Table of Contents

I. WELCOME ........................................................................................................................................ 4
II. UCSF BENIOFF CHILDREN’S HOSPITAL OAKLAND ................................................................. 5
III. COMMUNITY BENEFIT REPORT OVERVIEW ............................................................................. 6

IV. COMMUNITY BENEFIT ACTIVITIES .............................................................................................. 7

UNDERCOMPENSATED HEALTHCARE SERVICES
Undercompensated Government-Sponsored Healthcare ................................................................. 8
Charity Care ....................................................................................................................................... 8

MENTAL AND BEHAVIORAL HEALTH SERVICES
Center for Child Protection ............................................................................................................... 9
Center for the Vulnerable Child ......................................................................................................... 11
Early Intervention Services .............................................................................................................. 13

CHRONIC DISEASE MANAGEMENT SERVICES
Center for Asthma Education, Management, and Research .............................................................. 15
Diabetes Program .............................................................................................................................. 16
Hemoglobinopathy Center ................................................................................................................ 17
Pediatric HIV/AIDS Program ........................................................................................................... 20
Psychology–Oncology Program ........................................................................................................ 22
Camps for Children with Special Healthcare Needs ......................................................................... 23

PREVENTION SERVICES
Healthy Hearts .................................................................................................................................... 24
Community Farmer’s Markets and Dover Street Garden ................................................................. 26
Kohl’s Injury Prevention Program ..................................................................................................... 27
Sports Medicine Center for Young Athletes ...................................................................................... 28
Health Education for Patients, Families, and the Public .................................................................. 29

PRIMARY CARE SERVICES
Juvenile Justice Center Clinic ............................................................................................................ 30
School-Based Health Centers ............................................................................................................ 31
Primary Care Clinic, Community-Based Programs ........................................................................... 32

FAMILY SERVICES
Child Life Program ............................................................................................................................. 34
Family Information & Navigation Desk (FIND) ................................................................................ 35
Other Family Services ....................................................................................................................... 36
Palliative Care ..................................................................................................................................... 37

EDUCATION FOR PROFESSIONALS AND STUDENTS
Professional Education at Children’s ................................................................................................. 38
Education for Professionals in the Community ................................................................................ 39
CHAMPS: Community Health & Adolescent Mentoring Program for Success ................................. 40
CHORI Summer Student Research Program .................................................................................... 42

COMMUNITY BUILDING AND TRAUMA CARE SERVICES
Advocacy ............................................................................................................................................. 43
Children’s Global Health Initiative ................................................................................................... 44
Trauma Care ........................................................................................................................................ 45
Volunteerism/Workforce Development ............................................................................................ 46
Project Search ..................................................................................................................................... 47

RESEARCH
Children’s Hospital Oakland Research Institute .................................................................................. 48

V. ECONOMIC IMPACT ........................................................................................................................ 49
I. Welcome

UCSF Benioff Children's Hospital Oakland (Children's) is a private, public benefit, not-for-profit 501(c)3 medical center. We offer children and their families outstanding medical, surgical, and mental health programs, spanning the healthcare spectrum from primary to quaternary care.

Increasingly prominent is the idea that hospitals should provide benefits to their communities which are above and beyond the traditional functions of a hospital. However, serving the community has been an essential value at Children's since it was founded over 100 years ago. Our values are one reason why Children's has such an outstanding group of healthcare providers and is the destination choice for hundreds of thousands of children. Our 2014 Community Benefit Report highlights many of the ways Children's has fulfilled its commitment to address the health needs in our community, through direct services, research, advocacy, outreach, and education.

2014 was in many ways a momentous year in our history. At the beginning of the year, we finalized an affiliation agreement with the University of California San Francisco, and changed our name to UCSF Benioff Children's Hospital Oakland. This partnership has created one of the leading pediatric institutions in the country, allowing us to strengthen our ability to provide benefits to the community.

This year I celebrate my 40th anniversary with Children's. I am so proud of our service to the community and honored to be in this position.

Respectfully,

Bertram H. Lubin, MD
President & Chief Executive Officer
II. UCSF Benioff Children’s Hospital Oakland

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

Scope of Services and Service Area
UCSF Benioff Children’s Hospital Oakland (Children’s) is a regional pediatric medical center located in Oakland, California. Children’s offers a broad range of inpatient, outpatient, and community-based services, with experts in over 30 distinct pediatric subspecialties. It is designated as a Level 1 pediatric trauma center and a federally qualified health center.

Children’s serves as the pediatric safety net hospital for both Alameda and Contra Costa counties, since neither county’s public hospitals have beds designated for children. We have 190 inpatient beds: 170 on the main campus and 20 leased beds at Alta Bates Summit Medical Center. Children’s also runs the largest pediatric primary care clinic in Oakland, two comprehensive school-based clinics, and a clinic at the Alameda County Juvenile Justice Center in San Leandro. Children’s operates outpatient pediatric specialty care centers in Brentwood, Larkspur, Pleasanton, and Walnut Creek.

Children’s serves patients from throughout Northern California, and other states and countries. About 80 percent of our patients live in either Alameda or Contra Costa County.

In 2014, a total of 70,448 patients made 10,386 inpatient visits and 247,597 outpatient visits at Children’s facilities, including 45,828 visits to Children’s Emergency Department and 29,766 visits to its primary care clinics. Over 60 languages were spoken at Children’s.

Governance
On January 1, 2014, Children’s and UCSF established a formal affiliation. Under the terms of the affiliation, UCSF has representation on Children’s Board of Directors, and Children’s retains its identity and status as a private, not-for-profit 501(c)(3) organization with its own separate license.

As of January 1, 2015 the Children’s board has 12 directors. Voting members include Children’s President and CEO, medical staff, UCSF Medical Center CEO, and Dean of UCSF School of Medicine. The Regents of the University of California is the sole corporate member of the board, meaning it is the corporate “parent” of Children’s.
III. Community Benefit Report Overview

The Affordable Care Act requires all non-profit hospitals to complete and submit an annual Community Benefit Report. Although hospitals bring numerous benefits to their local economies, these reports are intended to document the ways in which hospitals go above and beyond the core functions to support the health needs of their community.

Every three years, hospitals must also conduct a needs assessment to identify the greatest health needs affecting their communities and which should drive their community benefit activities. Children’s conducted a community needs assessment in 2013, it can be found at www.childrenshospitaloakland.org/main/Community-Benefit-Reports.aspx.

**Definition of a Community Benefit**

Although the State of California (via SB 697) provides some general guidance, there is not one official definition of a “community benefit.” We have employed the following definition: a community benefit is “a planned, managed, organized, and measured approach to meeting documentable community needs intended to improve access to care, health status, and quality of life.” It is generally accepted that a community benefit should meet one or more of these criteria:

- Responds to public health needs
- Responds to the needs of a special or at-risk population
- Improves access to care
- Generates no (or negative) profit margin
- Would likely be discontinued if the decision were made on a purely financial basis

The following are not considered community benefits: bad debt, programs and activities designed for marketing purposes or fundraising, services that are considered standard-of-care or the “cost of doing business,” in-services for hospital staff, volunteering by employees on their own time, and facility improvements.

**Creation of the 2014 Community Benefit Report**

The Community Benefit Oversight Group spearheaded this report with input from individuals representing programs and departments throughout the medical center. The 2014 Community Benefit Oversight Group includes:

- Adam Davis, MPH, MA, Director of Special Projects
- Bertram Lubin, MD, President and Chief Executive Officer
- Barbara Staggers, MD, MPH
- Executive Director, External Affairs and Community Relations; Director, Adolescent Medicine
- Terry Oertel, MBA, Manager, Government Contracting

**Dissemination of the Community Benefit**

The 2014 report has been submitted to the Children’s Board of Directors and made available to hospital staff and the general public via the Children’s website, handouts at public events, and targeted mailings. Also, the report will be provided to community groups, donors, print media, and elected officials in our service area. Children’s maintains public awareness of its community services through social media, traditional media coverage of the hospital, and Children’s HandPrints, a hospital magazine sent out three times a year.

The report was authored by Adam Davis, MPH, MA, with assistance from UC Berkeley student intern Moizza Shabbir, and designed by Children’s Marketing Communications Department. Contact Adam Davis at AdDavis@mail.cho.org for questions or more information.
Section IV describes the activities Children’s has undertaken to address its identified health priorities.
Undercompensated Government-Sponsored Healthcare/Charity Care

UNDERCOMPENSATED GOVERNMENT-SPONSORED HEALTHCARE

A shortfall is created when Children’s receives payments that are less than the cost of caring for low-income patients covered by government-sponsored health insurance. These unpaid costs count as a community benefit; they include unpaid costs related to Medicaid, State Children’s Health Insurance Program (SCHIP), hospital days, and other services not covered by Medicaid or other means-tested government-sponsored programs. Approximately 68 percent of all visits to Children’s in 2014 were for patients who received government-sponsored health insurance. The unpaid costs incurred by Children’s to provide services to these patients in 2014 are listed on page 46. When compared to other children’s hospitals in California that have a similar payer mix, Children’s provided double the unreimbursed costs of total means-tested government-sponsored health insurance.

CHARITY CARE

As part of its commitment to serve the community, Children’s provides free or discounted care, also known as “charity care,” to families who don’t qualify for government-sponsored health insurance and who meet certain eligibility requirements. Our charity care program requires that patients complete an application and provide supporting documentation to verify income. Self-pay patients who present to the Emergency Department are provided a brochure describing our charity care program. We also have a statement on the bill advising parents that they may be eligible for financial assistance. A patient can have a service at any Children’s location, contact us to request a charity care application, and then qualify for charity. In 2014, Children’s provided a level of charity care that is significantly higher than any other children’s hospital in California (see page 46).
Center for Child Protection

Child abuse and neglect continues to be a pervasive and complex public health problem on both the local and national levels. The Center for Child Protection (CCP), established at Children’s more than 30 years ago, provides comprehensive medical and mental health services to children and adolescents affected by child abuse and/or exposure to violence. CCP is home to two of only six child abuse pediatricians in Northern California. As the designated site for forensic medical services in Alameda County, our program provides child victims who enter the medical system numerous avenues to access services from CCP physicians. CCP physicians also provide sub-specialty consultation to community physicians on genitourinary-related medical issues. Mental health services include crisis assessment and intervention, trauma-informed psychotherapy services, clinical case management, outreach and educational workshops. CCP program staff work closely with law enforcement, child welfare, and local district attorney’s offices, often providing case consultation, case testimony and expert witness assistance. In 2014, CCP served more than 700 children. No other program provides these services in the East Bay.

**Administrative Office:** ☑️ (510) 428-3742  
**Manager:** Shelley Hamilton, LCSW ☑️ (510) 428-3588 ☐️ shamilton@mail.cho.org  
**Division Chief and Medical Director:** James Crawford-Jakubiak, MD ☑️ (510) 428-3759 ☐️ jcrawford@mail.cho.org

**DIRECT SERVICES**

Forensic examinations — CCP is the designated site in Alameda County for acute forensic medical services for children under 14, and non-acute services for children under 18. CCP medical staff performs acute forensic examinations when the alleged sexual abuse occurred within 72 hours. Non-acute forensic examinations are performed in CCP’s outpatient clinic by appointment.

Trauma-Informed Mental Health Services — Therapy is provided to children, adolescents, and their families who have been exposed to trauma, including child abuse and/or witness to violence. Through individual, sibling, group, and/or family therapy, CCP clinical staff works with these clients to minimize difficulties and prevent long-term negative effects. Psychotherapy is provided by CCP staff at several locations throughout Alameda County including the Alameda County Family Justice Center in downtown Oakland, Oakland’s Fruitvale community, and South Hayward.

Domestic Violence education and Screening (DOVES project) — The DOVES Project is a pioneering pediatric domestic violence project that provides individual and group psychotherapy to children and their battered caregivers as a strategy for the early prevention of child abuse.

**RESEARCH**

CCP participates in clinical research related to child abuse and neglect, and currently leads two clinical research studies. The Caregiver and Child Trauma Study is a descriptive analysis designed to determine the prevalence of adversity among caregivers of children presenting to CCP. This study will begin to explore the intergenerational transmission of adversity. The ultimate goal is to identify the associations between caregiver and child trauma that could inform future child maltreatment prevention and treatment programs. CCP is also completing the Alameda County Child Abuse Disclosure Study, which aims to better understand how children are disclosing child sexual abuse. Results of the study will enable more focused prevention and early intervention services to children and families.
EDUCATION AND OUTREACH

Camp Creating Confident people (CCP)—Camp CCP combines the traditional experience of summer camp with group psychotherapy and support for children exposed to child abuse trauma and/or violence.

Clinical Case Management—Case management is provided to children and adolescents who are served in the emergency department and/or child abuse management clinic following diagnosis or disclosure of abuse. CCP case managers assist families with navigating the criminal justice system, arranging necessary medical follow-up, and obtaining referrals to community resources.

First Responders—CCP physicians are available 24/7 to provide immediate response to sexual assault cases in the emergency department, and CCP’s social worker team serves as first responders to child abuse cases in the emergency department until 7 p.m. CCP also provides consultation to families of hospitalized children.

Education Events—CCP provided more than 40 educational events to a variety of healthcare providers, allied professionals, children, and families on a diverse array of topics pertaining to child abuse and neglect. These educational events were held at local, county, state, and international events. CCP staff also serves on numerous boards and committees that influence national, state and regional child abuse protocols, policies, and program services.

Parenting After Trauma (PAT)—PAT is a 10-week group psychotherapy program targeted to non-offending caregivers caring for children impacted by child abuse and/or violence exposure. The program aims to address adverse childhood experience through psychoeducation on healthy parenting and effective communication skills. In 2014, the non-offending caregivers for 29 children successfully completed the PAT group psychotherapy program.
Center for the Vulnerable Child

The Center for the Vulnerable Child (CVC) provides services to children from birth to 21 who are living in situations that put them at risk for educational, physical, mental, or social health problems. Patients are foster or homeless youth, or they have a history of abuse, neglect, or exposure to drugs. Each year, approximately 3,000 children and families receive medical care, psychotherapy, and social services from CVC. Services are culturally informed and family-friendly, and they usually occur in the caregivers’ home or another location within the community to reduce barriers to service delivery. CVC advisory board, composed largely of parents of children who have used CVC services, provides feedback and influences the future of the program.

Administrative Office: ☏ (510) 428-3783
Director: Allison Briscoe-Smith, PhD ☏ (510) 428-3783, ext. 2711 ⚡ abriscoesmith@mail.cho.or

DIRECT SERVICES

Child and Adolescent Therapeutic Services (CATS)—Mental health services and case management through the CATS program are available to children from birth to age 18 who are part of family maintenance services of the foster care system. This program is a collaboration between CVC, Alameda County Department of Children and Family Services, and Alameda County Behavioral Health Care Services.

Preschool and School-Age Services, Assessment, Guidance and Education Program (PASSAGE)—PASSAGE provides case management, mental healthcare, and advocacy to pregnant and parenting teens and their infants and families. Services are usually home-based, or delivered in a community setting.

Services to Enhance Early Development (SEED)—In collaboration with the Alameda County Department of Child and Family Services and Alameda County Public Health, children ages 0–3 who are in the welfare system and their care giving system are provided case management, infant–parent psychotherapy, mental health screening, developmental and mental health assessment, parental support, and other services.

Encore Medical Clinics (EMC)—EMC outreach workers connect children under 19 years of age who are homeless or living in transitional housing with a medical home. Dental care is also available to EMC patients. There were over 500 visits to the EMC in 2014. EMC is a collaboration between CVC and Children’s Primary Care Clinic.

Family Outreach and Support Clinic (FOSC)—FOSC provides primary care for children from birth to 12 years who are currently or have been in foster care. FOSC is a collaboration between CVC and Children’s Primary Care Clinic.

Project SPARK (Successful Preschool Adjustment and Readiness for Kindergarten)—Project SPARK is an intensive intervention program aimed to promote successful adjustment to preschool and readiness for kindergarten for children who are living in transitional living situations. SPARK works both individually and in-group settings with children who are identified by preschool teachers as experiencing behaviors that are interfering with school participation and peer relationships. SPARK provides assessments of child behavior, parent-teacher consultation, one-on-one individualized child intervention in the milieu and small groups to improve social skills.

Behavioral Health Integration (BHI)—In collaboration with Children’s Primary Care and Adolescent Medicine, the BHI Clinic provides universal behavioral health screenings for all children during their routine visits. The BHI Clinic consists of a team of mental health clinicians, a nurse practitioner, and primary care doctors.
RESEARCH

Part of CVC’s mission is to conduct research on the vulnerable populations it serves. CVC is partially funded by a Health Resources and Services Administration grant that supports ongoing research on primary care and mental health services to families experiencing homelessness and/or foster care. CVC has a strong history of research on service utilization and implementation for homeless families, relationships between foster care and homelessness, and the utilization of CVC services over time.

EDUCATION AND OUTREACH

CVC sponsors and facilitates parental support groups and educational seminars throughout the year on a variety of topics relevant to foster and adoptive parents. CVC also provides training to healthcare and other professionals who work with vulnerable children:

- **SEED Consultation Project**—Through interactive consultation, child welfare workers, police, and public defenders learn about infant mental health and the needs of young children who are in the welfare system.
- **Foster Parent Support and Education**—This weekly educational program is open to all foster parents in the community seeking psychoeducation and support as they navigate the foster care system and raise children who may be affected by complex trauma.
- **Medically Fragile Infant Training**—This monthly training program is provided to professionals in Alameda County.
- **Psychology Fellowship Program**—Postdoctoral fellows are introduced to clinical work with children in foster care through CVC’s Seed program. They learn a variety of clinical skills such as how to conduct psychological assessments and psychotherapies with infants and parents, individuals, groups, and families.
- **Practicum Placements**—Training positions are available to master’s-level mental health clinicians in the CATS, SPARK, and BHI programs. Trainees have rich clinical experiences working with families experiencing trauma, homelessness, and/or foster care. These clinicians also participate in didactic and cultural accountability seminars.
- **Alameda County Innovations Grant**—CVC staff created a curriculum focused on how to train providers to understand the impact of trauma on the African American community and its young children. Medical providers and Alameda County Behavioral Health Care Service providers will use this curriculum to improve outcomes for African American families.
- **Alameda County Health Care Service Agency School Health Services Mental Health Consultation and Training Institute**—As part of this contract, members of CVC have been providing comprehensive training to school clinics and case managers throughout Alameda County. The training has been focused on mental health consultation with schools predominantly serving minority children who have experienced trauma.
Early Intervention Services

Early Intervention Services (EIS) provides therapeutic intervention, case management, child development services, and family support services for infants and young children (ages 0–6) with emerging developmental, medical, and social–emotional delays. EIS services are family-centered and relationship-based, and are delivered at homes, school sites, community-based locations, and our 3rd Street site. Each year, more than 700 families utilize EIS, and many more agencies and children are reached through training and consultation activities.

**DIRECT SERVICES**

**Neonatal Follow-up Programs**

- **Special Start Home Visiting Program**—Special Start offers developmental, medical, and psychosocial case management to the approximately 225 infants per year who are graduates of a Neonatal Intensive Care Unit and have complex medical conditions and/or social risk factors. For up to three years, participants receive weekly to monthly home visits by a coordinated team of nurses, developmental specialists, and mental health specialists. This program also includes two parent support groups for Spanish-speaking families of children with disabilities. The program also collaborates with the Unity Council Early Head Start program and provides a group for medically fragile infants and young children receiving Early Head Start services.

- **Neonatal Follow-up Clinic**—This program provides developmental assessment and medical care for California Children’s Services eligible infants who were in Children’s Neonatal Intensive Care Unit. Services include neurodevelopmental pediatric assessment and case management. The clinic serves approximately 450 young children annually.

- **Intensive Care Nursery Developmental Support Program**—Developmental intervention and support, including kangaroo holding and breastfeeding interventions, is provided to parents with newborns in Children’s Neonatal Intensive Care Unit (NICU). The program serves more than 200 neonates and their families each year.

**Parent–Infant Programs (PIP)**

- **Local Early Access Program (LEAP)**—LEAP is designed for infants up to age 3 who have developmental disabilities and are eligible to receive Part C of the Individuals with Disabilities Education Act services through the Regional Center of the East Bay. Program components include a parent–child playgroup, home visits, developmental interventions, and parental support. Groups are offered in English and Spanish. Twenty-seven children and their families are in the program at any given time.

- **Developmental Playgroups Program**—This community-based intervention provides parent–child playgroups to encourage the healthy development of infants and young children who are at risk for developmental delays. All groups incorporate developmentally rich play activities with parent support and education. Groups are located in Oakland and South Hayward, and are delivered in Spanish, predominantly serving a Latino immigrant community. These programs serve 80 young children and their families each year.

**Early and Periodic Screening, Diagnosis, and Treatment (EPSDT) Mental Health Programs**—EPSDT Mental Health Programs are designed for children with social–emotional delays or disturbances:

- **CARE Early Childhood Mental Health Program**—CARE provides home-based therapeutic interventions for children under age 6 and their families. About 125 children are enrolled.

- **Therapeutic Guidance for Infants and Children (TGIF)**—The TGIF program provides both group and individual early childhood therapeutic interventions to infants, young children, and their parents. The program includes a center-based therapeutic playgroup and parent education and support. TGIF is designed for children who are in the Child Welfare System and whose parents are in the process of reunification.

- **FIRST Perinatal Drug Treatment Support Program**—The FIRST program provides group and individual early childhood therapeutic intervention to infants and young children and their parents. The program includes a center-based therapeutic playgroup and parent education and support. FIRST is designed for families where drug use or incarceration has affected the parent-child relationship.

- **Fussy Baby Program**—The Fussy Baby program provides intervention to parents whose infants have crying, sleeping, or feeding problems that are creating stress in the family. Referrals come from local pediatric providers and community-based agencies.
RESEARCH

EIS is building a research program that focuses on the impact of trauma on early attachment; successful early childhood treatment; and other issues related to supporting positive outcomes for young children with medical, developmental, and social-emotional delays.

CONSULTATION AND TRAINING

EIS operates a broad range of consultation and training activities that support agencies working with young children throughout the county, state, and nation.

- **Irving B. Harris early Childhood Mental Health Training Program**—EIS administers the only infant and early childhood mental health training program in Alameda County. The program expands the knowledge base of providers from a variety of disciplines by building upon their expertise and skills in addressing the social-emotional development and mental health needs of young children. Additionally, the Reflective Facilitators in Training program supports a culturally and ethnically diverse group of professionals to increase their capacity for leadership within their agencies. Over 250 professionals have completed the program.

- **EIS Consultation and Training Team**—EIS provides technical assistance and consultation services to numerous community-based agencies and Early Head Start/Head Start programs each year. EIS also provides groups for practitioners on reflective supervision and facilitates Comunidad, a countywide effort to support providers working with Latino immigrant families.

- **Consultation to Another Road to Safety and Paths to Success**—This program is designed to support community-based agencies that are contracted by Alameda County Social Services Child and Family Services to provide the support that can keep children out of the child welfare system.

POLICY AND ADVOCACY

EIS advocates are involved in policymaking regarding issues of infant and early childhood mental health and development at the local and national levels. EIS staff members helped develop the California Training Guidelines and Personnel Competencies for Infant/Family and Early Childhood Mental Health providers. EIS also has several members of the Infant Development Association of California, an organization co-founded by a former EIS director. The administrative and clinical directors of EIS are currently involved in planning and implementing Alameda County-wide policy initiatives and are members of many local collaborative planning activities.
Center for Asthma Education, Management and Research

The Center for Asthma Education, Management, and Research (CAEMR), based in Children’s Primary Care Clinic, offers expertise in the management of asthma in children and adolescents. Oakland leads the state for the rate of asthma admissions among children, and asthma is the most common diagnosis among inpatients admitted at Children’s. Experts believe that many, if not most, asthma hospitalizations are preventable with proper day-to-day asthma management.

**DIRECT SERVICES**

**Asthma Clinic**—The Asthma Clinic is held weekly, and provides specialized care to children with particularly complex cases of asthma. In addition to asthma treatment, families are taught how to manage children’s asthma at home to prevent acute episodes and emergencies. A multidisciplinary medical team that includes physicians, nurses, and health educators staffs the Asthma Clinic. Approximately 600 patients were seen in 2014.

**ATTACK Asthma Clinic**—The ATTACK Asthma Clinic is a one-hour, one-time visit available to children seen at Children’s Emergency Department for asthma. Services include a clinical assessment, family education, referrals, and scheduling of follow-up appointments with the child’s regular care provider. The goal is to prevent asthma emergencies from recurring. About 200 children visited the ATTACK Asthma Clinic in 2014.

**Inpatient Asthma Education**—Clinicians from CAEMR conduct bedside asthma management education for families of children currently hospitalized for asthma with the goal of preventing future hospitalizations. In 2014, the team met with more than 100 families with a child hospitalized due to asthma.

**RESEARCH**

CAEMR is involved in several clinical and translational research studies intended to improve the understanding and quality of life among children with asthma. CAEMR is one of only nine pediatric sites across the country participating in the National Institutes of Health (NIH)-sponsored Asthma Net, through which a variety of clinical trials are implemented. CAEMR is currently participating in four Asthma Net studies. APRIL-OCLOT is investigating the impact of antibiotics on asthma prevention, and INFANT-AVICA is both comparing different treatments for young children with persistent asthma and looking at the impact of acetaminophen and ibuprofen on asthma control. In addition, BARD is investigating the best add-on therapy for African Americans who are not well controlled on low dose medications and STICS is investigating the best step-therapy for young children with moderate to severe episodic asthma. Other studies include the Study of African-Americans, Genes and the Environment (SAGE), and Genes, Asthma, and Latino Assessment (GALA). Both explore the relationships between race/ethnicity, genes, the environment, and response to particular asthma therapies.

**EDUCATION AND OUTREACH**

CAEMR provides education for the public and for professionals:

- Camp Breathe Easy, located in a beautiful natural setting outside of Livermore, is a four-day, three-night residential summer camp for underserved children with asthma. About 80 children attended Camp Breathe Easy in 2014.
- CAEMR is an original member of the Alameda County Asthma Coalition, and has participated in the collation since it was founded in 2002. Annually, CAEMR and the coalition host World Asthma Day at Children’s—an event that incorporates asthma services and education with games and refreshments for the public.
- CAEMR hosts an AmeriCorps volunteer who provides asthma education and case management for underserved children with asthma for one year. It is the only known AmeriCorps position in the country dedicated to asthma.
- In 2014, CAEMR, in collaboration with the American Lung Association of California, provided a two-day Asthma Educator Institute training to 75 asthma educators including nurses, respiratory therapists, and health educators. This training was a key component of attendees’ training to become certified asthma instructors.
# Diabetes Program

The Diabetes Program is staffed by a team of pediatric endocrinologists, certified diabetes educators, nurses, dieticians, social workers, and administrative staff who care for close to 1000 children with diabetes. The team delivers the latest in diabetes care, technologies, and education to help control blood sugar, optimize management and prevent long-term complications.

## Direct Services

- **Telephone Advice**—An advice line is available to all families and caregivers of children with diabetes and includes urgent care advice, blood sugar review, insulin dose adjustment, and school/after-school program consultation. Endocrinologists are available for emergency consults 24 hours a day.

- **Continuous Glucose Monitoring (CGM) Sensor Clinic**—Provides families and endocrinologists with detailed information about children’s glucose levels to help optimize management.

- **Insulliance**—A group of mentors (young adults living with type 1 diabetes) are available to meet with children during the diabetes clinic visits. The mentors offer emotional support, resources, and non-medical advice.

- **Diabetes Camps**—Diabetes team members provide medical support for a variety of programs including the Diabetes Youth Families Camp de los Niños, DASH Camp, and Camp One.

## Research

The Division of Endocrinology and Diabetes is involved with clinical research studies on type 1 and type 2 diabetes. The Division works collaboratively with Children's Hospital Oakland Research Institute and other affiliates to provide research opportunities for our patients and the community. The Division is a research site for the following studies:

- **The TrialNet Natural History Study of the Development of Type 1 Diabetes: Pathway to Prevention Study** offers type 1 diabetes risk screening for the relatives of individuals with type 1 diabetes.

- **The Oral Insulin for the Prevention of Diabetes in Relatives at Risk for Type 1 Diabetes Mellitus study** is a clinical trial that is testing to see if oral insulin can prevent or delay the onset of type 1 diabetes.

- **The Division is also involved in early intervention trials and genetic studies for type 1 and type 2 diabetes and the development of tools for differential diagnosis of type 1 and type 2 diabetes.**

## Education and Outreach

The Diabetes Program offers a variety of educational opportunities for patients, families, and other healthcare providers.

### Education for Families

- **Individualized Education**—Educational materials and telephone advice as well as private and group classes are provided in English and Spanish. Interpreters are available for all other languages. Education is tailored to the learner’s needs.

- **Insulin Pump Classes**—Diabetes educators review the risks and benefits of pump therapy and demonstrate pump specific features. Classes are offered several times a month.

- **Carbohydrate Counting Classes**—Diabetes educators review basic skills for families and children and reinforce skills for adolescents. Advanced classes are offered on an individual basis and are available in both English and Spanish.

- **School and After School Program Education**—The diabetes team works in collaboration with parents and caregivers, school nurses and other personnel, the American Diabetes Association and Disability Rights Education & Defense Fund to ensure that children have access to diabetes care while in school or while participating in school-sponsored activities.

- **Adolescent Transition Program**—This is a new program designed to prepare adolescents to transition from pediatric to adult care through education and by establishing yearly diabetes care goals.

- **Other Education**—The diabetes team works collaboratively with CarbDM and Diabetes Youth Families on various other education programs. Diabetes team members also provide information tables at JDRF’s Walk to Cure Diabetes and World Diabetes Day.

### Education for Professionals

Diabetes team members are actively involved in education and outreach to other professionals at Children’s and in the community. The team provides trainings for professionals in the community who work with high-risk adolescents with diabetes, including Alameda County Child Protective Services, Center for the Vulnerable Child, Foster Care Services, Alameda County Assessment Center, Contra Costa County Child Welfare Workers, and individual schools. The diabetes team participates in the interagency Pediatric Diabetes Coalition of Alameda County to develop guidelines for schools caring for children with diabetes. In addition, the team participated in the First Annual Bay Area Diabetes Summit held in Hayward in March 2014.
Hemoglobinopathy Center

Sickle cell disease and thalassemia are inherited conditions affecting hemoglobin, the protein within red blood cells that is required for transporting oxygen. Sickle cell disease disproportionately affects persons of African descent; thalassemia disproportionately affects persons of Asian descent. Children’s Comprehensive Center for Hemoglobinopathies, one of the largest in the world, treats about 500 children and adults with sickle cell disease and thalassemia each year, provides education to families and other medical providers, serves as a local and international resource, and conducts research and advocacy to improve the survival and quality of life of people with these conditions. Children’s provides reference laboratory services for the State of California and led a national effort to add screening for hemoglobinopathies into newborn screening programs throughout the U.S. The Comprehensive Center for Hemoglobinopathies has been at the national and international forefront of understanding transfusion therapy, iron overload, and the use of sibling cord blood and stem cell transplantation to cure sickle cell disease and thalassemia.

Administrative Office: ☛ (510) 428-3372
Administrative Director: Lynne Neumayr, MD ☛ (510) 428-3698 ☞ (510) 450-5647 ☭ lneumayr@mail.cho.org
Division Chief: Elliott Vichinsky, MD ☛ (510) 428-3651 ☭ evichinsky@mail.cho.org

DIRECT SERVICES

Northern California Comprehensive Sickle Cell Center (NCCSCC)—Through NCCSCC, a multidisciplinary team consisting of physicians, nurse practitioners, psychologists, and social workers provides comprehensive care in a medical home model. Medical therapy includes hydroxyurea, transfusions, red cell exchange transfusions, chelation, pain management, and bone marrow transplantation. NCCSCC developed and coordinated the Northern California Network of Care for Sickle Cell Disease, a partnership among local hospitals, clinics, and community agencies to improve access to healthcare services for people with sickle cell disease. NCCSCC has received federal funding from Health Resources and Services Administration to partner with the Center for Inherited Blood Disorders to expand these efforts to the western region of the United States for the next three years.

Northern California Comprehensive Thalassemia Center (NCCTC)—Multidisciplinary staff offers medical care, education, counseling, and psychosocial services for children and adults who have or who are at risk for thalassemia, and their families. Comprehensive care includes transfusions, chelation therapy, and bone marrow transplants. NCCTC provides care not only to patients in Northern California, but also to patients referred here from across the United States and internationally. NCCTC has also applied to expand its HRSA mission to the western United States.

Housing for Families: The BMT House—For medical reasons, children who receive a blood and marrow transplant must live within a 20-mile radius of the hospital for 100 days after transplantation. Families who live far from Oakland may stay at the BMT House, located one block from the hospital.
EDUCATION AND OUTREACH

Professional Education

Hemoglobinopathy Reference Laboratory—The Hemoglobinopathy Reference Lab is California’s reference laboratory for diagnosing hemoglobin disorders as well as a national resource to support the diagnosis and treatment of hemoglobin disorders. It provides clinical and diagnostic support to 33 state newborn screening programs. Thousands of newborns are screened for hemoglobin-related disorders, and many affected families are counseled and directed for comprehensive care. The lab also serves as the National Institutes of Health Hemoglobinopathy Disease Collaborative Genotype–Phenotype Database to aid in the identification and screening of clinically relevant hemoglobin variants. Additionally, lab employees often give educational seminars for fellow sickle cell counselors within California.

International Advanced Workshop on Sickle Cell Disease—In 2014, Children’s again hosted this conference, which brought together hematologists from all over the world and premier sickle cell experts from the U.S. to engage in discourse on research, care, and new treatments and therapies.

Community Education, Awareness, and Outreach

Thalassemia Outreach Program—The Thalassemia Outreach Program engages in both patient and community outreach using various means including a newsletter, educational handouts in many languages, booklets, videos, and presentations. The program maintains a website (thalassemia.com) with thousands of visitors per year.

Blood Donation and Sickle Cell Awareness Days—Children’s co-sponsors sickle cell awareness events and blood drives attended by hundreds of community members. Typically sponsoring four blood drives annually, Children’s devotes one drive to thalassemia awareness, and another to encourage testing for the sickle cell trait. The thalassemia program hosts an annual blood drive for World Thalassemia Day, which took place on May 7, 2014. The thalassemia program also collaborates with the community, local businesses, and UC Berkeley to plan blood drives and raise awareness of thalassemia.

UC Berkeley Internship Program—The UC Berkeley Internship Program began in 2012 and had 6 interns in its second year. The interns focused on outreach to middle schools, high schools, and Asian and Indian communities, as well as organizing blood drives for thalassemia. The UC Berkeley Decal on thalassemia is a student-run class that was held again in the spring of 2014. Approximately 15 students enrolled in the class and were taught about thalassemia from a variety of angles and using many different resources.

Sickle Cell and Thalassemia Holiday Parties—Sickle Cell and Thalassemia Outreach teams planned their annual holiday parties for patients and families in December 2014. Hundreds of patients, families, and guests attended this event, which included food, games, and music, to foster community support for affected individuals.

Italian Catholic Federation (ICF) Convention—The 82nd Annual ICF Convention was held in La Quinta, California, over Labor Day weekend. The “Live to Give” Blood Drive was held August 30, and was the second annual drive to honor thalassemia. Twenty-six people came to donate blood, and the Desert Blood Services collected 23 units. On September 1, the ICF once again chose Cooley’s anemia (thalassemia) as its charitable.

Thalassemia Patient Support Group—The thalassemia social worker regularly meets with 4–6 patients for a monthly Saturday support group to discuss issues pertinent to their disease. Topics of discussion include compliance, morbidity, diet, exercise, and the impact of the disease on their mental health and personal relationships.

Bay Area Adult Sickle Cell Support Group—Children’s and the Sickle Cell Community Advisory Council maintain a support group for adults with sickle cell disease.

PHRESH (Public Health Research Education and Surveillance)—Children’s partners with the State of California and Centers for Disease Control in this statewide outreach project to increase awareness of and advocacy for sickle cell disease. The website Casicklecell.org has recently had 10,000 hits.
RESEARCH

For the past 40 years, the NCCSCC and NCCTC have been leaders in NIH-funded multi-center research trials to improve therapeutic options and quality of life of patients with hemoglobinopathies. For many years, Children’s has been at the forefront of research, using stem cell therapies that have cured patients with sickle cell disease. Currently, there are numerous clinical trials at Children’s for patients with hemoglobinopathies. NCCTC Transplantation Program is one of the few institutions in the United States to offer gene therapy for patients with thalassemia and new trials will be opening that will also be available to patients with sickle cell disease.

Additionally, success at our research institute has helped Children’s implement the use of medical devices both for additional research and to help clinicians better diagnose and treat rare blood conditions. As a leader in research, Children’s is one of only four locations in the world that uses a SQUID Ferritometer (superconducting quantum interference device) to non-invasively measure the amount of iron in the body of patients with hemoglobinopathies.

In the Bone Density Clinic, specialized equipment helps to better diagnose and treat patients with hematological disorders and other conditions that may affect bone strength. For instance, thalassemia patients are at risk for expansion of bone marrow, resulting in bones that are more brittle than normal.
Pediatric HIV/AIDS Program

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

Medical Director: Ann Petru, MD (510) 428-3337 apetru@mail.cho.org
Clinic Coordinator: Teresa Courville, RN, MN (510) 428-3885, ext. 2827 tcourville@mail.cho.org

DIRECT SERVICES

FOCUS—Children’s is one of eight local community health organizations expanding HIV testing to comply with the recommendations from the Centers for Disease Control to offer universal, opt-out HIV testing as part of routine medical visits for all patients 13-64 years of age. The routine testing expansion is made possible by Gilead Sciences, through a program known as HIV on the Frontlines of Communities in the United States (FOCUS). FOCUS is designed to develop replicable model partnerships that embody best practices in HIV screening and linkage to care across America. The program has 94 partnerships in 11 regions across the United States that are heavily affected by HIV, including the Oakland area. The partnerships aim to make routine HIV screening for adults and adolescents a standard of medical care in order to reduce the number of undiagnosed individuals with HIV, decrease the number of those who are diagnosed late, and ensure strong linkage to care. At Children’s, opt-out testing has been implemented in seven sites where youth are seen: the Teen Clinic, 2 school-based clinics, Primary Care, the Juvenile Justice Center, the Emergency Department, and inpatients.

HIV/AIDS Clinic—Patients coming to the HIV/AIDS clinic receive care from a multidisciplinary team of healthcare providers. The clinic places emphasis on adherence to medications, with the goal to suppress the patient's HIV to undetectable blood levels. Currently, 94 percent of our patients have undetectable blood levels. Children who were born infected are given special assistance in transitioning from pediatric to adult care during their late teen years. Since 2001, we have graduated 59 teens and young adults into special youth programs or local adult HIV care. Teens and young adults with newly discovered HIV are assisted in obtaining care through local youth programs.

Advances in the prevention of mother-to-child transmission of HIV have dramatically decreased the number of newly infected infants in the United States. However, other countries impacted by HIV/AIDS continue to struggle with this pandemic. Therefore, we still see new families who immigrate to the U.S. and for whom HIV may be a new or pre-existing diagnosis. We also see some families seeking international adoption who may be open to considering a child with HIV infection. The PHAP offers pre- and post-adoption services for families considering adopting an HIV-infected child.

Family Care Network (FCN)—FCN is a Ryan White CARE Act funded collaborative that coordinates primary medical care, case management, and legal and mental health services for people living with or impacted by HIV/AIDS in Alameda and Contra Costa counties. PHAP is the only one of the eight agencies in the collaborative that provides pediatric medical care, case management, and mental health services for children with HIV/AIDS in the East Bay.

Hope Clinic—Through collaborations with programs in the FCN, it is possible to identify pregnant women infected with HIV and to provide them with care during their pregnancy, as well as to ensure that their babies get proper treatment and care during and immediately after delivery. Infants born to mothers with HIV are closely monitored for the disease over 4–6 months by Hope Clinic staff until they have been fully evaluated and HIV infection can be excluded. None of the last 402 infants who have been seen by the Hope Clinic since 1996 have been infected by HIV.

Sexual Assault and Needlestick Exposures—We provide preventive services, support services, and education for child victims of sexual assault and needlesticks who are at risk of acquiring HIV (and hepatitis B and C, syphilis, gonorrhea, and chlamydia). Approximately 8-10 child victims of sexual abuse and needlestick exposures are seen by PHAP every year, often starting with their initial evaluation in the Emergency Department. We have seen 147 such children since 1997, most of who were put on a one-month treatment regimen. None of those who came back for follow-up acquired HIV from their exposure.
RESEARCH

PHAP staff and patients have participated in many clinical trials including those related to drug development, antibiotics, and vaccine trials as well as clinical and immunological response to infection with HIV.

EDUCATION AND OUTREACH

PHAP staff work to educate the community, foster parents, teachers, community providers, and patients’ schools about pediatric HIV/AIDS issues through presentations and seminars. The Pediatric HIV/AIDS Program offers a mini-residency program to educate physicians, nurses, and social workers interested in increasing their clinical and psychosocial knowledge about HIV/AIDS. In addition, we share our clinical expertise with medical delegations from countries severely affected by the AIDS epidemic. Medical teams including doctors, nurses, social workers, and public health/governmental representatives from Côte d’Ivoire, Thailand, Nigeria, and Tanzania have participated in this program.

PHAP hosts an annual holiday party and facilitates other social events for patients and families to network. In addition, we partner closely with Camp Sunburst and a number of other HIV-specific camps for children, youth, and their families in Northern and Southern California to enable our patients to attend camps where they meet other children and learn skills and coping mechanisms that will help them as they grow up, living with HIV.
Psychology Oncology Program

Children’s Psychology Oncology program consists of a specialized team of psychologists and neuropsychologists. The team is specifically trained to provide compassionate care and address the special emotional needs of children with cancer and their families. This is the only psychological support program of its kind in the Bay Area.

**Program Coordinators:** Dina Hankin, PhD dhankin@mail.cho.org and Pam Orren, PhD porren@mail.cho.org

**DIRECT SERVICES**

**Therapy and Emotional Support**—The team provides individual psychotherapy, emotional support, encouragement, and hope to help children, their siblings, and their parents manage the emotional toll of a cancer diagnosis and treatment. Stress management, play therapy, and behavioral modification techniques are also used as needed.

**School and Social Reintegration**—The cognitive development of children with cancer may be affected by their condition and treatment. Pediatric cancer patients’ school attendance and social interaction are affected. The Psychology Oncology team provides neuropsychological assessments, school presentations, and individualized advocacy for children who have been out of school or who have cognitive challenges as a result of their treatment.

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

**Long-Term Follow-Up Program**—The team coordinates and provides outreach and psychological services to multi-disciplinary clinics for pediatric cancer survivors who have completed treatment two or more years prior. Participation in these clinics allows survivors to receive information and guidance regarding their medical and psychosocial needs as they progress into survivorship and adulthood. In 2014, we partnered with Alta Bates Summit Medical Center to create a transition program for our young adult patients to obtain care with a medical oncologist and adult multi-disciplinary team.
**Camps for Children with Special Healthcare Needs**

Camps are an important experience that allows kids to enjoy outdoor activities and make new friends. Throughout the year, Children’s helps to manage several camps for children with special medical or mental health conditions.

---

**CAMP HEMOTION (BLOOD DISORDERS)**

Each summer, Camp Hemotion provides a week-long residential program at Camp Oakhurst, near Yosemite, for 7- to 20-year-olds who have bleeding disorders or are carriers of bleeding disorders, and their siblings. Camp Hemotion is the result of a partnership between Children’s and the Hemophilia Foundation of Northern California. Attendees participate in various activities and learn how to better manage their condition—including training in self-infusion.

---

**SICKLE CELL CAMP**

Sickle Cell Camp is a summer camp dedicated to enriching the lives of children with sickle cell disease through a stimulating camp experience. Last year, 30 campers attended our program; 75 percent of whom had never been to camp. Our camp provides enjoyment and inspires children to try new things in a comfortable and caring atmosphere. Our goal is to help increase our campers’ self-esteem through the development of new skills and by encouraging the values of kindness, caring, and charity. Campers meet new friends and learn about their disease in a fun, exciting manner while developing their social skills. We provide a safe environment where kids can spend their summers with positive role models and have the chance to create fun memories with an incredible summer camp experience. Sickle Cell Camp educates, empowers and inspires children living with sickle cell disease.

---

**FAMILY CAMP AND B-LEADERS YOUTH RETREAT (HEMOPHILIA/BLEEDING DISORDERS)**

Members of our Hemophilia Treatment Center also participate in the planning and serve as medical staff for two other camps. Family Camp, is a weekend-long camp held each January at Camp Arroyo for children with bleeding disorders and their families; about 35 to 40 families attend each year. B-Leaders Youth Retreat is open to youth ages 14 to 18 who are affected by a bleeding disorder. This takes place in May each year and is a weekend-long retreat. Most attendees at these camps are Children’s patients.

---

**CAMP DE LOS NIÑOS (DIABETES)**

This one-week residential camp in the Santa Cruz Mountains is for kids 7 to 17 years old. The camp combines traditional camp activities with diabetes education. A Children’s endocrinologist has attended camp as part of the medical staff since 2006. In addition, there are also residents who attend to help staff.

---

**CAMP FUN (HEALTHY EATING)**

CAMP FUN (Food and Understanding Nutrition) is a collaboration between Children’s Healthy Hearts program and UCSF Department of Pediatrics. This camp is oriented towards a healthy lifestyle and runs out of the Concord Youth Center. In 2014, a total of 20 campers participated in this program.

---

**DASH CAMP (DIABETES)**

DASH (Diabetes and Sports Health) Camps include day camps and after school programs geared towards youth with diabetes, their friends, family and community members. The camp activities include a variety of sports, DASH Olympics, and educational/empowerment activities. Two endocrinologists and a Diabetes Educator from Children’s have been involved as medical staff and program consultation since its inception in 2012.

---

**CAMP CREATING CONFIDENT PEOPLE (CHILD ABUSE AND VIOLENCE EXPOSURE)**

For one week each summer, the Center for Child Protection hosts Camp Creating Confident People, a day camp for children that have been impacted by child abuse and exposure to violence. Through group psychotherapy, expressive arts, and interactive activities, children learn resiliency and safety skills.

---

**CAMP BREATHE EASY (ASTHMA)**

In 2014, 82 children with asthma attended Camp Breathe Easy, where they participated in traditional summer camp activities while learning about asthma self-management over four days. Camp Breathe Easy is a residential camp located in a natural setting in the hills outside of Livermore. It is organized and staffed by Children’s Primary Care Clinic.

---

**CAMP SUNBURST (HIV)**

Children’s HIV/AIDS Program partners closely with Camp Sunburst, an HIV-specific camp for children, youth, and their families. Camp Sunburst enables our patients to attend a camp where they meet other children with HIV and learn skills and coping mechanisms that will help them as they grow up with HIV.
Healthy Hearts: A Program to Prevent and Treat Childhood Obesity

Childhood obesity is a serious problem in Alameda and Contra Costa counties, where at least one-fourth of 5th through 9th graders are overweight. Children’s supports Healthy Hearts, a program based in the Pediatric Cardiology Medical Group. Healthy Hearts provides treatment and counseling 2- to 18-year-olds with obesity and the complications associated with being obese or overweight including diabetes, heart disease, and high blood pressure. The Healthy Hearts clinical team includes physicians, a pediatric nurse practitioner, a dietitian, an exercise specialist, a lipid research consultant, and a psychologist. Approximately 300 new patients entered the program in 2014.

Project Coordinator: Lourdes Juarez, CPNP, MSN, RN (510) 428-3885, ext. 2052 ljuarez@mail.cho.org
Co-Director: Lydia Tinajero-Deck, MD (510) 428-3885, ext. 4624 ltinajerodeck@mail.cho.org
Co-Director: June Tester, MD, MPH (510) 428-3885, ext. 2052 jtester@chori.org

DIRECT SERVICES

Healthy Hearts is a year-long program that involves 6 to 8 one-hour visits to the clinic. At each visit, patients receive individualized treatment and counseling with a physician and one of the staff’s specialists. The program aims to promote healthy habits in children. Sessions focus on topics such as mental health, nutrition, and physical activity. Healthy Hearts is offered in Oakland, Larkspur, and Walnut Creek.

RESEARCH

Dr. Tester conducts research on how the environment impacts children’s risk for obesity. She has been the principal investigator for a project investigating the role of playgrounds in physical activity and community social capital, as well as a project studying the feasibility of using mobile food vending to increase access to healthy food in at-risk populations. She is currently conducting a study about concurrent obesity and food insecurity.

The Healthy Hearts team participated in Focus on a Fitter Future from 2011 to 2013, a consortium of more than 20 pediatric obesity programs in children’s hospitals nationwide. Participation in this research-oriented collaboration has enabled the team not only to be at the forefront of current clinical best practices, but also to be connected to current research endeavors, such as common measurement tools for obesity clinics nationwide. Currently, the team participates in an extension of that working group called the Children’s Hospital Association and the AAP Institute for Healthy Weight Expert Exchange.

The Healthy Hearts program also works with research scientists at Children’s Hospital Oakland Research Institute’s Center for Nutrition & Metabolism and Center for the Prevention of Obesity, Cardiovascular Disease & Diabetes.
EDUCATION AND OUTREACH

Healthy Hearts reaches many young people in the community through collaborations with:

**Girls on the Run** — A local not-for-profit that aims to increase girls’ opportunities for exercise and peer support. In 2014, there were three 10-week sessions where five healthy hearts girls participated in running around Lake Merritt, culminating with a 5K run.

**YMCA of Downtown Oakland’s Teen Fit Program** — Healthy Hearts physicians refer adolescents to the YMCA by to participate in a summer program, where they are then linked with a personal trainer. In 2014, 15 teens participated in Teen Fit.

**Endurance** — A community-based organization that offers biking and running experiences. In 2014, a total of three bike trips, two running trips, and four swimming events were conducted, with each event accommodating 8 to 12 children from Healthy Hearts.

**Dancin Power** — A non-profit that originated from UCSF Benioff Children’s Hospital Oakland. In 2014, Dancin Power held dance sessions at Healthy Hearts patient orientations, with typically 15 patients at each session.

**Phat Beets** — A non-profit organization that runs a community garden and a farmer’s market. Every summer, Healthy Hearts patients intern in the garden to learn about gardening and food justice. Additionally, Healthy Hearts distributes Community Supported Agriculture boxes to patients attending orientations to the program.

**Camp F.U.N.** — UCSF Benioff Children’s Hospital San Francisco on a camp oriented towards healthy lifestyle called Camp F.U.N. that takes place in Concord. In 2014, 20 campers participated in Camp F.U.N.
Community Farmers Markets and Dover Street Garden

Children’s collaborates with a local not-for-profit, Phat Beets Produce, to promote healthy eating in patients and in the community through farmers markets and a youth community garden.

EDUCATION AND OUTREACH

The year-round farmers market is located in front of Children’s Outpatient Center and is open every Tuesday for patients and the general public, another seasonal farmers market serving the Oakland Senior Center is hosted by the Children’s Hospital Oakland Research Institute. Both markets offer fruits and vegetables grown by local farmers. Weekly fruit and vegetable boxes are available on Tuesday for pick-up or delivery for staff of the hospital who would like to support the market and get fresh produce.

The Dover Street Park Youth Garden was developed near Children's in 2010. The garden is maintained by adolescents who are participating in the Healthy Hearts program. Vegetables produced in the garden are available to patients in the Healthy Hearts program as well as the general North Oakland community.
Kohl’s Injury Prevention Program

The Kohl’s Injury Prevention Program (IPP) administered by Trauma Services at Children’s, aims to reduce the number of unintentional injuries and fatalities in children, primarily through education and by providing equipment to promote safety. Each year, more than 9,000 children die as a result of being injured. Unintentional child injuries are the leading cause of medical spending for children in the U.S., totaling $12 billion annually.

Injury Prevention Coordinator, Trauma Services: Bonnie Lovette, RN, MS, PNP (510) 428-3885, ext. 4703
blovette@mail.cho.org

EDUCATION AND OUTREACH

Home Safety Improvement Program (HSIP) — The HSIP is collaboration between the Neonatal Follow-Up Program, the Primary Access Clinic, Alameda County Healthy Homes Program and Trauma Services. The program promotes “active supervision” among parents and educates them on how to keep their child safe from window falls, burns, choking, dog bites, drowning, gun-related injuries, poisonings, and other causes of unintentional injuries. Parents are also shown a safe sleep environment for their infant. Families receive safety devices such as window guard “super stoppers,” bathtub thermometers, cabinet latches, doorknob covers, outlet protectors, safety gates, smoke and carbon monoxide alarms, toilet locks, stove locks, furniture corner cushions and cribs.

The Prevention of Shaken Baby Syndrome Program (PURPLE) — PURPLE is an evidence-based program designed to prevent abusive head trauma by teaching parents of NICU patients that crying is normal for a newborn and how to reduce their frustration. Each parent receives a DVD and educational handouts. PURPLE is also given out in the Emergency Department.

Safe Sleep Environment Crib Program — This program teaches NICU parents how to prevent SIDS, overlay, and suffocation of their newborn by creating a safe sleep environment for their infant. Every baby discharged receives a Halo sleep sack, and cribs are provided according to financial need. Safe Sleep is now a hospital-wide program in which a safe sleep environment is modeled for families for all children (with medical clearance) up to one year of age.

Car Seat, Special needs Car Seat and Vests, and Helmet Program — To promote safer transportation of infants, IPP provides more than 500 families each year with equipment and education about car seat safety. Every baby in Children’s Neonatal Intensive Care Unit must have an appropriate child passenger restraint before being discharged. IPP also conducts car seat checks, and distributes car seats and bicycle helmets to families in the local community at health fairs. Helmets are given to all patients who do not have a helmet or whose helmet was damaged. In 2013 the IPP started a Car Seat Inspection station where monthly car seat checks are performed on campus for parents by appointment. Families of children who have spica casts may request a Hippo spica car seat or EZ ON vest, which is provided on a loan basis. Children discharging from the Rehabilitation Hospital receive an assessment at the request of social services for safe discharge home. A Child Passenger Safety Technician certified in special needs determines the type of car seat that is provided.

Text OUCH to 30644 — OUCH is a texting campaign launched in 2011 that aims to provide helpful safety tips to caregivers of young children. Families who subscribe receive two or more text messages each month in English or Spanish related to health and safety. Many agencies and organizations in both Alameda and Contra Costa counties have signed formal memoranda of understanding contracts to endorse this innovative method of education. The Contra Costa Board of Supervisors has recommended the OUCH program for all Contra Costa children and the National Association of Pediatric Nurse Practitioners (NAPNAP) named it a “Best Practice Tool.”

Mighty Kids (MK) Media — MK's safety cartoons air on the hospital's closed circuit TV system. At safety events, MK distributes educational materials, wristbands, and DVDs. MK’s also promotes Twitter parties where parents can answer an injury prevention question and win Kohl’s gift card. Families can connect directly to Mighty Kids through injury prevention’s website: www.preventingchildrensinjuries.org for activities and games. There are 36 health and safety videos for families to view on the video-on-demand system located in the Family Resource and Information Center.

Youth Alive — Children’s collaborates with a community based organization called Youth Alive (YA) to help prevent and address violence. Social workers at Children’s can call YA counselors when a victim of violence is admitted to the hospital. The counselors arrive at the hospital within 2 hours of being contacted and then continue to support the family in the community.
Sports Medicine Center for Young Athletes

UCSF Benioff Children’s Hospital’s renowned Sports Medicine Center for Young Athletes offers expert care for athletic and sports injuries to young athletes. With locations in Oakland, Walnut Creek, and San Ramon, our program offers state-of-the art care for both the management and rehabilitation of sports injuries in young athletes, as well as injury prevention education and sports performance training. Our training programs are designed to increase overall athletic performance and decrease the risk of injury. Young athletes work on optimal long-term athletic development with experienced sports medicine professionals in individual training sessions or in weekly group classes.

Administrative Office: ☎ (510) 428-3558
Management Coordinator: Michelle Cappello, MSPT ☎ (510) 428-3885, ext. 5082 ✉ mcappello@mail.cho.org

EDUCATION AND OUTREACH

The SMCYA staff serve as athletic trainers at 8 local high schools and for all the Oakland Athletic League football games and sports championship games. They are the sports medicine resource for the North Coast Section of the California Interscholastic Federation, with whom they contract to provide on-site athletic trainers at all North Coast Section high school championship events. The athletic trainers work with young athletes to manage acute injuries, implement rehabilitation programs, and provide education to prevent sports injuries.

The Sports Medicine Center for Young Athletes does community education and outreach to medical professionals and the general public through annual medical conferences, monthly community lectures, and general seminars. Each year, SMCYA participates in more than 25 seminars across Alameda and Contra Costa counties.
Health Education for Patients, Families, and the Public

Children’s staff members offer their expertise with the public including patients and their families, foster parents, students, and professionals who work with children.

<table>
<thead>
<tr>
<th>DIVISION OF AUDIOLOGY</th>
<th>DIVISION OF NEUROSURGERY</th>
</tr>
</thead>
<tbody>
<tr>
<td>In 2014, the audiology department continued to use a cochlear implant educator, researcher, and outreach liaison for the cochlear implant program, and to provide support groups for cochlear implant patients, their families, and families of children considering implantation.</td>
<td>Brain and spinal cord injury prevention are taught to 1st, 2nd, and 3rd graders, and to high school students in the Bay Area through the Neurosurgery department’s ThinkFirst Program.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>CENTER FOR THE VULNERABLE CHILD (CVC)</th>
<th>PEDIATRIC HIV/AIDS PROGRAM (PHAP)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Various CVC programs educate caregivers and professionals who work with at-risk children.</td>
<td>Program staff educates foster parents, social workers, and health outreach workers about HIV/AIDS.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>DIVISION OF ENDOCRINOLOGY AND DIABETES</th>
<th>PRIMARY CARE CLINIC</th>
</tr>
</thead>
<tbody>
<tr>
<td>The division hosted an informational table and performed screening for TrialNet at the Juvenile Diabetes Research Foundation (JDRF) Walk to Cure Diabetes at Heather Farms Park in Walnut Creek in October. At the Centennial Neighborhood Celebration at Dover Park, the division hosted a table showing sugar content of various sweetened beverages. The division also hosted a table in the cafeteria for World Diabetes Day in November. “Insulliance,” a new mentoring program for children with Type 1 diabetes, continues to provide mentors to offer emotional support, resources, and non-medical advice. Other resources for patients included audio and visual teaching materials to view while hospitalized: “Managing Type 2 Diabetes in Young People,” and “Staying in Balance: An Introduction to Type 1 Diabetes for Kids and Their Parents.”</td>
<td>The clinic provides parenting and health education classes on a variety of topics to schools and agencies that serve families.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>DIVISION OF NEUROSURGERY</th>
<th>DIVISION OF MENTAL HEALTH AND CHILD DEVELOPMENT</th>
</tr>
</thead>
<tbody>
<tr>
<td>Brain and spinal cord injury prevention are taught to 1st, 2nd, and 3rd graders, and to high school students in the Bay Area through the Neurosurgery department’s ThinkFirst Program.</td>
<td>Teens, foster parents, teachers, family court judges, and healthcare professionals are taught about psychiatric health topics through classes provided by staff.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>DIVISION OF PULMONARY MEDICINE</th>
<th>SCHOOL-BASED MENTAL HEALTH CONSULTATION</th>
</tr>
</thead>
<tbody>
<tr>
<td>• CPR Training — Pulmonary patients and families are taught CPR prior to being discharged from the hospital.</td>
<td>The School-Based Mental Health Program is a source of expertise on the intersection of schools and mental health. They have developed a training and consultation program for school professionals and mental health providers who work with schools, and regularly conduct trainings throughout Alameda County and California.</td>
</tr>
<tr>
<td>• Cystic Fibrosis (CF) Family Education Days — CF education (including a Spanish session) is provided in Oakland, San Francisco, and Reno for CF families several times annually.</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>HEALTH INFORMATION ON THE WEB</th>
<th>MEDICAL SOCIAL SERVICES</th>
</tr>
</thead>
<tbody>
<tr>
<td>The public can access information on health topics and Children’s resources through the hospital’s website and its Facebook, Twitter, and YouTube pages.</td>
<td>A weekly Sickle Cell Support group and an annual Sickle Cell Transition Workshop help patients cope with their condition. Other services include a lecture titled “The Day in the Life of a Thalassemia Social Worker,” and a social work panel for high school students.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>MEDICAL SOCIAL SERVICES</th>
<th>SPORTS MEDICINE CENTER FOR YOUNG ATHLETES</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sports provides education on injury prevention and other sports medicine issues to the public.</td>
<td></td>
</tr>
</tbody>
</table>
Juvenile Justice Center Clinic

Children’s Division of Adolescent Medicine is contracted to run a comprehensive on-site medical clinic at the Alameda County Juvenile Justice Center (JJC). The JJC is a 360-bed detention facility that houses juvenile offenders from Alameda County and is part of the Alameda County Probation Department.

Clinical and Administrative Director: Shanta Ramdeholl, RN  (510) 428-3214  sramdeholl@mail.cho.org
Supervising Physician: Barbara Staggers, MD  (510) 428-3885, ext. 2742  bstaggers@mail.cho.org

Approximately 3,800 children and adolescents received healthcare services at the JJC medical clinic in 2014; about three-fourths of these patients are from Oakland. Medical staff at the JJC clinic includes RNs, NPs, MDs, dentists, LVNs, MAs, discharge coordinators, and clerks. Additional contracted staff includes an optometrist, radiology technician, and chiropractor. Other doctors, such as OB-GYNs, work with the program on an on-call basis. Children’s also provides clinical services at Camp Wilmont Sweeney, a facility that serves as a transition housing/placement facility for about 6 to 9 months for JJC detainees before release to the community.

Youth who need additional specialty care or acute services are brought to Children’s main hospital. Nearly all JJC detainees are released back into their communities after their detention, and Children’s aims to ensure they are healthy, as poor health is one of the main barriers to a successful transition back to school or employment.

COMPREHENSIVE PRIMARY CARE SERVICES AT JJC AND CAMP WILLMONT SWEENEY

- Intake evaluation and 96-hour physical exam
- Point-of-care testing and blood draws
- Screening, testing, and treatment for sexually transmitted diseases
- Care for illness and injury
- Referrals to emergency department and specialists
- Immunizations
- Medication management
- Radiology
- Dental screening and procedures
- Health education
- Chiropractic services
- Optometry: screening, diagnosis, prescribing, and allocation of eyewear on-site
- Care via telemedicine for services not available at JJC
- Assistance with transition for community re-entry
School-Based Health Centers

The Youth Uprising/Castlemont Health Clinic (located next to the Castlemont Community of Small Schools in East Oakland) and the Chappell Hayes Health Center (located on the McClymonds Educational Complex campus in West Oakland) are operated by Children’s divisions of Adolescent Medicine and Mental Health & Child Development in collaboration with the Oakland Unified School District and the Alameda County Health Care Services Agency.

Contact: Sharry Goree  sgoree@mail.cho.org

The school health centers provide a safe and convenient place for students to receive integrated, comprehensive medical and mental health services. Our specially trained teams look at all aspects of an adolescent’s life to help address the many medical and mental health issues the adolescent could be facing.

The Youth Uprising/Castlemont Health Clinic sees students from Castlemont High School as well as members of the community ages 11–24. In 2014 the clinic saw 1,789 patients. Both sites are integrated into full-service youth and/or family centers that promote youth development and serve as national models for adolescent healthcare.

The Chappell Hayes Health Clinic, located at McClymonds High School, saw 476 students and other youth in 2014. Youth Uprising/Castlemont Clinic—which operates a full-time comprehensive team of six therapists and a psychiatrist, as well as comprehensive medical services—is the hub for teachers, parents, and students to coordinate therapy, care, support, and help. The Castlemont site is now the highest-volume school-connected mental health site in Alameda County. The School-Based Mental Health Program has been providing comprehensive, integrated mental health services at these two school-based health centers since 2003. The sites’ School-Based Mental Health Program has become a national model for the integration of medical and mental healthcare, and it has been cited for success at addressing underlying social stressors related to mental health. The program has developed a training and consultation program for school professionals and mental health providers who work with schools, and it has contracts to conduct trainings throughout Alameda County and California.

**CLINICAL SERVICES AT THE SCHOOL-BASED HEALTH CENTERS INCLUDE THE FULL SPECTRUM OF COMPREHENSIVE ADOLESCENT HEALTHCARE:**

- Routine preventative care
- Immunizations
- Nutrition counseling
- Sports physicals
- Reproductive healthcare
- Treatment of sexually transmitted infections
- Physical and sexual assault treatment
- Management of chronic medical conditions
- Mental health services
- Acute Illness management
- Psychosocial support
Primary Care Clinic, Community-Based Programs

Children’s Primary Care Clinic sees about 10,000 children each year—more children than any other primary care provider in the region. The clinic provides resources for the basic healthcare needs of mostly lower-income children from birth to age 19. Services include routine preventative care, chronic disease management, and immunizations. In addition, the Primary Care Clinic provides health education, participates in translational research, offers social and mental health services, and helps train the next generation of pediatricians through its primary care residency program.

Administrative Office: ☏ (510) 428-3129
Associate Director: Kelley Meade, MD ☏ (510) 428-3885, ext. 2793 kmeade@mail.cho.org

SPECIALIZED CLINICS

Continuity Clinic—Children who are discharged from the hospital but do not have a primary care provider can continue to receive follow-up and primary care at the Continuity Clinic.

International Clinic—The International Clinic delivers the same services as the main Primary Care Clinic but is culturally and linguistically tailored to non–English speakers and has interpreters for 31 different languages available. In 2014, there were 400 visits to the International Clinic.

Encore Medical Clinic and Foster Care Clinic—The Primary Care Clinic, in collaboration with the Center for the Vulnerable Child, provides a medical home for homeless children at the Encore Medical Clinic, and for children in foster care at the Family Outreach and Support Clinic.

Asthma Clinic—The weekly Asthma Clinic provides medical care and asthma management education for families who have children with particularly complex cases of asthma. A multidisciplinary team that includes physicians, nurses, and health educators staffs the Asthma Clinic. The clinic saw more than 800 patients in 2014.

RESEARCH

The Primary Care Clinic serves as a study site for Children’s Pediatric and Clinical Research Center. The clinic participates in clinical and translational research studies that have broad public health importance. Current studies focus on asthma, immunology, and vaccine development. In addition, the clinic participates in formal evaluation studies of public health interventions.

EDUCATION AND OUTREACH

Clinical Effort Against Secondhand Smoke Exposure (CEASE) Program—The CEASE Program encourages parents who expose their children to tobacco smoke to stop smoking by providing them with on-site counseling at the clinic and referrals to the California Smokers’ helpline.

Reach Out and Read—This program gives away a new donated book to every child aged 6 months to 5 years who makes a well visit to the Primary Care Clinic. Reach Out and Read aims to increase literacy rates in order to help improve poverty status and health outcomes.

Health Education and Parenting Classes—Health education and parenting classes are also conducted by primary care physicians and residents at various community locations including Oakland preschools, elementary, middle and high schools. In addition, classes are offered at Oakland and Berkeley Head Start programs, the El Grupo parent support group, Juvenile Justice Center, Oakland WIC, Berkeley, Oakland Public Library, and Project Pride.

Safety Products—In conjunction with Children’s Trauma Center and the Alameda County Public Health Department, we provide education and new equipment to parents of infants and toddlers to help protect them against injury and accidents in the home.

Nature Prescriptions Program—In partnership with East Bay Regional Parks (EBRP), we encourage healthy, active living by connecting patients with local opportunities in nature. Programs include a monthly shuttle bus to family-friendly nature events around the East Bay, camping, and hiking with EBRP naturalists.
POLICY AND ADVOCACY

Community, Advocacy and Primary Care Program (CAP)—CAP is an advocacy curriculum for first-, second-, and third-year medical residents who are trained as the next generation of doctors to advocate for their patients, particularly the underserved. Through CAP, residents learn about federal programs such as Women, Infants & Children (WIC), Supplemental Nutrition Assistance Program (SNAP), and the welfare and legal systems. Residents also spend time on site with many community-based organizations in order to gain a first-hand understanding of their operations and the services they provide. The residents also travel to Sacramento to meet with legislators and participate in public hearings about issues critical to pediatric health.

Medical–Legal Program—The Primary Care Clinic has partnered with the East Bay Community Law Center to provide patients with pro bono legal services on cases related to their health issues. This service has been expanded to other departments within the hospital setting.
Child Life Services

Child Life Services creates opportunities for infants, children, teens, and young adults to learn, play, and creatively express emotion during treatment or hospitalization. Undergoing surgery, having diagnostic testing, or receiving a new life limiting diagnosis at the hospital are a common, but overwhelming occurrence. The multiple programs within Child Life work to minimize the stress and negative impact these experiences bring to our patients. Child Life Services ensures that patients’ emotional, social, cognitive, and developmental needs are cared for during their visits to our clinic or stays in the hospital.

Manager: Sara Devaney, MS, CCLS  (510) 428-3520  sdevaney@mail.cho.org

**ARTIST IN RESIDENCE PROGRAM**

The Artist-in-Residence (AIR) program at Children’s offers creative arts programs and projects each week in our hospital classroom, teen lounge, oncology playroom, and infusion center. Our artists work with patients in groups or individualized bedside art sessions. Through these projects and art groups, patients are encouraged to socialize with peers and contribute to their hospital community through art. AIR began in 2002, and the program has served more than 15,000 patients and families.

**FAMILY RESOURCE & INFORMATION CENTER (FRIC)**

The goal of FRIC is to meet the needs of families and caregivers of our patients. FRIC’s bilingual staff members meet and welcome each newly admitted patient and family. The Center serves as a place for parents to take care of themselves, whether that means enjoying a cup of coffee, relaxing in the massage chair, or conversing with other parents. Weekly support groups allow parents to meet one another, play games, knit, and do other activities. Often, the connections made between families lend the greatest support to those facing the challenges that illness and injury bring. Resources available to families include business center amenities, hot beverages, snacks, toiletries, laundry care, and reading materials.

**HOSPITAL SCHOOL PROGRAM**

The Oakland Unified School District (OUSD) Hospital school program provides academic support for our patients. Four general education teachers provide both bedside and classroom support for patients enrolled in grades K-12. In addition, one special education teacher teaches students ages 3-22 who have Individual Education Plans. The school program is open Monday-Friday and follows the OUSD school year calendar. The program also provides a variety of enrichment activities such as art sessions, weekly origami workshops, dance and interactive science projects. In 2014, over 5000 hours with children were recorded.

**JARED KURTIN MUSIC THERAPY PROGRAM**

UCSF Benioff Children’s Hospital Oakland is a leader in creative medical treatment options and has the first established pediatric music therapy program in the Bay Area. The Jared Kurtin Music Therapy Program is a clinical and evidence-based program for hospitalized infants, children, and their families. Research shows that in a medical setting Music Therapy can alleviate pain; reduce trauma; promote physical rehabilitation; support patients’ coping skills; reduce stress, anxiety and depression; stabilize heart rate and blood pressure; and support cognitive and communication skills.

**CHILD LIFE SPECIALISTS**

Certified Child Life Specialists provide therapeutic interventions to prepare children for procedures, engage patients and families in diagnosis education, and introduce supportive tips and comfort measures to master hospitalization, illness, and injury. These interventions help minimize stress and increase coping to support patients now and in the future as they face challenging life events.

Child Life Specialists provide therapeutic programs in our playrooms and teen lounge, and facilitate special events. This year, we were able to facilitate over 60 special events, which were filled with community groups, local sports teams, and nonprofit organizations bringing fun-filled activities inside the hospital for all to enjoy. A few highlights include Pixar short film and artists visit, Salesforce Valentine’s Party, Miss America visit, Santa visit, Raiders visit, and Project Sunshine parties!
Family Information & Navigation Desk (FIND)

The environment in which a child eats, sleeps, plays, and goes to school significantly impacts health. The mission of FIND is to reduce health inequities by partnering with families within the medical home to address social determinants of health such as food insecurity, housing instability, secondhand smoke exposure, access to green space, mental health and development, and physical activity. This partnership model extends to health care providers, community-based organizations, volunteers, policy makers, and academic institutions. FIND is firmly committed to rigorous evaluation of this model and to developing culturally responsive evidence-based best practices.

Project Coordinator: Christine Schudel, MSW, MPH (510) 428-3885, ext. 3663 cschudel@mail.cho.org
 Founder and Medical Director: Dayna Long, MD (510) 428-3885, ext. 5663 dlong@mail.cho.org

DIRECT SERVICES

The FIND program screens for social and environmental issues during medical visits. The innovative on-site “navigation desk” is staffed by highly trained navigators, who aid families in identifying unmet social needs and then refer them community based resources. FIND Navigators also follow-up with families to ensure that they make community connections. FIND promotes culturally responsive evidence-based best practices for addressing social and environmental needs in a health care setting.

EDUCATION AND OUTREACH

FIND maintains an active collaboration with many community organizations such as, but not limited to, the Alameda County Food Bank, East Bay Regional Park District, Family Resource Network, Bananas, CoachArt, East Bay Community Law Center, and YMCA. FIND Navigators are recruited from local colleges, universities, and the community. These collaborations serve as the backbone of the program’s ongoing effort to link children and families with the services they need. Children’s is a founding member of the Bay Area Regional Help Desk Consortium, a regional consortium that aims to support the development and sustainability of help desks across the wider Bay Area.

RESEARCH

A rigorous evaluation of FIND is crucial to demonstrating the impact this intervention has on the healthcare delivery system and patient-centered outcomes. FIND is currently being evaluated via a randomized controlled clinical trial. If FIND demonstrates its effectiveness in addressing social needs, health care utilization, and feelings of connectedness to a medical home, it will scale up throughout the hospital.
Other Family Services

An essential part of treatment and care for many children at Children’s is the support services which help young patients’ families to help adjust to their illnesses.

**BLOOD AND MARROW TRANSPLANTATION (BMT) HOUSE**

The BMT House provides housing for families who have children receiving a blood and marrow transplant at Children’s and live farther than 30 minutes drive from the hospital.

**Contact:** Cindy Lehmann ☏ (510) 428-3885, ext. 5214

---

**FAMILY HOUSE**

The Family House provides sliding-scale fee lodging and meals for families who live 100 miles away or further from Children’s. It consists of 16 bedrooms, a playroom, a gym, a common kitchen, living room, and laundry rooms on each of the two floors. Family House is also available to families with children in the hospital who are not staying at Family House but wish to take advantage of a home-cooked meal or use the shower or laundry facilities.

---

**INTERPRETER SERVICES**

Children’s offers qualified medical interpreters free of charge 24/7 to our patients and their parents/legal decision-makers who have limited English proficiency or who are deaf or hard of hearing. In 2014, Children’s provided interpreter services in 62 different languages.

**Contact:** Sharon Leno ☏ (510) 428-3063 ✉ sleno@mail.cho.org

---

**MEDICAL SOCIAL SERVICES**

Medical social workers are available to assist patients and families with a wide range of issues which arise. The department offers counseling, advocacy, support, information, and referrals. Social workers help avoid delays in in-patient discharges by working with families on practical issues to assist with the patient getting ready to go home. Social workers are an integral member of the interdisciplinary team and work very closely with medical staff.

**Contact:** Marsha Luster, MSW ☏ (510) 428-3325 ✉ mluster@mail.cho.org

---

**CANINE COMPANION**

In 2014, Trinity, a two-year old yellow lab/golden retriever, became our first canine companion. Trinity has been professionally trained and can perform more than 40 commands designed to motivate patients with special medical rehabilitation needs. Trinity’s contributions to patients include providing love and attention increasing patients’ motivation to interact to promote cognitive and language development, encouraging functional upper body movement (petting), and distracting and comforting patients during difficult procedures or exercises.

**Contact:** Christine Aguilar, MD ☏ (510) 428-3655 ✉ caguilar@mail.cho.org
Palliative Care

In 2014, Children’s continued its Palliative Care Program, which was formally established in 2011. The program consists of a specialized interdisciplinary team including a doctor, nurse, social worker, and other specialists who work together with the child’s healthcare providers to provide an extra layer of support.

Palliative care aims to reduce pain and other distressing symptoms for the child; focuses on the physical, emotional, social, and spiritual needs of the child and family; begins at the same time as life-prolonging care and/or curative treatment; and supports the family’s goals for the future. The Palliative Care team is available for consultations on inpatient and outpatient bases and can help with advanced care planning, decision-making, care coordination, pain and symptom management, and referrals. The team also provides extended support through expressive therapies, including art and music therapy.

In addition, the Palliative Care team provides ongoing bereavement support for families who have lost a child, with emotional support and counseling, support groups, and bereavement activities. The program held Children’s third Annual Day of Remembrance in December. The Palliative Care team also provides ongoing education about pediatric palliative care locally, nationally and internationally.

The Palliative Care team coordinated and hosted a 2-day Pediatric End-of-Life Nursing Education Consortium training in April 2014 and a conference titled Comprehensive Pediatric Palliative Care: An Interdisciplinary Approach in October 2014 attended by over 150 health care providers.

Contacts: Claire Vesely, RN, Program Coordinator ☎ (510) 428-3768 cvesely@mail.cho.org
Vivienne Newman, Medical Director ☎ (510) 428-3712 vnewman@mail.cho.org
Professional Education at Children’s

Education is part of Children’s mission, and the hospital maintains an array of professional training programs across several disciplines.

Contact: Jim Wright, MD (Graduate Medical Education) jawright@mail.cho.org
Nancy Shibata, RN, MSN (Nursing Education) nshibata@mail.cho.org

GRADUATE MEDICAL EDUCATION

**Community, Advocacy, and Primary Care (CAP) Rotation for Residents**—Children’s Residency Training Program continues to be one of the premier training programs in the western U.S., with 28-30 residents at each of three levels, and 4 chief residents. As part of their required training, residents spend several months on the CAP rotation, where future pediatricians learn how to advocate for the rights, safety, health, and education of children and their families. During their CAP rotation, residents visit more than 20 community sites. Residents provide health education at some of the sites, and a few residents develop grant-funded projects in their second year of training. Residents also evaluate patients’ homes as part of the Alameda County Healthy Homes Project, where they educate families about home safety. Residents at Children’s are dedicated to serving a disenfranchised population of at-risk children, and a large percentage of Children’s residents go on to practice in local underserved communities. Forty percent of residents go into fellowship training to become pediatric subspecialists, and many stay at or return to Children’s after subspecialty training.

An additional 250 residents from 14 non-Children’s programs rotated through Children’s in 2014. These mostly non-pediatric residents come to Children’s for the pediatric experience in their specialty, which in 2014 included emergency medicine, general surgery, orthopedics, anesthesiology, neurosurgery, and radiology.

**Specialty Fellows**—Children’s had 27 pediatric specialty fellows in 2014 in the areas of critical care medicine, emergency medicine, hematology/oncology, infectious disease, and pulmonology.

**Medical Students**—In 2014, Children’s provided month-long training in 12 pediatric specialties for more than 60 medical students from medical schools across the country. Third year UCSF medical students rotate through Children’s as one of their core pediatric teaching sites, as do second year UCSF medical students for their introduction to clinical medicine.

NURSING EDUCATION

In 2014, Children’s provided pediatric nursing training to 771 nursing students from 15 schools of nursing throughout the U.S. Clinical placements are made in a variety of settings including inpatient units, preceptorships with advanced practice nurses, administrative nursing preceptorships, and preceptorships in specialty areas such as the Emergency Department, Surgical Services, Ambulatory Services, and the Juvenile Justice Center.

Children’s offers two nursing scholarships. The Ava Elliot Scholarship provides nursing school tuition support, and the Ava Elliot Excellence in Nursing Award provides tuition support for continuing education for nursing staff.

Children’s also provides regular, ongoing training to certify its own nurses as well as nurses in the community. Classes provided in 2014 include American Heart Basic Life Support Certification, Pediatric Advanced Life Support Certification, Trauma Nurse Certification Program, Pediatric Hematology Care, Pediatric Chemotherapy Certification, Pediatric Oncology Care, Pediatric Acute Care Skills Day, Perioperative Skills day, Neonatology Nursing update, End-of-Life Nursing Education, and Pediatric Intensive Care Nursing Update.

Contact: Mari Ikeda, Program Coordinator
(510) 428-3251 mikeda@mail.cho.org

PROFESSIONAL INTERNS

**Psychology**—Children’s had five psychology post-doctorals, four pre-doctorals, three practicum students, and two infant development specialist interns working across multiple programs in 2014.

**Radiology**—The division of diagnostic imaging hosts radiology students from Merritt College.

**Chaplaincy**—Sister Bernice oversees three chaplaincy interns from the Jesuit School of Theology.

**Community Health**—Two residents did community health residencies in 2014.
Education for Professionals in the Community

Children’s provides continuing medical education (CME) and training to both Children’s and community-based medical professionals, and CME credits are available in many cases. In addition to the activities listed below, many divisions at Children’s educate other professionals through the Physician Lecture Series at various community locations.

**RESEARCH SEMINAR PROGRAM AT CHORI**

As part of our commitment to education, CHORI offers weekly seminars. These provide regular opportunities for educational enrichment for principal investigators, the scientific community, and the public at large. Seminars are held in CHORI’s “Little Theatre.” Built in 1923, the historic setting is equipped with state-of-the-art digital equipment for national and international leaders in all areas of scientific research to present their newest ideas and explorations.

**HEMATOLOGY DIVISION**

The Department of Hematology/Oncology hosts an annual international conference on sickle cell disease. It also holds educational conferences on thalassemia and educational events throughout the region and in Nevada.

**AUDIOLOGY DIVISION**

For many years, Children’s Audiology Division has assigned a cochlear implant educator, researcher, and outreach liaison to provide education and support to the deaf/hard-of-hearing specialists who follow children with cochlear implants in local school districts. Additionally, other programs and events are often organized to educate local physicians, speech pathologists, audiologists, and the parents of children who are diagnosed with Central Auditory Processing Disorder.

**GASTROENTEROLOGY DIVISION**

The Gastroenterology staff has organized conferences for suppliers of celiac disease products as well as hosted conferences for patients and families. Staff participated in family day at CHORI last summer. Physicians associated with the division give seminars for prospective foster parents on gastrointestinal problems that may affect their young charges. The division also hosts clinical experiences for students from the high school to graduate levels. Institutions involved range from local high schools to UC campuses to Scandinavia and South America.

**PULMONARY MEDICINE DIVISION**

The Pulmonary Medicine Division provides training on lung diseases for professionals who work with children. The division runs an accredited pediatric pulmonary fellowship program to teach pediatricians who wish to become board-eligible in this field. In addition, the division offers educational days for families of children with cystic fibrosis (CF) multiple times annually. Also, a registered nurse visits schools to teach school staff about asthma care and CF so that they understand the implications of these conditions. The Division’s physicians and social worker also attend school IEP conferences for chronically ill patients.

**PEDIATRIC AND NEONATAL INTENSIVE CARE UNITS (PICU AND NICU)**

The PICU and NICU sponsors training in the care of sick newborns for medical providers throughout the region and provides remote consultation.

**PALLIATIVE CARE**

The Palliative Care team coordinated and hosted a 2-day Pediatric End-of-Life Nursing Education Consortium training in April 2014 and a conference titled “Comprehensive Pediatric Palliative Care: An Interdisciplinary Approach” in October 2014 that was attended by over 150 health care providers.

**COMMUNITY CPR CLASSES**

Children’s offers a free cardiopulmonary resuscitation (CPR) class at the Walnut Creek campus each month. In 2014, 141 people completed the class, which teaches students critical skills needed to respond to and manage a choking or sudden cardiac arrest emergency in the first few minutes until emergency medical services arrives. The course covers Infant, Child & Adult CPR and choking and hands-on Automated External Defibrillator (AED) training. Upon completion of this course, students receive an American Heart Association CPR and AED course completion card.

**MONTEREY CONTINUING EDUCATION COURSE**

In 2014, this three-day CME conference was held in beautiful Monterey. The theme was “Hot Topics in Pediatrics.” There were more than 130 attendees.
CHAMPS: Community Health & Adolescent Mentoring Program for Success

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

Administrative Office: ☏ (510) 428-3681
Co-founder: Barbara Staggers, MD ☏ (510) 428-3885, ext. 2742 bstaggers@mail.cho.org
Administrative Director: Shanta Ramdeholl, RN ☏ (510) 667-3131 sramdeholl@mail.cho.org

CLINICAL INTERNSHIPS & HEALTH CAREERS TRAINING PROGRAM

Each year, over 100 high school sophomores from the Oakland and Berkeley Unified School Districts participate in this three-year healthcare and biomedical research internship program. There are four core program components: clinical internships, which let student scholars gain experience working in the healthcare field; academic enrichment, which provides students with SAT and college preparation and career planning; psychosocial services, which offers case management and counseling for students; and youth leadership development.

In 2014, 32 scholars graduated from CHAMPS, 100 percent graduated from high school, and 95 percent began college in the fall of 2014. Alumni of the program have also returned to support current students through annual alumni panels as well as by providing motivation and college transition support. In 2014, CHAMPS graduates received over $750,000 worth of scholarship funding including three recipients of the Gates Millennium Scholarship (full funding of undergraduate and graduate education granted to 1000 people in the U.S. each year); 4 recipients of the East Bay College Fund – ($16,000 awarded over 4 years and personalized mentorship); 4 recipients of university-based scholarships (covering full tuition and fees for four years); and recipients of the Marcus Foster Education Fund; Asian Pacific Islander American Scholarship, the George P. Scotlan Scholarship; Youth on Course; Iota Phi Lambda Sorority Scholarship; Buick Achiever; and Google Scholarship.

SUMMER INTERNSHIP EXCHANGE PROGRAMS

To further provide support and extend opportunities year-round, CHAMPS and Youth Bridge (a health careers internship and youth development program at Alta Bates Summit Medical Center) collaborate to provide paid internship opportunities for local youth. Students and alumni from the respective programs are given an opportunity for a “summer exchange” during which CHAMPS interns gain experience in adult-care settings at Alta Bates and affiliate clinics, and Youth Bridge students intern with staff at Children’s to observe pediatric care. CHAMPS also partners with Health Careers Connection (HCC), a national program for college students to intern in public health settings. CHAMPS hosts HCC interns each summer to provide exposure to unique public health initiatives.

MEDIA DEVELOPMENT & PEER HEALTH EDUCATION PROGRAM

CHAMPS Program, Media Enterprise Alliance (MEA), and KDOL Studios (OUSD Student Media Production) created a unique partnership where CHAMPS students gain the opportunity to design, create, and direct health awareness videos and public service announcements (PSAs) targeting adolescents. Students also create posters and small informational cards on relevant topics such as nutrition and exercise, healthy relationships, dating violence, and HIV awareness. MEA students provide the technical expertise to support the video production and editing skills. Together the students hope to create a small library of short videos and PSAs that can be used in peer education outreach at local middle and high schools.
TRANSITION PATHWAYS AT THE JUVENILE JUSTICE CENTER

JJC Transition Pathways provides healthcare and other employment training for youth who are, or have been, in detention at the Alameda County Juvenile Justice Center in order to lower their risk of recidivism and re-incarceration. Program staff members teach participants life skills and connect them to vocational training, provide field placement, and help them with the employment process.

YOUTH HEALTH EDUCATORS

Students from the three-year Clinical Internships & Health Careers Training Program receive training to become Youth Health Educators. They deliver health lessons to elementary school students, especially on illnesses and conditions that are more prevalent in minority groups, and run the Family Health and Science Festival, a fun and educational event for the general public.

BRIDGING THE GAP

Since 2013, the CHAMPS Program has collaborated with Samuel Merritt University’s School of Nursing to bring over 100 CHAMPS interns to the Health Sciences Simulation Center, the Anatomy Lab, and the Physical Therapy Simulation Center. Students participate in patient scenarios and make connections with current nursing, occupational health, and physical therapy students and faculty, and receive mentorship and guidance.

CONNECTING THE PIPELINE: CHAMPS STUDENT-TO-STUDENT NETWORK

CHAMPS partners with the Health and Medical Apprenticeship Program at UC Berkeley and the Department of Nursing at CSU East Bay to bring together CHAMPS students with college and nursing students. Nursing students participate in developing a multi-day workshop to engage the high school students in stress management and healthy lifestyles. UC Berkeley students serve as mentors and role models and facilitate college preparatory workshops. These partnerships serve to provide opportunities to build direct connections between high school students and students in the next step of their health careers, and begin connecting students to a broader network of future health care professionals.
CHORI Summer Student Research Program

High school and college students interested in pursuing careers in biomedical, clinical, and biobehavioral research have an opportunity to participate in CHORI’s award-winning Summer Student Research Program. The nine-week summer program involves placement in a research setting under the guidance of a mentor, as well as numerous enrichment activities. The program culminates in a day-long research symposium, at which students present their research findings to the faculty, their peers, mentors, friends, and family. About 85 percent of all attendees are students from racial and ethnic groups traditionally underrepresented in the biomedical sciences. Although some students attend university in other states, most have permanent residence in our local community.

The CHORI Summer Student Research Program was founded in 1981 by Children’s President and Chief Executive Officer, Dr. Bertram Lubin as a way to provide mentored opportunities to students to help them explore and gain exposure to research. The program has steadily grown, serving well over 1000 students since its founding year, and averaging 45 students per year for the last five years. In 2014, the program celebrated its thirty-third year; thirty-six students participated (82 percent were female). Two-thirds of the students performed basic research, and the rest, clinical/behavioral research. Typically, 10 students in each cohort are high school students who are recruited primarily from local schools with whom CHORI partners.

Contact: Chandra Andrews-Wright candrewswright@chori.org

STORIES

One student participated in the program for two summers as a rising junior and senior, and continued his work in the mentor’s lab during the academic year. His sustained interest and participation recently earned him a first authorship in an article in a peer-reviewed publication. He also presented his research work at numerous national and international conferences, won several competitive awards, co-authored two more papers, and is determined to apply for an MD/PhD program.

Another participant started as a junior from St. Mary’s College of California, working on the use of a cyclodextrin derivative for the treatment of Niemann–Pick type C disease. In 2012, she worked on a clinical research project on early consequences of damage to the prefrontal cortex. The summer program helped her in preparing applications for the Rhodes and Fulbright scholarships for the year following her graduation. She was selected for the 2012–2013 J. William Fulbright Foreign Scholarship award to Spain, where she worked in a melanoma lab at the Spanish National Cancer Research Center. The CHORI summer program helped reinforce her research interest.

One African American undergraduate student participated in the program during the summer of 2013 and submitted his findings from the CHORI summer research internship to the annual meeting for the American Society for Hematology (ASH) in December 2013. The annual ASH meeting typically draws close to 20,000 physician scientists. This freshman was awarded not only a $500 travel scholarship but also the prestigious ASH Abstract Achievement Award for his poster presentation (this award is typically granted only to medical fellows and graduate students). The summer program helped reinforce his love for research, and desire to pursue a future degree in emergency medicine.

One recent participant was raised in a working-class Latino family. He was the first in his family to attend and graduate from college. Although he loved science from a young age, it wasn’t until he was accepted into the CHORI summer internship program that he found his niche and a community of mentors to encourage him. Not only did he thrive during the 9-week summer program, but the lab he worked in also invited him to continue his work with them. He is now utilizing this work towards a Master’s degree in Molecular Cell Biology, with a plan to pursue a PhD.
Advocacy

Advocacy at UCSF Benioff Children’s Hospital Oakland spans a range of activities. It includes formal representation by Children’s, as well as advocacy and leadership by its employees working as representatives of the institution.

**Advocacy**

**Legislative Visits**—Children’s enhances its advocacy efforts through personal visits with local, state, and federal elected officials and facilitates on-site hospital tours to create greater awareness of the patient centered environment. The Children’s Manager of Government Relations and Public Policy meets regularly with policymakers and community leaders to discuss issues affecting the hospital and the children we serve. In 2014, Children’s communicated with legislators to inform them about key health-related topics and to help shape the organization’s strategy on policy, operational, and financial decision-making.

**Membership in Advocacy Organizations**—Members of Children’s administration and the medical staff play an active role in advocating on a local, state, and national level. Advocacy is frequently conducted through not-for-profit trade associations and professional organizations, such as the California Children’s Hospital Association, the national Children’s Hospital Association, the California Medical Association, and the American Academy of Pediatrics.

**SELECTED ADVOCACY ORGANIZATIONS IN WHICH CHILDREN’S EMPLOYEES HAVE A LEADERSHIP ROLE**

- Alameda Alliance for Health Board of Directors
- Alameda County Asthma Coalition
- Alameda County Behavioral Health Care Services Early Connections Design Team
- Alameda County Child Abuse Council’s Multi-Disciplinary Team
- Alameda County Early Childhood Policy Committee
- Alameda County EMS Car Seat Group
- Alameda County Community Food Bank
- Alameda County Health Workforce Pipeline Coalition
- Alameda County Measure A Citizens Oversight Committee
- Alameda County SART Leadership Council
- American Academy of Pediatrics Board, Calif. Chapter
- American Board of Pediatrics
- Berkeley Health Task Force
- Berkeley Youth Alternatives
- California Adolescent Health Collaborative
- California Children’s Hospital Association
- California Institute for Regenerative Medicine Board
- California Medical Association
- California Thoracic Society Pediatric Committee
- California Wellness Foundation Board
- Childhood Injury Prevention Network
- Children’s Regional Integrated Service System
- Coalition of Freestanding Children’s Hospitals
- Ethnic Health Institute
- Family Care Network Leadership Council
- First 5 Alameda County
- Health Careers Connection
- Hepatitis B Free Alameda
- Medical Education Cooperation with Cuba
- National Association of Pediatric Nurse Practitioners
- Oakland Gang Prevention Task Force
- Pediatric Diabetes Coalition of Alameda County
- Safe Passages
- School Lunch Initiative with Berkeley School District
- Sickle Cell Advisory Committee
- Temescal Business Improvement District
Children’s Global Health Initiative

Children’s provides benefits not only to the local community, but also to the global community through its Children’s Global Health Initiative (CGHI). Serving children in developing countries represents great opportunity for improving health and decreasing mortality. CGHI’s motto is “Treating Locally, Healing Globally.”

Contact: Deborah Dean, MD, MPH  ddean@chori.org

CGHI enables Children’s to have an even greater global impact by providing clinical services and training, conducting research, building clinical and research capacity abroad, fostering international partnerships, conducting foreign exchanges of physicians and scholars between those in the U.S. and those in other countries, hosting conferences, and establishing a clearinghouse of research that addresses global health issues.

CGHI works in countries by invitation to train in-country healthcare workers, provide technology to enhance prevention and treatment, and develop research programs that address the diseases these countries encounter every day. In this collective way, CGHI builds sustainable programs that suit the needs of these communities. In turn, Children’s learns from our colleagues in other countries. Examples of health issues CGHI’s researchers and clinicians are working on in other countries include Rift Valley fever, sickle cell disease, behavioral disorders, HIV/AIDS, thalassemia, iron deficiency, lead absorption, meningitis, tuberculosis, pneumonia, trachoma, human cytomegalovirus, diabetes, sexually transmitted chlamydia, osteoarthritis, leishmaniasis, glucose intolerance, congenital heart disease, trichiasis, obesity, diabetes, cleft palate, stem cell therapies, prematurity in infants, and folate supplementation.

COUNTRIES AND AREAS IN WHICH CHILDREN’S WORKS:

Africa: Benin, Ethiopia, Kenya, Lesotho, Mali, Nigeria, Senegal, Uganda, Zambia

Americas: Argentina, Belize, Canada, Chile, Cuba, Ecuador, Guatemala, Honduras, Mexico, Peru

Asia: China, Japan, India, Korea, Laos, Nepal, Palestinian Territories, Turkey, Vietnam

Europe: Albania, Austria, Belgium, France, Georgia, Germany, Italy, Netherlands, Portugal, Russia, Spain, Sweden, United Kingdom

Pacific: Australia
Trauma Care

Children’s provides immediate, highly specialized pediatric emergency service at its trauma center. A trauma team is available at Children’s every hour of every day of the year. The trauma team comprises pediatric specialists in emergency medicine, trauma surgery, anesthesiology, critical care, neurosurgery, orthopedics, and diagnostic imaging. Children’s Division of Pediatric Rehabilitation supports trauma patients once they are well enough to begin recovery.

Children’s Trauma Center has been designated a Pediatric Level 1 Trauma Center by the American College of Surgeons (ACS). This designation reflects Children’s highest standards and distinguishes it from many other pediatric hospitals. Children’s is one of just four other ACS Pediatric Level 1 Trauma Centers in California.

The Trauma Center is also concerned with addressing injuries before they occur, not just treating them after they occur. The Trauma Center runs the Kohl’s Injury Prevention Program, described on page 27. The goal of the program is to bring awareness and knowledge to parents and caregivers about steps they can take to prevent their children from getting hurt, so they don’t have to use the Trauma Center. In 2014, about 702 children required activation of Children’s trauma team.
Volunteerism/Workforce Development

Children’s offers a variety of volunteer opportunities for people ages 16 and older. In 2014, more than 1,100 volunteers generously donated their time at Children’s.

Contact: Lilly Krenn ☎ (510) 428-3000, ext. 3458 ✉ lkrenn@mail.cho.org

VOLUNTEERS

Supporting Patient Clinical Care—Children’s had volunteers in the Emergency Department, the Neonatal Intensive Care Nursery, Pediatric Rehabilitation, Playroom, Teen Lounge, School Program, Surgery Centers in Oakland and Walnut Creek, Day Hospital, Encore Clinic/Center for the Vulnerable Child, Healthy Hearts Program, Katie’s Clinic for Rett Syndrome, Palliative Care, Parent Infant Program, Sports Medicine Clinics in Oakland and Walnut Creek, and Trauma Services.

Patient Navigation—Volunteers at the Family Information and Navigation Desks in the Primary Care Clinic and Emergency Department support families to address social determinants of health such as food insecurity, housing instability, secondhand smoke exposure, access to green space, and physical activity. This model extends to the health care providers, community-based organizations, volunteers, policymakers, and academic institutions.

Summer Camps—Volunteers made a difference for children in summer camps including Camp Breathe Easy, Camp Winning Hands and Sickle Cell Summer Camp.

Children’s Literacy—Volunteers supported the efforts of the Clinton Foundation Talk Read Sing program, which encourages literacy by distributing thousands of donated books and by reading to children in the waiting rooms of the Primary Care Clinic, the Emergency Department and the Urgent Care Clinic.

Legal Support—Volunteer attorneys from the East Bay Community Law Clinic offered families free medical-legal guidance.

Activities and Entertainment—Volunteers brought the following special programs to Children’s in 2014: Art for Life (ceramics), Dancin Power, Healing Notes (music), Coach Art (art lessons), Project Sunshine (educational and social programs), a world-renowned origami artist, and Threshold Choir (bedside singing for very ill patients). Volunteers also help to produce a weekly in-house television show developed for and starring our patients: the “CHO Show.”

Holiday Cheer—During December, enthusiastic Salesforce volunteers came to Children’s to organize our toy donations and to wrap gifts for our young patients to receive on Christmas morning. Salesforce’s policy of providing paid leave for employees to serve as volunteers continues to help increase the volunteer support we receive from our community. Volunteers also support holiday programs for sickle cell, thalassemia, hematology/oncology, and HIV/AIDS patients.

Family Advisory Council—Children’s Family Advisory Council comprises volunteer members. Volunteers also worked in the gift shop and Family Resource & Information Center.
Project Search

Project SEARCH at Children’s is an award-winning program that provides internships in the hospital and work opportunities to persons with developmental disabilities. In 2014, Children’s had 11 Project SEARCH interns. Nationwide, the unemployment rate for persons with disabilities is 90 percent, and more than half of the 10 percent of those who are employed earn less than the minimum wage. Graduates of Project SEARCH UCSF Benioff Children’s Hospital Oakland earn, on average, 80 percent above the federal minimum wage and 65 percent of them receive health benefit through their employers. Only 15 percent of graduates from Project SEARCH are working in retail or grocery, compared with 77 percent of individuals placed into employment through traditionally supported employment programs.

Contact: Patti Taggert  ptaggert@mail.cho.org
Children’s Hospital Oakland Research Institute

Children’s Hospital Oakland Research Institute (CHORI) is the division of Children’s dedicated to translating basic and clinical research into health benefits for children. In 2014, CHORI had more than 384 active grants and contracts, including various partnerships with private research organizations, corporations, universities, and federal sponsors. In addition to conducting research that saves lives the world over, CHORI staff participate in other non-research activities that directly benefit our local community.

Contact: Janet King, PhD  
(510) 450-7601  jking@chori.org

SUMMER STUDENT RESEARCH PROGRAM AND SYMPOSIUM

High school, college, medical, and graduate students who are pursuing or who are interested in pursuing careers in biomedical, clinical, and biobehavioral research have an opportunity to conduct research with CHORI researchers as part of the institute’s Summer Student Research Program. At the end of the nine-week program, students present their work to their peers at an all-day symposium. Thirty-six students participated in the program in 2014, its thirty-third year.

POSTDOCTORAL RESEARCH FELLOWS

CHORI has a postdoctoral training program in molecular and cell biology with a focus on hematology, immunology, and stem cell biology. The program includes postdoctoral fellows pursuing a career in science as well as medical fellows in training for a medical specialty. The program emphasizes laboratory research under the tutelage of an experienced scientist.
V. Economic Impact

Our methodology for determining the economic value of the benefit to the community incorporates elements of the reporting requirements for the IRS 990 and California Hospital Association’s community benefit valuation standards. Children’s policy and methods for calculating the economic valuation are available upon request. Our community benefit valuation is the total net cost of charity care, undercompensated medical care, professional education, community programs and services, and research after any reimbursement, philanthropic support, or supplemental funding have been subtracted.

The category related to physician costs represents the cost to the hospital required to retain subspecialists who provide care to children covered by Medi-Cal. Several of the other categories capture the underfunded overhead for programs that are otherwise funded by grants or contracts. These grants and contracts provide critical staff that the hospital would otherwise have to support, but they do not fully cover all the costs of delivering these services.

<table>
<thead>
<tr>
<th>ECONOMIC VALUE</th>
<th>2014</th>
</tr>
</thead>
<tbody>
<tr>
<td>Charity Care</td>
<td>$7,447,000</td>
</tr>
<tr>
<td>(Free care to uninsured and underinsured patients)</td>
<td></td>
</tr>
<tr>
<td>Government Sponsored Healthcare</td>
<td>158,045,000</td>
</tr>
<tr>
<td>(Unpaid cost of public coverage programs, net of all government funding)</td>
<td></td>
</tr>
<tr>
<td>Subsidy to ensure physician coverage for uninsured/underinsured patients</td>
<td>27,762,000</td>
</tr>
<tr>
<td>Health Professional Education</td>
<td>4,921,000</td>
</tr>
<tr>
<td>(Graduate Medical education, Fellows, Nurses)</td>
<td></td>
</tr>
<tr>
<td>Subsidized Health Programs</td>
<td></td>
</tr>
<tr>
<td>Juvenile Justice Clinic</td>
<td>1,120,000</td>
</tr>
<tr>
<td>Mental Health Services (EPSDT)</td>
<td>4,908,000</td>
</tr>
<tr>
<td>Trauma Services</td>
<td>—</td>
</tr>
<tr>
<td>Community Health Services</td>
<td></td>
</tr>
<tr>
<td>Family House</td>
<td>644,000</td>
</tr>
<tr>
<td>Child Life Services</td>
<td>1,134,000</td>
</tr>
<tr>
<td>Family Resource &amp; Information Center</td>
<td>239,000</td>
</tr>
<tr>
<td>Center for Child Protection</td>
<td>1,119,000</td>
</tr>
<tr>
<td>Center for the Vulnerable Child</td>
<td>104,000</td>
</tr>
<tr>
<td>CHAMPS</td>
<td>293,000</td>
</tr>
<tr>
<td>HIV Program</td>
<td>317,000</td>
</tr>
<tr>
<td>Hemoglobinopathies Program</td>
<td>613,000</td>
</tr>
<tr>
<td>Injury Prevention Program</td>
<td>232,000</td>
</tr>
<tr>
<td>Palliative Care</td>
<td>464,000</td>
</tr>
<tr>
<td>Asthma Programs</td>
<td>80,000</td>
</tr>
<tr>
<td>Early Intervention Services</td>
<td>816,000</td>
</tr>
<tr>
<td>Research (Includes research costs not covered by external sponsors)</td>
<td>4,011,000</td>
</tr>
<tr>
<td>Advocacy for Children’s Health Issues</td>
<td>Included in operations</td>
</tr>
<tr>
<td>Subtotal</td>
<td>214,269,000</td>
</tr>
<tr>
<td>Less DSH/Supplemental Funding (SB855/SB1255) including Measure A</td>
<td>(28,921,000)</td>
</tr>
<tr>
<td>Less Net Hospital Provider Fee</td>
<td>(35,158,000)</td>
</tr>
<tr>
<td>Total Charity Care and Community Benefit</td>
<td>$150,190,000</td>
</tr>
</tbody>
</table>
2014 COMMUNITY BENEFIT REPORT