

2005 Foster G. McGaw Prize

Winner:

VENICE (CALIF.) FAMILY CLINIC

When Los Angeles County opened a new health clinic in Santa Monica in 1969, low-income and uninsured Venice residents staged a protest, pointing out that they'd be two bus rides away from care. Philip Rossman, M.D., heard their complaints and promised help. A year later, he and Mayer B. Davidson, M.D., began volunteering their services at night out of a borrowed dental office in Venice.

Venice Family Clinic has come a long way since then; it is now the largest free clinic in the nation, with seven locations serving 21,000 patients. Some 77 percent of the patients at the outpatient clinic are uninsured.

"Most of our patients are hardworking people," explains clinic CEO Elizabeth Benson Forer. "Many hold more

than one job and are struggling to keep their families safe and healthy, but they have no access to health care, so the clinic has become their family doctor."

In recognition of that work, Venice Family Clinic is the winner of the 2005 Foster G. McGaw Prize for excellence in community service. The \$100,000 award is sponsored by the American Hospital Association; the Baxter International Foundation, Deerfield, Ill.; and Cardinal Health Foundation, Dublin, Ohio.

Forer is the first to say that the clinic wouldn't be successful without a lot of help. For starters, it uses the services of 500 volunteer physicians, among more than 2,000 volunteers. About \$6 million a year in donated services and

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READING RX: U.S. Rep. Jane Harman (D-Calif.) reads to children at Venice Family Clinic as part of the the Reach Out and Read program that's offered to young patients and their siblings. Children receive new books during visits, creating home libraries.

supplies augment the \$16 million annual operating budget.

The clinic also partners with numerous organizations and hospitals. Some of those relationships stretch back to the clinic's opening, such as the link with Saint John's Health Care Center in Santa Monica where Rossman had privileges.

"They wanted pharmaceuticals and supplies," says Sister Marie Madeleine Shonka, then an assistant administrator at Saint John's, "but it soon became evident their needs were far greater than that." Early on, Saint John's—located about a mile from the clinic's main facility—provided free radiology and lab work.

The link with Venice Family Clinic directly matches the hospital's mission, says Shonka, who served as Saint John's CEO from 1973 to 1996. "We have a strong commitment to care for the poor and vulnerable," she says. "There wasn't a need to duplicate what they were doing, but rather to participate in their good works."

Today, Saint John's gives \$375,000 a year to the clinic, with the money used for the salaries, support staff and supplies for two nurse practitioners, who provide about 5,000 patient visits annually. One hundred Saint John's physicians volunteer at the

clinic regularly, and Saint John's often covers inpatient services and emergency care for clinic patients. Saint John's is not alone; six other area hospitals donate services or funds. "We could not do what we do without our hospital partners," Forer says.

Venice has a unique partnership with University of California–Los Angeles. While maintaining its 501(c) status and a separate board of directors, the clinic also is a department in the university's School of Medicine. UCLA provides human resources functions, such as benefits management for staff, and medical malpractice insurance for clinic staff and volunteer physicians. In return, the clinic offers primary care training programs for UCLA and other schools, involving more than 350 students, physician residents and other health professionals annually. That also allows the clinic to provide more care than it would with its volunteers and 250 paid staff.

The clinic isn't just about direct patient care—it also provides help in accessing a full spectrum of services through its Public Health Insurance Outreach and Enrollment Program. Staff members help uninsured patients determine whether they qual-



FORTUNE FISH/DOUG HAIGHT

PRESCRIPTION FOR HEALTH: *The clinic's Pharmacy Access Program helps low-income patients with no insurance receive prescriptions at no cost using special programs offered by individual pharmaceutical manufacturers. The pharmacy director estimates the program generates \$5 million to \$6 million each year in free medicine, important for the more than 4,000 clinic patients who need multiple prescriptions.*

ify for any of four health plans. "If they qualify for an insurance program, it means they have access to specialty care and hospital care, which can be hard for them to access," Forer says.

It also helps families take ownership of their health care. "If they qualify, they are not dependent on whatever can be given to them—it gets them on the road to being self-sufficient," says Karen Lauterbach, health insurance program supervisor.

If patients go elsewhere after they have insurance, Forer says she's not insulted. "I think that's great," she says. "We cannot serve all the people with low incomes and no health insurance; if we help people find another provider, it opens the door for more people without any coverage to see us."

The program turned out to be a wise investment: For \$240,000 in annual operating costs, it generated \$1.6 million in third-party reimbursements in the last fiscal year. Since it began in 1999, the program has helped enroll more than 4,500 residents in insurance programs.

One of those residents, Carmen Thomas, found out how dedicated the staff was during her last pregnancy. A paperwork snafu was holding up Thomas's 20-week ultrasound, an important, time-

sensitive diagnostic procedure in prenatal care. A clinic staff member made phone calls for two hours until the clinic got clearance for the test, says Thomas, who is covered by public insurance. "I wouldn't have gotten the ultrasound without that," she says. "I wouldn't have known who to call."

Venice's Pharmacy Access Program helps patients receive free and low-cost medications. Patients are evaluated to see if they qualify for medications through public insurance programs. But the clinic doesn't stop there. Pharmacy technicians who are familiar with assistance programs at more than a dozen pharmaceutical firms generate applications for patients. This service keeps staff busy; nearly one-third of Venice's 14,000 adult patients need multiple prescriptions—an average of 10 to 13 prescriptions per person. Pharmacy director Sharon Ng estimates that the program generates \$5 million to \$6 million in free medicine every year.

The program works actively with 16 companies. "It's a continual process of screening," Ng says. "Who makes this product? Is there a program I can use? If it doesn't work with one company, we go to another." What patients can receive depends on their



NUTRITIONAL KNOW-HOW: A nurse counsels a diabetes patient on what to eat. If providers can teach the grandmother in a Latino family about diet and exercise, the health of several generations can improve, says Margarita Loeza, M.D., who helps manage the diabetes program.

incomes, number of people in their households and other factors. “If a patient is on numerous medicines, it’s a lot of paperwork,” Ng says. “A doctor’s office would never want to do all of this—that’s why they have us.”

The pharmacy program makes Venice Family Clinic a one-stop shop where patients can see a doctor, have lab tests done and get medications. “A homeless person with only \$5 is not going to spend it for medicine,” she says. “Now, we have a better chance that he or she will get the treatment they need.”

WORKING TOGETHER

Another way the clinic expanded access was by taking over administration of two county clinics slated to close in 1995—one of which was the Santa Monica clinic where in 1969 Rossman pledged to help Venice residents. The two county clinics treated some 7,000 residents who probably would have gone without care if the facilities closed.

To staff the clinics, Forer convened a group of four local hospitals and three clinics to launch the Westside Health Coalition.

“My idea was to make a health care soup, with everyone at the table putting in whatever services they could,” she says. UCLA, for one, committed enough medical school faculty and residents to staff one of the facilities, and more for an existing facility, allowing Venice Family Clinic to move staff to one of the county clinics. “In six weeks, we were able to take over the two facilities and we didn’t have to hire a single doctor,” Forer says.

Today, the coalition is 40 members strong and includes social service agencies, school districts and governmental agencies. One of its recent efforts resulted in a diabetes care directory that lists all the low-cost and no-cost services and resources in the area. “The coalition allows us to collaborate,” says Marcela Tetta, Venice director of health education, promotion and community outreach. “We know what everyone is doing and it prevents duplication of efforts.”

A PERSONAL TOUCH

Getting patients in the door isn’t the only concern at Venice. Providing quality care also takes center stage. One example: the



DIABETES CARE: *A doctor examines the feet of a diabetes patient. By teaching patients how to care for their feet, clinicians hope to avoid amputations. Through the Diabetes Care Management program, doctors track vital signs in a computerized registry and patients can receive counseling about their condition.*

Diabetes Care Management Program. Launched five years ago, the program is based on continuous quality improvement principles and includes an electronic registry that captures detailed information about patient visits. The registry of 1,705 patients is one of the largest on the West Coast.

“We are able to give a higher level of care because we have more information at our fingertips,” says Margarita Loeza, M.D., who helps manage the program. “Instead of one set of vital signs, you can view the patient’s history.” The registry helps doctors see when it’s time to give patients foot and eye exams, and helps them

coax patients to set self-management goals. A nurse practitioner conducts group meetings with patients to teach them what their lab results mean, and how to provide foot care so patients might avoid amputation. Venice clinical pharmacists meet one-on-one with diabetic patients referred by their doctors to discuss diet, exercise and how to take medications.

These efforts get patients to take ownership of their condition “Now they ask, ‘What were my numbers last time?’ and think about ways to keep their blood sugar down,” Loeza says. The percentage of diabetic patients with self-management goals increased from 5 percent to 96 percent during the first two years of the program. At the same time, average blood glucose levels for these patients dropped.

Loeza often works with Latina women, who are a linchpin in their families. Grandmothers often prepare meals and care for grandchildren. “If we can target these women, we can change generations of families,” Loeza says. And she’s out to prove that by understanding their culture, clinicians can help the women reach their medical goals. For instance, Loeza says that a poor, Latina mom is unlikely to enroll in a yoga class, but after dropping off the kids at school, she will walk additional blocks for the exercise.

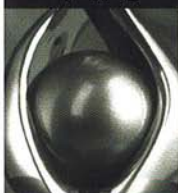
THE WHOLE PERSON

Venice Family Clinic’s ambitious goals extend beyond clinical and wellness programs. It encourages a love for reading and learning through its Reach Out and Read Program, which distributes thousands of books each year to children and teens coming for clinic visits. Pediatricians give children an age-appropriate book during each visit and give parents a “prescription” to read to their kids. At the clinic’s two largest sites, volunteers read to young patients and their siblings in the waiting room.

“The number of books they accrue from ‘well child’ visits is astonishing,” Forer says. “It builds a library they often couldn’t afford.” And the books can benefit the whole family: Forer once saw a woman practicing her English by reading her son’s book.

In addition to reading, volunteers play with children and lead art projects for several hours a week in rooms adjacent to waiting areas. “The minute you come in, the children have their faces pressed against the glass, ready to start,” says Lisa Conley, pediatric literacy and play area coordinator. It’s an opportunity for

THE 2005 FOSTER G. MCGAW AWARD FINALISTS



*Each will receive
a \$10,000 prize*

- Franklin Community Health Network in Farmington, Maine
- Healthy Communities Initiative of Bartholomew County in Columbus, Ind.
- Pitt County Memorial Hospital in Greenville, N.C.

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MARGARET MOLLOY/VENICE FAMILY CLINIC

GETTING THE MESSAGE OUT: The clinic holds a health fair for local residents to inform them about the clinic's comprehensive services. It's the principal provider of free health care services in western Los Angeles County and serves 21,000 patients, 77 percent of them uninsured.

parents to see their children's imaginations at work, says Conley, and learn about activities they can do at home: reading or art projects with household items. "Although they come here for health care, we want to enrich the whole child."

TOUCHING LIVES

Although the number of patients it serves and other statistics illustrate the value of the Venice Family Clinic, Forer says it is individual success stories that make the work most gratifying.

Forer frequently meets with graduate students who are working on health care leadership projects. One such student, a middle-aged man, came in to interview her. She was about to give him the clinic tour, when he stopped her saying he knew his way around the clinic—he'd been a patient there for 10 years. "You probably don't recognize me," he told Forer. "I was a home-

less drug addict and weighed 100 pounds more than I do now."

Whenever he sought care at the clinic, the doctor who treated him, Susan Fleischman, M.D., always encouraged him to get clean. One day, staff found he needed heart bypass surgery, which Fleischman arranged.

That was a turning point. "He thought, 'If Dr. Fleischman believes in me so much to get me this very expensive surgery, and the taxpayers have invested all this money in my heart, I need to clean up my act,'" Forer says.

After the surgery, the patient sought care and counseling at the clinic after his surgery. He quit drugs cold turkey, got a job and eventually went to graduate school for a counseling degree.

"Stories like these show the clinic makes a difference," says Forer. "As Dr. Rossman said, 'Medical care given with compassion and dignity heals much more than the physical person.'" ●

THE 2005 FOSTER G. MCGAW AWARD WINNER



VENICE (CALIF.) FAMILY CLINIC