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Since its inception more than 140 years ago, Children’s National Medical Center has had one goal: to provide world-class pediatric care to each and every child in our community without regard to socioeconomic status. As the nation’s children’s hospital, we see our community as wide spread and far reaching. Whether our efforts focus on one of our key CARE pillars —clinical care, advocacy, research, and education—and whether that work is done in the hospital, a pediatric community health center, a mobile unit, one of our regional outpatient centers, or via an international partnership, we are dedicated to being innovators in primary and preventative care and the development and delivery of treatment for childhood illness and injury.

Through the stories and descriptions in this report, we offer a glimpse of how our dedicated faculty and staff interact and engage with our community to provide care and to support patients and families in unique ways. These dedicated individuals offer assistance to families, therapy and treatment to children, and continuing educational opportunities to medical students—all to ensure that our communities benefit from the best possible pediatric care today and in the future.

You will read about the inroads we’re making in child burn prevention and you will be introduced to a collaborative project in schools that combines science, art, and health education in innovative and creative ways. You will learn that “teens rule” in three of our innovative—and popular—Adolescent Prevention Education Programs, and you will see that after working in our clinical training programs, college students often discover they like treating little patients much better than big ones!

At Children’s National, our internationally recognized team of pediatric professionals performs more than 360,000 patient visits annually, and provides more than 110 million in community benefit dollars. We are grateful and humbled by every opportunity to meet our community’s needs, and remain committed to doing the same for generations to come.

We are pleased to share this information, and hope you will share our excitement about how these programs work to engender the best health care for all those in need. For us, being integrated into our community means doing our best to care for all those around us with creative, evidence-based programming.
## Community Investment

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<td>Research</td>
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TOTAL COMMUNITY BENEFIT

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Community Health Initiative

In 2009, Children’s National Medical Center commissioned the RAND Corporation to conduct an extensive pediatric community health needs assessment for the District of Columbia. The study evaluated the health status of more than 100,000 District of Columbia youth and the health care services available to them.

The findings revealed serious and unmet needs among the city’s pediatric population. The study exposed an uneven and fragmented delivery system, and underscored the need for broadly inclusive partnerships across agencies, providers and the local government. In response, Children’s National, the District of Columbia Department of Health and DC Primary Care Association quickly acted to address these issues as a city, and invited a broad cross section of stakeholders to help prioritize and tackle the most pressing problems.

What resulted was a series of Citywide Pediatric Health Forums held throughout 2010 and the first half of 2011. With nearly 100 individuals from more than 40 organizations participating, seven key pediatric health indicators were identified:

- Asthma;
- Injury prevention/violence;
- Mental health (developmental delays and substance abuse);
- Obesity/overweight;
- Oral health;
- Sexual reproductive health (STIs, Teen pregnancy, HIV), and
- Systematic issues/built environment

To date, preliminary strategies have been developed to address each indicator. Through 2011 the group will work to devise appropriate metrics, and develop a realistic, yet aggressive timeline for implementation. The group will also identify additional agencies or entities to invite on board as collaborators in this initiative. Children’s National and its partners look forward to launching a comprehensive Community Health Action Plan in winter 2011.

Children’s National invited a broad cross section of stakeholders to help prioritize and tackle the most pressing problems.
The need for burn prevention education is well recognized nationally; and the database of burn patients treated at Children’s National confirms the need in our region. To begin addressing this need, the hospital’s Trauma and Burn Service team conducted research aimed at identifying the neighborhoods and communities in Washington, DC with the highest number of burn related incidents. After research was completed, prevention efforts were systematically targeted to those areas. By June 2010, 1,465 families had been reached with burn prevention information packets developed by the hospital’s public relations and marketing department.

According to Sally Wilson, RN, Education, Prevention and Outreach Coordinator for the Trauma and Burn Service, data collection was critical to identifying the scope of the problem and shaping the response. "The geographic mapping and epidemiological profile of our burn patients allowed us to tailor programs to the specific needs and concerns of our most critical neighborhoods and groups."

Wilson and her team worked with injury prevention coalitions and other community-based organizations, as well as the media and civic groups in their efforts to educate the public about the problem and share safety messages. She found that, “few knew even the simplest tips for preventing injuries, like scalds and contact burns, in children.”

To Theresa M. Shivers at the DC Office of Child and Family Development Head Start & Early Head Start Program, one of the organizations that benefited from the hospital’s Burn Prevention Outreach training, education is the most effective tool in eradicating preventable burn injuries. “When agencies and organizations lock arms and empower one another with information, they can really make a difference. The education we received from the Burn Prevention Outreach program helped us to make sure everyone involved – from our Head Start center staff to the families and children who get care in their homes – were knowledgeable about preventing burns.”

Funding for this initiative was obtained in collaboration with the Child Health Advocacy Institute (CHAI), and provided by a DC Department of Health grant and a generous donation from the DC Firefighters Burn Foundation.

For more information about the Burn Prevention Outreach Program, visit www.ChildrensNational.org/burnsafety or contact Sally Wilson at slwilson@childrensnational.org or 202-476-4090.

Safety First: Burn Prevention Outreach

Burns can be one of the most traumatic and debilitating injuries for children. Each year, the Trauma and Burn Service at Children’s National admits more than 200 children, and counts another 2,000 outpatient visits.
Hands-On Clinical Training

Chances are when students contemplate a career in radiology or ultrasound technology, they may not have considered sub-specializing in pediatric care within that field.

Children’s Clinical Site Training Program offers college and university students majoring in these technologies, an opportunity to gain experience in conducting pediatric ultrasound and radiography.

The program, offered for Prince George’s Community College, George Washington University, and Montgomery Community College School students, provides clinical and supervised training and scanning opportunities conducted in a real-world hospital environment.

The program provided Emmit Seneff, a student at Montgomery Community College and a 2010 participant in the Clinical Site Training Program, with hands-on training with a specific patient population. “I hadn’t really thought of working solely with children, but having spent time with this population through the training program, I’m really interested in pursuing it. I can see how I could positively affect kids during what can be a scary experience.” For Seneff, that’s something you can’t learn in a classroom. Being on-site is the “meat and potatoes” of any medical training, and is the true benefit of this program.

The Clinical Site Training prepares students to work with a unique population, and helps to ensure that there are more qualified health professionals ready to serve our communities. Sixty-three students completed this training in 2010.

To learn more about the Clinical Site Training Program, contact: Laurie Hogan, Radiology Director at 202-476-6279.
Promoting *Healthy and Safe Teens*

At Children’s National Medical Center, a young person who enters our doors as a patient has the opportunity to leave as a teacher, mentor, and leader in the fight against two problems that plague a generation – teen pregnancy and HIV/AIDS.

Everyday, Children’s National is empowering teens to make smart choices for themselves, and to teach others to do the same. Through peer education, the hospital’s Adolescent Prevention Programs made a difference in the lives of more than 3,000 youth living in Washington, DC last year.

**Teens Against the Spread of AIDS (TASA)** promotes abstinence, condom use, and HIV testing not only through pamphlets and brochures, but also with theater, hip-hop and poetry. This creative approach to adolescent education prompted the DC Health Department to ask TASA to lead a city wide campaign called Youth Educated about Safer Sex (YESS). In 2010, TASA performed at 17 community events, reached 1,082 youth with HIV prevention information, distributed 374 condoms, and provided 313 safer sex kits.

Where TASA uses the power of performance to educate, **Today’s New Teens (TNT)** relies on dialogue and conversation. In a series of three workshops co-facilitated by TASA peer educators, TNT focuses on helping teens develop the insight, knowledge, and communication skills necessary to make sexually responsible choices. The workshops increase awareness of abstinence and condom negotiation as viable options for youth. Like TASA, this program is a proven success. In fact, an analysis of pre- and post-intervention data consistently shows a marked improvement in participant knowledge with regard to sex, abstinence, and STD prevention.

Adam Middleton, a teen peer educator who has participated in TASA and TNT, can attest to the unique benefits for the educator...
and participant, “Children’s Adolescent Medicine staff members do such a great job training us, and we are so confident in what we’ve learned that we have instant credibility with our peers. The other kids respect us, and because we’re their age, they tend to listen. That’s true whether we are in group discussions or reciting a poem, monologue, or rap.”

A third program, Teen Life Clubs (TLC), targets DC area adolescents ages 11-14, and helps them develop the necessary goals, strengths, and confidence needed to make safe and responsible decisions in preventing pregnancy and HIV infection. TLC also promotes character-building activities with college tours and story-telling projects, and fosters healthy peer and adult interactions by hosting physician and/or nurse consultations, family events, and goal-setting retreats. Financial literacy, decision-making skills, violence prevention messages, career exploration, communication skills, and family-centered care are introduced within the larger context of safe health behaviors and comprehensive sex education. Of the 80 youth participating in the program during the 2009-2010 school year, 87 percent reported delaying all sexual activity; of those who reported being sexually active, all reported increased condom use and either maintained or reduced their number of sexual partners.

To learn more about any of the Adolescent Prevention Education Programs described above, visit www.ChildrensNational.org/apep or call 202-476-6018.

“TASA is more than a peer education program – it’s a student movement – we not only train high school students to be health educators, but student leaders as well. What makes our program a cut above the rest is that we’re attached to a medical institution and we use youth in unique ways, like as trainers for adolescent providers.”

– Maranda Ward, TASA Program Manager
Careers in Health:  
*Summer Internship for Pre-Med College Students*

There is no substitute for hands-on learning, particularly in the study of medicine. The Summer Internship for pre-med students at Children’s National offers seven students a 10-week internship centered on pediatric medicine.

Through this opportunity, coordinated by the Trauma and Burn Service, interns are given valuable access to several surgical departments including Trauma, Orthopaedics, Neurosurgery, and General Surgery.

In 10 weeks, the program leverages the expertise and resources of the hospital to provide students with training and experience in clinical research, as well as opportunities to observe patient care and benefit from valuable mentorship by attending physicians. For Alex Rosen, a graduate of Princeton University and a 2010 intern, the benefits of the internship experience were unmistakably invaluable.

Rosen’s experience exemplifies the goals of the program: to expose college students to the medical field and connect them with faculty mentors, while encouraging the pursuit of medical training in a pediatric specialty, a field that suffers from a shortage of specialists.

To learn more about the Summer Internship for Pre-Med Students, contact Sally Wilson, slwilson@childrensnational.org or 202-476-4090.

“We shadowed physicians in the various clinics as they saw patients, spent time in the operating room, and in weekly surgical faculty meetings – which was not only interesting but extremely helpful in applying what we learned in the classroom. Also, the clinical research component was important in that we could devote 10 weeks to one particular project, and spend time researching that area with support from top experts in the field.”

– Alex Rosen, Summer Pre-Med Intern
A Unique Approach
to Health and Science Education

A holistic health model aims at serving all areas of a child’s development, including those that can be impacted by the surrounding community. The “Being Me” initiative is a Science Education Partnership Award (SEPA) Program that uses this integrative approach to building a child’s physical, cognitive, and social skills, while supporting collaborative learning and participation from families, friends, and teachers.

The goal: to employ hands-on, inquiry-based learning, and to promote awareness of health-related issues by blending science and art.

“Being Me” was piloted last year in two urban school systems with mostly lower-income, minority, and immigrant students – a demographic with related disparities in both access to health care and health outcomes. The program, supported by the National Science Content Standards, uses an art-based, science curriculum around five conditions or issues: asthma, obesity, sleep, bullying, and sickle cell disease. However, the true innovation is the program’s goal to make children creative experts in understanding the scientific process in terms of their own health and well-being. “Being Me” includes instruction with students and also involves parents and health aids through Family Learning Events and a special summer science camp experience. Teachers benefit from regular targeted professional development in both clinical and research settings.

“Being Me” is a partnership between Children’s National Medical Center, the National Children’s Museum, and George Washington University School of Education. Mark Thorne, Director of the National Children’s Museum Without Walls, sees the benefit of this novel effort: “The program is so important because it reaches children and families in underserved communities with the basics of science and health, while allowing for creativity through art. Importantly, it also educates families – and teachers – about those health disparities that tend to hit our communities hardest.”

Program developers anticipate a full roll-out in 2013. To learn more about the Being Me Science Education Award Program, contact: Camilla Colvin, ccolvin@childrensnational.org.
Supporting Our Families

Often low-income families are unaware of the numerous health resources available within their community. Research shows that unmet social needs, particularly in at-risk populations, can adversely affect health outcomes.

By serving as an in-clinic referral service for patients and their families, the Family Help Desk, part of the hospital’s Community Health Improvement Advocacy Program, connects families with the social resources necessary to maintain a healthy household. Through this program, physicians are able to direct families who need assistance with such issues as employment, food, or housing, to trained volunteers ready to help.

Volunteers are an essential component of the success of this program. By June of 2010, 79 volunteers were trained, and were working with families to meet their needs. Each case is recorded in the patient’s medical record, enabling the child’s physician to remain informed regarding the progress of the case. To assist volunteers in identifying applicable resources, the program has also implemented a new electronic database that manages the listing of social resources available in the greater Washington, DC area. The Family Help Desk, a program run by Health Leads, a nonprofit partner organization of the Goldberg Center, has currently served approximately 660 families.

LaToya M. White, Executive Director of Health Leads, speaks to the importance of this program saying, “Our goal is to make it easy for families to navigate all the resources available to them; we believe it should not be complicated to get the things you need. For our undergraduate volunteers, they gain hands-on experience that goes well beyond classroom learning. They meet real families, service real needs, and interact with community service providers. It is an experience they carry with them into their careers.”

More information can be obtained about the Family Help Desk by contacting Nicole Dunifon: ndunifon@cnmc.org; 202-476-2363

“(My family was) in a shelter without any resources when my kid’s doctor referred me to the Family Help Desk. It’s been wonderful! They helped me find childcare and gave me job leads so I could begin to improve the situation for me and my children. Now that I have childcare, I am able to take part in a job training program that I’m hoping will lead to a full time job and career.”

Tramaine Fauntroy, mother and Family Help Desk client.
Community Benefit Programs and Partners

The following Children’s National Medical Center programs and activities provided more than $50 million in community benefit in fiscal year 2010, including those highlighted in the report:

- Advanced Professional Practice Experience
- Burn Camp for Pediatric Burn Survivors
- Burn Prevention Training for Community Members
- Car Seat Inspection Station
- Children’s Health Project of DC
- Children’s School Services School Health Nursing Program
- Clinical Education for Nurse Practitioner Student
- Clinic Informatics Summer Internship
- Community Benefit Operations
- Community Health Education Program
- Community Workforce Development Rotations
- Congenital Heart Disease Screening Program
- Emergency Medical Services for Children (EMSC) National Resource Center (NRC)
- Generations Clinic
- Health Professions Education
- Healthy Start Healthy Families
- Injury Prevention Coalition
- It’s Wise to Immunize Backpack Campaign
- It’s Wise to Immunize Family Fun Day
- It’s Wise to Immunize Hotline
- La Feria de la Familia
- Lab Health Professionals Rotation
- Law and Health Education Workshops
- Liaison, Dimensions Program, Cornell College
- National Youth Leadership Forum
- NBC 4 Health and Fitness Expo
- Occupational Therapy Student Fieldwork Program
- Physical Therapy Student Affiliation Program
- Primary Care provided at Children’s Health Centers
- Research Projects – Center for Clinical and Community Research
- Sickle Cell Art Speaks Day
- Sickle Cell Awareness Day
- Sickle Cell Summer Camp
- Sound Mind Sound Body Camp
- Special Supplemental Nutrition Program for Women, Infants, and Children (WIC)
- Stomp Out Sickle Cell 2009 Walk-A-Thon

PARTNERS INCLUDE:
- Advisory Neighborhood Commissioners (ANC’s)
- Art With a Heart
- Boston University
- Boys and Girls Club of Greater Washington, FBR Branch
- Catholic University
- Children’s Law Center
- Community of Hope
- Connecticut Burns Foundation
- Cornell College
- District of Columbia Department Health
- District of Columbia Department of Transportation
- District of Columbia Fire and Emergency Medical Services
- District of Columbia Fire Fighters Burn Foundation
- Duke University
- Faces of Our Children
- Florida Avenue Baptist Church
- Georgetown University Sickle Cell Program
- Howard University
- Howard University Center for Sickle Cell
- Lifting As We Climb Foundation, Inc.
- Marymount University
- Mary’s Center
- National Institutes of Health (NIH)
- Poison Control Center
- Sickle Cell Association of National Capital Area
- Telemundo
- Washington Area Bicyclist Association
- Washington Hospital Center
- W.E. Proudford Foundation
Special Events *at Children’s National*
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Chairman of the Board  
Children’s National Medical Center

Terry Cornwell Rumsey  
Chairman of the Board  
Children’s Hospital

Richard W. Snowdon, III  
Past Chairman of the Board  
Children’s National Medical Center

Kurt Newman, MD  
President and Chief  
Executive Officer

Jacqueline D. Bowens  
Executive Vice President and Chief Government and External Affairs Officer

Joseph L. Wright, MD, MPH  
Senior Vice President, Child Health Advocacy Institute

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