We know how much you value your community, and we understand your desire to create one where all children can be healthy, safe, and happy. We also know that achieving this goal isn’t easy. Finances, housing, employment, and education are pervasive challenges in many communities. We admire your perseverance, your passion, your creative thinking, and your dedication, and we want you to know that we share this mission with you. We are in this fight together.

Children’s Hospital Colorado has served children for over 100 years — a commitment that reaches beyond our facility. For the same reasons we dedicate ourselves to caring for children within our hospital walls, we strive to care for children in our communities.

We are proud to present the Children’s Hospital Colorado 2015 Community Benefit Report. Here, we highlight a few of our programs and partnerships that positively impact our community and its kids, as well as our plans to continue to transform community health, with your help.

We are — and will always be — here for you. The commitment to keep kids healthy, to keep children out of our hospital, is one we will continue to take on together, and one that will remain at the forefront of our hospital’s mission.

In gratitude of your continued partnership,

Jena Hausmann
President and Chief Executive Officer
Children’s Hospital Colorado
WHAT IS COMMUNITY BENEFIT?

As a nonprofit pediatric hospital, our bottom line is kids — this means that positive hospital margins are reinvested into the health and well-being of children. Putting that work into numbers isn’t easy. However, in 2015, Children’s Hospital Colorado reported more than $197,440,562 in “community benefit” activities — that is, activities conducted as a hospital that went beyond caring for patients and made an impact on our community at large — and $652,054 in community building activities.

Advocating For Kids — In and Out of the Hospital

To reinforce our hospital’s ongoing commitment to health improvement, Children’s Colorado established the Child Health Advocacy Institute (CHAI) in 2010. With a mission to improve the health and safety of children, CHAI engages public and private partners in creating a thriving community for children. CHAI serves as a centralized resource for the hospital to identify community child health needs, and to develop and implement, in partnership with the community, evidence-based strategies that seek to address those needs.

*All financial data is for fiscal year 2015. Note: This report includes amounts expended by Children’s Hospital Colorado’s hospital facilities, as reported on Schedule H of the IRS Form 990. Accordingly, the activities in this Community Benefit Report are greater than the amounts reported in the Children’s Colorado Schedule H, which applies only to our hospital facilities. For questions or more information, please call Julie Gibbs, Community Health Manager, at 720-777-8780.
In response to these findings, Children’s Hospital Colorado developed a 2016 Community Health Action Plan, defining how Children’s Colorado will address these six main child health challenges, in targeted zip codes, over the next three years.
CARE FOR ALL
PROVIDING A HOME FOR MEDICALLY UNDERSERVED CHILDREN

“We don’t turn any child away, regardless of their ability to pay,” says Kelly Galloway, practice director of primary care and community health programs at Children’s Hospital Colorado. “The population we see in clinics deal with every type of social determinant you could imagine.”

As a result of barriers to care, like transportation and time constraints, children miss important care milestones or move between providers without developing a long-term care relationship in the context of a medical home. Consequently, Children’s Colorado’s Child Health Clinic takes on all aspects of a child’s well-being, making it one of the largest providers of pediatric primary care for Medicaid patients in Aurora.

“Our goals at the Child Health Clinic are to provide access to and coordination of high-quality health care for low-income families,” says Galloway. “We also have a strong teaching mission, training multiple levels of pediatric and family medicine providers in the art of delivering comprehensive, compassionate, and evidence-based care.”

“I’ve taken my 10-month-old son, Daniel, and my 3-year-old son, Anthony, to the Child Health Clinic since they were three days old,” says Francisca Garcia, a local resident. “We get everything we need for their health care here.”

All clinics have integrated behavioral health, family navigators, social work, care coordination, and more — ensuring that high-risk, medically underserved children in our community receive the comprehensive care they deserve.

80-90% of Child Health Clinic patients are on Medicaid or other publically funded insurance

26,000 TOTAL PATIENT VISITS PER YEAR

TOP 5 MOST COMMON ADVERSE EXPERIENCES THESE PATIENTS FACE:
Child Abuse  High Rate of Community Poverty
Child Neglect  Domestic Violence
Exposure to Community Violence
Team up to Bring Care to Children with Complex Medical Needs

Children’s Hospital Colorado’s KidStreet is a family-centered, multidisciplinary, community-based program designed to maximize the health and development of young children who are dependent on medical technology. At KidStreet, staff deliver care, support, and services so that medically fragile children with complex conditions can achieve the highest possible function.

“We are working with families who have been consistently told ‘no,’ parents who have had to fight for everything they’ve ever had, families often without many resources,” says Karen Terry, director of KidStreet. “We’re helping them in a way they’ve never had someone help them in their lives.”

One of these provided services is Cavity Free at Three (CF3), an innovative infant oral health program hosted by Children’s Colorado that provides preventive dental care to children under the age of 3. The dental team visits KidStreet twice a year to provide check-ups and care for the children.

“Oral health is an important part of total health, and we’re able to integrate it into their therapy here,” says Valerie Haustein, director of CF3. “Seeing them smile makes it all worthwhile,” she adds.

Many children who have complex needs obtain services from in-home-care companies. However, these services can be costly and challenging for families. KidStreet provides all-inclusive care, including speech therapy, occupational therapy, nurse staff, mental health consulting, and programs like CF3 in a friendly environment that encourages play, creative learning, and opportunities for the children to socialize.

Speech-language pathologist Laura Papajcik says, “These kids brighten up my day every day. To see them improve, even in the smallest ways — it’s amazing. I’m honored to be a part of their care.”

“Advocacy is our strong suit,” says Terry. “Every day these kids and their families can take comfort in knowing KidStreet is on their side — that we’ll be advocating for them every step of the way.”

Only 47% of Colorado’s Medicaid enrolled children received any preventive dental services in 2015

125,000 Children in our state with untreated dental conditions
“We probably ride our bikes four to five-ish times a week,” says Teresa Herrera, 10, proudly.

Her sister Alexa Herrera, 8, agrees. “We bike in the park and on the trails, but the best is when we bike with our dad at home. I love burning wheels!”

“You mean you like burning rubber,” corrects Teresa.

“Same thing!” says Alexa.

The energetic sisters received their bikes almost three years ago through Children’s Hospital Colorado’s Bikes For Life program, launched in 2011 to help kids develop healthy lifestyle habits through bicycling, with support from a number of community partners.

In addition to Bikes For Life, Teresa and Alexa have been involved in Healthy Kids programs at Children’s Colorado like Camp Champions, a collaborative effort with the University of Colorado-Anschutz Health and Wellness Center to equip youth with healthy lifestyle skills and habits.

They also participated in a Children’s Colorado-sponsored Girls on the Run club and Share Our Strength’s program Cooking Matters, which Children’s Colorado coordinates in the community to improve nutrition knowledge and eating habits.

“I like cooking now that we’ve done it here,” says Alexa. “Oh, I love kale chips! But mostly I love blueberries.”

Prevention, education & outreach coordinators Laura Retzer and Maria Valenzuela say that in the three years they’ve known the girls, they’ve seen drastic changes in the way they think about exercise and eating healthy.

“They’re more active and outgoing now,” says Laura. “They’re also taller… and sassier!”

The sisters are just two of the 200+ kids in the community that received bikes through the program in 2015, and the joy it brings them, in addition to their increased level of activity, is undeniable.

When asked whether they like running or biking better, Alexa says, “I like them both. I love all sports.” Teresa pipes up with a smile, “Samesies!”

As part of its Healthy Kids initiatives, Children’s Hospital Colorado is a Youth Mental Health First Aid site.
THE COMMUNITY APPROACH
PROMOTING CHILD PASSENGER SAFETY IN HIGH-RISK NEIGHBORHOODS

Motor vehicle traffic crashes are a leading cause of injuries and fatalities among Colorado kids. However, for children living in low-income metro-area communities, a lack of resources disproportionately impacts child passenger safety, significantly increasing this risk.

“Our target audience is anyone who needs help with ensuring their children are traveling safely,” says Darryl Clark, executive director of Street-Smart, Inc.

Four years ago, this driving mission led to a joining of efforts between nonprofits Street-Smart and Children’s Hospital Colorado, forming the Each One, Teach One Child Passenger Safety Program.

Darryl says the Each One, Teach One approach dates back to when slaves who learned to read or write would then share their knowledge with others. “The whole idea is to teach you so you can teach someone else; it’s a community approach,” says Clark.

With support from a grant provided by the Colorado Department of Transportation, in 2015 the initiative inspected 574 car seats for proper use, and distributed 481 car seats to families in need. More than 1,050 car seats have been distributed since 2014.

“Street-Smart has always had an affinity for working with kids. This is about saving children’s lives,” says Clark, who hopes to soon expand the program far beyond its current reach.

Children’s Colorado also offers car seat inspections at the Anschutz Campus in Aurora and at the South Campus in Highlands Ranch.

“These types of community partnerships are critical to improving the health of neighborhoods,” says Children’s Colorado’s Injury Prevention Strategist Dwayne Smith. “We want to concentrate our efforts in neighborhoods at the greatest risk for these injuries, which are entirely preventable. We’ve still got a lot of work to do, but this is a great start.”

A year and a half ago, we returned from vacation and our car was stolen with our luggage inside. We had no clothes, no money, and no car seat for my 2-year-old, Grecia. Through the Child Passenger Safety Program, we received a voucher from the Child Health Clinic at Children’s Hospital Colorado to purchase a car seat at a reduced price. This spring, our vehicle was hit and the car was totaled. Police told me later how important it was that Grecia was in her car seat. It saved her life.

— Rosa, Aurora resident
A VILLAGE

THE POWER OF A UNITED MESSAGE AROUND TOXIC STRESS

The impact of trauma, neglect, or abuse on a baby has a striking correlation to chronic disease, mental illness, and other social problems in adults. This discovery uncovers an important truth: Negative early experiences for children are not isolated family matters; they’re a public health issue.

The clinical work of Dr. Ayelet Talmi, a pediatric psychologist at Children’s Hospital Colorado, points to the lifelong impact of early childhood development. This body of work spurred collaboration among organizations, including Children’s Colorado, to align on a highly effective outreach strategy to promote health and well-being for young children and their families.

A key partner organization was nonprofit The Civic Canopy, which uses a community-learning model to drive transformational change through bringing together diverse partners. “When we were getting a myriad of people to come together to develop this shared messaging bank, it took Children’s Colorado coming to the table to make it happen,” says Stephanie Monahan, a director with Civic Canopy. “Given all we’ve learned about early childhood, toxic stress, and the need to promote community resiliency, our ties and partnerships have grown even stronger.”

The Early Childhood Colorado Partnership (ECCP) unites over 600 cross-sector partners from all over the state in developing a shared message about the importance of mitigating toxic stress in early childhood development. This message has started critical dialogue on how a community can and needs to come together to ensure healthy development for their kids.

First 1,000 Days

The First 1,000 Days strategic plan provides a roadmap for Children's Hospital Colorado to enhance its impact in the early childhood arena, focusing specifically on support and intervention for children from gestation through age 2, along with and their families and communities. Children's Colorado will work to improve prenatal, neonatal, young child, and family outcomes — as well as mitigate toxic stress and adversity — through both innovative internal program improvement efforts and partnerships with external organizations.

100+ suggested strategies analyzed and compiled into five priority areas

- Public Awareness Campaign
- Provider Training
- Policy & Advocacy
- Screening, Identification & Care Coordination
- Targeted Interventions
**A FAMILIAR SETTING**

**SCHOOL NURSE PROGRAM DELIVERS LOCALIZED CARE TO KIDS**

Kelly Grenham, District School Nurse Consultant for Mapleton Public Schools in Adams County, joined Children Hospital Colorado’s School Nurse Program 13 years ago and started serving as the school nurse for over 5,000 students in Mapleton. She quickly saw the incredible need for more people like her: nurses passionate about bringing care directly to kids in the setting most familiar to them — school.

“Being part of Children’s Colorado allows us to provide faster and more complete care to our families,” says Grenham. “We have Children’s Colorado supporting nurses who are supporting parents, and now we’ve created a school-based network for kids with multiple touch points for receiving care.”

The School Nurse Program provides the Denver metro area with over 32 nurses from one of the top 10 children’s hospitals in the country.

“Having highly skilled nurses in our schools is invaluable for both our students and staff,” says Mapleton’s Executive Director of Human Resources Sue Lin Toussaint. “Children’s Colorado is a trusted name and resource in the region, and having access to the medical expertise of nurses and physicians is a great comfort to staff and families in Mapleton.”

Since 2003, Grenham has used data to show that school nursing is imperative for a successful education — increasing the number of school nurses embedded in Mapleton and rightfully earning her the 2015 School Nurse Leadership Award.

“The partnership with Children’s Colorado gives students the expert medical care they need while at school,” says Toussaint. “Children who feel good learn better and are more likely to attend school without absences due to chronic health conditions.”
The Colorado Step Up Asthma Program is a school-centered asthma program led by Stanley Szefler, M.D., director of the Pediatric Asthma Research Program at Children’s Hospital Colorado. A coordinated effort between Children’s Colorado, the Colorado Department of Public Health and Environment, a number of Denver metro school districts, and many other agencies, the program focuses on delivering asthma self-management, environmental trigger reduction, and enhanced partnership with community health care providers.

Parents of asthmatic children face daily challenges when it comes to keeping track of medications, action plans, and appointments as they manage their child’s asthma and try to prevent traumatic emergency room visits.

“We know that asthma medications work,” says Heather Hoch, M.D., pediatric pulmonologist at Children’s Colorado’s Breathing Institute. “But it’s difficult for families to keep track of medication and for providers to get an accurate picture of adherence to medication.”

As a result, the asthma team at Children’s Colorado implemented an adherence monitoring technology developed by vendor Propeller Health. The technology, currently being piloted with enrolled patients, consists of a cap that goes on the top of inhalers, which then syncs data and gives feedback to providers and families about frequency of use.

This data, available only to families and providers, allow parents to monitor and troubleshoot how often children are taking medication, while also giving providers a better understanding of the child’s needs for asthma care.

“Utilizing technology to solve problems related to chronic diseases is a wave of the future,” says Dr. Hoch, who looks forward to sharing the results of the study. “These interventions will help families take more control over their child’s asthma and help providers better understand how to give the best chronic care to kids.”
CREATING A WORKFORCE REFLECTIVE OF ITS COMMUNITY

After her 11-year-old daughter had knee surgery at Children’s Hospital Colorado, Susana Tochimani, 37, knew she not only wanted to pursue a career in the medical field, but that she wanted it to be at Children’s Colorado. “The way they took care of her and the way they treated us was amazing. I told my husband, ‘I want to be a part of this.’”

Tochimani was hired as the Unit Secretary in Periop Discharge at Children’s Colorado after completing the Hire Local Program, an intensive 10-week program at Aurora Community College.

Started almost two years ago as a joint effort by Anschutz Medical Campus’ Community-Campus Partnership, the program offers students training and education related to medical terminology, technical skills, and customer service to give the Aurora community access to employment opportunities in the medical field. Following the training, Hire Local arranges mock interviews, updates resumes, and walks students through the application process.

“This program helps us to fulfill our ongoing commitment to a diverse workforce and hiring local, all in support of our community, patients, and families,” says Children’s Colorado’s Director of Talent Acquisition & Workforce Planning Natalie Landau. “It has been a commitment of time and resources throughout our organization, but we know it is well worth it.”

Jameel Mallory, Hire Local manager for Community-Campus Partnership, says, “We heard over and over again from the surrounding community that people wanted to work here, but barriers like lack of training, support services, language, and difficulty of navigating the application process often prevented them from doing so.”

Not only is the program beneficial for the Aurora community, but for Children’s Colorado. “We want our campus to reflect our community,” says Mallory. “We want families to walk in and feel comfortable because they’re greeted by people who understand where they’re coming from.”

“It prepared me to find the job that I wanted,” says Tochimani. “Sometimes I look at the hospital when I drive by and think, I can’t believe I work here.”
EARLY WARNING
NEW LAW HELPS DOCTORS CATCH HEART DEFECTS

A new policy requiring the screening all newborns for critical congenital heart defects was one of Children’s Hospital Colorado’s most impactful bills of the 2015 legislative session.

“We’ve found that if you measure the oxygen levels of babies about 24 hours after they’re born, it picks up kids who might have congenital heart disease,” says Children’s Colorado’s Christopher Rausch, M.D. “If they go home not knowing they have a heart problem, they can get very sick, very quickly.”

Studies had shown the efficacy of pulse oximetry screening as early as 2007, but the thinner air of high elevation affects blood oxygen. Dr. Rausch’s team wondered if the test would work as well at Children’s Colorado, a mile above sea level.

“We did a study at University of Colorado Hospital [which shares a campus with Children’s Colorado] and at Memorial Hospital in Colorado Springs, which sits at about 6,500 feet, and proved that, yes, it could work,” says Dr. Rausch. “Once we proved that, we partnered with the American Heart Association to pass legislation saying that every baby born in Colorado below 7,000 feet should get a pulse-ox test.”

House Bill 15-1281 passed May of 2015

The new bill has already saved many lives, including Nonnie Hunziker’s daughter Sara. Sara seemed in excellent health until 24 hours old, when the newly standard pulse oximetry screening discovered she was born with an obstruction preventing her heart from pumping oxygenated blood to the rest of her body.

As a result, Sara underwent a successful operation by James Jaggers, M.D., at Children’s Colorado, and she was able to go home with her family and embark upon the road to a happy recovery.
PROVIDING STATEWIDE EDUCATION FOR EMERGENCY PEDIATRIC CARE

The mission of the EMS Outreach and Education Program is to provide expert pediatric education to enhance the emergency care provided to infants and children in communities around the West, extending the expertise of Children’s Hospital Colorado far beyond its walls.

The Children’s Colorado EMS Outreach Program is saving lives through interactive training and education. They take away the fear of caring for kids while instilling confidence in the EMTs and paramedics.

There have been many times here in the mountains when our EMTs and paramedics have been able to utilize the knowledge and skills we have been taught by the amazing staff of the Children’s Colorado’s EMS Outreach Program. The most recent event was a severe trauma incident where a patient was involved in an ATV accident. Because of the training and education our staff has received, the patient was treated appropriately and her life was saved.

— Ray Jennings, Chief, Grand County Emergency Medical Services
In 2015, Children’s Hospital Colorado proudly reported $197,440,562 in community benefit activities and $652,054 in community building activities.

<table>
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**TOTAL =** $197,440,562 Community Benefit Activities  
$652,054 Community Building Activities

**Financial Assistance**  
Includes unreimbursed costs from providing care to patients enrolled in Medicaid, State Child Health plan, and other government programs.

**Subsidized Health Services**  
Includes unreimbursed costs from operating programs that meet a community need, such as behavioral health services.

**Research**  
Includes laboratory science and applied research, which advances the best care for kids.

**Health Professions Education**  
Includes graduate medical education for residents and fellows, nursing students, and other health professionals such as community pediatricians and trauma providers.

**Community Health Improvement**  
Includes activities such as immunization fairs, dental screenings, and parent education.

**Community Building Activities**  
Includes environmental improvements, workforce development, and community health improvement advocacy efforts.

**Financial and In-Kind Contributions**  
Includes cash and in-kind donations such as sponsorship of nonprofit events, donation of meeting space, and donation of health/safety educational materials.
To learn more about Children’s Hospital Colorado’s community work and ongoing mission to care for our kids, visit childrenscolorado.org/communityhealth.