to the Community Health Benefits Resource Center to inquire about food stamps and request guidance regarding health insurance and encouraged to attend a support group. In February 2011, during his last visit to the program, E.A was very happy. He no longer needed insulin, no longer needed crutches, his A1c was 6%, his sister and his ex-wife are helping with the kids, he is learning a new trade and his older kid is attending college.*

#### **E. Hepatitis Education/Detection/Treatment – Asian Pacific Liver Center**

Chronic Hepatitis B (CHB) constitutes one of the greatest health disparities between the Asian-Pacific Islander (API) population and other ethnic groups in the United States. Up to 2 million Americans are chronically infected with Hepatitis B, and over half of them are APIs. While CHB is a common disease among APIs, the majority of infected individuals are unaware of their Hepatitis B status. If CHB goes undetected, two critical health problems may result: (1) up to 30-40 % of carriers may develop serious liver injury, permanent liver scarring (cirrhosis), liver cancer, and liver failure, and (2) the virus can be transmitted to those closest to the carrier, including sexual partners and family members (one carrier can infect several generations of a family).

This disease poses a public health concern for the API population in the Los Angeles area, where a large number of APIs reside. According to the U.S. Census Bureau, among the approximate 10 million people who reside in L.A. County, 13% are API. Based on research, approximately 10% of APIs in the Los Angeles area are chronically infected with Hepatitis B. The majority of these individuals are unaware they are infected, and thus, may be at great risk of developing Hepatitis B-related liver disease. Furthermore, limited English proficiency, immigration status, cultural misunderstandings, and lack of health insurance are often barriers to health care, and therefore, barriers to optimal health for many.

Since its inception in November 2007, the Asian Pacific Liver Center (APLC) at St. Vincent Medical Center has been dedicated to saving lives by providing comprehensive services for screening, vaccinations, education and treatment for people at health risks associated with CHB. APLC's mission is to increase awareness of Hepatitis B in the lay and medical communities through outreach and education programs in the greater Los Angeles area. APLC is also committed to caring for people who are already infected by the disease. APLC focuses its resources on the Asian Pacific Islander (API) communities in Southern California, as they are currently the most disproportionately affected group by CHB in the United States. APLC has screened over 12,000 individuals and has provided hepatitis and liver cancer education to several thousand others at API community venues including schools, churches, temples, community health fairs, community centers and health clinics. This level of hepatitis B outreach is unprecedented in Southern California's Asian Pacific Islander community.



During 2010-2011, APLC conducted 31 screening events, targeting high prevalent communities, mostly Chinese and Korean communities. In addition, APLC was able to expand screening for Cambodian, Vietnamese, and Thai communities. During the year, 2,757 people were screened, 147 were diagnosed with Hepatitis B, and 518 Hepatitis B vaccinations were provided to the susceptible individuals.

The APLC partners with community groups to raise awareness about the importance of hepatitis B testing and treatment through physician presentations, educational materials, and on-site testing at health fairs and community events. The APLC has established partnerships with

Korean Health Education and Information Resource (KHEIR) Center, UCLA and USC APAMSA (Asian Pacific American Medical Student Association), UCLA APA Health CARE, Los Angeles County Public Health Department, Los Angeles County Hepatitis B Free Coalition, Orange County Hepatitis B Free Coalition, Herald Cancer Association, Herald Christian health Center, Asian Liver Foundation, Koryo Health Foundation, Hep B Foundation, Asian Pacific Health Care Venture, Asian Pacific AIDS Intervention Team, Korean Nurses Association Southern California, Korean Resource Center, Korean American Graduate Medical Association, United Cambodian Community and American Cancer Society.

In addition, APLC has become the research center of choice in Los Angeles for trials of CHB drug safety and efficacy. With excellent patient follow-up and a steady referral base of new patients, APLC has become the ideal location for testing approaches to treatment. The APLC is actively conducting 3 different CHB research studies.

Several grant awards helped APLC collect and analyze enough data to not only learn more about HBV, but also to develop a research abstract for conferences in 2010–2011. Using data collected from screening events, Dr. Ho Bae, APLC Medical Director, and Dr. Tse-Ling Fong, APLC Program Director, authored the abstract “*Demographical and Serological Characteristics of Asian-Americans With Chronic Hepatitis B Diagnosed at Community Screenings*”, which was submitted to the 2011 American Association for the Study of Liver Diseases (AASLD) Meeting.

In the coming FY2012, APLC will continue to conduct ongoing free Hepatitis B screenings 2–4 times a month and outreach services for high-risk, low-income communities. The APLC will also carry out ongoing education, outreach and marketing to Chinese, Korean, and other communities that are also at high risk of Hepatitis B. In addition to the generous grant from the Daughters of Charity Foundation and other private and corporate funding sources, APLC will continue to seek funding to both sustain and grow this vital program.

#### **F. Job Training/Career Development for Youth – Volunteer Services**

During 2010-2011, SVMC continued to participate in both government and privately sponsored programs that provide career development for high school and college students and 18,533 hours were donated by these students to SVMC.

In partnership with the Los Angeles Unified School District (LAUSD), through the Regional Occupational Program (ROP), SVMC provided a “community” classroom experience for sophomores, juniors and seniors

from Roosevelt High School, including job training/work experience. These students devoted 2 hours per day, 5 days a week over the course of a 6-week period. Primarily clerical and customer service related duties were assigned in both office/business and clinical departments of the hospital. With LAUSD, we have developed relationships with Los Angeles School of Global Studies and Santee Community High School. Loyola High School has been a partner of St. Vincent Medical Center for many years for their Senior Community Service Hours.



St. Vincent Medical Center also participated in the following job training programs: The Archdiocese of Los Angeles Youth Employment Program, Santee High School, Los Angeles School of Global Studies, Los Angeles City College's Work Study Program and PAVA (Pacific American Volunteer Association). These high school students are placed in areas such as the information desk, patient floors, as well as, other departments throughout the medical center.

These programs assist students in acquiring competencies necessary for entry level employment and also provide valuable instructional experience in an actual work environment with mentoring and teaching from business/industry volunteers. In addition, students interested in healthcare-related careers gain valuable access to health care professionals. SVMC also participates in many community service fairs at various schools such as Loyola High School and Bravo Medical Magnet.

SVMC once again participated in a successful collaborative event with high school students from across the United States who took part in the National Youth Leadership Forum on Medicine. The students, approximately 25 in all, who have shown interest in entering the medical field, came to the medical center for a day visiting departments such as the Lab, Joint Replacement Institute (JRI), Cancer Treatment Center (CTC), Radiology, Catheterization Laboratory and the Operating Room. All students have been given the insight into possible career choices and opportunities during their time here at St. Vincent Medical Center.

## **G. Donated Space for Community Use**

SVMC has maintained a long tradition of offering free or discounted space for the use of community groups and organizations, including conference rooms and parking facilities, offices, residential property and lodging accommodations for the families of patients. Some examples of discounted spaces include but not exclusive to Knights of Malta, St. Nicholas Church, and the Archdiocese of Los Angeles.

### Seton Guest Center

Recovery times are as individual as each patient, and their hospital stays can sometimes be lengthy. Families can remain close to their loved one for as long as necessary by staying at the SVMC's Seton Guest Center. Once a patient is discharged, but must remain close to the hospital, they can stay at the Seton Guest Center as long as a family member or friend is present to care for the patient.



Located on the campus of St. Vincent Medical Center, the Seton Guest Center, which resembles a hotel, first opened its doors in 1994. There are 32 private hotel-type rooms which can sleep up to four people. Each room has a queen-size bed and a queen-size sofa bed, television, a small refrigerator and private bath. The community kitchen has a refrigerator/freezer, a microwave and a toaster oven. A laundry room is available with washer and dryer. The Seton Guest Center also has a computer with Internet access and some areas have wireless capabilities.

The patients and family members served are generally from Northern, Central & Southern California; however, families from across the U.S. and from around the world including England, Hong Kong, Egypt, Australia and Israel to name a few were also served. On average, the guest center serves 120 patients and 552 family members per month. No one is turned away for their inability to pay. During FY2010–2011, Seton Guest Center provided discounted lodging for about 2,000 people valued at \$315,700.

#### H. Transportation Services

Lack of access to transportation is a major barrier to health care for many residents living in SVMC's primary service area. This problem is being addressed through the provision of patient shuttle vans directly operated by SVMC between the patient's home and the hospital.



Service is provided at no charge within a 15-mile radius of SVMC. When use of the shuttle vans is not feasible, patients in need of

transportation are issued taxi vouchers. These transportation resources are funded in part by generous grants from the Daughters of Charity Foundation and QueensCare. During 2010–2011, approximately 6,019 patients were provided transportation services including those referred for services at SVMC through its various community benefit programs.

## VI. Community Benefit Plan: 2011–2012

**Benefit/Activity:** Information, Enrollment & Referral – Health Benefits Resource Center (HBRC)

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**Community Need:** Low income individuals and families have limited access to health care services and limited resources for food and social services.

**Goal:** Increase access referral and navigation assistance for health care insurance and government sponsored programs.

- Objectives:**
1. Outreach  
Participate in outreach events and provide information on available health programs and services. HBRC will be attending at least two school based events, 4 community health fairs and 4 workshops.
  2. Health Access Program Applications  
Complete and submit 540 new applications to health programs administrator to determine medical coverage benefits.
  3. CalFresh Applications  
Complete and submit 252 new applications to the Department of Public and Social Services (DPSS) to determine benefit allotment.
  4. Health and Social Support Referrals  
Make 1,000 referrals to government and/or private safety net providers (LA County Ability to Pay; Outpatient Reduced Simplified Application (ORSA), Public Private Partnership (PPP), Prescription Program Assistance (PPA), Info Line (211), food banks, housing emergency shelters, So. CA Edison, shoes and/or school uniforms and St. Francis Right to Health Project.
  5. Utilization/Post Enrollment  
Complete 50 Primary care changes with HBRC assistance.
  6. Retention of Services  
Complete 100 Annual re-determinations.

- Evaluation Indicators:**
1. Number of outreach events attended
  2. Number of new health and CalFresh applications submitted
  3. Number of Annual Re-determinations
  4. Number of safety net and social support referrals

5. Number of families assisted with case management /trouble shooting
6. Number of individuals receiving HBRC fliers
7. Name, date and location of two major outreach events and four school based events
8. Name, date and location of faith and community based business partners

**Partners:**

1. Private and Public schools
  - Daughters of Charity Sponsored Schools
  - Los Angeles Unified School District
  - PACE Head Start
  - USC Head Start
2. Faith and Community-Based Organizations
3. Medical providers, e.g.: THE Clinic, Mon Señor Oscar Romero Clinic (Adult and Children), KHEIR Clinic, Order of Malta Clinic, St. Ana Women’s Clinic, Asian Pacific Liver Center, Camino Nuevo Family Clinic
4. Los Angeles County Department of Public and Social Services
  - CalFresh Outreach Unit Wilshire Special
  - Medi-Cal Outreach Unit District #16
5. St. Francis Medical Center
6. General Consulates (Mexico, El Salvador, Thai, Guatemala)
7. Women Infant and Children (WIC)
8. FAME-First American Methodist Church
9. SVMC Patient Access Team (Admitting, Patient Financial Services, Case Management, Social Services)
10. Private Physician
11. Amanecer Community Counseling
12. Maternal Child Health Access
13. L.A Care Family Resource Center
14. Healthy School Food Coalition

**Benefit/Activity:** **Youth and Neighborhood Outreach Services – Casa de Amigos de San Vicente (Casa de Amigos or Casa)**

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**Community Need:** Access to gang diversion and youth and family development programs.

**Goal:** Provide children and their families opportunities to enhance their academic, cultural, spiritual and athletic development.

**Objectives:** 1. Maintain and expand the programs and services offered by Casa de Amigos Community Center.

2. Provide parents of children enrolled in Casa parenting education programs and access to a community resource library.
3. Demonstrate measurable improvement in reading and math skills of children enrolled in Casa academic programs.
4. Implement programs that foster parent-child communication and family values.
5. Collaborate with agencies that will provide job training programs and job placement opportunities for youth and parents.
6. Provide vital social services referrals to Casa participants and their families.
7. Improve the health of all participants through involvement in team sports, tournaments, karate training, and self defense instruction.
8. Provide a safe environment for recreation and learning for residents in the immediate neighborhood surrounding SVMC.

**Evaluation Indicators:**

1. Number of participants served
2. Evaluation of reading and math skills
3. Feedback from parents
4. School progress reports
5. Assessment of performance in special events

**Partners:**

1. Homework Tutoring
  - Archdiocesan Youth Program
  - Boy Scouts – Learning for Life
  - Cal State Los Angeles
  - Casa Associates
  - China Town Service Center
  - Glendale Community College
  - No Child Left Behind program
  - Pasadena Community College
  - UCLA Youth Program
2. Adult Education
  - Casa Computer Classes
  - Mexican Consulate
  - Oscar Romero Mental Health Services
  - Promotoras Comunitarias
3. Enrichment Activities
  - Boy Scouts
  - Breese Foundation

- CHILL Program
  - Heart of Los Angeles (HOLA)
  - Kicks for Kids Galaxy Foundation
  - Los Angeles County Youth Probation
  - Los Angeles Parks and Recreation
  - REI
  - Salvation Army
4. Employment
- Archdiocesan Youth Program
  - Breese Foundation
  - China Town Service Center
  - Los Angeles WorkSource Centers
  - Marriott Foundation
  - UCLA Youth Program
5. Health Services
- Clinica Oscar Romero
  - Coalition on Community Health/Asthma
  - QueensCare
  - St. Johns Clinica
  - St. Vincent Medical Center
6. Counseling Services
- Clinica Oscar Romero
  - Coalition on Community Health/Asthma
  - St. Johns Clinic
7. Other
- California Highway Patrol
  - Doheny Foundation
  - Los Angeles County Court House
  - Los Angeles County Toy Loan Program
  - Los Angeles Police Department
  - Pico Union
  - Shoe Outlet Stores
  - Staples Center Foundation
  - Toys for Tots US Marines 4th Division
  - UPS

**Benefit/Activity:** **Information, Education, Screening and Referral Services – Multicultural Health Awareness and Prevention (MHAP) Center**

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**Community Need:** Access to primary and preventive care, health education, referrals for specialty services, early cancer detection and risk factor reduction for diabetes, obesity and heart disease.

**Goal:**

1. Increase breast cancer awareness and knowledge in the targeted Latino, Korean, Filipino, Thai communities, and other vulnerable populations in central Los Angeles by establishing a lasting breast care network with organized information and resource sharing among health care professionals and women's organizations in these communities.
2. Collaborate with faith-based organizations and community organizations to assist underserved populations obtain primary care, health education and screenings, health information, obesity reduction measures, medical referrals and guidance on using health care system.
3. Increase community involvement and encourage active participation of community partners and organizations in MHAP Center community outreach and education program.
4. Improve the quality of life of cancer patient through programs that enhance physical and emotional well-being.

**Objectives:**

1. Refer between 800-1000 women for clinical breast examinations and screening mammograms at the SVMC Radiology Department and/or CDC partnering agencies, such as the KHEIR Clinic and Asian Pacific Health Care Venture Clinic.  
Referrals to clinical breast examinations and annual mammogram screenings through:
  - 5,000 flyers distributed to 30 health and nonprofit agencies.
  - A minimum of 15 community presentations per year on the importance of breast cancer early detection through clinical breast examinations, breast cancer screenings, and breast self examinations.
2. Contact up to 100,000 people from multicultural communities and educate them about health issues on cancer, obesity, nutrition, diabetes and hypertension through one-to-one educational contact, group workshops and lectures and other educational messages through media.
3. Increase screening services including prevention through multicultural related activities such as community festivals, health fairs and exhibits, and other religious and cultural affairs.
4. Conduct at least 12 education classes on obesity and nutrition in the community.

5. Continue to participate in at least 12 community health fairs and provide health and safety information to at least 10,000 people.
6. Collaborate with partnering organizations, including LAUSD nurses to conduct health education in nutrition and obesity and diabetes screening and identify children from approximately six schools who are overweight and/or obese and at-risk of developing or who have already been diagnosed with type II diabetes.
7. Continue to implement SVMC annual health fair and maintain a target of more than 1,000 beneficiaries and 30 exhibitors.
8. Provide annual flu shots to 500-800 patients.
9. Continue weekly nutrition and diabetes classes in English, Korean and Spanish and expand same services to other multicultural communities.
10. Continue the tri-lingual health promoter program that provides blood pressure, body composition analysis and nutritional screening to multicultural communities.
11. Offer cosmetic counseling and education for female cancer patients quarterly.

**Evaluation Indicators:**

1. Number of people screened
2. Number of patient referrals
3. Number of educational materials distributed
4. Number of faith-based organizations affiliated
5. SVMC Health Fair provider feedback
6. Reduction in Body Mass Index (BMI) & Blood Pressure in participants
7. Number of women screened
8. Number of cancers detected
9. Number of annual returns
10. Number of community events
11. Number of attendees at community events
12. Number of women referred for screening (both insured and uninsured)
13. Community feedback and evaluation
14. Number of community organizations served
15. Number of community physicians & nurses contacted
16. Number of programs conducted
17. Formal and informal feedback from patients, families and physicians
18. Results of Client Intake Forms Survey

**Community  
Partners:**

1. Foreign Consulates in Los Angeles & Government Officials Offices
  - Mexican Consular Office
  - Central American Consular Offices (El Salvador, Guatemala, Nicaragua, Costa Rica & Honduras)
  - Korean Consular Office
  - Philippines Consular Office
  - Royal Thai Consular Office
2. Government Organizations
  - Los Angeles Unified School Districts, School Nursing Services
  - LA City Public Health
  - LA County Public Health Department
3. Government Officials Offices
  - Office of Senator Gilbert A. Cedillo
  - Office of Assembly Member John A. Perez
  - Office of Assembly Member Mike Davis
  - Office of Assembly Member Kevin De Leon
  - Office of City Council President Eric Garcetti
  - Office of City Council Member Ed Reyes
  - Office of City Council Member Tom Labonge
4. Health Care Organizations and Medical Provider
  - AltaMed Health Service
  - American Cancer Society
  - American Diabetes Association
  - KHEIR Community Health Clinic
  - Asian Pacific Health Care Venture
  - LA Care Health Plan
  - Los Angeles Office of Women's Health
  - Oscar Romero Clinic
  - Partnered for Progress, Inc.
  - Public Health Nurse Resource Group
  - St. Francis Medical Center
  - The Wellness Community
  - To Help Everyone (T.H.E.) Clinic
  - UCLA Eye Mobile Unit
  - Vision Y Compromiso Health Network Center
  - Women's Breast Center
  - Health Net
5. Religious Organizations
  - St. John Catholic Church
  - Korean LA Central SDA Church
  - St. Gregory Catholic Church

- Hispanic Seventh Day Adventist Church
  - Holy Cross Catholic Church
  - Korean Catholic Renewal Movement of Southern California
  - Eastern Presbyterian Korean Church
  - Office of the Filipino Ministry, Archdiocese of Los Angeles
  - Filipino Priest Association in America
  - Our Lady of Loreto Church
  - Our Lady Queen of Angeles Church
  - St. Agnes Church Korean Pastoral Council
  - St. Basil Parish Korean Ministry
  - St. Columban Church Filipino Ministry
  - St. Columban Missionary
  - St. Genevieve Parish Fiesta Committee and Pastoral Council
  - Wilshire Presbyterian Church
6. Adult and Senior Centers
- Menorah Housing Foundation
  - 2nd Century Adult Center
  - Echo Park Senior Housing Center
  - Korean Adult Senior Centers
  - Los Angeles Central Adult Day Care Center
  - Terry Senior Apartment
  - Wilton Korean Senior Housing Center
  - Silverlake Adult Day Care Center
  - Steel Plaza Senior Apartments
7. Print and Media
- Asian Journal Group, Inc.
  - Balita Media Group Inc.
  - Dia-A-Dia Newspaper
  - HOY Los Angeles Times Media Group
  - Korea Catholic Times
  - Korea Times Daily
  - New American Media Group
  - Radio Guadalupe
  - Radio Korea
  - Vida Nueva Catholic Magazine
8. Community Based Organizations and Civic Groups
- Latino and Other Local Partner Organizations
    - California Resource Center (CARECEN)
    - Bernardina's Foundation
    - Camara De Comercio El Salvador California (CCESCA)
    - Casa de la Cultura de Guatemala

- Chamber of Commerce El Salvador-Ca
- Esperanza Community Housing
- Hispanic United Brotherhood USA (HUBUSA)
- IDEPSCA (Institute of Education for Southern California)
- LA Derby Dolls Community
- Latino Behavioral Health Services
- Mexican American Opportunity Foundation - Social Service
- New Economic for Women
- Pico Union Neighborhood Council
- Regional Hispanic Chamber of Commerce
- Rescatando Salud
- Vision Compromiso Health Network Center
- Behavioral Health Services
- Filipino
  - Philippine Medical Association of Southern California (PMASC)
  - UERM Medical Alumni Association of SC
  - Mother Movement Inc.
  - Filipino American Community of Los Angeles (FACLA)
  - Filipino American Senior Citizens of Los Angeles (FASCLA)
  - Filipino Ministry of Council of Servant Leaders (FMCSL)
  - Golden Lions International of Los Angeles
  - Historic Filipino Town Inc.
  - Kalayaan 2011 of Southern California
  - Leyte Samar Association, Inc.
  - Philippine Heritage International
  - Health Care Service International
  - San Fernando Valley Filipino American Chamber of Commerce
- Korean
  - Korean American Federation of Los Angeles
  - Korean American Women's Association
  - Korean Festival Foundation
  - Korean Nurses Assoc. of So. California
  - Korean Nurses Association (LA Chapter)
  - Korean Resource Center
  - PAVA
  - Saint Agnes Korean Parent Club
  - St. Agnes Parish Pastoral Council for Korean
  - St. Basil Korean Catholic Church Pastoral Council
  - St. Paul Catholic Church Korean Pastoral Council

**Benefit/Activity: Diabetes Prevention/Screening/Management –  
Community Diabetes Education Program (CDEP)**

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**Community Need:** Access to comprehensive, bilingual, culturally-sensitive, compassionate, safe and effective Diabetes Self-Management education and training. Access to factual information and education on prevention of type II diabetes.

**Goal:**

1. Provide undeserved people with diabetes or with pre-diabetes the skills and knowledge necessary to manage/control their diabetes and enable them to live healthier productive lives.
2. Provide diabetes awareness and diabetes prevention education to community members at high risk for developing diabetes type II and its complications.

**Objectives:**

1. Continue to provide free comprehensive Diabetes Self-Management Education classes to people with diabetes and pre-diabetes.
2. Continue to provide free presentations and workshops on healthy life style, nutrition, exercise, and healthy weight to community adults and children at high risk for developing diabetes.
3. Continue to identify patients admitted to the hospital with diabetes out of control and/or complications of diabetes, and re-channel them to proper management of diabetes by means of appropriate education and training based on findings during assessment.
4. Continue with active participation in community outreach by attending large health fairs and community events. Purpose of outreach will be to provide blood glucose screening, diabetes awareness and diabetes prevention education. Make appropriate referrals and follow ups based on results of screenings.
5. Work with partner organizations on different community settings and offer professional support and guidance as needed and as requested.
6. Maintain a data base to track classes, screenings, referrals, events participations and sessions with patients.

**Evaluation Indicators:**

1. Number of participants in classes
2. Number of people screened
3. Number of educational materials distributed
4. Number of patient referrals
5. Number of Health Fairs and community presentations

- Partners:**
1. American Diabetes Association
  2. Casa de Amigos de San Vicente
  3. City of Los Angeles
  4. Community Physicians
  5. Royal Republic of Thailand Consulate in Los Angeles
  6. Daughters of Charity Health Benefit Resource Center
  7. El Salvador Consulate in Los Angeles
  8. Los Angeles Unified School District School Nurses
  9. Seven Day Adventist Church
  10. Holy Cross Community Center
  11. Mexico Consulate in Los Angeles
  12. Our Lady Queen of Angels Church
  13. Guatemala Consulate in Los Angeles
  14. New Economics for Women Organization
  15. St. Basil Korean Community Center
  16. SVMC Asian Pacific Liver Center
  17. SVMC Case Management and Social Services Dept.
  18. SVMC Education Department
  19. SVMC Meals-on-Wheels
  20. SVMC MHAP Center
  21. SVMC Kidney/Pancreas Transplant Program
  22. SVMC Clinical Nutrition Department

**Benefit/Activity:** **Hepatitis B Education/Screening/Treatment – Asian Pacific Liver Center (APLC)**

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- Community Need:**
1. Education and screening for individuals at risk for Hepatitis B.
  2. Follow-up cares for individuals who are already infected and treatment if indicated.
  3. Prevention by vaccinations for individuals who are susceptible to Hepatitis B.

**Goal:** Provide education, free screening for those at risk of hepatitis B, and vaccinations for those who are susceptible and to provide culturally sensitive treatment and surveillance measures for those already affected.

- Objectives:**
1. Increase awareness to the at risk population (Asian Pacific Islanders) of hepatitis B and chronic liver disease, such as liver cirrhosis and liver cancer.
  2. Educate patients, local health providers, and community members about prevalence, risks, and complications of chronic Hepatitis B.
  3. Screen at least 2,500 high-risk individuals.

4. Establish new partnerships with 2 service agencies, 5 Churches, and 2 temples in the Asian Pacific Islander Community.
5. Organize at least 24 screening events for the high-risk population.
6. Participate in at least 7 community health fairs and provide screenings and information about chronic Hepatitis B.
7. Provide culturally sensitive care and treatment options.
8. Provide surveillance for prevention of cirrhosis and liver cancer.
9. Offer ongoing support for social aspects of chronic illness management.
10. Continue collecting Screening Data
11. Conducting at least 1 Hepatitis B research successfully
12. Continue developing abstracts and manuscripts for national conferences and publications.

**Evaluation Indicators:**

1. Number of patients screened
2. Number of service agencies and churches/temples affiliated
3. Number of educational materials distributed
4. Number of health fairs participated in
5. Number of hepatitis B patients from screenings seen at the APLC and/or other physician for follow-up care
6. Health fair provider feedback
7. Number of medical article publications
8. Number of completed research projects

**Partners:**

1. American Cancer Society
2. Asian Liver Foundation
3. Asian Pacific AIDS Intervention Team
4. Asian Pacific American Legal Center
5. Asian Pacific Health Care Venture
6. Chinese American Citizens Alliance
7. Hepatitis B Foundation
8. Herald Cancer Association
9. Herald Christian Health Clinic
10. Korean American Graduate Medical Association
11. Korean Health Education and Information Resource (KHEIR) Center
12. Korean Nurses Association, Southern California
13. Korean Resource Center
14. Koryo Health Foundation
15. Los Angeles County Hepatitis B Free Coalition

16. Orange County Hepatitis B Free Coalition
17. Los Angeles Public Health Department
18. Asian Pacific American Medical Student Association, UCLA and USC
19. UCLA APA Health CARE
20. UCLA Asian health Corps (APHC)
21. UCLA Vietnamese Community Health (VCH)
22. United Cambodian Community

**Benefit/Activity:**     **Job Training/Career Development Services – Volunteer Services**

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**Community Need:** Opportunities for economic and employment development.

**Goal:** To provide opportunities for job training and career development for youth, 16 years of age and older from lower socioeconomic communities.

- Objective:**
1. Continue participation in government and privately-sponsored training programs.
  2. Continue a partnership with LAUSD and ROP to provide community classroom and on-the-job training.
  3. Continue to provide tours of the Medical Center for students and others interested in health careers.
  4. Participate in the planning process for high school job training and development programs.
  5. Develop new partnership with: Cal State L.A. – Internship program; Youth Policy Institute Workforce Department program; the Transportation and Communication Trade and Vocational Training program (TCU) and the L.A. Job Core.
  6. Collaborating with many career colleges, such as UEI and ATI, to provide training volunteer hours.

- Evaluation Indicators:**
1. Number of students participating in a job training program
  2. Number of students completing the job training program
  3. Number of students finding employment utilizing their job training skills
  4. Supervisor and student's job training checklist
  5. Written evaluations by students taking tours

- Partners:**
1. American Career College
  2. Archdiocese of Los Angeles

3. Concorde Career College
4. Los Angeles City College
5. Los Angeles School of Global Studies – Miguel Contreras Learning Complex
6. Los Angeles Unified School District
7. Loyola High School
8. Multicultural Area Health Education Center
9. Regional Occupational Program – ROP Roosevelt High School
10. Santee Charter Community School
11. USC Trojan Health Volunteers
12. UTI Career Training College

**Benefit/Activity: Charity Care**

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**Community Need:** Access to primary and specialty care.

**Goal:** Ensure uninsured patients referred to SVMC are provided care, as hospital resources permit.

- Objectives:**
1. Maximize the utilization of the QueensCare Fund.
  2. Collaborate with SVMC Medical Staff in the provision of charity care.
  3. Provide an avenue for uninsured patients to enroll in health programs.

- Evaluation Indicators:**
1. Number of patients admitted
  2. Amount spent on charity care
  3. Number of people enrolled into health coverage programs

- Partners:**
1. QueensCare
  2. SVMC Medical Staff

**Benefit/Activity: Services to MediCal Patients**

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**Community Need:** Access to primary and specialty care.

**Goal:** Ensure MediCal patients referred to SVMC are provided inpatient and outpatient care.

**Objective:** Collaborate with SVMC Medical Staff in the provision of inpatient and outpatient care to MediCal eligible patients.

**Evaluation Indicators:**

1. Number of patients admitted
2. Net cost of services provided to MediCal patients

**Partners:**

1. Federal and State governments
2. SVMC Medical Staff

**Benefit/Activity:** **Donated Space for Community Use**

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**Community Need:** Access to quality housing/lodging, office space and meeting room facilities.

**Goal:** Provide free or discounted office, meeting and lodging space to community organizations and patient families to address the shortage of quality space in the area surrounding the Medical Center.

- Objectives:**
1. Continue to provide discounted space for the Knights of Malta Free Clinic.
  2. Continue to operate the Seton Guest Center.
  3. Continue to provide discounted parking space for St. Nicholas Church.
  4. Continue to offer discounted meeting room, parking and audiovisual facilities for community organizations.

**Evaluation Indicators:**

1. Number of people benefited
2. Value of donated space
3. Feedback from tenants and organizations receiving space
4. Verbal and written communications from families using Seton Guest Center

**Partners:**

1. Daughters of Charity
2. Knights of Malta Clinic
3. SVMC Medical Staff
4. St. Nicholas Church

**Benefit/Activity:** **Patient Transportation Services**

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**Community Need:** Low cost transportation to access medical services.

**Goal:** Provide underserved and low-income patients reliable and safe transportation to St. Vincent Medical Center.

- Objectives:**
1. Continue to provide taxi vouchers to patients lacking transportation.
  2. Continue to operate a van service transporting patients to SVMC and home.

**Evaluation**

- Indicators:**
1. Number of patients served
  2. Feedback from riders
  3. Feedback from hospital departments
  4. Feedback from Medical Staff

- Partners:**
1. QueensCare
  2. Taxi companies

**VII. Inventory and Economic Valuation of All Community Benefits**

During 2010–2011, SVMC provided a total of \$50,871,850 community benefit services including Medicare and a total of \$17,146,290 excluding Medicare. Total benefits for persons living in poverty amounted to \$17,021,368. Attachment “A” offers a detailed inventory and classification of the services and activities provided by St. Vincent Medical Center during 2010–2011 and their economic value.

**VIII. Plan Review**

The SVMC Community Benefit Plan will be reviewed by the Community Benefit Committee and submitted to the SVMC Board of Directors for final adoption. Upon completion, the plan will be shared with the hospital’s management team.

The plan will also be disseminated to external constituencies. Collaborators will be informed about the plan through our various program steering committees, which include representation of outside organizations or affiliates that partner with SVMC to implement community benefit programs. Efforts will also be made to share the plan with community networks and coordinating groups that bring together representatives of key health and social service organizations of our community. The SVMC Foundation publication “The View” will serve as a vehicle to disseminate the information about the plan to the hospital’s diverse external constituencies.

**ST. VINCENT MEDICAL CENTER  
 QUANTIFIABLE COMMUNITY BENEFIT  
 CLASSIFIED AS TO LIVING IN POVERTY AND BROADER COMMUNITY  
 FISCAL YEAR 2011 (JULY 2010 - JUNE 2011)**

	<b>Persons Served</b>	<b>Net Community Benefit</b>
<b><u>BENEFITS FOR PERSONS LIVING IN POVERTY</u></b>		
Charity Care at Cost	998	\$ 1,083,454
Unreimbursed costs of public programs		
- Medi-Cal		
- Other indigent programs	16,666	15,431,990
Community Health Improvement Services	121,538	505,924
Health Professions Education	-	-
Subsidized Health Services	-	-
Cash and In-kind Contributions to Community Groups	-	-
Community Building Activities including CB operations	-	-
<b>TOTAL QUANTIFIABLE COMMUNITY BENEFITS FOR PERSONS LIVING IN POVERTY</b>	<b>139,202</b>	<b>\$ 17,021,368</b>
<b><u>BENEFITS FOR THE BROADER COMMUNITY</u></b>		
Community Health Improvement Services	2,757	124,922
Health Professions Education	-	-
Subsidized Health Services	-	-
Research	-	-
Cash and In-kind Contributions to Community Groups	-	-
Community Building Activities including CB operations	-	-
<b>TOTAL QUANTIFIABLE COMMUNITY BENEFITS FOR THE BROADER COMMUNITY</b>	<b>2,757</b>	<b>124,922</b>
<b>TOTAL QUANTIFIABLE COMMUNITY BENEFITS EXCLUDING MEDICARE</b>	<b>141,959</b>	<b>\$ 17,146,290</b>
Unpaid Costs of Medicare Program	68,094	33,725,560
<b>TOTAL QUANTIFIABLE COMMUNITY BENEFITS INCLUDING MEDICARE</b>	<b>210,053</b>	<b>\$ 50,871,850</b>



### SERVICE AREA MAP

St. Vincent  
Medical Center



<b>ST. VINCENT MEDICAL CENTER</b>  Administrative Policy & Procedure	<b>Page:</b> 1 of 3	<b>Originating Dept.:</b> Administration	<b>Originating Date:</b> 9/10/73	<b>Revised / Reviewed Date:</b> 6/08
<b>SUBJECT:</b>  Charity Care	<b>APPROVAL:</b>  <input type="checkbox"/> Management Council			
<b>REFERENCES:</b> Formerly Policy #1-7				

**PURPOSE**

In accordance with the fundamental mission and philosophy of the Daughters of Charity, and in order to continue the corporate purposes of St. Vincent Medical Center, the following policies and procedures are adopted.

**POLICY**

1. Within the funds allocated, charity care will be given to those persons whose financial condition is such that they cannot pay either in part or in total for the services required.
2. This financial assistance will be given without regard to the race, color, creed, age, sex or national origin of the applicant.
3. Normally, charity care must be applied for and approved before the patient is admitted to the hospital. Exceptions may be made to this requirement based upon individual circumstances.
4. Charity care will be given to all that apply or are otherwise identified, and are determined to be in need of such consideration. Examples of eligible cases include the following:
  - A. Patients who have not been able to secure insurance coverage, for health reasons or other, and do not have adequate personal finances or other resources.
  - B. Patients who have limited insurance coverage or whose coverage has been exhausted.
  - C. Patients determined to need our specialized services, whose coverage does not apply here, and who lack adequate financial resources.
5. Charity care is available to outpatients on the same bases as inpatients.
6. Ordinarily, the admitting physician will be notified of the consideration being made by the hospital and asked to give a comparable consideration. If the physician originates the request, such consideration is a necessary condition for approval.
7. Every effort will be made to preserve the dignity and self-respect of each applicant for charity care. To this end, the patient is asked to cooperate in seeking available alternatives and asked to participate to the extent of his/her ability.
8. Information regarding any financial consideration given will be held in strictest confidence and disseminated only to those areas and individuals deemed necessary.
9. Funds required to give charity will be available from the following sources, and in this order:
  - A. Interest earned on certain endowment funds.

<b>ST. VINCENT MEDICAL CENTER</b>	<b>Page:</b>	<b>Originating Dept.:</b>	<b>Originating Date:</b>	<b>Revised / Reviewed Date:</b>
Administrative Policy & Procedure	2 of 3	Administration	9/10/73	6/2008
<b>SUBJECT:</b> Charity Care				

B. Applicable donations.

C. Operating budget of the hospital.

10. Final approvals are required as follows:

Under \$5,000 Business Office Manager

\$5,000 - \$499,999 CFO

\$500,000 and over Vice President, Finance

The above approvals are to be considered cumulative; that is, before presentation to the Vice President, Finance all prior approvals must be obtained.

11. At least semi-annually, a formal report will be submitted to the Vice President, Finance. This report will indicate the amount of charity care given and the status of the funds for this purpose.

### PROCEDURE

PHYSICIAN, PATIENT, OR OTHER  
APPROPRIATE PARTY

1. Make known that patient's apparent financial need to the Business Office Manager or CFO.

CFO

2. Request review of financial status and estimated charges from Business Services.

BUSINESS SERVICES

3. Obtain as much information as possible on the patient's financial status. Request Patient Financial Counselor to interview patient and/or family, if deemed appropriate.

FINANCIAL COUNSELOR

4. On request, contact patient or designated family member and arrange a personal interview to obtain the necessary and relevant information. Refer results to Business Office Manager.

5. Assist in obtaining any additional information available from physician, as requested.

6. After thorough review and evaluation of the request and all relevant information, refer to Business Office Manager, with a recommendation on the extent of consideration.

BUSINESS OFFICE MANAGER  
CFO VP FINANCE  
BUSINESS SERVICES

7. Review and approve, if appropriate.

8. Notify patient, Physician, and Admitting of the financial arrangements.

<b>ST. VINCENT MEDICAL CENTER</b> Administrative Policy & Procedure	<b>Page:</b> 3 of 3	<b>Originating Dept.:</b> Administration	<b>Originating Date:</b> 9/10/73	<b>Revised / Reviewed Date:</b> 6/2008
<b>SUBJECT:</b> Charity Care				

9. Mark records as for a private pay patient, and process as dictated by procedures on allowances. No billing is sent to the patient, if full charity is given, and file is clearly marked to this effect.

BUSINESS OFFICE MANAGER

10. Process write off.

ACCOUNTING

11. Prepare semi-annual status report on charity care for the Vice President, Finance.