

MESSAGE

from Edwin K. Zechman, Jr.

President and Chief Executive Officer



For 140 years, Children's National Medical Center has responded to the needs of the community by providing world-class pediatric care. Whether it is in the main hospital, a pediatric community health center, on our mobile units, or one of seven regional outpatient centers, taking care of the those in need, particularly the most vulnerable, is a part of our history and proud tradition.

This report provides an in-depth look at our programs that provide community benefit, and improve the health of children across the city, our region, and nation. You will read about successful collaborative efforts, such as the injury prevention coalition, studies that examine delivery and utilization of primary care services, and the effects of exposure to violence. You also will learn about promising early detection research, such as the congenital heart disease screening program, designed to uncover heart problems in the first hours of a child's life.

Thanks to the generosity of more than 5,000 employees, our commitment to the community extends far and wide as they save and change lives where they work and live. Our health professions education program also extends our mission beyond the hospital walls as we prepare physicians and other health professionals to care for children in communities large and small.

We are proud to report that in 2009, Children's National provided more than \$85 million in overall funding for community benefit. Through the programs covered in this report, the work of the medical center, and our many partners, Children's is poised to advance the health and well-being of children and the community for another 140 years.

Our COMMUNITY

OUR COMMUNITY

Anyone who enters any Children's National Medical Center facility will experience our promise to care for all who entrust the hospital, its health centers, outpatient facilities, all the care team members, and support staff with their wellbeing. This promise is at the heart of every treatment plan, research study, program, and service. This promise is also why Children's National advocates on behalf of all families, especially in the face of spiraling costs and unfunded care. This promise is the mission of Children's National – it lives in every patient we touch; and in every community we serve.

The hospital's presence in the nation's capital and its strong leadership position in pediatric health, gives it unparalleled access to and influence with public and private partners, change agents, and policy-makers committed to improving children's health and health care. Whether it is setting standards for clinical excellence or championing the need for preventive care, Children's National is proud to be the voice for the community, now and in the future.



natural disasters. The spirit of caring and our famous can-do attitude carry beyond the walls of Children's National into our community — down the street, across the ocean, and around the world.

MANY FACES - ONE COMMUNITY

The Children's National community is large and diverse. Recognized as the nation's children's hospital, Children's National sees itself as an integral part of a community that stretches across the nation and yet, still touches patients and families through its care. In addition to the families for whom we care, our community also includes employees, legislators, emergency responders, community partners, community organizers, educators, and volunteers - many of them from the Washington DC region, but many located around the country and world. Locally, our employees more than 5,000 physicians, nurses, clinical care team members, and support staff — care for patients day and night, and then, as stewards and active participants in the community, provide thousands of volunteer hours in the community. Our employees also volunteer around the world, helping those less fortunate or those who have experienced

UNDERSTANDING COMMUNITY NEEDS

The hospital's mission, its standing as the exclusive provider of pediatric care in the Washington metropolitan area, and its regional and national prominence continue to compel Children's National to do more to address current and future health problems that threaten communities. Children's National is an active participant and partner, as it engages community leaders, both elected and grassroots, in its causes. Partnerships with District government agencies, federal agencies, and community organizations provide important opportunities to spot trends, identify gaps in services, share best practices, and create systems of accountability. These connections to the community, together with clinical evidence gathered through research and patient care, enable the hospital to stay current and proactive in its strategies aimed at identifying and meeting pressing community health needs.

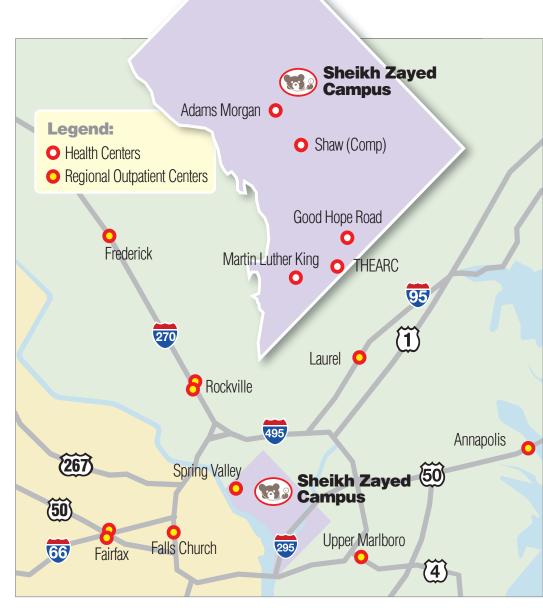
At one point during my child's illness, she was being seen by a total of 12 specialists! It was overwhelming, even with my five-inch notebook to keep it all organized. Then a resident referred me to the Complex Care Program that helps families coordinate care when they have multiple providers. It's been wonderful. The coordinator makes sure films, charts, referrals, and other important items are received and shared between providers. And for the families, who are juggling so many balls at once, they make sure none of them are dropped in the process. The Complex Care Program quite simply brings families peace of mind, and a confidence that comes when you know that someone understands and is working to make sure your child's unique healthcare needs are met.

TjaMeika Purnell

Parent and Parent Navigator

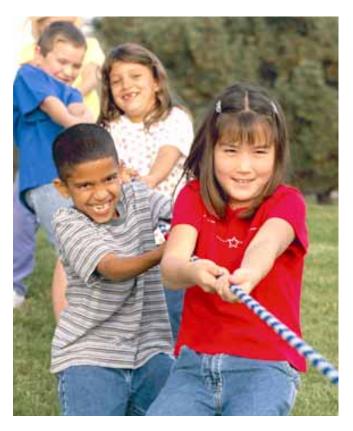
FAMILY CENTERED CARE

Families and patient support networks are central to Children's National's ability to fulfill its mission to the community. Patient/Family-centered care is at the core of how Children's National provides care. It calls for a partnership between healthcare providers and families that is based on mutual respect and dignity, information sharing, participation, and collaboration. Many times that trust is built when families bring their child to the Emergency Department. Family input in an emergency is critical to a speedy diagnosis, appropriate treatment plan, and recovery. Trust also is cultivated before there is an emergency. It forms through regular interaction with Children's National in its community health centers, regional outpatient centers, or on its mobile units. Even beyond the walls of its facilities, Children's National is in touch with families through programs centered at recreation centers, churches, and through the hospitals' school nurse program, now in 164 District of Columbia public schools.



FINANCIAL HIGHLIGHTS

n fiscal year 2009, Children's National Medical Center provided more than \$85 million in overall community benefit, including more than \$50 million in uncompensated care and \$35 million in the community benefit categories² outlined below:



COMMUNITY HEALTH IMPROVEMENT SERVICES

This category includes activities carried out to improve community health that are usually subsidized by Children's National. Such services do not generate inpatient bills, although they may involve a nominal patient fee and/or sliding scale fee. These services include community health education, community-based clinical services, and healthcare support services.

Community benefit: \$17,064,961

FINANCIAL CONTRIBUTIONS

Financial contributions include funds and in-kind services donated to individuals and/or the community at large.

Community benefit: \$48,086

HEALTH PROFESSIONS EDUCATION

The difference between cost and reimbursements incurred in providing education in clinical settings, internships, and programs for physicians, nurses, and health professionals is considered a community benefit. This category also refers to scholarships for health professions education.

Community benefit: \$8,700,930

COMMUNITY-BUILDING ACTIVITIES

Programs that are not directly related to health care, but provide opportunities to address the root causes of health problems, such as poverty, homelessness, and environmental problems, are considered community-building activities. These activities support community assets by offering the expertise and resources of Children's National. Costs for these activities include cash donations, in-kind donations, and budgeted expenditures for developing community health programs and partnerships. Community-building activities include physical improvement initiatives, economic development, health community initiatives, partnerships, and community leadership skills training.

Community benefit: \$136,335

COMMUNITY BENEFIT OPERATIONS

Costs associated with dedicated staff, community health needs and/or asset assessments, and other costs associated with community benefit strategy and operations fall into this category.

Community benefit: \$684,272

RESEARCH

Clinical and community health research, as well as studies on healthcare delivery that are shared with others outside the organization fall into this category. Issues related to reducing health disparities and preventable illness are a priority.

Community benefit: \$1,746,069

SUBSIDIZED HEALTH SERVICES

Clinical services that are provided despite a financial loss are categorized as subsidized health services. The service is provided because it meets an identified community need and if not offered, it would not be available in the area or fall to the responsibility of the government or another not-for-profit organization to provide. Services may include emergency and trauma services, neonatal intensive care, hospital outpatient services, burn units, inpatient and behavioral health services, and special programs to address patients' palliative care needs.

Community benefit: \$9,372,171

COMMUNITY BENEFIT

Total Community Benefit for Fiscal Year 2009	\$88,118,760
Uncompensated care	\$50,365,936
Health professions education	\$8,700,930
Community health services	\$17,064,961
Community benefit operations	\$684,272
Community-building activities	\$136,335
Research	\$1,746,069
Subsidized Health Services	\$9,372,171
In-Kind and Financial contributions	\$48,086

¹ Community benefit numbers have been rounded up to the nearest 100th.



² Categories adapted from Catholic Health Association (2006).

A Guide for Planning and Reporting Community Benefit.

PROGRAM

Highlights

HEALTHY START/HEALTHY FAMILIES

Numerous studies show that with proper resources and early interventions, disadvantaged children can avoid behavioral, academic, and social problems that are linked to poverty. These children can go on to succeed and lead healthy and productive lives. Children's National Healthy Start/Healthy Families program offers health education and life skills directly in the homes of high-risk families — families that are often overburdened and in desperate need of support.

Children's National staff members identify families through referrals from community programs and providers, as well as from departments within Children's. They work with families on a range of issues from basic infant and child care, to parenting skills, and goal setting. Through intensive, long-term visits, Children's staff members also assess the need for immunizations, medical care, or prenatal visits.

Unfortunately, a lot of people just don't know there's help...help for first-time or young parents, families living with other families, or maybe families just leaving a shelter. Clients will tell us that we are the only support system they have, and that the praise we give them for handling a situation well or accomplishing a task is the only praise they've ever gotten. Although it can be difficult to watch a family struggle, the reward comes when situations begin to improve or their baby begins to grow and blossom. That's when you know you've just made a huge difference in someone's life.

Lakisha Owens

Program Manager, Healthy Start/Healthy Families

Additionally, they look for, and help families address signs of child abuse and/or neglect, depression, or violence.

The Healthy Start/Healthy Families program is the result of a long and successful partnership with Mary's Center for Maternal and Child Health in Northwest Washington, DC. Mary's Center provides expert technical assistance, help with soliciting financial and other program resources, staff training, and mental health services. Similarly, alliances with organizations and agencies throughout the city enable Children's to make referrals to other community resources. Last year, Healthy Start/Healthy Families served more than 100 families, improving outcomes for hundreds of children in the quality of their home lives, in school readiness, healthy birth weights, and lowered incidence of developmental delays.

HEALTH PROFESSIONS EDUCATION

Children's National invests in the health and well-being of all children by preparing future leaders in child health through its education and training programs. A world class pediatric academic center, Children's National offers new and experienced health professionals countless opportunities for learning and growth.

Children's National is the Pediatrics Department of George Washington University School of Medicine and Health Sciences. The hospital is a premier facility for medical education and offers stimulating electives and internships across a variety of disciplines. Last year, Children's National trained nearly 200 residents through its Graduate Medical Education program, which includes general pediatrics and training in subspecialty care. The hospital's program boasts advanced training in 20 specialties, along with a selection of extensive research, workshop, and conference offerings.

Children's National also offers regular, continuing education for experienced physicians, nurses, technicians, and other healthcare professionals. This commitment to professional development and education makes Children's National an ideal place to learn and care for patients.



WHEATON HIGH "MOCK LAB"

Low-income and rural communities are already feeling the effects of a national doctor shortage that is likely to worsen as "Baby Boomers" age — requiring more elder care — and as reforms in health care extend insurance to millions. The American Association of Medical Colleges predicts that the United States will face a shortage of at least 125,000 physicians by the year 2025. Nationally, a number of state and private efforts are underway to enroll more students into medical school. In the Washington metropolitan area, Children's National is doing its part to keep students excited about science and medicine through a special program that invites them into the hospital to participate in what is called "Mock Lab."

In partnership with Wheaton High School, the "Mock Lab" allows a student to turn knowledge into skill as he or she observes up-to-date equipment in an actual laboratory setting. Experienced staff members guide students through a series of lectures and experiments using scenarios and samples that mirror the work they might undertake in a medical technology program. Upon completion, newly motivated students earn high school biology credit and, hopefully, turn their sights toward a career in medicine.

INJURY PREVENTION COALITION AND CAR SEAT INSPECTION

Growing up, most children experience their fair share of scrapes, bumps, and bruises. Some result in a trip to the emergency department, while others just a trip to the medicine cabinet for antiseptic and a Band-Aid™. However, serious injuries, such as broken bones, accidental poisonings, and head traumas can change a young life forever. The Injury Prevention Coalition at Children's National is dedicated to making sure families know how to prevent all injuries, large and small.

Together with the local Poison Control Center, Metropolitan Police Department, Fire and EMS, Washington Area Bicyclist Association, and other community groups, the coalition routinely takes workshops and demonstrations on the road to events in neighborhoods across the city. The coalition teaches residents how to keep kids safe whether they are riding a bike, walking to school, or crossing the street. They also offer interactive sessions on fire safety, poison prevention, youth violence, and child passenger safety.

According to the National Highway Traffic Safety Administration, motor vehicle crashes are the leading cause of death for children ages 3 to 6 and 8 to 14, and yet 3 out of 4 parents do not correctly use seat-belts and other child restraints. To protect young passengers, Children's National provides a free neighborhood Car Seat Education and Inspection Station to check that seats are correctly installed, and to teach parents and caregivers how to install them properly. Trained technicians provide a one-on-one tutorial and parents are encouraged to practice installation to make sure they have got it right before leaving the station. Through 17 events last year, the coalition helped more than 80 families. Results of pre- and post-testing show an increase in knowledge of proper seat installation and restraint information after participation in the educational sessions. Moreover, an impressive 95 percent of participants

report that the education is beneficial; 93 percent say they learned new information; and the majority says they feel more confident and skilled in installing their child's safety seat.

Children's National and the Injury Prevention Coalition look forward to sharing this life-saving information with more families in the years to come. The goal is to decrease the number of unintentional and intentional injuries and make communities safer for children — one family at a time.

Sylvia Perkins-Swain, a certified child passenger safety technician educates families about child passenger safety in the Emergency Department waiting room, community health centers, and at THEARC. Marcee White, MD, calls Sylvia a lifesaver. Sylvia originally installed an infant car seat in Dr. White's car when she was pregnant with her son, Jayden. But someone removed and then re-installed the seat. Dr. White knew the seat was not properly installed and refused to transport her son in that car until Sylvia re-installed it.

As a pediatrician, Dr. White understands the importance of an appropriate seat that is properly installed. "I have seen kids with abrasions from a seat harness placed too low or too high," she says. She also sees patients hop into the front seat of a car, when they should be in the back in a booster seat. "There still is a tremendous need for education and outreach, which is why Sylvia's work is so important," says White.

VIOLENCE EXPOSURE & TEEN MOTHERS

Exposure to violence is a significant health risk for children. More accurate reporting now documents the prevalence of violence, especially among minority children, giving substance to the claim of a "public health epidemic" that many health professionals have been warning of for many years. The effects of violence and exposure to violence can have devastating and long-term consequences. Research shows that children who are exposed to violent acts are at increased risk for behavioral problems and are more likely themselves to become violent. Washington, DC and other urban areas are seeing a resurgence of juvenile crime, which means that young people, including teen mothers and their small children, are witnessing violent acts. Researchers at Children's National suspect that young children also may be at risk from indirect exposure, as they experience their mother's distress and worry.

To further investigate the affects of violence on teen mothers and children, the Center for Clinical and Community Research at Children's National received a federal grant in 2004, to fund a multicultural, longitudinal study on Violence Exposure and Teen Mothers. The study specifically explores violence and maternal distress, parenting, and child behavior over time, as well as the psychological and social resources parents use to cushion its negative effects. The hope is that the findings will help program planners refine existing interventions and create new ones that are more relevant and better address community needs.



In its fifth year, the study includes 290 African American and Latino families, who use set criteria and guidelines to track and journal daily, weekly, and monthly exposures to violence. Researchers note that families have been conscientious and positive in their response to the project. Analysis is ongoing in an effort to spot emerging trends and identify correlations in preliminary data.

SIDS TRAINING SESSIONS

In the last decade, child care has become a growing risk factor for Sudden Infant Death Syndrome (SIDS) — both nationwide and in the District of Columbia. Nationally, an alarming 20 percent of SIDS deaths occur while an infant is in the care of someone other than a parent. Since nearly two-thirds of children under age one are in some form of childcare, there is increased emphasis among the public and private health sectors to improve the knowledge and practices of childcare providers with regard to SIDS. As part of the District's mission to educate all its licensed child care providers about this problem, officials enlisted Children's National Medical Center for help.

In collaboration with the city's Office of Early Childhood Education, Children's National has developed a two-hour SIDS risk reduction training module based on recommendations from the American Academy of Pediatrics (AAP). The module mixes lecture with interactive exchange on the demographic, medical, and environmental factors common in babies who die from SIDS. For young infants these include: being African American and/or male; having respiratory problems; low birth weight; exposure to tobacco smoke; or sleeping on the tummy. Child care providers also learn about the importance of safeguarding their homes by using proper cribs, crib accessories, and bedding, as well as maintaining comfortable room temperatures and using light-weight infant sleep wear.

As part of the module, participants complete pre- and post-intervention surveys to measure knowledge of AAP recommendations and specific subject matter. In FY 2009, 61 child care providers completed the course — with an impressive 21 percent demonstrating an increased knowledge after training. Successful participants received a certificate from the Office of Early Childhood Education's professional development unit.

SIDS can strike any infant, at any time during the first year of life. Children's National is committed to reducing that risk through education and promotion of safe child care practices.



CONGENITAL HEART DISEASE SCREENING PROGRAM

With the excitement of every birth, comes the anxious hours immediately following when parents wait to hear that their newborn is healthy and strong. More often than not, a "clean bill of health" comes quickly, and baby and family are on their way home. But too often the news is troubling as nearly 35,000 parents each year learn that their child has a form of the most common birth defect in the United States - congenital heart disease (CHD). Some defects may be detected during pregnancy or while the baby is in the newborn nursery, when doctors can plan effective treatment. However, other defects have less apparent signs and symptoms and may not be detected while the baby is in the nursery. A delay in diagnosis may lead to serious health problems or death. Children's National is a strong advocate for the earliest possible detection of CHD, and has launched a multi-pronged community research project that could lead to the screening of all healthy newborns within the first 24 hours of life.

Children's National Heart Institute is currently working with a community partner, Holy Cross Hospital in suburban Maryland, to screen its newborns using a simple, non-invasive, and painless test called pulse oximetry. Pulse oximetry measures the amount of oxygen in the blood, and has shown to be effective at detecting congenital heart disease. Last year, 4,886 babies were screened, and three cases of CHD were detected; one being serious.

To advance education around this proposed intervention, Children's National has created an evidence-based toolkit that includes recommendations for community-based and professional organizations on implementing screening and educating staff and families on the importance of screening.

A health promotion and advocacy campaign is underway, that involves reaching out to families, community leaders, and other stakeholders about CHD and the use of pulse oximetry as an effective tool for detecting the disease. At the same time, the Child Health Advocacy Institute and Government Affairs department are working hard to educate key legislators in an effort to gain local, regional, and national support for making this screening standard-of-care for newborns.

Advances in testing can help ensure that children with CHD thrive and live healthy, adult lives. Children's National is proud to be on the forefront of efforts to detect CHD early, and to improve the long-term prognosis of children affected by the most common birth defect.

LATINO NURSING OPPORTUNITY, PROGRAM TOUR AND SPEAKERS PANEL

In addition to the overall shortage of nurses in hospitals across the country, there also is significant lack of racial and ethnic diversity within the profession. Children's National is encouraging greater diversity, which also helps to address the shortage of nurses in our community. This commitment to greater diversity promotes a culturally competent workforce and one that more closely mirrors the patient population it serves.

The Latino Nursing Opportunity Program exposes minority high school students interested in careers in health care to opportunities available in the industry. In collaboration with the academic enrichment arm of a program centered at The Catholic University of America, Children's National gives students an up-close, first-hand look at patient care and clinical services through departmental tours, a speakers' panel, and one-on-one discussions with professionals.

Areas of concentration include physical and occupational therapy, anesthesiology, hematology and oncology, patient and family education, pathology, laboratory medicine, and the operating room.

Early signs of success include the return of several students who completed the program to Children's National as summer volunteers getting a head start on helping the community they may one day serve as nurses.

BURN CARE AND PREVENTION

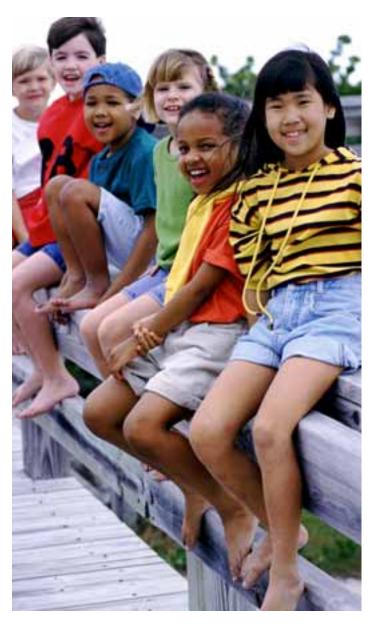
It only takes seconds to check the temperature of bathwater or move boiling liquid to the back of the stove. Those simple precautions can prevent burn accidents and save a child from excruciating pain, lifelong scarring, or even death. That's the message staff at Children's National are eager to convey to communities. The message has particular urgency, based in the reality of initially treating nearly 1,000 burn injuries in the Emergency Department each year. Most of these injuries involve scalds to infants and young children, and can be easily prevented by taking precautions in and around the home.

Burns are among the most painful injuries for children, and the recovery process can be devastating for families. We're committed to raising awareness about burn safety and preventing injuries — we don't want another child to suffer the pain and agony that comes with an acute burn. We are convinced that outreach and education can make all the difference in reducing the number of burns we treat each year. After all, we want what every family wants — to keep their children safe.

Kimberle Searcy

Manager, Health Promotion and Disease Prevention Programs

A burn care and prevention grant from the District of Columbia Department of Health provides funding for the hospital to study and assess the nature of its burn cases, determine the age groups most at risk for certain injuries, and allocate resources



where needed most. Armed with this data, the grant also has helped to ensure that the Emergency Department is staffed with acute burn care specialists, and that families receive education on how to prepare their homes, protect their children, provide initial burn care and, most importantly, prevent unintentional injuries.

Program planners and practitioners are in the process of assessing data, and from all indications, expect to see a decrease in the number of burn cases presenting to the Emergency Department, outpatient clinic, and inpatient settings. Staff is confident that increased and sustained efforts in education and burn prevention will lead to changes in behavior, as well.

IMPROVING MANAGED CARE ORGANIZATION'S DELIVERY OF EPSDT SERVICES

Children's National continues its ongoing work with the District of Columbia, managed care organizations, and other community groups to improve access to Early Periodic Screening, Diagnostic, and Treatment (EPSDT) services for children enrolled in Medicaid. EPSDT ensures that every child with Medicaid benefits receives important screenings at key points in their lives that will help prevent, detect, and treat disease.

This effort to improve the delivery of EPSDT services in the District is part of a court-ordered plan that brings together providers and policy experts to review existing literature, identify best practice models, and propose interventions that will measure quality and increase utilization. Numerous studies show that when families take full advantage of EPSDT, their children achieve significant benefits, such as fewer chronic health problems, mental and emotional health, and more success in school.

FATHERHOOD PROJECT

Families and society as a whole feel the impact when fathers are not involved in the lives of their children. Children without involved fathers are more likely to be poor, abuse drugs, fail in school, and become incarcerated. Additionally, the government spends more than \$100 billion in tax revenue on programs to support homes without fathers. The Fatherhood Project at Children's National was created to help stem the cycle of father absenteeism by encouraging local fathers to become more involved and connected to their children's lives.

Using a nationally-recognized curriculum developed by the National Fatherhood Initiative, the project teaches about child growth and development, good communication techniques, and practical parenting skills through weekly in-home visits over a six to 12 month period. Fathers also benefit from depression screenings, as well as referrals to various community resources, including mental health and medical services and job training programs. Children's National is proud of the fathers who completed the life-changing program last year.



Community

HEALTH NEEDS

Assessment

ver the past fiscal year, The Child Health Advocacy Institute (CHAI) along with the Rand Corporation conducted the first comprehensive pediatric community health needs assessment for the District of Columbia. This assessment was used to support our overall community benefit program, but also assist in defining the targeted approach that Children's National will use moving forward to effectively address and identify unique health needs of the pediatric population living in Washington, DC, while at the same time, serve as a baseline for the strategic approach for Children's National over the next five years. Through the innovative leadership of the CHAI, this pediatric community health needs assessment was the first of its kind that appropriately addressed and identified the unique health needs of children living in Washington, DC.

More specifically, this comprehensive community health needs assessment described the health status and access to health care among District children, assessed the health environment for DC youth, and considered various health care policy options for future needs. A host of data sources were used to achieve a sound and extensive analysis of health conditions, health behavior, and hospital discharge and claim data. In addition, focus groups were conducted throughout the city comprised of parents of children, teenagers, and healthcare providers, which provided qualitative measures. The findings from the community health needs assessment will now assist Children's National in decision making for infrastructure development and data collection priorities; health promotion and disease prevention program planning, development, and monitoring; budget justifications and allocation of advocacy funds; influence on public policy change; identification of advocacy-based research and education priorities; and baseline measures for outcomes and evaluation.

Children's National is now proceeding with the next phase of this health needs assessment work—offering continued education to external and internal stakeholders on the report findings, and bringing together agencies and organizations that work with youth and families to develop a citywide priority agenda for improving health among District children.

Special Thank You to Richard W. Snowdon, III



Children's National
extends a special thank
you to Richard W.
Snowdon, III. Your
leadership of the
Children's National
Board of Directors and
work with the Committee

on Advocacy and Public Policy (CAPP) are truly appreciated. Over the past two years, your effort, engagement, and contribution have allowed us to implement a pediatric community health needs assessment — one of the first of its kind in the District of Columbia — and continue commitment to our charitable mission by meeting the needs of our community.



Additional

COMMUNITY BENEFIT

Programming and Activities



LEGACY OF LOVE

Legacy of Love is a program designed to assist patients, parents, siblings, and staff as they grieve the loss of a loved one. Participants are empowered mentally, physically, and spiritually as they move through the healing process utilizing the visual arts, literary arts, music, dance/movement, and/or puppetry. The initiative is offered twice a year and is a collaborative effort between Pastoral Care, New Horizons, Child Life Specialists, and Volunteer Services. More than 30 individuals participated in the program in 2009.

Working in the Emergency Department and in the CHAI, I see, first hand, the health issues that impact the community, and community issues that impact children's health.

Obesity, foster care, oral health — there are huge unmet needs. We look for creative ways to meet those challenges through both policy and innovative programs. There is never shortage of opportunities, and I feel fortunate to be able to use them to improve the health and wellbeing of our patients, and the community as a whole.

Eric Rosenthal, MD, MPH, FAAP
Child Health Advocacy Institute,
Clinical Associate, Emergency Department,
Children's National Medical Center

GRANDPARENT'S SUPPORT GROUP

The Children's Health Project of DC located at the THEARC provides a support group for grandparents who play a role in raising their grandchildren. This initiative is an effort to assist grandparents in achieving balance between caring for their grandchildren and themselves, helps grandparents with a supportive network of services such as referrals to community resources, and provides a relaxed compassionate environment for participants to express themselves. Meetings are held in the evenings on a monthly basis with more than 40 participants in 2009.

IT'S WISE TO IMMUNIZE FAMILY FUN DAY AND HOTLINE

The It's Wise to Immunize Family Fun Day provides parents and guardians a last opportunity before the start of the new school year to get their children immunized at no cost. Parents and guardians can apply for health insurance, are educated on the importance of primary care, and have the opportunity to make



Jacqueline Bowens

Executive Vice President and Chief Government and External Affairs Officer

primary care appointments for their children. More than 200 children were served during the 2008 event.

The It's Wise to Immunize Hotline, a seasonal service manned by registered nurses, is available to District of Columbia parents and guardians who have questions regarding immunizations, primary care, and how to obtain health insurance. The primary goal of the hotline is to link children and their families to a primary care physician and establish a medical home. More than 60 families received assistance through the hotline in 2008.

HEALTH FAIRS AND EDUCATION

Children's National provides education to the community at health fairs, workshops, and through educational programming. Partnering with schools, government agencies, and community based organizations, Children's National educates the community on topics such as infant care, hand washing, nutrition, and good hygiene. One of our annual events Children's National participates in is La Feria de la Familia. Children's National is a major exhibitor at the event, with a display focused on children's health. Families are educated on bone health, healthy eating, safety, pediatric surgeries, and can receive flu vaccinations. Through our many educational encounters, more than 1,000 persons were served.

FOSTER FAMILY HEALTH & WELLNESS TRAINING FAIR

Children's National and Children's Health Project of DC located at THEARC partnered with the District of Columbia Child and Family Services Agency to present the Foster Family Health & Wellness Training Fair in celebration of National Foster Care Month. The goal of the fair was to promote the health, safety, and well-being of the District's foster children and the foster, kinship, and pre-adoptive families. Approximately 150 participants received information on topics including accessing community services, the importance of total family health and wellness, healthy eating, and exercise.

Each year, Children's National Medical Center invests in the communities that support the hospital by providing care to those children and families who are in need, and who may have difficulty accessing that care. This may come in the way of programs and services that meet the medical needs of vulnerable groups, provide education or preventive care, or address health issues that are disproportionate among certain populations.

A variety of health data measures assist in Children's National's efforts to ensure that resources are used wisely, and that the community benefit is measurable and achieves the desired results. To further assist in strategic planning and decision-making for the hospital, as well as budgeting, reporting and evaluating community benefit, Children's National commissioned a Community Health Needs Assessment in 2008.

Released to the public late last year, the assessment is expected to become a valuable tool in helping the hospital and its partners set health priorities for the community, advocate for reforms, explore innovative approaches to pediatric care, and develop targeted and viable interventions that will improve access and reduce inequalities.

I invite you to read more about the Community
Health Needs Assessment and its findings in this
report. You also will learn about the many programs
and collaborations at Children's National that
benefit individuals and that improve the overall
bealth of our community.

COMMUNITY IMPACT

Did You Know?

OUR EMPLOYEES

Hospitals provide an important part of the economic foundation for the communities they serve. In the midst of one of this nation's most severe economic downturns, hospitals have demonstrated their value, not only as institutions that provide healthcare services, but that also are important employers in the private and public sector.

Children's National Medical Center takes its responsibility as a community leader seriously. Children's National attracts and retains talented and committed employees, proving itself as an economic base and engine in the region. More than 5,250 employees at Children's National are residents of Washington, DC region and surrounding areas. Among those 5,250 nearly 1,900 physicians, including faculty, clinical associates, and physicians in training, also are employed by Children's National.



OUR PATIENTS

Consistently listed in U.S. News & World Report as one of America's top pediatric hospitals, Children's National cares for patients from across the region, the nation, and around the world. In 2009, more than 350 patients from 18 countries traveled to Children's National for treatment. Our patients from across the region and country also represent diverse cultures, ethnicities, religious, and socioeconomic backgrounds. As the only exclusive provider of pediatric care in the Washington metropolitan area and the only freestanding children's hospital between Philadelphia and Norfolk, Children's National cares for all — regardless of insurance status or ability to pay. Similar to previous fiscal years, just over 50 percent of all inpatient care in FY 2009 was covered through Medicaid or other public health programs.

As the mother of a two-year old who once spent considerable time in the Neonatal Intensive Care Unit and has had multiple hospital stays, I've been immensely grateful for the medical and emotional care I received at Children's National. From the transport nurse to the admitting physician, the staff helped to ease my uncertainties when I didn't know what to do, what to expect or where to turn. Now, as a patient navigator, I can offer my life experience as a help to other families. With staff, I can help to shed light on the wholeness of a family's experience. For the family, I can identify with the stress they feel, and at the same time, make sure their voices are heard with their medical team. The program offers an extraordinary emotional benefit to families, which in the long run, makes the entire community a healthier place in which to live.

Lisa StewartParent and Parent Navigator



James W. Lintott
Chairman of the Board,
Children's National

TOTAL HOSPITAL ADMISSIONS FOR FY 2009 14,687

Total Outpatient Visits for FY 2009......374,555
Total Emergency Room Visits for FY 2009......82,955

and
Terry Cornwell
Rumsey

Medical Center

Chairman of the Board, Children's Hospital

HOSPITALITY SERVICES

Whenever a child is hospitalized, the entire family feels the stress. When a child is very sick and facing a prolonged hospital stay, the strain can almost be unbearable. Families frequently struggle with life in hotels, juggle the needs of their other children, and grapple with unexpected costs and financial pressures. For more than eight years, while serving over 14,900 families, Children's National's Concierge Services team has lightened the load for families so they can concentrate on what's most important — their sick child's treatment and recovery.

The team is available to help with a variety of needs, including making travel arrangements, connecting families with social services, scheduling appointments, arranging dry cleaning or laundry services, or simply planning dining or a much needed break from the hospital. To ensure a continuum of care that addresses both the family's medical and non-medical concerns, the team recently began coordinating their services with the entire team of doctors, social workers, and staff involved in the patient's care. This integrated approach makes for seamless support to patients and families and is a hallmark of what Children's National means by family-centered care. Last year, more than 5,250 families benefited from the commitment and dedication of the Concierge Services team.

Children's National Medical Center's strong commitment to community benefit speaks to its mission to improve health outcomes for children and be a leader in creating solutions to pediatric health problems. The Board of Directors takes seriously its responsibility to move that mission forward by making certain the hospital has the capacity to meet community needs and provide community benefit.

This is accomplished through the hard work and diverse talents of the Board and the hospital's leadership. Together we ensure that there are adequate resources for community benefit programs, that reporting documents align with government guidelines and requirements, and that the hospital meets all other responsibilities associated with community benefit.

Board commitment to community benefit, however, goes well beyond reviewing reports and compliance with policies. It is a shared commitment to fulfilling the core mission of the hospital that begins with each Director and ends with every member of the community.

COMMUNITY BENEFIT

Programs and Partners

he following Children's National Medical Center's programs and activities provided more than \$35 million in community benefit in fiscal year 2009, including those highlighted in the report:



- Children's School Services School Health Nursing Program
- Community Benefit Operations
- Community Health Education
- DC KIDS Pre-placement Screens
- Emergency Medical Services for Children/National Resource Center
- Evaluating Interventions to Improve MCO Delivery of EPSDT Services
- Foster Care Advisory Board (FCAB) In-Service Training
- Fun and Fitness for Kids at THEARC
- Lecture on Polyagglutination (for healthcare professionals)
- National Youth Leadership Forum
- Parent Empowerment Program in Asthma Care
- Parenting and Control in Young Children with Type 1
 Diabetes

- Prevention Disease Care Deterioration in Adolescents with Type 1 Diabetes
- Primary care provided at Children's Health Centers
- Sleep Fatigue and Cognitive Correlates in Pediatric HIV
- Special Supplemental Nutrition Program for Women, Infants, and Children (WIC)
- Sudden Infant Death Syndrome (SIDS) educational interventions with clients of WIC
- Violence Exposure and Teen Mothers: A Multiethnic Study

PARTNERS INCLUDE:

- Advisory Neighborhood Commissioners (ANCs)
- Community of Hope
- District of Columbia Child and Family Services Agency
- District of Columbia Department of Health
- District of Columbia Department of Transportation
- District of Columbia Fire and Emergency Medical Services
- District of Columbia Public Schools
- District of Columbia Office of Early Childhood Development
- Domino's Pizza
- Giant Food
- George Washington University (health policy department)
- Holy Cross Hospital
- Mary's Center for Maternal and Child Health
- Metropolitan Police Department
- National Institutes of Health (NIH)
- Poison Control Center
- Telemundo
- Washington Area Bicyclist Association
- · Washington Hospital Center
- World Vision
- YMCA





Thank You!

Children's National extends special gratitude to the members of the Committee on Advocacy and Public Policy (CAPP), a standing committee of the Children's National Board of Directors, who worked tirelessly for the past three years to be a voice for child health advocacy and public policy issues in the Washington, DC region and beyond. Over the past three years, members of CAPP have advocated for SCHIP reauthorization; HPV Vaccine recommendations; effective childhood obesity strategies; and health reform principles.

The work of the CAPP did not go unnoticed; in fact, it called attention to the need for a higher level of engagement, and thus the formation of Children's National Advocacy and Public Policy Inc. (CNAPPI), under the leadership of Richard W. Snowdon, III, and Jacqueline Bowens.

All About

CHILDREN'S NATIONAL

CHILDREN'S HEALTH CENTER LOCATIONS

Children's National has six communitybased primary health center locations in Northwest and Southeast Washington

Children's National Medical Center

111 Michigan Avenue, NW Washington, DC 20010 Children's Health Center 202-476-2123 Adolescent Health Center 202-476-5464

Good Hope Road

2501 Good Hope Road, SE Washington, DC 20020 202-476-6900

Martin Luther King

3029 Martin Luther King, Jr. Avenue, SE Washington, DC 20032 202-476-6575

Shaw (Comp)

2220 11th Street, NW Washington, DC 20001 202-476-5500

Adams Morgan

(Dorchester House) 1630 Euclid Street, NW Washington, DC 20009 202-476-5580

Children's Health Center at THEARC

1901 Mississippi Avenue, SE Washington, DC 20020 202-436-3060

CHILDREN'S **REGIONAL OUTPATIENT CENTER LOCATIONS**

Our renowned specialists practice not only in the hospital, but in locations around the beltway.

Annapolis

888 Bestgate Road, Suite 320 Annapolis, MD 21401 410-266-6582

Children's Center for Cancer and **Blood Disorders of Northern Virginia**

6565 Arlington Boulevard Suite 200 Falls Church, VA 22042 703-531-DOCS (3627)

Children's National Specialists of Virginia, LLC

An affiliated private practice 3023 Hamaker Court, Suite 500 Fairfax, VA 22031 571-766-3100

Frederick

5910 Frederick Crossing Frederick, MD 21704 301-682-6661

Laurel

Laurel Lakes Corporate Center 13922 Baltimore Avenue Laurel. MD 20707 240-568-7000

Montgomery County

9850 Key West Avenue, Second Floor Rockville, MD 20850 301-765-5400

Montgomery County (Neuropsychology)

15245 Shady Grove Road, Suite 350 (South Building) Rockville, MD 20850 301-765-5400 or 800-787-0243

Northern Virginia

Prosperity Medical Complex 8501 Arlington Boulevard, Suite 450 Fairfax, VA 22301 571-226-8380

Spring Valley

4900 Massachusetts Avenue, NW, Ste. 320 Washington, DC 20016 202-745-8860

Upper Marlboro

Melwood Professional Building 9440 Pennsylvania Avenue Upper Marlboro, MD 20772 301-297-4000

CHILDREN'S PEDIATRICIANS & ASSOCIATES, LLC

Children's Pediatricians and Associates (CP&A) is a group of affiliated pediatric practices owned or managed by Children's National Medical Center.

Drs. Chang-Pitter, Hamburger, Kaplan, Ratner, Schoonover, Sepe, Smith-Kuhri, & Wagner

2141 K Street, NW, Suite 401 Washington, DC 20037 202-833-4543

Drs. Berkowitz, Feldman, Burgin, Glaser, Delaney, & Scott-McKinney

6201 Greenbelt Road, Suite L1 College Park, MD 20740 301-345-1900

13900 Laurel Lakes Avenue, Suite 240 Laurel, MD 20707 301-498-1900

Drs. Smith & Guarinello

9692 Pennsylvania Avenue (Marlboro Pike) Upper Marlboro, MD 20772 301-599-7300

3450 Old Washington Road Suite 100 Waldorf, MD 20602 301-645-0300

Drs. Shapiro & Beard

10801 Lockwood Drive, Suite 260 Silver Spring, MD 20901 301-593-5566

Drs. Feroli, Mella, Pedreira, Roseman, & DeSouza

19251 Montgomery Village Avenue, Suite F10 Montgomery Village, MD 20886 301-926-3633

19501 Doctors Drive Germantown, MD 20874 301-540-0555

Drs. Simrel, Hudson, & Rainey

9015 Woodyard Road, Suite 111 Clinton, MD 20735 301-599-0900

2600 Naylor Road, SE Washington, DC 20020 202-582-6800

CHILDREN'S NATIONAL MEDICAL CENTER CORPORATE ENTITIES:

Children's Hospital
Children's Hospital Foundation
Children's Research Institute
Safe Kids Worldwide
Children's National Health Network
Children's Pediatricians & Associates
Children's National Specialists of Virginia





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Terry Cornwell Rumsey

Chairman of the Board Children's Hospital

Richard W. Snowdon, III

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