Welcome to the 2011 – 2012 Annual Report
for Memorial Medical Center Foundation, Long Beach Memorial and Miller Children’s Hospital Long Beach

It has been a busy year. But underlying the activities is the knowledge that what we do is about touching the lives of people we serve. We strive to deliver the healing touch to our patients, their families and those in the community in which we live.

Touching lives happens everyday, and we hope, through the stories in the following pages you will uncover something that touches you.

Long you live and high you’ll fly
And smiles you’ll give and tears you’ll cry
And all you touch and all you see
Is all your life will ever be.

Pink Floyd
A Busy Year
One year after the opening of the new NICU, Pediatric Hematology/Oncology Unit and the Center for Women, the philanthropic impact on patient care is evident.

Finding Their Strengths
Isaiah and Robert are only two of the many children reaping the benefit of recent gifts from the Miller Foundation and Dr. and Mrs. Doug Jackson.

In the Huddle
Patients don’t know it, but the morning meeting down the hall improves their care.

A Cuddler’s Magic
Providing love and a healing touch for the most fragile of newborns.

Ensnared in a Solitaire
Strokes run in her family; then Carol Schoenbachler experienced one herself. Technology and skilled hands provided her with an excellent outcome.

Touched by the Technology in Her Hands
Christina Gilliland is just one of many patients at MCHLB who find that iPads make all the difference while being treated for cancer.

Never, Say Never
The team at Transitional Rehabilitation Services wouldn’t let retired firefighter Richard Willeford remain in his wheelchair after he became paralyzed from the waist down.

Courage, Hard Work and the Therapeutic Touch
Hannah Swank’s diagnosis at 2 years of age left no choice – she was going to have to survive with only half her brain. She is now thriving with help from three therapies.
Dear Philanthropic Friends,

Last evening, I once again experienced health care up close and personal when I arrived at the Emergency Department to assist my dad. He had been sent by his physician, who was concerned about a blood clot. Of course, my father was in great spirits. He was convinced that there was nothing wrong because he felt great, and the doctors and nurses attending to him had been very attentive. He then said, “I have been grounded and can’t drive for seven days.”

That’s devastating news to those who value their independence. But the message was delivered by the health care professionals in such a way that he looks forward to day eight when he can resume driving. He knew what new medications he would be taking and the rationale for the temporary restrictions because of excellent communication. In short, he experienced “Exceptional People and Extraordinary Care.”

It is not the buildings or the technology, but the “human touch” that puts the care in health care. And when you combine touch with education and technology, everybody benefits.

Throughout this Annual Report, you will see examples of how philanthropy touches lives and makes a difference. You will hear about my late friend, Willie, whose philanthropy enabled the Memorial Medical Center Foundation to establish an endowment, a permanent fund supporting the mission of the Todd Cancer Institute. She also allocated some of her bequest for the building of the new Todd Cancer Pavilion, thus creating her legacy and touching lives far into the future.

You will read about our Young Professionals Association and how their gift of iPads, when in the hands of our precious pediatric patients, impacts their healing journey. And how the Partnerships in Excellence program, now in its second decade, purchased an amazing 3-D ultrasound machine that helps not only with the diagnosis of heart disease, but also aids in surgical planning.

Our volunteer groups give of their time, talent and treasure from raising funds for the purchase of new equipment, to the “cuddlers” who come in and rock our premature newborn infants.

These stories and the others shared on the following pages are just a sampling of how each and every day Long Beach Memorial and Miller Children’s Hospital Long Beach continue to provide “that extra measure of care” to everyone in our community. And not to be forgotten is how you, our donors, make this all possible through your gifts, grants, bequests and participation in our community events.

We value your input and feedback and feel privileged to steward your donations in support of providing excellent health care close to your home.

Sincerely,
James F. Normandin
President, MMCF

PS your legacy can be created by including MMCF in your Will/Trust.

Too often we underestimate the power of a touch, a smile, a kind word, a listening ear, an honest compliment or the smallest act of caring, all of which have the potential to turn a life around.

Leo Buscaglia
Annual Report 2011-2012

Fiscal year 2012 Board officers and committee chairs plan strategy for raising, managing, distributing and stewarding philanthropic gifts, grants and bequests.
To Our Friends and Neighbors

Throughout the hallways of a hospital or in a discussion on health care, we often hear about the many touch points involved in an experience, from the personal touch, to the high tech touch.

As part of our commitment to our three hospitals’ mission of improving the health and well-being of individuals, families and our communities, at Long Beach Memorial, Miller Children’s Hospital Long Beach, and Community Hospital Long Beach, we never forget that the patient experience is measured by touch. So it’s the way in which our 7,000 caregivers and medical professionals deliver “touch” every day – beginning with our patient- and family-centered care approach – that makes a positive impact.

This past year, the many ways in which we have touched Long Beach lives include:

• Introducing an Early Lung Cancer Detection program at Todd Cancer Institute
• Opening units: an expanded Perinatal Special Care Unit in our Center for Women, an expanded Neonatal Intensive Care Unit at Miller Children’s, a new Hematology/Oncology Unit in the Miller Children’s Pavilion
• Offering a full-time Division of Interventional Neuroradiology program as part of a premier Neuroscience Institute at Long Beach Memorial
• Expanding services at Community Hospital, including establishing contracts with primary commercial HMO and PPO plans operating in and around the CHLB service area, and assuming management of and expanding treatments available at the Behavioral Health Unit.
• Adding new state-of-the-art technologies, such as a 320-slice CT scanner, one of only two in California
• Partnering with the City of Long Beach on a Move Long Beach initiative, inspired by First Lady Obama’s Let’s Move campaign

We broke ground on the 64,000-square-foot Todd Cancer Pavilion, and celebrated the opening of the region’s first Ronald McDonald House just across the street from Miller Children’s.

We also touch lives in the community as one of the largest employers in Long Beach. Through a public-private partnership with Pacific Gateway, the region’s workforce development agency, we are providing customized training to help address skills gaps and training needs in the health care sector. Pacific Gateway was awarded a $2.8 million dollar grant from the U.S. Department of Labor, creating 363 new positions within Long Beach Memorial, Miller Children’s, Community Hospital and other health care sites.

We recognize that our mission goes far beyond our hospital walls to providing high-quality health care to the entire greater Long Beach community. Every day we touch lives citywide by supporting health and wellness initiatives, participating in active lifestyle events, such as the Long Beach Marathon and Tour of Long Beach, and providing community benefits that include support groups, health screenings, outpatient clients, community education and charity care.

In the coming year, we look forward to opening the first MemorialCare Medical Foundation Primary Care Center in Long Beach. This 30,000-square-foot facility, the largest of its kind in the MemorialCare systems, will serve the East Long Beach and Los Altos community with primary, specialist and urgent care services. At full capacity, the new Primary Care Center will be able to accommodate more than 100,000 annual patient visits.

Whether with a healing touch or simply a touch of prevention, we will continue to strive to support the greater Long Beach area with high-quality health care and wellness programming.

Diana Hendel, PharmD
CEO
Long Beach Memorial
Miller Children’s Hospital Long Beach
Community Hospital Long Beach
“The love of humankind” can be expressed in many ways. Whether support is given in cash, by check or through a bequest, patients are the ones ultimately touched by this heartfelt act of kindness.
A Busy Year
by Kimberly Yap

It seems hard to believe it has already been a year since we reported on the completion of several construction projects.

Expectant mothers are now resting comfortably in their private rooms at the MemorialCare Center for Women (MCW) at Miller Children’s Hospital Long Beach (MCHLB) and Long Beach Memorial (LBM). Critically ill babies in the Neonatal Intensive Care Unit (NICU) are spending quality quiet time with their families in individual patient bays. Children with cancer and blood diseases are in their spacious rooms in the new Pediatric Hematology/Oncology Unit.

Today, philanthropy is touching the lives of patients and families, in more ways than ever.

Great Results
Lainie Conley, a management consultant for LBM, has been traveling to the hospital from her home in Colorado for three years, helping to streamline the discharge process on the fifth floor through the Lean process, as reported in last year’s Annual Report. On March 27, in her 33rd week of pregnancy, she started bleeding, changing her role from consultant to LBM patient.

“1 am in a different city, I don’t have my husband, this can’t be happening,” said Lainie. Don’t worry we will take care of you, she was told. “Every cell in my body was saying this is not okay. They were there saying, ‘it will be.’ ”

Lainie was diagnosed with a partial placental abruption (separation of the placenta from the uterine wall). “I didn’t want baby Seth to come out yet,” said Lainie. She was admitted and given magnesium to stop her contractions, and steroid injections to develop the baby’s lungs. “They were taking precautions, just in case I needed to deliver,” said Lainie.

Her husband, Mike Conley, flew in from Colorado. “He got to stay in the room with me,” said Lainie. “We both really appreciated that.”

Seth Conley was born healthy due to the expert measures taken by Dr. Michael Nageotte and the Center for Women to prevent premature birth. Parents Mike and Lainie Conley are thrilled.
The rooms in the new Pediatric Hematology/Oncology Unit are spacious, allowing patient Utuone Tauanuu to have his mother, Bernalee, and baby brother, Moeiseu, visit, even while staff (left) Christine Hirschl, RN, and Carrie Cottone, ATR, perform their duties.

Thankfully, Lainie didn’t have any further bleeding. She was kept for observation and, following an appointment with Michael Nageotte, MD, associate chief medical officer, MCW, was discharged on April 2. “After fetal heart monitoring in the morning, I flew home and went straight to my doctor from the airport,” said Lainie.

On April 25, Seth Conley was born. Lainie and Mike both credit MCW for continuing the pregnancy and allowing him to be born “just great.” Lainie said, “What they do every day is such a gift. They were very concerned, always listening, and did a wonderful job of balancing my desires and medical condition.”

“\textit{I like when my mom and baby stay with me. And sometimes my dad stays, too.}”

Utuone Tauanuu
Giving Life

When Evelyn Satele was 20 weeks pregnant, she was told her baby was no longer growing. He had a condition known as intrauterine growth retardation, which causes low birth weight. Her case was severe. "Dr. Nageotte told me to prepare myself, because things could go either way," said Evelyn. They continued to monitor the baby's growth and hoped to make it five more weeks without complications.

As week 25 began, baby Ethan's heart rate dropped dramatically. Like Lainie, Evelyn received steroid injections and, on December 16, Ethan Satele was delivered by emergency C-section. He weighed only 15 ounces.

Ethan was taken to the NICU and cared for in room 288, reserved for the most fragile babies. Evelyn has worked at LBM, as executive secretary in the pathology lab, for 21 years. She knew Ethan was receiving the best of care; however, his condition was extremely critical.

"I want to say everyone in 288 was wonderful," said Evelyn. "Of course, there were ups and downs with Ethan's condition, but as far as the doctors and nurses giving me the information I needed, we (with husband, Ace) loved it." In March, Ethan was moved to a private bay. "The pavilion was great," said Evelyn. "We were able to stay in the family room and it was so beautiful. Room 288 was really busy, really closed in and noisy," said Evelyn. It has to be. But for those babies who are a little stronger and healthier, the pavilion offers them what they need. "The new unit is great for the older babies, who need a little more privacy," said Gayle King, RN, one of Ethan's primary nurses. "It helps with mom and baby bonding." And the lighting is softer, which is better for the babies. "It's a lot more personal over here," said Gayle.

Ethan has had many surgeries, with one more scheduled, and still requires oxygen. However, on July 10, Ethan's family welcomed him home. "He is being a normal baby and gaining weight," said Evelyn. He now weighs more than 7 pounds.

"He is such a sweet baby," said Gayle. "I am so happy he made it through. He deserves a good life."

Room for Family

In November 2007, when Utuone Tauanuu was just 2 years old, he was diagnosed with leukemia. He was treated at MCHLB and stayed for three long months. Utuone's treatment and maintenance were successful, and he went into remission.

Unfortunately, in 2010, his leukemia returned. Utuone was hospitalized and has been in active treatment for the last two and half years.

"When your child is going through something so difficult, it is hard not to have your own space," said Bernalee Tauanuu. "The rooms on the old unit were small, with no privacy."

In February, while Utuone was going through vigorous treatments, Bernalee gave birth to his healthy baby brother, Moeiseu. "Utuone was actually in the Nightingales Infusion Center, having treatment, while I was in labor at MCW," said Bernalee.

During the stay, the family was moved to the new Pediatric Hematology/Oncology Unit. "The private rooms made it a little easier," said Bernalee. She was breastfeeding her new baby, and the privacy allowed her to be present for both Utuone and Moeiseu. She never had to choose between her children. "I like when my mom and baby stay with me," said Utuone. "And sometimes my dad stays, too."

Utuone, now 7 years old, was recently discharged and is back home doing everything he loves, such as playing games, playing on his Xbox, and spending time with his family. "Now, we wait to see whether he goes into remission," said Bernalee.

Yes, it has been a busy year.
"When it comes to Isaiah and Robert, they are all about sports, sports and more sports," said Robbin Hatten of her 10-year-old sons. Football is Isaiah’s favorite sport and baseball is Robert’s. In the athletic environment, they are on a level playing field with other kids. Unfortunately, sometimes in the classroom, they’re not.

Through the Cracks
When children struggle in the academic environment, there is an impact. Some worry and are labeled emotional, anxious or depressed. Others respond with actions and are labeled hyperactive or conduct disordered. These labels are not always appropriate.

"Isaiah is a great kid and fun to be around, but he can be very stubborn," said Robbin. He’s smart and knows the work, but finds it difficult to put it on paper or turn it in on time. Robert finds school a bit harder and struggles with comprehension. But, he doesn’t get into trouble and does what he is told. “Robert is a perfectionist and internalizes everything,” said Robbin. “He had a headache for 30 days” from school-related stress.

"The best way to describe these children is lost," said Christina Aguirre-Kolb, MS, LEP, ABSNP, educational psychologist, Stramski Children’s Developmental Center at Miller Children’s Hospital Long Beach. “Those who struggle in the academic learning environment become lost as they slip through the cracks.” They behave and do well enough to progress through the system, without true understanding of their abilities.

"So often we take into account the physical abilities of people when we give them a physical task," said Christina. This same type of analysis doesn’t always occur in the academic environment. Learning skills are typically considered the same among everyone in the class. But challenges, such as those demonstrated by Isaiah and Robert, have long-term repercussions and can be debilitating.
Finding Help
In February, thanks to the generosity of both the Earl B. and Loraine H. Miller Foundation and a grant from the Sandi and Doug Jackson Donor Advised Fund, Christina joined the team at the Stramski Center. The Stramski Center provides comprehensive care for children, from birth to 21, with conditions such as delayed development, autism, fragile X syndrome, ADHD/ADD, Down syndrome, learning disabilities, behavioral sleep conditions, and craniofacial abnormalities, such as cleft lip and palate. Care is achieved through the seven Stramski Center specialty programs: Behavioral and Neurodevelopment, Craniofacial, Sleep Disorders, High Risk Infant Follow-up, Genetics, International Adoption and Fragile X. Each program is designed to help manage a child's illness and improve his or her developmental outcome.

“We realized the Center needed a full-time psychologist to do the in-house testing and evaluations necessary to reach the next level,” said Doug and Sandi Jackson. With budget cuts in school districts and Regional Centers, testing becomes more difficult to obtain. “It was an area where we felt our donation would make a difference.”

“Early detection is critical,” said Walter M. Florie Jr., president and CEO, Miller Foundation. “It was pretty clear, if they could hire this person, they could analyze the disorders and start programs earlier.”

Cognitive assessments and academic tests are used to find strengths and weaknesses in a child’s learning abilities. Based on the test results, Christina recommends strategies and intervention tactics for parents, physicians and schools. “My goal is to work with a child’s strengths, so his or her education can be as valuable as possible,” said Christina.

Gary Feldman, MD, medical director of the Stramski Center, acknowledged, “Christina has been a phenomenal boost to our program. She can perform the same tests as the schools and initiate testing for those kids who fall through the cracks. The testing helps fine-tune how children can be helped at school and at home. “If we understand how they function, we can help them,” said Dr. Feldman.

Plan for Success
A friend in a similar situation told Robbin about the Stramski Center: “The little gem no one knows about.” Robbin had considered taking her sons to the Center for a while. She knew it was time when Isaiah’s Sunday school teacher told her, “He defines stubborn.”

Dr. Feldman agreed Isaiah would benefit from further testing. “We see patients collectively [as a team] and, if there’s a need for psychological testing, we refer them to Christina.” She reviews the case, gets required authorizations, does the testing and provides comprehensive reports. The Stramski team then meets with the family and reviews the findings to create a comprehensive management plan. “We got Isaiah’s results and found out, some information that is coming at him, he’s not able to process,” said Robbin.

“Christina communicates with the school to discuss the child’s results and what needs to be done,” said Dr. Feldman. “She talks to the parents and helps them better advocate for their child.” Parents are always the best advocates and having test results better equips them to meet their child’s needs.

Robert was tested next. Robbin was worried that, as he gets older and school gets harder, the learning difficulties might overwhelm him. Christina substantiated a past diagnosis of ADD and identified that the information Robert receives verbally is not being processed in the same way as visual information.

In September, Isaiah and Robert will attend a new school.”The school received the results and knows the struggles the boys have,” said Robbin. “I am excited to watch them succeed.”
Successful entrepreneur, grateful patient and generous philanthropist — Wilma Burley was a savvy investor with a passion for giving.

The late “Willie” Burley was a longtime friend of the Memorial Medical Center Foundation (MMCF). Not only was she a former breast cancer patient at the MemorialCare Todd Cancer Institute at Long Beach Memorial (LBM), but she was also a Philanthropic Friend. And, a thoroughly involved one at that.

Willie made several outright gifts over the years, but she also gave her time as a mentor in the breast cancer mentoring program. Randal Snyder, manager of Women Guiding Women Cancer Support and Education, reflected, “Willie was truly larger than life and she was always there for others as a vibrant force of nature.” In addition, Willie would lace up her walking shoes and show her support at the annual Team Spirit Breast and Ovarian Cancer 10K Walk.

When considering the sale of her real estate holdings, Willie called Jim Normandin, MMCF president, to discuss her concerns and explore viable charitable options. To minimize the high financial gains tax that would be incurred from an outright sale, they decided to create a Charitable Remainder Trust with her estate — making MMCF the beneficiary.

When LBM announced the construction plans for the new Todd Cancer Pavilion (TCP), she quickly committed to naming a room by funding it with a portion of her Charitable Remainder Trust.

The room Willie chose to name is designed as a boutique shop for cancer patients. This boutique will provide products particularly for breast cancer patients and be a part of the integrated cancer medicine program. The program creates a place where cancer patients can not only see their physician, but can find other professional and support services such as acupuncture, massage therapy, a rehabilitation gym, a cooking demonstration kitchen, psychosocial services, and of course, the boutique.

Willie left very specific instructions for the purpose of her final gift. Since her passing, the remaining 60 percent of her Trust has become an endowment at MMCF — creating the legacy of Wilma “Willie” Burley.

“If you are interested in following in Willie’s footsteps and becoming an involved investor in your community while creating your own legacy, contact Jim Normandin at 562.933.1667 or jnormandin@memorialcare.org.”

“Willie was truly larger than life and she was always there for others as a vibrant force of nature.”

Randal Snyder, manager of Women Guiding Women Cancer Support and Education
You or someone very close to you has just been diagnosed with cancer. Fear has taken over and you or your loved one does not know where to turn. Look no further, the new Todd Cancer Pavilion (TCP) at Long Beach Memorial (LBM), is being built to provide a place of healing.

The much-anticipated grand opening of the new TCP will take place in June 2013, and will provide an array of programs for those newly diagnosed, as well as for long-term survivors. It will be a healing oasis, blending the world’s most advanced technology and therapies for cancer care in an environment that is convenient, calming and inviting – where the emotional and spiritual needs of patients and their families will be addressed. An integrated cancer medicine program will also include yoga, exercise, massage, acupuncture and educational programs.

Physicians, nurses and other specialists representing all areas of cancer medicine will work side by side in an environment that promotes survivorship, communication and collaboration with access to the best technology, including digital mammography, TomoTherapy and hyperthermia equipment.

“We are on time and on budget, and we are all excited to offer the comprehensive cancer services so desperately needed. Many services are funded by the philanthropic contributions of our supporters and are an integral part of making the new pavilion successful,” says Cathy Kopy, executive director of the Todd Cancer Institute (TCI).

Cancer affects our society in devastating ways and is the second leading cause of mortality in the U.S. In an effort to combat the disease, the TCI will always pursue clinical research opportunities and offer the latest patient programs.

Contact the Memorial Medical Center Foundation today at 562.933.4483 or info@lbmmcf.org to see how you can help.
Imagine if your child was in the Pediatric Intensive Care Unit (PICU) with a life-threatening illness. Each and every second is critically important, making it impossible to leave the hospital. But everyone needs to rest. For many families in this situation, one of the Family Overnight Rooms, supported by the Ronald McDonald House Charities of Southern California (RMHCSC), is the “comfort zone” at Miller Children’s Hospital Long Beach (MCHLB).

Parents of children in the PICU or the Neonatal Intensive Care Unit (NICU) can now take advantage of newly renovated sleep rooms to catch a nap or take a shower – all within mere steps of their hospitalized child – thanks to a $30,000 grant from the RMHCSC.

“We have a strong appreciation for the partnership that Miller Children’s has with us. We wanted to support them in the same way they have supported us,” said Ronald J. Piazza, RMHCSC Board chair.

Executive Director of the Long Beach Ronald McDonald House Cheri Bazley added, “We recognize that there are families who do not feel comfortable leaving their critically ill children alone in the hospital, so we are pleased to provide funding to Miller Children’s to renovate the in-house family rooms.”

The grant will fund a complete remodel from head to toe, including new furniture, carpet, televisions, and even new paint. The grant has been allocated to remodel one room in the NICU and three rooms in the PICU. Thanks to RMHCSC’s gift, these families will continue to receive “that extra measure of care.”

“When your child is critically ill, the last thing you want to do is go home. You want to be nearby. These newly remodeled rooms will provide that warm and comforting place that the families need,” said Joyce Volsch, vice president of Patient Care Services. The family rooms help parents stay in close communication with their child’s medical team, improving the overall experience, not just for the family, but for the Miller Children’s team as well.

“We are so thankful for RMHCSC’s generous donation to refurbish our family overnight rooms. They help our families feel as comfortable as possible during the most stressful and challenging times of their lives,” said Brooke Johnson, RN, BSN, CCRN, PICU clinical operations manager.

Finding comfort away from home never looked so good at Miller Children’s Hospital Long Beach, thanks to RMHCSC – making a difference, one family at a time.
caregiver touch

One can be highly trained with all the health care experience in the world, but having the right touch is key to providing the best care.
It’s 9 a.m. An elderly patient eats breakfast in her room. She doesn’t realize it, but a few doors down, the bruises on her arms are raising questions.

In a classroom on the fifth floor, a team of experts meets to discuss patient care. This patient’s case is next. Each person in the room has a possible explanation for the bruising. Taken individually, the theories offer no solution. But, when combined, they all contribute to a bigger picture.

A bedside nurse raises the concern of abuse, a logical conclusion given the circumstances. At that point, a social worker chimes in. She’s met with the children – the patient’s primary caregivers – and abuse seems highly unlikely.

The physical therapist has another suggestion. Given the placement of the bruising on the patient’s arms and shoulders, it could be an issue of improper mobilization. No matter how well intentioned the children, if they have not been properly trained to move the patient, it can be a needlessly painful process. Finally, the physicians weigh in. A blood disorder could also be the cause of the bruising. Based on the patient’s electronic medical record – accessible from the team’s laptops – she hasn’t yet been tested.

Within the span of a few minutes, a physical therapy session with the patient and her family is scheduled, diagnostic studies are recommended to the patient’s physician, and follow-up with the social worker is deemed appropriate. The tasks are written up, and the nurse is sent back to her patient with clear goals to move from diagnosis to treatment and eventual release.

The team, also including administrators, pharmacists and respiratory care specialists, continues the morning like this from floor to floor in the tower of Long Beach Memorial (LBM).

The discussions might take place behind closed doors, but their impact on patient care, length of hospital stay and caretaker efficiency is obvious.
to all. “It’s about the right person giving the right care at the right time,” said Linda Hoff, RN, vice president, Medical/Surgical Nursing.

The Dawn of Daily Huddles

Efficiency is key when running a medical center as large as LBM. When in early 2011, it was discovered that the length of patient stays was steadily increasing the administration decided to institute a program to reduce bottlenecks, and get teams working more efficiently and appropriately. “I believe that care used to happen in a parallel process,” said Judy Fix, RN, chief nursing officer. “But, when we bring everyone together, we ensure there is a plan of action for the patient. Now the [separate medical] disciplines are clear on the plan and how to move the patients’ care forward,” she said. It was from this concept that the Daily Huddles were derived.

“I’ve practiced at Long Beach Memorial for 32 years and, until now, I never realized the complexity of moving a patient through the hospital,” said Howard “Les” Worcester, MD, medical director, Resource Management. “Now, this is the only way that makes sense to manage patients. Medicine has become so complex, and we’re able to learn something from each other every day.”

Dr. Worcester said that the stars of each Huddle are the nurses who present to the group. They work on the front lines of patient care and often serve as the liaisons among the various members of the care team. “I might see a patient for 30 minutes, but nurses are with them 24 hours a day,” he said. “They have insights into the medical needs, family dynamics and patient personalities, as well as physician and specialist recommendations. They provide invaluable information to the group as a conduit for effective multidisciplinary care.”

Nurses have found that they get much of what they need from the meetings as well. For instance, scheduling issues that could take days to rectify in the past are expedited, thanks to dialogue between the primary caregivers and key decision makers. Marcy Mills, RN, said, “It’s made a big difference to the nursing staff and the patients. It’s given us all a better idea of what needs to be done and when.”

Marcy recalled a patient who recently came in with mental health issues. “Medically, he really didn’t need us any longer,” she said. Collaborating with the pharmacists and social workers in the Huddle, the team was able to come up with appropriate next steps for the patient’s treatment outside of the hospital. “Having those resources in one room made a big difference.”

The Silent Collaborator

Often, patient care extends far beyond diagnosis and treatment of symptoms. It’s during these difficult times that the Huddle team really shines. And, they couldn’t do it without their silent collaborator – the hospital’s electronic medical records system, Epic. With a few keystrokes, the Huddle can access important medical history, as well as notes from the patient’s care team. Goals can be added to the chart just as easily. “Electronic medical records mean we don’t have to guess,” said Linda. “We have real-time information to guide us.”

As technology becomes a more important part of the hospital experience, the human factor of care remains supreme. “We’re looking at different ways to embed this concept into the everyday process and move Huddles to the bedside. We want this level of collaborative care for every patient,” said Judy.
A Cuddler’s Magic
by Donna Queza

“There’s magic here,” said Kate Daeley, RN.

And she’s right. Every day in the Miller Children’s Hospital Long Beach (MCHLB) Neonatal Intensive Care Unit (NICU), patients and their families experience a special kind of magic. But the wizards in this Unit don’t wave wands or recite spells. Their magic comes from the heart – love and protection for the newborns who need it most.

Kate and fellow NICU nurse Mary Chinchilla, RN, recognized they couldn’t perform all the magic on their own. Their dedicated team worked tirelessly, but they needed help. Although well-intentioned volunteers had worked in the Unit before, they just didn’t have the expertise to handle the needs of the NICU. Well-trained volunteers could fill a void in the department – cuddling neonates while nurses attended to medical care – but the nurses couldn’t trust just anyone with their precious patients. Mary explained, “NICU nurses are like mama lions. They’re super-protective.” The nurses knew it would be difficult, but necessary, to train a team to take on the job.

The Cuddlers Program was born.

What it Takes to be a Cuddler
In their pursuit of the best and brightest in cuddling, Kate and Mary set up a rigorous training process for volunteers, including an in-person interview, a background check, a class on what to expect, and a one-on-one orientation with a nurse. Rosemary English, a volunteer who also works with children at her church, found the ongoing education insightful. “We have sessions with the occupational therapist who shows us even more ways to hold and soothe the babies.” Rosemary said she’s proud to add “professional Cuddler” to her resume.

Burrell Ross, retired educator, grandfather and Cuddler added, “This is not a play-games-with-kids program. It’s sitting down, talking, reading and singing to them.” Research suggests that holding, rocking and cuddling newborns is as important to their development as proper nutrition. Volunteers must be able to sit for as many as three hours at a time holding an infant. Burrell’s wife, Marlene, is also a volunteer.

“I like cuddling babies that you know no one else is here to hold,” she said.

Burrell and Marlene moved to Long Beach from Albuquerque three years ago to be closer to their daughter and two grandchildren. Burrell was an experienced Cuddler, having volunteered in the University Hospital NICU for a decade before his move. When they relocated, Burrell and Marlene wanted to get involved with MCHLB, especially since their daughter is a proud member of the MemorialCare team and their grandchildren were born at the hospital.

Cuddlers are asked to volunteer at least four hours a week and are required to make a six-month commitment to the program. Rules like these have been instituted through trial and error. In the seven years since the program launched, Kate and Mary have learned a lot about what makes the perfect Cuddler candidate.

A Commitment to Service
Unlike some of the more social volunteer opportunities offered throughout the hospital, the Cuddler Program is a very intimate experience, forging a one-on-one bond between volunteer and child. This commitment to service is exactly what attracted Nikki Conkings to the program. Thirty-two years ago, Nikki’s son was born at MCHLB. Due to an esophageal disorder, he was in the NICU for three weeks after his birth. “There are only so many ways to say ‘thank you’. And this is much better than a 2-pound box of candy,” she said of her work.

The dedicated team of more than 40 volunteers plays an important role in both the lives of the children they hold and the families they touch. For a variety of reasons, it’s often impossible for parents to be with their children all the time they’re in the NICU. The Cuddlers Program ensures that no child will go without the soft touch and soothing voice of someone who cares.

And this fact hasn’t gone unnoticed by the Unit’s team of nurses. These still protective “mama lions” have allowed this group of special volunteers into their pride. Kate and Mary’s dedication in training this skilled group has allowed fellow nurses to focus their attention on patient care.

There is a waiting list of more than 180 volunteers wanting to join the program. If you’re interested in helping the NICU, donations of board books for volunteers to read to the children are always welcome. You can also donate Pampers points stickers from packages of Pampers diapers. For more information, please contact Mary Chinchilla at mchinchilla@memorialcare.org.
high tech touch

Technology employed in health care can cost millions of dollars or, like this iPad, just a few hundred. The impact can be equally effective in improving patient care.
Enhancing Patient Care with the Right Equipment

by Nhadira B. Johnson

Memorial Medical Center Foundation’s mission is to provide “that extra measure of care” for patients served at Long Beach Memorial (LBM) and Miller Children’s Hospital Long Beach (MCHLB). Ensuring access to the best medical equipment is part of that mission.

Here are some highlights of the clinical equipment the Foundation funded during fiscal year 2011-2012.

- Bassinets
- Cardiac rehabilitation equipment
- Cribs
- Electron density phantom
- Hematology cell counter system
- 3-D cardiac ultrasound system
- Hyperbaric chamber
- Nutrition warmer
- Sleeper chairs
- Special beds
- Functional electrical stimulation leg and arm bicycle
- Telemetry monitoring system
- Vein finder equipment
- Wall-mounted blood pressure monitors

Functional Electrical Stimulation (FES) Leg and Arm Bicycle
The Outpatient Neurologic Rehabilitation Clinic is where Juan Flores exercises on the new FES leg and arm bicycle. Juan suffers from Guillain-Barre syndrome and after using the machine only twice, he now feels sensation in his legs all the way down to his ankles. He can already walk 18 feet with minimal assistance, making phenomenal progress in such a short time. “There are very few places patients can go to use the functional electrical stimulation bicycle. Now we are one of those places. We are so thankful to the Foundation for the equipment,” said Juan’s physical therapist, Betsaida Cruz, DPT.

Special Beds
The Pediatric Intensive Care Unit (PICU) at MCHLB is providing more comfort to patients with their new beds funded by the Foundation. The beds have built-in scales, making it easier for the medical team to weigh patients on a daily basis without having to transfer them. “Many of our patients are in critical condition and it is very dangerous to transport them from their bed to a scale. The new beds make it safer and more convenient,” said Bronwyn Stackleather, RN, assistant manager of the PICU. The beds also have Tempur-Pedic mattresses that prevent skin breakdown, providing extra gentle support patients need.

Telemetry Monitoring System
The Pulmonary Rehabilitation Clinic at LBM will soon receive a new telemetry monitoring system. The system is one of the most innovative models in rehabilitation today, seamlessly managing all aspects of cardiopulmonary restoration. “The system allows up to eight patients to use it at a time. The medical team will be able to monitor each person without devoting a lot of time recording data into the system, increasing efficiency. We are so fortunate to have it as part of our service,” said Lisa Smith, PT, pulmonary and lymphedema clinical supervisor.

Right: Betsaida Cruz, DPT, helps Juan Flores on the FES bicycle. Below is one of the new PICU beds.
When Carol Schoenbachler’s mother suffered a stroke 25 years ago, doctors were able to save her. What they were not able to do was prevent the interruption in blood flow to her brain from causing permanent damage. The “brain attack” made it difficult for Carol’s mother to speak and swallow, and she spent the remaining 10 years of her life getting around in a wheelchair.

A Change of Heart
Carol was so affected by her mother’s stroke and its debilitating aftermath that she questioned whether she would want surgeons to try to save her if she ever suffered one.

Carol, who had a stroke in March, isn’t asking that question anymore.

Thanks to a cutting-edge imaging system that gave doctors at Long Beach Memorial (LBM) a detailed look inside her brain, as well as a new tool that removes clots from clogged brain arteries, Carol has become a vocal advocate of stroke awareness and prevention, and a huge fan of the latest technology in stroke treatment. “I don’t want people who’ve had strokes to give up hope,” said Carol, 59, of Cypress. “There are options out there.”

A “Game Changer”
At about 9:45 p.m. on March 22, 2012, Carol was settling in for bed after a day at work as a utility company account manager when she felt her left arm go numb and weaken. As she brushed her teeth, she became dizzy. When her left leg gave out, she fell to the floor. She called out her visiting nephew’s name. Though her words came out garbled, he heard the commotion and called 911.
Carol didn’t realize it in the hours after her stroke, but she became the fortunate recipient of the latest advancements in the assessment and treatment of strokes — the fourth leading cause of death in the U.S. but the leading cause of disabilities.

She was assessed immediately by the stroke team, who determined that Carol was, in fact, having an acute stroke. An acute ischemic stroke occurs when an artery to the brain is blocked by a clot. Carol was taken to LBM’s recently installed 320-slice CT imaging system, which captured 3-D images of her brain, the blood vessels that pump blood into it, and how much of her brain tissue was permanently damaged or in danger of being damaged.

Interventional neuroradiologist Reza Jahan, MD, who practices at LBM and is part of the Division of Interventional Neuroradiology at UCLA, eagerly turned to a new device called the Solitaire to remove the blood clot — an emergency intervention that is critical in the first few hours after a stroke.

Dr. Jahan was the neurointerventional principal investigator in pre-clinical studies and the lead neurointerventionalist in the national clinical trial that led to the Solitaire gaining approval by the FDA in March 2012.

“It really is a game changer,” Dr. Jahan said. The Solitaire, originally designed as a stenting device to treat brain aneurysms, looks like a long wire inserted into an artery in the groin and threaded up to the affected artery in the brain. When it reaches the blood clot, advancing the device further allows the tip to expand into a tiny stent-like metal cage that pushes the clot against the wall of the artery, ensnaring it in the cage. When the wire is removed, the clot is pulled out with it.

Unlike its predecessor, a corkscrew-like device called the Merci Retriever, the Solitaire allows for immediate restoration of blood flow to the brain. Dr. Jahan said the Solitaire is also easier to use and more effective than the Merci.

Carol, who was put in so-called “twilight sleep” – or conscious sedation – rather than general anesthesia, recalls being able to raise her left arm almost immediately after the clot was removed. “I’m so grateful I was taken to Long Beach Memorial,” said Carol, who returned to work full-time in mid-September. “I honestly think that’s what saved my life.”

Carol still has some coordination issues but has resumed her normal activities, including a favorite: walking her 6-year-old basset hound, Chloe. She is also eager to spread the message that suffering a stroke isn’t a reason to give up hope.

“I feel I’ve really progressed,” she said. “I feel that I have my life back.”

The Certified Stroke Program at Long Beach Memorial

The MemorialCare Stroke Center at Long Beach Memorial is a dedicated Stroke Receiving Center for Los Angeles County, with a stroke team available around the clock and the latest in advanced treatment options. Since 2008, the program has received hard-earned certification as a Primary Stroke Center by The Joint Commission, according to program director Angie West, RN, MSN, CCRN, CNRN.

Safety and quality of care are constantly being assessed, Angie affirmed, and specialists in the program regularly fan out into the community to talk about stroke prevention and education. Educational efforts and screenings are supported through funding from the Roxanna Todd Hodges Foundation.

As part of its Certified Stroke Program, LBM has also joined the American Stroke Association’s “Get with the Guidelines – stroke” program to provide the most current and effective procedures to improve the overall quality of care for first-time stroke patients and treatments for those with a history of stroke.
Christian Gilliland had just turned 21 when she was diagnosed with neuroendocrine cancer, a rare disease. The treatment provided by local physicians did nothing to stop the disease’s progress. So she and her mother, Barbara Ashe, traveled 6,000 miles from their home in Guam to find hope at Miller Children’s Hospital Long Beach (MCHLB).

It is hard enough to endure chemotherapy infusions. But to be so far from home, lying in a hospital bed day after day for weeks on end, is almost unbearable. Christiana missed the rest of her family and all her friends. The cost of keeping in touch by phone, either by the land line in her room or by cell phone, is costly. “Not only has it been a long journey, but I feel very isolated,” said Christiana.

Touching Others
A little more than two years ago, a new fundraising group called the Young Professionals Association (YPA) was formed. In its very first year, YPA raised $37,000 to purchase rocking chairs for the Pediatric Emergency Room. But this past fiscal year, when the group looked at the approved “wish list” from departments at Miller Children’s, they decided unanimously to raise money to purchase 29 iPads, 10 of which went to the Pediatric Hematology/Oncology Unit at MCHLB.

Steve Jobs of Apple, the company that makes the iPad, once said, “These technologies can make life easier, can let us touch people we might not otherwise. You may have a child with a birth defect and be able to get in touch with other parents and support groups, get medical information, the latest experimental drugs. These things can profoundly influence life.” For Christiana, having the iPad available profoundly influenced hers.

She checked out an iPad from a Child Life Specialist each and every morning. By downloading the free Skype app and setting up an account to contact her family in Guam, she was not only able to talk to them, but she could see them as well. With her sister in South Carolina, Christiana used Facetime, Apple’s application that lets iPhone and iPad users easily communicate through embedded web cameras.

Exploring all the Possibilities
For Child Life Specialist Araceli Angulo, the iPad not only makes her job easier, but she sees many
times each day how it helps children cope with their stay in the hospital. “When I meet a new patient, I usually say, ‘Do you have an iPad or an iPod?’ Then I show them the one I have and we start comparing the apps on ours with what they might have at home. This gets their attention.” And gets their mind off their illness and surroundings.

The current popular game for those 9 years of age and younger is “Fruit Ninja.” Araceli pointed out, “Even the toddlers use it.” The general favorite for older kids is “Angry Birds.” But Araceli just learned from a patient that the up-and-coming game is “Angry Birds in Space,” so she just downloaded it.

Kayleigh Scott is 15 years old and has been in treatment for five years for synovial sarcoma. That is a lot of hours in a hospital bed. She not only likes the new Pediatric Hematology/Oncology Unit and the fact that she can have as many visitors as she wants, but she’s also ecstatic that iPads are now available. What’s her favorite game?

“Where’s My Water?” She quickly replied. “There is a secret game hidden in the app. Having this makes it really fun to be here, because you have this cool stuff to do.” How many kids say that about being in the hospital?

For Kayleigh, it is about passing the time. For the Child Life staff, it is about comforting, entertaining and even educating the children during their time as patients. For Christiana, it is about staying in touch with her loved ones. “It makes home so much closer,” said Christiana. “It is literally in my hands.”

Young Professionals Association
Giving Back in a Meaningful Way

Scott Jones, one of the founding members of the YPA, recalled, “In our first year as an organization, one of the doctors from Miller Children’s came to speak to us. He made it clear how important community support was to the hospital. Our members want to help, but we are busy people – raising young children and working – so we do what we can by raising money to support this worthy cause.” During a recent visit to the Pediatric Emergency Room with one of his children, Scott witnessed firsthand how the iPads are used. “I could see for myself how they helped the children to cope.”

The YPA has set its fundraising goal for this year at $55,000. The specific items to be purchased are still pending approval, but will no doubt leave a lasting impact on the young patients at Miller Children’s.
therapeutic touch

Using hands alone, or with assistance from specialized equipment, therapy designed for individualized care provides the touch patients need to enhance their healing.
Never, Say Never
by Carol A. Beckerman

“Grandpa you’re my hero,” said Zoe as she watched her grandfather, Richard Willeford, demonstrate that he could not only stand, but once again walk.

A retired firefighter, Richard was in his sixth month of intensive therapy at the Transitional Rehabilitation Services (TRS) of Long Beach Memorial’s Ortho/Neuro/Rehab Institute. Richard’s journey to this point was fraught with ups and downs. After suffering several injuries on the job, he underwent a spinal fusion in 2007.

Then in June 2011, Richard found himself paralyzed from the belly button down.

After surgery to stabilize spinal fractures, he was introduced to Ann Vasile, MD, co-medical director of Acute Rehabilitation. Dr. Vasile recalled, “I was called in to consult and ‘do my thing,’ which included an examination, education and providing a treatment plan.” Patients usually ask if they will walk again and Dr. Vasile’s response is always the same, “Never, say never.”

This philosophy is echoed throughout the rooms and hallways of TRS.

The Long, Hard Road
For the first month after he learned he was paralyzed, Richard spent time receiving acute rehab care in the hospital. In mid-July after his discharge, Richard began his journey at TRS. At the start, he was only able to move his big toes, but before the end of the year he was demonstrating to Zoe and the rest of his family that, with the help of his walker, he could take a few steps.

Diana Owrey, PT, did physical therapy with Richard. Initially they focused on maintaining his muscle tone and keeping him stretched out. Then, as he regained some sensation in his legs, they moved to building back his strength and balance.

Richard Willeford is in good hands. Above, he works with occupational therapist Gera-Lyne Delfin-Hagerstrand, OTR, and physical therapist Diana Owrey, PT, at Transitional Rehabilitation Services.
Courage, Hard Work and the Therapeutic Touch

by Alex Kecskes

When she was just 6 months old, Hannah Swank was diagnosed with a rare brain disorder called Sturge-Weber syndrome.

“We didn’t know what she had when she was born,” said Hannah’s mother, Sarah. “Hannah started having seizures, which we were able to control with medication, right up until she was 2 years old.”

Panic set in as the seizures returned. “We couldn’t stop them,” recalled Sarah. “We rushed her to Miller Children’s Hospital Long Beach (MCHLB) where she stayed in the Pediatric Intensive Care Unit for two weeks.”

How to Survive with Only Half a Brain

After careful evaluation, Hannah was transferred to UCLA, where she underwent a hemispherectomy, a surgical procedure to basically disconnect the right side of her brain from the left. Hannah had to survive with only half a brain – the left side.

“Before the surgery, Hannah was walking and talking a bit, but after the surgery, it was like having an infant at home. She had to learn to eat, talk and walk all over again – even how to sit up and roll over.”

Aggressive Triple Therapies – Speech, Physical and Occupational

Between the ages of 2 and 3 years, Hannah began receiving speech, physical and occupational therapy (OT) at MCHLB. Her care was administered under the guidance of Amy Cassedy, MD. “Dr. Cassedy supervised Hannah’s therapies every step of the way,” said Sarah. “She regularly met with her team to monitor Hannah’s progress, making adjustments as needed. She also helped us when we needed prescriptions or letters written to the school.”
Hannah was diagnosed at 6 months with Sturge-Weber syndrome, a malformation of the veins surrounding the right side of the brain. She shows how courage and the right therapies can overcome virtually impossible odds.

Hannah continues to receive all three therapies at Miller Children’s. “Initially, we saw Hannah about three times per week for each therapy,” said Dr. Cassedy. Once Hannah started school, she also received speech therapy every week in a group setting. Hannah eventually doubled up on occupational therapy – once a week at the hospital and once a week at school. The therapies produced results, turning a once helpless girl into a physically able, growing young child. “I’ve been following Hannah for several years now,” said Dr. Cassedy. “She’s exceeding many of her teachers’ expectations and continues to surprise us.”

All therapists at Miller Children’s specialize in pediatric therapy. “Children have different therapy needs than adults,” said Dr. Cassedy. “In Hannah’s case, although she had such a large portion of the brain removed, her young age allowed her to establish new neuronal pathways to help re-learn some information. In older patients, these pathways are more established and not as easy to re-learn. Miller Children’s has state-of-the art facilities, and our therapists receive continuing education to keep their skills updated and to utilize new treatment modalities.”

Happy Birthday, Hannah
Hannah recently celebrated her 8th birthday. “She is doing fantastic and has undergone a drastic improvement,” said her mother. “She is now into karate and ballet (she was in a performance of “The Nutcracker”). She even learned to swim last summer and she loves it. She also plays soccer, baseball and she just got out of the basketball league,” exclaimed a proud mom. Some of these activities are with other special needs kids. Hannah is in a full inclusion classroom so she is with other children all day. She continues to get special help with a one-on-one aide, and assistance with reading and writing.

Hannah’s current speech therapist, Ria Wilson, ST, has been working closely with Hannah, her parents and her school’s speech therapist. “In some areas, she is at her grade and age level; in others, not quite,” said Wilson. “We’re working to develop her narrative speaking skills and her social skills.”

“You can’t stop her,” said Sarah. “She can talk and get her point across, but she needs to work on her articulation.” When it comes to collaboration with parents and school, Ria regards the MCHLB outpatient facilities as truly outstanding. “In some school districts you can go from September to June and not see your child’s speech therapist. At the MCHLB outpatient services on Termino Ave., next to Community Hospital Long Beach, parents can see their child’s speech therapist once a week.”

A Team Committed to Results
Dr. Cassedy will continue to follow Hannah. The determined 8-year-old still has a long road ahead of her, especially from an OT perspective. “She’ll have to learn to live in a two-handed world,” said Dr. Cassedy. “OT will continue to be an important therapy modality. Hannah’s left side – especially her arm and leg – is weaker. Her leg is recovering a bit faster than her arm in terms of strength and coordination. Our OT team is working to improve her upper extremity strength, coordination and fine motor skills.”

Sarah Swank can’t say enough about Miller Children’s. “We love the service we’ve been getting from Dr. Cassedy and her team,” said Sarah. “We truly enjoy working with them. Whenever we need something, they’re always there to help, be it letters to her school, or new ideas for working with Hannah. They’re great.”

Hannah loves to play team sports, especially soccer. She’ll even take on younger brother, Weston.
volunteer touch

Sharing the commodity of one’s time is a precious gift. When that time is spent raising funds to support the care received at Long Beach Memorial and Miller Children’s, it becomes priceless.
An auxiliary, by definition, is that helping hand, that extra measure of care, which makes a hospital, such as Miller Children’s Hospital Long Beach (MCHLB) stand above the rest. With the reopening of its new store in the lobby of the MCHLB Pavilion, the MCHLB Auxiliary – formerly known as the Children’s Memorial Hospital Auxiliary, during its first 66 years of dedicated service – felt it was time for a reinvention. With an updated name and ambitious goals to raise some serious funds, fiscal year 2011-12 was one of the Auxiliary’s best years to date.

With so many exciting changes for the group, the ladies thought it was a good idea to reintroduce a previous president, Margie Penny as their leader. Like so many of the hospital’s gracious volunteers, Margie has a special connection to MCHLB. When her daughter was 3 years old, she was diagnosed with bacterial meningitis. “We thought we were going to lose her,” Margie said. “I made a deal with God that I would pay it back if she made it.” Her daughter pulled through and is now grown with two children of her own. And Margie held up her end of the bargain. In 2000, Margie joined Linda Dilday, her best friend since their childhood days in Long Beach, as a member of the Auxiliary. This two-time president and continuing volunteer took on the challenge of making purchase decisions for both of the Auxiliary’s gift shops. “It’s a new but fun role for me,” Margie said. And it’s a role the group takes seriously. Each year, $450,000 in transactions goes through the stores, with all profits going back to the hospital. Balloons, cards, flowers and toys – all designed to make patients smile – also fund some of the programs that make children well.

In the last year, the gift shops raised $130,000 for pediatric patients.

The group’s annual fashion show was another big hit, with luxury auction items and a record-breaking $50,000 raised to benefit the Pediatric Emergency Department. To top it off, the group also chipped away at its $250,000 pledge for a Pediatric Hematology/Oncology Child Life playroom with a $50,000 contribution.

This year, Linda took over as Auxiliary president. “It is only fitting, and an honor, that I am able to follow Margie as president this year,” she said. Linda’s motto, “caring hearts surround me,” could not be truer. “It’s such a wonderful bunch of women,” she said. “They’re all an inspiration.” Linda plans to pick up where Margie left off, with even more money raised for the children. Like Margie, Linda’s connection to MCHLB is all in the family. Her four children were born at the hospital and her mother-in-law was one of the Auxiliary’s earliest members. “There’s always been a need for what we do,” she said.

If you’re interested in joining the ladies of the MCHLB Auxiliary, please contact Linda Dilday at 714.848.2987.
Getting Involved and Raising Money

by Donna Queza

Throughout the hospitals and community, volunteers give of themselves to ensure the very best for patients at Miller Children’s Hospital Long Beach and Long Beach Memorial. Fiscal year 2011-12 fundraisers were on the go – running, walking and reading for the patients.

27th Annual Champions Run for Life
A record 2,000 people came together in June to celebrate pediatric cancer and hematology patients at the 27th Annual Champions Run for Life torch run. Every year the Jonathan Jaques Children’s Cancer Center (JJCCC) sees more than 800 patients, so it’s no surprise that this event keeps getting bigger and better! One participant, Advisory Board member Michael Barr, who was a JJCCC patient more than 20 years ago, enjoyed his 10th run. Attendees run in honor of survivors and those who lost their battles, as well as the young patients who are fighting today. The event raised $350,000 thanks to community support and generous sponsors Ralphs and Food 4 Less.

Call Renae Furlow at 562.933.8604 to get involved with JJCCC.

Team Spirit Breast and Ovarian Cancer 10K Walk
People really love getting in the Spirit! The 2011 event welcomed a record 1,200 walkers who helped raise $305,000 – nearly $100,000 more than the year before. All proceeds from the Walk fund programs benefiting women treated for breast and ovarian cancers at MemorialCare’s Todd Cancer Institute. In addition to new faces, the walkers were treated to a brand new location at Alamitos Bay Landing with a home base designed by Choura Events. Following the event, attendees brunched in style at McKenna’s on the Bay, Buster’s, and Schooner or Later with healthy snacks provided by Ralphs.

Interested in getting involved with Team Spirit? Call Susie Garrison at 562.933.3500 for more details.

Memorial Women’s Hospital League
This is a league of extraordinary ladies on a mission to bring literacy to families served at the MemorialCare Center for Women. Each year, the League delivers more than 3,000 books to new moms. They also spread education through their monthly Stork Club, an orientation for expectant mothers who are planning to have their babies at the Center for Women.

If you’d like to work with the Women’s League, please call 562.933.4483.
Around Town – Recap
by Carol A. Beckerman

Making a significant impact at Long Beach Memorial and Miller Children’s Hospital Long Beach takes dedication, time and, most importantly, community support. That impact is made possible every year through the tremendous hard work and philanthropic spirit of community volunteers.

The following are some of the groups who raised thousands of dollars and donated countless hours for the benefit of others. Their generous support this past fiscal year has demonstrated what the power of philanthropy can do to touch the hearts and lives of those in the community in which we all live.
3-D Circumference measurement of mitral valve annulus

3-D of aortic valve

Modeling of mitral valve leaflets

3-D of tricuspid valve

3-D of aortic valve

These are uncertain economic times. Yet one thing is certain, the businesses that belong to the Partnerships in Excellence (PIE) program of the Memorial Medical Center Foundation remain committed to supporting Long Beach Memorial and Miller Children’s Hospital Long Beach. They have done so each and every year since their inception in 2002. In fact, they are determined to grow their impact.

During fiscal year 2011 – 2012, members of the PIE program gave $180,000 to help patients and physicians at the MemorialCare Heart and Vascular Institute (MHVI). Their gift purchased cutting edge 3-D echocardiography equipment, which uses ultrasound waves to view the heart in action.

Shaun Setty, MD, MFM medical director of congenital cardiovascular surgery, is appreciative. “A 3-D echocardiogram is useful in the diagnosis of different congenital cardiac anomalies. The echo capabilities we have are extraordinary and complementary to our other diagnostic tools. They can help diagnose precise heart valve abnormalities. With this technology, surgery can be better planned.”

Knowing that their involvement does make a difference, PIE members have pledged to raise $210,000 for the 2012 – 2013 fiscal year in support of technology for the MemorialCare Breast Center in the new Todd Cancer Pavilion.

The Partners invite you to join them in their ongoing quest to improve health care in our community. Learn more by contacting April Barnes at 562.933.1655 or abarnes@memorialcare.org.

Partnerships in Excellence
Applaud them. Support them. Join them.

(Photo, Far left) Demonstrating the 3-D echocardiograph purchased with support from the Partnerships in Excellence program is Clara Nakata, RDSc. Her willing “patient” is colleague Anthony Marquez, RDSc. The highly trained staff at the MemorialCare Heart and Vascular Institute is now able to obtain high resolution 3-D images, which assist with diagnosis, as well as surgical planning.
Everlasting Gifts

The Memorial Medical Center Foundation (MMCF) is fortunate to have 137 endowments and donor advised funds established by generous Philanthropic Friends and the MMCF Board of Directors. These funds have a combined value of more than $86 million with the income supporting clinical research, health care education, vital construction projects, patient care programs and cutting-edge medical equipment at Long Beach Memorial (LBM) and Miller Children’s Hospital Long Beach (MCHLB).

Your personal endowment with MMCF guarantees your everlasting legacy of giving. Provide support for your area of interest with gifts of cash, securities or other assets. Learn how you can make a difference for generations to come by contacting Jim Normandin at 562.933.1667, jnormandin@memorialcare.org or visit our website at www.lbmmcf.org for more information.

Endowments and Donor Advised Funds

Anonymous
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Jo Ann Arthur
Barbara K. Robinson Fund
For Breast Cancer Research
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Irene Baughey
Robert and Emilene Beamon
Christian and Naomi Bement
Bickerstaff Donor Advised Fund
Bickerstaff Family Foundation
Nelda Bird
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Gail Zotovich, RN

“The greatest use of life is to spend it for something that will outlast it.”
William James
Foundation, Corporate and Government Grants

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- The Ahmanson Foundation
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- The California Endowment
- Carl E. Wynn Foundation
- Cystic Fibrosis Foundation
- Dameron Family Foundation
- Earl B. and Loraine H. Miller Foundation
- Edwards LifeSciences
- Freeman E. Fairfield Foundation
- First 5 LA
- Hyundai Motor America
- The Kenneth T. and Eileen L. Norris Foundation
- Pediatrix Medical Group, Inc.
- Port of Long Beach
- Ronald McDonald House Charities – Southern California

This past year, the Earl B. and Loraine H. Miller Foundation made a grant in the amount of $2,760,000 to support several areas of pediatric care at MCHLB: the position of a medical director for Pediatric Hematology/Oncology and in the same area, the positions of a clinical research nurse and a certified research associate, and, as described on pages 10 and 11, the position of an educational psychologist for the Stramaski Children’s Developmental Center at Miller Children’s.

Isaiah and Robert Hatten are just two of the children helped through a Miller Foundation grant supporting the new position of an educational psychologist at the Stramaski Children’s Developmental Center.
The Ahmanson Foundation funded a grant of $300,000 to the MemorialCare Center for Women at MCHLB supporting the construction of a new Perinatal Special Care Unit. The Unit gives high-risk mothers with complicated pregnancies a positive and nurturing environment where physicians and health care professionals can identify health issues and solve problems to increase the number of healthy births. Annually, more than 2,000 high-risk women are admitted to the Unit, with a high percentage arriving as referrals from small community clinics and hospitals throughout the Southland.

Yolanda (with her daughter, Olivia) Perez was thrilled with the new MemorialCare Center for Women renovation, supported in part through a grant from The Ahmanson Foundation.

The Carl E. Wynn Foundation provided a grant of $10,000 to increase access for pediatric and adolescent cystic fibrosis patients and parents to receive genetic counseling services. Cystic fibrosis (CF) is an inherited disease but too often families are blindsided by a diagnosis of CF, never having prior knowledge of a family history. A genetic counselor helps newly diagnosed patients and families understand the genetic etiology of CF and the psychosocial aspects of being diagnosed with a genetic condition, which is a different conversation for every patient and family. Many patients and families continue to need genetic counseling as the disease progresses.

Eliezer Nussbaum, MD, cystic fibrosis (CF) patient Rachel Course and Julia Greenwald, MSW, appreciate the support given to the CF program by the Wynn Foundation.
Heartfelt Honorees

The Munzer Family Award
The Munzer Family Award recognizes a physician for his or her excellence in teaching and research. We are proud to recognize Jeffrey S. Luther, MD, as the 2012 recipient.

Dr. Luther joined Long Beach Memorial (LBM) in 1993 as a full-time faculty member and director of Clinical Services, and in 1998 he became the associate director of the Family Medicine Residency Training Program. Dr. Luther also serves as vice chair of LBM's Department of Family Medicine and chair of General Pediatric Care Line at Miller Children's Hospital Long Beach. He chose family medicine for the opportunity to work with patients and their families, from childhood to end-of-life issues, and everything in between. When he is not teaching the next generation of family physicians or tending to his patients, he enjoys music, sports (especially soccer), cooking and traveling.

Dr. Luther was singled out by a blue ribbon committee of his peers for this esteemed honor.

2012 Munzer Family Award for Lifetime Achievement
We are proud to present the first Munzer Family Award for Lifetime Achievement to Myrvin H. Ellestad, MD. Dr. Ellestad is recognized for his groundbreaking work in cardiology. He has devoted 52 years of service, first in the cardiology program at Seaside Hospital, and then later at Long Beach Memorial. His career has been dedicated to improving the diagnosis and treatment of heart disease, as well as teaching medical students, residents and fellows.

The Murphy Distinguished Service Volunteer Award
The Murphy Distinguished Service Volunteer Award was created by the Murphy Family in 1999 and funded with their philanthropic gift through the Memorial Medical Center Foundation. This award recognizes two service volunteers who exemplify “compassion, commitment and care” at LBM.

The 2012 Recipients:
Arreatha Mobley was nominated by her colleagues for her kindness and care. Her nomination letter stated: “As a volunteer for 35 years, Arreatha always has a smile on her face and has compassion for everyone – she truly deserves this award.”

Mike Newton was selected by his colleagues for his dedication and cheerful spirit. His nomination letter stated: “Mike is an inspiration to us all. He is a wonderful person and an asset to our volunteer group because of his positivity and exceptional work.”

2012 Munzer Family Award for Lifetime Achievement
We are proud to present the first Munzer Family Award for Lifetime Achievement to Myrvin H. Ellestad, MD. Dr. Ellestad is recognized for his groundbreaking work in cardiology. He has devoted 52 years of service, first in the cardiology program at Seaside Hospital, and then later at Long Beach Memorial. His career has been dedicated to improving the diagnosis and treatment of heart disease, as well as teaching medical students, residents and fellows.

William S. Cheney, MD Memorial Award
Established by Mrs. Julia Cheney, this award is given annually in memory of Long Beach Memorial’s prominent and well-loved surgeon, Dr. William S. Cheney. It acknowledges the most outstanding surgical resident for exceptional skills, medical leadership, mentoring abilities and a caring patient attitude. The 2012 award has been presented to Christopher P. Washington, MD (not shown).

The 2012 Recipients:
Arreatha Mobley was nominated by her colleagues for her kindness and care. Her nomination letter stated: “As a volunteer for 35 years, Arreatha always has a smile on her face and has compassion for everyone – she truly deserves this award.”

Mike Newton was selected by his colleagues for his dedication and cheerful spirit. His nomination letter stated: “Mike is an inspiration to us all. He is a wonderful person and an asset to our volunteer group because of his positivity and exceptional work.”
Employee Giving 2011  Thank you to all employees that gave back to patients and families.

Generosity begins at home. And the employees of Long Beach Memorial (LBM) and Miller Children’s Hospital Long Beach (MCHLB) are no exception.

Numbering more than 5,000, they are a community of dedicated professionals from the ground floor to the 7th floor, and beyond the main campus to outlying outpatient facilities, satellite laboratories, clinics and offices. Since philanthropy is defined as the “love of humankind,” it is no surprise that in 2011 – 2012 more than 32 percent of all staff committed to give through payroll deduction. The Pathology Department leads the way and inspires other departments to commit their support.

Next year the goal is to involve at least 40 percent of staff in raising $300,000 in support of patient care programs, capital equipment, medical education, clinical research and campus expansion at LBM and MCHLB.

Representing the philanthropists from the Pathology Department are Rachel Gahafer, Trisha Van Buren and Dyna Davis. They invite their fellow employees to jump on the bandwagon.
# Statement of Activities and Changes in Net Assets

## Year ended June 30, 2012

<table>
<thead>
<tr>
<th></th>
<th>Unrestricted</th>
<th>Temporarily Restricted</th>
<th>Permanently Restricted</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Revenues, gains and other support</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Gifts, grants and bequests</td>
<td>$3,900,000</td>
<td>$2,512,000</td>
<td>$2,455,000</td>
<td>$8,867,000</td>
</tr>
<tr>
<td>Special events</td>
<td>1,561,000</td>
<td>-</td>
<td>-</td>
<td>1,561,000</td>
</tr>
<tr>
<td>Investment income</td>
<td>2,082,000</td>
<td>1,487,000</td>
<td>-</td>
<td>3,569,000</td>
</tr>
<tr>
<td>Unrealized gains on investments</td>
<td>(1,717,000)</td>
<td>(3,479,000)</td>
<td>(76,000)</td>
<td>(5,272,000)</td>
</tr>
<tr>
<td>Other income</td>
<td>155,000</td>
<td>7,000</td>
<td>-</td>
<td>162,000</td>
</tr>
<tr>
<td>Net assets released from restrictions</td>
<td>3,685,000</td>
<td>(4,596,000)</td>
<td>911,000</td>
<td>-</td>
</tr>
<tr>
<td>Change in value of split-interest agreements</td>
<td>-</td>
<td>1,151,000</td>
<td>(232,000)</td>
<td>919,000</td>
</tr>
<tr>
<td><strong>Total revenues, gains and other support</strong></td>
<td>9,666,000</td>
<td>(2,918,000)</td>
<td>3,058,000</td>
<td>9,806,000</td>
</tr>
</tbody>
</table>

|                      |              |                        |                        |            |
| **Expenses**         |              |                        |                        |            |
| General and administrative | 4,679,000   | -                      | -                      | 4,679,000  |
| **Patient care services/research/education/medical equipment expended for Long Beach Memorial and Miller Children’s** |              |                        |            |            |
| General and administrative | 6,193,000   | -                      | -                      | 6,193,000  |
| **Total expenses**   | 10,872,000   | -                      | -                      | 10,872,000 |
| **Increase in net assets** | (1,206,000) | (2,918,000)            | 3,058,000              | (1,066,000)|

|                      |              |                        |                        |            |
| **Net assets**       |              |                        |                        |            |
| Beginning of year    | 31,573,000   | 72,297,000             | 34,913,000             | 138,783,000|
| End of year          | $30,367,000  | $69,379,000            | $37,971,000            | $137,717,000|

Board and staff fiduciary responsibility is enhanced by the following:

**INVESTMENT MANAGERS**
- BlackRock - global allocation
- Calamos - global equity
- Dodge & Cox - global equity
- GMO - global allocation
- PIMCO - fixed income and global allocation
- Pointer Offshore - alternative strategies
- Silver Creek - alternative strategies
- UBS Trumbull - private real estate
- Wellington DIH - tactical real return

**INVESTMENT CONSULTANTS**
- Highland Associates

**Finance Committee** establishes financial policies; approves and forwards to the Board all grant and financial requests and provides budget and investment oversight.

**Investment Committee** is a standing sub-committee of Finance to make investment policy; engage, monitor and dismiss, as needed, investment managers and consultants. Makes recommendations to Finance Committee.

**Finance Committee**
- Peter Ridder, Chair
- William Durkee
- James Emslie
- David Erickson
- John Fielder
- Roger Freeman, MD
- Charles Fullerton
- R. Whitney Latimer
- Gary Van Arnam
- Christine Walker

**Investment Committee**
- R. Whitney Latimer, Chair
- William Durkee
- James Emslie
- John Fielder
- Charles Fullerton
- Kathy Lingle
- Tom Shadden
- Gary Van Arnam
- Joe Zucchero
Balance Sheet

Year ended June 30, 2012

<table>
<thead>
<tr>
<th>Assets</th>
<th>2012</th>
</tr>
</thead>
<tbody>
<tr>
<td>Current assets</td>
<td></td>
</tr>
<tr>
<td>Cash and cash equivalents</td>
<td>$4,279,000</td>
</tr>
<tr>
<td>Current portion of pledges receivable, net</td>
<td>$3,534,000</td>
</tr>
<tr>
<td>Investments sales receivable</td>
<td>$229,000</td>
</tr>
<tr>
<td>Other assets</td>
<td>$3,172,000</td>
</tr>
<tr>
<td>Total current assets</td>
<td>$11,214,000</td>
</tr>
<tr>
<td>Investments</td>
<td></td>
</tr>
<tr>
<td>Split-interest agreement assets</td>
<td>$69,326,000</td>
</tr>
<tr>
<td>Pledges receivable, less current portion, net</td>
<td>$30,817,000</td>
</tr>
<tr>
<td>Restricted investments</td>
<td>$1,327,000</td>
</tr>
<tr>
<td>Other assets, restricted</td>
<td>$4,886,000</td>
</tr>
<tr>
<td>Total assets</td>
<td>$160,848,000</td>
</tr>
</tbody>
</table>

| Liabilities and net assets | |
| Accounts payable | $300,000 |
| Due to affiliates | $1,487,000 |
| Notes payable | $387,000 |
| Current portion of split-interest agreement liabilities | $3,354,000 |
| Total current liabilities | $5,528,000 |
| Split-interest agreement liabilities, less current portion | $17,603,000 |
| Total liabilities | $23,131,000 |
| Net assets | |
| Unrestricted | $30,367,000 |
| Temporarily restricted | $69,379,000 |
| Permanently restricted | $37,971,000 |
| Total net assets | $137,717,000 |
| Total liabilities and net assets | $160,848,000 |

Memorial Medical Center Foundation

Stewardship Report

Thanks again to the many Philanthropic Friends who help physicians, nurses, health care professionals and support staff provide “that extra measure of care” for patients at Long Beach Memorial and Miller Children’s Hospital Long Beach.

Distribution of Gifts and Income
July 1, 2011 - June 30, 2012 $14.2 million
- Clinical research, health care education and patient care initiatives at Long Beach Memorial and Miller Children’s Hospital $6.2 million
- Gift development and trust administration (includes the management of 214 planned charitable gifts, 146 endowments and 292 restricted funds) $4 million
- Income to Philanthropic Friends and/or their heirs (charitable trusts and gift annuities) $2 million
- Building and equipment $2 million

Allocation of Total Assets
As of June 30, 2012 $161 million
- Gifts restricted by Philanthropic Friends $69 million
- Endowments for our Centers of Excellence $37 million
- Unrestricted funds (where need is greatest) $30 million
- Charitable trusts and gift annuities from Philanthropic Friends with future designations for our Centers of Excellence $25 million

Annual Sources of Income

2012
- Gifts & Grants $10 million
- Interest & Dividends $4 million

2011
- Gifts & Grants $13 million
- Interest & Dividends $3 million
Consolidated Balance Sheet
Year ended June 30, 2012

<table>
<thead>
<tr>
<th>Assets</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Current assets</td>
<td></td>
</tr>
<tr>
<td>Cash and cash equivalents</td>
<td>$ 4,345,000</td>
</tr>
<tr>
<td>Patient accounts receivable (less allowance for uncollectable accounts of $62,968,000 in 2011 and $52,451,000 in 2010)</td>
<td>259,633,000</td>
</tr>
<tr>
<td>Due from affiliates</td>
<td>166,011,000</td>
</tr>
<tr>
<td>Other receivables</td>
<td>17,679,000</td>
</tr>
<tr>
<td>Other current assets</td>
<td>14,059,000</td>
</tr>
<tr>
<td>Other current assets limited as to use</td>
<td>2,718,000</td>
</tr>
<tr>
<td>Total current assets</td>
<td>464,445,000</td>
</tr>
<tr>
<td>Investments</td>
<td>69,326,000</td>
</tr>
<tr>
<td>Property and equipment, net</td>
<td>329,762,000</td>
</tr>
<tr>
<td>Restricted investments</td>
<td>43,278,000</td>
</tr>
<tr>
<td>Restricted assets</td>
<td>4,886,000</td>
</tr>
<tr>
<td>Split-interest agreement investments</td>
<td>26,803,000</td>
</tr>
<tr>
<td>Split-interest agreement assets</td>
<td>4,014,000</td>
</tr>
<tr>
<td>Other assets</td>
<td>14,603,000</td>
</tr>
<tr>
<td>Total assets</td>
<td>957,117,000</td>
</tr>
</tbody>
</table>

| Liabilities and net assets                  |       |
| Current liabilities:                        |       |
| Accounts payable and accrued liabilities    | $143,299,000 |
| Estimated third-party payor settlements, net| 2,697,000 |
| Current maturities of notes payable         | 387,000 |
| Current portion of split-interest agreement liabilities | 3,354,000 |
| Other accrued liabilities                   | 27,041,000 |
| Total current liabilities                   | 176,778,000 |
| Split-interest agreement liabilities, less current portion | 17,603,000 |
| Other long-term liabilities                 | 31,050,000 |
| Total liabilities                           | 225,431,000 |
| Net assets                                  |       |
| Unrestricted                                | 621,043,000 |
| Temporarily restricted                      | 72,672,000 |
| Permanently restricted                      | 37,971,000 |
| Total net assets                            | 731,686,000 |
| Total liabilities and net assets            | $957,117,000 |

Consolidated Statement of Income
Year ended June 30, 2012

<table>
<thead>
<tr>
<th>Unrestricted revenues, gains and other support</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Patient service revenues</td>
<td>$ 947,780,000</td>
</tr>
<tr>
<td>Less: Provision for doubtful accounts</td>
<td>(62,168,000)</td>
</tr>
<tr>
<td>Net patient service revenues</td>
<td>885,612,000</td>
</tr>
<tr>
<td>Capitation premium revenues</td>
<td>27,233,000</td>
</tr>
<tr>
<td>Other operating revenues</td>
<td>71,421,000</td>
</tr>
<tr>
<td>Net assets released from restrictions</td>
<td>4,046,000</td>
</tr>
<tr>
<td>Total unrestricted operating revenues and other support</td>
<td>988,312,000</td>
</tr>
</tbody>
</table>

| Operating expenses                             |       |
| Salaries, wages and benefits                   | 450,671,000 |
| Medical and other supplies                     | 139,998,000 |
| Purchased services and other                   | 303,197,000 |
| Capitation claims expense                      | 15,286,000 |
| Depreciation and amortization                  | 36,679,000 |
| Total operating expenses                       | 945,831,000 |
| Excess of operating revenues over operating expenses | $ 42,481,000 |
Community Benefits Report
Long Beach Memorial and Miller Children’s Hospital Long Beach
Give Back

Long Beach Memorial (LBM), Miller Children’s Hospital Long Beach (MCHLB) and Community Hospital Long Beach (CHLB) are not-for-profit health care facilities that provide “community benefit,” as well as medical services for all ages. Community benefit is a planned, well organized, managed and measured way in which to meet identified community health needs.

In fiscal year 2011 – 2012, LBM/MCHLB/CHLB provided unreimbursed (uncompensated) services and programs with an estimated value of $71,379,000. This includes charity care, complimentary educational programs for the public, research protocols and community service and was delivered through 144 programs throughout the community.

One of the key service areas this past year was behavioral health and was delivered by CHLB. In a recent Long Beach Health Needs Assessment behavioral health was found to be among the top six health issues facing every age group (children, teens, young adults, adults and the elderly). Asthma, diabetes and cancer care continue to be the top issues.

This past year also found the hospitals’ staff involved in issues of population health. This was seen most directly through the purchase of a federally qualified health center managed by The Children’s Clinic.

Reaching out to the community to improve the lives of so many, Long Beach Memorial, Miller Children’s and Community Hospital touched the lives of 206,954 residents through community benefit programs.

<table>
<thead>
<tr>
<th>Total Community Benefits</th>
<th>July 1, 2011 – June 30, 2012</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Charity care</td>
<td>16,958,000</td>
</tr>
<tr>
<td>2/3. Unpaid costs of government programs</td>
<td>20,090,000</td>
</tr>
<tr>
<td>4. Education and research</td>
<td>10,921,573</td>
</tr>
<tr>
<td>5. Other for the broader community</td>
<td>23,409,427</td>
</tr>
<tr>
<td>$71,379,000 Total</td>
<td></td>
</tr>
</tbody>
</table>

1. Charity care includes traditional charity care write-offs to eligible patients at reduced or no cost based upon the individual patient’s financial situation.

2/3. Unpaid costs of public programs include the difference between costs to provide a service and the rate at which the hospital is reimbursed. Estimated costs are base on the overall hospital cost to charge ratio. Also includes other payors for which the hospital receives little or no reimbursement (county indigent).

4. Costs related to the medical education programs and medical research that the hospital sponsors.

5. Includes many non-billed programs such as community education, screening, support groups, clinics and other self-help groups.
Honor Roll
Gifts of $10,000 and above from July 1, 2011, through June 30, 2012

OUR THANKS AND APPRECIATION
Philanthropic Friends listed in the following Honor Roll gave gifts to help provide “that extra measure of care” at Long Beach Memorial or Miller Children’s Hospital Long Beach to support patient programs, education, clinical research, medical equipment or capital expansion. Some gifts are given in memory of a special person and/or are restricted for a specific institute, center, clinic, department or item. Gifts may be given in cash, securities, real estate or through a Will or Trust.

Thank You
To ensure tax deductibility, checks should be made payable to Memorial Medical Center Foundation, the 501(c)(3) tax-exempt organization under the U.S. Internal Revenue Code (federal ID 95-6105984) authorized to receive philanthropic gifts and grants for all entities of LBM or MCHLB. A notation may state “unrestricted" or any ”specific restriction” to an institute, hospital, center, department, program or item at either hospital. For information, call 562.933.4483 or give online at www.lbmmcf.org.

Ranjit Ahluwalia
The Ahmanson Foundation
American Career College
Ancon Marine, Inc.
Andre Sobel River of Life Foundation
Bequest of Jo Anne Arthur
Astro Aluminum Treating Company, Inc.
Jill Atterbury
Robert and Debbie Autrey
The Baker Family Foundation
Bequest of Irene Baughey
Beckstrand Cancer Foundation
Bickerstaff Family Foundation
BP Corporation North America, Inc.
The California Endowment
Children’s Memorial Hospital Auxiliary
Continental Development Corporation
Gary and Judith Cooper
County of Los Angeles
Cystic Fibrosis Foundation
Bequest of Lorraine M. D’Abate
Bequest of Nicholas Dallas
Dameron Family Foundation
Lynne and Jay Davis
The Dodson Family and Corridor Recycling
Downtown Long Beach Associates, Inc.
Edwards LifeSciences
David and Su Erickson
Venner M. Farley, EdD, RN, and Dolores Perretta
Farmers & Merchants Bank
Farmers & Merchants Trust Company
First 5 LA
FreeConferenceCall.com
Grand Prix Foundation of Long Beach
Drs. Charles and Paula Groncy
John W. Hancock Family Foundation
George W. Harben
Harris & Ruth Painting Contracting, Inc.
Heritage Foods
Bequest of Fred Hershner
Hoag Foundation
The Roxanna Todd Hodges Foundation
Hubert Houssels Trust
Hyundai Motor America
Carlene M. Jaques
Johnson & Johnson Family of Companies
K.V. Mart Co.
Bequest of Milton M. Kaplan
Arthur S. Klimeck
Supervisor Don Knabe
and Julie Knabe
Seth A. Kogan, MD, Family Foundations
Kohl’s
Dan and Cathy Kopy
R. Whitney Latimer
Robert and NancyAnn Latimer
The Cherese Mari Laulhere Foundation
Geraldine R. Lee
Dena F. Levinstein Trust
Long Beach Memorial Pathology
Medical Group
McKenna’s on the Bay
Bequest of H. Jack Meany
MedAssets Supply Chain Systems
Earl B. and Loraine H. Miller Foundation
Bettye Mitchell
Daphne D. Munzer
Rudolph J. and Daphne A. Munzer Foundation
Michael P. Nageotte, MD, and Monica Leff, MD
Bichlien Nguyen, MD, and Than Nguyen
Donald F. Nicholson
The Kenneth T. and Eileen L. Norris Foundation
Bequest of Edward Nowland
P2S Engineering, Inc.
Robert and Karole Pando
Dr. and Mrs. Ramesh Patel
Payless Foods
Ruth A. Peck
Pediatrics Medical Group, Inc.
Port of Long Beach
Gus and Beth Quinonez
Ralphs/Food 4 Less
Bequest of Frederick Ratzlaff
Reep Family Foundation, Inc.
Peter and Cathy Ridder
Ronald McDonald House Charities – Southern California
Katherine E. Schweigert
The Shadden Family Foundation
Sodexo
Southern California Edison Foundation
St. Baldrick’s Foundation
Stacked Restaurant
Starlight Children’s Foundation
Steel Magnolias of the Stramski Center
Stericycle, Inc.
Amanda Termuhlen, MD
Tichenor Support Foundation
Doug and Nancy Todd
William H. Todd, MD
Steven and Donna Tomlinson
Toyota Motor Sales, USA, Inc.
Turner Construction Co.
Moe Vazin
Vons Foundation
Robert and Jan Waestman
Laura E. Walker
Kenjohn* and Jacqueline Wang
Patricia Lee Wang Foundation
Ute Waterman
Wells Fargo Bank, N.A.
Carl E. Wynn Foundation
Terry and Laura Wynne
Abram and Kimberly Yap
* Deceased

“I don’t think you ever stop giving. I really don’t. I think it’s an ongoing process. And it’s not just about being able to write a check. It’s being able to touch somebody’s life.” Oprah Winfrey
Memorial Seaside Legacy Circle (MSLC)

Honoring Philanthropic Friends who have expressed their philanthropy by funding life income gifts (charitable trusts, gift annuities, pooled income funds) and/or have made bequests to the Memorial Medical Center Foundation (MMCF) through their Wills or Trusts.

Join the Memorial Seaside Legacy Circle and contact MMCF President James Normandin at 562.933.1667 or jnormandin@memorialcare.org. For more information visit www.ibmmcf.org.

<table>
<thead>
<tr>
<th>Seaside Legacy Members</th>
</tr>
</thead>
<tbody>
<tr>
<td>Benny Ahluwalia</td>
</tr>
<tr>
<td>Robert D. Alban, Atty.</td>
</tr>
<tr>
<td>Robert H. Anderson</td>
</tr>
<tr>
<td>Helen Apostle</td>
</tr>
<tr>
<td>Jill Atterbury</td>
</tr>
<tr>
<td>John P. Avery</td>
</tr>
<tr>
<td>Mrs. Henrietta Babiccock</td>
</tr>
<tr>
<td>Elizabeth Baker</td>
</tr>
<tr>
<td>Terry and Dianne Barkis</td>
</tr>
<tr>
<td>Mr. and Mrs. William F. Bealer Jr.</td>
</tr>
<tr>
<td>Janelle Beamen</td>
</tr>
<tr>
<td>Mr. and Mrs. Wilhelm Beer</td>
</tr>
<tr>
<td>Bob C. Benson</td>
</tr>
<tr>
<td>Clyde and Patricia Bergendahl</td>
</tr>
<tr>
<td>Bernard and Lois Beskind</td>
</tr>
<tr>
<td>Joan Beyers</td>
</tr>
<tr>
<td>Lawrence and Theresa Birtja</td>
</tr>
<tr>
<td>Marjeanne Blinn</td>
</tr>
<tr>
<td>Stuart and Frances Borden</td>
</tr>
<tr>
<td>Warren H. Bossert</td>
</tr>
<tr>
<td>Margaret Brainard</td>
</tr>
<tr>
<td>Terry and Sharon Bridges</td>
</tr>
<tr>
<td>Merilyn D. Brisson</td>
</tr>
<tr>
<td>Chuck and Carolyn Brockman</td>
</tr>
<tr>
<td>Anne C. Brown</td>
</tr>
<tr>
<td>Lorraine Brown</td>
</tr>
<tr>
<td>Darrel Brownell</td>
</tr>
<tr>
<td>Marty Burbank, Esq. and</td>
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<td>Dr. Seon Burbank</td>
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<td>Henry E. and Ruth Burwash</td>
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<td>Karen Butler</td>
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<td>Woody and Lori Carter</td>
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<td>Betty Cash</td>
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<td>Mr. and Mrs. Leonard J. Cavanaugh</td>
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<td>Ron M. Childers</td>
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<td>Denise Clayton-Leonard</td>
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<td>Mr. and Mrs. Bradley Comp</td>
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<th>MSLC Members as of June 30, 2012</th>
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2011 - 2012 ANNUAL REPORT

This Annual Report is published to provide information about the not-for-profit Long Beach Memorial, Miller Children's Hospital Long Beach and the Memorial Medical Center Foundation for philanthropic friends, community volunteers, patients, medical staff, employees and visitors. It highlights programs and patients who have benefited from philanthropic gifts, grants and bequests given through the Memorial Medical Center Foundation, a 501(c)(3) charitable organization, federal I.D. 95-6105984. Long Beach Memorial is a 460-bed general acute care medical center and rehabilitation facility and Miller Children's Hospital Long Beach is a 308-bed acute care hospital with pediatric and maternal services. Both are teaching and research facilities, committed to providing high-quality, cost-effective patient care and are members of the MemorialCare® Healthcare System and accredited by The Joint Commission.

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Miller Children's Hospital Long Beach
Community Hospital Long Beach
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Fifth Annual Dancing for Our Stars
Benefiting the Todd Cancer Institute at Long Beach Memorial

Saturday, February 2, 2013
Hyatt Regency Resort and Spa Grand Ballroom
21500 Pacific Coast Highway
Huntington Beach, CA 92648

For more information contact Susie Garrison at sgarrison@memorialcare.org or 562.933.1955