

MemorialCare_™



Annual Report and Plan for Community Benefit
Miller Children's & Women's Hospital Long Beach
Fiscal Year 2025 (July 1, 2024 - June 30, 2025)
HCAI Hospital ID: 106196168

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Accounting and Reporting Systems Section
Sacramento, California

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About Miller Children's & Women's Hospital Long Beach

MemorialCare

MemorialCare is a nonprofit integrated health system that includes four leading hospitals – Miller Children's & Women's Hospital Long Beach, Long Beach Medical Center, Orange Coast Medical Center, and Saddleback Medical Center; award-winning medical groups – MemorialCare Medical Group and MemorialCare Independent Physicians; Select Health Plan; and multiple outpatient health centers, urgent care centers, imaging centers, breast centers, ambulatory surgical centers, physical therapy centers and dialysis centers throughout Orange and Los Angeles Counties.

Miller Children's & Women's Hospital Long Beach

Miller Children's & Women's Hospital Long Beach (MCWH) is a nonprofit, pediatric teaching hospital that provides specialized pediatric care for children and young adults, and maternity care for expectant mothers. It is one of only eight free-standing children's hospitals in the state of California. The hospital has 357 licensed beds and is located on a 54-acre campus it shares with Long Beach Medical Center. These hospitals function under the same tax identification number but are separately licensed hospitals.

Patient and family-centered care is a cornerstone of MCWH. It is the only hospital in the region to have a level IV maternity center and a comprehensive level IV NICU to provide specialized care for expectant mothers and their babies. MCWH also has comprehensive outpatient specialty centers. These centers provide specialized care for children with conditions such as asthma, irritable bowel syndrome, bone deformities, congenital heart defects, autism, cancer and blood disorders.

Awards

MCWH is the recipient of the following awards and accolades:

- U.S. News & World Report "High-Performing" in Maternity Care
- Received the Disease Specific Certification in Pediatric Asthma from The Joint Commission.
- Baby-Friendly® designation ranked in top 10% of US hospitals and birth centers by Baby-Friendly USA, Inc.
- U.S. Green Building Council LEED (Leadership in Energy and Environmental Design) Gold Certified.
- EEG Laboratory Accreditation Board of ABRET (LAB-EET) Five-Year Accreditation (2025)
- Press Ganey Human Experience Pinnacle of Excellence Award® for the third consecutive year.
- Magnet® designation by the American Nurses Credentialing Center's (ANCC) Magnet Recognition Program® for nursing excellence.

- BlueDistinction ® Center Maternity Care by Blue Shield
- Becker's Hospitals Great Oncology, Orthopedic, Spine, and Neurology Programs
- Holds Full Accreditation from American College of Surgeons Commission on Cancer, 1 of only 10 children's hospitals in U.S.

Mission and Values

Mission

To improve the health and well-being of individuals, families and our communities.

Vision

Exceptional People. Extraordinary Care. Every Time.

Values

The iABCs of MemorialCare

The iABCs are a statement of our values—Integrity, Accountability, Best Practices, Compassion and Synergy. They remind us of our commitment to the highest standard of patient care and the active communication of clinical outcomes.

> Integrity

Always holding ourselves to the highest ethical standards and values. Doing the right thing, even when no one is watching.

> Accountability

Being responsible for meeting the commitments we have made, including ethical and professional integrity, meeting budget and strategic targets, and compliance with legal and regulatory requirements.

Best Practices

Requires us to make choices to maximize excellence, and to learn from internal and external resources about documented ways to increase effectiveness and/or efficiency.

Compassion

Serving others through empathy, kindness, caring and respect.

Synergy

A combining of our efforts so that together we are more than the sum of our parts.

Governance

The MemorialCare Miller Children's & Women's Hospital Long Beach and MemorialCare Long Beach Medical Center Board of Directors guides the direction of community benefit, with assistance from the Community Benefit Oversight Committee (CBOC).

FY25 Board of Directors

Barry S. Arbuckle, PhD Torin Cunningham, MD Gary DeLong
John R. Fielder, JD, MBA
Karyn Scissum Gunn, PhD
Cynthia Herzog, MD
Jennifer A. McNulty, MD
Braden Phillips
Robert F. Schack, MBA
Darick J. Simpson
Mike Van Dyke, CIMA, CFP, Chair
James H. Wells, MD
Susan E. Anderson Wise, JD
Andrew Wittenberg, MD, MPH, FACEP, Secretary

Community Benefit Oversight Committee

The CBOC (Community Benefit Oversight Committee) is an advisory committee for the hospital's community benefit programs and reports to the Strategy Committee and the Board of Directors. The CBOC reviews and validates legal and regulatory compliance specific to community benefit mandates, assures community benefit programs and services are effectively meeting identified community health needs, with emphasis on populations with unmet health needs, and increases transparency and awareness of community benefit activities. The CBOC was consulted on the development of the community benefit plan.

The members of the MCWH CBOC include:

- Lynnette Bello, Welcome Baby Program, Miller Children's & Women's Hospital
- Sylvia Betancourt, Long Beach Alliance for Children with Asthma
- Odrin Castillo, DO, MPH, Long Beach Memorial Family Medicine Residency Program
- John Fay, MSG, MemorialCare Health System
- Wilma Figueroa, MPH, Long Beach Department of Health & Human Services
- Romeo Hebron, Jr., Filipino Migrant Center
- Kathryn Miles, Tichenor Clinic for Children
- Ha Nguyen, Long Beach Department of Health & Human Services
- Kristen Pugh, MPA, MemorialCare Health System
- Nancy Riano, RN, PHN, MSN, FNP-BC, Long Beach Department of Health & Human Services
- James Suazo, Long Beach Forward
- Shiraya Thompson, MS, Long Beach Department of Health & Human Services

Caring for our Community

This report demonstrates tangible ways in which MCWH fulfills its mission to improve the health and wellbeing of our community and provide extraordinary care. MCWH provides financial assistance to those who cannot afford services, or whose health insurance does not cover all services rendered. In addition, MCWH invests in the community to increase access to health care services and improve health.

Service Area

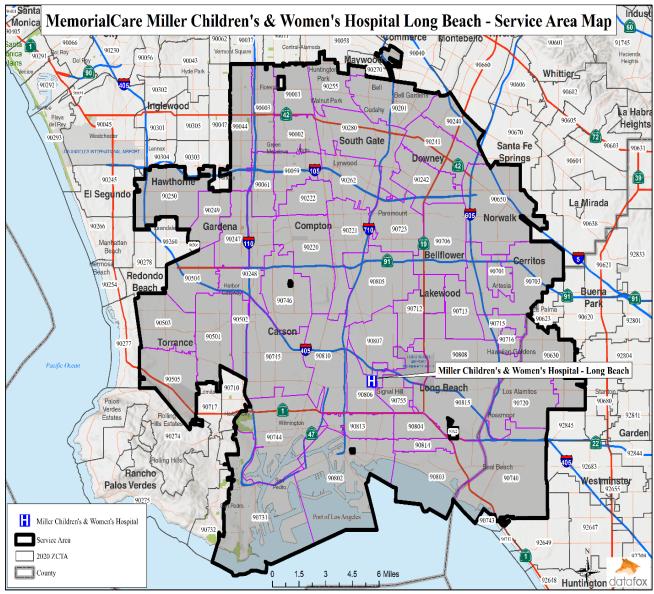
MCWH is located at 2801 Atlantic Avenue, Long Beach, California. The service area is in Los Angeles County and Orange County and includes 53 ZIP Codes, representing 25 cities or communities. Inpatient admissions were calculated over three calendar years (2021-2023) and 81.7% of total inpatient ZIP Codes were used to determine the service area.

The 50 ZIP Codes in Los Angeles County comprise portions of Los Angeles County Service Planning Areas (SPAs) 6, 7 and 8. The hospital service area is detailed below by community and ZIP Code.

Miller Children's & Women's Hospital Long Beach Service Area

Place	ZIP Code	Service Planning Area
Artesia	90701	7
Bell Gardens	90201	7
Bellflower	90706	7
Carson	90745, 90746	8
Cerritos	90703	7
Compton	90220, 90221, 90222	6
Cypress	90630	N/A – Orange County
Downey	90240, 90241, 90242	7
Gardena	90247, 90248, 90249	8
Hawaiian Gardens	90716	7
Hawthorne	90250	8
Huntington Park	90255	7
Lakewood	90712, 90713, 90715	7
Long Beach	90802, 90803, 90804, 90805, 90806, 90807, 90808, 90810, 90813, 90814, 90815	8
Los Alamitos	90720	N/A – Orange County
Los Angeles	90001, 90002, 90003, 90044, 90059, 90061	6
Lynwood	90262	6
Norwalk	90650	7
Paramount	90723	6

Place	ZIP Code	Service Planning Area
San Pedro	90731	8
Seal Beach	90740	N/A – Orange County
Signal Hill	90755	7
South Gate	90280	7
Torrance	90501, 90502, 90503, 90504, 90505	8
Wilmington	90744	8



Map created by DataFox - drive.armstrong@dataFoxlid.com - P: (570) 768-2265 - September 2024

Community Snapshot

MCWH conducted its most recent Community Health Needs Assessment (CHNA) in FY25. The population of the MCWH service area is 2,461,825.¹ Children and youth make up 23.8% of service area population, 63.5% are adults, and 12.7% are seniors, 65 years and older.² The largest portion of the population in the service area identifies as Hispanic or Latino residents (59.1%), White residents make up 14.4% of the population, 11.9% are Asian residents, and Blacks or African American residents comprise 11.2% of the population.³ Among service area residents, 40.3% of the population, ages 5 and older, speak only English in the home. Among the area population, 48.7% speak Spanish in the home, 8.2% speak an Asian or Pacific Islander language, and 1.9% speak an Indo-European language in the home.⁴

In the service area, 25.3% of adults, age 25 and older, have not graduated high school, which is higher than the county (19.7%) and state (15.6%) rates.⁵ Among service area residents, 95.4% of children, ages 18 and younger, have health insurance.⁶

Vulnerable Populations

- In the service area, 24.5% of the population, ages five and older, speaks English "less than very well" and are considered linguistically isolated.⁷
- Among area residents, 14.8% are at or below 100% of the federal poverty level (FPL) and 35.4% are at 200% of FPL or below (low-income).⁸
- In the service area, 20.9% of children and 31.5% of female head of households with children live in poverty.⁹
- In 2024, the point-in-time count of homeless people in Long Beach was 3,376 individuals.
 96.9% were adult individuals, and 3.1% were family members with at least one child under age 18.¹⁰
- In Service Planning Area 7, 3% of the teen population identify as transgender or gender non-conforming, while 26.9% said that others at school would describe them as gender nonconforming.¹¹
- 12.1% of SPA 6 children, 12.3% of children in SPA 7 and 16.6% in SPA 8 were reported by their caretakers to meet the criteria of having a special health care need, which is defined

¹ U.S. Census Bureau, American Community Survey, 2013-2017 & 2018-2022, DP05. http://data.census.gov

² U.S. Census Bureau, 2018-2022 American Community Survey, DP05. http://data.census.gov/

³ Ibid

⁴ U.S. Census Bureau, 2018-2022 American Community Survey, DP02. http://data.census.gov/

⁵ U.S. Census Bureau, 2018-2022 American Community Survey, DP02. http://data.census.gov/,

⁶ U.S. Census Bureau, 2018-2022 American Community Survey, S2701. http://data.census.gov/

⁷ U.S. Census Bureau, American Community Survey, 2018-2022, DP02. https://data.census.gov/

⁸ U.S. Census Bureau, American Community Survey, 2018-2022, S1701. http://data.census.gov/

⁹ U.S. Census Bureau, 2018-2022 American Community Survey, S1701 & *S1702. http://data.census.gov/
¹⁰ https://www.longbeach.gov/homelessness/annual-homeless-count/

¹¹ California Health Interview Survey, 2019-2022 combined. https://healthpolicy.ucla.edu/our-work/askchis/

- as dependency on prescription medications, service use above that considered usual or routine, and/or a functional limitation. ¹²
- In the hospital service area, 7.2% of residents receive SSI benefits (compared to 5.9% for California), 4.9% receive cash public assistance income (compared to 3.7% for California), and 14.3% of residents receive food stamps benefits (compared to 10.3% for California).¹³
- The California Healthy Places Index (HPI) is a measure of socioeconomic need that is correlated with poor health outcomes. For community benefit purposes, California defines vulnerable populations living in areas with inadequate access to clean air and safe drinking water, as defined by an environmental HPI score of 50% or lower. The hospital service area ZIP Codes have an HPI score for clean environment of 34.7%.¹⁴

¹² Los Angeles County Department of Public Health, Office of Health Assessment and Epidemiology, Los Angeles County Health Survey, 2023. http://www.publichealth.lacounty.gov/ha/LACHSDataTopics2023.htm

¹³ U.S. Census Bureau, American Community Survey, 2018-2022, DP03. http://data.census.gov

¹⁴ Public Health Alliance of Southern California, the California Healthy Places Index (HPI) Map, accessed October 26, 2024. https://healthyplacesindex.org

Community Health Needs Assessment

The CHNA is a primary tool used by the hospital to determine its community benefit plan, which outlines how it will give back to the community in the form of health care and other community services to address unmet community health needs. The CHNA adheres to California Senate Bill 697 and the Patient Protection and Affordable Care Act through IRS section 501(r)(3) and is conducted every three years by the hospital. The assessment incorporated components of primary data collection and secondary data analysis that focused on the health and social needs of the service area. The report includes benchmark comparison data that measure the data findings as compared to Healthy People 2030 objectives. Healthy People 2030 is a national initiative to improve the public's health by providing measurable objectives that are applicable at national, state, and local levels.

MCWH, in partnership with the Long Beach CHNA Collaborative¹⁵, conducted targeted interviews to gather information and opinions from people who represent the broad interests of the community served by the hospital. Twenty-five (25) interviews were completed from November 2024 to February 2025. Leaders and/or representatives of medically underserved, low-income, minority populations, as well as local health or other departments or agencies that have current data or other information relevant to the health needs of the community, were represented in the sample. Input was obtained from the Los Angeles County Department of Public Health and the City of Long Beach Department of Health and Human Services. In addition, the collaborative engaged fifty-five (55) individuals in six (6) Listening Sessions between February 2025 and March 2025. These community Listening Session participants included Latinx communities, Black and African American communities, immigrant and refugee communities, LGBTQIA2S+ communities, disabled and veteran communities, and unhoused and homeless communities.

Significant Community Health Needs

Significant health needs were identified through a review of the secondary health data and validation through stakeholder interviews and Listening Sessions. The identified significant health needs included:

- Access to health care
- Birth indicators
- Chronic diseases
- Economic insecurity

¹⁵ The Collaborative members included Long Beach Department of Health and Human Services, MemorialCare Long Beach Medical Center, MemorialCare Miller Children's & Women's Hospital, Dignity Health St. Mary Medical Center and TCC Family Health, a Federally Qualified Health Center.

- Environmental pollution
- Food insecurity
- Housing and homelessness
- Mental health
- Overweight and obesity
- Preventive practices
- Racism and discrimination
- Substance use
- Violence and injury prevention

Prioritization of Health Needs

The identified significant health needs were prioritized with input from the community. The interview respondents ranked access to health care, mental health, chronic disease, housing and homelessness, and substance use as the top five priority needs in the service area. Among Listening Session respondents, access to health care, mental health, housing and homelessness, racism and discrimination, chronic disease, and food insecurity had the highest scores as priority needs in the community.

The complete CHNA report and the prioritized health needs can be accessed at www.memorialcare.org/about-us/community-benefit . To provide feedback on the CHNA and Implementation Strategy, please contact: communitybenefit@memorialcare.org .

Addressing Priority Health Needs

In FY25, MCWH engaged in activities and programs addressing the priority health needs identified in the FY23-FY25 Implementation Strategy. MCWH has committed to community benefit efforts addressing access to care, chronic diseases, behavioral health (mental health and substance use), pregnancy and birth outcomes, and preventive practices with a focus on the social drivers of health, and health equity. Selected activities and programs highlighting MCWH's commitment to the community are detailed below.

FY23-FY25 Priority Health Need: Access to Care and Preventive Practices

Access to care is a key determinant of health that provides preventive measures and disease management, reducing the likelihood of hospitalizations and emergency room admissions. Preventive health care includes screenings, check-ups, and counseling to prevent illness, disease, or other health problems. Individuals who receive services in a timely manner have a greater opportunity to prevent or detect disease during earlier, treatable stages.

Response to Need

Children's Dental Health Clinic

The MCWH community benefit grant program provided funding for the Early Intervention Program (EIP), which provided comprehensive dental care to children ages 0-5. The program consisted of private, 30-minute sessions with patients and their families, providing dental screenings and cleanings, oral health and nutritional counseling, and fluoride applications. In FY25, 489 high-risk young patients and their families were provided with dental services.

Financial Assistance

The Patient Financial Assistance Program was available to everyone in the community. This included people without health insurance, as well as patients with insurance who were unable to pay the portion of their bill that insurance did not cover. Patient Financial Services assisted community members with the financial assistance programs.

Health Education, Resources and Community Outreach

MCWH provided support and services for community residents that removed barriers to care and increased access to health care and preventive measures. General health and wellness education, back-to-school events, social media postings, blogs, podcasts, and informational articles were presented on topics that included: accessing health care, antibiotics, child health, nutrition, flu and RSV, hearing loss, bug bites, measles, motion sickness, childhood obesity, immunization tips, preventive check-ups, CPR and first aid, speech and language development, ultra processed foods,

and injury prevention. In FY25, over 904,598 community engagements were provided.

A health care transition presentation reached 26 foster youth on topics that included navigating the health system successfully, life skills, adulting and health choices, reproductive health, and medical education training.

Injury Prevention

MCWH participated in community events that promoted family safety, car seat literacy, water safety, pedestrian information, and bicycle and helmet safety. Information was available in English and Spanish. Over 72,458 community members received information on injury prevention.

KinderFest

MCWH provided education and outreach to 200 staff and families associated with the Long Beach Unified School District. Participants were educated on the importance of early intervention for developmental delays.

Newsletters

The *CareConnection* quarterly newsletter was made available to community residents to provide health education messages and notify the community of free classes, support groups, and screenings offered by the hospital. Newsletters were mailed to households, and the information was also posted on the website at https://www.memorialcare.org/blog.

Outpatient Specialty Centers

The Cherese Mari Laulhere Children's Village opened in 2021. It is the only building of its kind in Los Angeles and Orange Counties to offer a one-stop-shop approach to outpatient specialty care for kids. In one kid-friendly location, families have access to specialty clinics and pediatric doctors in more than 25 specialties, as well as a range of health care services, such as a laboratory, pharmacy, imaging, occupational therapy, physical therapy, and speech therapy. Family support services, including an Education Center and Family Resource Center, are also available at this location.

The Outpatient Specialty Centers at MCWH are a major referral center for outpatient pediatric specialty care and has 18 California Children Services (CCS) approved specialty care centers. Patients typically qualify for CCS by medical diagnosis, complexity of their disease, and financial status.

Some of the clinics include hematology, oncology, food allergy, developmental, cardiology, endocrine, neurology, renal, pulmonary, orthopedics, and rheumatology. Children are seen at the

Outpatient Specialty Centers for consultations, as well as treatments for acute, chronic or surgical conditions. Outpatient Specialty Centers are known for serving as the medical home for many patients who will need ongoing follow-up care and support. Each specialty center, or clinic within the center, has a multi-specialty care team, with subspecialists, fellows, residents, advanced practice nurses, registered nurses, child life specialists, social workers, nutritionists and other health professionals.

In addition, the Stramski Children's Developmental Center is an outpatient special needs center that helps children and families effectively address autism, ADHD, birth defects, learning problems, and other developmental delays. This location offers specialized care for sleep disorders and Fragile X syndrome.

Social Drivers of Health

MCWH screened patients for Social Drivers of Health (SDOH), determining if community members needed referrals and resources. In FY25, 10,417 patients were screened. To support community members in need of assistance with SDOH, MemorialCare supported the website FindHelp.org, a free web-based platform that connected individuals with location-based community programs offering free or reduced-cost services including food, housing, health care, and transportation.

Support Services

The hospital offered services to increase access to care and support preventive health care.

- Transportation was provided to families who could not easily access medical care and appointments.
- Provided free prescriptions, home health medications, recuperative care and/or medical equipment for children in need.

The Family Resource Center

The Family Resource Center is a place for families raising children with special needs to find knowledge and support as they navigate through their health care journey. The Family Resource Center provided parent-to-parent support, workshops and trainings, referrals to community resources, and informational books, brochures, and videos. Programs and activities included:

- Training on language disorders was offered online to 429 individuals. Eleven sessions
 covered language disorders, diagnosis, language development, pragmatics, and strategies
 to increase language use.
- The Community Navigator program provided 275 parents with strategies and techniques to improve communication skills with their child's school team and medical providers.
- The Spanish autism support group met monthly, and 124 parents participated. The support

group provided parental support, education and resources via Zoom.

- Nearly 3,000 families were provided with outreach and education materials at more than 10 community events.
- Three Back to School events reached 860 children with backpacks and vaccinations.
- The local public library served as a meeting place to reach 470 families with outreach activities and resources.
- Training in understanding the Special Education System and how to request certain assessments assisted 24 parents.
- 1:1 consultation was provided to 44 parents to review their child's Individual Education Plans (IEPs) and discuss concerns.
- A blog on understanding ADHD reached 39,200 caregivers.

FY23-FY25 Priority Health Need: Behavioral Health (Mental Health and Substance Use)

Positive mental health is associated with improved health outcomes. The need to access mental and behavioral health services was noted as a high priority among community members.

Response to Need

Behavioral Health Integration Program

MemorialCare recognizes that physical and mental health should be coordinated in primary care settings. As a result, the Behavioral Health Integration (BHI) program is included in all the MemorialCare Medical Group Primary Care sites of care throughout our service area. Primary care practitioners screen for mental health conditions and coordinate care options for patients with behavioral health needs. The program includes:

- An embedded clinical social worker at each location
- Referral to needed services
- Telehealth visits to patients enrolled in the program
- Online patient self-management tools

Family Medicine Clinic

The MemorialCare Family Medicine Clinic provided a Behavioral Health Clinic to train Family Medicine residents in a team-based approach. At the clinic, residents participated in a multidisciplinary approach to treating anxiety and depression, as they worked alongside a Family Medicine attending, a community psychiatrist, a social worker, a psychologist, and a therapist. In FY25, 272 children and youth received psychotherapy from licensed clinical psychologists.

Long Beach Bar Foundation

The MCWH community benefit grant program provided funding to the Long Beach Bar Foundation

for the Juvenile Emotional Management (JEM) Program. JEM is a six-week trauma informed initiative designed to teach at-risk youth and underserved youth to identify, express, and manage their emotions. In addition, the program supported parents with strategies to address mental health and overall social and emotional wellbeing and to have a stronger voice in the lives of their children, reduce stress and high-risk behaviors such as substance abuse, mental illness, school problems and underlying health conditions. In FY25, 116 youth and their families completed the JEM program.

Mental Health Education and Resources

Outreach, education classes and therapy sessions increased awareness of mental health issues and connected area residents with available resources. A mindful parenting and gratitude in family relationships blog reached 287,551 people.

- Pediatric trauma education reached 23 parents.
- Psychologists completed 73 neuropsychological assessments.
- 25 students received school reintegration assistance through school visits and recommendation letters.
- Licensed clinical psychologists provided psychotherapy to 57 individuals.
- Art therapy sessions were provided for 150 kids at the Jonathan Jaques Children's Cancer Institute.
- Hosted a youth mental health forum.

Mental Health Services

MCWH increased its capacity to provide critically needed mental health screening, assessments and targeted mental health intervention by licensed psychologists for children who visited the outpatient centers for neurological, pulmonary, and endocrine related needs. The mental health resources were offered through a collaboration between MCWH and The Guidance Center (TGC). TGC is a community-based organization that provides comprehensive mental health treatment to the community's most disadvantaged children and their families.

FY23-FY25 Priority Health Need: Chronic Diseases

Chronic diseases are long-term medical conditions that tend to progressively worsen. Chronic diseases, such as asthma, cancer, heart disease, diabetes and lung disease, are major causes of disability and premature death.

Response to Need

Bickerstaff Pediatric Family Center

The Bickerstaff Pediatric Family Center at MCWH cared for infants, children, adolescents, and

pregnant women who were at risk for, or infected with, HIV/AIDS, acute community-acquired illnesses, chronic infections, and other immunological disorders. Board-certified infectious disease physicians and the care team also advised on immunization and infectious disease prevention.

Health Education, Resources and Community Outreach

MCWH provided 574,283 encounters for health education classes, community events, videos, social media posts, newsletters, and information flyers that focused on chronic disease prevention, management, and treatment. Presentations and information were provided on cancer, epilepsy, celiac disease, GERD, sleep disorders, asthma, healthy school lunches, scoliosis, vaccinations, congenital heart disease, seizure preparedness, choking hazards, and virtual care.

Jonathan Jaques Children's Cancer Institute

The Jonathan Jaques Children's Cancer Institute at MCWH provided comprehensive, family centered care to children with cancer, sickle cell disease and other serious blood disorders. Children accessed the latest clinical trials and research initiatives, leading to improved cure rates and breakthroughs in treatments of childhood cancers and blood disorders.

Long Beach Alliance for Children with Asthma

The mission of the Long Beach Alliance for Children with Asthma (LBACA) is to improve the health, wellbeing, and lives of children with asthma in the Greater Long Beach Region, and that of their families and communities. Children in the Long Beach region bear a heavier asthma burden due to their proximity to pollution-generating infrastructure. This includes low-income communities near the ports of Los Angeles and Long Beach and multiple heavily trafficked freeways.

LBACA works to mitigate negative impacts on health and wellbeing on children with asthma and their families using a child-centered approach that focuses on empowerment through knowledge. LBACA's goal of improving the quality of life for children and their families includes a reduction in preventable hospitalizations, emergency department visits, and school and work absences due to asthma, along with measurable overall quality of life enhancements.

At the heart of LBACA's work is the Community Health Worker (CHW) program, which provided preventative education to help reduce the negative impacts of uncontrolled asthma on children and families. This education and care was delivered in multiple cultural and linguistic contexts. LBACA also educated medical and school personnel, as well as other community-based groups who interact with children with asthma and their families. This improved basic asthma knowledge, awareness of local resources, effective communication, and the identification of patients eligible for referral to LBACA's program.

For the past 25 years, LBACA has served over 6,000 children and their families, and trained over 800 physicians, nurses, and respiratory therapists. The program results in fewer missed school days due to asthma, translating to fewer missed workdays for adults, reduced use of the ER for asthma care, and a decrease in hospitalizations due to uncontrolled asthma.

Support Groups

Support groups provided over 670 encounters for new parents, families and caregivers of children with asthma, autism, cancer and those with special needs. *Unidad y Fuerza* (Unity and Strength), a Spanish support group provided support, education, and resources for families with special needs children.

Tichenor Clinic for Children

The MCWH community benefit grant program provided funding to the Tichenor Clinic for occupational therapy services for children from birth to 18 years who have a disability. The program prepared children and teens for school activities and social interactions outside of the home. Specifically, the program provided interventions that support a child's development of skills (e.g. physical, cognitive, social-emotional) to ensure successful participation across daily routines, activities, and environments. In FY25, 134 children and their families received services.

FY23-FY25 Priority Health Need: Pregnancy and Birth Outcomes

Pregnancy complications and adverse birth outcomes are growing public health concerns. Birth outcome measures show the status of reproductive health across populations and can be used to examine disparities in maternal and child health. Important pregnancy and birth outcomes include neonatal mortality, stillbirth, long-term neurologic problems, and maternal mortality.

Response to Need

Birth Equity

Maternal morbidity and mortality data in California show persistently higher rates among Black mothers when compared to mothers from all other racial groups. MCWH teams have participated in building a birth equity toolkit with the California Maternal Quality Care Collaborative (CMQCC). MCWH implemented an evidence-based implicit bias program for its health care providers involved in perinatal care of patients. In addition, a patient survey tool is used to inform and monitor equity work with a focus on awareness and reduction of implicit bias.

Most recently, MCWH was the first California hospital to participate in a pilot program with the Irth app to develop new standards of prenatal and postpartum care and quality improvement based on the feedback of Black and Brown families. To date, the pilot at MCWH has demonstrated

a nearly a 10% increase in Black moms sharing that they always feel like they're treated with courtesy and respect.

BreastfeedLA

The MCWH community benefit grant program provided funding for BreastfeedLA to provide culturally responsive breastfeeding support, education and postpartum care for African American, Latinx and AAPI families. Lactation clinics provided free peer-to-peer support on infant feeding goals, stress management, mental wellbeing, and practical life skills. Other offerings included nutrition education, maternal massage, chiropractic care, support groups, yoga meetups, journaling, sound bath meditation, and referrals to resources. In FY25, 488 mothers were served.

Health Education, Resources and Community Outreach

MCWH provided health information and services for community residents that removed barriers to prenatal and postnatal care and increased access to maternal and infant health care.

- A board-certified lactation consultant discussed breastfeeding preparation and success factors with 834 individuals.
- A preconception planning blog reached 113,925 people.
- Over 1,620 pregnant women and their families participated in childbirth preparation and prenatal classes, regardless of where they chose to deliver, and accessed maternal health materials.
- Nurturing the "New You", a weekly support group taught infant massage techniques, transitioning into motherhood, and increasing a parent's ability to respond optimally to baby's needs. 120 community members participated.
- A Perinatal Bereavement support group met twice a month for parents who had lost an infant during pregnancy (through miscarriage or stillbirth) or shortly after birth. 240 encounters were provided.
- Provided outreach materials on delivery and birth education to 500 families at the March for Babies.
- Offered car seat education classes in English and Spanish to 40 parents.

MemorialCare provided anytime, anywhere education for expectant mothers through YoMingo®, a maternity education app, available in 18 languages. YoMingo® provides evidence-based information on prenatal care, labor and birth, postpartum, breastfeeding, and newborn care, including numerous educational videos. The app also provides information on available classes, a kick counter, contraction timer, personal journal, feeding log, and immunization log.

Welcome Baby

Welcome Baby provides pregnant women and new moms with information, support and a trusted partner to help them through the journey of pregnancy and early parenthood. Available at no cost to women who reside in Los Angeles County, the Welcome Baby continuum of care included breastfeeding support, referrals to community resources and in-home visits from a registered nurse. Welcome Baby is a program of Best Start, an effort funded by First 5 LA. Long Beach is a targeted community and the Welcome Baby program and reached 712 new mothers and their families in FY25.

Other Community Benefit Services

MCWH provided community benefit services in addition to those programs that focused on addressing priority health needs.

Health Professions Education

Graduate Medical Education

MCWH partners with a wide range of programs and serves as a training facility for approximately 400 residents and fellows and 200 medical students annually. Affiliate institutions consist of University of California, Irvine, University of California, Los Angeles and various other local residency and fellowship programs as well as medical schools. Residents and fellows provide specialized care to infants, children, adolescents, and all areas pertaining to women's health. MCWH also partners with University of California, Irvine (UCI) to serve as the primary training location for the Pediatric Pulmonary fellowship.

Resident Training Rotations

- · Child Abuse
- Hospice and Palliative Care
- Medical Genetics and Genomics
- Ob-Anesthesia
- Obstetrics and Gynecology
- Orthopedics
- Palliative Medicine
- Pediatric Dentistry
- Pediatrics
- Peds Dentistry
- Physical Medicine & Rehabilitation
- Physical Medicine and Rehabilitation

Fellowship and Sub-Specialty Training Rotations

- Gynecology Oncology
- Maternal Fetal Medicine
- Neonatal-Perinatal Medicine
- Pediatric Emergency Medicine
- Pediatric Endocrinology
- Pediatric Hematology Oncology
- Pediatric Pulmonary

Nursing Education

At MCWH, 613 undergraduate and graduate student nurses participated in precepted clinical rotations. The hospital supported the Trimester BSN program at California State University, Long Beach (CSULB).

Educated 50 nursing students at Long Beach City College on perinatal loss training and standard of care workflow.

Other Health Professions Education

MCWH provided precepted training for 152 health professions students.

- Child life interns
- Dietetic interns
- Patient care assistants
- Pediatric rehabilitation
- Pharmacy
- Social work

MCWH also offered stipends to assist with the cost of school for four California State University, Dominguez Hills health sciences students.

Research

MCWH is committed to basic science, translational and clinical research. The hospital participated in national research studies in collaboration with other national children's hospitals to ensure the pediatric health care community stays at the forefront of leading treatments, patient care best practices and new technology. MCWH continued to partner with the National Institutes of Health (NIH), Children's Hospitals Association (CHA) and the Children's Oncology Group (COG) nationally, and with the University of California Los Angeles (UCLA) and University of California Irvine (UCI) locally on cutting edge research. The hospital's clinical research programs supported clinical trials in many subspecialties allowing physicians to provide state-of-the-art treatment options to children who have illnesses where there is no standard therapy or where conventional therapy is failing. There are currently more than 100 ongoing research projects at MCWH. Studies focus on asthma, cancer, heart disease, infectious diseases, lung/respiratory, perinatal care and more.

Some research projects were supported by grants and other philanthropic backing. In compliance with Federal regulations, research expenses were reported after applying the restricted offsetting funding revenue.

Cash and In-Kind Donations

Cash Donations

MCWH supported community organizations through cash donations that addressed community health needs, health equity and the social drivers of health.

In-Kind Donations

- Hospital employees represented MCWH on community boards and collaborative committees that focused on increased access to health and social services, improved safety, and children's health issues.
- Provided a land lease, below fair market value, to the Long Beach Ronald McDonald House charity, which supports a 23-room Ronald McDonald House.
- Rented office and dental clinic space to TCC Family Health, and FQHC, at below fair market value.
- Donated over 11,500 N95 masks to those in need during the LA Fires in early 2025.

Community Benefit Grant Program

In FY25, MCWH provided grant funds to support community-based organizations that addressed identified health needs and served vulnerable populations within the hospital service area. Grants were provided to:

- Breastfeed LA
 - Provided lactation support to 488 Black, Filipino and Latinx parents.
- Children's Dental Health Clinic
 - Provided comprehensive dental care to 489 children, ages 0-5.
- Long Beach Bar Foundation
 - Provided a 6-week trauma-informed initiative for 116 at-risk and underserved youth to identify, express, and manage their emotions.
- Tichenor Clinic for Children
 - Provided occupational therapy services for 134 children from birth to 18 years old who have a disability.

Community Benefit Operations

In FY25, community benefit operations included administrative support and community benefit consultants. Support was provided for the completion of the FY24 Community Benefit Report and Plan, FY25 Community Health Needs Assessment and FY26-FY28 Implementation Strategy.

Community Building Activities

Coalition Building

Hospital representatives participated in coalitions that addressed community building and community revitalization initiatives to improve economic stability.

Community Support

Staff members undertook a food drive to enhance community support networks.

Economic Development

The hospital supported economic development groups that focused on issues that impacted community health improvement and safety.

Health Improvement Advocacy

Participated in meetings and collaborative efforts to advocate for improved pediatric health and safety.

Financial Summary of Community Benefit

MCWH financial summary of community benefit for FY25 (July 1, 2024 to June 30, 2025) is summarized in the table below. The Hospital's community benefit costs comply with Internal Revenue Service instructions for Form 990 Schedule H. Costs are based on MCWH overall cost-to-charge ratio. Appendix 1 lists the community benefit programs by category.

Financial Assistance and Means-Tested Government Programs	Vulnerable Populations	Broader Community	Total
Traditional Charity Care	\$3,204,304		\$3,204,304
Medi-Cal Shortfall	\$39,886,322		\$39,886,322
Other Means-Tested			
Government Programs	\$0		\$0
(Indigent Care)			
Sum Financial Assistance			
and Means-Tested	\$43,090,626		\$43,090,626
Government Programs			
Other Benefits			
Community Health	\$986,709	\$0	\$986,709
Improvement Services	7980,709	ÇÜ	\$380,703
Community Benefit	\$0	\$53,217	\$53,217
Operations	γU	Ş J 3,217	Ç53,217
Health Professions	\$0	\$5,666,733	\$5,666,733
Education	γU	\$3,000,733	75,000,733
Subsidized Health Services	\$0	\$0	\$0
Research	\$343,105	\$0	\$343,105
Cash and In-Kind	\$713,275	\$0	\$713,275
Contributions	\$713,275	ÇÜ	\$713,273
Other Community Benefit	\$0	\$50,535	\$50,535
Total Other Benefits	\$2,043,089	\$5,770,485	\$7,813,574
Community Benefit			
Spending			
Total Community	\$45,133,715	\$5,770,485	\$50,904,200
Benefit*	\$45,155,/15	\$5,770, 4 85	\$50,904,200
Medicare (non-IRS)	\$186,436		\$186,436
Total Community Benefit with Medicare	\$45,320,151	\$5,770,485	\$51,090,636

Community Benefit Plan FY26

The Community Benefit Plan describes the actions the hospital intends to take, including programs and resources it plans to commit, to address the priority significant health needs identified in the FY26-FY28 Implementation Strategy.

Significant Health Needs the Hospital Intends to Address

MCWH will address the following health needs with a focus on the social drivers of health and health equity:

- Access to health care
- Behavioral health (mental health and substance use)
- Chronic diseases
- Pregnancy and birth outcomes
- Preventive practices

FY26-FY28 Priority Health Need: Access to Health Care

Goal: Increase access to care for medically underserved children.

Strategies

- 1. Provide financial assistance through free and discounted care for health care services, consistent with the hospital's financial assistance policy.
- 2. Provide transportation support to increase access to health care services.
- 3. Offer health education, community outreach, and support services that reduce barriers to care and increase access to health care.
- 4. Train residents and fellows in pediatric specialties.
- 5. Support pediatric specialty care clinics.
- 6. Provide specialty care for children through MCWH Outpatient Specialty Centers and California Children's Services (CCS) approved Special Care Centers.
- 7. Provide grant funding and in-kind support to increase access to health care.
- 8. Work in collaboration with community agencies to address the impact that the social drivers of health and health equity have on health care access.

FY26-FY28 Priority Health Need: Behavioral Health (Mental Health and Substance Use)

Goal: Increase access to mental health and substance use services in the community. **Strategies**

- 1. Increase community awareness of prevention efforts and availability of resources to address mental health and substance use and misuse concerns.
- 2. Offer community health education, lectures, presentations and workshops focused on

- mental health and substance use topics.
- 3. Participate in health and wellness fairs that include information on behavioral health resources.
- 4. Provide support groups for parents and children to address health needs.
- 5. Promote the school reintegration program for children with long-term mental illness to prevent school absenteeism.
- 6. Support multisector collaborative efforts to increase access to behavioral health services.
- 7. Provide grant funding and in-kind support to increase behavioral health awareness and access to behavioral health services.
- 8. Provide mental health support for at-risk children and their families.
- 9. Work in collaboration with community agencies to address the impact that the social drivers of health and health equity have on accessing behavioral health services.

FY26-FY28 Priority Health Need: Chronic Diseases

Goal: Reduce the impact of chronic diseases on health and increase the focus on chronic disease prevention and treatment education.

Strategies

- 1. Offer health education workshops and presentations on chronic disease prevention, treatment, and management.
- 2. Host health and wellness fairs, including screenings.
- 3. Provide support groups to assist those with chronic diseases and their families.
- 4. Provide public health education in the media and community health awareness events to encourage healthy behaviors and prevent chronic diseases.
- 5. Continue work through the Long Beach Alliance for Children with Asthma, which provides education, clinician training, community health workers, and advocacy related to asthma in the greater Long Beach community.
- 6. Provide specialty care for children through MCWH Outpatient Specialty Centers and California Children's Services (CCS) approved Special Care Centers.
- 7. Provide grant funding and in-kind support for chronic disease prevention and treatment.
- 8. Work in collaboration with community agencies to address chronic disease prevention and treatment.
- 9. Work in collaboration with community agencies to address the impact that the social drivers of health and health equity have on chronic diseases.

FY26-FY28 Priority Health Need: Pregnancy and Birth Outcomes

Goal: Improve the health of new mothers and their babies through preventive and postpartum practices.

Strategies

- 1. Provide health education and support group services for new and expecting parents.
- 2. Support breastfeeding initiatives for new and expecting parents.
- 3. Provide public health education in the media and community health awareness events to improve reproductive health and encourage healthy behaviors in pregnancy and in the post-partum period.
- 4. Work to improve birth outcomes in partnership with infant health programs.
- 5. Provide education and supportive services to mothers and babies as part of the Welcome Baby program.
- 6. Provide grant funding and in-kind support to improve pregnancy and birth outcomes.
- 7. Work in collaboration with community agencies to address the impact that the social drivers of health and health equity have on pregnancy and birth outcomes.

FY26-FY28 Priority Health Need: Preventive Practices

Goal: Improve community health through preventive health practices.

Strategies

- 1. Provide free health screenings.
- 2. Provide education and resources focused on healthy living and disease prevention.
- 3. Provide public health education in the media and community health awareness events to encourage healthy behaviors and promote preventive health care.
- 4. Provide grant funding and in-kind support to expand preventive health services.
- 5. Work in collaboration with community agencies to provide preventive care services.
- 6. Work in collaboration with community agencies to address the impact that the social drivers of health and health equity have on access to preventive care.

Evaluation of Impact

Through the CHNA process, community stakeholders provided input on the community health needs impacting the community, prioritization of the needs, and resources to address the needs. Appendix 2 identifies the community groups and local officials that were consulted.

MCWH will monitor and evaluate the programs and activities outlined above. The hospital has implemented a system for the collection and documentation of tracking measures, such as the number of people reached or served, and collaborative efforts to address the health needs. An evaluation of the impact of MCWH actions to address these significant health needs will be reported in the next scheduled CHNA.

Health Needs the Hospital Will Not Address

MCWH cannot address all the health needs present in the community, but it will concentrate on those priority health needs that it can most effectively address given its areas of focus and expertise. Taking existing hospital and community resources into consideration, MCWH will not address the remaining health needs identified in the CHNA, which were overweight and obesity, and violence prevention.

Contact Information

Miller Children's & Women's Hospital Long Beach 2801 Atlantic Avenue Long Beach, California 90806

Web Address

https://www.millerchildrens.memorialcare.org/locations/main-campus

Community Benefit Contact

John Fay, MSG Government & Community Relations Manager MemorialCare Health System jfay@memorialcare.org

Appendix 1: Categorization of Community Benefit Programs

Medical Care Services	
Charity care/financial assistance	
Medi-Cal shortfall	
Medicare shortfall (non-IRS)	
Other Benefits for Vulnerable Populations	
Behavioral health outreach, education and resources	
Breastfeeding classes, support groups and consultation	
Cardiovascular health information and resources	
Caregiver support and education	
Cash and in-kind donations to organizations serving vulnerable populations and improving community healt	h
Chronic disease treatment and management education and resources	
Community benefit grant program to organizations serving vulnerable populations to address priority health	า
needs, health equity and the social drivers of health	
Community outreach on access to care, health insurance and financial assistance	
Education on chronic diseases prevention, management and treatment	
Family Resource Center	
Health and wellness education	
Jonathan Jaques Children's Cancer Institute	
Long Beach Alliance for Children with Asthma	
Mental health education, outreach and resources	
Outpatient specialty clinics	
Prenatal, perinatal and postnatal care, childbirth preparation and prenatal classes, support groups, Welcome	e
Baby, lactation support	
Prescriptions, durable medical equipment, and recuperative care	
Psychotherapy by licensed clinical psychologists	
Resources and education for children with special needs	
Safety and injury prevention	
School reintegration assistance and neuropsychological assessments	
Social drivers of health screening and referrals	
Social work referrals and counseling	
Support groups for autism, asthma, cancer, perinatal bereavement, and those with special needs	
Transportation support	
Welcome Baby	
Other Benefits for the Broader Community	
Community benefit operations	
Health Research, Education and Training Programs	
Clinical precepting for nursing students	
Clinical precepting for other health professionals: child life interns, dietetic interns, social work, patient care	<u>;</u>
assistants, pediatric rehabilitation students, and pharmacy students	
Community health research studies focused on asthma, cancer, heart disease, infectious diseases,	
lung/respiratory, perinatal care and more	
Pediatric training program for residents and fellows on specialized care to infants, children, and adolescents	
resident training program for residents and renows on specialized care to mains, children, and adolescents	

Coalition Building
Community Support
Economic Development
Health Improvement Advocacy

Nonquantifiable Benefits

Appendix 2: Community Stakeholders

Community Stakeholder Interviews

Name	Title	Organization	
Amber Johnson, PhD	Coordinator	Black Health Equity Collaborative	
Anissa Davis, MD, MPH	Health Officer	City of Long Beach Department of Health and	
Allissa Davis, IVID, IVII II	Treatti Officer	Human Services	
Audrey Alo	Chairperson	SoCal Pacific Islander Community Response	
Addrey Alo	Chan person	Team	
Bill Cruikshank	Executive Director	Meals on Wheels	
Bita Ghafoori, PhD	Director	Long Beach Trauma Recovery Center,	
	Birector	California State University Long Beach	
Chris Miller	Chief Executive Officer	Mental Health America Los Angeles	
Don Rodriguez	Chief Executive Officer	Boys and Girls Clubs of Long Beach	
Elisa Nicholas, MD	Chief Executive Officer	TCC Family Health	
Gina Overholt	Coordinator	City of Long Beach Office of Veterans Support	
Gina Overnoit	Coordinator	& Veterans Commission	
Graham Tse, MD	Chief Medical Officer	MemorialCare Miller Children's and Women's	
		Hospital	
Jennifer Ponce	Chief Health Education and	TCC Family Health	
	Promotion Officer	·	
Jessica Quintana	Executive Director	Centro CHA	
Kimberly Wee	Executive Director	Century Villages at Cabrillo	
Ladine Chan	Program Manager	Families in Good Health	
Myron Quon	Executive Director	Pacific Asian Counseling Services	
Nancy Valencia	Executive Director	DAYS Long Beach	
Odrin Castillo, MD	Director of Community	Memorial Family Medicine Residency Program	
Curin Castillo, IVID	Engagement and Diversity	Wellional Family Wedicine Residency Frogram	
Patricia Costales, LCSW	Chief Executive Officer	The Guidance Center	
Paul Lovely	Executive Director	CARE Program	
Pouelinna Chhey	Lead Organizer	Khmer Girls in Action	
Romeo Hebron	Executive Director	Filipino Migrant Center	
Sayon Syprasoeuth	Associate Program Director	United Cambodian Community of Long Beach	
Tiffany Brown, EdD	Deputy Superintendent	Long Beach Unified School District	
Toi Nichols	Founder and President	M.O.R.E. Mothers	
Vivan Gallardo	Health Educator	Bienestar	

Listening Sessions

Target Population	Attendees	Partner Organization	Session Date
Immigrants and refugees	12	Best Start Central Long Beach	2/22/25
Black and African American	7	Black History Long Beach	2/24/25
LGBTQIA2S+	12	LGBTQ Center of Long Beach, Kubo Organizing Project, APLA, and Earthlodge	2/26/25
Homeless and unhoused community	5	Greater Long Beach Mutual Aid Network	3/1/25
Veterans and disabled	8	Century Villages at Cabrillo	3/3/25

Target Population	Attendees	Partner Organization	Session Date
Latinx	11	Greater Long Beach Mutual Aid Network	3/4/25