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Having completed my first year at UCSF Benioff Children’s Hospital Oakland, I continue to be humbled by the professionalism of its staff and inspired by the impact this hospital has, both locally and globally. One of the areas where Children’s is truly exceptional is its authentic passion for—and dedication to—serving the highest-risk children and families in the local community. I am delighted to present UCSF Benioff Children’s Hospital Oakland’s 2017 Community Benefit Report, which summarizes the various programs and projects our hospital has engaged in this past year that reach beyond our core medical services.

Building on established community benefit programs, our hospital developed several new and innovative initiatives in 2017. For example, Children’s started a partnership with Oakland Mayor Libby Schaaf as part of her $25-million signature initiative, Oakland Promise, which aims for all children born in Oakland to go to college. Children’s is leading a longitudinal study to evaluate a key component of Oakland Promise called Brilliant Baby, whereby infants of lower-income families receive college savings accounts and their caregivers receive financial coaching. Newborns are referred to Brilliant Baby by their pediatrician and other providers.

Another exciting effort is the Child Health Equity Institute (CHEI). To better align efforts across campuses, Children’s Oakland and representatives from the UCSF School of Medicine and department of Pediatrics created CHEI, a cross-bay network to promote child health equity through clinical innovation, research, advocacy and education. This effort is well aligned with the UCSF campaign, of which “health equity” is a key fundraising strategy. I anticipate that this alignment will help bring in resources to address health inequity in Oakland.

My commitment to the legacy and mission of Children’s Hospital is unwavering. I will do everything in my power to maintain the quality of our services and the collaborative relationships needed to maintain that legacy in the years to come. I am excited to continue this journey of engaging with the community and our partners to create solutions to the most pressing issues that stand between us and the health and well-being of our children.

Michael Anderson, MD, MBA, FAAP
President, UCSF Benioff Children’s Hospitals & SVP, Children’s Services
Vice Chair for Children’s Health, Department of Pediatrics, UCSF School of Medicine
Our Mission
To protect and advance the health and well-being of children through clinical care, teaching and research.

Our Vision
To be a leader in children's health through:
- High quality, cost-effective, family centered care.
- Research that benefits children and adults worldwide.
- Broad based teaching and educational activities.
- Child advocacy and health policy efforts.

Service Area and Scope of Services
UCSF Benioff Children’s Hospital Oakland offers a broad range of inpatient, outpatient and community programs. Although Children’s serves patients throughout Northern California and other states and counties, about 80 percent of Children’s patients come from Alameda and Contra Costa counties. Children’s is a pediatric safety-net hospital for both of these counties, since neither has public hospital beds for children. In 2017, a total of 80,362 patients were served through 9,429 inpatient and 264,441 outpatient visits. This number includes 46,375 visits to the Emergency Room.

Children’s offers multiple community programs and services. Its Federally Qualified Health Center is the largest pediatric primary care clinic in the Bay Area and includes two comprehensive school-based clinics and a clinic at the Juvenile Justice Center in San Leandro. The Children’s Hospital Oakland Research Institute (CHORI) is dedicated to translating basic and clinical research into health benefits for children. In 2017, CHORI had more than 200 active grants and contracts, which included partnerships with private research organizations, corporations, universities and government entities on local and national levels.

Governance
Since 2014, Children’s has had an affiliation with UCSF. UCSF has representation on the Children’s Board of Directors, and Children’s retains its identity as a private, not-for-profit 501(c)(3) organization. Children’s president is a voting member of the Board of Directors, as are the UCSF Medical Center CEO and the dean of the School of Medicine. The Regents of the University of California is the corporate “parent” of Children’s.
The Affordable Care Act requires all nonprofit hospitals to complete and submit an annual Community Benefit Report. Although hospitals bring numerous benefits to their local economies, these reports are intended to document the ways that hospitals support the health needs of their communities above and beyond the hospitals’ core functions. Children’s conducted a community needs assessment in 2016 that 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 no official definition of a “community benefit.” Children’s has 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 or the needs of a vulnerable 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
- Is not considered standard of care for a children’s hospital.

The following are not considered community benefits: programs and activities designed for marketing 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 2017 Community Benefit Report**

The leadership team for the department of Community Health and Engagement served as the oversight committee for this report. The report was co-authored by Susan Greenwald, Adam Davis, Richard Pulvera, and Yagana Parwak. Financial data was provided by Terry Oertel, MBA, Manager of Government Contracting, and approved by Colleen Reid, Controller. Layout and design was provided by Reuben Greenwald.

**Dissemination of the Community Benefit Report**

The 2017 report has been submitted to the Children’s Board of Directors and is made available to hospital staff and the general public via Children’s website, with further distribution through the Department of Community Health and Engagement. Children’s maintains public awareness of its community services through social media, traditional media, its website, and other publications.

Contact Adam Davis at AdDavis@mail.cho.org for questions or more information.
Every three years, nonprofit hospitals are required to conduct community health needs assessments (CHNA) and use the results of these to develop community health improvement implementation plans. These assessments are required of virtually all nonprofit hospitals by both state and federal law.

UCSF Benioff Children’s Hospital Oakland last published a CHNA in 2016. The analysis was done by Applied Survey Research, a public health research firm. The objective of the CHNA was to provide necessary information for the UCSF Benioff Children’s Hospital Oakland community health improvement plan; identify communities and specific groups within these communities experiencing health disparities, especially as these disparities relate to chronic disease; and further identify contributing factors that create both barriers and opportunities for these populations to live healthier lives.

A community-based participatory research orientation was used to conduct the assessment, which included both primary and secondary data. Primary data collection included input from more than 160 members of the hospital service area, expert interviews with 31 key informants, and 23 focus group interviews with 290 community members collectively. In addition, a community health assets assessment involved collecting data on more than 600 assets within the hospital’s service area. Secondary data included health outcome data, socio-demographic data, and behavioral and environmental data at the ZIP code or census tract level.

From the list of needs, four priority areas were identified: mental health, maternal and child health, economic security, and health care access/delivery. The Internal Advisory Committee for the department of Community Health and Engagement worked over the past year to create the objectives and strategies that were then approved by senior administration. Implementation has begun, and in next year’s report, the progress made will be outlined.

Department of Community Health and Engagement Internal Advisory Committee
- Thea Daniels- EPIC
- Toby Eastman- CVC-SEED Program
- Sue Greenwald- co-chair, Department of Community Health
- Dr. Mary Jones- Rett Clinic
- Marsha Luster- co-chair, Medical Social Services
- Dr. Zarin Noor- Primary Care
- Valerie Parker- Medical Staff Coordinator
- Nancy Shibata- Administration
- Melanie Stroud- Patient Safety
- Marsha Treadwell- Sickle Cell Research
- Saun-Toy Trotter- CVC/School Based Mental Health Services
- Daniel Won- Family Advisory Committee


V. Undercompensated and Charity Care

Undercompensated Government-Sponsored Health Care
The cost of providing care is often more than the payments Children’s receives from 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 70 percent of all visits to Children’s in 2017 were for patients who received government-sponsored health insurance. The unpaid cost incurred by Children’s to provide services to these patients in 2017 was more than $178 million.

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 do not qualify for government-sponsored health insurance and who meet certain eligibility requirements. The Charity Care program requires that patients complete an application and provide supporting documentation to verify income level. Self-pay patients who present to the Emergency Department are provided a brochure describing the Charity Care program. A statement on the bill also advises parents that they may be eligible for financial assistance. A patient can receive services at any Children’s location, contact us to request a Charity Care application, and then qualify. Charity care provided in 2017 was $1.6 million.
In addition to providing state-of-the-art, high-quality primary and specialty care to patients, UCSF Benioff Children’s Hospital Oakland has a number of programs that provide an array of services “above and beyond” standard of care for a children’s hospital. These programs often address the complex economic and societal challenges that patients at UCSF Benioff Children’s face. There are also new and innovative programs that are funded by grants, contracts and donations. Many programs in this category are described in this section and benefit the community at large.

### Adolescent Medicine and School Based Health Centers: Federally Qualified Health Center

The Division of Adolescent Medicine runs three adolescent clinics serving 11- to 24-year-olds. The sites include the Teen Clinic on Telegraph Avenue in North Oakland and two school-based health centers: West Oakland at the Chappell-Hayes Health Center/McClmonds High School and East Oakland at the Youth Uprising/Castlemont Health Center at Castlemont High School. Both of the school-based health centers are operated in conjunction with the Oakland Unified School District and the Center for Healthy Schools and Communities at the Alameda County Health Care Services Agency. Through these clinics, over 4,500 youth are seen each year. Many of the youth seen in these clinics live in neighborhoods impacted by gun violence, substandard housing, food deserts, and other conditions that affect their health and well-being. The adolescent clinics serve as national models for full-service, integrated youth and family centers that promote adolescent development and wellness.

### Camps

Children’s staff participate in the planning and delivery of a variety of camps for hospital patients. These camps provide support, enrichment, education, and fun!

- **Camp Breathe Easy (Asthma)**
  
  Located in a beautiful natural setting outside of Livermore, Camp Breathe Easy is a four-day, three-night residential summer camp for underserved children with asthma. Camp Breathe Easy was started and is managed by Children’s staff from the Primary Care Clinic. In addition to the usual camp activities—such as swimming, boating, ropes courses and sports—Camp Breathe Easy provides asthma education so attendees can learn to better manage their asthma. About 90 children attended Camp Breathe Easy in 2017.

- **Camp Hemotion (Bleeding Disorders)**
  
  Each summer, Camp Hemotion provides a week-long residential program at Camp Oakhurst, near Yosemite, for 7- to 20-year-olds who have (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. Members of the medical team (e.g., nurses, social workers) attend camp to help staff the camp infirmary, providing routine and emergency care for campers. Campers participate in various activities—including training in self-infusion—and learn how to better manage their conditions.

- **Family Camp and B-Leaders Youth Retreat (Hemophilia)**

  In collaboration with the Hemophilia Foundation of Northern California, members of the Hemophilia Treatment Center participate in the planning of bleeding disorder camps and serve as medical staff at the camps. Family Camp is a weekend-long camp held each January at Camp Arroyo for 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 retreat takes place once a year. Many attendees at these camps are Children’s patients.
Diabetes Camps

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

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

Spooktacular
Spooktacular is a family retreat at Camp Jones Gulch in La Honda for children with diabetes. A Children's endocrinologist and certified diabetes educators provide education and staff the event.

Surf Day Pacifica
A one-day surf camp hosted by Diabetes Youth Families in Pacifica, Surf Day Pacifica is for youth living with type 1 diabetes and their families and aims to bring together community. Participants receive surfing lessons from professional instructors and learn more from staff and health care providers about managing their diabetes during sports. A Children's diabetes educator attends as medical staff for this event.

Tomales Bay Kayaking Adventure
Tomales Bay Kayaking Adventure is a one-day kayaking adventure for teens living with type 1 diabetes. Counselors from Diabetes Youth Families (DYF), medical staff and trained kayaking professionals work together to provide an unforgettable experience. A Children's diabetes educator attended this program to serve as medical staff.

DASH Diabetes Camp (Diabetes and Sports Health)
At Bushrod Park in Oakland, children with type 1 or type 2 diabetes, as well as their families and friends, participate in DASH Camp. A Children's endocrinologist and diabetes educator attended camp as part of the medical staff.

Sickle Cell Camp
Sickle Cell Camp is dedicated to enriching the lives of children with sickle cell disease. Last year, 23 children participated at Camp Super Star, which is sponsored by the Sickle Cell Community Advisory Council in Livermore. This camp inspires children to try new things in a comfortable and caring atmosphere. The goal is to help increase campers' self-esteem through the development of new skills and through encouraging the values of kindness and charity. Campers meet new friends and learn about their disease in a fun, exciting manner. This safe environment allows kids to spend time with positive role models and to create fun memories in an incredible summer camp experience.

In addition, 20 patients attended a sickle cell camp at St. Dorothy's Church. Ages ranged from 10 to 18. This week-long camp experience provided the older school-age and adolescent population with an opportunity to connect with peers who share similar health care experiences. While at camp, children enjoyed activities such as canoeing, archery, campfire time and a talent show.
Center for Child Protection

Child maltreatment and violence continue to be a pervasive and complex public health problem. The Center for Child Protection (CCP) provides comprehensive forensic medical and mental health services to children and adolescents affected by child abuse and violence. CCP is home to two of only five child abuse pediatricians in Northern California.

Mental health services include crisis assessment and intervention, trauma-informed psychotherapy services, clinical case management, outreach and psycho-educational workshops. The Center for Child Protection is a part of Alameda County’s Child Abuse Investigation Protocol and works closely with law enforcement, child welfare and local district attorney’s offices. CCP staff also provide case testimony and expert witness assistance.

**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.

**Medical Consultation:** Medical staff provide inpatient and outpatient medical consultation on cases involving child maltreatment.

**First Responders:** CCP’s Sexual Abuse Forensic Examiner (SAFE) team ensures access to CCP forensic medical services around the clock for acute sexual abuse examinations. CCP’s social worker team serves as first responders to child abuse cases in the Emergency Department.

**Trauma-Informed Mental Health Services:** CCP provides evidence-based, trauma-informed psychotherapy services to children and youth impacted by child maltreatment and exposure to violence. Mental health services incorporate culturally attuned approaches to stabilize and mitigate the short- and long-term impacts of adverse childhood experiences.

**Domestic Violence Education and Screening (DOVES):** DOVES is a pioneering pediatric domestic violence project that provides individual and group psychotherapy to children who have experienced domestic violence and their caregivers.
Center for the Vulnerable Child

The Center for the Vulnerable Child (CVC) provides services to children and young adults from age 0 to 21 in living situations that put them at risk for educational, physical, mental or social health problems. Patients include foster or homeless youth and those with a history of abuse, neglect or exposure to drugs. Each year, approximately 3,000 children and families receive culturally informed and family-friendly medical care, psychotherapy and social services from the CVC. To reduce barriers to delivery, services often occur in the caregiver’s home or in another location within the community.

The CVC is also responsible for running the Federally Qualified Health Center (FQHC) Consumer Advisory Board, which is composed largely of the parents of children who have used FQHC services. The Consumer Advisory Board is an integral part of the FQHC, guiding service delivery and providing feedback to ensure excellent patient care.

Child and Adolescent Therapeutic Services (CATS)

As part of the Family Maintenance program of Alameda County’s department of Children and Family Services (DCFS), the CATS program provides comprehensive mental health services to youth living with their birth parents. CATS services are for those whose special medical needs and concurrent mental health issues threaten to overwhelm family resources, placing them at risk of DCFS involvement. Most services are provided in the family’s home or at the youth’s school.

Services to Enhance Early Development (SEED) and Help Me Grow (HMG)

SEED is a longstanding collaboration among the CVC, Alameda County’s DCFS and Alameda County Public Health to provide services to children aged 0 to 3 who are dependents of the court. The SEED team consists of infant/early childhood mental health practitioners, developmental specialists, family partners, child welfare workers and parent advocates working together to provide developmentally sensitive services to this vulnerable population. Help Me Grow (HMG) serves young children from birth to age 6 in the Family Reunification program of Alameda County’s DCFS. With expertise on the impact of trauma on young children, HMG provides initial developmental assessments and consults with child welfare workers and caregivers to identify the mental health, developmental and relational needs of children.

Encore Medical Clinics (EMC)

EMC is a collaboration between the CVC and Children’s Primary Care Clinic. 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.

Family Outreach and Support Clinic (FOSC)

FOSC provides primary care for children from birth to 12 years of age who are currently in or who have been in foster care. FOSC is a collaborative effort between the CVC and Children’s Primary Care Clinic.

Successful Preschool Adjustment and Readiness for Kindergarten (Project SPARK)

SPARK promotes successful adjustment to preschool and readiness for kindergarten for children who are in transitional living situations. SPARK works, both individually and in groups, with children who are identified by preschool teachers as having behaviors that interfere with school participation and peer relationships. SPARK provides assessments of child behavior, parent–teacher consultation and one-on-one individualized child intervention to improve social skills.

Behavioral Health Integration (BHI) and Pediatric Psychology Program (Triple P)

BHI program and Triple P provide innovative services to increase access to mental health support for children and youth who are seen in Children’s Primary Care and Adolescent Medical clinics. Multidisciplinary BHI clinicians are available at clinic appointments to screen for mental health needs. They interact with and evaluate patients, providing consultation to medical staff with respect to psychological, psychosocial and cultural factors that impact patients’ and families’ participation in treatment. Services range from brief treatment in the clinic to longer-term mental health intervention using a home-based community service model.
School Clinic–Based Behavioral Health Program

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

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

### Jared Kurtin Music Therapy Program

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

### Family Resource and Information Center

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

### Hospital School Program

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

### Artist-in-Residence Program

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

### The CHO Show

The CHO Show is a live, interactive TV program broadcast into each patient’s room through a closed-circuit television channel. On The CHO Show, patients and families can participate in games, guess at trivia, tell jokes, share advice and display art or original videos for the entire hospital. Children who cannot leave their rooms can interact with peers during this weekly group event. The CHO Show promotes positive socialization, enabling all patients to contribute their unique viewpoints and experiences. The CHO Show playlist can be found on the hospital YouTube channel.

https://www.youtube.com/playlist?list=PLLndO3CVvTfJ6Lv1yduB5f3GXUBPO1dvM
DIRECT SERVICES TO PATIENTS AND FAMILIES
Department of Community Health and Engagement

The Department of Community Health and Engagement (DCHE) is responsible for community and government relations, the incubation and management of innovative patient-centered programs, research related to social determinants of health, and the meeting of the hospital’s “community benefits” obligations. To achieve these objectives, DCHE frequently promotes collaboration among other departments and UCSF campuses, and it develops and strengthens partnerships with community organizations, agencies, educational institutions, and local and state governmental bodies. Many of DCHE’s efforts address health equity in the local community.

Family Care Network (FCN): DCHE leads FCN, a collaboration of seven organizations that coordinate primary medical care, case management, peer advocacy, and legal and mental health services for women and children living with or affected by HIV/AIDS in Alameda and Contra Costa counties. In 2017, FCN served 1,230 individuals.

FETCH (Free and Easy Transportation for Children’s Health): Lack of transportation is cited as the top reason that families might miss medical appointments. In collaboration with Lyft and Yoots, FETCH provides free and convenient round-trip transportation to clinic visits for families that lack access to reliable transportation and are at risk of missing their appointments.

Food as Medicine: Many families who receive their care at Children’s rely on inexpensive, processed food due to the unavailability or inaccessibility of healthy foods. DCHE partners with the Alameda County Community Food Bank and Phat Beets Farms to provide two Food Farmacy pop-up markets per month, where families at Children’s can get free, fresh produce, meats, eggs and whole grains, along with easy recipes and other nutrition-related education. DCHE also coordinates the distribution of canned goods and dried foods to many departments in the hospital to give to their families in need each month. In 2017, DCHE served approximately 4,200 individuals through its food program.

FINDConnect® (Family Information and Navigation): FINDConnect is a mobile, cloud-based application developed by DCHE to help health care and other providers quickly screen and refer patients and clients for basic social and economic needs that may be impacting their health, as well as track their progress over time. In 2017, FINDConnect became housed in the Claremont Clinic, is now integrated with the hospital’s electronic medical record system, and is available to any provider throughout the hospital. In 2017, 422 patients enrolled. There are also a number of organizations outside of the UCSF system in the queue to begin using FINDConnect.
Division of Mental Health and Childhood Development

Approximately 5,000 children and youth and their families receive behavioral health services at Children’s each year through a mix of local, state and federal funding. Services include early-intervention, outpatient and crisis efforts that reach existing hospital patients, as well as other children and youth, with significant behavioral health and developmental needs that are often related to complex medical challenges. Interdisciplinary staff—psychiatrists, psychologists, nurse practitioners, social workers, marriage and family therapists, and family partners—provide evidence-informed treatments such as child–parent psychotherapy, Cognitive Behavioral Intervention for Trauma in Schools and Dialectical Behavior Therapy. These services are provided by six clinical teams in multiple settings within and beyond the hospital in primary care clinics, as well as in school- and other community-based settings. Eligibility for services is determined through a referral, screening and assessment process.

Behavioral Health Integration (BHI)
Staff are embedded in primary care and medical subspecialty clinics and school-based health centers to provide assessment, short-term treatment and medication management to children and youth ages 0 to 21 with emerging behavioral health challenges.

Psychiatric Emergencies
Children and youth with psychiatric emergencies are brought to the Children’s Emergency Room, where a combination of crisis intervention and stabilization services are provided.

Aftercare Services
Aftercare services are provided to children and youth ages 8 to 21 who need additional stabilization and intensive outpatient services to remain safely at home in the community following a psychiatric emergency.

Consult Liaison Service (C/L)
Children and youth who are admitted to medical inpatient units and who are coping with illness or injury may need additional evaluation for behavioral health and psychiatric issues. C/L works to support medical and nursing staff in the often-demanding job of caring for hospitalized children and their families.

Early Intervention Services (EIS)
Infants and young children and their families (0–6) receive assessment and therapeutic services focused on the caregiver–child relationship. See EIS section (p. 17) for more information.

Behavioral Health and Psychiatry/
Psychological Services
Children and youth with behavioral health and developmental challenges between the ages of 6 and 21 receive evaluation, psychotherapy, family therapy and medication management.
Early Intervention Services

Early Intervention Services (EIS) provides therapeutic intervention, case management, child development and family support services for infants and young children (ages 0–6) with emerging developmental, medical and social–emotional difficulties, as well as exposure to toxic stress and trauma. EIS services are family-centered, relationship-based and trauma-informed. A multidisciplinary staff delivers these services at homes, school sites, community-based locations and Children’s Clay Street Clinic. Each year, more than 500 families utilize EIS, and many more children are reached through training and consultation activities.

Neonatal Follow-Up Programs

- **Special Start Home-Visiting Program**—Special Start offers developmental, medical and psychosocial case management to approximately 225 children per year who are graduates of a Neonatal Intensive Care Unit (NICU), reside in Alameda County, and have complex medical conditions and/or social risk factors. Participants ages 0 to 3 receive weekly to monthly home visits by a coordinated team of nurses, developmental specialists and mental health specialists. This program also includes two parent support groups for Spanish-speaking families of children with disabilities.

- **High-Risk Infant Follow Clinic (HRIF)**—The HRIF program provides developmental assessments and health services for California Children's Services (CCS)–eligible children who are at high risk for neurodevelopmental delay or disability. A multidisciplinary team, in the course of at least three standard visits, provides neurodevelopmental assessments and case management services for infants and children up to 3 years of age whose care was provided in a CCS-approved NICU. The clinic serves approximately 200 children annually.

Parent-Infant Program (PIP)

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

Early Childhood Mental Health Programs

- **CARE Early Childhood Mental Health Program; FIRST Perinatal Drug Treatment Support Program; Therapeutic Guidance for Infants and Families (TGIF); Fussy Baby Program**—Early Periodic Screening Diagnosis and Treatment (EPSDT) mental health programs are designed for children 0 to 6 with behavioral, emotional or relational difficulties due to trauma, family disruption, or complex medical and developmental histories. Services include comprehensive assessments, home-based therapeutic intervention and therapeutic parent–child groups. All mental health services are relationship-based, developmentally informed and inclusive of caregivers. EPSDT particularly serves young children and families who have experienced disruptions due to involvement with Child Welfare, criminal justice or drug treatment; children with neurodevelopmental disorders and other developmental challenges; and young infants with crying, feeding and sleeping difficulties. Approximately 125 children are enrolled in this program.
FINDconnect ©

Poor health outcomes in children are driven more by social, economic and environmental factors than by genes, behavior, or access to care. Traditionally, however, addressing these so-called social determinants of health has been outside the scope of medical practice. FINDconnect is a mobile application designed by a Children’s pediatrician to assist providers with addressing basic needs of lower-income families with children—things like food and shelter. The program allows providers to quickly identify and prioritize basic needs in the child’s life and refer the family to community resources to address those needs. FINDconnect is used with hundreds of families each year at Children’s Claremont Primary Care Clinic and in 2017 became available for any provider at Children’s through CHO Net. Berkeley public schools will begin using FINDconnect in 2018.

Hemoglobinopathy Center/BMT House

Sickle cell disease and thalassemia are inherited conditions affecting hemoglobin, the protein within red blood cells that is required for transporting oxygen. These diseases disproportionately affect minorities of African and Asian descent. Children’s Comprehensive Center for Hemoglobinopathies, one of the largest such centers in the world, treats over 700 children and adults with sickle cell disease and thalassemia each year. The Comprehensive Center for Hemoglobinopathies has been at the national and international forefront of using novel therapies to cure sickle cell disease and thalassemia.

Some children with hemoglobinopathies can receive a bone marrow transplant (BMT), whereby they receive healthy bone marrow that produces normal red blood cells. A BMT can improve quality of life or even cure the hemoglobinopathy.

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 living further may stay at the Blood and Marrow Transplantation (BMT) House at no cost. Conveniently located just one block from the hospital, the BMT House can accommodate two families at a time.

Juvenile Justice Center Clinic

The Alameda County Juvenile Justice Center (JJC) is a 360-bed detention facility that houses juvenile offenders from Alameda County. The JJC on-site medical clinic is run by the Children’s Division of Adolescent Medicine. Children’s also provides clinical services at Camp Wilmont Sweeney, a transition/placement facility that houses JJC detainees for six to nine months before their re-entry into the community. Children’s aims to ensure that these youth are healthy, as poor health is one of the main barriers to a successful transition back to school or employment. Health care via telecommunication is provided for services that are not readily available on site at JJC. Youth who need additional specialty care or acute services are brought to Children’s main hospital.

Comprehensive Primary Care Services at JJC and Camp Wilmont Sweeney:

- Intake and 96-hour evaluation and physical exam
- Point-of-care testing and blood draws
- Screening, testing and treatment for sexually transmitted infections
- Care for illness and injury
- Referrals to emergency departments and specialists
- Immunizations
- Medication management
- Radiology
- Dental screening and procedures
- Health education
- Optometry referrals
- Care via telemedicine for services not available at JJC
- Collaboration and coordination with Alameda County Behavioral Psychiatrists to provide medication management and lab monitoring
- Discharge coordination with group homes and other facilities
- Assistance with transition for community re-entry
Medical Social Services

Medical social workers consult with physicians, clinicians, community agencies, patients and their families in both inpatient and outpatient settings. They assess the barriers to medical care for patients and their families who are adjusting to a new diagnosis, chronic condition or catastrophic injury. This includes addressing all of the social determinants of health that may be impacting issues such as visitation and discharge. On-call medical social workers provide coverage 24/7.

Social work services include:
- Supportive counseling
- Crisis assessment and intervention
- Referral for concrete services, including lodging, transportation and meals
- Information and referral to community resources
- Case management
- Advocacy
- Brief individual therapy, family therapy and group treatment

Other Programs Managed by the Social Service Department

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

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

Interpreter Services
Children’s offers qualified medical interpreters free of charge 24/7 to patients and their caregivers who have limited English proficiency or who are deaf or hard of hearing. Children’s has provided interpreter services in 62 different languages.

Holiday Donation Program
Medical social workers identified 75 families in need to receive Safeway gift cards for turkeys and trimmings for Thanksgiving 2017. During the winter holidays, medical social workers identify families with limited resources and connect them with community agencies, hospital staff and private donors, who provide them with holiday gifts. As a result of the holiday donation program, approximately 200 children received gifts in 2017.
Pain and Palliative Care Program

Established in 2011, the Palliative Care program expanded in 2017 to include expert complex pain management and is now known as the Pain and Palliative Care program. The program consists of a specialized interdisciplinary team—including doctors, a nurse and a social worker—who collaborate with the child’s health care providers to provide an extra layer of support focused on quality of life as well as pain and symptom management. The program is also responsible for the Reflection Room, a suite of private rooms dedicated to the care of the imminently dying child or the child who has already died. The private space allows families the gift of time to say goodbyes, while also allowing for cultural and religious traditions and more family control.

Palliative care aims to improve the quality of life as defined by the child and family and focuses on physical, emotional, social and spiritual needs. Ideally, palliative care begins at the time of the diagnosis of a serious condition and supports the family's goals for the future. The team is available for consultations on an in-and outpatient basis and can help with advanced care planning, decision-making, care coordination, and pain and symptom management. The team provides extended support through close collaboration with interdisciplinary colleagues.

In 2017, the team saw a total patient census of approximately 300 children in various stages of their disease process. The team provides ongoing individual and community bereavement support for families. The program held Children’s sixth annual Day of Remembrance in December.
**Pediatric HIV/AIDS Program**

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 early medical treatments with combinations of specific medications to improve their quality of life and survival. For most individuals, HIV/AIDS is a chronic condition that can be managed for decades with proper treatment and consistent adherence to medication regimens.

### HIV/AIDS Clinic

Children’s emphasizes retention in care and adherence to medications in order to suppress a patient’s HIV to undetectable blood levels. In 2017, 45 patients were followed in the clinic, and currently 96 percent of those have undetectable blood levels. Assistance is also provided to patients transitioning from pediatric to adult care. 75 teens and young adults have graduated into youth or adult HIV programs since 2001.

Advances in the prevention of mother-to-child transmission of HIV have dramatically decreased the infant infection rate in the United States. However, other countries impacted by HIV/AIDS still struggle with this pandemic, and PHAP continues to see families who immigrate to the United States for whom HIV may be a new diagnosis. PHAP also offers pre- and post-adoption services for families considering an international adoption of a child with HIV.

### Family Care Network (FCN)

The network, funded by the Ryan White Comprehensive AIDS Resources Emergency (CARE) Act, is a collaborative effort that coordinates medical care, case management, peer advocacy, 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 these six local agencies that is funded to provide comprehensive care for infants, children and youth with HIV, as well as to help pregnant women with HIV avoid perinatal transmission.

### Hope Clinic

Through collaboration among programs in the Family Care Network (FCN), it is possible to identify pregnant women infected with HIV, provide them with care during their pregnancies, and ensure that their babies get proper treatment. Infants born to mothers with HIV are monitored for the disease over four to six months by Hope Clinic staff until the possibility of HIV infection has been excluded. None of the over 500 infants who have been seen by the Hope Clinic since 1996 has been infected with HIV.

### Sexual Assault and Needle Stick Exposures

PHAP provides preventive services, support services and education for child victims of sexual assault or needle sticks who are at risk of acquiring HIV. Approximately 10 to 20 child victims are treated by PHAP every year. Since 1997, PHAP has seen 198 patients, and none of those who returned for follow-up services had acquired HIV from their exposure.

### HIV on the Frontlines of Communities in the United States (FOCUS)

Children’s started routine HIV testing in 2014 to comply with recommendations from the Centers for Disease Control. Since the program began, Children’s has identified eight newly infected youth, a high proportion of whom have acute HIV infection—meaning that the infection is newly acquired and that they are at risk of spreading HIV to unsuspecting partners.
Primary Care: Federally Qualified Health Center

UCSF Benioff Children’s Hospital Oakland Primary Care provides a medical home and 40,000 preventative health care visits to children, adolescents and emerging adults every year. The target population includes foster care and homeless youth. In addition, Primary Care has a team-based care model that includes care coordination for medically and socially complex patients. Through a combination of direct patient care, family navigation, behavioral health integration, early literacy support and other adjunct services, the clinic provides holistic health care to children speaking more than 30 different languages and representing dozens of different cultural and ethnic backgrounds. Along with general primary care services, a number of clinics serve specialized populations, including:

- **Encore Clinic**: provides health care and case management to homeless children and families in collaboration with the Center for the Vulnerable Child
- **Foster Care Clinic**: provides health care and case management to children in foster care, in collaboration with the Center for the Vulnerable Child
- **International Clinic**: provides health care to non–English-speaking patients and their families
- **Asthma Clinic**: provides health care and case management to children with complex cases of asthma
- **Charlie’s Clinic**: provides primary care, care coordination for community pediatricians, case management and parent support for children with Down syndrome and their families
Psychology Oncology Program

Children’s Psychology Oncology program consists of a specialized team of psychologists. 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.

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. Evidence-based problem-solving skills, stress management, play therapy and behavioral modification techniques are implemented. The team also initiated family distress screening in 2017.

School and Social Reintegration
Not only are pediatric cancer patients’ school attendance and social interaction affected by their condition and treatment; their cognitive development may also be impaired. The Psychology Oncology team provides neuropsychological assessments, school presentations and individualized advocacy for children who have been out of school or who have cognitive challenges as a result of their treatment.

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

Long-Term Follow-Up Program
The team coordinates and provides outreach and psychological services to multidisciplinary 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 2017, Children’s and the survivorship team at UCSF Benioff Children’s Hospitals continued the Survivors of Childhood Cancer program, a joint multidisciplinary educational and research program.
UCSF Benioff Children’s Hospital Oakland has a variety of patient education programs that are designed to enrich what is generally provided in a children’s hospital. Many of these programs are supported by grants and donations to ensure that all of Children’s patients and families receive the best education possible.

Center for the Vulnerable Child

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

Department of Community Health and Engagement

**Spread the Word**
Eighty percent of a child’s brain is formed by age 3, and research shows that the level of a parent’s engagement with their child during this critical time correlates with language acquisition and school success. DCHE supports early literacy efforts throughout the hospital, including efforts to educate caregivers about the importance of talking, reading and singing to children; to purchase books for providers to give to parents; and to coordinate reading circles. The purpose of these efforts is to make child literacy a routine part of care.

Division of Mental Health and Child Development

An integral part of the work Children’s staff does each day consists of educating parents, pediatricians and teachers to ensure that the important adults in patients’ lives have tools and support to strengthen children and youth at home and in the community. Children’s psychiatry team provided much-needed advocacy and support for the reauthorization of the Children’s Health Insurance Program (CHIP).

Hemoglobinopathy Center

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

**Thalassemia Support**
The thalassemia social worker regularly meets with four to six patients for a monthly Saturday support group to discuss compliance, morbidity, diet, exercise and the impact of the disease on their mental health and personal relationships.

**Blood Donation and Sickle Cell Awareness Days**
Children’s cosponsors sickle cell awareness events and blood drives—typically four each year—to promote thalassemia awareness and sickle cell trait testing.
Sickle Cell and Thalassemia Holiday Parties
Sickle Cell and Thalassemia Outreach teams plan annual holiday parties for patients and families each December. Hundreds of patients, families and guests attend these events—which include food, games and music—to foster community support for affected individuals.

Cultural Competency Workshop
With the aid of researchers at Children’s, Global Blood Therapeutics hosted a Sickle Cell Disease (SCD) Cultural Competency workshop in 2017. This event comprised presentations on racial discrimination in research and the historical context of the disease and its associated stigmas, as well as a patient panel that provided insight into the struggles of patients with SCD.

Sickle Cell Support
Children’s and the Sickle Cell Community Advisory Council maintain a support group for adults with SCD. Children’s also partners with the State of California and Centers for Disease Control to increase awareness and advocacy. The website casicklecell.org has recently reached 10,000 hits.

California Sickle Cell State Action Planning Initiative
More than 50 individuals with SCD, family members, experts, community-based organizations, advocates and other partners met to create the first-ever California Sickle Cell State Action Plan. This group is identifying public health priorities and key implementation agencies needed to improve the health of Californians affected by SCD and the sickle cell trait, with the goal of creating a roadmap that will transform health care delivery, access to care and cost-effectiveness of care for Californians with SCD.

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

Car Seat, Special Needs Car Seat and Vests, and Helmet Program
Children’s staff provides over 500 families each year with car seat safety guidelines. Every baby in Children’s NICU is evaluated for a car seat and must have an appropriate child passenger restraint prior to discharge.

IPP staff also conduct car seat checks and distributes bicycle helmets at health and safety events. In 2013, IPP staff started a Car Seat Inspection Station where monthly car seat checks are performed. When requested, children with special needs receive an assessment for a safe discharge home. When a parent lacks resources, a suitable car seat may be provided at no cost.

Home Safety Improvement Program
A collaboration among the Neonatal Follow-Up program, the Primary Access Clinic and Trauma Services, the Home Safety Improvement program promotes “active supervision” among parents to keep children safe from unintentional injury. Families receive a wide array of safety devices, including window guards, bathtub thermometers, cabinet latches, outlet protectors and furniture corner cushions.

Text OUCH to 30644
OUCH is a texting campaign to provide safety tips to caregivers of young children. Subscribers receive health and safety text messages each month in English or Spanish. The National Association of Pediatric Nurse Practitioners named it a “Best Practice Tool.”
The Prevention of Shaken Baby Syndrome Program (also called PURPLE)

PURPLE is a program used in the NICU through an agreement with the National Center on Shaken Baby Syndrome. It is designed to prevent abusive head trauma by educating parents and caregivers about normal infant crying and the dangers of shaking an infant. Parents receive either a DVD or a smart phone application along with informational handouts.

Keeping Safe from Injury Booklet

A childhood injury prevention guide has been compiled by the injury prevention coordinator for Children’s Trauma Services. IPP distributes over 15,000 of the booklets annually.

Safe Infant Sleep Environment Program

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

Youth Alive, Caught in the Crossfire

Children’s works with the community-based organization Youth Alive (YA). Social workers at Children’s call YA counselors when a victim of violence is admitted to the hospital. YA counselors arrive at the hospital within two hours of contact to prevent retaliation and re-injury. YA provides trauma-informed case management and mental health services beginning in the hospital and continuing in the community.
Pediatric/HIV AIDS Program

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

Primary Care: Federally Qualified Health Center

The Primary Care Clinic provides patient education in the following areas:

Early Literacy: Reach Out and Read and Spread the Word

Early literacy is a component of Primary Care offerings. Children are provided with books at well-child visits (Reach Out and Read), and early-literacy events and reading circles are hosted within the clinic setting. Additionally, a video—created by Primary Care doctors, parents and others—addressing how parents can best support talking, reading and singing in everyday activities (Spread the Word) is shown in the waiting room.

Medical-Legal Partnership

Primary Care partners with local public-interest law centers to provide pro bono legal services to patients and families focused on a variety of issues that impact health and well-being, such as housing, immigration and domestic violence.

SHINE (Staying Healthy in Nature Everyday)

Patients are enrolled in once-a-month nature clinics, which include trips to East Bay Regional Parks. The program addresses stress, loneliness and physical inactivity, as well as providing children and youth who do not routinely have access to parks an experience in nature.

Smoking Cessation: Clinical Effort Against Secondhand Smoke Exposure (CEASE)

CEASE encourages parents who expose their children to tobacco smoke to stop smoking by providing counseling and referrals.

Sports Medicine for Young Athletes

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

Staff from the Sports Medicine Center for Young Athletes are active out in the community, providing services in-kind or below cost. The Center serves as athletic trainers at 17 local high schools, as well as for all seven of the Oakland Athletic League football games and sports championship games. The Center is also a resource for the North Coast Section of the California Interscholastic Federation, for 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 not only manage acute injuries, but also provide individual education and group seminars to prevent sports injuries.
VIII. Professional and Academic Development

UCSF Benioff Children’s Hospital Oakland is proud to support the next generation of providers from diverse backgrounds in receiving the advanced training needed to pursue health-focused careers.

Center for the Vulnerable Child

Services to Enhance Early Development (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.

Practicum Training Programs
The Center for the Vulnerable Child (CVC) offers training for graduate students in the fields of counseling, infant development, social work and psychology. Students are integrated into individual CVC programs, where they receive weekly supervision and attend case conferences, team meetings, seminars and didactic trainings. The impact of complex trauma on social, emotional and neuropsychological development regarding living in multi-stressed settings is emphasized.

Training and Workshops
Center for the Vulnerable Child training and workshops are provided to community providers who serve children and families involved in the foster care system. In 2017, the CVC offered a wide range of trainings, from “Culturally Responsive Care” to “Law and Ethics in Psychotherapy.” The CVC is able to offer APA-approved continuing education credits.

Community Health and Adolescent Mentoring Program for Success (CHAMPS)
The Community Health and Adolescent Mentoring Program for Success (CHAMPS) offers educational interventions to help high school students of racial and ethnic minority populations explore health care 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 health care access and reduce the health disparities present in today’s society. CHAMPS partners with local high schools, health academies, universities, medical schools and residency programs as part of a health professions pipeline.

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

In 2017, 28 scholars graduated from CHAMPS. Of these, 100 percent graduated from high school, and 100 percent began college in the fall of 2017. Alumni of the program have also returned to support current students through annual alumni panels as well as through providing motivation and college transition support. In 2017, CHAMPS graduates received significant scholarship awards, including four recipients of the East Bay College Fund—$16,000 awarded over four years; two recipients of the Cal Opportunity Award, covering full tuition and fees for four years at UC Berkeley; one recipient of full tuition support at Lawrence University; and one student accepted by Students Rising Above, which provides scholarships and five years of mentorship beginning the junior year of high school through college. Collectively, the class of 2017 received over $350,000 of financial support.
Career and Leadership Development Programs for Alumni and Minority College Students

In 2017, CHAMPS provided 42 pre-health alumni and local minority college students with career guidance and professional development through the CHAMPS Summer Career and Leadership Development Trainings. The trainings provide critical support for alumni and local college students who are preparing to navigate their next steps towards health professions, focusing on developing their professional and strategic planning skills to be able to strengthen their network; utilize social media tools; and hone their resumes, cover letters, personal pitch skills and financial literacy skills. Many of the requirements of today’s job market and of career development are not provided in the classroom, and, for current students and recent graduates, these skills can impact motivation to continue in the health professions.

CHAMPS also partners with Health Careers Connection (HCC), a national program that helps college students gain summer internships in public health settings.

Peer Health Leaders

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

Bridging the Gap

Since 2013, CHAMPS 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 they 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 nursing department at CSU East Bay to bring together CHAMPS students with college and nursing students. Nursing students participate in developing a multiday workshop to engage the high school students in learning about 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 they 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 or clinical research have an opportunity to participate in CHORI’s award-winning Summer Student Research program.

The Children’s Hospital Oakland Research Institute (CHORI) Summer Student Research program was founded in 1981 as a way to provide mentored opportunities to students to help them explore and gain exposure to research. The program has steadily grown, having served more than 1,000 students since its founding year and averaging over 50 students per year for the past 10 years.

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

The majority of all attendees are low-income, are first in their family to attend college, or are from racial and ethnic groups traditionally underrepresented in the biomedical sciences.

In 2017, the program celebrated its 36th year, with 57 students participating. Twenty-one students were in high school at the time. Of the total cohort, 60 percent performed clinical or behavioral research, while the remaining 40 percent worked in basic science or stem cell research. Four students presented their results at national research conferences, and one was included on a medical manuscript publication.

Department of Community Health and Engagement

The Department of Community Health and Engagement (DCHE) directly supports, sponsors and partners on a number of activities that are designed to address issues of equity to improve care to patients, families and the community.

Cultural Humility Training: Cultural humility is a philosophy or approach to providing care, originally developed at Children’s Hospital Oakland in the late 90s. This approach emphasizes the provider’s self-humility rather than the provider’s seeking to effect an appearance of having expertise. The goal is to increase the quality of a clinician’s interactions with clients and patients. Trainings provided in 2017 include:

CHAMPS (Community Health and Adolescent Mentoring Program for Success): see page 28

Trauma-Informed Training Program: Because of the potentially long-lasting negative impact of trauma on physical and mental health, it is important that health care and community providers move towards trauma-informed systems of care. This approach involves both organizational and clinical changes that have the potential to improve patient engagement, health outcomes, and provider and staff wellness, as well as to decrease unnecessary utilization. Children’s staff are partnering with the community to provide trauma-informed care trainings in seven Bay Area counties.
Regional Collaboration to Expand and Strengthen STEM (RECESS): Funded by a grant from the National Science Foundation (NSF), RECESS is a two-year pilot project to increase the number of women, Latinos and African Americans in the STEM fields of science, technology, engineering and mathematics. The NSF grant will be used to promote youth interest in and increase youth preparation for STEM careers; map multiple on-ramps and pathways to STEM careers; and bring agencies and communities together to achieve a common goal.

Community, Advocacy, Primary Care (CAP) EXPERT: DCHE collaborates with the hospital’s Graduate Medical Education department to help develop and implement CAP EXPERT. See page 32.

Developmental Disabilities Trainings: Through a grant from the Alameda County Public Health Department Developmental Disabilities Council, the department organized and administered trainings on ADHD, special education, and social determinants of health, reaching over 100 community health care providers.

Diabetes Program

In addition to providing direct care to patients, the Diabetes program provides numerous education and training sessions throughout the year, including the School Nurse Conference in the fall, trainings for the Assessment Center of Alameda County, diabetes skills training for staff nurses, and both on- and off-site training to school, foster home and group home staff. In addition, program members volunteer as medical providers at many diabetes camps throughout Northern and Central California. Members of the diabetes program also participate in the Annual Bay Area Diabetes Summit and give talks and lectures as invited speakers at many venues in the Bay Area.

Division of Mental Health and Child Development (MHCD)

Children’s Division of Mental Health and Child Development (MHCD) promotes professional and academic activities committed to building access to and increasing capacity for integrated behavioral health services, early intervention and treatment in pediatric settings. The focus is in two areas: training tomorrow’s behavioral health leaders and providers in evidence-based care; and addressing the impact of trauma on pediatric health care organizations, the workforce and the way care is provided to children, youth and their families.

MHCD clinical staff provides education to community providers on how to assess and treat mental illnesses. The MHCD medical director recently became the director of the UCSF Child and Adolescent Psychiatry Training program. Her new role across training sites on both sides of the Bay will increase the availability of child psychiatrists trained in trauma-informed, evidence-based and culturally responsive treatment approaches across the system of care.

MHCD staff also provides clinical education, training and consultation for pediatric residents within the Primary Care, Outpatient and Emergency departments, as well as within inpatient consultation liaison settings. MHCD medical providers also teach noon conferences for residents. The Behavioral Emergency Response Team (BERT) program is one of the only pediatric psychology practicum sites in the country with a focus on emergency response and crisis stabilization.

As part of the Trauma-Informed Regional System of Care Initiative with seven Bay Area counties and Trauma Transformed, MHCD is the only regional center and clearinghouse in the Bay Area that provides trainings and policy guidance on trauma to systems-of-care professionals and organizations.
Early Intervention Services

Early Intervention Services (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 and skills of providers for addressing the social/emotional development and mental health needs of young children. This includes a focus on training designed specifically for family support professionals, such as family partners, navigators and advocates who provide support to families. Additionally, the Reflective Facilitators in Training program supports a culturally and ethnically diverse group of professionals designed to increase capacity for leadership within their agencies. Over 250 professionals have completed the program.

- **EIS Consultation and Training Team**: EIS provides technical assistance and consultation services to numerous community-based and public county agencies and Early Head Start/Head Start programs each year. EIS mental health and developmental consultants offer content and process-based training, in addition to offering embedded site-based case consultation for agency staff and supervisors. EIS also provides groups for practitioners on reflective supervision and facilitates Comunidad, a countywide effort to support providers working with Latino immigrant families.

- **Advanced Practice Issues in Early Childhood Mental Health Training Series**: Funded by a Title IV-E grant, EIS offers an annual training series, free of charge, for Alameda County providers that serve babies and young children at risk for involvement with the child welfare system.

Future Designers and Builders

As an adjunct to the hospital’s 10-year renovation and expansion project, the Future Designers and Builders of America program was developed as a way to provide opportunities to high school students in Oakland who might be interested in careers in construction, engineering, and architecture. Unusual among hospitals in the US, participants have the opportunity to help re-build the hospital and gain hands-on experience, as well as to connect with industry leaders and community partners while gaining high school class credit and a stipend. The program is a collaboration between the hospital’s Department of Development, Construction, and Real Estate, the hospital’s Department of Community Health and Engagement, Oakland Unified School District, and over a dozen industry partners. More than 30 students graduated from this program in 2017.

Graduate Medical Education

Education and training is a vital part of UCSF Benioff Children’s Hospital Oakland. Training, graduate and continuing education programs prepare physicians, scientists, nurses and technicians to be leaders in their chosen fields. Over the past year, the Graduate Medical Education department has overseen the training of 110 pediatric residents and pediatric fellows, 263 visiting residents, and 83 visiting medical students.

Medical Students

In 2017, Children’s provided month-long training in 13 pediatric specialties for 83 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.

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 United States, with 80 pediatric residents and four chief residents. As part of their required training, residents spend several months on the CAP rotation annually, where future pediatricians learn how to advocate for the rights, safety, health and education of children and their families. During their CAP rotations, residents visit more than 40 community sites, providing health education at some of the sites. A few residents develop grant-funded projects in their second or third year of training. In addition, residents join public health nurses for patient home visits, gaining a more complete understanding of patients’ needs in the community.
The Health Resource and Service Administration (HRSA) recently awarded $1.3 million to the Medical Education and Primary Care departments to further expand and enhance the CAP curriculum. Residents at Children’s are dedicated to serving populations of at-risk children, and a large percentage of Children’s residents go on to practice in local—often underserved—communities. Up to 35 percent of residents go into fellowship training to become pediatric subspecialists, and many stay at or return to Children’s after subspecialty training.

Visiting Residents
An additional 263 residents from 26 non-Children’s programs rotated through Children’s in 2017. These mostly non-pediatric residents came to Children’s for the pediatric experience in their specialty which, in 2017, included emergency medicine, general surgery, orthopedics, anesthesiology, neurosurgery, radiology, family practice, dentistry and urology—as well as pediatric specialties from nearby programs.

Specialty Fellows
Children’s had 30 pediatric specialty fellows in 2017—in the areas of critical care medicine, emergency medicine, hematology/oncology and infectious disease through programs based at Children’s, and via visiting fellows in the areas of rheumatology, anesthesia and radiology.

Hemoglobinopathy Reference Laboratory
The Hemoglobinopathy Reference Lab 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 toward comprehensive care. The lab also serves as the National Institutes of Health Hemoglobinopathy Disease Collaborative Genotype–Phenotype Database, aiding in the identification and screening of clinically relevant hemoglobin variants.

Combined HRSA Pacific Sickle Cell Collaborative and HRSA Thalassemia Regional Network Meeting
Funded by two collaborative grants from Health Resources and Services Administration (HRSA)—one in sickle cell and one in thalassemia—in 2017, Children’s hosted physicians and nurses from the grants’ collaborative sites in Western states including Alaska, Hawaii and Guam in Oakland for a three-day workshop discussing standards of care, project goals and timelines. The Pacific Sickle Cell Regional Collaborative has now expanded to 13 states.
Medical Social Services

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

Fellowship
The Medical Social Services department offers advanced clinical training and supervision for postgraduates with Masters of Social Work degrees in a 12-month Medical Social Work Fellowship program. The fellows are integral members of the multidisciplinary outpatient medical team, providing family-focused services to children, adolescents and young adults diagnosed with medical conditions both acute and chronic.

Nursing Education

Nursing Students
In 2017, Children’s provided pediatric nursing training to 685 nursing students from 37 schools of nursing throughout the United States. Clinical placements are made in a variety of settings including inpatient units, preceptorships with advanced practice nurses, administrative nursing preceptorships and preceptorships in specialty areas such as the Emergency Department, Surgical Services, Ambulatory Services and the Juvenile Justice Center.

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.

Nurse Training
Children’s also provides regular, ongoing training to certify its own nurses as well as nurses in the community. The organization has an Interdisciplinary Simulation Education program to support provider training in pediatric and neonatal resuscitation. Classes provided in 2017 include American Heart Basic Life Support Certification, Pediatric Advanced Life Support Certification, Trauma Nurse Certification Program, Neonatal Resuscitation Certification, Pediatric Emergency Nurse Updates, 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 Updates.

Pain and Palliative Care Program
The Palliative Care team provides ongoing education about pediatric palliative care locally, nationally and internationally. In 2017, approximately 370 health care professionals received education from the team on various aspects of palliative care. New in 2018, the Palliative Care team will be providing targeted education and training for interns and fellows in Social Work, Psychology and Palliative Care.

Pediatric HIV/AIDS Program
Pediatric HIV/AIDS program (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, clinical expertise is shared with medical delegations from countries severely affected by the AIDS epidemic. Medical teams including doctors, nurses, social workers and public health/government representatives from Côte d’Ivoire, Thailand, Nigeria and Tanzania have participated in this program.
Sports Medicine for Young Athletes

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

Volunteer Services

Volunteers have served at the heart of UCSF Benioff Children’s Hospital Oakland since its founding over 100 years ago. In 2017, over 400 volunteers served over 29,000 hours supporting young patients, their families and Children’s staff. Children’s volunteers reflect the diversity of the surrounding community: They range in age from 16 to 90, speak more than 70 different languages, and come from all over the Bay Area.

Volunteers serve for many reasons: to prepare for college or graduate school, to give back to the hospital as grateful patients or family members, and to provide service to the community. Whether providing art activities in the Emergency Department waiting room, staffing the playrooms, reading with a child at bedside, holding the most vulnerable babies, tutoring patients, stocking supplies, or guiding families to their destinations, Children’s volunteers make a difference for patients, families and staff every day.

Community volunteers also support patients and families in anticipation of the winter holidays. In December, over 40 volunteers from Salesforce wrapped gifts, sorted thousands of toys and “adopted” families for the holidays.

Family Advisory Council

The Family Advisory Council (FAC) is made up of volunteer parents and family members whose children have received care at UCSF Benioff Children’s Hospital Oakland. They work in partnership with hospital administrators and other staff to promote the family voice through dignity, respect and information-sharing. The council serves as an advisory resource to leadership and to hospital departments, and it provides input on issues that impact the care and well-being of hospital families.
IX. Health Equity Research

UCSF Benioff Children’s Hospital engages in both research and evaluation to improve services and to address health equity for the local patient population. Below is an overview of some of the research and evaluation that took place in 2017.

Center for Child Protection

The Center for Child Protection (CCP) currently leads two clinical research studies. The Caregiver and Child Trauma Study is a descriptive analysis designed to explore the intergenerational transmission of adversity between caregivers and children. CCP is also completing the Alameda County Child Abuse Disclosure Study, which aims to better understand how children are disclosing child sexual abuse to focus on prevention and early-intervention services for children and families.

Center for the Vulnerable Child

Part of the Center for the Vulnerable Child (CVC) mission is to conduct research on the vulnerable populations it serves. The 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. The 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. In 2017, the CVC focused on evaluating the implementation of an Integrated Care Team Model that included Primary Care and Behavioral Health.

Center for Nature and Health

Children’s Center for Nature and Health continued to build on its promise to ensure that children have access to nature for health by continuing clinical research on nature and health through running the Staying Healthy in Nature Every Day (SHINE) program via the Primary Care Clinic, developing training modules for physicians on nature and health, and serving on multidisciplinary advocacy collaborations in the Bay Area. Its randomized trial on park prescriptions for stress relief in a low-income clinic was published in PLOS ONE. Their interdisciplinary advisory team met in April 2018 and included advisors from Oakland City Parks, East Bay Regional Parks, the National Park Service and San Francisco City Parks, as well as local environmental justice organizations such as Urban ReLeaf and Youth Outside.

Department of Community Health and Engagement

Food as Medicine: In 2017, the Department of Community Health and Engagement (DCHE) was funded by Alameda County to conduct a study on the impact of home food deliveries on prediabetic families living in poverty. DCHE partnered with the county and a collective of urban farmers called Phat Beets to provide food to families for four months. Each week, as part of the program, participating families received boxes of fresh produce and whole grains, along with links to cooking demonstrations and recipes for preparing food in a variety of ethnic traditions. The program was effective at changing eating behaviors. DCHE is seeking partners and funding to expand the program in the future.

Bay Area Research Consortium on Toxic Stress (BARC-TS): Adverse events early in life, such as exposure to violence and abuse, can cause what is known as toxic stress. If not addressed early, research shows that early adverse childhood experiences (ACEs) can lead to negative biological and behavioral changes that last a lifetime. The science on ACE is new and is not yet integrated into pediatric care. DCHE is leading a groundbreaking study to develop and validate screening tools for ACEs that can be used in the pediatric setting to identify children at risk for toxic stress. Using a novel proteomics approach, the study is also seeking to identify biomarkers that correlate with exposure to ACEs. BARC-TS is a partnership among DCHE, Children’s Claremont Clinic, the Center for Youth Wellness and the UCSF School of Medicine. In 2017, 265 families were enrolled.
Brilliant Babies: DCHE is leading the evaluation of the Brilliant Babies program. Conceived and funded by Oakland’s mayor, Libby Schaaf, as part of her Oakland Promise program, Brilliant Babies provides preloaded college savings accounts and financial coaching to families of newborns born into poverty. The goal of the program is to promote college education, help families build assets, and interrupt generational poverty. In 2017, DCHE started working with the Claremont Clinic to conduct a randomized, controlled trial with over 500 families. Families will be followed for 10 or more years to assess the model’s long-term impact.

Social Determinants of Health, Adversity and Resilience (SOAR): Social determinants of health, adversity and resilience are paramount in predicting successful birth outcomes. SOAR, completed in 2017, was a qualitative study investigating current practices related to social determinants among providers who deliver pregnancy-related care in Oakland. It was funded by the UCSF Preterm Birth Initiative. Results are pending.

Division of Mental Health and Child Development (MHCD)
The Division of Mental Health and Child Development’s research program focuses on standardized screening and assessment to identify children and youth in hospitals and other child-serving systems—for example, the juvenile justice and child welfare systems—who have previously unidentified behavioral health problems and trauma, to connect them to appropriate services, and to improve outcomes.

Early Intervention Services
Early Intervention Services (EIS) has a research program that focuses on the impact of trauma on early childhood mental health, successful early childhood treatment, and issues related to supporting positive outcomes for young children with medical, developmental and social–emotional delays. Studies include:

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

Hemoglobinopathy Center
For the past 40 years, the Northern California Comprehensive Sickle Cell Center and Northern California Comprehensive Thalassemia Center have been leaders in National Institutes of Health–funded multicenter research trials to improve therapeutic options and quality of life of patients with hemoglobinopathies. The centers’ Transplantation program is one of the few institutions in the United States to offer gene therapy for patients with thalassemia and sickle cell disease. Both centers also partner with pharmaceutical companies in clinical trials of novel therapeutic agents to treat disease and improve quality of life.

Additionally, success at the centers’ research institute has helped Children’s implement the use of medical devices—both to generate 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 superconducting quantum interference device (SQUID) ferritometer to noninvasively measure the amount of iron in the bodies of patients with hemoglobinopathies.

Currently, the National Heart, Lung and Blood Institute is funding the Sickle Cell Care Coordination Initiative (SCCCI) as part of the national Sickle Cell Disease Implementation Consortium. The SCCCI seeks to improve care provided to youth and adults with sickle cell disease in Northern California by using implementation science and community participatory research to identify and address barriers to quality care in sickle cell disease.

The Northern California Comprehensive Sickle Cell Center and Northern California Comprehensive Thalassemia Center offer multiple outpatient and inpatient clinical trials to patients to advance available knowledge about hemoglobin diseases and to demonstrate the safety and efficacy of novel therapeutics.
Pediatric HIV/AIDS Program

Children’s Pediatric HIV/AIDS program (PHAP) staff and patients have participated in many clinical trials, those related to drug development, antibiotics and vaccine trials as well as clinical and immunological response to infection with HIV.

Primary Care: Federally Qualified Health Center

The Primary Care Clinic partners with other programs within Children’s and throughout the larger community to engage in groundbreaking research. These research studies have local public health importance and include focus on asthma, reduction of toxic stress and social inequities in health care:

- Best African American Response to Asthma Drugs
- Step-Up Yellow Zone Inhaled Corticosteroids to Prevent Exacerbations
- Pediatric Adverse Child Event Screening and Resiliency Study
X. Government Relations, Advocacy, and Community Engagement

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

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

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

Below is a partial list of the advocacy organizations in which Children’s employees have leadership roles:

- Alameda County Asthma Coalition
- Alameda County Child Abuse Prevention Council’s Multidisciplinary Team
- Alameda County Children of Incarcerated Parents Partnership
- Alameda County Hepatitis B Free Campaign
- American Academy of Pediatrics Board, California Chapter
- American Board of Pediatrics
- California Adolescent Health Collaborative
- California Children’s Hospital Association
- California Hospital Association, Council of Northern and Central California
- California Medical Association
- California Thoracic Society, Pediatric Committee
- Childhood Injury Prevention Network, Bay Area
- Children’s Regional Integrated Service System
- Coalition of Freestanding Children’s Hospitals
- Family Care Network Leadership Council (HIV)
- First 5 Commission, Alameda County
- National Association of Pediatric Nurse Practitioners
- National Association of Perinatal Social Workers
- Pediatric Diabetes Coalition of Alameda County
- Sickle Cell Disease Advisory Committee
- Society for Social Work Leadership in Health Care
- Transgender Patient Care Committee
Community Engagement and Relationship-Building

The government relations director collaborates with the Department of Community Health and Engagement to maintain and strengthen relationships, deepening the partnerships Children’s has with its surrounding communities. This collaboration has been instrumental in Children’s being chosen as a research platform and an implementation site for Mayor Libby Schaaf’s Oakland Promise Brilliant Baby Initiative.

Children’s administrators, physicians and staff participate in government boards, commissions and steering committees that support the educational and health care advancement of children and families. Below is a partial list of the boards, commissions and initiatives that Children’s staff participate in:

- Alameda Alliance for Health
- Alameda County Health Workforce Pipeline Coalition
- Alameda County Help Me Grow Steering Committee
- Berkeley Youth Alternatives
- California Institute for Regenerative Medicine
- California Wellness Foundation
- East Bay Economic Development Alliance
- Ethnic Health Institute
- Health Careers Connection
- Oakland Promise
- Oakland Thrives
- Oakland Starting Smart and Strong Initiative
- Oakland Workforce Development Board
- Sickle Cell Disease Advisory Committee
- Temescal Telegraph Business Improvement District
- Youth Ventures Joint Power of Authority
XI. Economic Impact

Children’s methodology for determining the economic value of the benefit to the community incorporates elements of the reporting requirements for the IRS 990 and the California Hospital Association’s community benefit valuation standards. Its policy and methods for calculating the economic valuation are available upon request. Its 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 has 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 whom the hospital would otherwise have to support, but they do not fully cover all of the costs of delivering these services.

<table>
<thead>
<tr>
<th>FY 2017</th>
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<tbody>
<tr>
<td>Charity Care</td>
<td>$ 1,604,000</td>
</tr>
<tr>
<td>Free care to uninsured and underinsured patients</td>
<td></td>
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<tr>
<td>Government-Sponsored Health Care</td>
<td>$ 178,639,000</td>
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<tr>
<td>Unpaid cost of public coverage programs, net of all government funding</td>
<td></td>
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<tr>
<td>Subsidy to ensure physician coverage for uninsured/underinsured patients</td>
<td>$ 49,232,000</td>
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<tr>
<td>Health Professional Education</td>
<td>$ 5,484,000</td>
</tr>
<tr>
<td>Graduate Medical education, Fellows, Nurses</td>
<td></td>
</tr>
<tr>
<td>Subsidized Health Programs</td>
<td>$ 6,416,000</td>
</tr>
<tr>
<td>Clinical services provided despite a financial loss to the organization</td>
<td></td>
</tr>
<tr>
<td>Community Health Services</td>
<td>$ 5,580,000</td>
</tr>
<tr>
<td>Activities or programs, subsidized by UBCHO, carried out and supported for the express purpose of improving community health</td>
<td></td>
</tr>
<tr>
<td>Research (Includes research costs not covered by external sponsors)</td>
<td>$ 1,339,000</td>
</tr>
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Advocacy for Children’s Health Issues

Included in operations

| Subtotal                                                                | $ 248,294,000 |
| Supplemental Revenue                                                    |               |
| Less DSH/Supplemental Funding (SB855/SB1255) including Measure A        | $ 110,508,000  |
| Less Net Hospital Provider Fee                                          | $ 40,936,000   |

Total Charity Care and Community Benefit                                | $ 96,850,000   |