More than 70 years ago, our founding mothers had a dream to care for children in a hospital as special as its patients. Valley Children’s Hospital has flourished ever since, caring for hundreds of thousands of children.

Our Mission

Our mission guides us as we travel the road to our future alongside staff, physicians, children, families, our community and our partners throughout the region.

*The mission of Valley Children’s is to provide high-quality, comprehensive healthcare services to children, regardless of their ability to pay, and to continuously improve the health and wellbeing of children.*

Our Vision

Our vision captures the path we’ve traveled and showcases our commitment and passion to be the best. Our clear focus is to continue to provide the best care and the best quality pediatric services available anywhere.

*Our vision is to provide the nation’s best healthcare for kids and to become the nation’s best children’s hospital.*

Our Values

The following values guide every decision and define our commitment and the actions supporting it.

**Excellence:** I am dedicated, disciplined and demonstrate high standards as we strive to be the best. I take ownership and empower myself and others to deliver an exceptional experience, every interaction, every time.

**Compassionate Care:** I am present in every interaction. I respond to others with warmth and kindness.

**Integrity:** I am honest and ethical. I demonstrate high standards of personal conduct, keep my word and take responsibility for my actions.

**Innovation:** I always look for ways to learn and make things better. I am a problem solver.

**Collaboration:** I contribute to, support and respect decisions that are made by my team and the organization. I build and promote positive working relationships and teamwork.

**Stewardship:** I am accountable for effectively managing my time and the organization’s resources. I share resources to achieve the best outcome.

Commitment to the Community

Valley Children’s – one of the largest pediatric healthcare networks in the nation – provides Central California’s only high-quality, comprehensive care exclusively for children, from before birth to young adulthood. Our network offers highly specialized medical and surgical services to care for children with a wide variety of medical conditions, ranging from the common to the highly complex.

The network is anchored by Valley Children’s Hospital, a 330-bed stand-alone children’s hospital located in Madera, plus three satellite neonatal intensive care units (28 beds) located across the Valley. In addition, the Valley Children’s network includes specialty care centers, pediatric primary care practices, an urgent care center and women’s health services. Valley Children’s has a medical staff of more than 650 physicians, approximately 3,400 employees and more than 450 volunteers.

Valley Children’s consistently ranks at the top of our peer group for quality patient outcomes as evidenced by our Magnet® designation, our Beacon Award for Excellence™ in critical care and our U.S. News and World Report recognition in 2018 as one of the nation’s best children’s hospitals for Neonatology, Pediatric Orthopaedics, Pediatric Diabetes and Endocrinology, and Pediatric Gastroenterology and Gastrointestinal Surgery.
While providing exceptional healthcare is the single greatest contribution Valley Children’s makes for our children and their families, Valley Children’s appreciates that it is uniquely positioned to support the needs of children in other ways as well. As an extension of our mission and vision, the goal of Valley Children’s Community Benefit Program is to advance the health and wellbeing of underserved, medically needy children through collaboration and common concern. This Community Benefit Report summarizes the contributions provided by Valley Children’s to its community for fiscal year 2018 (October 1, 2017, through September 30, 2018).

II. SERVICE AREA DEMOGRAPHICS AND PATIENT VOLUME

Service Area Demographics
As the only pediatric network of its kind in all of Central California, Valley Children’s service area extends from Sacramento County in the north to Kern County in the south, and picks up much of the Central Coast and eastern Sierra as well.

For the purposes of this Community Benefit Report, however, Valley Children’s service area is focused on eight counties that collectively account for more than 90% of Valley Children’s inpatient and outpatient volume: Fresno, Kern, Kings, Madera, Mariposa, Merced, Stanislaus and Tulare.

According to www.kidsdata.org, approximately 1/3 of children living in these eight counties live in poverty, 3/4 are an ethnicity other than Caucasian and fewer than 1/4 live in families where English is not the primary language spoken at home.

Valley Children’s Patient Volume
In 2018, Valley Children’s had 12,040 inpatient cases, 114,452 Emergency Department visits, and a combined 297,563 outpatient center, regional specialty care center and day surgery visits. Medi-Cal covered 76% of Valley Children’s total inpatient cases and 76% of total outpatient visits.
Valley Children’s Community Benefit Program is built on the outcomes of a collaborative Community Health Needs Assessment (CHNA) that Valley Children’s conducts every three years. Valley Children’s most recent CHNA was completed in 2016 and assessed the unmet needs of children and their families living in the eight-county region denoted in the previous section. Valley Children’s is in the process of completing an updated needs assessment for fiscal year 2019, the data and information from which will be reflected in Valley Children’s 2019 Community Benefit Report.

Valley Children’s 2016 Community Health Needs Assessment included the following activities:

**Joint Needs Assessment for Fresno, Kings, Madera and Tulare Counties**
Valley Children’s partnered with 14 hospitals in this four-county region to conduct an assessment of health needs for both children and adults. The CHNA was coordinated by the Hospital Council of Northern and Central California and included a thorough review of secondary data as well as significant community engagement through surveys, focus groups and key stakeholder interviews.

**Needs Assessment in Kern, Mariposa, Merced and Stanislaus Counties**
To assess the needs of children throughout the rest of its service area, Valley Children’s staff consulted secondary data sources and convened a number of one-on-one interviews and focus group conversations with individuals representing low income and underserved communities.

Additionally, Valley Children’s staff engaged regularly with a host of community-based organizations and initiatives that kept us close to the issues impacting the health and wellbeing of children in our service area. See pages 18-20 for a partial list of organizations and initiatives in which we were involved in 2018.
From high rates of obesity and child abuse to poor access to primary healthcare, children and their families throughout the eight-county region face many challenges in their efforts to live healthy, productive lives. The implications of these challenges are significant. For children and their families, it means high rates of chronic illness, frequent visits to hospital emergency rooms, missed days at school and missed days at work for parents or caregivers. For healthcare providers, it means carefully considering the many needs that exist and determining which needs are the most critical and which needs they are best equipped to address.

Based on our 2016 Community Health Needs Assessment and our continuous engagement with community stakeholders, Valley Children’s identified the following priority needs for FY2018. They are not listed in any particular order.

- **Child Maltreatment:** Enhanced community education and coordination of services regarding child maltreatment prevention.
- **Childhood Obesity Prevention:** Increased coordination of existing efforts and development of new resources to assist community-based providers in promoting healthy eating and physical activity.
- **Community Capacity:** Enhanced capacity of community-based providers to address pediatric healthcare needs, including kids with medically complex conditions.
- **Developmental Disabilities:** Improved access to and coordination of prevention, screening and treatment services for children at risk for, or with, developmental delays.
- **Family Support:** Improved access to transportation, health literacy and nutrition.
- **Mental Health:** Increased access to mental health services for children, both inpatient and outpatient.
- **Primary Care:** Increased utilization of primary and preventative care for underserved children.
- **Unintentional Injury:** Continued focus on preventing unintentional injury to children through community-based education efforts.

Availability of healthcare resources within Valley Children’s service area varies by type of resource and location. However, it is generally recognized that a vast majority of the region is medically underserved. According to data published by the federal Health Resources and Services Administration, significant portions of the eight-county region were designated as Health Professional Shortage Areas for primary care (including pediatrics), dentistry and mental health in 2017 and 2018.

Similar data compiled by the California Office of Statewide Health Planning and Development (OSHPD) found that a significant portion of the eight-county region qualified as a Primary Care Shortage Areas (PCSA) in 2017 based on physician counts and demographic and poverty data. OSHPD data also found that all of the eight counties, with the exception of Mariposa County, qualified as a Registered Nurse Shortage Area in 2017.
According to the Catholic Health Association’s “Guide for Planning and Reporting Community Benefit,” community benefit services provide treatment and/or promote health and healing in response to identified community needs and meet at least one of the following objectives:

• Advance medical or healthcare knowledge
• Enhance the health of the community
• Improve access to healthcare services
• Relieve or reduce the burden of government or private, community-based efforts

Also included in the definition are the provision of charity care and the unreimbursed cost of providing healthcare services to those enrolled in public programs, including Medi-Cal.

In FY2018, Valley Children’s provided the following community benefit activities and programs within its service area:

A. COMMUNITY HEALTH IMPROVEMENT SERVICES

Community Health Education

Clinical Partnerships

Valley Children’s Clinical Partnership Program brings together institutions focused on enhancing neonatal and pediatric care, regardless of whether the ill or injured child becomes a Valley Children’s patient. This effort helps prevent children from being transferred or referred unnecessarily to Valley Children’s, and helps identify as soon as possible when a child needs advanced pediatric care. With improved communication and tools, we decrease stress for patients and families and increase provider confidence in providing pediatric care, while enhancing performance at both Valley Children’s and the partnering provider facility. The goals of our Clinical Partnership Program include providing:

• Enhanced, coordinated care
• More care delivered closer to home
• Improved quality and confidence in providing pediatric care

In 2018, Valley Children’s supported 13 inpatient clinical partners and two outpatient clinical partners.

Injury Prevention

Valley Children’s operates an Injury Prevention Program to increase community awareness of childhood injuries and measures that can be taken to decrease their prevalence throughout the region.

In FY2018, the program recorded 15,519 contacts with children, parents, healthcare professionals and others at 184 different community, media and professional events, covering the following topics: child passenger safety, abusive head trauma, pedestrian safety, safe sleep, traumatic brain injury (helmet safety), Halloween safety, poison prevention, responding to a bleeding emergency, driver safety and awareness (including drunk/distracted driving), baby basics, medication safety, choking prevention, home safety, concussion prevention and management, bicycle safety, pediatric trauma, water safety and suicide prevention.

Regarding bicycle safety, Valley Children’s distributed 525 bicycle helmets to children and families whose existing helmets did not meet minimum safety standards or who did not have helmets at all. Regarding car seat safety, Valley Children’s conducted safety checks on 561 car seats and distributed 349 car seats to families whose existing car seats did not meet minimum safety standards or who simply did not have a car seat and needed one.
Healthcare Literacy

Valley Children’s provided access to online educational information via the Health Encyclopedia link on its website. The Health Encyclopedia contains thousands of pages of information on pediatric diseases, conditions and treatments, as well as sections on how to keep kids healthy. The encyclopedia is available in English and Spanish.

Meeting the Needs of Medically Complex Children

Valley Children’s recognizes the critical role that community-based providers and organizations play in meeting the needs of medically complex children and is committed to making sure they have the clinical skills to take care of this patient population. The Hospital provided significant outreach and education for community-based organizations and providers to make sure they have the clinical expertise needed to care for medically complex children, including children with tracheostomies and ventilators.

Adaptive Sports Program

Valley Children’s Adaptive Sports Program provides free recreational and athletic experiences for children, adolescents and young adults with disabilities, regardless of whether they have been or currently are patients at Valley Children’s. The only one of its kind in Central California, the program is designed for individuals with physical impairments and conditions ranging from cerebral palsy to spinal cord injuries. Disabled youth up to age 21 are especially encouraged to attend.

Our region’s abundant mountains, lakes, rivers, trails and athletic facilities make amazing destination hotspots for recreational and competitive activities. Whether water skiing or rock climbing, participants enjoy a fun experience while boosting their health, confidence and independence.

Through hard work and determination, children learn it is possible to participate in athletics, exceed expectations and achieve their dreams. Activities offered in FY2018 included water skiing, surfing, adaptive scuba diving, rock climbing, sled hockey, track and field, tennis, basketball, kayaking and paddle boarding. The Adaptive Sports Program also sponsored a trip to the Monterey Bay Aquarium.
Healthcare Support Services

Valley Children’s provided the following healthcare support services to help address the healthcare needs of children and their families at home, at school and in the community:

Child Abuse Prevention

The Guilds of Valley Children’s Hospital Child Abuse Prevention and Treatment Center’s mission is to provide comprehensive services to children, dependent adults and their families through a multidisciplinary, child-friendly program, and to meet the physical and emotional needs of victims of child abuse.

The Center’s vision is to be the premier provider in Central California for diagnostic physical abuse assessments, foster care medical clearance examinations and pediatric sexual assault evaluations, including children who have been victims of commercial sexual exploitation. Additionally, the Center’s providers, known as the Child Advocacy Team, regularly testify in both dependency and criminal courts throughout the Valley. The Center is recognized in Central California and around the state as a leader in advocacy, injury prevention, clinical research and academic training. In FY2018, the Center became a member of the Child Advocacy Centers of California, Central Chapter. Membership provides a number of benefits and opportunities to expand efforts in child abuse prevention and treatment.

According to the report “Child Maltreatment 2017,” an estimated 4.1 million referrals involving the suspected maltreatment of about 7.5 million children were made to Child Protective Services (CPS) agencies in the United States in 2017. This is an increase of approximately 91,000 referrals from 2016. In California, an estimated 400,190 suspected child maltreatment reports were completed, of which about 86,700 reports came from Valley Children’s service area.

The Center includes the Child Advocacy Clinic, which operates five days a week and sees approximately 1,000 children each year. Center providers also are available seven days a week, 24 hours a day for emergency coverage. The Center includes an inpatient component that evaluates about 100 children yearly in the pediatric emergency department, acute-care floors and pediatric intensive care unit. These children are evaluated for suspected physical abuse, sexual abuse and neglect. The staff includes child abuse pediatricians, nurse practitioners specialized in child maltreatment, forensic nurses, social workers, forensic interviewers, a Center coordinator, a licensed mental health provider and support staff.

In addition to the clinical services offered by the Center, a Multi-Disciplinary Interviewing Center is also available for victims or witnesses of crimes. Forensic interviewing services are requested by law enforcement and/or CPS. The purpose of the forensic interviewing program component is to reduce the number of interviews and decrease the number of individuals who will talk to the victim. The Center strives to provide a welcoming, child-friendly environment where children/dependent adults can feel safe and be interviewed by a trained professional.

There is ongoing collaboration with external community partners and other Hospital services including subspecialty clinics, patient and family services, interpreter services, radiology, diagnostic clinical laboratories, child life services and pastoral care.

The Center works closely with law enforcement, CPS and district attorneys’ offices in their investigative efforts of child maltreatment. Collaborative efforts include case consultation and monthly Suspect Child Abuse and Neglect (SCAN) meetings facilitated by our Child Advocacy Clinic in an effort to track, monitor and advocate for the health and safety of at-risk children throughout the Valley.

For prevention education, the Center collaborates with internal and external partners to provide education to parents, caregivers, healthcare personnel, teachers and mandated reporters of suspected child maltreatment. These partners include Valley Children’s Trauma Department’s Injury Prevention Team, Safe Kids, Child Abuse Prevention Councils of California, Comprehensive Youth Services, CPS, Exceptional Parents Unlimited, Sexual Assault Response Teams (SART) and county public health departments.
Additionally, the Center provides both interventional and anticipatory guidance to our patients and families at Valley Children’s Hospital. On April 6, 2018, the Center hosted its first ever Child Abuse Prevention Conference which highlighted trending topics in the field of child maltreatment interventions. International and local speakers presented on topics including institutional child abuse and its implications for policy change, neurological effects of childhood trauma, how trauma affects bonding and attachment, and internet crimes against children.

**Enrollment in Health Insurance**

Valley Children’s identified and provided enrollment assistance to uninsured and under-insured patients who qualified for Medi-Cal, California Children’s Services Program or Valley Children’s Financial Assistance Program. Once eligibility was determined, Valley Children’s staff assisted the families with completing necessary applications and submitting them to the appropriate agencies.

**Food for Families**

Valley Children’s dietary department provided meal coupons to breastfeeding moms whose infants were at Valley Children’s. Additionally, through a program called Meals of the Heart, which is sponsored by Ronald McDonald Charities of Central California, Valley Children’s social work team provided patients’ families with meal coupons when they arrived and were not prepared for a long stay at the hospital. The social work team also worked closely with the California Children’s Services program to provide food for eligible families.

Valley Children’s also received support from a number of other organizations, including the Mendiburu Magic Foundation, Catholic Diocese of Fresno and Sweet Nectar Society, that either donated food to Valley Children’s to distribute to needy families or donated cash to give to families to purchase food.

**Literacy Program**

Valley Children’s is uniquely positioned to make a difference in the literacy of children throughout our service area. It is the aim of our Literacy Program to put a new, age-appropriate book into the hands of every child who comes into our Hospital. In FY2018, we provided 1,500-2,000 new books a month to our inpatients and outpatients.

For many families in the Central Valley, books are a luxury. The area is among the poorest in the nation, with 41% of the area’s children ages 0-5 living in households where the income is below the federal poverty level. Not coincidentally, the Valley is also one of the least literate parts of the country. Studies have shown that children from poor socioeconomic environments can start kindergarten having heard 30 million fewer words than their more affluent peers. Reading to children can shift this kind of trend. However, asking financially strapped families to put books for their children ahead of other vital priorities is unrealistic. That is why our program wants to help them take the luxury out of literacy. Putting books into the hands of families who cannot afford them can go a long way in increasing literacy rates and performance in school, highlighting the importance of making books a part of normal life for every child who visits Valley Children’s.
Transportation
Given the Central Valley’s largely rural landscape and high concentration of poverty, transportation has long been a challenge for many families. In FY2018, Valley Children’s continued to work with the community to improve public transportation and access to care. Valley Children’s Social Work Department assisted families with transportation by providing gas cards, taxi vouchers, Amtrak tickets and bus tokens. Valley Children’s also subsidized bus and other public transit services from the City of Fresno and Kings County.

Social and Environmental Improvement Activities
Valley Children’s supported a number of programs and activities to improve the capacity of communities to promote health and wellness among children.

Childhood Obesity Prevention
In FY2018, Valley Children’s formally developed a regional approach to reducing the childhood obesity epidemic in the Central Valley. The “Communities for Healthy Kids” initiative is a multi-sector partnership between healthcare providers, health plans, schools, community-based organizations, public health departments and the agriculture industry to increase access to and consumption of healthy foods and beverages and to increase opportunities for and participation in physical activity. The purpose of this effort is to align and support existing partnerships across Fresno, Madera and Kings counties in an effort to reduce childhood obesity in the Central Valley through education, advocacy and the coordinated implementation of identified strategies.

Furthermore, Valley Children’s has identified food insecurity as a critical social determinant of health that impacts the health and wellbeing of our patients and families. Children who are food insecure lack access to affordable and healthy foods which leads to adverse health outcomes, including increased obesity rates. Addressing food insecurity within the healthcare setting provides Valley Children’s the ability to further foster the health of our patients and communities. To support this effort, Valley Children’s launched a pilot project at one of its community-based primary care pediatric practices. Providers at the practice screen their patients for food insecurity. If found to be at-risk, patients are connected to nutrition programs and emergency food resources.

Additional support provided in FY2018 included the following activities:

- Valley Children’s convened a continuing medical education event on Childhood Obesity Prevention for community providers in Fresno, Madera, Merced, Kings and Tulare counties to raise awareness about ways to address childhood obesity within the clinical setting.
- Valley Children’s served on the Steering Committee for the Fresno County Health Improvement Partnership, co-chaired the Fresno County Diabetes Collaborative and participated in the Live Well Madera County Diabetes and Obesity Workgroup, the Kings County Diabesity Coalition and the Tulare County Diabetes and Obesity Workgroup.

Early Child Development and Care Coordination
Valley Children’s participated in a number of initiatives supporting the healthy development of children both during pregnancy and into the first 3-5 years of life. Examples include the following:

Fresno County Pre-Term Birth Initiative: Fresno County has one of California’s highest rates of premature birth with 1 out of every 9 babies born too early. Premature birth can cause serious physical and mental disabilities, or even death, before the baby’s first birthday. Over a 10-year period, the Fresno County Pre-Term Birth Initiative is working to improve the health of Fresno mothers and reduce the rate of premature babies. Using an approach called Collective Impact, partners across many sectors have come together to create change in Fresno County. Valley Children’s has been an active participant in this initiative, with Valley Children’s Senior Vice President for Community Engagement and Population Wellness serving as chair of the Initiative’s Steering Committee.
Cradle to Career: Both Fresno and Stanislaus counties have begun formal Cradle to Career initiatives for the purpose of convening public and private sector stakeholders to work together to improve outcomes for children in their communities, from pre-conception to college and/or vocational training. Valley Children’s participates in both initiatives and has been a strong voice for the inclusion of outcomes and indicators focused on child health and wellness.

Help Me Grow Fresno County: Help Me Grow is a coordinated system of early identification and referral for children ages 0-5 who are at risk for developmental delays. In FY2018, Valley Children’s supported the implementation of Help Me Grow in its pediatric primary care practices in Fresno County by promoting the use of a specific developmental assessment and screening tool that is part of the Help Me Grow model.

March of Dimes: Valley Children’s partnered closely with the March of Dimes to advocate on behalf of policies at the state and federal level that promote healthy pregnancies and healthy babies. Additionally, Valley Children’s Director of Community and Government Relations chaired the March of Dimes of California’s Advocacy and Government Affairs Committee in FY2018.

Mental Health
Issues and challenges associated with child and adolescent mental health continued to be a major concern in FY2018. To help identify potential regional solutions, Valley Children’s supported or participated in a number of activities. Valley Children’s staff provided teen suicide prevention education to students and staff at area high schools.

In addition, Valley Children’s staff either led or participated in a number of community-based collaboratives focused on preventing child mental illness and/or early identification and treatment of child mental illness. Valley Children’s staff chaired an initiative called Community Conversations, a 50-member collaborative addressing issues of mental health, homelessness and the impact on families. A number of Valley Children’s staff also served as members of the Fresno Suicide Prevention Collaborative and Madera County Suicide Education and Awareness Collaborative.

B. HEALTH PROFESSIONS EDUCATION
Valley Children’s is committed to promoting an adequate supply of highly trained professionals to meet our region’s future demand for pediatric healthcare services. Activities supported by Valley Children’s in FY2018 included the following:

Continuing Physician Medical Education
In FY2018, Valley Children’s provided continuing medical education to more than 500 community-based primary care physicians. Pediatric subspecialty physicians from Valley Children’s served as featured faculty, providing community-based physicians with guidance on a variety of pediatric medical conditions including chronic diarrhea, concussion management, constipation in children, diabetic ketoacidosis management, growth and puberty disorders, evaluation and diagnosis of malabsorption and maldigestion disorders, imaging of sports injuries, inherited and acquired bone marrow failure, neonatal abstinence syndrome and Valley fever.

Programs were provided at locations throughout Valley Children’s service area, including Bakersfield, Hanford, Madera, Merced, Modesto, Porterville, Reedley and Visalia.
Non-Physician Clinical Training

Valley Children’s partners closely with health education programs throughout the state and across the country to provide students with a variety of educational opportunities to observe or participate in the care of pediatric patients. In FY2018, Valley Children’s hosted 727 nursing students from more than 20 different nursing schools for a total of 66,841 nursing instruction hours. Valley Children’s also hosted 302 non-nursing students, representing 14 different clinical disciplines across 20 different educational institutions for a total of 32,590 instruction hours.

Physician Training

Valley Children’s Pediatric Residency Program: As the region’s pediatric thought leader, Valley Children’s has remained committed for decades to ensuring high-quality pediatric medical education and resident training for healthcare professionals throughout Central California. To maintain this standard of excellence, we continuously look for ways to expand our training opportunities and use the latest technology to improve clinical outcomes and promote best practices.

A nationwide shortage of pediatric physicians is making timely access to the best medical care an immediate challenge. The lack of pediatricians especially affects the Valley, well-recognized as underserved and economically poor. Statistics indicate the Valley has only 48 primary care physicians per 100,000 people – far below the recommended 60 to 80 primary care physicians.

As a result, many families turn to emergency departments as an alternative. Valley Children’s pediatric emergency department is the busiest in California for patients under age 21. In FY2018, our emergency department saw more than 114,000 visits. About half of these visits did not warrant specialized emergency care and could have been addressed in local pediatricians’ offices.

Training the next generation: To achieve our vision to provide the nation’s best healthcare for kids, Valley Children’s is facing the physician shortage head-on. Valley Children’s recently took the lead in training the next generation of pediatricians and pediatric specialists by creating our own accredited, three-year residency program.

Valley Children’s Pediatric Residency Program, Affiliated with Stanford University School of Medicine, provides an in-depth education focused on general and advanced clinical pediatric training in a fast-paced, tertiary care environment, with a focus on quality and patient safety, interprofessional education and community partnerships. The residents rotate through our main teaching hospital – the 330-bed, state-of-the-art Valley Children’s Hospital – and Lucile Packard Children’s Hospital Stanford. They work closely with physicians, nurses, pharmacists, administrators and other healthcare professionals, including our partners in local hospitals and medical groups.

Traditionally, physicians train in silos. Today’s way of thinking is to train in teams to replicate the reality of today’s collaborative healthcare environment. Doctors also tend to practice where they learn. Our goal is to attract and retain 50% of our resident graduates to stay in the Central Valley to care for our community. Valley Children’s Pediatric Residency Program prepares healthcare professionals for an exciting career in medicine, advocacy and leadership, demonstrating the advantages of practicing in the Valley.

Enhancing medical skills: Continuing medical education is crucial to all healthcare providers’ ability to improve patient care and keep current with the ever-changing landscape of the medical industry. Valley Children’s continues to expand these pediatric opportunities for doctors, nurses, respiratory therapists and other healthcare professionals throughout Central California. These range from clinical symposiums, lecture series, grand rounds and didactic teaching, to outreach education including health fairs, in-house trainings, conferences, webinars and more.
Our high-tech clinical simulation program is also integral to providing excellent pediatric care. This vital teaching technique using interactive role play and high-fidelity mannequins allows learners to practice and hone clinical skills and critical thinking with the same complexities and distractions present in the clinical setting without putting actual patients at risk.

In FY2018, Valley Children’s provided training to 41 medical students and 171 physician residents from 18 different programs. Residents received training in a number of different disciplines, including general pediatrics, cardiology, emergency medicine, family medicine, pediatric surgery and orthopaedic surgery.

**Pharmacy Residency Program**

Valley Children’s supported a pharmacy residency program in 2018 that provided training to eight residents and one fellow.

C. **RESEARCH**

Valley Children’s research program consists of both national multi-center clinical trials and locally generated, physician-initiated research studies. Physicians select studies which are tailored to meet the varying needs of our patient population. At the present time, 206 studies are available to children and their families. Studies include Phase II through Phase IV clinical research, as well as social and behavioral research.

The oncology research program is a member of the Children’s Oncology Group, a national network of clinical trials which is federally funded by the National Cancer Institute. Physicians have access to more than 100 studies to treat a variety of types of cancer. Additionally, Valley Children’s participates in studies sponsored by major pharmaceutical companies. Importantly, a program which examines the long-term effects and needs of survivors of childhood cancer, initiated by a hospital-based oncologist, is centered here.

The Endocrinology and Gastroenterology departments offer various studies for diabetes and inflammatory bowel disease, which are noted to be at a higher prevalence in the Central Valley. Physicians participate in several studies which follow children to determine whether they are at risk of, or are developing, Type 1 diabetes. Our pediatric gastroenterologists are also participating in a study to develop a better treatment and diagnostic plan for the management of bile duct stones in children.

In conjunction with Stanford University, our cardiologists are examining the outcomes of children who have had surgical procedures for several types of serious heart defects. Another study seeks to understand the psychological effects of implanted pacemakers on children.

A genetics registry allows physicians to collect information on patients with rare genetic diseases to find clinical trials that seek to better understand rare childhood diseases and to develop new treatments.

Our surgeons are participating in a nationwide study to examine whether safely delaying hernia repair in infants can reduce early exposure to anesthesia. Several other researchers are examining the appropriate use of medications in pediatrics to prevent medication errors.

Infectious Disease specialists are examining treatment outcomes for patients with Valley fever and seeking to learn why some patients develop more severe disease than others.
D. CASH AND IN-KIND CONTRIBUTIONS

Valley Children’s participated as a financial sponsor of community-based organizations whose purpose aligns closely with Valley Children’s mission and community benefit priorities. Some of those organizations included the Central California Food Bank, Court Appointed Special Advocates, Down Syndrome Association of Central California, Exceptional Parents Unlimited, Hinds Hospice, March of Dimes, Sierra Vista Child & Family Services and West Fresno Family Resource Center.

Valley Children’s also provided a variety of in-kind support including the following:

Disaster Preparedness

Valley Children’s donated space to the California Department of Public Health to store pharmaceuticals to be used in regional disasters or medical emergencies.

Expanded Access to Pediatric Primary and Specialty Care

Valley Children’s made cash contributions for the purchase of land and other capital-related items to be used to increase access to healthcare services for children in neighboring communities.

Poison Control

The Central California Poison Control Center is located on the Valley Children’s campus and received a donation of office space in FY2018 from Valley Children’s. The Center answers calls 24 hours a day, 7 days a week, from throughout the region and provides expert advice and information regarding exposure to potentially harmful substances.

In addition to medical advice, the Center also assists physicians in complying with mandatory reporting requirements for pesticide exposures, provides case data and collects and reports information on the health issues related to pesticide exposure in California.

Lastly, the Center has been expressly responsive to the growing and largely underserved Latino population by developing specialized teaching tools and program interventions in Spanish, and providing customized trainings for community health workers in Spanish.

Ronald McDonald House

Valley Children’s owns the land on which the Ronald McDonald House (RMH) of Central California is located and leases the land to the RMH for $1 per year. The lease arrangement helps make it possible for the RMH to offer the following services to families whose children are hospitalized or receiving treatment:

• 18 bedrooms with a private bathroom
• Three wings equipped with a laundry room, kitchen and dining area
• Fully stocked pantry and private refrigerators for each room
• Home-cooked meals
• Playroom for siblings
• Large communal living area with small reading room
• Computer lab
• Outdoor dining and play area
E. COMMUNITY BUILDING ACTIVITIES

In FY2018, Valley Children’s participated in a number of local, regional and state level initiatives or coalitions that directly relate to the priority needs listed on page 5, including those listed below.

**Child Maltreatment**
1. Central California Coalition of Child Abuse Prevention Councils
2. Children’s Advocacy Centers of California
3. County Child Abuse Prevention Councils, Fresno and Madera counties
4. County Pediatric Death Review and Child Maltreatment Teams, Fresno, Kern, Kings Madera and Merced counties
5. Live Well Madera County Child Abuse Prevention Workgroup
6. Sexual Assault Response Teams, Fresno, Madera, Merced and Tulare counties
7. Suspected Child Abuse & Neglect (SCAN) Team, Fresno, Kings, Madera, and Merced counties
8. Tulare County Commercially Sexually Exploited Children Review Team

**Childhood Obesity Prevention**
1. Fresno County Diabetes Collaborative
2. Fresno County Food Security Network
3. Fresno County Health Improvement Partnership Steering Committee
4. Kings County Diabesity Coalition
5. Live Well Madera County Obesity and Diabetes Workgroup
6. Madera Unified School District Wellness Committee
7. Regional Partnership for Childhood Obesity Prevention
8. Tulare County Diabetes and Obesity Workgroup

**Community Capacity**
1. Central Valley School Health Advisory Panel
2. Children’s Health and Air Pollution Study for the San Joaquin Valley

**Developmental Disabilities**
1. Bi-Annual Babies First Coordinating Council
2. California Breastfeeding Coalition Communication Committee
3. Fresno Babies First Breastfeeding Task Force
4. Fresno County Office of Education Teen Parent Support Collaborative
5. Help Me Grow, Fresno County
6. Kern County Medically Vulnerable Infant Project
7. Madera County Breastfeeding Coalition
8. Madera County Office of Education Pregnant or Parenting Teen Youth Conference
9. March of Dimes California Advocacy and Government Affairs Committee
10. March of Dimes Central Valley Division
11. Model of Care Partnership Oversight Committee, Fresno County
12. Preterm Birth Collective Impact Initiative, Fresno County
13. Teen Parent Support Program, First 5 Fresno County
Mental Health
1. Central California Perinatal Mental Health Collaborative
2. Clovis Unified School District Comprehensive Wellness Committee
3. Community Conversations on Mental Health, Fresno County
4. Fresno County 5150 Task Force
5. Fresno County Suicide Prevention Collaborative
6. Fresno County Trauma and Resiliency Network
7. Madera County Suicide Prevention Collaborative
8. National Alliance on Mental Illness, Fresno County
9. Resource Center for Survivors, Fresno County Rape Crisis Services
10. Survivors of Suicide Loss, Fresno County

Primary Care
1. Fresno Healthcare Coalition
2. Fresno Healthy Communities Access Partners
3. Merced County Health Care Consortium

Unintentional Injury
1. California Safe Teen Driving Committee
2. Safe Kids Central California
3. Safe Kids Kings County

Other
1. ABC30 Fresno Community Advisory Committee
2. Binational Health Week of Central California Planning Committee
3. California Department of Public Health, Office of Health Equity Advisory Committee
4. Clovis Unified School District Comprehensive Wellness Committee
5. Cradle to Career Partnership, Fresno County
6. Cradle to Career Partnership, Stanislaus County
7. Fresno Community Health Improvement Partnership
8. Fresno Unified School District School Health Advisory Committee
9. Kings County Multi-Disciplinary Team
10. Madera County Interagency Council for Children
11. Mariposa County Interagency Team Member
12. Roman Catholic Diocese of Fresno, Health Ministry Office
13. Tulare County Mobilizing for Action through Partnerships and Programs Committee
14. Ventanilla de Salud Program, Mexican Consulate Fresno
Economic value and categorization of community benefit provided in FY2018

(October 1, 2017 through September 30, 2018)

<table>
<thead>
<tr>
<th>Community Benefit Category</th>
<th>Net Benefit</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Charity care(^1)</td>
<td>$241,142</td>
</tr>
<tr>
<td>2. Unpaid costs of Medi-Cal(^2)</td>
<td>-</td>
</tr>
<tr>
<td>3. Education and research(^3)</td>
<td>$9,678,749</td>
</tr>
<tr>
<td>4. Other for the broader community(^4)</td>
<td>$35,797,308</td>
</tr>
<tr>
<td><strong>Total quantifiable community benefit prior to unpaid cost of Medicare</strong></td>
<td><strong>$45,717,199</strong></td>
</tr>
<tr>
<td>5. Unpaid costs of Medicare</td>
<td>$176,962</td>
</tr>
<tr>
<td><strong>Total quantifiable community benefit</strong></td>
<td><strong>$45,894,161</strong></td>
</tr>
</tbody>
</table>

\(^1\)Charity Care - In keeping with its Mission, Valley Children's continues to accept all patients, regardless of their ability to pay. This amount represents costs associated with patients who meet certain criteria under the organization's charity care policy without charge, or at amounts less than its established rates in relation to the cost of these services. Charity care includes indigent and free care, which is based on the patient's inability to pay for services.

\(^2\)Unpaid costs of Medi-Cal, net of disproportionate share funds received, were $84,480,893 in fiscal year 2018. Valley Children's recognized net revenue from the Hospital Fee Program in the amount of $88,003,350 in fiscal year 2018 and therefore has reported $0 unpaid costs of Medi-Cal.

\(^3\)Costs related to the medical and health professions education programs and research that the hospital supports.

\(^4\)Includes non-billed activities, such as health education, community health improvement, health support services, community benefit operations, cash and in-kind donations.
Valley Children’s continues to address the identified significant health needs in our service area through our community benefit commitment.

**PRIORITY NEEDS**

In 2016, Valley Children’s completed a Community Health Needs Assessment. Priority health needs were identified that the Hospital chose to address through its Implementation Strategy. These included:

1. **Access to Care**
   - Community Capacity
   - Primary Care
   - Transportation

2. **Chronic Disease Prevention**
   - Obesity and Type II Diabetes

3. **Infant Health**
   - Developmental Disabilities
   - Pre-Term Birth and Infant Mortality

4. **Mental Health**

5. **Violence and Injury Prevention**
   - Child Maltreatment
   - Unintentional Injury Prevention

**IMPLEMENTATION STRATEGY**

The Implementation Strategy developed from the 2016 Community Health Needs Assessment spans the period 2017-2019. Valley Children’s addressed these priority health needs in FY2018 through a commitment of resources including, but not limited to, the following programs and services:

1. **Access to Care**

   **Community Capacity**

   - Valley Children’s provides outreach education to community-based providers and organizations to make sure they have the clinical expertise needed to care for medically complex children.
   - Valley Children’s provides cash and in-kind donations to a number of community organizations to support their efforts to improve community health.
   - Valley Children’s provides clinical precepting to student nurses, medical students and other healthcare professionals in training.
   - Valley Children’s provides financial assistance through both free and discounted care for healthcare services, consistent with our financial assistance policy.
Primary Care
• Valley Children’s helps recruit and place primary care providers in underserved areas.
• Valley Children’s provides enrollment assistance to families with children not enrolled in health insurance.

Transportation
• Valley Children’s provides gas cards, tokens and taxi vouchers to families needing assistance traveling to the Hospital or other treatment centers.
• Valley Children’s subsidizes bus and other public transportation services from Fresno and Kings counties.

2. Chronic Disease Prevention
   Obesity and Type II Diabetes Prevention
   • Valley Children’s supports the development and implementation of regional strategies to prevent childhood obesity and Type II diabetes.

3. Infant Health
   Developmental Disabilities
   • Valley Children’s participates in and supports several community-based efforts focused on improving coordination of and access to prevention, screening, assessment and treatment services, including Help Me Grow programs in Fresno, Kern and Merced counties and the Kern Medically Vulnerable Infant Project.
   Pre-Term Birth and Infant Mortality
   • Valley Children’s participates in the Pre-Term Birth Initiative of Fresno County focused on improving birth outcomes for at-risk women.
   • Valley Children’s provides education and technical assistance to community-based providers to ensure they have the expertise to care for medically complex infants.

4. Mental Health
   • Valley Children’s participates in community-based initiatives that increase access to, or coordination of, mental health services for children.

5. Violence And Injury Prevention
   Child Abuse and Neglect
   • Valley Children’s Child Abuse Prevention and Treatment Center offers comprehensive services to children and their families through a multidisciplinary, child-friendly program, to meet the physical and emotional needs of children suspected of being abused or neglected.
   • The Center helps prevent and/or promote the early recognition and treatment of child abuse by collaborating with internal and external partners to provide education to parents, caregivers, healthcare personnel, teachers and mandated reporters of suspected child maltreatment.
Injury Prevention

- Valley Children’s operates an Injury Prevention Program to increase community awareness of childhood injuries and those measures that can be taken to decrease their prevalence.
- Valley Children’s chairs Safe Kids Central California, leading this coalition of 40 locally based agencies in a variety of projects focused on decreasing unintentional death and injury to kids.

MEASURING IMPACT

Valley Children’s has established impact measures for our community benefit programs that include documenting persons served and identifying changes in policy as a result of our community efforts.

VIII. CONTACT INFORMATION

Address of Hospital Campus
Valley Children’s Hospital
9300 Valley Children’s Place
Madera, CA 93636

Web Address
valleychildrens.org

Community Benefit Contact
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tcurley@valleychildrens.org