Striving to provide the best health care to every patient, every day.

Charleston Area Medical Center
Charleston, West Virginia

This report is available at www.camc.org
This community benefit report describes the programs and services going on everyday at Charleston Area Medical Center to improve the health of our community.

In 2010, Charleston Area Medical Center provided $143,529,066 in community benefit. These dollars, however, cannot adequately portray the lives touched. In our community, this includes mothers, newborns, grandparents, the homeless, children and youth in our schools, and the working poor... and many more, as you will see. Our programs and services go well beyond the traditional health care we often think of when we consider hospital care and are delivered both inside and outside the walls of our hospitals. They are driven by our mission, *Striving to provide the best health care to every patient, every day*. Our hospitals and outpatient programs bring our mission to life – providing effective, efficient, equitable, timely and safe care to all, regardless of their ability to pay.

Charleston Area Medical Center is a not-for-profit three-hospital system designed to provide care for our community residents throughout every stage of their lives. Our patients depend on us to provide convenient and compassionate care – care delivered regardless of a patient's ability to pay. As a resident teaching facility for internal medicine, internal medicine/pediatrics, internal medicine/psychiatry, family medicine, pediatrics, surgery, psychiatry, obstetrics and gynecology, emergency medicine, urological surgery, osteopathic internship, internal medicine geriatric fellowship, vascular surgery fellowship, oral and maxillofacial surgery fellowship and pharmacy, we give patients access to the latest developments in medical care. We provide our community with programs of excellence in cardiovascular services, medicine, surgery, oncology, trauma, neurology, orthopedics, rehabilitation, bariatrics, and women and children's services.

We give back to our community because we understand the impact that exceptional medical care, charity care, education, corporate contributions and community partnerships have on the lives of real people. In this report, you will read about examples of the programs we provide to the community and how we demonstrate our community commitment.
## 2010 COMMUNITY BENEFIT SUMMARY

**CHARITY CARE AT COST**  
$36,494,503  
Free or discounted health services provided to persons who meet the organization’s criteria for financial assistance and are thereby deemed unable to pay for all or a portion of the services. Charity care is reported in terms of costs, not charges. Charity care does not include (1) bad debt or uncollectible charges that the hospital recorded as revenue but wrote off due to failure to pay by patients, or the cost of providing such care to patients; (2) the difference between the cost of care provided under Medicaid or other means-tested government programs or under Medicare and the revenue derived therefrom; or (3) contractual adjustments with any third-party payors.

**GOVERNMENT SPONSORED MEANS-TESTED HEALTH CARE SHORTFAILS**  
Includes the unpaid costs of public programs for low income persons; the “shortfall” created when a facility receives payments that are less than cost of caring for public program beneficiaries. This payment shortfall is not the same as a contractual allowance, which is the full difference between charges and government payments.

<table>
<thead>
<tr>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Unreimbursed Medicaid</td>
<td>$50,963,791</td>
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<tr>
<td>Other Public Unreimbursed Costs</td>
<td>$3,183,092</td>
</tr>
<tr>
<td>Includes CHIPS, Prevention First, Catastrophic Illness Commission, Community Access Program</td>
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**HEALTH PROFESSIONS EDUCATION**  
$43,345,333  
Includes programs and financial assistance for physicians, medical students, nurses and nursing students, interns and other health professionals. Helping prepare future health care professionals is a distinguishing characteristic of not-for-profit health care and constitutes a significant community benefit.

**SUBSIDIZED HEALTH SERVICES**  
$858,175  
Clinical programs that are provided despite a financial loss so significant that negative margins remain after removing the effects of charity care, bad debt and Medicaid shortfalls. Nevertheless, the service is provided because it meets an identified community need and if no longer offered, it would be either unavailable in the area or fall to the responsibility of the government or other not-for-profit organization to provide. Subsidized health services at CAMC include Family Resource Center support at $398,592; the Lactation Support Program at $164,205 and the Palliative Care Program at $295,378.

**COMMUNITY BENEFIT PROGRAMS AND SERVICES**  
$8,684,172  
See details beginning on page19.

<table>
<thead>
<tr>
<th>Description</th>
<th>Amount</th>
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<tbody>
<tr>
<td>Community Health Improvement Services</td>
<td>$1,956,151</td>
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<tr>
<td>Health Professions Education (not included above)</td>
<td>$6,247,362</td>
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<tr>
<td>Financial and In-Kind Contributions</td>
<td>214,905</td>
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<tr>
<td>Community Building Activities</td>
<td>177,221</td>
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<tr>
<td>Community Benefit Operations</td>
<td>88,533</td>
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</table>

**TOTAL**  
$143,529,066

In addition to the above, although Medicare and Bad Debt are not included as part of the community benefit report per IRS guidelines, they are reflective of CAMC’s role in providing benefit to our community.

**UNREIMBURSED MEDICARE AT COST**  
$64,232,730  
Medicare is not considered a means tested program and thus is not included as part of community benefit.

**BAD DEBT AT COST**  
$23,556,528  
Unreimbursed costs, excluding contractual adjustments, arising from the failure to pay by patients whose health care has not been classified as charity care.

**NOTE:** Charity Care, Unreimbursed Medicare, Medicaid and Bad Debt – The total cost estimate for this care was determined by applying our Medicare ratio of cost to charges generated for these patient financial classifications.
INTRODUCTION AND OVERVIEW

Charleston Area Medical Center (CAMC) focuses on the health of our patients and our community. Our mission is “Striving to provide the best health care to every patient, every day.”

Our vision also shows our commitment to our community:

Charleston Area Medical Center, the best health care provider and teaching hospital in West Virginia, is recognized as the:

- Best place to receive patient-centered care.
- Best place to work.
- Best place to practice medicine.
- Best place to learn.
- Best place to refer patients.

CAMC’s Core Values: Quality, Service with Compassion, Respect, Integrity, Stewardship, Safety

CAMC is West Virginia’s largest medical center with over 6,000 employees and 593 Medical Staff. CAMC is licensed for 838 beds at three campuses: General Hospital (268 beds), Memorial Hospital (424 beds) and Women and Children’s Hospital (146 beds). Our health care services delivery focuses on providing a full range of inpatient and outpatient services as a tertiary regional referral center, teaching and safety net hospital. As a regional referral center, CAMC has one of only two state Level I Trauma Centers, a Level III Neonatal Intensive Care Unit, a Pediatric Intensive Care Unit, a TJC Certified Primary Stroke Center and a Bariatric Center of Excellence. CAMC is the primary safety net provider of women and children’s and trauma services in central and southern WV, providing 23% of the charity care in the state. CAMC has established medical and allied health education excellence as a core competency and has 85 WVU/WVSOM medical students training at CAMC hospitals, 156 CAMC employed residents per year, a School of Nurse Anesthesia (offering a clinically oriented doctoral program in management practice in nurse anesthesia [DMPNA] with Marshall University – the only such doctoral degree housed in a business school in the U.S.), and serves as a training site for more than 700 students in various health disciplines.

In 2010, CAMC had 39,669 inpatient discharges, 561,811 outpatient visits, 3,003 births and 97,378 visits to our Emergency Departments. CAMC’s inpatient payer mix is 44% Medicare, 24% Medicaid, 21% Commercial, 4% Self Pay, and 8% Other.

CAMC does much more than just provide health care; we are involved in nearly every aspect of the lives and well being of the community we serve. Our organization was born out of community need and continues in that tradition today. Creative state-of-the-art programs and services are available to our community because we invest our time, talents, and bottom-line to serve our community – particularly the needs of the low income, elderly and other vulnerable persons.

Community benefits are programs or activities that provide treatment or promote health and healing as a response to identified community needs and meet at least one of the following community benefit criteria:

- Improves access to health care services.
- Enhances the health of the community.
Advances medical or health care knowledge.
Relieves or reduces the burden of government or other community efforts.

Assessing & Addressing Community Health Needs  Draft March 2011

Charleston Area Medical Center further refines this definition to include community benefits as programs or services that address community health and health-related needs and provide measurable improvement in health access, health status, and the use of health resources. Also included are charity care, unpaid costs of Medicare and Medicaid and unpaid costs of other public programs.

CAMC is the largest provider of uncompensated care and the largest Medicaid provider in West Virginia. CAMC is also the primary medical safety net provider of women and children’s and trauma services in central and southern West Virginia.

Additionally, CAMC is the only major teaching hospital in southern West Virginia. As a teaching hospital, CAMC serves the uninsured and underinsured with highly specialized safety net services. For years, CAMC has trained physicians, nurse anesthetists, and numerous other allied health professionals. Community benefit examples include Graduate Medical Education, University of Charleston nursing education support, West Virginia State College nursing education support, clinical rotations and School of Nurse Anesthesia.

CAMC assists and collaborates with rural hospitals to improve care in the state, in such areas as telemedicine, networking and outreach and other programs. CAMC also offers services such as laundry, lab, etc. to these hospitals on a fee for service basis, providing them with a cost-effective alternative to providing such services themselves.

Examples of community benefit and programs in this area include: Telemedicine sites, Partners In Health, Partner’s Program, and Physician Networking and Outreach.

In total, CAMC provides over $143,529,066 in overall community benefit to the residents of its primary and secondary service areas.

OTHER INFORMATION DESCRIBING HOW CAMC PROMOTES THE HEALTH OF THE COMMUNITY - COMMUNITY BENEFIT STANDARD  (Form 990 Schedule H Part VI. 5)

The hospital has a governing board, community board, board of trustees or board of directors composed of prominent civic leaders, rather than exclusively members who are hospital administrators, physicians, or others professionally connected to the hospital.

CAMC’s Board is comprised of 17 voting members. The hospital Chief Executive Officer serves on the Board ex officio with vote. The current Chief of Staff and Immediate Past Chief of Staff also serve on the Board as ex officio with vote. Twelve Board members are community volunteers; two additional members are members of the CAMC Medical Staff.

Admission to the hospital’s medical staff is open to all qualified physicians in the area, consistent with the size and nature of the facility.

To fulfill its role as a regional medical center and a Level I Trauma Center, CAMC needs a mechanism to assure 24/7 coverage by emergency department physicians, radiologists, anesthesiologists and pathologists. All qualified physicians in the area are eligible for admission to CAMC’s medical staff although the size and nature of CAMC requires that certain hospital based specialists be affiliated with a group that is obligated to provide 24/7 coverage. Therefore, (1) emergency physicians must be employed by the group that is contractually obligated to staff the emergency department on a 24/7 basis; (2) radiologists must be employed by the radiology group that is contractually obligated to provide 24/7
coverage; (3) anesthesiologists must be employed by the anesthesia group that is contractually obligated to provide 24/7 coverage; and (4) pathologists are CAMC employees obligated to provide 24/7 coverage.

The hospital operates a full-time emergency room open to everyone, regardless of ability to pay. (Form 990 Schedule H Part V18)

CAMC operates Emergency Departments at each of the three hospitals. Each Emergency Department provides emergency care on a nondiscriminatory basis for EMTALA defined emergency medical conditions regardless of ability to pay. There were a total of 97,378 visits in 2010: 32,579 at General Hospital; 35,395 at Memorial Hospital and 29,404 at Women and Children’s Hospital. Of these, CAMC had 69,704 Emergency Department visits not resulting in an inpatient admission.

The hospital applies any surplus funds toward improving facilities, equipment, patient care, medical training, research and education.

As a not-for-profit organization, CAMC uses any and all excess funds for the future benefit of the community. Without the need to distribute funds to an owner in the form of dividends or other distributions, CAMC has the ability to keep the “excess of revenue over expenses” within the organization and use all of the funds to further its charitable mission. Examples of how the funds are used include the purchase of equipment, improvement and expansion of the property and buildings, improvement of patient care, provision of care to the uninsured population, provision of community training, and investment in medical training, research and education.

CHARITY CARE POLICY (Form 990 Schedule H Part I, Line 1a)
CAMC is committed to rendering care to patients regardless of their ability to pay for part or all of essential medical care.

CAMC wants prospective patients and the local community agencies to know that CAMC has a financial aid policy that is consistent with CAMC’s charitable mission and values and takes into account each patient's ability to contribute to the cost of his or her care and CAMC’s financial ability to provide the care.

CAMC has two programs to assist patients in need of financial assistance:

Charity – No payment will be expected from patients who meet the criteria for charity assistance. The main requirements for charity assistance are as follows:

- Income at 200% or less of the West Virginia Department of Welfare income and resource guidelines, and,
- Insufficient assets to pay for the care (assets of $50,000 or less are excluded), and,
- Not eligible for any public programs (such as Medicaid, Medicare, etc.)

Uninsured Discount – Any patient without third-party coverage will be given a 20% discount from charges. (The 20% discount is greater than any discount given to a non-governmental HMO or insurance company.)

PATIENT EDUCATION OF ELIGIBILITY FOR ASSISTANCE (Form 990 Schedule H Part VI.3) CAMC informs and educates patients and persons who may be billed for patient care about their eligibility for assistance under federal, state, or local government programs or under CAMC’s charity care policy during the registration process. Brochures are available at each registration point with contact information and phone numbers for our Financial Counselors. CAMC Financial Counselors are located in each Emergency Department and Admitting area. During registration, if a patient is uninsured, they may be referred to a Financial Counselor who provides education about Charity Care, Medicaid Eligibility and Federal Disability. West Virginia state employees are also on site at each hospital to accept and process Medicaid applications and notify patients if they qualify.
SAFETY NET SERVICES
With the number of infants born prematurely rising steadily in recent years, the nation’s hospitals are bolstering services for premature infants and their families. Recognizing that premature infants are more likely than full-term infants to experience complications that require intense medical care such as feeding tubes, ventilators and oxygen monitors, many hospitals are adding or expanding their NICUs. Nationally, NICUs often act as “profit centers for hospitals because of generous reimbursement rates,” according to Price Waterhouse. Unlike the national norm, at CAMC we lose an average of $7,500 for each NICU admission for a total loss of $3,462,987 in 2010. This loss occurs because of high Medicaid utilization (66%) coupled with a low payment rate from Medicaid. Additionally, the average loss for each PICU admission is $5,300 with 63% being Medicaid.

MEDICAL EDUCATION
Charleston Area Medical Center sponsors thirteen accredited internship, residency and fellowship programs. Programs are accredited through the Accreditation Council for Graduate Medical Education (ACGME) and the American Osteopathic Association (AOA). CAMC sponsors three pharmacy residency programs, accredited by the American Society of Health System Pharmacy (ASHP); a clinical psychology internship, accredited by the American Psychological Association (APA); and a fellowship in oral maxillofacial surgery. CAMC also sponsors a School of Nurse Anesthesia accredited by the Council on Accreditation. Working with education affiliates such as West Virginia University, the West Virginia School of Osteopathic Medicine and Marshall University, 168 individuals are enrolled in internships, residency and fellowship programs and 53 students are enrolled in the nurse anesthesia program.

CLINICAL TRAINING SITE
CAMC services as a clinical training site for approximately 800 students per year through educational affiliations from West Virginia and regional colleges and universities. Currently, there are 116 affiliations with health professions programs in 28 disciplines including nursing, pharmacy, physical therapy, physician assistant and other health disciplines.

RESEARCH and CLINICAL TRIALS CAMC Health Education and Research Institute, Inc., a sister company to CAMC, is actively engaged in clinical trials and has active research protocols in oncology, cardiology/ cardiovascular research, medicine and medicine subspecialties, behavioral health community medicine, pediatrics, nursing research and trauma/pain. The majority of this research is conducted at CAMC hospitals.
AFFILIATED HEALTH CARE SYSTEM ROLES IN PROMOTING HEALTH OF THE COMMUNITY

The CAMC Health Education and Research Institute serves as the education and research arm of the CAMC Health System. The Institute promotes the health of the community by:

- Sponsoring health professional training programs training the region's health professionals.
- Providing continuing education to health professionals in the community, region and state.
- Sponsoring management and leadership development programs.
- Sponsoring community health education and prevention education programs for the community.
- Conducting clinical and health services research targeted to improve health and health services delivery of our patients and community.
- Pursuing special program funding and grants to support education and research programs.
- Promoting economic development through its employment of approximately 80 full-time education, research and support staff and through its extramural and externally funded sponsored programs.

The CAMC Foundation's mission is to support and promote CAMC's delivery of excellent and compassionate health services, and its contribution to the quality of life and economic vitality of the region. This is accomplished by support of many services to CAMC patients and employees. Each year the Foundation supports the Prevention First Program at CAMC Women & Children's Hospital. The Prevention First Program seeks to reduce medical costs, facilitate all aspects of health care, including support of the medical plan established by the primary care physician, while meeting the special needs of low-income children and family in the home environment. Specifically, the Prevention First Program promotes healthy outcomes that will decrease pre-term labor, infant mortality, unplanned C-Section rate, NICU/PICU length of stay and increase infant birth weight while promoting childhood well-child care and immunizations. Each year the foundation also helps keep physicians and allied health care employees up-to-date by providing funding for many continuing education programs. In 2010, the Foundation provided a $173,660 grant for continuing education for CAMC employees in support of keeping our employees well trained to better serve our patients. To ensure that our community receives care from well-trained health care professions, the Foundation also provided $250,000 for nursing and allied health scholarships to individuals pursuing a career in health care.

Integrated Health Care Providers (IHCPI) is an affiliated company of the CAMC Health System existing to support the mission of CAMC in striving to provide the best healthcare to every patient every day. When the CAMC Health System determines an essential physician need or access issue for patients is present, IHCPI can be called upon to open a practice. When the existing provider community cannot provide an essential service, IHCPI through its affiliation with CAMC Health System can work to fill the gaps. Currently, IHCPI operates the mission critical entities of the David Lee Cancer Center, Health Plus network and a host of sub-specialty physician practices primarily operated to support the level I trauma mission of...
CAMC. IHCPI practices see a disproportionate share of the uninsured and underinsured in their practice locations. When many of the sub-specialists are not providing trauma support, they are providing access to care for many who cannot receive services locally such as dental, oral maxilla-facial/cleft palates, cranial reshaping etc.

CAMC Teays Valley Hospital is a 68 bed rural hospital in Putnam County, WV and provides acute and emergency services to its community as well as community benefit to the residents of its county.

COMMUNITY NEEDS ASSESSMENT (Form 990 Schedule H Part V 1-7)
CAMC addresses community needs through two methodologies: the needs we address with others and those we address ourselves.

NEEDS ADDRESSED WITH OTHERS: For the purposes of addressing community health issues in Kanawha County (Form 990 Schedule H Part V 1a), CAMC is an active sponsor of the community health survey and assessment process completed every three years through the Kanawha Coalition for Community Health Improvement.

The Kanawha Coalition was founded in 1994 by Kanawha County hospitals working in partnership with other local organizations. The Coalition’s mission is to identify and evaluate health risks and coordinate resources to measurably improve the health of the people of Kanawha County.

Goals of the Kanawha Coalition for Community Health Assessment include:
1. Assess the health care needs of the citizens of Kanawha County.
2. Inventory available resources.
3. Determine unmet needs.
4. Evaluate and prioritize needs.
5. Involve affected organizations and constituencies in developing possible solutions.
6. Develop consensus.
7. Facilitate implementation.
8. Measure and evaluate outcomes.
Steering Committee Members include the senior leaders of the following organizations: (Form 990 Schedule H Part V 1,4)

- Charleston Area Alliance
- Charleston Area Medical Center
- Family Care Health Center
- Highland Hospital
- Kanawha-Charleston Health Department
- Saint Francis Hospital
- Spilman Thomas & Battle, PLLC
- Thomas Memorial Hospital
- United Way of Central WV
- WV Community Voices
- Wellness Council of West Virginia

The Kanawha Coalition for Community Health Improvement conducted its fourth community health assessment in the fall of 2006. The survey covered a wide variety of health care topics and was designed to determine the community’s perception of health care needs and concerns, and to provide data on health-related behaviors. The survey also addressed a number of social and economic concerns. This assessment included a survey of key leaders in our community, a telephone survey among randomly selected households in Kanawha County, and careful analysis of existing research and data on health statistics for our county as compared to West Virginia and the Nation.

The Kanawha Coalition’s comprehensive community health assessment is comprised of four components: (Form 990 Schedule H Part V 1d,h,3)

- Telephone survey among randomly selected Kanawha County households
  - An independent sampling firm randomly selected Kanawha County resident phone numbers that were used in conducting the telephone survey. The surveys were conducted using appropriate quality controls which included involving epidemiologists in the design of the survey instrument, thorough and consistent training of interviewers, and the use of reputable survey-analysis software. The principal investigator provided oversight to the surveying process including data collection and entry. This assessment marked the first use of scannable survey forms. The Coalition decided to use this technology to expedite the entry of survey responses and to ensure the accuracy of data input. The computer software used also allows for cross-tabulations of data at a level not previously available. This report was compiled and verified for accuracy by members of the Kanawha Coalition for Community Health Improvement. This survey sample size resulted in a statistically significant 95% confidence interval with an error of margin of plus or minus 6.53%.

As with any telephone survey, there are certain limitations. The result of the survey depends on the accuracy of the responses given by the persons interviewed. Self-reported behavior must be interpreted with caution. To assure proper sampling distribution, the demographics of the survey respondents were compared to county demographics. Survey results were found to closely correlate with census data in the areas of income, education, employment and types of households (i.e. number of adults and children in household). There was an overrepresentation of female residents and those who are age 65 or older. According to local research expert, Don Richardson of Richardson Associates, this is typical when conducting telephone surveys. The Kanawha Coalition has found this to be consistent over the years, with more females responding to all its previous telephone surveys (1995, 1998, 2002-03). There was also an under-representation of African American respondents to the 2006 survey. It should be noted that during the 2006 survey, respondents were read a longer list of categories of races / ethnicities to choose from than during previous surveys. This change was made so the Kanawha Coalition’s local survey would more closely parallel the categories used by the United States Census Bureau. Three percent of those responding to the 2006 survey declared themselves a race “other” than African-American or white, an increase over previous years.
Surveys of Kanawha County Key Informants ((Form 990 Schedule H Part V h,3)
  o Key Informant Surveys provide perceptions of community and business leaders about
    the county’s most important health problems and the quality and quantity of health care
    available in Kanawha County. Approximately 100 community leaders were asked to
    complete a four-part survey. Forty-three surveys were returned (43%). Of the 43
    respondents, eight (8) were from the business community; eleven (11) from health care
    (including hospitals, free clinic, emergency medical services and the county health
    department), ten (10) from health and social service agencies, six (6) from government
    (mayors, county commissioner, state legislator), two (2) from education (higher
    education and public school system), two (2) from faith communities, one (1) mental
    health provider, one (1) community foundation, and two (2) individual community
    leaders. Their responses were compiled and can be found in the Community Needs
    Assessment Report.

Data analysis (survey results and existing health statistics)
  o The Community Needs Assessment report is divided into categories including;
    Community Life; Access to Health Care; Dental Care; Tobacco; Physical Activity;
    Safety; and Key Health Statistics. Under each category are the community perceptions
    based on the results of the telephone survey, comments from key informants, and
    related health statistics for Kanawha County as compared to State and National data.

Community Health Issues Forum (Form 990 Schedule H Part V 1e,g)
  o This survey is used in conjunction with focus groups, input from key informants and
    secondary data to compile a list of top community health issues which are then
    prioritized through a county-wide open Community Forum to establish the top three
    health issues the community will address over the next three-year time frame. The last
    survey was completed in late 2006 and the Community Forum was held in March 2007
    during which obesity, lack of physical activity and tobacco use were identified as
    the priorities for the next three years. The next survey process began in late 2010 and
    will be finalized in June 2011 with a Community Forum held during the summer of
    2011.

CAMC participates on the Coalition’s Steering Committee and oversees the Community Work Groups as
they address these priority issues (Form 990 Schedule H Part V 6a-g). Additionally, since 2006 the Kanawha
Coalition for Community Health Improvement has been the coordinating body for addressing youth risks
and interventions in our county.

Kanawha Coalition for Community Health Improvement
Community Impact - HIGHLIGHTS

In 2009, the Kanawha Coalition re-designed its webpage and changed its web address to
In 2010, the Kanawha Coalition began its own Facebook page. The Community Health Assessment
results are available on the webpage. (Form 990 Schedule H Part V 2,5c)

Tobacco Prevention Update: (2010)
  ▪ Conducted the first ever “Pack the Park for Public Health” event at Appalachian Power Alley Park in
    Charleston, West Virginia. This event was intended to strengthen community support in Kanawha
    County for our Clean Indoor Air Regulation (CIAR) by celebrating the importance of good public health
    policy, and to provide an opportunity for surrounding counties to learn more about our county’s
    experience in implementing our CIAR and how they too can achieve a similar outcome. Seventeen
    different public health organizations exhibited at the
event and approximately 300 people pre-registered and attended the event. Participating counties included Cabell, Wirt, Lewis and Monongalia. (July 2010)

- KCCHI partnered with the Kanawha-Charleston Health Department to submit its social marketing campaign, “Eat, Drink & Breathe Easy” to the National Association of County and City Health Officers (NACCHO) as a promising practice. It was recognized by NACCHO as a promising practice in 2010.

Chart A shows the trends of smokers and non-smokers among Kanawha County from 2000 through 2010 (CDC SMART BRFSS Data). The Youth Risk Behavior Survey data (Chart B) is conducted every two years, with the latest data available from 2009.

**Obesity Prevention Update: (2010)**

- KCCHI continues to serve as a community partner on Kanawha County Schools’ Wellness Committee.
- KCCHI offers community-based public health experience to students pursuing health-related degrees. In 2010, KCCHI served as project site for a Master of Public Health student, nursing student and a family medicine resident.
- KCCHI continues to serve as coordinator for the Robert Wood Johnson Foundation Healthy Kids Healthy Communities Grant, for which CAMC Health Education and Research Institute serves as the lead, fiscal agent. This grant, in the amount of $360,000/4 years, is intended to address childhood obesity through environmental and policy change. (2009 – 2013)

**Other:**

- KCCHI is a founding member of the Kanawha Communities That Care (CTC) Substance Abuse Prevention Partnership. KCCHI’s executive director served as CTC’s Board Chair 2006-09 and continues to serve as a member of the board (2009 – present) www.kanawhacountyctc.org

**NEEDS ADDRESSED BY CAMC:**

Charleston Area Medical Center provides quality care for our community residents throughout every stage of life focused on our core competencies of (1) clinical and technical excellence, (2) performance excellence culture and infrastructure and (3) education and research. We understand the leadership role that health care must play in providing exceptional medical care, charity care, education, corporate contributions and creating community partnerships to address the lives of the real people we care for everyday. What sets us apart is our strong track record of developing partnerships to address health issues. Our creative investment of time and dollars will be even more important to our ongoing work as health care reform results in declining reimbursement and growing need for access to services.
Median age - 41  West Virginia has one of the oldest populations in the nation, with our future growth only in the 65 plus population.

Median household income – $34,929 (#46 in the nation)

Per capita income- $19,344

Major employers – Walmart, CAMC, Kroger, State and County Government.

Education levels – 17.1% of West Virginians 25 years and older have a bachelor’s degree (#50 in the nation)

Race - 95% white, 3% black, and 2% other. CAMC’s patient demographics are very similar.

Unemployment rate – 10.2% compared to 10.3% statewide and 9% nationally

Percent low birth weight babies – 13.7% worse than the U.S. rate

Health and social factors - Overall National Ranking #43  ((Form 990, Schedule H Part V 1f)
Cardiac Heart Disease #50  Cancer Deaths #49
Diabetes #50  Smoking #49
Health Status (% reported fair or poor health) #50  Stroke #47
Heart Attack & High Blood Pressure #50  Cardiovascular Deaths #46
Physical Activity #50  Obesity #45

Our culture is one of establishing programs and services to meet the needs of the citizens of our community. From our beginning, our focus has been on assessing needs and working to provide the needed services, either solely or in partnership with others. We recognize the responsibility we have serving the central and southern part of West Virginia. There is a certain pride in being different that has, since the birth of our state, taken us on a road less traveled. Our patients reside in the Appalachian valleys and mountains in sometimes still difficult to access remote areas. Research continues to show that there is still too little physical activity, too much obesity, heart disease, cancer and black lung. In too many indicators of social health, we are too close to last. The CAMC Health System, as professionals individually and collectively, believe it is our responsibility to influence the quality of life in ways that transcend the role of a typical hospital. Despite the obstacles faced by a state working hard to strengthen its economic base and its ability to recruit and retain talent, we believe our role is to be the inspiration to encourage health far beyond the treatment of disease. As the largest health care provider in WV, we...
accept the obligation of leadership. We seek to innovate and implement programs to assure that our people can enjoy all that West Virginia has to offer through the greatest possible health and well being.

**Leadership**

Since our formation in 1972 when CAMC affiliated with West Virginia University to establish the WVU Charleston Division to expand medical education opportunities to southern WV, CAMC has continued to be an “innovator” in our approach to addressing community health. In 1986 our merger with another hospital allowed us to create Women and Children’s Hospital to better focus on the health of this population. In 1995, our focus on improving health earned us the VHA Community Health Award and we continue this founding principle to address the identified community health needs for community. The Board Planning Committee provides oversight and direction for our community health plan and reports to the Board of Trustees, a volunteer board representing the community. To keep community health at the forefront, community health is a BIG DOT (our term for a key measure for the system) which is reported quarterly to the Board and throughout the organization. Our senior team provides leadership to a number of community organizations, both in board leadership roles and financially. (Form 990, Schedule H Part V 6e)

**Commitment**

The ongoing support for many programs, as well as the continual development of new programs, is evidence of our commitment to community health. Not only do we continue to provide mission critical services that do not generate revenue but meet community needs (such as the Family Resource Center, Lactation Support and Palliative Care), we provide the majority of the funding and housing for the Executive Director of the Kanawha Coalition for Community Health Improvement. Recognizing the need to support children with alleged sexual abuse, physical abuse or neglect, we established the Child Advocacy Center. We provide pharmacy support, maintenance and housekeeping services at no cost to the local West
Virginia Health Right Clinic that serves the uninsured/underinsured. We also incurred more than $1.2 million in expenses to support patients with the paperwork and information needed for enrollment in government programs or obtaining charity care.

Community Involvement

Annually, CAMC identifies key communities and areas of focus through four approaches: (Form 990, Schedule H Part V 1g,h,6g)

1) CAMC’s Planning Department identifies and analyzes state and county level demographics and identified health risks and compares our services and programs with the identified needs. The gap analysis is reviewed annually as part of the strategic planning process and new programs or services may be initiated. An example is the development of the Wound Center due to the high incidence of diabetes in our population.

2) CAMC’s CEO and Chief Strategy Officer serve on the Steering Committee of the KCCHI and CAMC supports the efforts of the Coalition’s community health survey conducted every three years. The survey results are used to develop priorities for Kanawha County. The top three community health issues are identified through a community forum and addressed through community work groups, which include participation from CAMC employees as well as other agencies and community volunteers.

3) Members of the CAMC senior leadership team work with the United Way of Kanawha Valley in development of a needs assessment that is used to determine funding priorities for Kanawha and Putnam County social service agencies.

4) CAMC addresses public policy issues at both the state and federal levels, such as advocating for Medicaid and Medicare funding. Legislature agendas are developed each year.

Sustainability

CAMC’s annual budget includes board approved expenditures for community benefits dollars and each department budget is approved for the community benefit programs listed above and in the following Community Benefit Report detail. The support for the Kanawha Coalition for Community Health Improvement and the Partners in Health Program has continued since the mid-1990s and these programs are recognized as valuable contributors to meeting our mission. Funding has continued for these programs even while we have worked to reduce our overall costs. **Striving to provide the best health care to every patient, every day and improving the health of our community is why we exist.** (Form 990, Schedule H Part V 6f)
Priority Programs

Four of the priority programs addressing community need we provide our community and state are described below. These programs demonstrate our commitment to addressing community health issues and our creativity to invest in the challenges we face in our service area and in West Virginia as a whole.

(Form 990, Schedule H Part V 6h)

West Virginia Nursing Leadership Institute

Overview: An awareness of the need for leadership to address nursing workforce issues led CAMC and the West Virginia University School of Nursing – Charleston Division to collaborate in 2004 to create the West Virginia Nursing Leadership Institute (WVNLI). From 2005 through 2008, the WVNLI provided individual leadership development training to emerging nurse leaders from across the state. Each cohort was engaged for 12 months through four intensive onsite seminars with intersession work on leadership projects within their home institutions and distance learning activities delivered via webcast. In 2009, the WVNLI program transitioned to leadership development for teams of nurses built on the model utilized with proven success in developing individual nurse leaders. Sponsoring institutions and participants identified that teams of nurses could more effectively leverage their leadership and effectiveness skills to transform approaches to nurse satisfaction, retention, patient care quality and safety. A pilot cohort completed the team leadership development training program in 2009 and a second cohort is currently enrolled. A number of national, regional and local partners have supported the WVNLI since 2004 through financial support, in-kind contributions, and active participation on the WVNLI Advisory Board.

Impact: 101 nurses completed the individual leadership development training program from 2005 through 2008. Nurses demonstrated an increase in leadership skills in their roles, an increase in their skills relative to planning and implementing leadership projects to impact the organization and advancement into leadership positions within their home institution. 15 teams comprised of 55 nurses completed the pilot team leadership development training program in 2009. Assessment findings from an external evaluation indicated that sponsoring organizations highly valued successful project implementation, teams improved their project management skills and understanding of themselves and their team members, and were viewed as effective within their organizations. (Results available on site.) Eleven teams comprised of 44 nurses are currently enrolled.

Future Goals: We are currently working on a plan for expansion of WVNLI to include inter-professional team leadership development. We are working on the development of a return on investment model for the program. We have presented the cost of funding the program to our partners, who believe that a tuition driven/local organizational support model will work for this program.

Geriatrics Initiative

Overview: The Geriatrics Initiative was created by Charleston Area Medical Center and West Virginia University – Charleston Division. According to the US Census, WV has the second oldest population in the nation. As the age of West Virginia’s population increases, so does the need for quality, accessible health care for the elderly, as well as highly-trained specialists to provide care. In 2004, CAMC took the lead and entered into a dialogue with over 40 individuals representing 20 aging organizations in our region to discuss how we could work together to impact the health of older adults in our state. In 2006, the Arthur B. Hodges Foundation and the CAMC Foundation established an endowment in the amount of $2 million to support geriatric endeavors. The endowment fund has made it possible to develop and sustain three new geriatric training programs in Charleston - a geriatric medicine fellowship, a geriatric pharmacy residency program and a post-master's geriatric nurse practitioner program. In 2010, both foundations gifted an additional $250,000 to support geriatric research for faculty, residents, fellows and students.

Impact: All three training programs are active and began accepting students in 2009 resulting in the following: one geriatric pharmacy resident graduated in May 2010, two geriatric medicine fellows graduated in August 2010 and six geriatric post-masters nursing students graduated in December 2010. A new nursing faculty member was hired to manage the Post-Master’s Program and a new part-time Geriatrics Research Coordinator was hired February 2010. CAMC continues to focus on clinical care coordination using a multi-disciplinary team approach. Two pilot projects specifically geared toward seniors are operational. Two new geriatric research projects have been started. In addition, a Geriatrics Journal Club meets monthly, weekly Geriatrics Lectures are held with guest speakers making up-to-date
presentations, monthly Geriatrics Lunchtime Learning programs are telecast to all CAMC locations, a five week Caregiver Educational Course is offered two times a year to assist caregivers in their role, and AARP Driving Safety Courses are regularly offered to seniors.

**Future Goals:** Given the very large numbers of chronically and frail older adults living in our service area, we will continue to develop the Geriatrics Initiative to educate and support our health care providers, patients, caregivers, and community.

**West Virginia Perinatal Telehealth Project**

**Overview:** Working with the West Virginia Perinatal Partnership, CAMC has spent the past several years designing and developing a statewide Perinatal Telehealth Program. The Program will provide rural health care sites with the equipment and training necessary to link their organizations (and obstetricians, nurse practitioners, certified nurse midwives, nurses, pregnant women and their families) with the three tertiary care centers (and perinatologists) in the state. This project will allow high risk pregnant women and their health care providers to receive perinatal consultation services, education and obstetrical referrals without leaving their rural providers.

**Impact:**
- 17 rural healthcare sites will have access to obstetric/perinatal care via telemedicine consultations for the first time.
- Pregnant mothers located in 14 rural counties will receive better and more frequent care due to greater accessibility of healthcare.
- 353,250 rural county residents will realize additional benefits from this project through access to the videoconferencing equipment provided in their local areas. This equipment will provide access to general healthcare consults, healthcare education, first aid and basic healthcare training for local responders, communication and information gathering sessions with a variety of social service organizations, etc.

Visits were made to each rural site during the spring, summer and fall of 2010. Also, all tertiary care centers (perinatologists) have received equipment to provide consultation services. These sites include:
- CAMC – Women and Children’s Hospital, Charleston, WV
- Cabell Huntington Hospital – Huntington, WV
- WVU Hospital-Ruby Memorial, Morgantown, WV

**Future Goals:** Equipment specifications for the rural sites have been completed and equipment has been ordered. Delivery for these sites is planned for spring/summer 2011. The WV Telehealth Alliance has provided opportunities for enhanced broadband capabilities for these rural sites through a project with the Federal Communications Commission (FCC). As equipment roll-out is completed, site testing will be conducted with the tertiary referral sites and consultation scheduling will be available. It is expected that perinatal consultations will be available at all sites by late fall 2011.

**Ryan White Program**

**Overview:** The CAMC/WVU Charleston Division Ryan White Program is currently the only fully funded Part C site in southern West Virginia (funded since 2001) and provides HIV primary care to approximately 350 individuals. Services include primary, gynecological and HIV specialty care; behavioral health; case management and social services; pharmacist counseling; peer advocacy and dental care. The program serves primarily the rural, underserved and impoverished counties of this area. Although our funding has been level over the last ten years, our patient load has tripled. Populations particularly impacted are young white MSM, African Americans and the rural poor.

**Impact:** Outreach involves getting the message out to health care partners in our region as well as the general public. The ultimate goal is to increase awareness to 1) decrease new infections; and 2) test and get into care as many HIV-infected individuals as possible. There are an estimated 1,000 individuals living with HIV/AIDS in our service area (1 in 5 are unaware of their diagnosis). In order to be successful in terms of outreach, we must continue to develop effective marketing strategies and provide updated and pertinent educational resources based on our client population and CAMC Ryan White Program (CAMCRWP) initiatives. West Virginians, including health providers, have to be made aware of the CAMCRWP in order
to benefit from our services. Because of increasingly effective marketing and outreach over the past few years, the medical community and public recognize CAMCRWP as a leader of HIV care in the state.

**Future Goals:** In 2010, sixty-two radio spots and an on-air interview on 98.7 FM (The Beat) yielded call-in questions and 200 "hits" on our website. Our initial goal is to concentrate on two target audiences - females ages 25-54 and young adults ages 16-35 - through radio advertisements over the next 12 months and revisit our findings. Our printed program materials consist of a CAMC Ryan White Program brochure and a quarterly newsletter called *path*. The brochure is updated annually and is our best marketing tool in terms of reaching the public. The newsletter has become more user-friendly over the past few years in terms of both content and presentation. Our new traveling exhibit has 5 different display topics, which makes it more versatile and can be geared to different audiences. The exhibit piece provides a commanding presence in any venue and is a major plus for our program. The majority of CAMCRWP’s public programming is in conjunction with HIV Awareness days. We have learned to schedule programs that will accommodate more than one activity.

**KEYS 4 HealthyKids**

**Overview:** CAMC and CHERI partnered with the KCCHI to obtain funding to address childhood obesity from the Robert Wood Johnson Foundation Healthy Kids, Healthy Communities grant. Kanawha County was one of only 41 communities to receive this grant nationwide and the only one in WV. **KEYS 4 HealthyKids (K4HK)** is delivered through active, strong and dedicated alliances between CAMC, city government, other local health care providers, business groups, community health providers, social service organizations, and individuals (22 organizations in total). KEYS impacts the community through policy and environmental change to increase access to healthy affordable food and physical activity opportunities. The K4HK initiative focuses on low resource, at-risk youth and their families currently living in the East End and the West Side of Charleston. These neighborhoods all share similar disparities in terms of lack of access to safe venues for physical activity and healthy, affordable foods; however all have strong neighborhood associations. Through the assessment phase, KEYS learned that residents had an interest in community gardens and pocket parks within their neighborhoods to increase access to healthy affordable food and physical activity opportunities. KEYS also learned that area childcare facilities yearned for the technical assistance to create policies within their facility that improved access to healthy, affordable food and physical activity for the children they served. Through community partnerships, KEYS has been able to offer a training program to childcare centers, spark interest in community gardens and form a community gardens committee, and identify two vacant properties for pocket parks. This program is an ongoing effort to address obesity in Kanawha County, supporting the KCCHI workgroup on Obesity which was established in March 2007. It also supports the efforts of the CAMC Weight Loss Center that provides comprehensive and multidisciplinary weight management offerings across the lifespan. The children’s component is under the direction of Dr. Jamie Jeffrey, Medical Director of our Children’s Medicine Center and Project Director for this grant.

**Impact:** KEYS 4 HealthyKids has facilitated the revitalization of four community gardens and is currently developing a plan to deliver leftover produce to area food banks and shelters. KEYS has also identified one pocket park location in each community. Plans for revitalization begin Spring 2011, and the parks will be available to everyone. Six area childcare facilities are participating in the Nutrition and Physical Activity Self Assessment for Childcare Centers to improve their policies regarding healthy affordable food and physical activity. When the training is complete, the six centers will be KEYS 4 HealthyKids Certified Healthy Childcare Centers. A youth council was created with children and currently there are 15 members. The youth council has completed Walkability Audits around various community centers and plans to share their information with City Council and CURA.

**COMMUNITY HEALTH NEEDS NOT ADDRESSED** (Form 990, Schedule H Part V 1i,7)

As described in Health and Social Factors above and in the KCCHI survey findings, there are many more community health needs that are not currently being addressed. A number of these were not identified as priorities by the community during the assessment and forum processes. Others are being addressed by other groups or agencies and there are insufficient resources to address the remainder. These resources include not only dollars, but also time and proven strategies that generate desirable outcomes.
COMMUNITY HEALTH SERVICES, COMMUNITY HEALTH EDUCATION, COMMUNITY BASED CLINICAL SERVICES, HEALTH PROFESSIONS EDUCATION AND COMMUNITY BUILDING ACTIVITIES - Details for programs and services in these categories follow.

NOTE: At CAMC, we have measured community benefit since 1993. Initially we used Lyons Software, and then used the methodology created by the West Virginia Health Care Authority. We are again using Lyons Software. This community benefit inventory reflects CAMC’s community-based and community oriented focus, demonstrates our accountability to the community and our response to unmet needs and the community’s priority health issues.
Nationally, there is a significant history to community benefits from the work of the Catholic Health Association, the W.K. Kellogg Foundation, VHA and others. Assessing & Addressing Community Health Needs Discussion Draft March 2011 as well as the IRS 2010 Instructions for Schedule (Form 990) were used to prepare the 2010 Community Benefit Report.

2010 Community Benefit Activities

Community Health Improvement Services (A)
Community Health Education (A1)

AARP DRIVING SAFETY COURSES

Description: Educational program designed to demonstrate how age related changes may affect seniors’ driving safety.
Gender: Both Males and Females
Department: 25780 (Health Information Center)
Department Contact: Beverly Withrow-Thornton (8-9989)
Objective: Participants will understand age-related changes that may affect their driving and improve their safety on the road.

Partners: WV Chapter of AARP

Persons: 80

Expenses: 3,280

Revenues: 0

Benefit: 3,280

ADVANCED ANATOMY AND PHYSIOLOGY CLASS

Description: The CAMC Patient Simulation Center offered an advanced anatomy and physiology class to the students of George Washington High School.

Gender: Both Males and Females

Department: 25774 (Patient Simulation Center)

Department Contact: Barbara McKee (8-1859)

Objective: Provide an enhanced educational opportunity for area students.

Persons: 212

Expenses: 2,282

Revenues: 0

Benefit: 2,282

ASTHMA AWARENESS

Description: Booths at the State Capitol and Town Center Mall on World Asthma Day promoting asthma awareness.

Gender: Both Males and Females

Department: 42500 (Respiratory Care)

Department Contact: Chuck Mengers (8-9401)

Objective: Promote awareness of asthma.

Persons: 500

Expenses: 600

Revenues: 0

Benefit: 600

ATV SAFETY PRESENTATION

Description: A powerpoint presentation and video regarding ATV safety. Designed to promote safety and awareness in school aged children.

Gender: Both Males and Females

Department: 41232 (Trauma Services)

Department Contact: Tresa Pullen, RN, BSN (8-7809)

Objective: Promote ATV Safety, rules of the road, proper gear, size appropriate vehicles, and no passengers.

Persons: 3210

Expenses: 3,249

Revenues: 0

Benefit: 3,249

BABY SIGN LANGUAGE PROGRAM (CLASSES AND PLAYGROUP)

Description: Support and education for parents and their small children both hearing impaired and non-impaired. Sign language vocabulary taught to both parents and children in classroom and play group format.

Gender: Both Males and Females

Department: 43608 (Family Resource Center)

Department Contact: Kelly Gilbert (8-2545)

Objective: Promote language development with small children through parent-child interaction through play with signing.

Persons: 14

Expenses: 366

Revenues: 0

Benefit: 366
BICYCLE SAFETY PROGRAM
Description: A program designed to teach bicycle safety at local elementary schools. Programs were held throughout the area.
Gender: Both Males and Females
Department: 41232 (Trauma Services)
Department Contact: Tresa Pullen, RN, BSN (8-7809)
Objective: To educate elementary school children regarding bicycle and playground safety.
Persons: 1700
Expenses: 1,765
Revenues: 0
Benefit: 1,765

BROKEN PROMISES
Description: A demonstration of scenarios involving students in motor vehicle accidents on prom night starting from the scene of the accident to the student's funeral with speakers providing a presentation on the loss of a loved one after the funeral.
Gender: Both Males and Females
Department: 41232 (Trauma Services)
Department Contact: Tresa Pullen, RN, BSN (8-7809)
Objective: To increase awareness for outcomes of alcohol/drug consumption and driving.
Persons: 500
Expenses: 1,150
Revenues: 0
Benefit: 1,150

CAMC PATIENT SIMULATION CENTER OUTREACH
Description: The CAMC Patient Simulation Center offered a Clinical Skills Lab to the students of Spring Valley High School.
Gender: Both Males and Females
Department: 25774 (Patient Simulation Center)
Department Contact: Barbara McKee (8-1859)
Persons: 54
Expenses: 490
Revenues: 0
Benefit: 490

CAMC WOUND HEALING CENTER OUTREACH
Description: A series of presentations to local business, community groups, and insurance companies on wound healing and chronic wound care, hyperbaric oxygen therapy, and pressure ulcer treatment via hyperbaric therapy.
Gender: Both Males and Females
Department: 47658 (Wound Healing Center)
Department Contact: Lisa Smith (8-7049)
Objective: Educate the community about wounds and wound care.
Persons: 80
Expenses: 240
Revenues: 0
Benefit: 240

CAR SEAT SAFETY
Description: A program designed to instruct new parents on the use of car seats purchased through Prevention First Grant for the car seat safety class.
Gender: Both Males and Females
Department: 43608 (Family Resource Center)
Department Contact: Kelly Gilbert (8-2545)
Objective: Teaches new parents how to safely utilize the car seat they have been provided. If the restraint devices are used correctly the potential for injury to the child in the event of a motor vehicle accident is greatly reduced.
Persons: 158
Expenses: 3,895
Revenues: 0
Benefit: 3,895

Cardiac Kids
Description: A program designed to go into Kanawha County Elementary Schools and perform blood work on the students and then educate them about the risks for cardiac disease that could be identified from the findings.
Gender: Both Males and Females
Department: 43540 (WCH Lab)
Department Contact: Nassar Larijani (8-2386)
Objective: Promote awareness of the potential dangers of cardiac disease beginning at a young age.
Persons: Unknown
Expenses: 500
Revenues: 0
Benefit: 500

Childbirth Education Classes
Description: A program designed for newly expectant parents to make them aware of childbirth options in the community.
Gender: Both Males and Females
Department: 43608 (Family Resource Center)
Department Contact: Kelly Gilbert (8-2545)
Objective: Improved birth outcomes.
Persons: 1836
Expenses: 28,200
Revenues: 0
Benefit: 28,200

CLOSED CIRCUIT TV NETWORK SYSTEM
Description: An on demand TV system offering over 100 educational videos for access to patients and their families. The system also includes a relaxation channel and the ability to access videos based on patient availability by making selections on their telephone keypad.
Gender: Both Males and Females
Department: 25780 (Health Information Center)
Department Contact: Beverly Withrow-Thornton (8-9989)
Objective: To provide consistent patient education for our patients and their families.
Persons: 4,374
Expenses: 12,000
Revenues: 0
Benefit: 12,000

COMMUNITY HEALTH AND OUTREACH
Description: Health education resources provided for area health fairs.
Gender: Both Males and Females
Department: 25780 (Health Information Center)
Department Contact: Beverly Withrow-Thornton (8-9989)
Persons: 525
Expenses: 500
Revenues: 0
Benefit: 500

COMPASSIONATE FRIENDS SUPPORT GROUP
Description: Support group for bereaved parents.
Gender: Both Males and Females
Department: 43608 (Family Resource Center)
Department Contact: Kelly Gilbert (8-2545)
Objective: Nationally recognized support group for any bereaved parent.
Persons: 139
Expenses: 1,172

22
CPR CLASS
Description: Basic life saving class for lay providers.
Gender: Both Males and Females
Department: 41032 (3 South)
Department Contact: Odessa Richards (8-3409)
Objective: To teach members of the community basic CPR life saving skills including CPR and Heimlich Maneuver.
Persons: 10
Expenses: 36
Revenues: 0
Benefit: 36

FALL PREVENTION
Description: A Trauma Services community outreach program designed to help reduce falls and injuries in the home.
Gender: Both Males and Females
Department: 41232 (Trauma Services)
Department Contact: Tresa Pullen, RN, BSN (8-7809)
Objective: Reduce critical injuries due to falls around the home.
Persons: 765
Expenses: 392
Revenues: 0
Benefit: 392

FAMILY CENTERED TOURS
Description: Monthly guided tours of Women and Children's hospital units for expecting families.
Gender: Both Males and Females
Department: 43608 (Family Resource Center)
Department Contact: Kelly Gilbert (8-2545)
Objective: To decrease the initial fear and anxiety of giving birth at the hospital.
Persons: 29
Expenses: 372
Revenues: 0
Benefit: 372

GIRL TALK
Description: Workshops to educate girls 11 to 16 about puberty, body changes, media and financial literacy.
Gender: Females
Department: 43608 (Family Resource Center)
Department Contact: Kelly Gilbert (8-2545)
Objective: Facilitate discussion on particular challenges facing girls as they go through this period in their lives and empower them with healthy decision making and coping skills.
Persons: 28
Expenses: 124
Revenues: 0
Benefit: 124

HEALTH INFORMATION CENTER
Description: The Health Information Center provides up-to-date reliable health information via the website, provides email responses to health questions and a 1-800 telephone number to request health information.
Gender: Both Males and Females
Department: 25780 (Health Information Center)
Department Contact: Beverly Withrow-Thornton (8-9989)
Objective: Promote health education in the community.
Partners: Lung Association
American Cancer Society
American Heart Association

Persons: 35000
Expenses: 20,000
Revenues: 0
Benefit: 20,000

IMAGINE U: A VIRTUAL HEALTHCARE EXPERIENCE

Description: CAMC broadcast of a craniotomy surgery narrated by a local physician via web cast to introduce students to careers in healthcare using technology that links health science classrooms to the real world of health care and hospitals. Students from Boone, Clay, Roane, Jackson, Kanawha and Putnam Counties participated.

Gender: Both Males and Females
Department: 21926 (Human Resources Workforce Dev)
Department Contact: Debby Roquet (8-3376)
Objective: Expose the students at eleven high schools in Kanawha and Boone Counties, four vocational and technical centers to health care careers.
Partners: WV Department of Education
Persons: 1200
Expenses: 15,919
Revenues: 0
Benefit: 15,919

INFANT MASSAGE CLASSES

Description: Classes for parents and infants that cover benefits of massage and specific techniques to soothe a new baby.

Gender: Both Males and Females
Department: 43608 (Family Resource Center)
Department Contact: Kelly Gilbert (8-2545)
Objective: Parents learn to decrease tension, fussiness and irritability with their new babies.
Persons: 6
Expenses: 120
Revenues: 0
Benefit: 120

KANAWHA LACTATION ASSOCIATION

Description: Six lactation consultants participate on the Kanawha Lactation Association which meets bi-monthly and works to promote, support, and protect breastfeeding in our area.

Gender: Both Males and Females
Department: 43116 (Lactation)
Department Contact: Jamie Peden (8-2180)
Objective: To promote, support, and protect breastfeeding in our area.
Persons: Unknown
Expenses: 2,500
Revenues: 0
Benefit: 2,500

LIVING WITH YOUR ICD (IMPLANTABLE CARDIAC DEFIBRILLATOR)

Description: A support group and education for people living with an ICD.

Gender: Both Males and Females
Department: 25780 (Health Information Center)
Department Contact: Beverly Withrow-Thorton (8-9989)
Objective: To teach and inform patients and families with an ICD on ways to improve quality of life.
Persons: 28
Expenses: 3,500
Revenues: 500
Benefit: 3,000
### Mammography and Bone Density Screening Educational Program

**Description:** Educational program provided to the community on the importance of mammography and bone density screenings.

- **Gender:** Females
- **Department:** 41518 (Medical Imaging)
- **Department Contact:** Tuanya Layton (8-9289)
- **Objective:** Educational program designed to explain the importance of regular mammography and bone density screening.
- **Persons:** 124
- **Expenses:** 80
- **Revenues:** 0
- **Benefit:** 80

### Massage Therapy

**Description:** The program provides massage for patients or parents in the NICU, labor and delivery, mother/baby unit and the Infusion Center.

- **Gender:** Both Males and Females
- **Department:** 43608 (Family Resource Center)
- **Department Contact:** Kelly Gilbert (8-2545)
- **Objective:** Stress relief for patients and parents. Provides a time of respite.
- **Persons:** 576
- **Expenses:** 26,400
- **Revenues:** 0
- **Benefit:** 26,400

### New Patient Chemo Class

**Description:** A class designed for patients and their families who are about to begin chemotherapy and the content is based on feedback from former patients. The classes are offered twice per month.

- **Gender:** Both Males and Females
- **Department:** 47441 (Chemotherapy)
- **Department Contact:** Bev Farmer (8-8399)
- **Objective:** The class is designed to inform the patients about chemotherapy and available services.
- **Persons:** 16
- **Expenses:** 97
- **Revenues:** 0
- **Benefit:** 97

### NICU Family Education

**Description:** Educational program offered to parents and families of premature infants in our NICU to better understand the special needs of their children while they are in the unit.

- **Gender:** Females
- **Department:** 43608 (Family Resource Center)
- **Department Contact:** Kelly Gilbert (8-2545)
- **Objective:** To prepare parents to participate in their child's care while they are in the NICU.
- **Persons:** 62
- **Expenses:** 2,500
- **Revenues:** 0
- **Benefit:** 2,500

### Organ Donation Night at Appalachian Power Park

**Description:** The renal transplant program at General Hospital sponsors an annual night at the ball park for organ recipients and works in concert with the West Virginia Department of Motor Vehicle and others to educate the public on the importance of organ donation and to register individuals for organ donation.

- **Gender:** Both Males and Females
- **Department:** 41452 (Transplant Center)
- **Department Contact:** Glenn Martin (8-6525)
- **Objective:** To heighten awareness of the importance of organ donation.
- **Persons:** 4,000
- **Expenses:** 1,500
Revenues: 0
Benefit: 1,500

PREGNANCY MASSAGE CLASS
Description: Interactive workshop where partners learn techniques to comfort the expectant mother and laboring women.
Gender: Both Males and Females
Department: 43608 (Family Resource Center)
Department Contact: Kelly Gilbert (8-2545)
Objective: Promote massage for pregnancy, labor, and birth and lifelong general relaxation techniques to decrease stress.
Persons: 18
Expenses: 240
Revenues: 0
Benefit: 240

RED CROSS BLOOD DRIVE SUPPORT
Description: Provide support for Red Cross Blood Drives at CAMC via posting signage and providing set up and clean up for the event.
Gender: Both Males and Females
Department: 43608 (Family Resource Center)
Department Contact: Kelly Gilbert (8-2545)
Objective: Promote and support blood donation efforts.
Persons: 100
Expenses: 500
Revenues: 0
Benefit: 500

RELAY FOR LIFE
Description: Staffed the Annual Relay for Life in Charleston which promotes cancer awareness and invites cancer survivors and family to participate in the walk. The event raises money for the American Cancer Society.
Gender: Females
Department: 47441 (Chemotherapy)
Department Contact: Bev Farmer (8-8399)
Objective: Unknown
Persons: 288
Expenses: 0
Revenues: 0
Benefit: 288

RENAI NURSING OUTREACH DIABETES AND KIDNEY DISEASE
Description: Educational presentations on diabetes and kidney disease provided at various locations in the community.
Gender: Both Males and Females
Department: 41032 (3 South)
Department Contact: Tammy Mitchell (8-7579)
Objective: The participants will have a better understanding of their disease and treatments for the stages of renal insufficiencies.
Persons: 35
Expenses: 160
Revenues: 0
Benefit: 160

SAFE SLEEP CRIB CLASS
Description: A class designed to demonstrate safe ways of putting your infant to bed.
Gender: Both Males and Females
Department: 43608 (Family Resource Center)
Department Contact: Kelly Gilbert (8-2545)
Objective: Reduce infant crib deaths.
Persons: 15
Expenses: 880  
Revenues: 0  
Benefit: 880

**SIBLING PREP CLASS**  
Description: A 90 minute class for children who are soon to become big brothers and big sisters.  
Gender: Both Males and Females  
Department: 43608 (Family Resource Center)  
Department Contact: Kelly Gilbert (8-2545)  
Objective: To prepare children for the arrival of siblings.  
Persons: 111  
Expenses: 372  
Revenues: 0  
Benefit: 372

**SPINAL CORD INJURY/ SUPPORT EDUCATION AWARENESS (SCI/SEA)**  
Description: Resource meetings held monthly for SCI survivors, family, new patients or anyone interested in the care and rehabilitation and welfare of individuals who have sustained spinal cord injury.  
Gender: Both Males and Females  
Department: 41346 (Medical Rehab)  
Department Contact: Jeremiah Gagnon (8-7608)  
Objective: Expose new patients and community members to peers surviving with SCI. Education and updates on research, new techniques and enhance accessible options and community awareness.  
Partners: SCI/SEA board and community members.  
Persons: 35  
Expenses: 1,704  
Revenues: 0  
Benefit: 1,704

**THINK FIRST FOR KIDS**  
Description: Program focusing on the prevention of head and spinal injuries for elementary school children.  
Gender: Both Males and Females  
Department: 41158 (Neuro ICU General)  
Department Contact: Debbie Toney (8-3783)  
Objective: Educate children to help prevent head and spinal injuries on the playground, riding bicycles, car safety, and water safety.  
Persons: 370  
Expenses: 10,900  
Revenues: 10,000  
Benefit: 900

**TOBACCO CESSATION PROGRAM**  
Description: CAMC provides program coordination and incentive rewards for program participants in the Tobacco Cessation Program. The program facilitator and medication components are funded via grants from the American Lung Association and a mini grant from the State of WV.  
Gender: Both Males and Females  
Department: 25780 (Health Information Center)  
Department Contact: Beverly Withrow-Thornton (8-9989)  
Persons: 12  
Expenses: 5,200  
Revenues: 5,000  
Benefit: 200

**UNDERSTANDING WORK RELATED HEALTH IMPAIRMENT**  
Description: Educational presentations and tours of the Occupational Lung Center on diagnostics and impairment ratings for the staff of Workers’ Compensation, Social Security Disability Insurance, and the Office of Judges on pulmonary issues.  
Gender: Both Males and Females  
Department: 47656 (Lung Center)  
Department Contact: Byron Young (8-7111)
Objective: To increase knowledge of pulmonary diagnostics and impairment ratings.
Persons: 37
Expenses: 420
Revenues: 0
Benefit: 420

YOGA PROGRAM IN AREA SCHOOLS
Description: A six-week yoga class offered to area schools.
Gender: Both Males and Females
Department: 43608 (Family Resource Center)
Department Contact: Kelly Gilbert (8-2545)
Objective: To promote wellness and foster self esteem in a non-competitive way. Yoga's benefits are calming exercise and enhanced balance.
Persons: 225
Expenses: 10,824
Revenues: 0
Benefit: 10,824

*** Community Health Education
Persons: 56,199
Expenses: 164,965
Revenues: 15,500
Benefit: 149,465

Community Based Clinical Services (A2)
BLOOD PRESSURE CHECKS
Description: Blood pressure clinics offered weekly at Littlepage, Carroll Terrace, Lee Terrace, Lippert Terrace and Orchard Manor housing projects.
Gender: Both Males and Females
Department: 42314 (Cardiac Rehab)
Department Contact: Ed Haver (8-9520)
Objective: To give residents of various housing projects a regular time to have their blood pressure checked. The goal is controlled blood pressure and many have been counseled regarding medications/compliance.
Persons: 240
Expenses: 850
Revenues: 0
Benefit: 850

CAMC RYAN WHITE PROGRAM
Description: Primary outpatient care, education, and information for individuals in southern WV (service area is 16 counties in Public Health Districts 1, 3, and 4) who are at-risk or infected with HIV, regardless of ability to pay.
Gender: Both Males and Females
Department: 46579 (Pharmacy Administration)
Department Contact: Christine Teague (8-8106)
Objective: Primary care to at-risk and HIV infected persons in the service area.
Persons: 318
Expenses: 534,858
Revenues: 281,631
Benefit: 253,227

CHILD ADVOCACY CENTER
Description: Program designed to provide a safe, child friendly place for children with alleged sexual or physical abuse or neglect. Provides a complete medical and psychosocial evaluation and may include a forensic interview. Provide training and education for prosecutors, Child Protective Services, law enforcement, physicians and health care providers. Also, testify and serve as expert witnesses and consultants.
Gender: Both Males and Females
Department: 43602 (Children's Medicine Center)
Department Contact: Debbie Carte (8-2536)
Persons: Unable to Track/Collect Information for 2010
Expenses: 0
Revenues: 0
Benefit: 0

DRUG ADDICTED MOTHER BABY PROGRAM
Description: Program designed to work with pregnant women who have been identified as drug users during the early stages of their pregnancy.
Gender: Females
Department: 43608 (Family Resource Center)
Department Contact: Kelly Gilbert (8-2545)
Persons: 780
Expenses: 3,046
Revenues: 1,523
Benefit: 1,523

GET PHYSICAL
Description: Annual sports physicals for middle and high school students.
Gender: Both Males and Females
Department: 47654 (Sports Medicine)
Department Contact: Mark Henrich (8-4900)
Objective: Provide annual sports physicals for students of Kanawha and surrounding counties.
Persons: 329
Expenses: 1,050
Revenues: 0
Benefit: 1,050

MEDICAL REHABILITATION RECREATIONAL THERAPY PROGRAM
Description: Medical Rehabilitation provides a Recreational Therapy Program both during a rehabilitation patient's stay and as an aftercare option for patients needing the service. Services are provided at no charge and include functional activity, aquatic therapy, kinetic activity, activity daily living, family conferences, and patient evaluations.
Gender: Both Males and Females
Department: 41346 (Medical Rehab)
Department Contact: Jeremiah Gagnon (8-7608)
Objective: The return of patients to the highest level of functionality that they can attain.
Persons: 45
Expenses: 2,769
Revenues: 0
Benefit: 2,769

OUTPATIENT MENTAL HEALTH SERVICES
Description: Outpatient mental health services for the uninsured or underinsured.
Gender: Both Males and Females
Department: 43608 (Family Resource Center)
Department Contact: Kelly Gilbert (8-2545)
Objective: Filling the gap in mental health services for the uninsured or underinsured. This program caters to individuals who have health insurance that does not cover behavioral health services or individuals without health insurance.
Persons: 465
Expenses: 80,059
Revenues: 0
Benefit: 80,059
WEST VIRGINIA HEALTH RIGHT SUPPORT
Description: A free clinic located in CAMC's service area that provides primary health care and adult dental care to the uninsured and underinsured population. CAMC provides pharmacy support, maintenance and housekeeping services to the free clinic.
Gender: Both Males and Females
Department: 46579 (Pharmacy Administration)
Department Contact: Christine Teague (8-8106)
Objective: To support health care delivery to those unable to obtain services elsewhere, other than in Emergency Departments.
Persons: Unknown
Expenses: 138,735
Revenues: 0
Benefit: 138,735

*** Community Based Clinical Services
Persons: 2,355
Expenses: 866,539
Revenues: 305,804
Benefit: 560,735

Health Care Support Services (A3)

CHALLENGED SPORTS PROGRAM
Description: Organize and coordinate a challenged sports program, games, leagues, and exhibitions to offer new patients and individuals in the community an opportunity to participate in challenged sports.
Gender: Both Males and Females
Department: 41346 (Medical Rehab)
Department Contact: Jeremiah Gagnon (8-7608)
Objective: To expose the community to challenged sports such as wheelchair basketball leagues, marksmanship and other events and exhibitions. The program helps individuals develop the skills necessary to participate in a recreation activity. It offers an outlet and an opportunity to pursue these sports at a level in which they wish to compete.
Persons: 391
Expenses: 14,712
Revenues: 14,076
Benefit: 636

ENROLLMENT ASSISTANCE FOR PATIENTS & FAMILIES FOR HEALTH COVERAGE
Description: Patient Accounts provides support to patients for enrollment in government programs or in obtaining charity care. Financial Counselors address the charity process for CAMC patients. Over 35,000 charity and government enrollment applications were provided.
Gender: Both Males and Females
Department: 31706 (Finance)
Department Contact: Jay Richmond (8-6250)
Persons: 40849
Expenses: 1,210,000
Revenues: 0
Benefit: 1,210,000

FOLLOW-UP AFTER PERINATAL LOSS
Description: Labor and Delivery RNs provide outpatient referral and resources for perinatal loss and bereavement.
Gender: Females
Department: 43110 (Labor & Delivery)
Department Contact: Denise Burgess (8-2158)
Objective: Follow-up after experiencing perinatal loss. Provide outpatient referral services/programs to support the patient after the loss.
Persons: 9
Expenses: 248
Revenues: 0
Benefit: 248

LOOK GOOD/FEEL BETTER
Description: Professional cosmetologist provides makeovers for cancer patients.
Gender: Females
Department: 47441 (Chemotherapy)
Department Contact: Bev Farmer (8-8399)
Objective: Improving self esteem and overall well being of the cancer patient.
Persons: 38
Expenses: 80
Revenues: 0
Benefit: 80

PROVIDE NOURISHMENT
Description: Nutrition Services provides nutrition products to patients upon discharge until they can obtain the product themselves through an outside source.
Gender: Both Males and Females
Department: 41802 (Nutrition Services)
Department Contact: Peg Andrews (8-3416)
Objective: To provide appropriate and sufficient nutrition to discharged patients until an outside source is obtained.
Persons: 11
Expenses: 299
Revenues: 0
Benefit: 299

SEASONAL FLU SHOTS DONATED TO THE CHARLESTON HEALTH DEPARTMENT
Description: Donated 2,775 doses of flu shots to the Charleston Health Department for distribution to the general public.
Gender: Both Males and Females
Department: 46840 (Infection Prevention)
Department Contact: Kit Reed (8-8888)
Objective: To prevent the outbreak of influenza in the community.
Persons: Unknown
Expenses: 34,688
Revenues: 0
Benefit: 34,688

Persons: 41,298
Expenses: 1,260,027
Revenues: 14,076
Benefit: 1,245,951

**** Community Health Improvement Services
Persons: 99,852
Expenses: 2,291,531
Revenues: 335,380
Benefit: 1,956,151

Health Professions Education (B)
Physicians/Medical Students (B1)
ETHICS IN THE ROUND
Description: Monthly presentations designed to provide education to medical professionals on current ethics topics.
Gender: Both Males and Females
Department: 25768 (Continuing Education)
Department Contact: Jay Ripley (8-9964)
Objective: Provide a forum for medical professionals to discuss ethics issues.
Persons: 644
Expenses: 625
Revenues: 0
Benefit: 625

GERIATRIC LUNCH AND LEARN
Description: One hour educational lectures on various topics in geriatric medicine.
Gender: Both Males and Females
Department: 25768 (Continuing Education)
Department Contact: Jay Ripley (8-9964)
Objective: To provide professional education to the medical community on geriatric topics and issues.
Persons: 233
Expenses: 625
Revenues: 0
Benefit: 625

PHYSICIAN GUEST LECTURE PROGRAM
Description: Professional education lectures for physicians and healthcare professionals covering topics such as Traditional Approaches to Pain Management, Resolving Shoulder Impairments, and the Dilemma of Surgery in Extreme Old Age.
Gender: Both Males and Females
Department: 25768 (Continuing Education)
Department Contact: Jay Ripley (8-9964)
Objective: Provide physician education to physicians and medical students.
Persons: 800
Expenses: 3,900
Revenues: 0
Benefit: 3,900

RESEARCH LUNCH AND LEARN
Description: One hour lectures on current health care research topics.
Gender: Both Males and Females
Department: 25768 (Continuing Education)
Department Contact: Jay Ripley (8-9964)
Objective: Provide research education to physicians and healthcare providers.
Persons: 925
Expenses: 1,200
Revenues: 0
Benefit: 1,200

RURAL OUTREACH PHYSICIAN EDUCATION
Description: Outreach education provides professional education to physicians and health care providers in outlying areas. In 2009, 50 outreach programs were held.
Gender: Both Males and Females
Department: 25768 (Continuing Education)
Department Contact: Jay Ripley (8-9964)
Objective: To further the education of health care professionals in rural West Virginia.
Persons: 373
Expenses: 2,250
Revenues: 0
Benefit: 2,250
SEVERE SEPSIS/SEPTIC SHOCK: EARLY GOAL DIRECTED THERAPY

Description: Program in the Patient Simulation Center designed to improve the knowledge and skills associated with early recognition and early intervention for patients with severe sepsis and/or septic shock. The participant teams consist of a provider, nurse pharmacist and RRT as well as one team from an outlying community hospital.

Gender: Both Males and Females
Department: 25774 (Patient Simulation Center)
Department Contact: Barbara McKee (8-1859)
Objective: Recognize the signs and symptoms associated with severe sepsis. Institute the 6 hour bundle of care priorities. Develop a differential diagnosis for sepsis. Determine the appropriate modalities for vascular access. Evaluate the patient's fluid resuscitation requirements. Select the appropriate antibiotic therapy. Institute the 24 hour bundle of care priorities.

Persons: 160
Expenses: 21,700
Revenues: 0
Benefit: 21,700

*** Physicians/Medical Students

Persons: 3,155
Expenses: 30,300
Revenues: 0
Benefit: 30,300

Nurses/Nursing Students (B2)

CAMC NURSING EDUCATION

Description: CAMC provides a clinical setting and staff instruction/supervision for students enrolled in nursing programs. We provide a clinical setting, including staff time, for education/supervision, for RN and BSN nursing students, LPN students, and Nurse Aide students enrolled in educational programs for which we have an educational affiliation agreement.

Gender: Both Males and Females
Department: 46872 (Planning)
Department Contact: David Jarrett (8-7854)
Objective: To provide clinical experiences for students.
Persons: 369
Expenses: 4,380,787
Revenues: 0
Benefit: 4,380,787

LACTATION EDUCATION

Description: Lectures to nursing students at the University of Charleston and WV State University on the value of and importance of breastfeeding.

Gender: Both Males and Females
Department: 43116 (Lactation)
Department Contact: Jamie Peden (8-2180)
Objective: To promote, support, and protect breastfeeding in our area.
Persons: Unknown
Expenses: 560
Revenues: 0
Benefit: 560
NURSING PATHWAYS PROGRAM
Description: CAMC and WV State Community and Technical College have formed a partnership to provide a two-year nursing program. The Nursing Pathways Program includes three distinct entries to earning a two-year associate degree. 1) a midyear ADN program 2) a Paramedic to Registered Nurse Fast Track Program and 3) a Licensed Practical Nurse to Registered Nurse Fast Track Program.
Gender: Both Males and Females
Department: 21926 (Human Resources Workforce Dev)
Department Contact: Debby Roquet (8-3376)
Objective: To increase the number of licensed RNs.
Persons: 125
Expenses: 1,344,834
Revenues: 830,637
Benefit: 514,197

*** Nurses/Nursing Students
Persons: 554
Expenses: 5,726,181
Revenues: 830,637
Benefit: 4,895,544

Other Health Professional Education (B3)
CAMC ALLIED HEALTH PROFESSIONAL EDUCATION
Description: CAMC provides a clinical setting and staff instruction/supervision for area students enrolled in local allied health professional education programs. We provide the clinical setting and supervision to students in Health Unit Coordinator programs, Imaging Programs, Surgery Tech Programs, Physical Therapy Programs and a host of other allied health professionals enrolled in educational programs for which we have an educational affiliation agreement.
Gender: Both Males and Females
Department: 46872 (Planning)
Department Contact: David Jarrett (8-7854)
Objective: To provide a clinical setting for students.
Persons: 378
Expenses: 888,292
Revenues: 0
Benefit: 888,292

MEDICAL EXPLORERS
Description: A program designed to introduce youth in Kanawha and Putnam counties who are 14 years of age and have completed the 8th grade or are ages 15 to 20 and have designated health care as their health cluster to the health care environment.
Gender: Both Males and Females
Department: 21926 (Human Resources Workforce Dev)
Department Contact: Debby Roquet (8-3376)
Objective: Increase health career awareness by educating middle and high school students about health professions and careers.
Partners: Boy Scouts of America - Exploring program
Persons: 50
Expenses: 2,861
Revenues: 0
Benefit: 2,861
MOUNTAIN STATE UNIVERSITY PHYSICIAN ASSISTANT STUDENT ROTATIONS

Description: The hospitalist program had 9 physician assistant students from MSU during a six week rotation in the hospital. CAMC’s hospitalists spent 25% of the student’s six-week rotation directly instructing/interacting with the students.

Gender: Both Males and Females
Department: 42005 (Hospitalist Program)
Department Contact: Diane Bossie (8-5848)
Persons: 9
Expenses: 163,309
Revenues: 0
Benefit: 163,309

*** Other Health Professional Education

Persons: 435
Expenses: 1,036,518
Revenues: 0
Benefit: 1,036,518

Scholarships/Funding for Professional Education (B4)

UNIVERSITY OF CHARLESTON HEALTH PROGRAM SUPPORT

Description: Financial support for faculty for the nursing and pharmacy programs at the University of Charleston.

Gender: Both Males and Females
Department: 21926 (Human Resources Workforce Dev)
Department Contact: Debby Roquet (8-3376)
Objective: To maintain an adequate number of health professionals in the community to fill existing and future health care profession needs.

Persons: Unknown
Expenses: 285,000
Revenues: 0
Benefit: 285,000

*** Scholarships/Funding for Professional Education

0
285,000
0
285,000

**** Health Professions Education

4,144
7,077,999
830,637
6,247,362

Research (D)
Clinical Research (D1)

*** Clinical Research

Persons: 0
Expenses: 0
Revenues: 0
Benefit: 0

**** Research
Persons: 0
Expenses: 0
Revenues: 0
Benefit: 0

Financial and In-Kind Contributions (E)
Cash Donations
(E1)

CIVIC AFFAIRS
Description: The Civic Affairs Council is comprised of employees who review the applications for charitable donations and make awards based on specific community benefit criteria. Funding provided to area high schools for Project Graduation, March of Dimes, Daymark, Inc., Salvation Army, WV Health Right, American Cancer Society, Mental Health Association, The Education Alliance, Girl Scouts, Hospice Care, REA of Hope, Alzheimer's Association, Children's Therapy Clinic, Charleston Daily Mail's Neediest Cases, Union Mission, Appalachian Children's Chorus, Big Brothers/Big Sisters, Covenant House of WV, Families Conference, Adolescent Health Initiative, Keys for Kids, Special Olympics, Roark-Sullivan Lifeway Center, The Gabriel Project of WV, Family Counseling Connection, National MS Society, WV Chapter, and the Children’s Theatre of Charleston.
Gender: Both Males and Females
Department: 10000 (Civic Affairs)
Department Contact: Tom Kuhn (8-7386)
Objective: Provide financial support to programs and services in our service area to support educational, social services, civic and economic development requests with health related priorities.
Persons: 1,200
Expenses: 32,024
Revenues: 0
Benefit: 32,024

*** Cash Donations
Persons: 1,200
Expenses: 32,024
Revenues: 0
Benefit: 32,024

In-kind Donations (E3)
COMMUNITY BOARD PARTICIPATION BY CAMC PERSONNEL

Description: David L. Ramsey, President and CEO participated on the HealthNet Aeromedical Board of Directors, WV Hospital Association, American Hospital Association, Regional Policy Board, VHA Central Atlantic Board of Directors, WV Insurance Commission Access WV High Risk Pool, University of Charleston Vitality Committee, Edgewood Summit Board of Directors, Clay Center for the Arts & Sciences - WV Board of Directors, Mid-Atlantic Technology, Research & Innovation Center Board of Directors, WV Chamber of Commerce Board of Directors, the Charleston Housing Corporation and the West Virginia Roundtable.

Glenn Crotty, Jr. M.D., COO participated as a board member of the University of Charleston School of Business and Baldrige National Quality Award Examiner.

Beth Samples, Vice President, Human Resources, participated on the governing board of Covenant House.

Beverly Kitchen, RN, Regional Care Coordinator, Right From the Start, participated on the boards and committees of the March of Dimes, Upper Kanawha Valley Starting Points, NICU Family Support (March of Dimes), Gestational Diabetes Workgroup of WV and Domestic Violence Coalition Children's Advisory Group.

Dawn Schoolcraft, Associate Administrator, Women and Children's Hospital, participated on board of Ronald McDonald House.

Dr. Elizabeth L. Spangler, Vice President, Medical Affairs, participated on the governing Board's of the Edgewood Summit and WV Medical Professional Health Program.

Janna Inghram, Director Workforce Development participated on the Workforce Investment Board and the WV State Community and Technical College Board of Governors.

Ken Wilson, Maintenance Department participated in monthly meetings in Hurricane, WV to review issues pertaining to client rights, grievances to persons under the care of Prestera in group homes or other community settings.

Mike Williams, Administrator, General Hospital, participated on the State Trauma Advisory Committee that meets twice a year on trauma services in West Virginia and the East End Association.

Robert D. Whilter, Vice President, Government and Community Affairs participated on the governing boards of WV Health Right, WomenCare, Center for Rural Health Development, and the WV Board of Osteopathy.

Sharon Hall, President, CAMC Health Education and Research Institute, participated on the governing boards of the WVU School of Medicine Advisory Board, WV School of Osteopathic Medicine, WV Telehealth Alliance, United Way, WV Nursing Leadership Institute, AAMC Leadership Development Committee, the Charleston Rotary, and WVU Physicians of Charleston. Ms. Hall also provided a presentation to the AAMC Group on Resident Affairs.

Tuanya Layton, Director Medical Imaging, participated on the boards of the Appalachian Association of Nuclear Medicine Technology and the WV State Community and Technical College.

Brenda Grant, Chief Strategy Officer, participated on the United Way Board, Community Services Committee, and Executive Committee; Kanawha Coalition for Community Health Improvement, UC Graduate School of Business Strategic Planning Committee and as a Malcolm Baldrige National Quality Award Senior Examiner.

Karen Stewart, Associate Administrator, General Hospital, participated on the American Association of Respiratory Care's Board of Directors.

Gender: Both Males and Females
Department: 21900 (CAMC Administration)
Department Contact: David Jarrett (8-7854)
Objective: To share CAMC's leadership, knowledge and experience in the fields of healthcare, management, and education with community boards and associations to enhance the community.
Persons: Unknown
Expenses: 165,043
Revenues: 0
Benefit: 165,043
EQUIPMENT REPAIRS/MEDICAL REHABILITATION PROGRAM SUPPORT
Description: Support for Medical Rehab Program and Challenged Sports Programs - by repairing or crafting equipment and devices to be used by patients and challenged athletes.
Gender: Both Males and Females
Department: 41346 (Medical Rehab)
Department Contact: Jeremiah Gagnon (8-7608)
Objective: Expose new patients to challenged sports.
Partners: SCI/SEA Board members, rehab team, community members
Persons: Unknown
Expenses: 135
Revenues: 0
Benefit: 135

RONALD MCDONALD HOUSE HOUSEKEEPING SUPPORT
Description: Provide Housekeeping Services for Ronald McDonald House.
Gender: Both Males and Females
Department: 41804 (Housekeeping)
Department Contact: Joe Tucker (8-6241)
Persons: Unknown
Expenses: 6,641
Revenues: 0
Benefit: 6,641

WV ASTHMA COALITION
Description: Participation on the WV Asthma Coalition which supports the use of NIH guidelines and disseminates these "best practices" to providers and health professionals throughout the state. The coalition works to assure quality of hospital care, establish a team approach to treating asthma, identify economics of poor care and policy changes for areas of reimbursement and patient education, and to develop guidelines or teaching tools for screening.
Gender: Both Males and Females
Department: 42500 (Respiratory Care)
Department Contact: Chuck Menders (8-9401)
Persons: Unknown
Expenses: 1,600
Revenues: 0
Benefit: 1,600

WV EHEALTH INITIATIVE
Description: Staff serve on coalition of representatives from health care, business and state government to promote the broad adoption, use and coordination of information technology in health care.
Gender: Both Males and Females
Department: 21935 (Information Services Administration)
Department Contact: Brad Young (8-7901)
Objective: Promote the rapid adoption of information technology in health care.
Partners: Other Health Care Providers
Business
State Government
Persons: Unknown
Expenses: 9,462
Revenues: 0
Benefit: 9,462

*** In-kind Donations
Persons: 0
Expenses: 182,881
Revenues: 0
Benefit: 182,881
**** Financial and In-Kind Contributions

Persons: 1,200
Expenses: 214,905
Revenues: 0
Benefit: 214,905

Community Building Activities (F)
Community Support (F3)

PARTNERS IN HEALTH NETWORK

Description: The network serves to improve the delivery of health care in the region by providing a network administrative center, physician liaison, patient surveys, outreach activities, networking, credentialing, purchasing program, critical access hospital support, and educational activities, workshops, and presentations designed for small rural hospitals and health clinics in the region.

Gender: Both Males and Females
Department: 46876 (Partners In Health)
Department Contact: Tom Kuhn (8-7386)
Objective: Assist small rural hospitals and health clinics to remain viable.
Persons: Unknown
Expenses: 64,728
Revenues: 0
Benefit: 64,728

*** Community Support

Persons: 0
Expenses: 64,728
Revenues: 0
Benefit: 64,728

Workforce Development (F8)

WORK EXPERIENCE/ON THE JOB TRAINING (OJT)

Description: Provides students enrolled in post-secondary educational facilities with related on-the-job training hours (work-based experience) required for graduation.

Gender: Both Males and Females
Department: 21926 (Human Resources Workforce Dev)
Department Contact: Debby Roquet (8-3376)
Objective: Provide students with required work based experience hours to graduate.
Persons: 50
Expenses: 537
Revenues: 0
Benefit: 537

*** Workforce Development

Persons: 50
Expenses: 537
Revenues: 0
Benefit: 537

Other - Health Fair (F9)
HEALTHFEST
Description: Health Fair offering over 25 screenings and health information to the public.
Gender: Both Males and Females
Department: 21942 (Marketing)
Department Contact: Elizabeth Pellegrin (8-5757)
Objective: To serve the Kanawha Valley with free screenings to improve health and preventive care.
Persons: 1800
Expenses: 116,673
Revenues: 16,141
Benefit: 100,532

TEDDY BEAR FAIR
Description: Children's Health Fair.
Gender: Both Males and Females
Department: 43120 (Pediatrics)
Department Contact: Susan Russell (8-2885)
Objective: Allow children to visit the hospital in a non-threatening way, complete with playing with medical equipment and trying on surgical masks. They receive tours of the hospital, play games, receive a car seat education, and health education materials.
Partners: Carelink/CAMC Foundation and Kohls
Persons: 1048
Expenses: 21,038
Revenues: 9,614
Benefit: 11,424

*** Other - Health Fair
Persons: 2,848
Expenses: 137,711
Revenues: 25,755
Benefit: 111,956

**** Community Building Activities
Persons: 2,898
Expenses: 202,976
Revenues: 25,755
Benefit: 177,221

Community Benefit Operations (G)
Dedicated Staff (G1)

COMMUNITY BENEFIT OPERATIONS
Description: Planning Department staff dedicated to Community Benefit Reporting.
Gender: Both Males and Females
Department: 46872 (Planning)
Department Contact: David Jarrett (8-7854)
Objective: To compile and report the organization's community benefit by surveying the individual departments, administrators, and other staff at our three hospitals.
Persons: Unavailable
Expenses: 13,000
Revenues: 0
Benefit: 13,000
KANAWHA COALITION FOR COMMUNITY HEALTH IMPROVEMENT

Description: A community partnership of volunteers from all the local hospitals, Kanawha-Charleston Health Department, United Way, Kanawha County Schools, Wellness Council of WV, and local businesses with a mission to identify and evaluate health risks and coordinate resources to measurably improve the health of the people of Kanawha County.

Gender: Both Males and Females

Department: 46832 (Community Health)

Department Contact: Judy Crabtree (8-7557)

Objective: Mobilize community groups to address the community focus areas of obesity, lack of physical activity and tobacco use.

Persons: Unknown

Expenses: 75,533

Revenues: 0

Benefit: 75,533

*** Dedicated Staff

Persons: 0

Expenses: 88,533

Revenues: 0

Benefit: 88,533

**** Community Benefit Operations

Persons: 0

Expenses: 88,533

Revenues: 0

Benefit: 88,533

Community Benefit Program Grand Totals

Programs: 80

Persons: 108,094

Expenses: $9,875,944

Revenues: $1,191,772

Benefit: $8,684,172