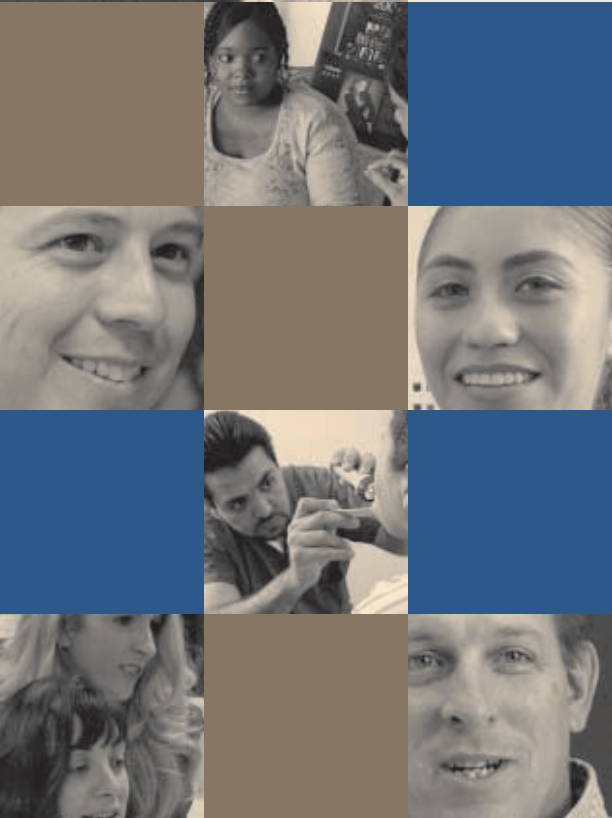




promoting access to care

Helping to Build Healthier Communities



unihealth foundation
2003 annual report

promoting access to care

Mission:

UniHealth Foundation is a non-profit public benefit corporation whose mission is to support and facilitate activities that significantly improve the health and well being of individuals and communities within its service area.

Values:

UniHealth Foundation is committed to:

Long Term Solutions —

Focusing on long term solutions to meet current and future health needs.

Innovation —

Being innovative in our approach to facilitating and financing health care programs and services.

Education and Prevention —

Promoting health education and preventative medicine.

Access —

Promoting access to a full range of ambulatory, acute care, sub-acute care and community based programs and services.

Partnerships —

Building partnerships with the nonprofit community.

Stewardship —

Preserving and building our charitable assets.

annual message

promoting access to care

One of six UniHealth Foundation core values, promoting access to a full range of ambulatory, sub-acute and acute care, and community-based health education, prevention and treatment programs is essential to building healthier communities. Every day, thousands of residents in UniHealth Foundation's service area find it difficult, if not impossible, to obtain the health care services they and their families need. Economic status, language and culture, absence of local service providers, lack of transportation, and being unaware of how to navigate a complicated healthcare system severely restrict access to health care.

Consider Manuela's story. A single mom of five young children, Manuela recently attended a dental screening being conducted at a local church as part of a UniHealth Foundation grant. The dentist found that her youngest child had a fever and an abscessed tooth, and said Manuela also need immediate attention. With no insurance and little ability to pay for services, Manuela had no idea how to arrange to see a dentist; however, she had the good fortune to happen onto the Community Dental Partnership, which you will read about later in this report. This program gave her access to care while helping her learn about and navigate our complex health care system. Many others aren't as lucky as Manuela was.

Accessing health care is a complex problem. Complex problems require innovative solutions, which UniHealth Foundation aims to identify, test and disseminate via grants such as those highlighted in this report. We believe that the interdependent continuum of care consisting of hospitals, community clinics and community-based organizations is essential to ensuring access to healthcare for our most vulnerable populations. The symbiotic relationship in which clinics provide a medical home and primary care services, hospitals provide emergency and acute care services, and community based organizations provide outreach, enrollment, education and prevention activities furthers the mission of each. The partnerships result in access to and utilization of appropriate levels of care as well as cost savings from inappropriate use of services. UniHealth Foundation continues to explore innovative ways to promote access to care and to engage our grantees in ongoing evaluations of both the near term and longer term impacts of our grantmaking.



David R. Carpenter
Chairman



Mary Odell
President

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5 year report

Report on the Organizational Period

December 4, 1998 — September 30, 2003

Upon its redesignation as a private grantmaking organization on December 4, 1998, UniHealth Foundation was granted a five-year organizational period generally accorded to newly created foundations for the purpose of resolving tailing business issues and ramping up grantmaking. September 30, 2003 marked the conclusion of this period, during which time the following activities were accomplished.

- The UniHealth Foundation Board of Directors engaged in extensive strategic planning around vision/mission/values and the grantmaking process. Halfway through the organizational period, they reflected on the grants made and published detailed strategic guidance for future grants.
- Foundation staff visited with management of every eligible hospital grantee and did extensive outreach to potential General Purpose Fund grantees, establishing valued relationships with our potential grantee community.
- Tailing business issues were fundamentally resolved.
- UniHealth Foundation exceeded the required charitable distribution for the organizational period.
- Foundation offices were relocated to downtown Los Angeles to facilitate our collaborative efforts.

Going forward, UniHealth Foundations Directors remain committed to diligent stewardship and to fulfilling the Foundation's charitable mission.



chinatown service center

Chinatown Service Center trains recent immigrants to provide physical care and domestic services for Chinese seniors and disabled adults so that they may remain in healthy, safe, caring and secure home environments.



great beginnings for black babies

Project Prevent Iron Deficiency Anemia Now, an activity of Great Beginnings for Black Babies, Inc., utilizes Community Health Outreach Workers who provide home-based nutritional education to reduce the prevalence of anemia in pregnant African American women.



los angeles child guidance clinic

Through its Building Blocks Program, the Los Angeles Child Guidance Clinic places therapists in Los Angeles Unified School District Early Education Centers to train teachers to recognize and manage emotional and behavioral problems for a target group of at-risk preschoolers.





Kaiser Permanente, CCLAC and L.A. Free Clinic personnel meet for joint strategic planning.

hospital-community clinic partnership project

Can hospitals and community clinics work together to increase access to healthcare services and improve health outcomes?

With UniHealth Foundation support, Kaiser Permanente, the Community Clinic Association of Los Angeles County, and Los Angeles Free Clinic came together to explore this question. One result of their activities is *Growing Resources for HealthCare in our Community*, the first comprehensive assessment of linkages and partnerships between hospitals and clinics in Los Angeles County. A survey of 92 hospitals and community clinics along with 37 in-depth interviews revealed that hospitals and clinics are engaged in a myriad of partnership activities that result in tremendous benefits to both the institutional partners and the communities they serve. In addition to defining partnership activities and the benefits accruing from them, the project identified factors for successful partnerships, including: senior leadership support; communication, cooperation and commitment; joint needs assessments and planning; and follow-through on partnership agreements.



hallmarks for success

creating and sustaining hospital-community clinic partnership hallmarks for success

- shared missions
- common geographic services areas
- joint strategic planning
- support from highest levels of leadership
- establishment of relationship of trust
- identification and acknowledgment of each partner's contribution
- fulfillment of partnership agreements
- ongoing communication
- participation on each other's boards
- evaluation of the impact of partnership activities



Glendale health care providers collaborate to preserve and expand the social safety net.



glendale adventist medical center

The Community Health Planning Consortium

The Los Angeles County healthcare crisis hit home for residents of Northeast Los Angeles and Glendale when county clinics closed, seriously restricting access to care for many under and uninsured residents. Unwilling to ignore the needs of their community, local safety net providers collaborated to develop a plan to coordinate and expand existing community health resources into a comprehensive and integrated health services delivery program for the underserved in Northeast Los Angeles and Glendale. With Glendale Adventist Medical Center acting as the lead agency and UniHealth Foundation support, the partners engaged in an intensive five-month strategic planning process. They developed a multi-faceted approach that included collaboration among health care providers for coordinated enrollment in insurance programs, case management of chronic disease, and expanded early detection and health promotion programs to be accomplished through use of coordinated and automated information systems technology.

The partnership envisioned increased access to primary, secondary and tertiary health care, increased enrollment in insurance programs, standardized models for chronic disease care, and ultimately better health outcomes for residents of Northeast Los Angeles County. The final comprehensive plan was submitted to the Health Resources and Services Administration (HRSA) in the form of a Community Access Program funding proposal, and the resulting \$1.2 million grant will be used to deliver comprehensive and integrated health services to underserved residents of Northeast Los Angeles County and Glendale.

Can information technology, clinical practice and decision support services developed by and for a hospital be adapted to a community clinic setting?

To answer this question, the partnership first assessed existing capacity at Los Angeles Free Clinic. Then, building upon this foundation, it has begun adapting the Kaiser model to implement a multi-level care management program for diabetic patients there. Using Kaiser Permanente's clinical guidelines, education materials and a disease registry computer program, Los Angeles Free Clinic is able to provide a continuum of care to reduce serious, preventable complications such as amputations and blindness. Accurate and thorough data becomes a powerful care management tool that promotes compliance with best practices. Patients learn about their disease and are supported in adhering to diet and medication regimes thereby improving their quality of life.



Information systems technology provided by Kaiser Permanente is adapted to support diabetes management at L.A. Free Clinic.





Dr. Dan Romo provides dental care at Eisner Pediatric and Family Medical Center.



In its current structure, the partnership provides three services essential to improving dental health outcomes: dental screenings; dental treatment; and care coordination. Clinicians from the Eisner community clinic conduct dental screenings at Bresee Foundation and at schools and churches that participate in California Hospital's Health Ministry Program. Care coordinators make appointments and do whatever it takes to help clients keep them. Children and families learn about dental health and how to access dental care in consumer classes conducted at both Bresee and California Hospital Health Ministry sites. Together, three service providers, each doing what it does best, are accomplishing more than any one could do alone and in the process are strengthening Los Angeles County's safety net.

The Community Dental Partnership

Take the hallmarks for successful hospital-community clinic partnerships, add to them the strengths of a community based social services organization, and you have the Community Dental Partnership. This active alliance is providing a continuum of dental care for residents of Central Los Angeles who have limited access to care. Building upon a foundation of shared mission and mutual respect resulting from a long history of cooperation, California Hospital Medical Center, Eisner Pediatric and Family Medical Center, and Bresee Foundation planned for over a year before formalizing the partnership and approaching UniHealth Foundation for support. The current implementation is the result of a one-year pilot phase, during which each partner's responsibilities were clearly defined and the model was tested, modified and standardized.



Bresee Foundation staff and California Hospital Medical Center parish nurses help residents access dental care and dental health education.

grants awarded from the general purpose fund

Agency	Purpose	Amount
Children's Dental Health Clinic	For expansion of services at the Hillside Clinic in Long Beach	\$ 45,000
Chinatown Service Center	To support the In-House Services Training Program	\$ 50,000 over 18 months
Grantmakers In Health	For the Support Center for Health Funders	\$ 10,000
Great Beginnings for Black Babies, Inc.	To support the Prevent Iron Deficiency Anemia Now Program	\$ 35,000
Human Interaction Research Institute	For the 2003 Los Angeles Nonprofit Capacity Building Resources Directory	\$ 1,500
Los Angeles Child Guidance Clinic	For Building Blocks: A Preschool-Based Early Intervention Program	\$ 10,000
National Multiple Sclerosis Society	For expansion of support services at affiliated Multiple Sclerosis Clinics	\$ 36,684
Southern California Association for Philanthropy	Membership	\$ 7,500
Students Run LA	To support physical training and mentoring for Los Angeles middle and high school students to prepare them for the City of Los Angeles Marathon	\$ 10,000
The Wellness Community—South Bay Cities	To provide psychosocial support for cancer patients and their families	\$ 35,000
The Wellness Community—West Los Angeles	To develop curriculum for clinicians about the psychological, emotional, and social issues of cancer patients and their families and self-care issues for the professional caregiver	\$ 50,000
VNACare	For the purchase and implementation of the Clinical Operating and Billing System	\$ 150,000 over 18 months
Various Nonprofit Agencies	Grants matching charitable giving by directors and staff	\$ 20,000

unihealth foundation—Fiscal Year October 1, 2002 -September 30, 2003

grants awarded from the hospital fund

Hospital	Purpose	Amount
California Hospital Medical Center	To support the Community Dental Partnership in collaboration with Eisner Pediatric and Family Medical Center and Bresee Foundation	\$ 525,000 over 22 months
CaliforniaKids Healthcare Foundation	To provide 250 uninsured children in Orange County access to preventive and primary health care coverage	\$ 100,000
Charles R. Drew University at King/Drew Medical Center	To support the South Central Los Angeles Health Care Alliance in partnership with St. John's Well Child Clinic	\$ 362,635 over 10 months
David Geffen School of Medicine at UCLA	For a needs-based medical student scholarship	\$ 34,000
Glendale Adventist Medical Center	To support a strategic planning process among safety net providers to develop and strengthen health care for the uninsured and underinsured	\$ 50,000 over 5 months
Los Angeles Orthopaedic Hospital	To support increased awareness among consumers and healthcare professionals regarding the availability of newer treatments in cerebral palsy	\$ 27,608
Miller Children's Hospital	To support the Miller Children's Abuse and Violence Intervention Center's School and Clinic Based Programs	\$ 180,000
Shriners Hospitals for Children	For the Comprehensive Burn Reconstruction Program	\$ 30,000
St. Jude Medical Center	To support the Nursing Residency Program	\$ 295,210 over 24 months
St. Mary Medical Center	To support the Foreign Nurses Training Pilot Program	\$ 73,328
Torrance Memorial Medical Center	For maintenance of equipment and training for the Public Access Defibrillation Program	\$ 80,000 over 24 months
UCLA Healthcare	To support the development of a comprehensive list of quality indicators to evaluate and improve care for patients undergoing abdominal/bowel surgery	\$ 485,777 over 30 months
USC Keck School of Medicine	For a needs-based medical student scholarship	\$ 34,000
Valley Presbyterian Hospital	To support the Stroke Prevention and Management Program in partnership with OneGeneration	\$ 217,034 over 18 months
White Memorial Medical Center	For the Nursing Careers Programs in partnership with TELACU Education Foundation and Rio Hondo College	\$ 450,000 over 24 months
Various Hospitals in Los Angeles and Orange Counties	Grants matching charitable giving by directors and staff	\$ 5,000

unihealth foundation—Fiscal Year October 1, 2002 -September 30, 2003

Combined Statements of Activities For the years ended September 30, 2003 and 2002

REVENUES	2003	2002
Continuing operations:		
Investment income	\$ 6,558,000	\$ 6,780,000
Change in estimated allowances for losses and liabilities related to disposition of discontinued operations	247,000	1,348,000
Other income	107,000	1,003,000
Total revenues	6,912,000	9,131,000
COSTS AND EXPENSES		
Grant expense	3,365,000	5,209,000
General and administrative expenses	3,058,000	3,897,000
Depreciation and amortization	20,000	29,000
Realized loss on sale of marketable securities	13,054,000	1,827,000
Total costs and expenses	19,497,000	10,962,000
Loss from continuing operations	(12,585,000)	(1,831,000)
Discontinued operations:		
Income from discontinued operations	2,454,000	496,000
Change in estimated allowances for losses and liabilities related to disposition of discontinued operations	50,000	359,000
Total discontinued operations	2,504,000	855,000
Net loss	(10,081,000)	(976,000)
Other changes in net assets:		
Net unrealized gain/(loss) on marketable securities	44,660,000	(16,577,000)
Loss reimbursement	—	11,896,000
Change in net assets	34,579,000	(5,657,000)
NET ASSETS, beginning of year	258,158,000	263,815,000
NET ASSETS, end of year	\$ 292,737,000	\$ 258,158,000

Combined Statements of Financial Position As of September 30, 2003 and 2002

ASSETS	2003	2002
Current assets:		
Cash and cash equivalents	\$ 11,780,000	\$ 12,349,000
Marketable securities	265,765,000	218,685,000
Loss reimbursement receivable	—	11,896,000
Other receivables	764,000	1,339,000
Other assets	41,000	29,000
Current assets of discontinued operations	21,874,000	21,681,000
Total current assets	300,224,000	265,979,000
Property, plant and equipment, net	74,000	94,000
Noncurrent assets of discontinued operations	8,946,000	7,425,000
Total assets	\$ 309,244,000	\$ 273,498,000
LIABILITIES AND NET ASSETS		
Current liabilities:		
Accounts payable and accrued expenses	\$ 2,987,000	\$ 318,000
Liabilities of discontinued operations	10,857,000	11,647,000
Total current liabilities	13,844,000	11,965,000
Long-term liabilities	2,663,000	3,375,000
Total liabilities	16,507,000	15,340,000
Unrestricted net assets	292,737,000	258,158,000
Total liabilities and net assets	\$ 309,244,000	\$ 273,498,000

application procedure

UniHealth Foundation Welcomes Your Inquiries

Applicants should submit a preliminary letter of introduction that includes a brief description of the organization, the project, the geographic area and population served, the amount requested and a copy of the agency's IRS exemption letter. No application form is needed at this preliminary stage. The Foundation's program staff will screen preliminary letters and advise the applicant of the results of this review. Those qualified to submit a proposal will receive detailed information from program staff.

A grant proposal is a request for funding and not a guarantee of an award. Unfortunately, not every worthy request can be funded; however, UniHealth Foundation will give serious consideration to each qualified application.

please address correspondence to:

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 800 Wilshire Blvd., Suite 1300
 Los Angeles, CA 90017

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