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2005 Foster G. McGaw Prize
American Hospital Association
One North Franklin/
Floor 32
Chicago, IL 60606

Applications must be received in the Prize office by close of business on April 8, 2005.

Questions? Please contact AHA Member Relations at **312/422-3932**, or visit the web site at **www.aha.org**.

Venice Family Clinic

Name of Health Delivery Organization

604 Rose Avenue

Mailing Address

Venice, CA 90291

City, State, Zip Code

Anne Staunton, PhD, MPH, Director, Program Development & Evaluation

Name of Contact (Mr. Ms. Mrs.)

Title

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Phone

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My health delivery organization is a (check one):

Hospital Health System Integrated Network Community Partnership Other

Primary type of community:

Urban Rural Suburban Mix

References

Please list three (3) individuals who can be contacted to provide reference information about (a) the commitment of the health delivery organization to community service and (b) the impact of the applicant's community service initiatives.

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Name of Reference, Title

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Name of Reference, Title

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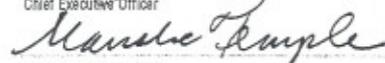
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Relationship to Health Care Org.

Signatures

In submitting this application we give the American Hospital Association permission to use and disseminate the information contained herein except the audited financial statements.

	Elizabeth Fover, MSW/MPH
Chief Executive Officer	Type or Print Name
	Marsha Temple, Esq.
Board of Trustees Chair	Type or Print Name
	Karen Lamp, M.D.
Chief Medical Officer	Type or Print Name
	Anne Staunton, PhD, MPH
Application Contact Person	Type or Print Name

**PROPOSAL TO THE AMERICAN HOSPITAL ASSOCIATION
FOSTER G. MCGAW PRIZE COMPETITION**

Venice Family Clinic
April 6, 2005

EXECUTIVE SUMMARY

Venice Family Clinic and Its Community

The Mission of the **Venice Family Clinic (VFC)** is to improve the health of people and communities through accessible, quality care. Founded in 1970 by physician volunteers Philip Roszman, founder, and Mayer B. Davidson, co-founder, the Venice Family Clinic (VFC) has grown from a small store-front operation to become the largest free clinic in the United States. VFC was born out of commitment to community service and retains a strong volunteer culture with 2,000 service members. VFC is the principal provider of free health care on Los Angeles County's west side, including the communities of Santa Monica, Palms/Mar Vista, Culver City, Westchester, West Los Angeles, Inglewood and Venice. VFC is unique in the breadth and depth of primary health care and supportive services that it offers to nearly 20,000 low-income mostly uninsured and minority community members at seven community locations in almost 100,000 visits annually at seven Clinic locations, including newly expanded services at the Culver City Youth Health Center and the Mar Vista Gardens Clinic- located at a public housing development. The Clinic is also distinguished by excellence in the quality of its services as well as in community health leadership and advocacy. Venice Family Clinic's patients are poor and mostly uninsured children and adults, many of them Latino immigrants, with low levels of formal education and health literacy.

Venice Family Clinic's Commitment to Community Service

Venice Family Clinic was born out of commitment to community service and retains a strong volunteer culture with 2,000 service members. The Clinic collaborates with more than 70 health and social service providers, including local hospitals, professional organizations, governmental agencies and community-based organizations, across Los Angeles and California. A trusted presence in the community for over 30 years, the Venice Family Clinic has been a leader in mobilizing assets for the benefit of the underserved, most remarkably in 1995 when it led a coalition of hospitals and community agencies to privatize two County Health Clinics slated for closure, thereby restoring health access to 7,000 low-income and homeless community members. VFC has launched and sustained numerous innovative programs and service expansions in response to a diverse array of community health needs, which include: Access to basic primary health care, psychosocial and mental health services, the prevention and management of chronic diseases such as diabetes, cardiovascular disease, depression and asthma, as well as programs addressing homelessness, reproductive health, prenatal care, violence, developmental and family problems and substance abuse. We pride ourselves on the high quality of our relationships and our programs, which are evaluated, in part, by feedback on our communication skills and cultural competence. In addition to the strong institutional and government partnerships we have built over the years, we work with a variety of community leaders, advisory and advocacy groups representing diverse populations and communities on the west side of Los Angeles. Our Patient Advisory Council – comprised of a culturally diverse group of patients—provides a formal mechanism through which patients participate in Clinic governance and help us to design and evaluate our programs so that they are responsive and effective. Community access to a comprehensive array of health services is possible through the dedication of nearly 2,000 volunteers in resource development and service delivery. An extensive volunteer physician workforce and specialty care network of over 500 provides services valued at over \$1 million per year. Specialty services, medications and supplies are made available through the generosity of our partners, which include hospitals, laboratories, specialty care providers and pharmaceutical companies, who donate over \$5 million in x-ray, laboratory, pharmaceuticals, surgical and emergency services annually.

Venice Family Clinic's Service Initiatives

Highlights from five initiatives that VFC has developed and sustained over the years demonstrate how VFC has responded to and sustained programs that address the real needs of the community and how VFC works every day to realize its mission of improving the health and quality of life of the most vulnerable members of its community. The initiatives described in this application include: The Diabetes Care Management Program, the Pharmacy Access Program, Integrated Mental Health Services, Public Health Insurance Outreach and Enrollment Program and Community Health Training Programs.

VENICE FAMILY CLINIC

The Mission of the **Venice Family Clinic (VFC)** is to improve the health of people and communities through accessible, quality care. VFC currently is the principal provider of free health care on Los Angeles County’s west side. The Venice Family Clinic is unique in the breadth and depth of primary health care and supportive services that it offers to nearly 20,000 low-income mostly uninsured and minority community members at seven community locations in almost 100,000 visits annually. The Clinic is also distinguished by excellence in the quality of its services as well as in community health leadership and advocacy. A culturally diverse staff of over 200 provides direct services in Spanish and English, with translation capabilities in nine other languages.

Comprehensive primary health care services offered by Venice Family Clinic include: prenatal care, family planning, reproductive health care services, including HIV/STD prevention, screening and treatment, pediatric care, including early child development services, disease management for chronic illness such as cardiovascular disease, diabetes, asthma and hypertension; health education; a variety of specialty care clinics; a teen clinic with comprehensive psychosocial assessment and peer advisor services; laboratory tests, x-rays, medications and pharmaceutical services, including a smoking cessation clinic; mental health services including medical treatment, counseling, support groups, case management and crisis response; specialized outreach, prevention and management programs addressing family violence and homeless health care; vision care; integrative medicine; and Children First, a comprehensive home-based program to optimize the health of our youngest children. A wide range of specialty care services are available through a mostly volunteer medical network and extensive residency medical training programs at VFC. Supportive services include outreach and health promotion, onsite enrollment for public health insurance programs, health literacy programs, as well as community involvement and leadership development facilitated through the Clinic’s Patient Advisory Council.

VENICE FAMILY CLINIC’S COMMUNITY

Venice Family Clinic’s patients are poor and mostly uninsured children and adults, many of them Latino immigrants, with low levels of formal education and health literacy. The Clinic primarily serves communities on the west side of L.A. County, including Santa Monica, Palms/Mar Vista, Culver City, Westchester, West Los Angeles, Inglewood and Venice. Eighty percent (80%) of patients are minority group members, including 64% Latinos, 11% African-Americans and 4% Asians. Three-quarters of our patients live below the Federal Poverty Level—living in households earning less than \$18,850 for a family of four. The remaining 25% of our patients live in low-income households—earning less than \$37,700 for a family of four. Seventy-eight percent (78%) have no form of health insurance; 58% are women; 30% are children and teens; and 18% are homeless.

The chart below highlights some measures of vulnerability among our community members (see the column titled ‘Venice Family Clinic’) in comparison with the populations of Los Angeles County and California.

Demographic Indicators	Venice Family Clinic	LA County	California
Total Population	20,000	9.5 M	34.5 M
Population under age 20	30%	31%	29%
Latino population	64%	45%	35%
African-American population	11%	10%	7%
Poverty Population (@ or below FPL)	75%	19%	16%
Percent without any Form of Health Insurance	78%	18%	14%

Nearly one-third of VFC’s 14,000 adult patients have one or more chronic diseases or conditions that require multiple medications for effective management, including diabetes, hypertension, coronary heart disease, major depression, asthma, obesity and HIV disease. In addition, 15% of the Clinic’s 6,000 pediatric patients have chronic illnesses and conditions, most commonly, asthma, but also, diabetes, chronic ear infections, obesity, lead exposure and developmental delays. Other health, educational social problems and needs affecting our community include: Violence, mental health problems, substance use and abuse, early or unplanned pregnancy, lack of parenting skills and low levels of formal education and health literacy.

VENICE FAMILY CLINIC'S COMMITMENT TO COMMUNITY SERVICE

Origins and Growth: Founded in 1970 by physician volunteers Philip Rossman, founder, and Mayer B. Davidson, co-founder, the Venice Family Clinic (VFC) has grown from a small store-front operation to become the largest free clinic in the United States. VFC was born out of commitment to community service and retains a strong volunteer culture with 2,000 service members. Responding to community needs for wider access to health care for the uninsured, the Clinic has expanded dramatically since 1995, when it privatized two County facilities slated for closure and mobilized a coalition of local hospitals, health care and social service agencies to maintain access to health care for 7,000 west side residents and homeless persons. We currently serve 20,000 needy community members in almost 100,000 visits annually with comprehensive primary health care at seven clinic locations, including facilities in Venice and Santa Monica, as well as newly expanded services housed in the Culver City Youth Health Center and the Mar Vista Gardens Public Housing Development. Venice Family Clinic has launched and sustained numerous innovative programs and service expansions in response to a diverse array of community health needs. The most notable initiatives are listed below, a few of which will be considered in more detail later in the application:

- o Diabetes Care Management Program
- o Asthma Care Management Program
- o LINK Immunization Registry
- o Telemedicine Program for Digital Retinal Screening
- o Pediatric Literacy Program
- o Homeless Health Care Program
- o Child Development Case Management Program
- o Pediatric Outreach Program
- o Westside Partners HIV/AIDS Prevention and Treatment Services
- o Integrated Mental Health Services
- o Safe Families Domestic Violence Program
- o Male Outreach, Education and Referral Program – Focusing on High-Risk Day Laborers
- o Comprehensive Department of Health Education, Promotion and Community Outreach
- o Mar Vista Gardens Clinic in the Mar Vista Gardens Public Housing Development
- o Pharmacy Access Program
- o Clinical and community health training programs
- o Research Committee and partnerships in health research
- o Vision Care Program
- o Children First Program
- o Public Health Insurance Outreach, Enrollment and Education Program
- o Integrative Medicine Program

Leadership and Partnership: The Clinic collaborates with more than 70 health and social service providers, professional organizations, governmental agencies and community-based organizations, across Los Angeles and California. A trusted presence in the community for over 30 years, the Venice Family Clinic has been a leader in mobilizing assets for the benefit of the underserved, most remarkably in 1995 when it led a coalition of hospitals and community agencies to privatize two County Health Clinics slated for closure, thereby restoring health access to 7,000 low-income and homeless community members. Venice Family Clinic is a founding member of the Westside Health Coalition, the official health planning body for Los Angeles County's West Health District. Other key local collaborators include: the Los Angeles County Department of Health Services, Westside Family Health Center, Stoner Elementary School, Braddock Elementary School, Mar Vista Gardens Resident Advisory Council, the Community Clinic Association of Los Angeles County, UCLA, POWR, LA Care, Saint John's Health Center, the Ocean Park Community Center, Common Ground, CLARE Foundation, Didi Hirsch Mental Health Center, Edelman Community Mental Health Center, RAND, Saint Joseph's Center, Westside Hunger and Shelter Coalition, City of Santa Monica, West LA Job Center, Healthy African-American Families, Venice2000, Oakwood Recreation Center, Vera Davis McClendon Youth and Family Center, Westside Children's Center, Behavioral Health Services' *Promotoras de Salud* Program.

Clinic leaders play an active role in advocacy on behalf of the uninsured. One of our board members is past President of the California Primary Care Association. As well as being a board member of the National Association of Free Clinics and an advisory

board member of a local hospital, our Chief Executive Officer is the founder and co-director of the Westside Health Coalition. Several years ago, VFC partnered with the Robert Wood Johnson Foundation, UCLA, the Los Angeles County Department of Health Services and 50 local and national health organizations in the spring of 2003 to bring national attention to challenges in increasing access to affordable health care and the number of uninsured who need care.

Venice Family Clinic's special relationship with UCLA has strengthened its service capacity and quality of care. While maintaining its own 501(c)(3) status and a separate Board of Directors, VFC is also formally affiliated with the University of California at Los Angeles as an administrative department of UCLA's David Geffen School of Medicine. UCLA provides human resources functions including recruitment, benefits management and some staff training. UCLA also provides medical malpractice insurance coverage to VFC staff and volunteer physicians as well as credentialing, privileging and some specialty services. In return, VFC provides training in community primary care to residents and medical students from UCLA and other academic partners, benefiting over 350 students and health professionals each year. VFC participates as a community partner in a world-class clinical research training partnership through the Robert Wood Johnson Clinical Scholars Program and as a member of a joint UCLA-RAND community-based participatory research network called the Community Health Improvement Collaborative.

Strong Ties to Local Hospitals: The Venice Family Clinic powerfully demonstrates how hospitals – even in the most competitive environment – can provide outstanding medical services and preventive health care to the poorest, most needy members of their service area through a well-conceived community partnership. Through board and committee leadership of hospital executives, in-kind contribution of hospital services, volunteer medical care provided by staff and residents, and the financial support of hospital community benefit programs, the Venice Family Clinic has effectively and strategically utilized hospital resources to grow to become the largest free clinic in the United States, providing nearly 100,000 patient visits per year. As a result, the Venice Family Clinic helps alleviate critical overcrowding of hospital emergency rooms, stem the growth of uncompensated care, and – most importantly – prevent sickness, death, and disability for tens of thousands of children and adults who otherwise would have nowhere to turn.

Challenges: Besides the ongoing challenge of fundraising and other resource development efforts to meet an ever expanding need for affordable health care services, Venice Family Clinic acknowledges that empowering and educating community members are some of the most important, but most difficult of its goals. In response to this need, several years ago, the Clinic worked with patients, community members and experts to develop a Department of Health Education, Promotion and Community Outreach (HEPCO) dedicated to the design and delivery of educational and supportive programs that address health literacy, fitness, nutrition and lifestyle changes that benefit not only those with chronic diseases, but also those adults, youth and children with risk factors, including smoking, alcohol use, sedentary lifestyle or obesity.

Impact: Our services positively impact 20,000 needy people each year. Were it not for the Venice Family Clinic, many of these people would have nowhere else to go for health care. For others, the delays involved in accessing County facilities would jeopardize their health. The day-to-day impact of VFC is evident in the testimonials of grateful patients, the committed service of 2,000 volunteers and more than 200 staff members and the strong relationships among them. At another level, VFC's impact is evident in terms of our leadership and strong partnerships in health service, research and advocacy across Los Angeles County and even nationally.

The Venice Family Clinic has received several prestigious awards in recognition of its outstanding services to the community, including the President's Volunteer Action Award, selected from a nationwide pool of 5,000 nominees, and the Pew Health Professions Commission Primary Care Achievement Award honoring the country's leading primary care providers, researchers and educators. Venice Family Clinic was featured in a 12-minute segment of The News Hour with Jim Lehrer titled: *Filling a Need* in February 2002. In 2004, the Clinic was one of a select few organizations recognized nationally by the American Hospital Association for its excellence in community service. In the past two years, VFC has received several awards from UCLA's Center for Community Partnerships. *The Rosenfield Distinguished Community Partnership Prize* recognizes the collaborations between UCLA faculty and its community partners for enhancing the quality of life in Southern California communities in meaningful and measurable ways. Honorees include VFC board member and UCLA faculty member, Carol Archie, MD, an obstetrician who specializes in high-risk pregnancies and Kenneth Chuang, MD, a psychiatrist and VFC volunteer who treats victims of torture and human trafficking.

Community Participation: Building on strong partnerships in the community that extend over 30 years, VFC has developed a variety of health and supportive programs that address expressed needs of the community. Examples include the Child Development Case Management Program, the Asthma Care Management Program, the Culver City Youth Health Center and the Mar Vista Gardens Clinic. The Mar Vista Gardens Clinic, in particular, exemplifies the commitment of Venice Family Clinic to community service. At a time when resources were limited to cover even existing services, VFC devised a strategy to restore health services to a public housing complex serving some of the most vulnerable residents of Los Angeles County's west side. Mar Vista Gardens Public Housing Development had been without onsite services for several years when we began working with the local resident advisory council in 2001 to assess needs and plan for an onsite clinic to be run by the Venice Family Clinic. In Spring 2003, we opened the site with bridge funding obtained through a special grant from the California Community Foundation. In 2004, we received a competitive federal grant to support ongoing primary health care services there, which will now be expanded to full-time in order to benefit about 1,500 residents and community members each year.

We pride ourselves on the high quality of our relationships and our programs, which are evaluated, in part, by feedback on our communication skills and cultural competence. In addition to the strong institutional and government partnerships we have built over the years, which were described earlier, we work with a variety of community leaders, advisory and advocacy groups representing diverse populations and communities on the west side of Los Angeles. Our Patient Advisory Council – comprised of a culturally diverse group of patients—provides a formal mechanism through which patients participate in Clinic governance and help us to design and evaluate our programs so that they are responsive and effective. In addition, VFC created one of the most innovative advocacy and planning groups in Los Angeles County in 1995 with the formation of the Westside Health Coalition (WHC), which brings together local health and social service organizations to devise shared solutions to problems of access to health care. Working through the WHC, we have conducted community-wide health planning, strengthened access to a comprehensive array of health care services, generated donated diagnostic, inpatient and community services from hospitals, developed educational resources for patients and carried out training and mutual referrals benefiting thousands of poor and uninsured men, women and children.

Financial Overview and Sustainability: Venice Family Clinic's operating budget of almost \$15 million covers a comprehensive array of primary health care and supportive programs. The budget is supported by public and private funding sources, as well as donated products and services. In addition, VFC is in the final phases of a Capital Campaign that has nearly reached its fundraising goal of \$5 million since 2000 for major renovations and equipment enhancing capacity, quality of care and efficiency at three of its primary facilities.

VFC has a strong track record within the community of developing programs and partnerships to effectively address real health problems that families and individuals face. Our sustainability is thanks to strong leadership, including a Board of Directors and Philanthropy Board whose members provide expertise, service, cash contributions and development assistance. An important source of revenue for the Clinic is the public sector, including government grants, contracts and service reimbursements. As an example, we recently were awarded a competitive multi-year grant from the Bureau of Primary HealthCare to support the delivery of onsite health services at the Mar Vista Gardens Public Housing Development. Beyond government support, what really differentiates VFC is the success of our partnerships in service delivery and our private fundraising efforts, including foundations, corporations and a high level of support by individuals through major gifts, event-related donations and endowments. The individuals who give to the Clinic include the patients we serve, who contribute what they can in donations that exceeded \$260,000 last year. Our partnerships feature strong links with individual service providers, both volunteers and those who donate services, and institutional relationships with hospitals and corporations. Volunteer services and in-kind donations are an important aspect of our resource development efforts. Since its inception, volunteers have played a central role in the Clinic's mission, identity and success. Community access to a comprehensive array of health services is possible through the dedication of nearly 2,000 volunteers in resource development and service delivery. An extensive volunteer physician workforce and specialty care network of over 500 provides services valued at over \$1 million per year. Specialty services, medications and supplies are made available through the generosity of our partners, which include hospitals, laboratories, specialty care providers and pharmaceutical companies, who donate over \$5 million in x-ray, laboratory, pharmaceuticals, surgical and emergency services annually.

HIGHLIGHTS OF INNOVATIVE, RESPONSIVE COMMUNITY SERVICE INITIATIVES

Diabetes Care Management Program

The Need—Effective Disease Management for Diabetes: Diabetes mellitus is a leading cause of disability and death in the United States. Over 200,000 Americans die from diabetes related complications each year. California has seen diabetes incidence more than double in the past decade and is home to more diabetics per capita than anywhere in the nation except for Mississippi and South Carolina. Deaths attributable to diabetes have increased by 48% in Los Angeles County since 1991. An estimated 30,000 adults living in the West Health District suffer from diabetes. Mexican-Americans, who comprise the largest Latino population in the United States, are twice as likely to have diabetes as non-Hispanic Caucasians.

Venice Family Clinic's Response—Diabetes Care Management Program: VFC has responded to the need for access to high-quality diabetes care since its earliest days as a volunteer operation. Over time, VFC board members, managers and physicians have worked to improve the quality of the care we provide and to expand and strengthen the types of educational and support services we offer to patients. Program development efforts have demonstrated the responsiveness of our Clinic to community needs, particularly for culturally competent and comprehensive disease management services that are not available free of charge elsewhere in VFC's Service Area. We have worked with researchers at Drew University, UCLA and with pharmaceutical companies such as Pfizer to design effective care management protocols, and with the Bureau of Primary HealthCare to standardize care. We have worked with the Westside Health Coalition's Diabetes Task Force and community members, themselves, to design effective curricula, health education materials and resource guides that help English and Spanish speakers of multiple races and ethnicities to better manage their diabetes. Finally, our programmatic efforts include prevention strategies for family members and for other patients at-risk of developing diabetes, particularly those who are overweight and sedentary.

The goal of the Venice Family Clinic's Diabetes Management Program is to effectively manage diabetes, prevent costly and painful complications, and reduce unnecessary hospitalizations. Physicians, nurse practitioners, nurses, health educators, social workers, medical assistants, clinic coordinators achieve this goal through early detection, individualized treatment and care management, which includes medication, testing, education, support and specialty care. A variety of educational and support services are available to diabetics, including individualized and group health education, empowerment and support groups, as well as a weight-loss group and nutrition clinic to help patients effectively manage their disease and reduce their risks. Group sessions build knowledge, skills and self-efficacy in the following topic areas: the causes and consequences of diabetes; monitoring blood sugar levels; good nutrition and stress management. Class participants share pleasant healthy activities that include work with weights, salsa dancing and guided walks. The Diabetes Care Management Program serves over 1,700 low-income and mostly uninsured patients in more than 8,000 medical, educational and support visits annually. The vast majority of patients are adult Latinos with Diabetes Mellitus Type II (DMT2), which is the result of dysregulation of insulin due to high levels of blood sugar. The program costs about one million dollars annually, and is sustained through a mix of public and private sources.

In 2001 the Venice Family Clinic joined a national quality improvement initiative for diabetes care management, the Health Disparities Collaborative. Based on Continuous Quality Improvement (CQI) principles of Deming and others, the model is a road map for incremental and system-wide change. The Bureau of Primary Health Care supports the program with training support and software—an electronic registry called the Patient Electronic Care System (PECS)—which captures detailed information about patient visits. This clinical decision support tool enables the Venice Family Clinic and individual providers to track measures of program performance and clinical outcomes, and to compare results among providers, by clinic site and to national quality benchmarks. Results show that the quality of care provided through this program is very high. Quality improvements for patients are evident in more patients being monitored more frequently for blood glucose control; more frequent check-ups for lower extremity nerve damage and retinopathy screening; vast improvements in the proportion of patients who are actively participating in their care through self-management goal setting and the use of ancillary educational and supportive services to reduce weight, increase activity and adhere to prescribed diet and medical management. Positive clinical outcomes are demonstrated by the drop, over time, of the average blood glucose levels of patients participating in the Quality Improvement Initiative.

Pharmacy Access Program

The Need—Access to Basic Medications for the Uninsured: Community clinics face challenges in procuring the necessary medications and medical supplies to treat their low-income and mostly uninsured patients. Access to free or low-cost pharmaceuticals is available through government-funded health insurance, the public health care system, a patch-work of community clinics and privately-sponsored drug programs. However, the medically indigent are not always successful in accessing physicians who prescribe the needed medications. It can be particularly difficult for uninsured adults with chronic illness to safely address their medication needs. Among the most expensive treatments are drugs to combat pain as well as chronic and terminal illness, including cancers, arthritis, asthma, diabetes, high cholesterol, gastrointestinal disorders, high-blood pressure and depression.

Venice Family Clinic's Response—Pharmacy Access Program: Venice Family Clinic's pharmacy program is unique among community clinics and is a key component of its high-quality care. Patients typically receive more comprehensive care in one visit than what is available through most commercial primary care health plans. Because basic lab and full-service pharmaceutical services are available onsite, providers at Venice Family Clinic can ensure that patients leave the Clinic with all the treatment support needed to effectively manage their care. For a patient population with multiple social, economic and environmental health risks, coupled with episodic or irregular use of preventive care, onsite pharmaceutical access will continue to be a core service need in the future. The program costs an estimated \$860,000 annually, and is supported by a mix of public and private sources.

VFC's pharmacy services are offered to all uninsured patients who meet income requirements. The Pharmacy Program is staffed by a director, four pharmacists, three pharmacy technicians, two pharmacy clerks and a pharmacy intern. Volunteer resources expand the department's capacity with donated labor from sixteen students and professionals each year. The program dispenses 100,000 prescriptions annually to the Clinic's 16,000 uninsured patients and facilitates pharmaceutical access to 4,000 more patients with prescription benefits through public insurance programs. Onsite full-service dispensaries are located at VFC's two main clinic sites. Pharmaceutical services for patients at the Clinic's two other sites and two school-based programs are managed through basic inventory and courier service.

Pharmaceuticals prescribed for patients at VFC include medications to treat a wide range of acute and chronic conditions, as well as vaccinations, contraceptives and pharmaceutical supplies. Currently, the most costly pharmaceuticals include controller and allergy medications to treat asthma, a disease that affects more than 1,000 adults and children at Venice Family Clinic. Other needed drugs include insulin and oral medications to treat diabetes; analgesics for arthritis and pain; antibiotics and anti-fungals for infections; statin drugs, diuretics, ace inhibitors and beta blockers for the prevention and management of cardiovascular disease; and anti-epileptic drugs used in the treatment of seizure disorders. Specialty pharmacy clinics at VFC include counseling, health education and medication management to reduce complications and improve the control of chronic diseases such as diabetes, asthma, heart disease, HIV/AIDS, pulmonary disease and depression; and to assist patients to reduce their dependence on tobacco through Nicotene Replacement Therapy and medical treatment available through its Smoking Cessation Clinic.

Integrated Mental Health Services

The Need—Community Mental Health Services: Mental illness affects more people than heart disease, diabetes and asthma combined. Because onset is often earlier than for other chronic conditions, the lifetime burden is greater. Anxiety and mood disorders, including major depression, are widely prevalent and can have devastating impact in reduced functioning or suicide. Those with chronic conditions, particularly when accompanied by pain and loss of functioning, are more likely to be depressed. Depression serious enough to warrant treatment affects more than sixteen percent of Americans at some point in their lives, and is a leading cause of disability throughout the world. Fewer than half of those who could benefit from treatment for depression receive adequate care.

Venice Family Clinic's Response—Integrated, Comprehensive Mental Health Services: In 1993, working with a volunteer physician active in the development of the Clinic's Homeless Health Care Program eight years prior, VFC added mental health services to its existing medical care. The program enhancement addressed a pressing need for clinical social workers to be added to the primary care team. Many of VFC's patients have multiple chronic diseases, including physical and mental health problems. The most common mental and behavioral health problems afflicting patients at Venice Family Clinic include depression, anxiety disorders and substance abuse. Additionally, there is a significant need for psychosocial support related to domestic violence, sub-clinical depression and social stress connected to poverty, homelessness, unemployment and disabilities. The program costs an estimated \$500,000 annually, mostly in salaries and benefits for clinical social workers and part-time psychiatrists. Program support consists of public service reimbursements—totaling more than half of the program budget—and private sources, including several large gifts from major donors in recent years.

The integrated mental health services model we developed at VFC responds effectively to our most vulnerable patients and their needs for a respectful, trusting and safe environment in which to address mental health problems. Sometimes, culture and lack of education serve to stigmatize mental health issues unduly, thereby leading to somatic presentation of stress and mental disorders. When these are not effectively addressed, patients avoid needed care or do not comply with recommended treatment, resulting in further deterioration. VFC's staff of clinical social workers are knowledgeable not only about psychological and physical ailments, but also about family systems, social and cultural mores and patterns of behavior that, together, are useful in understanding an individual's problems and helping him or her to heal and restore their full sense of self and humanity. Services are integrated in the sense that we treat the whole person and also from the perspective that both mental health and medical services are available onsite by simply calling to schedule a medical visit.

Primary care providers screen for mental health problems and exposure to violence and refer patients with indicated needs to the mental health department. If the need is urgent, on-call social workers are available to support the medical team. A clinical social worker conducts an intake assessment to determine the individual or couple's needs and the treatment plan. The social worker may refer the patient to in-house services such as individual counseling and/or support groups or to a psychiatrist for further evaluation and treatment. Support groups addressing a variety of problems from violence, depression or substance abuse help patients through connections with others and the safe and supportive guidance of trained clinical social workers. Psychiatrists—including several volunteers and several part-time staff psychiatrists—extend the capacity of primary care providers through consultations, diagnostic support for complex cases and medical management. Specialized treatment is available to for cases of post-traumatic stress through the Clinic's Victims of Torture Program, which is staffed by two volunteer psychiatrists whose expertise includes therapy for victims of war, social dislocation, human trafficking and other dehumanizing tragedies. Anti-depressants and other psychotropic medications are available to patients free of charge at the Clinic's onsite dispensary.

Social workers also refer patients to services available through community partners, including residential and outpatient substance abuse treatment services through CLARE Foundation or to Didi Hirsch or Edelman Community Mental Health Centers for patients with serious and persistent mental disorders such as schizophrenia and bipolar disorder. In addition, case management and coordination services ensure that those with special needs get more individualized support. Finally, preventive and supportive services offered by VFC include child enrichment and development classes and activities to support parenting, including Mommy and Me and parenting classes, as well as a Warm Line, an advice information line for parents with non-urgent parenting questions. All of VFC's social workers are bilingual in English and Spanish and several are themselves from the communities we serve.

Public Health Insurance Outreach and Enrollment Program

The Need—Strengthened Access to Health Care through Public Health Insurance: Access to primary health care continues to be an important problem in Los Angeles County as elsewhere in the nation. An estimated 44 million Americans—15% of the population—lack health insurance. The nearly two million uninsured persons in Los Angeles County are predominantly members of working class families. Latinos are twice as likely as other racial/ethnic groups to be without health insurance. Children are more likely to be insured than adults, but gaps in insurance coverage for the young persist. One million children and youth are without health insurance in California. Two-thirds of these children and youth are eligible for public health insurance programs. Venice Family Clinic's service area is home to about 56,000 low-income, uninsured persons, 12,000 of whom are estimated to be children.

Venice Family Clinic's Response—Public Health Insurance Outreach and Enrollment Program: Addressing a glaring need in L.A. County, particularly, for improved access to primary, secondary and tertiary care by enrolling eligible low-income individuals in public health insurance programs, in 1999, VFC launched its onsite health insurance enrollment program. Venice Family Clinic's Health Insurance Outreach and Enrollment Program improves access to health care for low-income families by enrolling eligible children, teenagers and pregnant women in appropriate low cost/no cost health insurance plans, which include: MediCal, Healthy Families (California's State Child Health Insurance Program) and Healthy Kids (a new program covering children in households earning up to 250% of FPL), a privately-funded health coverage demonstration project primarily serving undocumented Latino families. Currently, 22% percent of the Clinic's patients participate in MediCal, Healthy Families or Medicare. Insurance provides important benefits to patients, particularly in enhanced access to urgent care and inpatient services. At the same time, the revenues generated through service reimbursements for insured children are essential to the sustainability of the Clinic's programs. The program generates more revenues than it costs in salaries and supplies, an estimated \$140,000.

VFC has enrolled over 4,500 patients since 1999 and continues to enroll 1,000 community members per year. VFC's Health Insurance Outreach and Enrollment Program has been particularly successful in enrolling approximately 400 pregnant women each year who attend VFC for prenatal care, and helping them to get continuous coverage for their newborns, who often come to the Clinic for well-baby care. In addition, the Clinic has developed strategies enhance coverage for seniors.

The Health Insurance Outreach and Enrollment Program provides concrete and lasting benefits to the community, especially benefiting new immigrants and other vulnerable, low-income groups. The American health care system can be confusing and difficult to navigate, especially for those who are new to this country or who have never had health insurance. The Clinic's health insurance team educates patients about the value of health insurance; assists eligible patients to enroll in programs; and instructs them about covered benefits and appropriate utilization of services. Additionally, case management services are provided to ensure that beneficiaries retain their public health insurance by reminding parents about eligibility re-certification, tracking continuity of coverage and assisting families with paperwork or obstacles, when necessary. As part of a Clinic-wide patient empowerment initiative, the Health Insurance Outreach and Enrollment Program offers continuous training to patients and staff about the health care system and the importance of health insurance, not only for health access and financial risk management for low-income families, but also as a key strategy for the sustainability of the Clinic.

Community Health Training Programs

The Need—Funding Community Health Services and Training Community Physicians of Tomorrow: Community clinics burdened by a large population of uninsured patients have the critical and ongoing resource challenge of expanding care capacity to a level that meets the significant need in the community for access to affordable health care. Beyond the fact that community clinics need doctors to treat patients who cannot afford to pay them anything for their care, these clinics often treat the most vulnerable community members, whose health problems are compounded by family, cultural, social and economic issues related to immigration, poverty, lack of formal education and knowledge about health and the health care system. Young people who pursue medicine as a career are often pressed financially to forego primary care and specialize, if only as a guaranteed way to pay back their student loans. Although it is less lucrative, there is an ongoing need for primary care professionals and for those with knowledge and expertise about minority, uninsured and low-income communities. Securing additional medical capacity through the free labor of medical residents is a basic need for community clinics. What is more, these clinics have the longer-term need to develop and retain community primary care physicians for the needs of tomorrow.

Venice Family Clinic's Response: Community Health Training Programs: A community clinic like Venice Family Clinic relies on excellent, dedicated health professionals to carry out its mission on a daily basis. Many of our staff and volunteers have long relationships with us in service that started out with their rotation as an intern or resident. Venice Family Clinic (VFC) is a highly-regarded venue for professional training in community health. VFC partners with over a dozen academic institutions to offer about 30 clinical and community health training programs benefiting more than 350 students each year. Trainees include medical students, interns and residents in medical training; nursing and pharmacy students; students of social work programs; students of traditional and complementary medicine; and graduate students in public health, health education and policy disciplines. In addition, the Clinic provides important career training and development opportunities to recent college graduates through our partnerships with AmeriCorps/VISTA and Health Careers Connections. These programs cost about \$170,000 each year, if we estimate the time spent by clinicians and managers to recruit, train and monitor these efforts. Funding consists of public service reimbursements for the medical visits provided by clinical trainees and private sources.

Students who spend time at VFC improve their clinical, administrative or research skills, and they leave with a better understanding about the broader social, economic and cultural determinants of health. Students benefit from getting to know VFC's patient population—consisting mainly of poor, uninsured individuals and families, many of whom are immigrants. They gain valuable, hands-on experience in clinical care, complementary medicine, social work, health education, program evaluation and health services research. The Venice Family Clinic and the patients we serve benefit greatly from the participation of qualified, passionate students. Clinical trainees extend VFC's service capacity by providing additional patient visits. Non-clinical students undertake evaluation projects, needs assessments and other analytical projects that provide important data to VFC's Senior Management.

Our academic partners value the opportunity to offer their students practical experience in a community setting known for its high quality of care. Our academic partners in community health training include institutions such as UCLA, UCSF, USC, California State University at Long Beach, Cedars-Sinai Medical Center, Kaiser Permanente, Loyola Marymount University, Santa Monica College, Western College, Yo San University School of Traditional Chinese Medicine and Emperor's College of Traditional Oriental Medicine.

The social value of our training programs extends beyond the practical service benefits to our community. Our relationships with individuals, academic institutions and governmental agencies help to build capacity in community health; ensuring a future cadre of community health professionals with grounded knowledge and experience about the needs of low-income, uninsured and vulnerable populations. Over the course of 20 years, we have built a strong, comprehensive community health training program at VFC, which has extended our care capacity in community health and helped to train a future cadre of community health professionals. Many of our committed board, management, staff and volunteers completed clinical training at VFC, fell in love with VFC and never left.

Committed, caring relationships are at the heart of our way of doing things at VFC. Our work, organizational culture, programs and partnerships exemplify a commitment to community health service that honors the spirit of the American Hospital Association's Foster G. McGaw Prize.