Miller Children's & Women's Hospital
MemorialCare™




**Annual Report and Plan for Community Benefit**
**Miller Children's & Women's Hospital**
**Fiscal Year 2026 (July 1, 2025 - June 30, 2026)**
**HCAI Hospital ID: 106196168**

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## About Miller Children's & Women's Hospital

**MemorialCare**

MemorialCare is a nonprofit integrated health system with over 200 care locations, including four leading hospitals – Miller Children's & Women's Hospital, Long Beach Medical Center, Orange Coast Medical Center, and Saddleback Medical Center. MemorialCare includes award-winning medical groups, Select Health Plan, clinical institutes and research programs. In addition, the system includes multiple outpatient health centers, urgent care centers, imaging centers, breast centers, ambulatory surgical centers, physical therapy centers and dialysis centers throughout Orange and Los Angeles Counties.

**Miller Children's & Women's Hospital**

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

Miller Children's & Women's Hospital treats more than 13,000 children each year in the hospital. It has become a regional pediatric destination for more than 66,000 children requiring specialized outpatient care through the Cherese Mari Laulhere Children's Village and outpatient specialty centers in Torrance, Fountain Valley, and Irvine.

Patient and family-centered care is a cornerstone of MCWH. It offers Maternity & High-Risk Pregnancy Care and a comprehensive Level IV NICU, and Level I PICU to provide specialized care for expectant mothers and their babies. MCWH also has comprehensive outpatient specialty centers, the Children's Heart Institute, the Jonathan Jaques Children's Cancer Institute, Children's Pulmonary Institute, Gastroenterology & Nutrition Center, Orthopedic Center and Surgical Center.

**Awards**

MCWH is the recipient of the following awards and accolades:

- ASHE Energy to Care Sustained Performance Award – July 2025
    - Cherese Mari Laulhere Children's Village
    - Miller Children's & Women's Hospital
- Becker's 100 Hospitals with Great Spine/Neuro Programs – October 2025
- Becker's Hospitals with Great Oncology Programs – October 2025

- Becker's Hospitals with top Orthopedic Programs – November 2025
- California Department of Public Health Immunization-Friendly Birth Hospitals – October 2025
- *U.S. News & World Report* - High-Performing Maternity Care – December 2025

## Mission and Values

MemorialCare is dedicated to the pursuit of best practice medicine. Our physicians and care teams study the best, most effective treatments and work to implement them at all locations. The results are outcomes that frequently exceed state and national averages. For patients and families, it means a superior choice of health care services.

**Mission**

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

**Vision**

Exceptional People. Extraordinary Care. Every Time.

**Values**

*The iABCs of MemorialCare*

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

- **Integrity**
  Always holding ourselves to the highest ethical standards and values. Doing the right thing, even when no one is watching.
- **Accountability**
  Being responsible for meeting the commitments we have made, including ethical and professional integrity, meeting budget and strategic targets, and compliance with legal and regulatory requirements.
- **Best Practices**
  Requires us to make choices to maximize excellence, and to learn from internal and external resources about documented ways to increase effectiveness and/or efficiency.
- **Compassion**
  Serving others through empathy, kindness, caring and respect.
- **Synergy**
  A combining of our efforts so that together we are more than the sum of our parts.

## Governance

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

**FY26 Board of Directors**

Barry S. Arbuckle, PhD
Torin Cunningham, MD
Gary DeLong
Karyn Scissum Gunn, PhD
Katherine Keesal
Jennifer A. McNulty, MD
Sapna Mehta, MD
Mike Muñoz, PhD
Braden Phillips
Robert F. Schack, MBA
Darick J. Simpson
Mike Van Dyke, CIMA, CFP, Chair
Karen Widerynski
Andrew Wittenberg, MD, MPH, FACEP, Secretary

**Community Benefit Oversight Committee**

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

The members of the MCWH CBOC include:

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

## Caring for our Community

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

**Service Area**

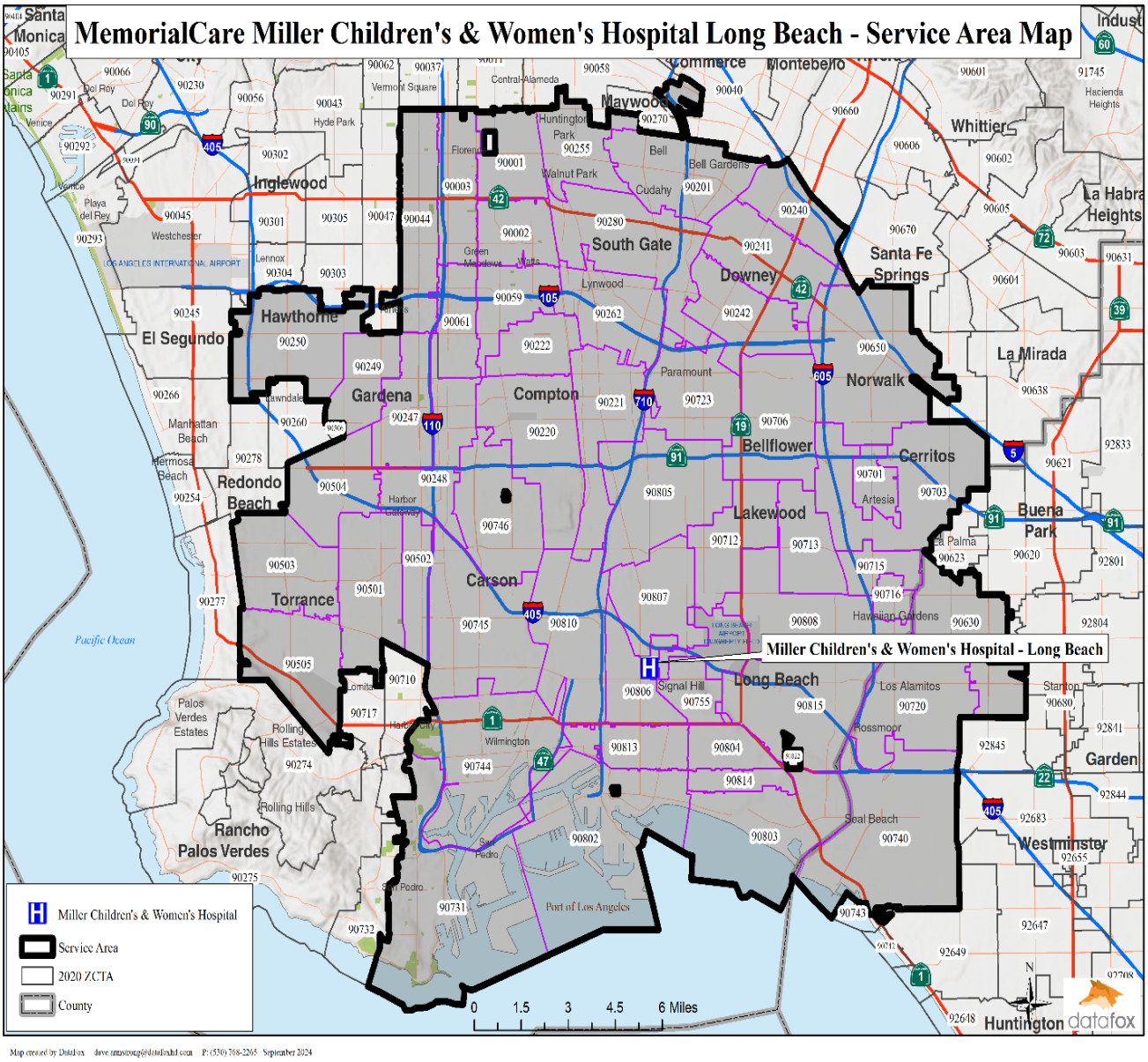
MCWH is located at 2801 Atlantic Avenue, Long Beach, California. The service area is in Los Angeles County and Orange County and includes 53 ZIP Codes, representing 25 cities or communities. Inpatient admissions were calculated over three calendar years (2021-2023) and 81.7% of total inpatient ZIP Codes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

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

**Miller Children's & Women's Hospital Service Area**

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

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



**Community Snapshot**

MCWH conducted its most recent Community Health Needs Assessment (CHNA) in FY25. The population of the MCWH service area is 2,461,825.[1] Children and youth make up 23.8% of service area population, 63.5% are adults, and 12.7% are seniors, 65 years and older.[2] The largest portion of the population in the service area identifies as Hispanic or Latino residents (59.1%), White residents make up 14.4% of the population, 11.9% are Asian residents, and Black or African American residents comprise 11.2% of the population.[3] Among service area residents, 40.3% of the population, ages 5 and older, speak only English in the home. Among the area population, 48.7% speak Spanish in the home, 8.2% speak an Asian or Pacific Islander language, and 1.9% speak an Indo-European language in the home.[4]

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

## Vulnerable Populations

- In the service area, 24.5% of the population, ages five and older, speak English "less than very well" and are considered linguistically isolated.[7]
- Among area residents, 14.8% are at or below 100% of the federal poverty level (FPL) and 35.4% are at 200% of FPL or below (low-income).[8]
- In the service area, 20.9% of children and 31.5% of female head of households with children live in poverty.[9]
- In 2024, the point-in-time count of homeless people in Long Beach was 3,376 individuals. 96.9% were adult individuals, and 3.1% were family members with at least one child under age 18.[10]
- In Service Planning Area 7, 3% of the teen population identify as transgender or gender non-conforming, while 26.9% said that others at school would describe them as gender nonconforming.[11]
- 12.1% of SPA 6 children, 12.3% of children in SPA 7 and 16.6% in SPA 8 were reported by their caretakers to meet the criteria of having a special health care need, which is defined

[1] *U.S. Census Bureau, American Community Survey, 2013-2017 & 2018-2022, DP05. http://data.census.gov*
[2] *U.S. Census Bureau, 2018-2022 American Community Survey, DP05. http://data.census.gov/*
[3] *Ibid*
[4] *U.S. Census Bureau, 2018-2022 American Community Survey, DP02. http://data.census.gov/*
[5] *U.S. Census Bureau, 2018-2022 American Community Survey, DP02. http://data.census.gov/,*
[6] *U.S. Census Bureau, 2018-2022 American Community Survey, S2701. http://data.census.gov/*
[7] *U.S. Census Bureau, American Community Survey, 2018-2022, DP02. https://data.census.gov/*
[8] *U.S. Census Bureau, American Community Survey, 2018-2022, S1701. http://data.census.gov/*
[9] *U.S. Census Bureau, 2018-2022 American Community Survey, S1701 & S1702. http://data.census.gov/*
[10] *City of Long Beach, 2024 Homeless Count. https://www.longbeach.gov/homelessness/annual-homeless-count/*
[11] *California Health Interview Survey, 2019-2022 combined. https://healthpolicy.ucla.edu/our-work/askchis/*

as dependency on prescription medications, service use above that considered usual or routine, and/or a functional limitation.[12]

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

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

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

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

## Community Health Needs Assessment

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

MCWH, in partnership with the Long Beach CHNA Collaborative[15], conducted targeted interviews to gather information and opinions from people who represent the broad interests of the community served by the hospital. Twenty-five (25) interviews were completed from November 2024 to February 2025. Leaders and/or representatives of medically underserved, low-income, minority populations, as well as local health or other departments or agencies that have current data or other information relevant to the health needs of the community, were represented in the sample. Input was obtained from the Los Angeles County Department of Public Health and the City of Long Beach Department of Health and Human Services. In addition, the collaborative engaged fifty-five (55) individuals in six (6) Listening Sessions between February 2025 and March 2025. These community Listening Session participants included Latinx communities, Black and African American communities, immigrant and refugee communities, LGBTQIA2S+ communities, disabled and veteran communities, and unhoused and homeless communities.

**Significant Community Health Needs**

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

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

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

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

**Prioritization of Health Needs**

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

**Prioritized Health Needs the Hospital Will Address**

Following completion of the 2025 Community Health Needs Assessment (CHNA), MCWH's Community Benefit Oversight Committee reviewed the findings and prioritized health needs based on existing infrastructure, established community partnerships, and ongoing organizational investments. The committee used these criteria to identify areas where the hospital can have the greatest impact through its FY26-FY28 Implementation Strategy. As a result, MCWH will focus its efforts on improving access to health care, pregnancy and birth outcomes, addressing behavioral health needs, reducing the burden of chronic diseases, and promoting preventive practices. These efforts will be guided by a commitment to advancing health equity and addressing social drivers of health, including economic security, housing, food access, transportation, and environmental conditions. In the following report, hospital activities are detailed that address these priority health needs and the social drivers of health.

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

## Addressing Priority Health Needs

In FY26, MCWH engaged in activities and programs addressing the priority health needs identified in the FY26-FY28 Implementation Strategy. MCWH has committed to community benefit efforts addressing access to health care, chronic diseases, behavioral health (mental health and substance use), pregnancy and birth outcomes, and preventive practices with a focus on the social drivers of health, and health equity. Selected activities and programs highlighting MCWH's commitment to the community are detailed below.

**FY26-FY28 Priority Health Need: Access to Health Care and Preventive Practices**

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

**Response to Need**

### Financial Assistance

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

### Health Education, Resources and Community Outreach

MCWH provided support and services for community residents that removed barriers to care and increased access to health care and preventive measures. General health and wellness education, back-to-school events, social media postings, blogs, podcasts, and informational articles were presented on topics that included: accessing health care, child health, safety and injury prevention, nutrition, speech disorders, CPR, ADHD, back to school, wellness exams, and measles. In FY26, over one million community engagements were provided.

In addition, MCWH Outreach teams provided education and outreach to 73 parents with children transitioning from preschool to school, and parents needing assistance with their child's IEP.

### Injury Prevention

MCWH participated in community events that promoted family safety, car seats and booster seats, water safety, choking hazards, summer safety, playground safety, e-bike safety, pedestrian

information, and bicycle and helmet safety. Information was available in English and Spanish. Over 440,245 community members received information on injury prevention.

### KinderFest

MCWH provided education and outreach to 400 staff and families associated with the Long Beach Unified School District (LBUSD). Participants were educated on the importance of early intervention for developmental delays.

### Newsletters

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

### Outpatient Specialty Centers

The Cherese Mari Laulhere Children's Village opened in 2021. It is the only building of its kind in Los Angeles and Orange Counties to offer a one-stop-shop approach to outpatient specialty care for kids. In one kid-friendly location, families have access to specialty clinics and pediatric doctors in more than 30 subspecialties, as well as a range of health care services, such as a laboratory, imaging, occupational therapy, physical therapy, and speech therapy. Family support services, including an Education Center and Family Resource Center, are also available at this location.

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

Some of the clinics include hematology, oncology, food allergy, developmental, cardiology, endocrine, neurology, renal, pulmonary, orthopedics, and rheumatology. Children are seen at the Outpatient Specialty Centers for consultations, as well as treatments for acute, chronic or surgical conditions. Outpatient Specialty Centers are known for serving as the medical home for many patients who will need ongoing follow-up care and support. Each specialty center, or clinic within the center, has a multi-specialty care team, with subspecialists, fellows, residents, advanced practice nurses, registered nurses, child life specialists, social workers, nutritionists and other health professionals.

In addition, the Stramski Children's Developmental Center is an outpatient special needs center that helps children and families effectively address autism, ADHD, birth defects, learning

problems, and other developmental delays. This location offers specialized care for sleep disorders and Fragile X syndrome.

### Social Drivers of Health Screening

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

### Support Services

- The hospital offered services to increase access to health care and support preventive health care. Transportation was provided to families who could not easily access medical care and appointments.
- Provided free medical supplies, home health, recuperative care and/or medical equipment for children in need.

### The Family Resource Center

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

- Training on language disorders was offered online for 13 sessions to 424 individuals. Parents learned about their children's developmental milestones.
- The Community Navigator program provided 200 parents with strategies and techniques to improve communication skills with their child's school team and medical providers.
- The Spanish autism support group met for 9 sessions, and 189 parents participated. The support group provided parental support, education and resources via Zoom.
- Over 2,000 families were provided with outreach and education materials at more than 9 community events.
- Participated in the Early Childhood Symposium and provided information and resources to 600 early childhood educators.
- Provided outreach materials to 120 families at the LBUSD Head Start Healthy Resource Fair.
- Training in understanding the Special Education System and how to request certain assessments assisted 24 parents.
- 1:1 consultation was provided to 66 parents to review their child's Individual Education

Plans (IEPs) and discuss concerns.

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

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

**Response to Need**

### Behavioral Health Education and Resources

Outreach and education classes increased awareness of mental health and substance use issues and connected area residents with available resources. From direct services to literature education, the community was provided with the following:

- Art therapy sessions were provided for 75 children at the Jonathan Jaques Children's Cancer Institute.
- Parenting education reached over 240,000 individuals on the topic of anxiety among children and youth.
- The Perinatal Bereavement Support Group met twice a month and touched the lives of 240 group participants.
- An outreach campaign addressing the risks of youth vaping reached 2,000 individuals.

### Behavioral Health Integration Program

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

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

### Family Medicine Clinic

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

### Jewish Family & Children's Services of Long Beach & Orange County (JFCS)

The MCWH community benefit grant program supported the JFCS/LBUSD Unhoused Youth & Families Mental Health In-School Program. The JFCS/LBUSD collaborative addressed the mental health needs of 30 unhoused, foster, and at-risk children and youth (along with their family members) at two of the lowest-income LBUSD schools—John Muir Academy and Colin Powell Academy for Success—during the 2025-2026 academic year.

JFCS also collaborated with both schools to initiate the "lunch bunch" group counseling sessions. These sessions, led by a social work intern alongside a JFCS clinician, increased the engagement of students in services.

## FY26-FY28 Priority Health Need: Chronic Diseases

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

**Response to Need**

### Bickerstaff Pediatric Family Center

The Bickerstaff Pediatric Family Center at MCWH cared for infants, children, adolescents, and pregnant women who were at risk for, or infected with HIV/AIDS, acute community-acquired illnesses, chronic infections, and or other immunological disorders. Board-certified infectious disease physicians and the care team also advised on immunization and infectious disease prevention.

### Health Education, Resources and Community Outreach

MCWH provided over one million encounters for health education classes, community events, videos, social media posts, newsletters, and information flyers that focused on chronic disease prevention, management, and treatment. Presentations and information were provided on asthma, cancer, epilepsy, diabetes, heart conditions, healthy lunches, celiac disease, toe walking, blood tests, and stomach aches.

### Jonathan Jaques Children's Cancer Institute

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

### Long Beach Alliance for Children with Asthma (LBACA)

LBACA is a program of MCWH which improves the health and quality of life of children with asthma and their families across the Greater Long Beach region, where many communities face elevated asthma risks due to pollution from ports and major freeways. Through a child-centered approach, the organization empowers families with education and resources to reduce preventable hospitalizations, emergency department visits, and school and work absences. Its Community Health Worker program delivers culturally and linguistically responsive asthma education while also training healthcare, school, and community partners to better support children with asthma and connect families to needed services. LBACA served over 1,300 community members through Asthma 101 classes and outreach education.

### Support Groups

Support groups provided over 663 encounters for new parents, families, and caregivers of children. *Unidad y Fuerza* (Unity and Strength), a Spanish support group provided support, education, and resources for families of children with special needs.

## FY26-FY28 Priority Health Need: Pregnancy and Birth Outcomes

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

**Response to Need**

### Birth Equity

Maternal morbidity and mortality data in California show persistently higher rates among Black mothers when compared to mothers from all other racial groups. MCWH teams have participated in building a birth equity toolkit with the California Maternal Quality Care Collaborative (CMQCC).

MCWH implemented an evidence-based implicit bias program for its health care providers involved in perinatal care of patients. A significant step in our equity journey was joining the Cherished Futures for Black Moms & Babies initiative in Los Angeles County. The program brings together hospitals, public health partners, health plans and Black community leaders to co-design data-driven, community-informed solutions. Cherished Futures emphasizes institutional accountability and meaningful practice change — not just education, but measurable improvements across clinical, organizational and community systems. This collaborative approach matters because maternal inequities extend beyond hospital walls.

MCWH has adopted tools to better understand patient perspectives and use that insight to guide

improvement. A recent collaboration with the Irth App©, involves getting real-time feedback from Black and brown birthing people and translates lived experiences into actionable data to strengthen prenatal, birthing, postpartum, and pediatric care.

### Birthworkers of Color Collective

The MCWH community benefit grant program provided funding for Birthworkers of Color Collective (BWOCC) to provide culturally relevant lactation support. The program supported 19 participants, including 5 lactation clinic clients and 14 lactation education class attendees. Lactation supplies were distributed to families in need. Newsletters reached over 945 people, highlighting strong community awareness and program impact.

To improve accessibility, BWOCC moved from an in-person only format to a hybrid format, allowing participants to attend online or in person. This change removed geographic and transportation barriers, supported those in need of childcare, increased participation, and extended their reach.

### Health Education, Resources and Community Outreach

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

- A board-certified lactation consultant discussed breastfeeding preparation and success factors with 1,116 individuals.
- Provided community education that reached over 490,000 people on labor and delivery, breast feeding, postpartum safety and recovery, and health equity for maternal care.
- Over 2,273 pregnant women and their families participated in childbirth preparation and prenatal classes, regardless of where they chose to deliver, and accessed maternal health materials.
- A Perinatal Bereavement support group met twice a month for parents who had lost an infant during pregnancy (through miscarriage or stillbirth) or shortly after birth. 240 encounters were provided.

### M.O.R.E. Mothers

The MCWH community benefit grant program supported the M.O.R.E. Mothers Community Care Circles, which provided trauma-informed maternal health education, emotional wellness support, and essential resources to 68 families, positively impacting more than 170 community members, including mothers, children, and partners. Community Care Circles created safe, welcoming spaces where mothers could build community, strengthen their knowledge, and access trusted support during pregnancy and early parenting. Each session combined evidence-based maternal and infant

health education with peer discussion and direct resource distribution. Topics included postpartum recovery, breastfeeding, infant CPR and choking prevention, safe sleep, child passenger safety, nutrition, and navigating health care resources such as Medi-Cal, WIC, and local maternal health services. Families also received diapers, hygiene products, baby essentials, educational materials, and referrals to community resources to help reduce barriers to care.

### Precious Life Shelter

The MCWH community benefit grant program strengthened Precious Life Shelter's Emergency Housing Program, providing immediate shelter and comprehensive support for pregnant women experiencing homelessness and their newborns. The program was designed to meet women at a critical point in their lives by offering a safe place to live while addressing the physical, emotional, and practical challenges that can accompany pregnancy without stable housing.

Precious Life Shelter served 39 unduplicated individuals, including 33 women and 6 babies. They responded to 879 housing inquiries, completed 176 intake interviews, and provided 2,145 bed nights of safe housing and supportive services. They also celebrated the birth of three healthy babies while their mothers were participating in the program.

Residents received case management, prenatal and postpartum support, parenting education, transportation assistance, workforce development services, and connections to community resources, including Medi-Cal, Women, Infants and Children, and Temporary Assistance for Needy Families. Through strong partnerships with health care providers and community organizations, they removed barriers to care, promoted healthy pregnancies and births, and equipped mothers with the tools and support needed to move toward self-sufficiency.

### Welcome Baby

Welcome Baby is a Best Start program at MCWH which provides pregnant women and new moms with information, support and a trusted partner to help them through the journey of pregnancy and early parenthood. Available at no cost to women who reside in Los Angeles County, the Welcome Baby continuum of care included breastfeeding support, referrals to community resources and in-home visits from a registered nurse. In FY26, The Welcome Baby program reached 790 new mothers and their families.

## Other Community Benefit Services

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

### Health Professions Education

**Graduate Medical Education**

MCWH partners with a wide range of programs and serves as a training facility for approximately 400 residents and fellows and 150 medical students annually. Affiliate institutions consist of University of California, Irvine, University of California Los Angeles, various other local residency and fellowship programs, and medical schools. Residents and fellows provide specialized care to infants, children, adolescents, and all areas pertaining to women's health. MCWH also partners with University of California, Irvine (UCI) to serve as the primary training location for the Pediatric Pulmonary fellowship.

Resident Training Rotations

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

Fellowship and Sub-Specialty Training Rotations

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

**Nursing Education**

At MCWH, 754 undergraduate and graduate student nurses participated in precepted clinical rotations. The hospital supported the Trimester BSN program at California State University Long Beach (CSULB).

**Other Health Professions Education**

MCWH provided precepted training for 118 health professions students.

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

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

## Research

MemorialCare advances the health of the communities we serve by providing patients with opportunities to participate in clinical research across a broad range of medical specialties. Through partnerships with physicians, research sponsors, and other health care organizations, our research program supports the evaluation of new therapies, medical devices, diagnostic approaches, and strategies for improving the prevention, diagnosis, and treatment of disease.

Participation in clinical research can provide eligible patients with access to emerging treatment options and contributes to the development of evidence that may improve care for future patients. MemorialCare's research activities also support physician engagement in clinical innovation and help bring advances in medical science into the community setting, allowing patients to participate in research closer to where they live and receive their care. Ultimately, MemorialCare's research program supports our broader commitment to improving health outcomes, expanding access to innovative care, and advancing knowledge that benefits both current patients and the communities we serve.

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

## Cash and In-Kind Donations

### Cash Donations

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

### In-Kind Donations

- Hospital employees represented MCWH on community boards and collaborative committees that focused on increased access to health and social services, improved safety, and children's health issues.
- Provided a land lease, below fair market value, to the Long Beach Ronald McDonald House charity, which supports a 23-room Ronald McDonald House.
- Rented office to TCC Family Health (FQHC) at below fair market value.
- The hospital donated Personal Protective Equipment (PPE) to organizations in need.

### Community Benefit Grant Program

In FY26, MCWH provided grant funds to support community-based organizations that addressed identified health needs and served vulnerable populations within the hospital service area. Grants were provided to:

- Birthworkers of Color Collective
    - Provided culturally relevant lactation support. Supported 19 participants, including five lactation clinic clients and fourteen lactation education class attendees. Lactation supplies were distributed to families in need.
- Jewish Family & Children's Services of Long Beach & Orange County
    - Addressed the mental health needs of at-risk unhoused and foster youth. JFCS provided mental health counseling services to 30 unhoused, foster, and at-risk children and youth (along with their family members) at two of the lowest-income LBUSD schools—John Muir Academy and Colin Powell Academy for Success.
- M.O.R.E. Mothers
    - Provided trauma-informed maternal health education, emotional wellness support, and essential resources to 68 families, positively impacting more than 170 community members, including mothers, children, and partners.
- Precious Life Shelter
    - Provided immediate shelter and comprehensive support for pregnant women experiencing homelessness and their newborns.
    - Served 39 unduplicated individuals, including 33 women and 6 babies. They responded to 879 housing inquiries, completed 176 intake interviews, and provided 2,145 bed nights of safe housing and supportive services.

## Community Benefit Operations

In FY26, community benefit operations included administrative support and community benefit consultants. Support was provided for the completion of the FY25 Community Benefit Report.

## Community Building Activities

### Coalition Building

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

### Economic Development

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

### Workforce Development

MCWH worked with LBUSD in multiple formats to provide parents and students with information on health professions including Stop the Bleed demonstrations to high school students in medical pathway programs, and a healthcare simulation program involving cohorts of students receiving hands-on experience at the hospital. A MCWH representative also served on the City of Long Beach Workforce Innovation Network Board of Commissioners to connect community workforce opportunities with the hospital.

## Financial Summary of Community Benefit

MCWH financial summary of community benefit for FY26 (July 1, 2025 to June 30, 2026) is summarized in the table below. The Hospital's community benefit costs comply with Internal Revenue Service instructions for Form 990 Schedule H. Costs are based on MCWH overall cost-to-charge ratio. Appendix 1 lists the community benefit programs by category.

| **Financial Assistance and Means-Tested Government Programs** | **Vulnerable Populations** | **Broader Community** | ***Total*** |
|---|---|---|---|
| Traditional Charity Care | $1,208,668 | $0 | $1,208,668 |
| Medi-Cal Shortfall | $27,450,879 | $0 | $27,450,879 |
| Other Means-Tested Government Programs (Indigent Care) | $0 | $0 | $0 |
| **Sum Financial Assistance and Means-Tested Government Programs** | $28,659,547 | $0 | $28,659,547 |
| | | | |
| **Other Benefits** | | | |
| Community Health Improvement Services | $1,335,878 | $0 | $1,335,878 |
| Community Benefit Operations | $0 | $41,387 | $41,387 |
| Health Professions Education | $0 | $5,622,813 | $5,622,813 |
| Subsidized Health Services | $0 | $0 | $0 |
| Research | $139,823 | $0 | $139,823 |
| Cash and In-Kind Contributions | $766,783 | $0 | $766,783 |
| Other Community Benefit | $0 | $44,639 | $44,639 |
| **Total Other Benefits** | $2,242,484 | $5,708,839 | $7,951,323 |
| **Community Benefit Spending** | | | |
| **Total Community Benefit*** | $30,902,031 | $5,708,839 | $36,610,870 |
| Medicare (non-IRS) | $188,183 | $0 | $188,183 |
| **Total Community Benefit with Medicare** | $31,090,214 | $5,708,839 | $36,799,053 |

*Sum of Financial Assistance, Means-Tested Government Programs and Other Benefits.

## Community Benefit Plan FY27

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

### Significant Health Needs the Hospital Intends to Address

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

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

**FY26-FY28 Priority Health Need: Access to Health Care**

**Goal:** Increase access to health care for medically underserved children.

**Strategies**

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

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

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

**Strategies**

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

mental health and substance use topics.

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

**FY26-FY28 Priority Health Need: Chronic Diseases**

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

**Strategies**

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

**FY26-FY28 Priority Health Need: Pregnancy and Birth Outcomes**

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

**Strategies**

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

**FY26-FY28 Priority Health Need: Preventive Practices**

**Goal:** Improve community health through preventive health practices.

**Strategies**

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

## Evaluation of Impact

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

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

## Health Needs the Hospital Will Not Address

MCWH cannot address all the health needs present in the community, but it will concentrate on those priority health needs that it can most effectively address given its areas of focus and expertise: access to health care, pregnancy and birth outcomes, behavioral health needs, chronic diseases, and preventive practices. These efforts will be guided by a commitment to advancing health equity and addressing social drivers of health, including economic security, housing, food access, transportation, and environmental conditions. Taking existing hospital and community resources into consideration, MCWH will not address the remaining health needs identified in the CHNA, which were overweight and obesity, and violence prevention.

## Contact Information

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

**Web Address**
https://www.millerchildrens.memorialcare.org

**Community Benefit Contact**
John Fay, MSG
Manager, Community Impact & Advocacy
MemorialCare Health System
jfay@memorialcare.org

## Appendix 1: Categorization of Community Benefit Programs

| Medical Care Services |
|---|
| Charity care/financial assistance |
| Medi-Cal shortfall |
| Medicare shortfall (non-IRS) |
| **Other Benefits for Vulnerable Populations** |
| Behavioral Health Integration Program |
| Behavioral health outreach, education and resources |
| Bickerstaff Pediatric Family Center |
| Birth equity program |
| Breastfeeding classes, support groups and consultation |
| Caregiver support and education |
| Cash and in-kind donations to organizations serving vulnerable populations and improving community health |
| Chronic disease treatment and management education and resources |
| Community benefit grant program to organizations serving vulnerable populations to address priority health needs, health equity and the social drivers of health |
| Community health fairs, health education, preventive care, and healthy living |
| Community outreach on access to care |
| Education on chronic diseases prevention, management and treatment |
| Family Medicine Clinic |
| Family Resource Center |
| Health and wellness education |
| Jonathan Jaques Children's Cancer Institute |
| Long Beach Alliance for Children with Asthma |
| Outpatient Specialty Centers – The Cherese Mari Laulhere Children's Village |
| Prenatal, perinatal and postnatal care, childbirth preparation and prenatal classes, support groups, Welcome Baby, lactation support |
| Prescriptions, durable medical equipment, and recuperative care |
| Resources and education for children with special needs |
| Safety and injury prevention |
| Social drivers of health screening and referrals |
| Social media postings, blogs, podcasts, informational articles, and a quarterly newsletter with health education |
| Support groups |
| Transportation support |
| Welcome Baby |
| **Other Benefits for the Broader Community** |
| Community benefit operations |
| **Health Research, Education and Training Programs** |
| Clinical precepting for nursing students |
| Clinical precepting for other health professionals: child life interns, dietetic interns, patient care assistants, pediatric rehabilitation students, and pharmacy students |
| Community health research studies |
| Graduate Medical Education |
| **Nonquantifiable Benefits** |
| Coalition Building |
| Economic Development |
| Workforce Development |

## Appendix 2: Community Stakeholders

### Community Stakeholder Interviews

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

### Listening Sessions

| Target Population | Attendees | Partner Organization | Session Date |
|---|---|---|---|
| Immigrants and refugees | 12 | Best Start Central Long Beach | 2/22/25 |
| Black and African American | 7 | Black History Long Beach | 2/24/25 |
| LGBTQIA2S+ | 12 | LGBTQ Center of Long Beach, Kubo Organizing Project, APLA, and Earthlodge | 2/26/25 |
| Homeless and unhoused community | 5 | Greater Long Beach Mutual Aid Network | 3/1/25 |
| Veterans and disabled individuals | 8 | Century Villages at Cabrillo | 3/3/25 |
| Latinx | 11 | Greater Long Beach Mutual Aid Network | 3/4/25 |