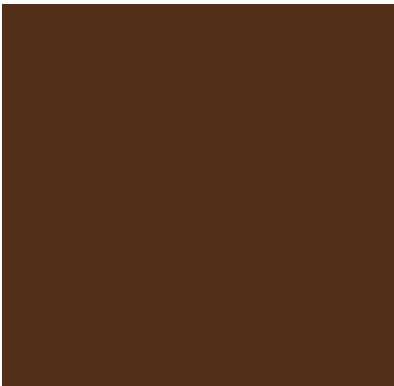
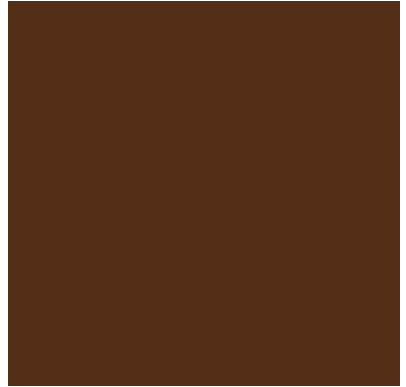
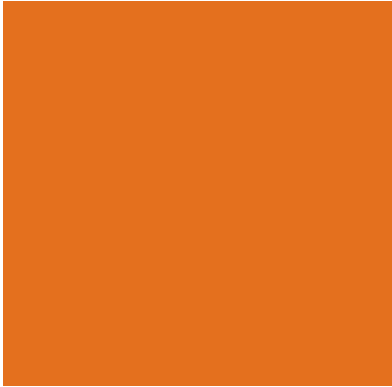


# California Pacific Medical Center

## Report to the Community

2009





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# Community Benefit Program Overview

The goal of California Pacific Medical Center's (CPMC) Community Benefit Program is to make the health care system in San Francisco more accessible and equitable. We do this by reducing gaps in the health care delivery system that impact a diverse array of racial, ethnic, sexual orientation, and socioeconomic groups.

CPMC provides health care to poor and underserved patients through a variety of programs, including:

- 1 Charity care for uninsured patients with family incomes below 400% of the federal poverty level
- 2 Healthy San Francisco partnerships
- 3 Unpaid cost of care for Medi-Cal patients
- 4 CPMC's own community health programs
- 5 Health programs through community partnerships
- 6 Grants and sponsorships for community-based organizations delivering health and social services to the underserved

In addition, CPMC invests in medical education, workforce development, and research that benefits the broader community. This includes:

- 1 Physician training and clinical experience for medical students
- 2 Clinical rotations for nursing students to supplement their classroom training with exposure to real-time care delivery
- 3 Training internships for allied health care careers
- 4 Opportunities for community workforce development participants to come to CPMC for education and training
- 5 Support for clinician and researcher collaborations to advance patient care

## COMMUNITY HEALTH PROGRAMS: SERVICES TO THE POOR & UNDERSERVED

### Traditional Charity Care

Traditional charity care is the care CPMC provides for people who come to the emergency room but are uninsured and unable to pay. CPMC's charity care policy offers free care to uninsured people with family incomes below 400% of the federal poverty level, regardless of immigration status. Other San Francisco hospitals provide free care to a segment of this population, and require sliding-scale payments at income levels above 100%–350% of the federal poverty level. In 2009, CPMC extended this community benefit to more than 3,500 people.

### Healthy San Francisco at CPMC

An important feature of CPMC's charity care contribution is its participation in Healthy San Francisco (HSF), a citywide universal health access program for the uninsured. CPMC partners with NEMS (North East Medical Services), one of the largest health care agencies serving Asians in the U.S., and the medical home for approximately 12,000 of HSF's 52,000 participants. Through the HSF NEMS/CPMC Partnership, 23% of HSF participants have access to CPMC for inpatient care, freeing up resources for HSF patients who largely rely on San Francisco General Hospital for hospitalization. (HSF patients served are a subcategory of the 3,500 people benefiting from charity care.)

### Medi-Cal Patients at CPMC

Community benefit also covers the unpaid costs of caring for Medi-Cal patients. Medi-Cal is California's public health insurance program that provides needed health care services for low-income individuals, including families with children, seniors, persons with disabilities, people in foster care, pregnant women, and low-income people with specific diseases such as tuberculosis, breast cancer, or HIV/AIDS. Medi-Cal patients have access to care at each of CPMC's four campuses. In 2009, CPMC extended this community benefit to more than 19,900 people.

### Programs Operated by CPMC

To further strengthen San Francisco's safety net, CPMC creates and sustains innovative programs and services that address significant gaps in the city's health care delivery system. Among CPMC institutions under this umbrella are St. Luke's Health Care Center, including HealthFirst, Center for Education and Prevention; Bayview Child Health Center; Kalmanovitz Child Development Center; African American Breast Health and the Sister to Sister Breast Health programs; and Coming Home Hospice.

## Programs Through Community Partnerships

CPMC looks to community partnerships as a way to leverage community benefit funds and maximize their impact on diverse communities. Through these partnerships, CPMC offers its clinical resources to established programs and institutions that are well positioned to reach target populations. CPMC's flagship partnership is a 40-year collaboration with the Lions Eye Foundation of California-Nevada to provide free care for low-income patients with complex eye problems. CPMC also proudly participates in Operation Access, Project Homeless Connect, and the San Francisco Hep B Free Campaign, among others.

## CPMC's Grants & Sponsorships

CPMC grants and sponsorships help sustain programs and institutions of high value to specific communities. For example, Bayview Hunters Point Multipurpose Senior Center used a multiyear grant from CPMC to increase use of preventive services by frail elders. Sponsorships allow CPMC to contribute funds to support charitable, educational, and service organizations and events that are part of the city's health and social service network.

## MEDICAL EDUCATION, WORKFORCE DEVELOPMENT, & RESEARCH: BENEFITS TO THE BROADER COMMUNITY

### Education for Physician, Nursing, & Allied Health Careers

CPMC campuses host residents and postgraduate fellows for medical education in specialties ranging from general surgery to retinal transplant. CPMC also provides clerkships to medical students through teaching affiliations with Dartmouth Medical School and the University of California, San Francisco. Dartmouth students who come to CPMC from New Hampshire have the opportunity to train in a large urban medical center, and to work with patients who have diverse medical needs and cultural backgrounds. CPMC is also a major center for nursing education, and offers placements for other health care professionals studying to be therapists, technicians, and caregivers. In the 2009–2010 academic year, CPMC helped train 93 medical residents and 30 fellows in addition to providing placements for medical students. In addition, 355 nursing students from eight nursing schools were provided the opportunity to supplement their classroom learning with real-world training, and 103 students who were training for careers in health care participated in internships at CPMC. In all, CPMC was active in supporting the medical education of at least 581 individuals.

## Community Workforce Development

As the second largest private employer in San Francisco, CPMC is well positioned to benefit the community through workforce development opportunities, which often mature into CPMC jobs for youth and others looking for employment. For example, Jewish Vocational Services (JVS) places clients on the St. Luke's Campus for work readiness training, career exploration, and internships, including 34 clients in 2009 alone. Over the past three years, 15 JVS interns have found employment at St. Luke's, including nine displaced garment workers who are currently full-time, benefited employees in the Environmental Services Department. CPMC won JVS's 2009 Business Leadership award in recognition of its programs. In all, 160 people, many of whom come from disadvantaged households, were placed at CPMC through community workforce development programs in 2009.

## Clinical & Biomedical Research

Research is a valuable tool for advancing science, patient care, and teaching the next generation of health care providers. Clinical investigation stimulates dialogue between scientists and clinicians, with the common goal of producing "bench to bedside" improvements in medical care.

CPMC's Research Institute brings clinicians and researchers together to develop effective treatments and diagnostic technologies for patient care. For example, patients with liver cancer can participate in one of five clinical drug trials. Patients with an interest in exploring complementary medicine can benefit from rigorous trials evaluating approaches such as remote healing for persons with HIV/AIDS or Tibetan and Chinese herbal therapy for breast cancer.

# 2009 Community Benefit Summary & Trends

CPMC follows the “gold standard” for identifying Community Benefit, “A Guide for Planning and Reporting Community Benefit,” published by The Catholic Health Association of the United States (CHA). Quantifiable costs are collected and reviewed by CPMC’s Community Benefit and Finance departments and Sutter Health’s corporate offices before submission to the Internal Revenue Service (IRS) and the California Office of Statewide Health Planning and Development (OSHPD). The table on the next page summarizes CPMC’s 2009 Community Benefit as reported to the IRS.

Community benefit is reported in two broad categories: “Services for the Poor and Underserved” and “Benefits for the Broader Community.” The first includes charity care, unpaid costs for Medi-Cal patients, and support for community health programs that target health disparities. In 2009, 57% of CPMC’s community benefit (\$80.2 million) assured poor and underserved patients had access to medical care. The remaining \$61 million was largely allocated to research and education, CPMC’s contribution to the future of quality health care delivery in the U.S.

- CPMC reported a total community benefit of \$141,363 million for 2009, an increase of \$11.2 million (9%) over the 2008 total of \$130,135 million.
- Gains were concentrated in the charity care portion of CPMC’s community benefit program. CPMC’s charity care contribution exceeded \$10.2 million in 2009. This figure is nearly twice that of its 2007 charity care contribution of \$5.3 million, and shows a 35% (\$2.6 million) increase from 2008 to 2009 alone.
- Unpaid cost of care for Medi-Cal patients accounted for an additional \$59.2 million, compared to \$58 million in 2008.
- As in 2008, CPMC spent \$59.5 on education and research: More than \$30 million was spent on clinical and biomedical research programs, and more than \$28 million on education for physicians, nurses, allied health professionals, and on community workforce development programs.

CPMC TOTAL COMMUNITY BENEFIT	2009 TOTAL COMMUNITY BENEFIT EXPENSE (IN \$'000)	2008 TOTAL COMMUNITY BENEFIT EXPENSE (IN \$'000)	% CHANGE FROM 2008 TO 2009
<b>SERVICES FOR THE POOR &amp; UNDERSERVED</b>			
Traditional Charity Care	\$10,215	\$7,584	35%
Unpaid Costs of Medi-Cal (Medi-Cal shortfall)	\$59,208	\$57,941	2%
Other Benefits for the Poor & Underserved	\$10,871	\$11,403	-5%
<b>TOTAL</b>	<b>\$80,294</b>	<b>\$76,928</b>	<b>4%</b>

BENEFITS FOR THE BROADER COMMUNITY	2009 TOTAL COMMUNITY BENEFIT EXPENSE (IN \$'000)	2008 TOTAL COMMUNITY BENEFIT EXPENSE (IN \$'000)	% CHANGE FROM 2008 TO 2009
Non-Billed Services	\$1,036	\$819	26%
Education & Research, including Workforce Development	\$59,492	\$51,795	14%
Cash and In-Kind Donations	\$502	\$529	-5%
Other Community Benefit	\$39	\$64	-39%
<b>TOTAL</b>	<b>\$61,069</b>	<b>\$53,207</b>	<b>15%</b>

<b>GRAND TOTAL</b>	<b>\$141,363</b>	<b>\$130,135</b>	<b>9%</b>
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*Note: This chart excludes the unpaid cost (shortfall) of Medicare, which is not reported as a Community Benefit to the Internal Revenue Service, but is required by statute for reporting as a Community Benefit to the California Office of Statewide Health Planning and Development. In 2009, the Medicare shortfall was \$62.6 million, which increases the Total Quantifiable Community Benefit to \$203.9 million.*

# Key CPMC Program Descriptions

## ST. LUKE'S HEALTH CARE CENTER & HEALTHFIRST

Community Benefit Contribution	\$2.18 million
SLHCC unique patients served	14,303
HealthFirst unique patients	569
SLHCC total patient visits	46,009
HealthFirst total patient visits (estimated)	1,200

St. Luke's Health Care Center (SLHCC) and HealthFirst, its affiliated center for health education and prevention, is the city's largest private community health center. The care it provides each year significantly expands the city's safety net, and makes services more readily available to publicly insured populations as well as to the uninsured. Without the Health Care Center, many of these patients would turn to the clinics at San Francisco General Hospital, which already operate at full capacity.

The center is organized to provide a full range of obstetric and gynecological care at its Women's Center; well-baby care, well-child care, and care for ill or injured children at its Pediatric Clinic; and primary, acute, and chronic care at its Neighborhood Clinic for teenagers and adults. SLHCC's clinicians and staff are bilingual in English and Spanish, assuring language is not an obstacle to quality care.

With HealthFirst, SLHCC offers the community access to primary care, with a strong emphasis on prevention, outreach, and education. Over the past three years, HealthFirst has focused on best practices in chronic disease management, and particularly on integrating community health workers (CHWs) into the multidisciplinary health care team. CHWs provide health education, help patients improve their self-management skills, and encourage them to receive timely and comprehensive care. In addition to working closely with SLHCC patients, CHWs conduct self-management sessions for adult patients with chronic illnesses at Southeast Health Center in Bayview Hunters Point.

Initial findings from a three-year evaluation of HealthFirst's chronic disease management approach found:

### Diabetes Outcomes

HealthFirst tracked the progress of 114 adult patients (67% women and 66% Spanish-speaking individuals) from January 2007 to December 2009.

- The glycosylated hemoglobin (HbA1C), LDL (low-density lipoprotein), and total blood cholesterol levels were reduced among high-risk patients with diabetes.

- Patient self-management significantly improved among 78 patients from a baseline average score of 56 on a Patient Activation Scale, which means moderate control, to a score of 64.

## Pediatric Asthma Outcomes

HealthFirst followed 214 pediatric asthma patients who were enrolled from January 2007 to December 2009.

- The proportion of pediatric asthma patients with controlled daytime asthma symptoms was 69.2% at baseline and 84.8% at their second follow-up. There was also a decrease in the number of nights that patients were awakened by asthma symptoms.
- Patient self-management scores increased from 62.87 at baseline to 78.35 at the second follow-up.
- A comparison of St. Luke’s Health Care Center patients enrolled in HealthFirst with similar patients not enrolled during the year 2009 indicates that HealthFirst patients experienced a significantly lower rate of emergency room visits for asthma-related diagnoses (16% for HealthFirst vs 46% non-HealthFirst).

## Patient & Provider Satisfaction

- A phone survey of 116 HealthFirst participants found that 98% of patients with diabetes, and 94% of the caregivers of children with asthma, were highly satisfied with HealthFirst services, based on 66 responses.
- A focus group of clinicians whose patients were HealthFirst participants, including two pediatricians, two internal medicine practitioners, and two nurse practitioners, found that these providers were highly satisfied with HealthFirst’s role in helping patients manage their chronic conditions.

## BAYVIEW CHILD HEALTH CENTER

Community Benefit Contribution	\$755,700
Unique patients served	723
Total patient visits	2,820
Mental health visits	353

The Bayview Child Health Center (BCHC) focuses on keeping infants, children, and adolescents healthy, and on closely managing their care when they are ill. Two pediatricians offer routine, preventive, and urgent care, and address prevalent community health issues, such as weight control and asthma management. The center is particularly attuned to the impact of community violence and childhood trauma on children’s mental and physical health. The clinic offers psychological and case management services to client families. Dental services are provided on site through a partnership with Native American Health Center.

CPMC, the Physician Foundation at CPMC, and the CPMC Foundation responded to a compelling community need when they collaborated to open the Bayview Child Health Center in 2007. Bayview Hunters Point's 10,000 children are poor and mostly African American, carrying a disproportionate burden of disease and disability. For example, one-sixth of all children living in Bayview have asthma, a higher rate than in any other part of the city. The center has had an immediate impact on its patients' health: immunization and asthma hospitalization rates for BCHC patients are significantly improved over neighborhood and citywide averages.

BCHC's central goal is to reduce or eliminate health disparities in the community. In 2009, focus areas were early childhood immunization rates, asthma hospitalizations, and nutrition counseling for overweight and obese patients. Outcomes include:

- 91% of patients 2–3 years of age were current on immunizations at the close of 2009. Focused outreach subsequently has raised the rate to 93%. These rates compare favorably with citywide measures that find only 65% of African American and 77% of all children in San Francisco meeting immunization schedules, and are on par with the rate of the top-ranked Medicaid health plan in the country.
- Only two BCHC patients have been hospitalized for asthma since the clinic opened in 2007, as opposed to 25 hospitalizations expected for the same number of children based on Bayview averages.
- 97% of patients with persistent asthma were prescribed asthma controller medication.
- 91% of overweight and 97% of obese patients received nutritional counseling.
- 428 patients completed well-checks.

Additional accomplishments include:

- Secured health insurance for 22% of patients
- Conducted the first Mindfulness Based Awareness pilot for youths with a history of traumatic experiences
- In collaboration with Native American Dental Clinic, provided on-site dental screenings and fluoride applications for more than 100 patients; roughly 20% of these patients had disease severe enough to require referral for dental treatment under sedation or general anesthesia
- Provided 161 high-risk patients with intensive, multidisciplinary care, including collaborative care management among pediatricians, psychologists, nursing, and a case manager
- Provided on-site developmental evaluations through a partnership with the Kalmanovitz Child Development Center

In 2010, BCHC hopes to sustain these outcomes and add a focus on adolescent health by beginning to track adolescent immunization; gonorrhea and Chlamydia screening; and well-child check rates. BCHC will also continue to identify strategies for addressing community violence and childhood trauma.

## KALMANOVITZ CHILD DEVELOPMENT CENTER

Community Benefit Contribution	\$287,688
Unique patients served (estimated)	1,500
Total patient visits (estimated)	17,000

An estimated 14%–19% of children in the U.S. have one and more often multiple conditions that significantly affect their growth and development. Of these children, 85% experience difficulties in one or more functional area, notably learning, social interaction, speech skills, motor skills, and eating.

The Kalmanovitz Child Development Center (CDC) offers multidisciplinary assessment and treatment programs to help children with special needs meet their potential. Comprehensive assessments and family consultations result in multidisciplinary care plans for speech, occupational and physical therapy, developmental psychotherapy, learning disabilities programs, psychopharmacology, developmental/behavioral pediatrics, social skill groups, feeding therapy, and parent support and education. No child is turned away based on ability to pay; 30% of patients seen in 2009 benefited from scholarship assistance.

Outcomes include:

- Families whose child had completed evaluation and treatment at the center are sent brief surveys. Of returned surveys, 97% contained only positive comments.
- CDC's NICU Whitney Newborn Clinic is charged with monitoring the growth and development of babies who were admitted to CPMC's newborn intensive care unit with certain medical conditions or low birth weights. Of 202 eligible babies born in 2009, the center reached 189 (94%) of these families for follow-up.

One of the most painful challenges facing CDC is a greater demand for services than its current facilities can provide. While CDC's waiting list remained between 300–350 children throughout 2009, important progress was made toward expanding services. CDC opened a weekly clinic in San Mateo, and major progress was made in construction of a satellite center in Marin to open in 2010. Further expansions are being explored for the current satellite clinic on the St. Luke's Campus and at Mills-Peninsula Hospital.

## COMING HOME HOSPICE

Community Benefit Contribution	\$973,300
Unique patients served	147

Coming Home Hospice is a residential hospice for terminally ill clients and their families. It provides 24-hour nursing care and personal care in a homelike setting for people who cannot be cared for at home. Coming Home Hospice first opened in 1987 in response to the HIV/AIDS epidemic. Today, while fewer people are dying of AIDS, Coming Home Hospice remains a valued resource for seniors and others in the final stages of disease.

Community benefit support accounts for approximately half of Coming Home Hospice's budget. This assures that high quality residential hospice care is accessible to terminally ill patients, regardless of their ability to pay.

Services provided by the Coming Home Hospice professional staff include medical and nursing care, psychosocial counseling and assistance, spiritual counseling and religious services of choice, massage therapy, medication monitoring and assistance, personal care assistance, and recreational activities.

## AFRICAN AMERICAN & SISTER TO SISTER BREAST HEALTH PROGRAMS

Community Benefit Contribution	\$157,723
Services provided	162 mammograms and 85 other tests and treatments

Breast cancer is the most commonly diagnosed cancer among California women. While women's hope for survival is excellent when breast cancer is diagnosed early, many women face significant cultural, linguistic, and financial barriers to accessing routine screening. The African American Breast Health and Sister to Sister programs address this life-threatening health disparity by building community partnerships, offering community education and outreach, and providing access to screening and follow-up services to uninsured women in underserved communities.

CPMC's African American Breast Health and Sister to Sister programs offer women access to no-cost mammography screening, the crucial element for early breast cancer detection, at both the California and St. Luke's campuses. Women screened through the African American Breast Health and Sister to Sister programs also receive all subsequent breast health diagnostic testing and treatment they need at no cost. Partnering organizations, such as Bayview Hunters Point Senior Center, Calvary Hill Community Church, Glide Health Services, and Lyon-Martin Health Services, refer eligible women for mammography.

Outcome:

- Two of the women who received free screenings in 2009 subsequently were diagnosed with breast cancer. Both are receiving continuing treatment at no cost.

Program goals for 2010 are focused on strengthening the program's outreach network and decreasing the no-show rate by:

- Adding at least four new referral partners
- Phoning women 2–3 days prior to appointments and addressing barriers to keeping scheduled screening appointments
- Partnering with Glide Health to conduct two focus groups with staff on the importance of screening mammograms and eliminating barriers to screening
- Hosting quarterly in-services with staff of referral partners, including analysis of no-show rates to encourage new strategies to assure that patients follow through with screening
- Contacting women who are no-shows to reschedule them, and following through until the screening appointment is completed

# Partnering for Community Benefit

## LIONS EYE FOUNDATION

Community Benefit Contribution	\$1,011,806
Unique patients served (estimated)	600
Surgical procedures, including laser surgeries	523
Total visits	2,700

CPMC's partnership with the Lions Eye Foundation provides access to highly specialized eye care for people without insurance or financial resources. Among its referral sources are many of San Francisco's safety net clinics, including Mission Neighborhood Health Center, Northeast Medical Services, the Haight Ashbury Clinic, and the Department of Public Health clinics. The Lions Eye Clinic, on CPMC's Pacific Campus, is celebrating its 50th year serving those in need through its partnership with CPMC and the Department of Ophthalmology.

Teaching and attending ophthalmologists donate their time and clinical knowledge in the eye clinic and for all surgeries. CPMC's expertise in complex eye procedures and surgeries complements the Lions Eye Foundation's singular mission of restoring "the gift of sight by providing free ophthalmic examinations, operations, and medication to the less fortunate members of our community."

## OPERATION ACCESS

Community Benefit Contribution	\$190,164
Unique patients served	79
Surgical procedures performed in 2009	103
Surgical procedures performed over nine years	400

Operation Access (OA) provides uninsured Bay Area patients, who have limited financial resources, access to diagnostic screenings, specialty procedures, and surgical care at no cost. OA mobilizes a network of 750 volunteer medical professionals and more than 100 health care organizations to provide acutely needed medical care. In 2009 alone, OA received 1,598 referrals for uninsured people with household incomes under 250% of the federal poverty level. Some 60% of OA clients needed interpreters, and 74% came from a working/employed household without job-based insurance.

CPMC supports OA, because it allows CPMC staff to directly address a significant community need for access to specialty care, and plays a role in reducing health disparities. Outcomes demonstrate not only the skill and expertise of staff at CPMC but also their compassion and generosity when volunteering their time:

- A survey of OA clients found 100% of respondents (44) who received care at CPMC reported “excellent” or “very good” surgical results, improved quality of life, improved health, and relief of pain and symptoms.
- The survey also found that CPMC patients reported the highest satisfaction rates of all the Operation Access patients surveyed.
  - 99.5% satisfaction with overall experience
  - 96.3% satisfaction with medical volunteers at consult appointments
  - 99.4% satisfaction with medical volunteers and hospital staff on day of surgery

## HEP B FREE CAMPAIGN

Community Benefit Contribution	\$122,287
Patients screened in 2009	1,003
Patients screened since 2008	3,120

San Francisco Hep B Free is a citywide campaign to establish San Francisco as the first city in the nation that aims to identify and manage every resident with existing hepatitis B virus (HBV), and to vaccinate and protect those at significant risk for infection. This unprecedented campaign provides free hepatitis B testing and vaccinations to Asian and Pacific Islanders (API) and other at-risk adults at locations throughout the city. HBV infection, and the liver cancer and liver failure strongly associated with it, are preventable through vaccination. The vaccine is so effective that the Centers for Disease Control and Prevention and the World Health Organization have called the hepatitis B vaccine the first “anti-cancer” vaccine.

To bring CPMC’s experience and expertise to the campaign, Dr. Stewart Cooper, Sutter Pacific Medical Foundation’s Chief of Hepatology, and Dr. Robert Gish, Medical Director of Specialty Service Development, joined with citywide partners in designing and implementing the San Francisco Hep B Free campaign. The CPMC team of clinical and nonclinical volunteers has developed a mobile program that brings community education and free, confidential testing to city locations, workplaces, and events with high-density API populations. The team also provides free vaccinations and follow-up care based on test results.

In 2009, volunteers from CPMC made hepatitis B testing available at local colleges and locations and events that attract the API communities. For example, more than 450 students and staff at San Francisco State University received free testing at six events in 2009. CPMC volunteer staff also provided testing at a dozen other sites, including the annual Asian Heritage Festival and City College-North Beach. Outcomes in 2009 and for the program’s first two years include:

- Of 1,003 people screened for HBV in 2009, 842 (84%) were from the API community.
- Of the 842 API screened in 2009, 35 (4.1%) were infected with HBV and 278 (33%) lacked the protective antibody. Over two years, the program has identified 116 people with HBV.
- Of the 278 people found to lack the antibody during 2009, 175 were vaccinated through CPMC outreach and follow-up. Follow-up included returning to communities where the screenings were held to provide vaccinations on site. Over two years, a total of 325 were vaccinated.
- Follow-up was accomplished with all individuals infected with HBV, and free consultation was offered to all who were uninsured. In some cases, ongoing treatment was covered by CPMC’s charity care policy.

In 2010, the CPMC program’s third year, outreach will include city workplaces with significant numbers of API employees. In addition, the program anticipates opening Community Asian Liver Clinics at CPMC’s California Campus and Sutter Pacific Medical Foundation’s new Stonestown Clinic. For the benefit of rallying a national and worldwide effort to address the high prevalence of HBV in API communities, Dr. Cooper and Dr. Gish summarized CPMC’s experience in the San Francisco campaign in a Position Statement, which they anticipate will be published in the Journal of Viral Hepatitis in 2010.

## PROJECT HOMELESS CONNECT

Estimated Community Benefit Contribution	\$59,746
Estimated hours	1,003

Project Homeless Connect is San Francisco’s signature program to provide services to its homeless population. An estimated 6,000–12,000 people are homeless on any given night in San Francisco. The mission of Project Homeless Connect is to give San Francisco’s homeless population resources that will help them move off the streets and into housing. More than 1,000 community volunteers partner with government agencies, nonprofits, and the private sector every two months to provide a one-stop shop of health and human services for homeless people.

More than 100 CPMC staff volunteered at Project Homeless Connect's February 24, 2009 event. CPMC staff assisted the 2,497 clients served that day in many capacities. On the health front, 258 people received medical care (with 64 follow-up appointments); 635 had eye exams and/or received eyeglasses; 58 saw a podiatrist; 31 got wheelchair repairs; 300 got dental screenings; 106 received substance abuse, mental health, or methadone treatment; 91 had acupuncture treatments; 47 saw a chiropractor; and 16 were signed up for mammograms.

In addition, CPMC donated media relations support for all Project Homeless Connect events in 2009, including writing and distributing news releases, pitching stories to local and national media, and coordinating media interviews with staff and clients before and during events.

## COMMUNITY HEALTH GRANTS

Total in Grants \$1,058,366

CPMC provides grants to community-based health and social service organizations that look to CPMC to sustain or expand their services. Grant priorities are set using many factors, including impact on decreasing health disparities, equity across neighborhoods and populations, opportunities for CPMC partnership, and agency capacity.

### Community Health Resource Center (CHRC)

*Grant: \$500,000*

A CPMC grant to the Patient Assistance Foundation funds the Community Health Resource Center on the Pacific Campus. The center offers health education, health screenings, nutritional counseling, and social services at CPMC sites and in numerous community settings. It assures access across populations by offering programs at a reduced fee, sliding scale, or no fee. A total of 4,166 individuals attended community screenings, programs, and lecture events, including the stroke education series, cancer volunteer support, and kidney wellness. Free health screenings included cholesterol, glucose, blood pressure, bone density, and body mass index.

### Partnership Grants

*Range from \$50,000 to \$100,000*

- Access for Seniors, Bayview Hunters Point Multipurpose Senior Services
- African American Health Disparity Project, Prostate Screening Initiative, c/o Hospital Council of Central and Northern California

## Investment Grants

*Range from \$25,000–\$50,000*

- Communicable Disease Prevention Program, API Wellness
- Dental and Oral Health Program for People Living with HIV/AIDS, Tenderloin Health
- Enrollment Program for Children, San Francisco Bringing Up Healthy Kids Coalition/ NICOS Chinese Health Coalition
- Health Coaches for Youth Project, San Francisco General Hospital
- Keeping Families Together, Homeless Prenatal Program

## Other Grants

- Access to Health and Self-Sufficiency for Homeless Veterans, Swords to Plowshares
- Americorp Health Corps, c/o San Francisco Clinic Consortium
- Behavioral Health Service Program, Boys & Girls Club of San Francisco
- Chinese Lay Health Workers Diabetes Education and Management Program, Chinatown Public Health Center
- Enhancing End-of-Life Care for Persons Living with AIDS, Maitri House
- Expanding Access to Bilingual/Bicultural Care, Curry Senior Center
- Faith, Family and Fitness Program, Calvary Hill Community Church
- Head Start Oral Health, Native American Health Center
- Nutrition Education and Weight Management Program, Arthur H. Coleman Community Health Foundation, Community Initiatives
- Health Initiatives for Youth, Dimensions Clinic
- Next Door Shelter Behavioral Health Program, Episcopal Community Services
- Noon Hour Wellness Program (2009), William McKinley Elementary School
- Students Talking About Non-Violent Dating, San Francisco Women Against Rape
- Tenderloin Youth Live Healthy Project, Vietnamese Youth Development Center
- Wellness Initiative, America Scores Bay Area
- Youth Violence Prevention Project, Sunset Youth Services
- Western Addition Health Training Program, Women's Community Clinic

## COMMUNITY SPONSORSHIPS

Total in Sponsorships \$589,705

CPMC supports a range of community-based organizations, focusing on health and social service agencies, through its sponsorship program. The events CPMC sponsored in 2009 included:

- AfroSolo Health Fair
- APA Family Support Fair
- Asia Week Foundation, including Asian Heritage Street Celebration and Hep B Gala
- Curry Senior Center Annual Gala
- Glide Memorial Church Annual Gala
- Grace Urban Ministries Fundraising Event
- Gum Moon Residents Hall/ Asian Women's Resource Center Dinner
- Instituto Laboral de la Raza Labor Breakfast
- Kimochi Sansei Live Benefit
- March of Dimes March for Babies
- Mission Neighborhood Center Annual Fundraiser
- Mission Neighborhood Health Center In the Heart of the Mission Gala
- NAACP Annual Freedom Fund Dinner
- On Lok Day Services Anniversary Event
- St. Anthony Foundation Raising the Roof Event
- San Francisco Juneteenth Committee
- San Francisco Lesbian, Gay, Bisexual, Transgender Center Annual Celebration
- Self-Help for the Elderly Longevity Gala
- Tenderloin Health and Safety Fair
- Urban Service YMCA Bayview Hunters Point Back Pack Giveaway
- Wu Yee Children's Services Fundraiser

# Medical Education

## PHYSICIANS

Community Benefit Contribution \$18,327,462

As a private, multicampus teaching hospital, CPMC offers educational experience to physicians through its residency and fellowship training programs, including:

- 93 residents in CPMC programs in Internal Medicine, Ophthalmology, Psychiatry, and Radiation Oncology; as well as residents from affiliated programs in General Surgery, Orthopedic Surgery, Pediatrics, and Obstetrics and Gynecology.
- 30 fellows in independent or affiliated postdoctoral subspecialty training programs in Cardiology, Gastroenterology, Pulmonary/Critical Care Medicine, Plastic Surgery of the Hand, Transplant Hepatology, Neuro-Critical Care, Neuromuscular Disease, Retina, Oculoplastics, Glaucoma, MRI, Microsurgery, Advanced Orthopedics, and Renal Transplant.
- In addition, this year CPMC continued to provide clerkships for medical students from many medical schools, and maintained its formal affiliation with Dartmouth Medical School and UCSF.

## NURSES

Community Benefit Contribution \$9,848,353

Nursing schools throughout the Bay Area look to CPMC, and especially to its nurses, to provide hospital-based clinical experience to students.

- 310 nursing students came to CPMC for education and observation opportunities.
- 45 additional students found clinical preceptorships in nursing specialty areas, including Medical/Surgical, Emergency Department, Neonatal ICU, Pediatrics, Pediatric ICU, Acute Rehabilitation, Skilled Nursing Palliative Care, Labor and Delivery, Postpartum, Nursery, Subacute Care, Telemetry, Psychiatry, Critical Care.
- Eight nursing schools (UCSF, San Francisco State University, University of San Francisco, City College of San Francisco, College of San Mateo, College of Marin, Dominican University, and Samuel Merritt University) placed their nursing students at CPMC.

## OTHER HEALTH PROFESSIONALS

Community Benefit Contribution \$805,563

CPMC provides clinical experience and supervision for students from across the country who are preparing for a variety of professional roles in health care. In 2009, CPMC offered 103 internship placements.

- 31 physical therapy interns
- 21 radiology and nuclear medicine technology interns
- 10 pharmacy interns
- 9 occupational therapy interns
- 7 speech therapy interns
- 6 clinical lab scientist interns
- 6 EKG interns
- 6 psychology and occupational therapy interns at the Child Development Center
- 4 medical assistants
- 2 sonography interns
- 1 speech pathology clinical fellow

# Community Workforce Programs

Building the San Francisco workforce, especially by creating opportunities for youth, is a major focus of CPMC's community benefit strategy. In 2009, CPMC staff was active in working with 160 students from 15 different local agencies and programs.

- Galileo Health Academy-Community Education Service (CES) offered two programs: (1) 20 interns worked 24 hours a week during the summer to gain experience working in the hospital. CPMC staff served as mentors, encouraging students to consider health care careers. The CPMC Guild provided stipends for 10 students, and CES provided the other 10. (2) During the school year, 68 students benefited from field trips to explore career options by meeting with CPMC staff on the job to hear about employment opportunities and training requirements.
- Jewish Vocational Services (JVS) also offered two programs: (1) Its Foster Youth Healthcare Careers Exploration Program placed nine foster youth with disabilities at CPMC's St. Luke's Campus. (2) JVS's program aimed at training/employing displaced garment workers placed 25 students on the St. Luke's Campus.
- The Life Long Learning Academy placed eight high school students, who had been involved in the juvenile justice system or were facing serious problems, in internships for once-a-week job experience throughout the academic year.
- The Treasure Island Job Corps placed six students at CPMC for a 280-hour internship after completing their Medical Assistants training program.
- A job coach brought six Wallenberg High School students with learning disabilities, age 18–22, to CPMC for job skills training.
- The City College Medical Office Certificate Program placed five students at CPMC for a 160-hour internship.
- The Mayor's Youth Employment and Education Program (MYEEP) placed two low-income youth with MYEEP stipends at CPMC.
- The National Council on Aging Senior Community Service Program provided stipends for two low-income seniors' part-time employment and on-the-job training at CPMC.
- Two Metropolitan Arts High School students spent one day a week interning at CPMC for the entire academic year.
- Individual students from the San Francisco Unified School District Workability Program, Safe House, City Arts and Tech High School, Heald College Medical Assistant Program, the Pacific Epilepsy Program, and the Veterans Administration also benefited from job training and experience opportunities at CPMC.

# Biomedical & Clinical Research

Community Benefit Contribution

\$30,510,546

CPMC's Research Institute (CPMCRI) brings clinicians and researchers together to discover effective treatments and diagnostic technologies. Approximately 60 principal investigators, both laboratory and clinical researchers, including molecular biologists, immunologists, pharmacologists, biochemists, physicists, epidemiologists, behavioral scientists, biostatisticians, and computer scientists work within CPMCRI. Biomedical research is conducted in such diverse areas as aging, arthritis, epilepsy, diabetes, neurobiology of pain, cardiovascular disease, osteoporosis, organ transplantation, mechanisms of drug addiction, neurodegenerative diseases (e.g., amyotrophic lateral sclerosis), cancer, AIDS, hepatitis, and other infectious diseases. More than 200 clinical trials, primarily funded by pharmaceutical and biotechnology companies, are conducted through the CPMCRI Office of Clinical Research.

## Clinical Research Programs

- Centers for Research in Clinical Excellence (CRCLE)
- Clinical Trials
- Complementary & Integrative Medicine Research
- Da Costa International Funds for Breast Cancer Prevention
- Forbes Norris Amyotrophic Lateral Sclerosis Research Center
- Mind-Body Medicine Research Group
- Addiction & Pharmacology Research Laboratory (APRL)
- SF Coordinating Center for coordinating multicenter studies in women's health, cognitive function, cardiovascular disease, breast cancer prevention, osteoporosis, arthritis, and dementia

## Basic/Laboratory Research

- Role of cytomegalovirus in development of brain tumors (malignant glioma)
- Genomic targets of melanoma
- Cellular and molecular changes during the early stages of breast cancer progression
- Role of ID-1 in metastatic breast cancer
- Role of dystroglycan in metastatic breast cancer
- Gene targets for cancer screening

- Molecular biological evaluations of herbs used as cancer therapy
- Creating cultured cells for cancer drug development
- Cancer and cannabinoids
- Novel compounds for treatment of metastatic cancer
- Development of safe and effective therapies to correct cancer-causing genes
- Calcium transport across cell membranes; how calcium-blocking cardiac drugs work
- Drug development for opportunistic infections–mycobacterium avium complex
- Mechanisms of protective immunity against hepatitis C virus infection
- Amyotrophic lateral sclerosis (ALS): early activation of neuropeptide receptors
- Brain injury and the inflammatory process
- Multiple sclerosis: how benign viruses may lead to brain cell death and autoimmunity



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