Continuing the tradition—
of Compassionate Care
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Dear Community Member,

Thank you for reading our Community Benefit Report for 2010. This is one important way we communicate with those we serve and those we partner with to serve others. I want you to be assured that we take our responsibility seriously to provide high quality, a safe place to receive care and to work.

We also take our mission seriously – reflecting God’s love by providing physical, mental and spiritual healing. That mission drives our entire organization to be more than just a place to visit when you’re ill. We strive to be connected to our community: through the seniors, homeless shelter, food bank, schools, and community health education programs. We also strive to keep our community healthy with programs to assure childhood immunizations are obtained, mothers are counseled on the value of breastfeeding for their newborns, and people receive education on diabetes and healthy living. You can read more about our programs and activities at www.uvmc.org.

We view ourselves as much more than the local hospital. We are your neighbors, your friends, people who share your love of the greater Ukiah area. In addition to providing more than $1 million in charity care, hospital employees volunteer at first-aid booths and fire departments, coordinate local church/school/youth/community activities, and much more.

We have worked hard to truly listen to our community. We interviewed over 100 community leaders and re-wrote our strategic plan last year. This year we are continuing community leader meetings to ensure that our every activity is focused and meeting a community need. We continue to collaborate with the Health and Human Services Agency to identify community health priorities. Throughout this report, you’ll find examples of how the hospital and the rural health clinics worked with community partners to improve the health of our community by donating time, organizational and financial support, and other resources.

I am proud to be part of a team who cares for patients and our community, both on the clock and during their personal time. Their tireless, passionate commitment inspires me everyday.

Sincerely,

Terry Burns
President/CEO
Our donors make Ukiah Valley Medical Center an excellent place for patients to receive high-quality medical care, physicians to practice medicine and employees to work. Their gifts are an amazing investment to the entire community.

In 2010, donor gifts went beyond Ukiah and Mendocino County. Generous donor support allowed us to be part of a team of physicians, nurses and technicians who traveled to Haiti after a devastating earthquake that left the people of this impoverished nation without adequate medical supplies and trained personnel. Our teams arrived just in time to help provide much needed medical relief at the Hospital Adventiste d’Haiti in Port-au-Prince.

Generous gifts allowed us to upgrade our inpatient cardiac monitoring equipment. Thus, allowing our patients to recover from accidents, illness and surgery close to home.

Donor support made it possible to upgrade our mammography equipment, provide additional staff training and offer free and reduced-rate breast exams to women during our October Breast Cancer Awareness Month. This support helps us reduce the incidence and the impact of breast cancer on our community.

Generous donor gifts were especially important in 2010. While we continue to be challenged by the current economic crisis, we are committed to making UVMC the best place for our employees to work, our physicians to practice medicine and our patients to receive high-quality medical care.

We have an exciting future ahead of us. Our strategic plan calls for us to prepare for the changes that healthcare reform will bring to the patients we serve everyday. On behalf of those patients, we thank you for your support.

*With Gratitude,*

Allyne Brown
Director of Philanthropy
From humble beginnings as a small community hospital in the 1950s, UVMC has grown to a state-of-the-art hospital, which is part of Adventist Health – an organization affiliated with the Seventh-day Adventist church that improves health and wellness worldwide. In striving for a balance of physical, mental and spiritual health through prevention and treatment of disease, UVMC brings together employees, physicians and volunteers who are committed to meeting the needs of our community. UVMC employs about 687 people who collaborate with approximately 90 members of our medical staff (representing 27 medical specialties). In addition to employees and medical staff, more than 60 volunteers share in a wide range of service activities to help the hospital better serve the community.

Ukiah Valley Medical Center offers 24-hour emergency-trauma care, inpatient and outpatient surgical services, intensive care (with intensivist and specialty consultation via telemedicine), diagnostic services, obstetrical services, rehabilitation services, health education, and more. Ukiah Valley Rural Health Center offers outpatient care in the following specialties: Allergy, Behavioral Health, Cardiology, Family Practice, General Surgery, Internal Medicine, Obstetrics & Gynecology, Oncology, Ophthalmology, Orthopedics, Pediatrics, Physical Therapy, and Urology.

Ukiah Valley Medical Center employs technology that is well above that found in many rural settings. Some of its state-of-the-art technology and services include a 64-slice CT scanner, able to detect vascular and heart disease non-invasively; one of the most powerful Magnetic Resonance Imaging (MRI) units in Northern California; digital mammography; mobile PET/CT services for cancer detection; Lithotripsy (non-invasive removal of kidney stones; a Remote Presence Robotic system; a family-oriented birthing center; and special care nursery. And we continue our joint venture with medical staff members to offer Pavilion Surgical Services in our Outpatient Pavilion, a 16,500-square-foot building that houses the most current technology for outpatient surgery, imaging and laboratory services.
Patient Focus (Our Mission Statement)
We reflect God’s love to our community by providing physical, mental and spiritual healing.

Employee Focus
We strive to provide every team member with purposeful, worthwhile work and to help them recognize the contribution they make personally.

Community Focus
We commit to be good corporate citizens through caring, competence, and stewardship.

Our Rallying Cry
A Team That Cares, A Mission That Matters

We will fulfill our Mission by…

• being compassionate to patients, their loved ones, and each other;
• operating with fiscal responsibility thereby ensuring continuous service;
• working together as a team;
• providing high-quality, technically-advanced services;
• preserving individual dignity;
• protecting confidentiality;
• being integral to our community;
• promoting well living in our community;
• being adaptable, innovative, and flexible;
• being expert listeners.
**Communication & Financial Managers for Community Benefit Planning & Reporting**

The Community Benefit Assessment, Plan and Report are communicated at least annually to the Governing Board and Community Advisory Council of Ukiah Valley Medical Center for their approval and support. The following individuals participate as Community Benefit Planners and Reporting Managers:

- Keith Dobbs, Administrative Director of Marketing, Communication and Business Development: 707.463.7606
- Laurie Wood, Director, Decision Support: 707.462.3111

**Governing Board**

The Governing Board is the governing body for Ukiah Valley Medical Center, and as such, is involved in strategic planning and policy approval. As part of these responsibilities, it provides members with the most recent Community Health Status Report when it is published every two years. Members are asked to approve the Community Benefit goals annually. The Board ensures that the hospital’s community service role is in alignment with the hospital’s mission, vision, and goals.

The Governing Board at Ukiah Valley Medical Center includes:

- Scott Reiner, Chairman, Senior Vice President, Adventist Health
- Marc Woodson, Vice Chairman, Executive Secretary, Northern California Conference of Seventh-day Adventists
- Terry Burns, Secretary, President/CEO, UVMC
- Nancy Biggins, Attorney
- Jorge Allende, MD, Vice Chief of Staff
- Channing Cornell, Local Business Professional
- Donald Coursey, MD
- Danni Hendricks, Certified Public Accountant
- Thomas Jutzy, DDS
- Marty Lombardi, Senior Vice President, Savings Bank of Mendocino County
- Jeremy Mann, MD
- Dale Morrison, MD
- Margie Rice, Concertmistress, Ukiah Symphony
- Donald Rones, Sr., Retired Business Professional
- Laura Wedderburn, MD, Chief of Staff, UVMC
- Laura Winkle, MD
Community Advisory Council

The Community Advisory Council (CAC) is comprised of community leaders dedicated to improving local health care by providing information and recommendations to the hospital regarding community needs and fundraising. CAC members also act as ambassadors of good will on the hospital’s behalf throughout the community and provide input into the hospital’s strategic plan. They are solicited for their opinion regarding the Community Benefit goals each year. Members attend bi-monthly meetings.

The Community Advisory Council includes:

- Charlie Barra, Owner, Vineyard/Winery
- Allyne Brown, Director of Philanthropy, UVMC
- Melissa Burke, Owner, Credit Bureau of Ukiah
- Terry Burns, President/CEO, UVMC
- Bonnie Carter, Community Volunteer
- Jerry Chaney, Chief Nursing Officer, UVMC
- Mary Louise Chase, Vineyard Owner
- Lynn Chevalier, Volunteer Director, UVMC
- Paul Conrado, Vineyard Owner
- Richard Cooper, Mendo Lake Credit Union
- Diane Daubeneck, Principal, Insurance Services
- Keith Dobbs, Administrative Director Marketing, Communication, Business Development, UVMC
- Guil Dye, Owner, KWINE/KMYX Radio
- Ed Eversole, Eversole Mortuary
- Cathy Frey, Executive Director of ARCH
- Ron Gester, MD, Former Director UVMC Emergency Department
- Rich Hearney, Retired Military
- Monte & Kay Hill, Community Members
- Brenda Hoek, Community volunteer
- Paul Jepson, MD
- Stephen Johnson, Attorney
- Kathy Lehner, President, Mendocino College
- Marty Lombardi, Senior Vice President Savings Bank of Mendocino County
- Carol Mordhorst, Retired (former Director, Mendocino County Public Health)
- Margie Rice, Concertmistress, Ukiah Symphony Orchestra & Governing Board Member
- Sharon Ruddick, Agriculture
- Joan Schlienger, Board Member for Mendocino College Foundation Foundation
- Francine Selim, Assistant Principal Ukiah High School (retired)
- Dick Selzer, Owner, Realty World/Selzer Realty
- Jim Wattenburger, Retired CAL Fire
- Raymond Worster, Certified Public Accountant
Our Communities

National/International Community

Adventist Health is part of a national and international community that improves health and wellness through more than 600 facilities worldwide. Adventist Health is a not-for-profit, faith-based health system operating in California, Hawaii, Oregon and Washington. Founded on the Seventh-day Adventist heritage of Christian health care, Adventist Health includes 17 hospitals with more than 2,700 beds, approximately 19,500 employees, numerous clinics and outpatient facilities, the largest system of rural health clinics in California with additional sites in Oregon and Washington, 14 home care agencies and four joint-venture retirement centers.

As part of a larger organization, Ukiah Valley Medical Center has access to information and resources, which are shared among the member facilities.

Regional Community

Ukiah Valley Medical Center is one of three hospitals in Northern California’s Mendocino County, with the others being Frank R. Howard Memorial Hospital in Willits and Mendocino Coast District Hospital in Fort Bragg. Other hospitals in our region include Sutter Lakeside Hospital in Lake County and Healdsburg District Hospital in Sonoma County. Some out-migration of patients to Santa Rosa and San Francisco occurs for services unavailable locally.

Local Community

Ukiah Valley Medical Center is located in the city of Ukiah. It is the largest of the three hospitals, and the only non-critical access hospital serving Mendocino County and western Lake County.

Ukiah Valley Medical Center primarily serves nine communities in Mendocino County: Ukiah, Anderson Valley, Covelo, Dos Rios, Hopland, Potter Valley, Redwood Valley, Talmage and Willits. The primary service area includes the corridor along the 101 Highway from Willits in the north to Hopland in the south. The hospital’s secondary service area includes areas north of Willits, northern and Western Lake County and the Mendocino Coast. The State Department of Finance estimates the 2010 population for Mendocino County to be slightly more than 93,000, and the Lake County population to be approximately 65,000.

Geography

Mendocino’s 3,510 square miles encompass a wide variety of landscapes, including a coastal mountain range, redwood forests, and miles of northern California coastline. The county’s elevation ranges from sea level to almost 7,000 feet.
Demographics of Mendocino County

Population
The California Department of Finance estimated Mendocino County’s January 2010 population to be 90,289 making it the 38th largest county in overall statewide population. It covers 3,510 square miles and is California’s 15th largest county in land area. Incorporated cities include Ukiah, with an estimated population of 15,711, Fort Bragg at 6,868, and Willits at 5,080.

Age
According to the Department of Finance, in 2010 Mendocino County’s median resident age was 38.4 versus the state’s median age of 35.7.

Race/Ethnicity
Mendocino County is primarily Caucasian (including Hispanic), with some Asian, Black and American Indian. According to the 2010 California Department of Finance estimates, the ethnic distribution is as follows:

<table>
<thead>
<tr>
<th>Race/Ethnicity</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>White</td>
<td>68.9%</td>
</tr>
<tr>
<td>Hispanic</td>
<td>20.6%</td>
</tr>
<tr>
<td>American Indian</td>
<td>6.3%</td>
</tr>
<tr>
<td>Asian</td>
<td>1.3%</td>
</tr>
<tr>
<td>Black</td>
<td>0.6%</td>
</tr>
<tr>
<td>Other</td>
<td>2.3%</td>
</tr>
</tbody>
</table>

Socio-economic Environment
According to Housing and Urban Development 2010 data, the median state income was approximately $66,450. The Mendocino County median household income was $56,300. (www.efanniemae.com/sf/refmaterials/hudmedinc)

The poverty rate is the percent of all people in households earning below the federal poverty level. According to estimates from the American Community Survey 2008 for Mendocino County, the average was 19% compared to a state level of 13.3%. Of note is the number of children in poverty: children under 18 show a poverty rate of 24% (compared to state and national average of 14.2%).

Unemployment
Educational Attainment
According to the National Center for Education Statistics (2007–08) Mendocino County’s level of high school education matches the state average, but falls below the U.S. average.

<table>
<thead>
<tr>
<th>High School Graduation</th>
<th>Mendocino County</th>
<th>U.S. Average</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>82%</td>
<td>85%</td>
</tr>
<tr>
<td>Bachelor’s Degree</td>
<td>23%</td>
<td>27%</td>
</tr>
</tbody>
</table>

According to the California Employment Development Department, Mendocino County’s unadjusted unemployment rate for July 2010 is 11.4% which is below the state level of 12.8%, but above the national level of 9.7%. Mendocino County’s largest employers include local government with approximately 1,218 employees and Ukiah Valley Medical Center with more than 687 employees (including full time, part time and per diem).
Needs Assessment Process and Information

In 2009, Mendocino County Public Health Advisory Board (MCPHAB) became the Health and Human Services Agency Advisory Board (HHSAAB). Ukiah Valley Medical Center works through the Mendocino County HHSAAB for its community health needs assessment. HHSAAB combines representatives from the major health care sectors in the county, as well as public safety, and other key sectors. The list below demonstrates HHSAAB’s broad and inclusive composition.

In 2010, the following community members served on the HHSA Advisory Board:

**DIANE AGEE**  
Redwood Coast Medical Services

**SUSAN BAIRD KANAN**  
Board of Supervisors District 2

**LOIS JANE BERRY**  
Children & Family SOC

**PATTY BRUDER**  
Willits Action Group

**TERRY BURNS**  
Ukiah Valley Medical Center

**PAULA COHEN**  
Mendocino Coast Clinics

**ANDY COREN, MD**  
Medical Community

**JENDI COURSEY**  
Board of Supervisors District 1  
Mendocino Community Health Clinic

**JUDITH DOLAN**  
Anderson Valley Health Center

**CATHY FREY**  
Alliance for Rural Community Health

**SHEILA GRAY**  
InHome Senior Services Representative

**LIBBY GUTHRIE**  
Mendocino County AIDS Volunteer Network

**SARA O’DONNELL**  
Board of Supervisors District 5  
Cancer Resource Centers of Mendocino County
Traditionally, Mendocino County has published a report every two years on the health status of its residents. The Public Health Department (now called the Community Branch of Health and Human Services) created the first health status report more than 10 years ago and has continually improved the process.

Community Health Status Report (CHSR – “cheeser”) 2010 was released in April 2010. It reviews data from 2008–2009, and is an essential cornerstone for addressing and improving the health of all the citizens of Mendocino County.

View a copy at: www.co.mendocino.ca.us/hhsa/newsletters.htm

Ukiah Valley Medical Center has been involved in this needs assessment primarily through the participation of hospital representative Terry Burns. Terry Burns, UVMC President/CEO, was appointed to the executive council in 2008 and served as board president in 2009.

The Community Health Status Report 2010 includes data from surveys, census reports, county, state and federal statistics, local research, and more.

Focus Areas Determined by Needs Assessment

Community Health Status Report 2010 continues to focus on four health areas identified in the five-year Mendocino County Community Health Improvement Plan, published in February 2005. These focus areas were determined by the Mendocino County Public Health Advisory Board (MCPHAB), the Mendocino County Tobacco Settlement Advisory Committee (MCTSAAC) and the Department of Public Health Division directors during a strategic planning process undertaken in late 2004.

The strategic plan was developed to define strategies for communities and agencies to work together to improve the health of Mendocino County residents.

The following information was taken directly from the Mendocino County Community Health Improvement Plan and the Community Health Status Report 2010 to define the priority areas and desired results.

Community Health Status Report 2010 contains the community level data, and state and county trends that will help track progress in these key health areas. This year’s report will provide a final update on the baselines for the chosen outcome indicators as well as highlight efforts in these areas.

To contact HHSAB please call 707.472.2793 or go to www.co.mendocino.ca.us/hhsa/advisoryboard.htm
Access to Care

Summary

There are many barriers to accessing appropriate care in Mendocino County. In 1991, the entire county was designated as Medically Underserved for Medi-Cal. There is a lack of providers, especially in specialties such as orthopedics, urology, ears/nose/throat, internal medicine, pediatrics, psychiatry, dentistry, and surgery. The one-third of the population located in more remote areas of the county have further to travel to access what services do exist, and have very limited public transport available to them.

In addition, many people do not know how to navigate the health care system to find the services they need. Due to a complex system of funding, enrollment procedures, and services that are not fully coordinated with each other, clients may not be referred to or enrolled in available services once they do try to access care.

According to the 2001 California Health Interview Survey (CHIS 2001), 21.5% of Mendocino and Lake County residents under 65 years of age were uninsured. Only 49.1% have job-based insurance, compared to 63.5% statewide. Uninsured people are less likely to access care, including preventive services and treatment in times of need.

The lack of access to preventive and primary care of all types leads to an over-use of emergency services. Emergency services are more expensive, and their inappropriate use contributes to an overall increase in cost of services and health insurance premiums throughout the system.

Mendocino County can provide higher quality and less expensive care by developing a more coordinated and comprehensive system of care.

Goals

Expansion of Services – All Mendocino County residents have the ability to quickly and efficiently obtain appropriate quality services from health care providers.

Health Insurance – All Mendocino County residents have access to affordable health insurance.
Alcohol and Other Drugs

Summary

Substance abuse was identified as the most important issue by more than 65% of all respondents in a recent Mendocino County Community Health Survey.1 The use of alcohol and drugs contributes to crime, mental health issues, teen pregnancy, child abuse and neglect, domestic violence, employment issues, unintentional injuries and deaths, and a range of other social and health problems. The rate of methamphetamine use has increased dramatically in Mendocino County in the last five years.2 Alcohol and drug abuse drive many of the costs that deprive families and communities of their health and economic viability. And it is important to recognize that public safety can never be secured without attending to this critical public health issue.

Alcohol and other drug abuse was ranked as the most important child health issue in the Perinatal and Child Health Survey conducted countywide by MCDPH’s Maternal, Child and Adolescent Health Program in 2004. Use of tobacco, alcohol or other drugs during pregnancy can lead to a variety of physical and developmental problems for children, such as fetal alcohol spectrum disorders. Domestic violence and child abuse and neglect3 are also closely associated with substance abuse by caregivers.

To address substance abuse effectively, we need a comprehensive approach to prevention and treatment. Many Mendocino County residents cannot access the treatment services they need. Either they do not know where to go; they often do not receive appropriate assessments, especially if they have mental health issues; or there are not enough affordable treatment services available. Statewide and in Mendocino County, services are only reaching 10% of the youth and 17% of the adults that need them.4,5 Agencies are often hampered by their funding sources from providing the most effective services. With increased collaboration and additional resources, service providers can begin to fill in the cracks through which people often fall.

In a county where alcohol and drugs are a mainstay of the economy, we must strengthen communities to provide education, support, and alternatives to substance use for their residents to be effective.

Goals

Treatment on Request – All residents of Mendocino County are able to access alcohol, tobacco and other drug assessment, treatment and referral services on an as-needed basis, regardless of location, culture, language, age or mental health status.

Community Based Prevention – Mendocino County communities are empowered to work on local issues that lead to positive outcomes for youth and families and prevent harmful behaviors, such as substance abuse, child abuse and neglect, and domestic violence.

4Analysis by Children Now of California Department of Education data, 2001–2002. Physically fit students are defined as those who passed 6 out of 6 standards set for fitness, including aerobic capacity.
5Overweight Children and Youth was identified as the number two Maternal, Child and Adolescent Health priority to address in Mendocino County by stakeholders in the MCDPH MCAH 5-Year Needs Assessment, June 2004.
Aging Population

Summary
According to the 2000 Census, Mendocino County’s “over 60” population was at 18% overall and as high as 22% on the Mendocino Coast. This compares with the state at 14% and the nation at 16%. The county’s senior population is projected to increase rapidly, likely reaching between 40–50% of the total population by 2020.

The traditional focus of the public health activities of disease prevention and health promotion encompasses services for older adults. The Aging States Project, a joint project between the Center for Disease Control and Prevention (CDC) and the Administration on Aging (AoA), seeks to network public health programs more effectively with services for older adults towards the goal of better public health outcomes.

Nationwide, nearly one-third of all health care expenditures already serve the needs of older adults. According to the Aging States Project, “without greater emphasis on prevention, health care spending will increase by 25% by 2030 (not adjusted for inflation) simply because the population will be older.” Older adults often do not get information or encouragement to focus on prevention because people assume that it will not be effective at this stage in life. Similarly, older adults often do not receive needed mental health, alcohol, or other drug services because problems go unnoticed, are misdiagnosed as dementia or other health problems, or it is assumed that it is too late to make a difference.

Community-based programs, such as senior centers, present efficient opportunities for providing education and services to older adults. Group and intergenerational activities also help to combat isolation and keep seniors healthy and independent. Home-based care, such as the Older Adults System of Care (OASOC), Linkages, Community Care, and IHSS offer important opportunities for expanded Public Health, Mental Health, and Alcohol and Other Drug Programs (AODP) collaborations. Mendocino County has very good models for providing quality and innovative services for older adults. These can provide the basis for efficiently expanding and improving the overall continuum of care so that the aging population receives needed services.

Goal
Older adults in Mendocino County are able to achieve and maintain optimal health and independence.
Healthy Lifestyles

Nutrition, Hunger and Physical Activity

Summary

In 2000, poor diet and physical inactivity caused 400,000 deaths in the U.S., second only to tobacco. If the trend continues, soon it will overtake tobacco as the number one killer. The results of inactivity and poor diet include obesity, diabetes, coronary heart disease, cancer and many other chronic conditions that cost California over $28 billion per year, according to Department of Health Services.

Only half of Californian adults exercise more than once a month and only one in two Californians consumes the recommended five fruits and vegetables a day. As a result, in 2002 almost 40% of Mendocino County children ages 5–19 were overweight or at risk for becoming overweight and only 28.7% of seventh graders were “physically fit.” At the same time, Mendocino County is ranked 6th in the state for highest rates of food insecurity and hunger.

Ironically, poverty and food insecurity are associated with increased obesity possibly due to the fact that cheaper and more readily available food is often lower quality, more processed, and less nutritious.

The problem of poor nutrition and physical inactivity is rising steadily in the U.S.:

- According to the American Obesity Association, children today belong to the most inactive generation in history.
- According to the Centers for Disease Control and Prevention, if current trends in diet and activity patterns continue, one in every three children born in 2000 will develop diabetes in their lifetime.
- Between 70 – 80% of obese adolescents become obese adults.

Now is the time for Mendocino County to reverse this trend. We have many assets that can help to address this problem, including opportunities for outdoor recreation, local healthy food, gardens in many schools, local policy-makers committed to this issue, and an active Nutrition and Activity Collaborative (NAC). It has been shown that community-wide policy interventions that make healthy choices more accessible are more effective and sustainable than education on an individual level. These types of interventions include influencing policy and legislation, changing organizational practices, creating an environment that encourages physical activity and providing access to low-cost nutritious food.

4Analysis by Children Now of California Department of Education data, 2001–2002. Physically fit students are defined as those who passed 6 out of 6 standards set for fitness, including aerobic capacity.
5Overweight Children and Youth was identified as the number two Maternal, Child and Adolescent Health priority to address in Mendocino County by stakeholders in the MCDPH MCAH 5-Year Needs Assessment, June 2004.
8Steven P. Hooker, Ph.D., Director Prevention Research Center, Arnold School of Public Health, University of South Carolina, delivered at the California Center for Physical Activity Conference, Sacramento, CA, November 18, 2004.
Goal

Mendocino County institutions implement policies and funding strategies that support county residents in achieving a healthy diet and level of physical activity.

Parenting and Child Development

Summary

From April 2003 to March 2004, the incident rate for substantiated cases of child maltreatment in Mendocino County was 33.6 per 1,000 children, almost three times the state rate of 11.6 per 1,000. In addition to more obvious forms of maltreatment, child neglect also has a major negative impact on child development. There are also more subtle influences that affect a child’s development, including lack of breastfeeding and infant attachment, lack of positive and consistent caregiver-child interaction, and lack of exposure to learning opportunities.

Current research in brain development clearly indicates that the emotional, physical and intellectual environment that a child is exposed to in the early years of life has a profound impact on how the brain is organized. The experiences a child has with respect to parents and caregivers significantly influence how a child will function in school and later in life. Through the integration of health care, quality child care, parent education and effective intervention programs for families at risk, children and their parents and caregivers can gain the tools necessary to foster secure, healthy and loving attachments. These attachments lay the emotional, physical and intellectual foundation for every child to enter school ready to learn and develop the potential to become productive, well-adjusted members of society.

Goal

Mendocino County children and families thrive through access to and use of information, services and support.
2010 Results

Healthy Lifestyles (CHSR p. 25)

2010 Strategy/Goal: UVMC will continue its public health education program through a community health fair.

2010 Actions/Results: In September, Ukiah Valley Medical Center and the Savings Bank of Mendocino County joined forces with a coalition of community organizations to host the second annual free children’s health fair at the Alex Rorabaugh Center in Ukiah. At the Wild About Health event, hundreds of children had the opportunity to visit more than 40 health education booths and 20 clinical stations. All exhibitors offered interactive health-related activities for children. Clinical stations provided free screenings for more than 300 children and their family members including dental, hearing, glucose (diabetes screening), vision and more.

“We were able to test 94 children for diabetes during the course of the day. Of these, we found two children with potentially life-threatening high blood sugar,” said UVMC Registered Dietitian and Diabetes Instructor Linda Ayotte. “If we are able to catch even one possible diabetes diagnosis, we have done our job.”

Children washed their hands and were amazed when a black light revealed remaining dirt and bacteria. They enjoyed learning about healthy food options, and the importance of staying active. They learned about reducing their carbon footprint and were invited to ask questions of Dr. Paul Macdonald at the “Ask a Doc” booth. The budding artists expressed themselves at the art therapy booth, while beginning readers had tales read to them.

Parents received free thermometers, while kids got a free collapsible green lunch backpack. All signs were in English and Spanish, and bilingual volunteers made sure fair participants got the most from their attendance. The fair also offered entertainment with performances by Pinoleville Native American Youth Dancers, and healthy food for sale by Mi Pueblito, Jamba Juice and the Grace Hudson Elementary PTA popcorn lady, Kathie Smith.

Children’s Health Fair Coalition members included:

- Alliance for Rural Community Health
- Alex Rorabaugh Center
- Boys and Girls Club of Ukiah
- CASA - Court Appointed Special Advocates
- Family-Life Magazine
- FIRST 5 Mendocino
- Healthy Kids Mendocino
- Jay Epstein State Farm Insurance
- Mendocino Community Health Clinic, Inc.
- Mendocino County Health & Human Svcs.
- Mendocino County Youth Project
- North Coast Opportunities, Inc.
- Redwood Children’s Services
- Savings Bank of Mendocino County
- Tapestry Family Services
- Ukiah Unified School District
- Ukiah Valley Medical Center
- Ukiah Valley Rural Health Center
“My kids had two solid hours of entertainment and I picked up a lot of good information. Both kids had their eyes checked and did the hand-washing test, and they loved making their own jump ropes. The event was really, really good. There was so much more there than I thought there would be,” said local mom Sandy O’Ferrall.

By collaborating with community partners, we were able to provide fair participants with a full understanding of the health services available in our region.
Healthy Lifestyles (CHSR p. 36)

2010 Strategy/Goal: UVMC will expand diabetes education classes to include county-wide coverage, as well as provide culturally appropriate diabetes education classes for our minority populations.

2010 Actions/Results: Diabetes has become an epidemic, nationally and locally. It affects our general population, and has a particularly devastating effect on our primary minority: Latinos. With outreach and education, our Diabetes Education Program worked to reduce the instance of diabetes through prevention, and to reduce the ill effects for those living with diabetes through education.

Programs offered included:

- Diabetes Self Management class in English and Spanish. Team taught by an RN and RD/CDE.
- Diabetes in Pregnancy Program provides services in English and Spanish to women with gestation diabetes, type 1 diabetes and type 2 diabetes. This program is offered in collaboration with California Diabetes in Pregnancy Program (Sweet Success).
- Community outreach and blood glucose screenings at local farmers market, health fairs and Native American tribal events.
- Our goal is to serve everyone, including the uninsured and under insured. We do this with the help of grants and donations.
- Free Diabetes Education Support Group is open to the public.

The free Diabetes Education Support Group meets on a monthly basis at UVMC. The program provides speakers to talk about diabetes and ways to more effectively manage the disease. The group serves approximately 20 people at each of its monthly meetings.

In 2010 the UVMC Diabetes Program was a 2nd year recipient of a $4000 grant from Synod at the Pacific. The funds from this grant literally made it possible to offer the Diabetes Self Management class in Spanish.

Alcohol, Tobacco and Other Drugs (CHSR p.30)

2010 Strategy/Goal: UVMC will support the “Every 15 Minutes” program.

2010 Actions/Results: UVMC worked with local emergency services and law enforcement on the “Every 15 Minutes” program; which encourages high school students to consider the consequences of drinking alcohol, and the responsibility of making mature decisions when lives are at stake. The name of the program was derived from a 1980s statistic that someone in the United States was killed in alcohol-related traffic collisions every 15 minutes. The program occurs one day per year in the spring (shortly before graduation). The program rotates at each of the local high schools each year (one school per year). In 2010, the high school was in Fort Bragg. UVMC has been involved in the program for seven years and plans to continue.
Special Care Nursery  
(HHSAAB – Special Populations)

The UVMC Special Care Nursery offers the community intensive care services for babies that would otherwise have to travel 60–200 miles to Santa Rosa or the Bay Area to receive care. In 2010, we admitted 41 babies to the NICU, for a total of 112 patient days. Room and board was offered to the mothers of Special Care Nursery patients.

Sexual Assault Response Team (SART)  
(HHSAAB – Community Safety)

SART is a collaborative community effort that includes law enforcement, medical examiners, the District Attorney’s office, protective services and advocacy groups working together to improve the investigation and prosecution of sexual assault cases, and ensuring appropriate care and treatment of victims. Through support from the Soroptimist International of Ukiah, UVMC was able to acquire a colposcope. Colposcopes are used during sexual assault examinations, and can be instrumental in both assessing a patient’s condition and providing details to help apprehend and prosecute those who perpetrate violence against women. UVMC continues to offer nursing services, space and other staffing support to SART; and provided 23 SART exams in 2010 — 19 adults and 4 children. It also provides free education to SANE (Sexual Assault Nurse Examiners).

Under-reimbursed Care  
(HHSAAB – Access to Care)

In addition to traditional charity care, UVMC provides health care services to those who can only pay for part of their care, either through government assistance or other means. Several years ago, the hospital expanded its charity care policy to include patients with incomes up to 400 percent of the Federal Poverty Level. See the Community Benefit Financial Report on page 28 for the charity care and uncompensated care provided by UVMC in 2010.

Low-cost Copies of Medical Records  
(HHSAAB – Access to Care)

The UVMC Health Information Management Department (Medical Records) frequently provides free or low-cost records to patients who request copies of their information. Although most copied records are fewer than 50 pages, some can take more than eight hours to produce. In 2010, the Medical Records staff filled 2,549 patient requests, of those approximately 85% were free of charge.

Online Health Library  
(HHSAAB – Access to Care)

The hospital offers an online Health Library through its website www.uvmc.org that allows people to review hundreds of topics with a searchable database. Hundreds of hits were tracked in 2010 for this free online service.
Community Benefit Report Summary:
Other Community Benefits
Free Notary Services (HHSAAB – Access to Care)

The hospital president’s assistant is a Notary Public and notarized 107 documents for employees, medical staff and community members free of charge in 2010.

Leadership Mendocino

UVMC donated $1,000 to the Leadership Mendocino program, which teaches local leaders to learn about the whole county and encourages them to connect with one another to solve county-wide problems. In addition to supporting the program financially, the hospital consistently sponsors individual employees to participate in the program.

In-hospital United Way Campaign (HHSAAB – Aging & Special Populations)

Ukiah Valley Medical Center employees each year are traditionally some of the highest givers in our area to United Way of the Wine Country. United Way funds support “families, children, seniors and those in crisis” through agencies chosen based on United Way’s rigorous application process. In 2007, UVMC employees pledged more than $18,000. In 2008, they pledged more than $23,500. In 2009, it was more than $25,000. In 2010, they pledged over $13,000 and thousands of pounds of food for the local food bank.

Mendocino College Nursing Program (HHSAAB – Access to Care)

In 2010, UVMC provided $60,000 worth of funding for a clinical instructor in the RN program at Mendocino College to benefit nursing education. This collaborative effort recognizes the importance of supporting health care education programs that introduce well-trained nurses into the local health care system.

United Way Day of Caring

On September 10th, twenty-five UVMC employees participated in the United Way Day of Caring. Day of Caring allows volunteers to experience first-hand the needs in our community and then roll up their sleeves and help. The experience, which started with a morning rally and concluded with dozens of completed projects, left volunteers feeling energized and deeply connected to their community.

American Cancer Society’s Relay for Life

UVMC staffed a first aid tent at the event. The ACS’s mission statement is as follows: The American Cancer Society is the nationwide community-based voluntary health organization dedicated to eliminating cancer as a major health problem by preventing cancer, saving lives, and diminishing suffering from cancer, through research, education, advocacy, and service.

Free Use of Hospital Conference Rooms

In 2010, UVMC offered its conference rooms to various community groups for no charge. This service benefited several hundred people, with more than 222 hours of conference time donated.

Pediatric Trauma Equipment

UVMC was able to purchase a glide scope, an airway device, for intubations with an $18,000 grant received from MADDY funds. This equipment has greatly improved the care of young patients in the Emergency Department setting.
Tours of the Hospital for Elementary and High School Students

In 2010, UVMC staff continued the hospital’s tradition of providing hospital tours to school children. The tours focus on the responsibilities of various departments, the types of positions available in hospitals and the importance of teamwork, infection control and helping others. The tour guide provides students with a small gift, such as a hospital coloring book. Several schools participated, serving approximately 60 students.

Free Mammograms (HHSAAB – Access to Care)

To honor National Breast Cancer Awareness Month, UVMC provided 25 women with free mammograms and another 88 were provided with low-cost mammograms during the month of October.

Smoking Cessation Class (HHSAAB – Healthy Lifestyles)

The six-week program is based on the Freedom from Smoking Program offered by the American Lung Association. The program is part of the UVMC community wellness education program. The group serves approximately 12 people at each of its weekly meetings. The mentor program, guest speakers and the on-going support provided by the program are quoted as the most helpful aspects of the program for those wanting to quit.

Participation in Coordination of Care (HHSAAB – Access to Care)

UVMC leaders worked with other health care professionals from community agencies and health care organizations to better coordinate the provision of and the referral to health services. UVMC also hosted the Emergency Medical Care Council meetings, participated in pre-hospital chart review for paramedics and EMTs, and assisted in the quality review for the local jail.

Complimentary Meals

The Nutritional Services department provided more than 2,102 complimentary meals to caregivers and “boarder moms” in 2010 at a value of over $9,000.

Chaplain

At UVMC, the chaplain is involved in counseling, crisis intervention, and yearly holiday food and toy drives. She acts as a liaison between the hospital and the leaders of various religious organizations in Mendocino County, and refers patients to appropriate community agencies to meet spiritual, mental, and financial needs. At times, the chaplain is called upon for mediation services between medical personnel and faith groups with distinctive practices.

Volunteer First Aid Stations

UMVC employees voluntarily staff first aid booths at several community events, such as South Ukiah Rotary’s Triathlon, Ukiah’s Country PumpkinFest, and the American Cancer Society’s Relay for Life.
Hospital Volunteer Program

The volunteers from UVMC are an active group of 50–60 dedicated people who collectively have given more than 100,000 hours of service over the years to the community. Most of the group has volunteered for at least 15 -25 years. Volunteers greet people as they come into the hospital, manage the gift shop, deliver flowers to patients and aid many of the hospital’s departments with clerical support duties. In 2010, proceeds from bake sales or donations from the volunteer gift shop were provided to St. Mary of the Angels Catholic School, Ukiah Firemen, Ukiah Valley Christmas Effort, the Mendocino County Farm Bureau, Diabetes Education Fund, and our Emergency Department. In 2010, they volunteered more than 10,000 hours to the hospital. Volunteers in the Chaplain’s office donated hundreds of hours of service.

Licensed Vocational Nurse (LVN) and Registered Nurse (RN) Training (HHSAAB – Access to Care)

Every year, UVMC employees give free instruction to college nursing students as they train at the hospital to become LVNs and RNs. LVN instruction includes approximately 720 hours per student for 30 LVN students. RN instruction includes two classes of up to 24 students, whose combined clinical learning time is approximately 1,700 hours.

In addition, RN students have the option of doing their senior preceptorship at UVMC, which is 120 hours per nurse (10 shifts). Experienced UVMC nurses spent this time with the senior nursing students giving them one-on-one instruction.
Procurement and Donation of Hospital Supplies for Local Schools & Mission Trips

The Materials Management Department donated medical supplies to the Ukiah Adult School Medical Assisting and LVN classes. It also donated supplies to medical mission trips, including those to Guatemala and Haiti.

Publication of Free Health Newsletter

UVMC works with Coffey Communications to publish a free community health newsletter, HealthScene. The publication is sent to households in Mendocino and Lake counties, and includes health articles and a calendar of health classes. The newsletter is published three times a year and is mailed to more than 15,000 homes at a cost of approximately $60,000 per year.

Free Education to Emergency Personnel (HHSAAB – Access to Care)

In 2010, the UVMC Emergency Department continued its tradition of providing free education to local paramedics, firefighters and emergency medical technicians (EMTs). UVMC provides eight-hour preceptorships to approximately 60 EMT students (40 from the Ukiah Adult School and 20 from Anderson Valley Fire Department), and 240-hour preceptorships to seven paramedic students from Mendocino College.

Lunch & Learn Lecture Series (HHSAAB – Health Lifestyles/Environmental Health)

This program offers free information during monthly programs to people interested in various health topics ranging from heart health to colon cancer. The program serves approximately 60 people per month and provides a free lunch to those who attend.

Public Radio Show on KZYX&Z

The UVMC Marketing Department scheduled speakers for a bi-monthly one-hour health education radio show in conjunction with physician, Dr. Marvin Trotter. Annually, 24 programs on health-related topics were broadcast at no charge. Many of the speakers are affiliated with Ukiah Valley Medical Center.

Supporting Health-Related Charities

In 2010, UVMC donated to the Cancer Resource Centers of Mendocino County, Ukiah Valley Association for Habilitation, Nuestra Casa, the Mendocino County Sheriff’s Activities League, and the Mendocino County AIDS Viral Network.

Education for Local Students (HHSAAB – Access to Care)

UVMC participated in the SCRUBs class at the local high school by having several leaders lecture on various aspects of health care, working in a hospital, and the hospital’s role in the community.
Volunteer Efforts of Employees in the Community

In addition to providing excellent quality health care in their respective positions, many hospital employees volunteer their own time to make the community a better place to live. Staff at UVMC are involved in service clubs in the community such as Rotary, Kiwanis, and the Association of University Women. Here is a short list of the places, activities and events to which UVMC employees donated thousands of hours, talent and dollars.

Adventist Community Center
Alex Rorabaugh Center Board
Alexander Valley Regional Medical Center Board Alliance for Rural Community Health Board
Alliance for Rural Community Health
American Cancer Society
Relay for Life Captains and Participants
Area Agency on Aging Lake & Mendocino Counties
Audubon Society
Big Brothers, Big Sisters of Mendocino County
Boys & Girls Club of Ukiah
Buddy Eller Center (homeless shelter)
Cancer Resource Centers of Mendocino County
Church Activities: Board members and youth group leader
City of Ukiah Parks, Recreation and Golf Course
Community CPR Instructor
Community Workshops on Brain Function
County Emergency Medical Services Committee
E-Center
Employers Council of Mendocino County
Foster Parenting
4-H Youth Development Organization
Gardens Project
Girls Scouts of Northern California
Greater Chamber of Commerce
Hearthstone Village – Clinic/Orphanage
Leadership Mendocino
Mendocino Breast Feeding Coalition
Mendocino College Nursing Advisory Board
Mendocino Community Health Clinic Board
Mendocino Rugby Team
MESA
Mission Trips (Guatemala, Haiti)
Plowshares (daily meals for the homeless and Meals on Wheels for the elderly and housebound)
Positive Parenting Program
Redwood MedNet
School Activities: PTA, Jr. Scholarship Federation Advisor, Farm to Cafeteria program and Sports Boosters
Search and Rescue
Soroptimist International of Ukiah
UCC Camp Cazadero Junior High Camp Nurse
Ukiah Adult School Volunteer Educator
Ukiah Community Center (Food Bank)
Ukiah Main Street Program
Ukiah Players Theatre
Ukiah Senior Center
Ukiah Symphony Association
Ukiah Triathlon (South Ukiah Rotary)
Ukiah Valley Christmas Effort
Ukiah Valley Trail Group
United Way Day of Caring
Volunteer firefighters, ambulance attendants and Haz Mat specialists at local fire departments
Workforce Investment Board
Youth sports coaches and team parents
Cardio Pulmonary Resuscitation Classes (HHSAAB – Access to Care)

UVMC sponsors CPR (BLS and ACLS) classes for community members, medical staff and employees. In 2010, we taught hundreds of people. Respiratory Therapy Director and Safety Officer Diana Lane also offered two free community CPR classes, where she taught approximately 25 community members how to provide life-saving CPR.

Chico State University Rural Nursing Program (HHSAAB – Access to Care)

UVMC partners with Chico State Rural Nursing Program to provide a rural location for nursing students. Chico State uses local nurse preceptors to help nursing students understand the challenges and rewards of working in a small, rural hospital.

Community Benefit Financial Report

<table>
<thead>
<tr>
<th>CASELOAD</th>
<th>TOTAL COMMUNITY BENEFIT COSTS</th>
<th>DIRECT CB REMUNERATION</th>
<th>UNSPONSORED COMMUNITY BENEFIT COSTS</th>
</tr>
</thead>
<tbody>
<tr>
<td>NUMBER OF PROGRAMS</td>
<td>PERSONS SERVED</td>
<td>UNITS OF SERVICE</td>
<td>TOTAL CB EXPENSE</td>
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<tr>
<td>Benefits for the Poor</td>
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<tr>
<td>Traditional charity care</td>
<td>1</td>
<td>1 / 1,650 Pl. Days / Visits</td>
<td>1,094,837</td>
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<td>Public programs - Medicaid</td>
<td>1</td>
<td>3,538 / 25,579 Pl. Days / Visits</td>
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<tr>
<td>Other means-tested government programs</td>
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<tr>
<td>Community health improvement services</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td><strong>Non-billed and subsidized health services</strong></td>
<td>-</td>
<td>-</td>
<td>-</td>
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<tr>
<td>Cash and in-kind contributions for community benefit</td>
<td>-</td>
<td>-</td>
<td>-</td>
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<tr>
<td>Community building activities</td>
<td>110,870</td>
<td>870 Hours</td>
<td>35,928</td>
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<tr>
<td>TOTAL BENEFITS FOR THE POOR</td>
<td></td>
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<td>6,196,817</td>
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</table>

Benefits for the Broader Community

<table>
<thead>
<tr>
<th>CASELOAD</th>
<th>TOTAL COMMUNITY BENEFIT COSTS</th>
<th>DIRECT CB REMUNERATION</th>
<th>UNSPONSORED COMMUNITY BENEFIT COSTS</th>
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<tbody>
<tr>
<td>NUMBER OF PROGRAMS</td>
<td>PERSONS SERVED</td>
<td>UNITS OF SERVICE</td>
<td>TOTAL CB EXPENSE</td>
</tr>
<tr>
<td>Medicare</td>
<td>1</td>
<td>/ Pl. Days / Visits</td>
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<td>Community health improvement services</td>
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<tr>
<td>Health professions education</td>
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<tr>
<td><strong>Non-billed and subsidized health services</strong></td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Cash and in-kind contributions for community benefit</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Community building activities</td>
<td>14</td>
<td>36,000 Hours</td>
<td>48,350</td>
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<tr>
<td>TOTAL BENEFITS FOR THE BROADER COMMUNITY</td>
<td></td>
<td></td>
<td>30,844,114</td>
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</tbody>
</table>

*Persons living in poverty per hospital’s charity eligibility guidelines
**Community at large - available to anyone
***AAA, low or negative margin services
POLICY: COMMUNITY BENEFIT COORDINATION

POLICY SUMMARY/INTENT:

The following community benefit coordination plan was approved by the Adventist Health Corporate President's Council on November 1, 1996, to clarify community benefit management roles, to standardize planning and reporting procedures, and to assure the effective coordination of community benefit planning and reporting in Adventist Health hospitals.

POLICY: COMPLIANCE – KEY ELEMENTS

1. The Adventist Health OSHPD Community Benefit Planning & Reporting Guidelines will be the standard for community needs assessment and community benefit plans in all Adventist Health hospitals.

2. Adventist Health hospitals in California will comply with OSHPD requirements in their community benefit planning and reporting. Other Adventist Health hospitals will provide the same data by engaging in the process identified in the Adventist Health OSHPD Community Benefit Planning & Reporting Guidelines.

3. The Adventist Health Government Relations Department will monitor hospital progress on community needs assessment, community benefit plan development, and community benefit reporting. Helpful information (such as schedule deadlines) will be communicated to the hospitals’ community benefit managers, with copies of such materials sent to hospital CFOs to ensure effective communication. In addition, specific communications will occur with individual hospitals as required.

4. The Adventist Health Budget & Reimbursement Department will monitor community benefit data gathering and reporting in Adventist Health hospitals.

5. California Adventist Health hospitals’ finalized community benefit reports will be consolidated and sent to OSHPD by the Government Relations Department.

6. The corporate office will be a resource to provide needed help to the hospitals in meeting both the corporate and California OSHPD requirements relating to community benefit planning and reporting.

AUTHOR: Administration
APPROVED: AH Board, SLT
EFFECTIVE DATE: 6-12-95
DISTRIBUTION: AHEC, CFOs, PCEs, Hospital VPs, Corporate AVPs and Directors
REVISION: 3-27-01, 2-21-08
COMMUNITY BENEFIT REPORT FORM – 2010

Return to Community Benefit Coordinator

Hospital ______________________________________ Date ______________________

Service/Program ___________________________ Target Population ______________________

The service is provided primarily for  □ The Poor  □ Special Needs Group  □ Broader Community

Coordinating Department ________________________________

Contact Person ________________________________ Phone/Ext ________________________________

Brief Description of Service/Program ______________________________________________________

Caseload ________ Persons Served or _________ Encounters

<table>
<thead>
<tr>
<th>Names of Hospital Staff Involved</th>
<th>Hospital Paid Hours</th>
<th>Unpaid Hours</th>
<th>Total Hours</th>
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</table>

1. Total value of donated hours (multiply total hours above by $40.57) _____________

2. Other direct costs
   Supplies _____________
   Travel Expense _____________
   Other _____________

   Hospital Facilities Used ________ hours @ $ ________/hour _____________

3. Value of other in-kind goods and services donated from hospital resources
   Goods and services donated by the facility (describe): ______________________

4. Goods and services donated by others (describe): ______________________

5. Indirect costs (hospital average allocation ________

Total Value of All Costs (add items in 1-5) _____________

6. Funding Sources
   Fundraising/Foundations _____________
   Governmental Support

Total Funding Sources (add items in 6) (___________)

Net Quantifiable Community Benefit
(subtract “Total Funding Sources” from “Total Value of All Costs”) _____________

PLEASE USE OTHER SIDE TO REPORT NON-QUANTIFIABLE COMMUNITY BENEFITS AND HUMAN INTEREST STORIES
NON-QUANTIFIABLE COMMUNITY BENEFIT AND HUMAN INTEREST STORIES

Please fill in the date and complete the lines above the table on other side of worksheet

Who: __________________________________________

______________________________________________

______________________________________________

What: __________________________________________

______________________________________________

______________________________________________

When: __________________________________________

______________________________________________

______________________________________________

Where: __________________________________________

______________________________________________

______________________________________________

How: __________________________________________

______________________________________________

______________________________________________

Additional information may be obtained by contacting: ________________________________

______________________________________________

______________________________________________

______________________________________________

Phone: ____________________ Fax: ______________ Email: ____________________